

# SOUTH SHORE & METRO WEST SENIOR NEWS



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For Boomers and Beyond – Distributed to 45 towns including Dedham, Dorchester, Norwood, Westwood, and Needham, Massachusetts

## A NEW DAY IN SCITUATE as Long-Awaited Senior Center Opens its Doors



Members of the Scituate Public Building Commission Larry Guilmette, Linda Hayes (COA Director), Stephen Shea, Carl Campagna, and Stephanie Holland look on as COA Board Chair JD Miller prepares to cut the ribbon.

Cover story on page 6



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# Planning for the Care of a Loved One with a Disability or Special Needs



By Joan McGrath

Medical advances through the years have resulted in an increase in life expectancy. Recent studies show that individuals now live to approximately 80 years and older. As people live longer, the risk of developing physical and/or cognitive issues increases. These issues can result in difficulties in daily functioning, decision-making, and an increased need for assistance with care, decisions, and support.

You may be the family member and primary caregiver of someone with a long-term disability or newly developed disability, and, unexpectedly, you can no longer care for them in the way you had hoped. Therefore, financial planning is essential to the future of your loved one because without proper planning, this person may lose their public benefits or deplete their assets.

In 1993, President Clinton signed the Omnibus Reconciliation Act (OBRA-93). In this act, there is a regulation that allows individuals with a disability on public benefits, or in need of pub-

lic benefits, to be allowed to establish a Special Needs Trust. The key is that this trust would not be counted as an asset, allowing the individual to maintain their public benefits, such as SSI and Medicaid, or to become eligible for these benefits.

There are several different types of Special Needs Trusts, including a First-Party Trust (d4A), Third-Party Stand-Alone Trust, or a Pooled Trust (d4C). These trusts are designed to allow private funds to be preserved for the sole benefit of a person with a mental, physical, or developmental disability and to protect their eligibility for public benefits (SSI, Medicaid, etc.).

A First-Party Trust is funded with the individual's own money or assets. This type of trust is a Medicaid-payback trust, meaning that at the end of life, Medicaid is entitled to be paid back for anything that they paid out during the individual's lifetime.

A Third-Party Trust is a trust that someone else (a family member, friend, etc.) funds for the benefit of the individual. This does not have the Medicaid payback rule and the donors will determine where the funds go at the end of life. A Third-Party Trust also has the option to create a Future-Funded account, which can be done through Estate Planning. The trust could be left

to the beneficiary through proceeds from life insurance or other assets.

A Pooled Trust can be funded with the individual's own assets at any age; the difference being that these funds are pooled for investment purposes only. Each beneficiary has their own sub-account within the pool. For individuals over the age of 65, the OBRA regulations require that a Pooled Special Needs Trust is the only option and that the Trustee is a nonprofit organization.

The funds in a Special Needs Trust are meant to supplement the needs of the beneficiary and enhance their quality of life without negatively impacting their benefits. The Trustee has specific, lawful disbursement guidelines to which they must adhere. Examples of allowable expenses include:

- Medical and dental (if not covered)
- Clothing
- Phone
- Internet
- Assistive Technologies
- Travel/Transportation
- Music/Pet therapy

Examples of prohibited expenses include:

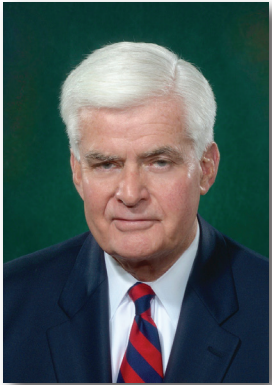
- Gambling
- Alcohol
- Pornography
- Guns
- Gifts

*Planning for Care... continued on p.19*

# HOME EQUITY WEALTH MANAGEMENT

## Mortgage Payment Forbearance Is Ending – What To Do?

Older homeowners have an advantage. They can eliminate the obligation to make monthly mortgage payments permanently.



By George Downey

**BRAINTREE** - In response to the financial upheavals caused by the COVID-19 pandemic, the 2020 federal CARE Act authorized banks to grant qualified borrowers temporary relief from the obligation to make monthly mortgage payments up to six months. This is not debt forgiveness, as the unpaid amounts are paid later through modifications to the loan terms. However, this payment pardon helped many borrowers cope with unexpected financial consequences.

Earlier this year, some lenders offered borrowers short-term 3-month extensions. Nevertheless, the end is coming this year. Loan terms will be modified, and payment obligations will resume.

### Reverse Mortgages Provide Permanent Relief from Mortgage Payments

Senior homeowners (62 and older) may be eligible to refinance to a reverse mortgage that defers all payment obligations permanently. No repayment is required until the homeowner sells or no longer resides in the property. Further, additional funds or a line of credit will be made available for any surplus they may be eligible for.

The unique terms of reverse mortgages were developed to meet needs of aging homeowners, who do not want to sell, but wish to remain in their home to age-in-place.

The HUD/FHA insured Home Equity Conversion Mortgage (HECM) reverse mortgage is the dominant program nationally, accounting for over 95% of all reverse mortgage programs. HECM property value limits were increased from \$765,600 to \$822,375 effective January 1, 2021. And higher valued properties may be eligible for greater funding by new proprietary (jumbo) reverse mortgage programs.

### Massachusetts – Jumbo Reverse Mortgages Now Available

The Massachusetts Division of Banks recently approved new proprietary (jumbo) reverse mortgages for MA home and condominium owners. These programs provide loan amounts up to \$1,500,000, with terms substantially similar to the federally insured HECM, with low and no cost options, and without the need for FHA project approval.

### Massachusetts Condominiums – New Developments

Until recently, reverse mortgage financing was only available to MA condominium projects that were fully approved by FHA. Consequently, only 8 percent of all MA condo projects received approval, leaving 92 percent ineligible. This year, two significant changes occurred expanding and simplifying reverse mortgage financing for MA condo owners.

1. FHA Single Unit Approval. This process enables HECM reverse mortgage financing with simplified and limited FHA approval required – eliminates FHA full project approval.
2. New proprietary (jumbo) reverse mortgages approved by the MA Division of Banks. Now reverse mortgage loan amounts up to \$1,500,000 are enabled without FHA approval.

### Reverse Mortgage Benefits

- No monthly payment obligations – prepayments are permitted without penalty but not required. Monthly charges are deferred and accrue.
- Credit line growth – the undrawn balance of the credit line grows (compounding monthly) at the same rate charged on funds borrowed.
- No maturity date – repayment not required until no borrower resides in the property.
- Non-Recourse loan – neither borrowers nor heirs incur personal liability. Repayment of loan balance can never exceed the property value at the time of repayment. If loan balance exceeds property value at time of repayment, the lender, borrower(s), and heirs are not responsible for the deficiency as they are protected by FHA insurance.
- Access to funds and loan terms are guaranteed – cannot be frozen or cancelled as long as borrower obligations are maintained.

### Reverse Mortgage Obligations – Limited To:

1. Keeping real estate taxes, insurance, and property charges current
2. Providing basic home maintenance
3. Living in the property as primary residence

### LEARN MORE

While reverse mortgages provide unique and valuable benefits, they are not a suitable solution for everyone.

Get the facts and determine if, or how, the various methods to use housing wealth might work for you now or later. For more information on reverse mortgages, visit the National Reverse Mortgage Lenders Association website [www.ReverseMortgage.org](http://www.ReverseMortgage.org), or contact a Certified Reverse Mortgage Professional (CRMP) for a private consultation.

**About the Author.** George Downey CRMP (NMLS 10239) is the founder of Harbor Mortgage Solutions, Inc., Braintree, MA, a mortgage broker licensed in Massachusetts (MB 2846), Rhode Island (20041821LB), NMLS #2846. Questions and comments are welcome. Mr. Downey can be reached at (781) 843-5553, or email: [GDowney@HarborMortgage.com](mailto:GDowney@HarborMortgage.com) ∞



## COVID-19 Funeral Assistance Help Line

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# Aging with Sass & Class

By Loretta LaRoche

## Common Sense

When I was growing up, people put black wreaths on their doors and wore black arm bands to show the public they had lost a family member. I suggest we all do that to mourn the loss of common sense. Over the past twenty years I have witnessed the increasing demise of a behavioral model that my generation had drilled into them on a daily basis. We were told to mind your manners, pick up your clothes, if you use something put it back, when you visit someone be a good guest and ask if you can help. Teachers were not reprimanded for giving a child a bad grade if they did not perform up to speed by parents who felt their child was akin to Einstein. Nor were sports an obsession that had nine-year-olds going to boot camp for pitching. Games were fun and the outdoors were for exploring, and creating imaginary worlds. Parents didn't need to give their kids snacks and bottled water if they were outside longer than a couple of hours. In fact, I remember drinking out of the hose in the back yard. I never got the plague, warts or hives from the hose.

Most kids knew their place. You just didn't try to get your way by jumping up and down or repeating yourself over and over like a parrot. My mother and many others I knew just gave you a look. I have heard parents today say they have to give their child what they want because their self-esteem might be compromised when they grow up! What ever happened to the word "brat?" If someone always gets what they want, they are a brat and will turn into a self-absorbed adult with no concern for others. Common sense dictates that in order to live in a civilized society we need to be aware of others and their needs as well. But, let's face it, if a kid doesn't get what he wants today he can make a YouTube video of his parents chastising him and get a petition signed to have his parents sent to a Gulag in Russia.

You can sue anyone for anything today as well. We have become a litigious society ready and able to blame someone for the smallest infractions. We can all remember how a woman who spilled hot coffee in her lap was awarded a huge settlement. Isn't coffee supposed to be hot?

Unfortunately, we will be at the mercy of what I describe as "the death of the obvious" until we decide to embrace responsibility, reason, accountability, and the knowledge that we are a part of the universe, not the center.

**About the Author:** Loretta LaRoche is an internationally acclaimed stress expert, humorist, author, speaker, and star of seven one-woman television specials airing on 80 PBS stations across the country. She has spoken internationally to widely diverse clients such as NASA, The New York Times, Microsoft, and a host of other Fortune 500 companies, hospitals and organizations. She has shared the stage with former Presidents Bill Clinton and George Bush, Arianna Huffington, Anthony Robbins, Gloria Steinem, Laura Bush, Mia Farrow and more, before thousands of participants. She is author of seven books, including "Life is Short, Wear Your Party Pants." Her career path has also included many one-woman shows across the country, and her passion for singing has led her to record and produce a jazz album. Recently, Loretta was on a stadium tour, The Power of Success, in Canada with Tony Robbins. She believes and lives her message, "Life is not a stress rehearsal!" Learn more at her website: [www.LorettaLaRoche.com](http://www.LorettaLaRoche.com). ∞

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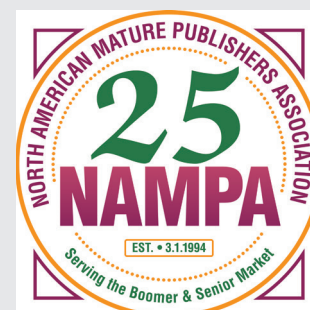
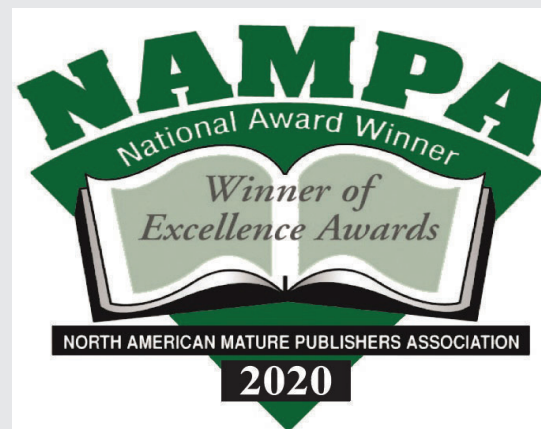
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# Elder Law & Estate Planning

## What a Will Can and "Will Not" do for You

By Patrick J. Kelleher, Esq.  
ElderLawCare.com



HANOVER AND QUINCY – A will is a legally binding directive stating who will receive your property upon your death and is an important part of a comprehensive estate plan. If you die

without one (intestate), the state will distribute your assets and property via state law and, quite possibly, at odds with your wishes. Having a will allows you to appoint a legal personal representative or executor to carry out your bequests and name a guardian for your children.

There is no doubting the importance of having a will, however, there are some limitations you should be aware of. From our experience, a will is your "admission ticket" to probate court; a will does not protect you from the estate "death" tax; a will does not protect you or your beneficiaries from financial creditors and predators, and a will does not protect your home or property from the \$15,000 per month nursing home.

Although a will can be the primary mechanism to transfer property on death, it does not cover all property situations. Some classes of property you are unable to distribute through a will are:

**Property held in trust** – A trust will have named beneficiaries who will receive the trust's property according to the trust terms and not based on what is in your will (unless specifically stated in the trust).

**Pay on death accounts** – Informally known as PODs, the original account owner names a beneficiary(s) to whom the assets in the account pass automatically upon the owner's death.

**Life Insurance** – Life insurance benefits pass to your named beneficiary(s) in the life insurance policy and are not affected by your will.

**Jointly held property** – Co-owned property is not distributed through your will. Joint tenants have an equal ownership interest in the property, and when one joint tenant dies, their interest ceases to exist. The other joint tenant now fully owns the entire property.

**Retirement plans** – In a similar manner to life insurance, money in an IRA or 401(k) passes to the named beneficiary(s). According to federal law, a surviving spouse is generally the automatic beneficiary of a 401(k); however, there are some exceptions. An IRA permits you to name a beneficiary(s).

**Investments in transfer on death accounts**

– Some accounts holding stocks and bonds will transfer on death to the named beneficiary(s). Like POD accounts, transfer on death accounts bypass probate and go directly to the beneficiary(s).

A will does not allow you to avoid probate. By necessity, a will must go through the probate process in order to allow beneficiaries to inherit property. It can take months to get through probate, and it involves expenses like an attorney, executor, and court fees. Also, your will and everything associated with it (property you own, who your beneficiaries are, etc.) becomes part of the public record that anyone can access.

Keep funeral instructions outside of your will. The reality is your funeral may have already taken place before someone finds and reads your will, which can take days, even weeks. If your funeral or memorial service is important to you, the best way to help your family is to pre-plan, making arrangements with a funeral home. You can leave written instructions with the family as to your plans.

Your pets cannot inherit through your will. An animal is legally unable to inherit money or property from you. If you want your pets to be cared for after you die, leave money to a person willing to take care of your animals. The person you select can inherit your pets since a pet is considered property. You can also set up a pet trust or a pet protection agreement, either of which provides for your pet's care.

Provisions for a child on government benefits are best in a trust. It is best to create a special needs trust to provide for a child with special needs or a child who is receiving government benefits. The trust can hold money for your child's care without affecting those benefits.

There are ways to circumvent the limitations of a will by creating trusts, setting up pay-on-death accounts, and ensuring a beneficiary is named on all accounts that permit them. Your will is an important component of a comprehensive estate plan, but it can't do everything.

We would be happy to discuss the pros and cons of having a will and other options available to you as part of your overall estate plan.

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**About the Author:** Patrick Kelleher is an author and Estate Planning & Elder Law attorney and founder of the Elder Law Care Learning center in Hanover, Massachusetts. Patrick has been teaching free educational workshops for over 10 years at his learning center and in surrounding communities. Learn more at [elderlawcare.com](http://elderlawcare.com) or follow Patrick Kelleher on Facebook because you will learn a lot! His offices are in Hanover and Quincy. You can find Patrick's new book "How to Avoid the Four-Headed Monster" of Estate Planning & Elder Law on Amazon at <https://www.amazon.com/How-Avoid-Four-Headed-Monster-Financial-ebook/dp/B084MB96SK>

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# A New Day in Scituate as Long-Awaited Senior Center Opens its Doors



By Marie Fricker

The newly constructed 15,000 sq. ft. Scituate Senior Center officially opened its doors on May 13th with a ribbon cutting ceremony held on its sunlit patio at 333 First

Parish Road. The event occurred exactly two years to the day after residents at a special town meeting voted 85 percent in favor of building the new facility for their growing senior population.

“This center opens up a world of possibilities for people of all ages in our community,” said Linda Hayes, Director of the Scituate Council on Aging, who hosted the event. “Thirty to 35 percent of our town’s citizens are over the age of 60 and this population is expected to soar. The old senior center (2,000 sq. ft. of space in a former 1880s firehouse) never met our needs, and we often had to move programs and events to other venues. Now we are able to add so many more choices to our roster, and everything will take place in this wonderful, state-of-the art building.”

John (JD) Miller, Chair of the Scituate Council on Aging, flanked by Hayes and local and state officials, cut the ceremonial blue ribbon opening the new center. He addressed the group of invited guests, many of whom had played longtime roles in fundraising, planning, and outreach efforts for the building.

“We have bettered our town with this new community resource,” said Miller. “On behalf of the COA Board of Directors, I would like to thank you all for years of support, caring, and involvement to make this happen. It has been a long time coming, but it represents a new beginning that will strengthen the inner fabric of our town, and be of use to all residents – young and



Launched by residents Joanne Ball and Kim Ryan in 2013, the volunteers held fairs, fashion shows, golf tournaments, trivia nights, bake sales and other events to generate funds for the cause.

When Ball and Murphy stepped down from their posts as president and vice-president of the group in 2017, members Sandy Duffey and Pam Davis succeeded them. “Four years ago, we had \$5,000 in our treasury, and now we have \$220,000,” said Duffey. “And even though our goal of building a new senior center has been achieved, FOSS will continue to support Linda and the center. That’s what ‘Friends’ are for.”

Davis echoed her colleague’s sentiments about remaining a resource for Hayes and her staff. “We will still raise funds, volunteer at events, and even hold our group’s meetings at the new center,” she said. “There is always more to do, but I am so happy to celebrate this glorious day.”

A sub-group of FOSS, “Build a Campus,” led by Dr. Gordon Price, has been raising monies for the past two years to help offset the cost to town taxpayers for building the new senior center. “As of this writing, we are only \$15,000 away from our goal of \$250,000 in contributions, and I’m confident we will make it,” said Price. “We raised the money through targeted mailings, a ‘Men of Scituate’ calendar, and promoting a ‘Fund a Room’ campaign through print and social media. All donations, large and small, will be recognized on a donor board within the center, and we are eternally grateful to every contributor.”

At the conclusion of the ribbon cutting ceremony, in sight of the landmark Lawson Tower, COA Board Chair JD Miller thanked all of the individuals and groups who, for so many years, held fast to their goal of building a new senior center in the town of Scituate.

“We have made an investment in ourselves, our families, and our values,” said Miller. “The dividends – our payback, our return on investment – will be with us for years to come.”

For a full roster of upcoming programs at the new Scituate Senior Center, contact Linda Hayes at 781-545-8722 or visit [scituatema.gov/council-on-aging](http://scituatema.gov/council-on-aging). ∞

## SENIOR FITNESS

### Let’s Get Physical! My Return to Health

By Rita La Rosa Loud, B.S.



QUINCY – Back in 2018, at the age of 64, I was diagnosed with cancer and bedridden for nearly a year. As someone who works out for a living and really enjoys exercising, you might imagine how difficult it was for me to find myself suddenly sed-

entary and experiencing the harmful effects of inactivity.

#### MY MISSION TO REMAIN ACTIVE

While in bed recuperating, I did whatever I could to stay active. I pointed my toes, flexed and rotated my ankles, even did a few leg lifts. I squeezed and released my buttocks to get my circulation and blood flowing. Abdominal crunches and light stretches were done while propped up on pillows. When seated, I stood up and sat down repeatedly to strengthen leg muscles then added light weights to train my arms and upper body. To keep moving, I walked around the house and eventually up and down my driveway.

#### RESULTS OF INACTIVITY

As a result of inactivity, a cascade of degenerative issues can happen, for instance, low back pain, bone loss, muscle loss, fat gain, metabolic slowdown, heart disease, stroke, Type 2 diabetes, and all-cause mortality. Luckily, many of these chronic health problems can be reversed, or greatly minimized when we consistently engage in a sensible, comprehensive, resistance training program just two or three times per week. Here’s an example: 45 percent of Americans have high blood cholesterol, a major risk factor for cardiovascular disease, yet studies have proven that resistance exercise decreases the bad (LDL) cholesterol and increases the good (HDL) cholesterol by greater than 20 percent! Pretty good, huh!

Also, did you know that on average, those who do not engage in regular resistance exercise lose approximately four to six pounds of muscle tissue every ten years? Muscle is active tissue and it not only helps us to burn calories 24 hours a day but it makes up most of our body. Frankly, it keeps our entire musculature (tendons, ligaments, and bones) strong and functioning optimally. To understand the link between muscle and metabolism, see my article, Do You Like M & M’s?

#### LOSE WEIGHT THE RIGHT WAY

Two strikes were against me. I was sedentary, had a loss of appetite, and dropped 25 pounds. Similar to those who crash diet and calorie restrict (eating less than 1,200 calories per day), this is not the best, nor the healthiest way to lose weight. When you do not eat enough food or consume sufficient calories you will lose weight. However, low calorie diets are notoriously effective only on the short term and the weight returns and then some. Physiologically, when you drop pounds via a reduced calorie diet plan, you will lose both muscle and fat. This diet approach does not lead to permanent weight loss or health benefits. I eventually got better, began eating more, and gained much-needed weight.

However, due to loss of muscle and metabolic slow down that goes along with it, more fat accumulated, particularly around my midsection. Alas, excess fat in this region is associated with heart disease.

In our 25-week weight loss and maintenance study, where subjects improved their body composition by 18 pounds, we recommended 1,200-1,500 calories per day for women and 1,500 – 1,800 calories per day for men. Subjects consumed a balanced diet supplemented with protein shakes fortified with the amino acid building block, L-leucine which helped participants lose weight, keep it off, retain lean muscle, lose fat and inches, and lower blood pressure and blood sugar levels.

#### MY EXERCISE PROGRAM

I experienced back pain, bone loss, muscle loss, fat gain, and reduction in metabolism in the early stages of my disease, and ultimately was able to rebuild muscle, reduce fat, raise metabolism, essentially improve my overall body composition (muscle to fat ratio). How?

The groundwork accomplished during my illness helped to get me back up on my feet. I wanted, however, to get stronger, regain flexibility, and enhance my cardio-respiratory system. So, I began strength training on weight machines, stretched and did cardio just like our members and study subjects do in our resistance exercise programs. I trained twice per week, completing a total of 10 exercises, performing one set of 8 to 12 repetitions for every major muscle group of both upper and lower body, including the midsection, as follows: (1) leg extension (front thigh), (2) leg curl (rear thigh), (3) leg press (hip, thighs, buttocks), (4) abductors/adductors (outer thigh/inner thigh) (5) chest press (chest and triceps), (6) shoulder press (shoulders and triceps), (7) lat pull down (back and biceps), (8) abdominal curl (front trunk), (9) low back (spine extensors), and (10) rotary torso (waistline).

In a program like this, subjects typically lose 4 lbs. of fat and gain 3 lbs. of muscle for a 7-lb. improvement in their body composition in just two short months! Compare this to the 6 lbs. of muscle per decade we lose when we do not engage in regular resistance exercise. Now wouldn’t you like to achieve those staggering results?

#### GUIDELINES

Due to COVID, if you have been housebound, or, like me, lived through a health issue that kept you immobile for an extended period of time, here are some tried and true guidelines and tips that may get you enthusiastic about moving your body once again. In fact, as life begins to normalize, it’s a good time to get physically active. Thankfully, businesses, restaurants, fitness facilities, beaches, parks, and walking trails are opening up and people are getting out and about a bit more than when the pandemic first reared its ugly head.

Integrating various modes of activity (resistance training, flexibility and cardiovascular fitness) into your daily life and eating a nutritious, well-balanced diet, supplemented with high quality protein in the form of shakes or lean meats, may likely hamper the progression of a variety of debilitating health conditions (muscle loss, bone loss, reduced metabolism,

heart disease, stroke, diabetes, and all cause mortality).

I can assure you that by taking incremental steps to be active, you will come to enjoy the many benefits of a healthy lifestyle. Before you know it, you will meet (ACSM), American College of Sports Medicine recommendations of exercising 30 minutes per day, three to five times per week.

And, I am confident that you will be pleasantly surprised at how good you will feel, how better you will look and function, how independent you will remain, and how much more you will enjoy life by becoming more active. So, how about it? Let’s get physical!

#### TIPS TO GETTING ACTIVE

- If it is your first time exercising, check with your health care provider/primary care physician prior to starting any activity or exercise program.
- Seek assistance of a nationally certified personal trainer, or join a supervised group fitness program, at a health club, gym, community center, YMCA, or senior facility.
- No matter what activity you choose, gradually progress duration and intensity.
- Do not over train or get overly exhausted so as to avoid joint and muscle pain.
- Initially, use your own body weight and gradually add light weights.
- Be sure to use proper form, e.g., sit or stand upright, head aligned over shoulders, upper body relaxed, maintain natural curve in spine, and abdominals contracted.
- Use slow, controlled movements when lifting weights and avoid using momentum.
- Be sure to breathe throughout the exercises.

#### YOUNG AT HEART PROFILE



In this photo, young at heart and active member of our Quincy College Health and Fitness Center, Mary Marks (age 58 years young), is training her upper back arms (triceps) using proper form and technique on the Triceps Extension Nautilus One weight machine under the watchful eyes of our nationally certified personal training staff. According to Mary, “Resistance exercise is what keeps me moving with less pain from my arthritis and past injuries.”

**ABOUT THE AUTHOR:** Rita La Rosa Loud holds a B.S. in Exercise Physiology with additional education in Sports Medicine and Athletic Training. She is NASM Certified and has been actively involved in the fitness industry for over 35 years. She is also an author and writes fitness-related articles for various fitness publications. Currently, she is a Fitness Researcher who Co-Directs the Health & Fitness Center at Quincy College with Dr. Wayne L. Westcott. ∞



# Awareness is Key in the Prevention of Elder Abuse



By Nicole Long, MSW, LICSW

World Elder Abuse Awareness Day (WEAAD) is June 15th and this year's theme is "Building Strong Support for Elders." Each year, Old Colony Elder Services (OCES), a designated Aging Services Access Point (ASAP) in Massachusetts, works with individuals, organizations and communities to raise awareness about elder abuse. By working together and taking action to raise awareness, we can all help prevent elder abuse.

Did you know that an estimated five million older Americans are victims of elder abuse, neglect, or exploitation every year? One in 10 Americans age 60 and older have experienced some form of elder abuse.

**What are the risk factors?**

Elder abuse encompasses more than physical or verbal abuse. It includes financial exploitation, emotional abuse, sexual abuse, and neglect. Self-neglect is also included; this is the term used when an older adult is unable, or unwilling, to care for themselves in areas of hygiene, nutrition and overall health. The most common risk

factors for elder abuse are social isolation, poor physical health, and dementia.

OCES' Protective Services Program Team works with older adults to prevent, eliminate or remedy situations that involve: emotional, physical or sexual abuse; neglect by a caregiver; financial exploitation, or self-neglect. Elder abuse, similar to domestic violence, often occurs in the home. It is important to note that fear often keeps older adults from seeking help.

Older adults who are at risk for self-neglect or at risk of harm from others can receive assistance to keep them safe in their own homes. In these situations, OCES staff can resolve difficult matters by advocating for older adults and providing specific resources and services.

OCES encourages anyone who witnesses elder abuse to report it! To file a report of concern for an elder, call the Central Intake Unit (CIU) at 1-800-922-2275. For non-emergencies, a report may be filed online at <https://fw1.harmonyis.net/MAAPSLiveIntake/>. When filing a report you will be asked to provide information regarding your specific concern for the elder, as well as demographic, and psycho-social information. Once the report is made, if the elder resides in OCES' service area, OCES will receive the report and determine if further investigation by a Protective Services worker is needed.

**Awareness is key to prevention**

OCES focuses on educating people about

the different forms of elder abuse; this is essential to preventing it from happening. In previous years, OCES raised awareness of elder abuse by holding "March Against Elder Abuse" events in Brockton and Plymouth. Last year, OCES held a virtual WEAAD event due to Covid-19.

Even during this time of social distancing, we can all still work to protect older adults by collaborating and building awareness about elder abuse.

This year, we invite you to join us in raising awareness of elder abuse by visiting our website for information about our WEAAD event, [www.ocesma.org](http://www.ocesma.org).

To learn more about WEAAD, visit <https://eldermistreatment.usc.edu/weaad-home/>.

**About the Author:** Nicole Long is the Chief Executive Officer of Old Colony Elder Services (OCES). Founded in 1974, OCES is a private, non-profit organization proudly serving greater Plymouth County and surrounding communities. OCES is designated as one of 25 Aging Services Access Points (ASAPs) in the Commonwealth of Massachusetts. OCES' mission is to support the independence and dignity of older adults and individuals with disabilities by providing essential information and services that promote healthy and safe living. The agency offers a number of programs to serve older adults, individuals with disabilities, their families and caregivers. For more information call 508-584-1561 or visit [www.ocesma.org](http://www.ocesma.org) ∞

# Seniors – Get Moving!

By Maria Burke, RN  
Owner - Celtic Angels Home Health Care



The pandemic drove a lot of us into stagnation, with limited exercise and possibly over-indulging in food and alcohol. And that's ok. We all did what we had to do to survive one of the darkest times in

recent history. There is no value in beating ourselves up and feeling ashamed. But the best thing we can do for ourselves is to get moving!

Start out this spring with a "renewal" program. Map out a simple self-care regime. Take care of your body, mind and spirit. Try reading articles with tips for staying active. Go for a daily walk around your house, or outside around the block. Pop in an exercise video aimed at helping your balance, coordina-

tion and heart health. Try strength and posture exercises while you're watching TV or waiting for the microwave. Enroll in an online learning course to sharpen your brain.

Start working on portion control with your food; improve what you're eating by buying and preparing fresh fruits and vegetables once a day. Learn more about specific health conditions if you have them, such as diabetes, heart disease or arthritis. At Celtic Angels Home Health Care, we are committed to keeping our clients healthy, active and filled with the all the joys that life has to offer!

**About the Author:** Maria Burke, RN, is owner and founder of Celtic Angels Home Health Care. Maria Burke was born in Midleton, County Cork, Ireland. She is the eldest of six and immigrated to the United States in 1988 to pursue a nursing degree to become a registered nurse. She served as a visiting nurse and from there, launched her own home health care company. Celtic Angels has two offices; Weymouth and Needham and provides a full array of the highest quality in-home health care services with certified and skilled CNAs, HHAs, and RNs. ∞



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## SOCIAL SECURITY UPDATE

### Choose a Representative Payee for Social Security to Consider Before You May Need One



By Delia De Mello, Social Security

The future is uncertain. Our Advance Designation program allows you to pre-select a trusted individual if a time comes when you need a representative payee to help manage your money. Advance Designation enables you to identify up to three people, in priority order, whom you would like to serve as your potential representative payee.

We recently celebrated the one-year anniversary of our Advanced Designation program. Since its launch in March 2020, more than one million eligible individuals have opted to participate.

You may choose an Advance Designation if you are capable of making your own decisions

and are:

- An adult or emancipated minor applying for benefits and do not have a representative payee.
  - An adult or emancipated minor beneficiary/recipient and do not have a representative payee.
- You can submit your Advance Designation information when you:
- File a claim for benefits online.
  - Use the application available in your personal my Social Security account at [www.ssa.gov/myaccount](http://www.ssa.gov/myaccount).

Call us by telephone at 1-800-772-1213 (TTY 1-800-325-0778).

In the event that you can no longer make your own decisions, you and your family will have peace of mind knowing you already chose someone you trust to manage your benefits.

We have updated our Frequently Asked Questions to answer any questions you may have



about Advance Designation at [www.ssa.gov/faq](http://www.ssa.gov/faq) under "Other Topics." You may also find more information about representative payees on our blog at [blog.ssa.gov](http://blog.ssa.gov).

**About the Author:** Delia DeMello, metropolitan public affairs specialist, has been with the Social Security Administration since 1986. For information, call 800-772-1213 or visit [www.socialsecurity.gov](http://www.socialsecurity.gov) ∞



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# Art Matters XX: Reflections on various art media

## Sculpture, Part 1: Basics



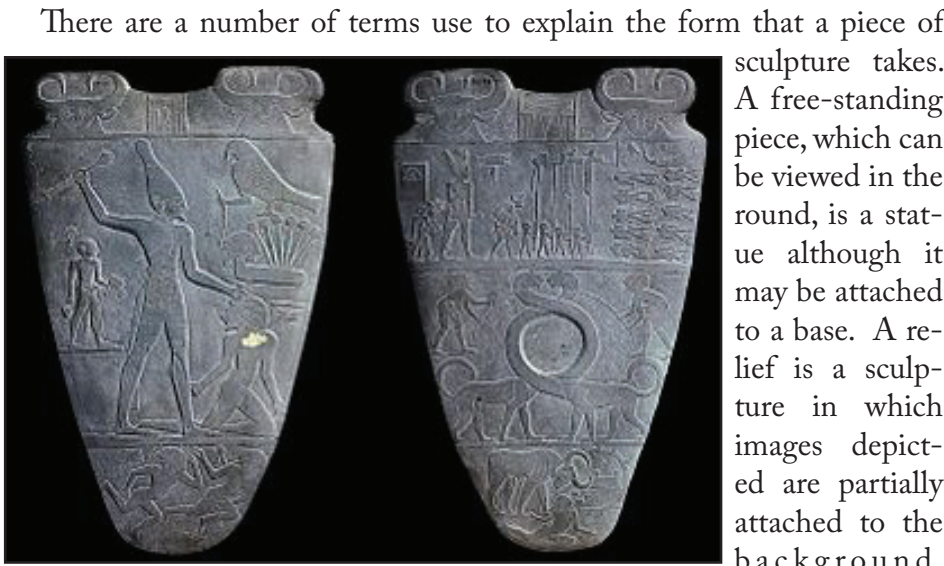
By Janet Cornacchio

To date, all the art media that we’ve reviewed has been two-dimensional with the exception of mixed media, which can have some 3-D characteristics. Let’s begin with an exploration of sculpture, one of the oldest and most widespread art forms. Interestingly, sculpture has both noun and verb forms. “To sculpt” is the action or art of creating a 3-dimensional work by means such as carving, modeling or welding. A “sculpture” would be a work of art produced by modeling – using a malleable material, such as wax, clay or plaster of Paris, by carving – using a sharp tool or chisel on harder materials, such as wood or stone or by welding – casting by heating of a variety of metals, and lastly glass plus some contemporary additions.

So, this week, let’s look at the three basic means of creating a sculpture and the most common materials employed in their creation. Sculpture is considered one of the plastic arts – again, works that are created by shaping or removal of the material from which they are made. Then having established some basics terminology, we can explore this complex art form in depth over several articles.

The material from which a sculpture is formed determines its durability. Sculptural works in stone often represent the largest number of surviving works of a culture’s art forms, whereas works in wood have the shortest lifespan. Ceramic sculpture can survive but is often in poor shape, requiring extensive restoration and reassembly. As a student of archaeology, I can attest that ceramics or pottery is probably the single greatest surviving object (along with glass) of any culture, but it is generally found in waste dumps in pieces and requires very specialized knowledge to date, type and identify.

Stone sculpture, minus the painting or polychrome with which such pieces where often adorned in ancient and traditional culture, endure for a millennium. Many of the famous examples of Greek art are Roman copies, yet they survive. As often is the case with art subjects, most early through Medieval works in both Western and other cultures are religious or devotional in nature depicting gods, goddesses or the deity in whatever form their cultural envisioned. Those in power – kings, queens, pharaohs, heroes – and animals are other common subjects worldwide.



Palette of Namar, early bas-relief stele, Egypt 31st century BC.

image is projected from that background. Bas-relief or low relief is almost like a deep engraving; high relief is close to a full round effect and mid-re-

lief is, naturally, in-between the two.

Egyptian wall reliefs often use a sunken-relief where there is rounding dug into the temple or tomb walls. Similar effects appear on occasion in devotional caves in other cultures such as China and India. Relief is the common technique used to do large narrative works – mythological stories, celebrations of famous battles and the like. It works on a large scale in buildings such as the famous Elgin marbles, which were part of the pediment in the Parthenon on the Acropolis, the famous temple of Athena in Athens. (The temple itself is an amazing sculptural form.) And relief is also used on a small scale in jewelry, metal work, etc., or on stele, which are upright slabs often used to depict historical or mythological information. Some examples are the Rosetta Stone or the code of Hammurabi, along with other examples in Mayan and Asian cultures.

Another technique or terminology distinction is in how the sculpture is formed. It is by carving, which is a subtractive method, in that material is removed from the base from which the sculpture is formed. Stone and wood are both substances, which can be shaped by removal. Sculptures made of ceramic or plaster can be made by modeling, where a sculpture is shaped by building up those materials. In general, works made of metals are made in a two-part process, which involves techniques such as casting, stamping and moulding. In a recent trip to the Peabody Essex, I saw an exhibit on Rodin that had a very complete collection of his initial figure designs in ceramic. These were then copied in plaster, which could be refined and used as a mould for either a bronze casting or as guides for a marble/stone sculpture. It was fascinating to see the different stages and get insight into how his creative genius worked. There are many copies of his works made under the sculptor’s direction and later by the French government to whom he left his studio’s work.



Elgin Marbles, East Pediment, British Museum 447 BC. Both credited to the Architect & Sculptor Phidias

A few other examples of sculptural works are the colossal statue, which includes works such as the giant Avukana Buddha Statue in Sri Lanka or the Sphinx of Egypt or the Faces of Mount Rushmore. Some of these are antiquities; some are modern.

Lastly, here are some modern or contemporary sculptural concepts: sound, light sculpture, environmental, street art, kinetic, aka mobiles, land art and site-specific art. More details next time.



Parthenon, Acropolis, Athens 447 BC

About the Author: Janet Cornacchio is an artist member of Front Street Art Gallery, President of Scituate Arts Association & a Realtor with Jack Conway. You can contact her at jcornacch@aol.com ∞



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# "THE WICKED SMART INVESTOR"

## Don't be Shy – Let your Bucket List be Known!



By Chris Hanson

HANOVER – One of the first questions I ask my client is "What are your financial goals?" The importance of this question is paramount, because all planning decisions are dependent on those goals. It is my job to help you conquer your bucket list. So, it's kind of ironic that many clients are a little bashful about sharing all of their goals. The Wicked Smart Investor is here to tell you to let things fly; it's your money and your life after all.

I recently revised my bucket list due to the pandemic. Last March, I moved into my sister Margaret's in-law apartment. She has a non-verbal, autistic son Erik, and with school canceled, there was no one to watch Erik during the day. She's a nurse and her husband builds homes, so working at home was not an option for either of them. Then, in June, Erik aged out of the Hanover school system and still has no placement in an adult program. We have been juggling our schedules to care for him, and I decided to make this living arrangement permanent, so that has me adjusting my life plan.

You see, for a while, I was planning on buying a two-bedroom cape in Marshfield or Plymouth. I like living near the ocean in towns that have year-round activity. The more I thought about it though, I remembered that maintaining a suburban home would be another job. I'd spend my weekend raking leaves, washing windows and scrubbing bathrooms. Then, after that, maybe I'd clean gutters, mow the lawn, and wash the floors. Between my business, maintaining a house, and helping with Erik, I would not have any free time. I don't think things would get

much better, even after Erik is accepted to a day program. If I want my own life, I simply have to make adjustments to my plan.

For one change, I decided to indulge my love of stodgy old Boston and buy a small condo in Beacon Hill, and I'll live there on the weekends. The fancy-schmancy name for such properties are pied-à-terre, meaning a small property for occasional use. When I share this idea with some friends, some well-meaning people become critical of my goals.

Let's explore my logic. In Hanover I have a swimming pool, stone walls, and fall foliage. Rexhame beach is a short drive away and I can enjoy wooded walking paths all over town. But I really like city life. I dream of waking up Saturday morning and possibly strolling in the Public Garden, writing in the Athenaeum, or kayaking on the Charles. After that, maybe I'll attend a Bruins game, see the latest movie at Lowe's Common, and hit Bova's for a late-night snack. Now this is good living!

Yet, people, again with the best of intentions, shared their unsolicited two cents (and if they're in my family they'll put in a whole quarter). I have been told parking is expensive in town. Well, I'll leave the car in the suburbs. A pack rat informed me that small living units fill up quickly. That's an easy problem to solve; I won't put much in it. I was also warned of tourists and nosy neighbors peeking in my windows. Let me tell you, if people are concerned with what I'm doing, then they really have problems!

I did take all the warnings into consideration, but I am sticking to my guns. This



arrangement works well for Erik and me. I can be quite a curmudgeon when I want to be.

I strongly encourage you to present and stubbornly defend a realistic bucket list during financial planning discussions. As long as there is nothing illegal on that list, a good financial planner will support your decisions. We all know life can be difficult; indulge yourself when possible.

**About the Author:** Chris Hanson is the author of *The Wicked Smart Investor* blog and a CPA who specializes in financial planning at Cardea Capital Advisors in Hanover. He earned his BBA at the Isenberg School of Management University of Massachusetts and an MBA at Babson College's F. W. Olin Graduate School of Business. He may be reached at (978) 888 - 5395 and you can read his blog at [wickedsmartinvestor.blogspot.com](http://wickedsmartinvestor.blogspot.com). ∞

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# A Friend at the End: A Hospice Volunteer

By Toni L. Eaton, RN, BSN, MS,  
President & CEO of Old Colony  
Hospice & Palliative Care



Your first friend holds a special place in your heart. So does your last friendship. Most of us understand that friendships enrich our lives. Nowhere is that more true than in the world of hospice. We even have a saying: The last great thing that can happen to a hospice patient is a hospice volunteer – the last friend the patient will make.

In my years at hospice, I have seen the deep importance of these volunteer-patient relationships. Friendships have blossomed over books, chess, cards, children, and conversation. These relationships have moved me to tears. Sometimes, the friendships last only for days or months, but for many patients and volunteers they are no less important than some longer lasting friendships. We are blessed at Old Colony Hospice & Palliative Care with deeply committed and caring volunteers, as our Volunteer Coordinator Janela S. can tell you.

During the difficulties of the pandemic, we worried we might lose volunteers. Janela S, who started in her position just before the first lockdown, didn't know what to expect. But what she found was that not only did our volunteer ranks not shrivel, our volunteer numbers grew from about 60 to 85. Volunteering changed during the pandemic, but our volunteers did not. They wanted to help in whatever way they could: making masks, making meals, helping with paperwork, organizing the supply room, and making telephone calls. Anything they could do, they would do. We now even have a crew of garden volunteers who do yardwork at the Dr. Ruth McLain Hospice Home, which OCH opened just over a year ago in Braintree. Two of our youngest volunteers, 14 and 16, joined us as groundskeepers

this past summer. Volunteer visits to patients were suspended for a time, and even now are sometimes limited. During the pandemic, a few patients – especially those at home whose families and friends could not come see them – did request volunteer visits and we honored those wishes whenever we could. Our volunteers follow the strictest protocols to protect the patients as well as themselves and we make sure they have access to full personal protection equipment kits: N95 masks, shields, gloves, and gowns. These safety barriers block the coronavirus, but fortunately, they cannot stop the spread of friendship.

One patient who lived at home with his wife missed having a cribbage partner. OCH veteran volunteer Paul S. stepped up. He didn't know how to play the game, but he didn't let that stop him. He quickly set to learning about nobs, nibs, and double skunk. For the next four months, Paul S. and the patient spent many happy hours together, the cribbage board before them and a quiet friendship between them. The patient's wife said the friendship was the highlight of her husband's last days. Her husband and Paul S. played cribbage almost daily, right up until the day before he died.

Another patient, a woman who lived alone, was matched up with OCH volunteer Stephanie. Always wearing safety PPE, Stephanie visited the woman a few times a week. They would spend hours just sitting and chatting. The woman loved telling stories of her childhood, and her daughter said that sharing these memories was so important for her mother.

We had another patient who recently lost his wife. He was a veteran and we were able to match him with an OCH volunteer, who was also a veteran and, coincidentally again, named Paul. The two would visit regularly and talk about their time in the military and other things. It turned out they both loved collecting coins and both had coin collections. "Again, a beautiful friendship," as Janela S. put it.

Volunteers during this pandemic – not only here at OCH but also throughout our communities at schools, food pantries, councils on

aging, and other nonprofits – have been amazing. When we had to suspend and scale back on volunteer visits, our volunteers found so many other ways to comfort the patients and families they knew needed extra caring. To help families who couldn't see their loved ones, our spiritual counselors wanted to launch a program they had heard about called, "You're Not Alone." It involved two homemade hearts. One heart was given to the patient, the other to family members, each to hold when they were thinking of the other. If patients could not hold the heart, they were placed under their pillows.

We needed hearts in a quick beat. Janela S. asked if volunteers would take on the task of crocheting small, 2-inch hearts. The volunteers wanted the pattern right away. Within days, more than 200 doily hearts poured in to OCH. "It was a small gesture, but these hearts brought peace to our families," Janela S. said. As we ease out of the pandemic, we're grateful that we've finally been able to vaccinate our health care workers and our volunteers as well. Once again, our volunteers stepped up as quickly as they were able, and with generosity of spirit. Even before they had their vaccinations, many of our volunteers called to let us know when they would be getting their shots and to ask us to put them back in the schedule for patient visits. Friends indeed!

**About the Author:** Toni L. Eaton, RN, BSN, MS, is the President & CEO of Old Colony Hospice & Palliative Care of West Bridgewater, a dynamic non-profit hospice serving more than 55 communities south of Boston. OCH also runs the Dr. Ruth McLain Hospice Home in Braintree. A native and resident of the South Shore, Toni brings her compassion and experience as a nurse, a veteran, and a community leader to her insightful columns for South Shore Senior News. Her leadership has been honored by several groups, including the South Shore Women's Business Network. She currently sits on the boards of the Hospice & Palliative Care Federation of Massachusetts and the National Hospice and Palliative Care Organization Regulatory Committee. For more information, call (781) 341-4145 or visit Old Colony Hospice & Palliative Care at [www.oldcolonyhospice.org](http://www.oldcolonyhospice.org). ∞

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# THE GRAPEVINE

## That Old Classic Chardonnay



By Missa Capozzo

SHARON – Chardonnay is the most popular, best selling grape variety in the United States. Chardonnay is also the most planted grape variety around the world and much of that has to do with its ability to grow almost anywhere, in a large spectrum of climates.

The climate plays a primary role in dictating the fruit flavors a Chard may have. Warm regions like Chile, California, and most of Australia tend to produce more tropical styles. Temperate regions like southern Burgundy, or even northern New Zealand produce wines marked by stone fruit notes. The coolest Chardonnay vineyards, such as those in Chablis, Germany and Champagne, have a green apple aroma.

What I love about Chardonnay is you can have the same grape in the glass, but because of the differences in wine making and/or terroir, have completely different flavored wines. Some Chardonnays are aged in oak barrels; others never see oak at all. Oak can create wines that are big on flavors of vanilla, smoke, coconut, hints of sweet spices like cinnamon and clove, and wood. Prolonged lees contact while in the barrel imparts a biscuity, doughy flavor. An unoaked Chard would be more varietally pure and crisp, with flavors of green apple or exotic fruits.

Chardonnays that have undergone a secondary fermentation, called malolactic fermentation (MLF), will show a creamy texture and buttery notes. Often mistaken for the result of oak aging, that buttery quality can appear in both oaked and unoaked Chardonnays, depending on if the

winemaker chose to employ MLF with that particular wine.

Our Chardonnay at Sail to Trail WineWorks (Worcester's urban winery) hails from Yakima Valley, Washington and is very, very lightly oaked in neutral barrels, to the point you truly can't detect any oak on the palate. It is extremely pale silvery yellow in the glass, and is as bright on the palate as it is to the eye. Offering the nose ample aromas of stone fruit, melon, and floral notes, the palate recognizes all that the nose does, with additional flavors of pineapple and crisp citrus. This is an appealing and refreshing Chardonnay that would be delightful in the glass while enjoying a warm summer evening on the porch.

Pairing food with Chardonnay can be a delightful experience. My favorite foods to pair with Chard are anything buttery or with cream sauces. Think shrimp scampi, fettuccine Alfredo, white cheddar mac and cheese, shellfish of all sorts, such as lobster, crab, clams, and mussels, and my personal casual favorite, buttered popcorn! Chardonnay pairs well with egg dishes at brunch, such as quiche and frittata. Also a brunch offering, banana bread or muffins bring out a tropical banana note in the wine. Shrimp or scallops wrapped in bacon are heavenly with a Chard, as well. Chardonnay can be an outstanding food wine, and the fun is in the experimenting! Cheers!

**About the Author:** *Missa Capozzo is the EVP of Product Development and Sommelier at Worcester's first and only urban winery, Sail to Trail WineWorks and a Wine Consultant with WineShop At Home. Throughout her career, she has taught students of all levels of experience and interest in classes, wine dinners, and lifestyle experiences. She is a Certified Specialist of Wine (CSW) with the Society of Wine Educators, a certified French Wine Scholar (FWS), certified with the Wine and Spirits Trust, Level 3 Advanced (WSET), and a certified educator with Boston Wine School (BWSEd). Her unique combination of talent allows her to translate the nuances of wine for the everyday wine drinker in an accessible and fun way. Demystifying wine and removing the intimidation is her passion when sharing wine with others. When not fully immersed in the world of wine, Missa is a self-proclaimed "obsessed dog mom" to her Boston Terrier, Peyton. ∞*

## Storing My Stuff

By Natalie Ahern  
Owner, All the Right Moves



A little over a year ago, I wrote an article on storage units and the American addiction to them. There are over 52,000 storage facilities across our country; one in six American families has one.

There are lots of good reasons to have a storage unit; you may need a temporary holding place while you sell your home or a place to store college-age children's dorm belongings between school years. But for many people, a storage unit represents deferred decisions for sentimental items (baby cribs, wedding gowns), family heirlooms, or excess "stuff." If you currently have a storage unit, using this social isolation period may be a great time to start the process of sifting through its contents.

When I work with clients to edit or empty

their storage units, we bring a phone (for photos), notepad, large labels, heavy-duty trash bags, empty boxes and a dolly. I recommend opening each box or bag in the unit and going through its contents. Ask yourself if you could use the item in your existing house. If the answer is "yes," box or bag the items to take home and load on the dolly. If the item is not something you could use but may have value to someone else, take a picture.

Perhaps the item would be of interest to your sister, your son, or your neighbor. Maybe the item is something you could sell at auction or consignment, or donate. Having a picture of the item will enable you to determine the best method of finding a home for whatever you are currently storing but no longer want. Use your notebook to keep a list of all the items you have photographed and possible ways to pass these things on.

I also recommend labeling the contents of each box or bag. For example, one box might be labeled "Grandma's quilts" or "John's baby clothes." It will make future trips to the storage unit much easier.

If you find objects that are moth-eaten, worn out, broken, or just plain old ugly, bag them up for trash.

Depending on the size of your storage unit, your clean out may take several trips, but soon you will have a notebook with the contents and clearly marked containers of everything in the unit. Follow up with family members and friends to see what they might want. Send photos to auctioneers and donation centers to find a little extra cash or a new home for unwanted items.

Lastly, what to do with the sentimental objects that you don't have room for and your family doesn't want? Now you have pictures of these special mementos, and it may be easier to part with them. If not, read next month's article for some ideas to preserve those memories without the need for a storage unit.

**About the Author:** *Natalie Ahern, founder and principal of All the Right Moves Boston, has extensive experience in project management, home decorating, and floor planning in homes on and around Boston's South Shore. Whether a client is downsizing, relocating, or aging in place, Natalie manages it all. She is a member of the National Association of Senior Move Managers. You can reach her at 781-724-1681 or visit alltherightmovesboston.com for more information. ∞*



## Doreen's Dinners

By Doreen Lang

If you're too busy to cook or need help making dinners for you or your loved ones, contact me! But in the meantime, here is one of my delicious easy and healthy secret recipes that you can enjoy this spring! [www.doreensdinners.com](http://www.doreensdinners.com) or [doreenalang@gmail.com](mailto:doreenalang@gmail.com), or 339-526-2049.

### Creamy Fettuccine with Brussels Sprouts & Mushrooms

Sliced Brussels sprouts and mushrooms cook quickly and cling to the pasta in our spring version of pasta primavera. \*Look for pre-sliced vegetables to cut prep time. Serve with a tossed salad.

**Total: 30 mins Servings: 6**

#### Ingredients

12 ounces whole-wheat fettuccine  
1 tablespoon extra-virgin olive oil  
4 cups sliced mixed mushrooms, such as cremini, oyster and/or shiitake  
4 cups thinly sliced Brussels sprouts  
1 tablespoon minced garlic  
1/2 cup dry sherry or 2 tablespoons sherry vinegar  
2 cups low-fat milk  
2 tablespoons all-purpose flour  
½ teaspoon salt  
½ teaspoon freshly ground pepper  
1 cup finely shredded Asiago cheese, plus more for garnish

## Upcoming Events at Brookdale Senior Living, Quincy

**Brookdale Quincy Bay Flag Day**—Did you know that there is a benefit for wartime veterans and their spouses to help you pay for Assisted Living? Join us to learn about the Aid & Attendance Benefit, and how it can help you. Thursday, June 10th at 11 a.m., 99 Bracket Street, Quincy, MA 02169. RSVP to Sam Perry at 857-402-1320.

**Join Us in the Garden**—Make plans to attend "Growing with Confidence," an in-person outdoor event at Brookdale Quincy Bay. Whether you're a new gardener or a plant pro, you'll get tips about selecting and growing flowers, herbs and more. Call 617-221-9948 to reserve your place. Thursday, June 17, 2:00 p.m.

**Calling all Green Thumbs Networking Event**—Brookdale Quincy Bay is looking to inject a little more "green" into our urban setting, and YOU can help by bringing a perennial plant of your choice for our new garden! In return, you'll receive recognition for your company on our Brookdale Garden plaque. Take part in our "Mother Earth" Hat Contest! Design and wear a hat that you feel embodies the spirit of Mother Earth! The person with the most creative "green" hat will win a fabulous gardening themed basket. Join us on Thursday, June 17th from 4-6 p.m. at Brookdale Quincy Bay, 99 Bracket Street. RSVP to Sam Perry at 857-403-1320 or email [sperry11@brookdale.com](mailto:sperry11@brookdale.com).

A carefree life with excitement and friends starts at Brookdale. Our community offers good food, mental and physical activity, socialization—all in a comfortable environment that feels like home. Call 617-221-9948 to come

### Simple Steps

**Step 1:** Cook pasta in a large pot of boiling water until tender, 8 to 10 minutes. Drain, return to the pot and set aside.

**Step 2:** Meanwhile, heat oil in a large skillet over medium heat. Add mushrooms and Brussels sprouts and cook, stirring often, until the mushrooms release their liquid, 8 to 10 minutes. Add garlic and cook, stirring until fragrant, about 1 minute. Add sherry (or vinegar), scraping up any brown bits; bring to a boil and cook, stirring, until almost evaporated, 10 seconds (if using vinegar) or about 1 minute (if using sherry).

**Step 3:** Whisk milk and flour in a bowl; add to the skillet with salt and pepper. Cook, stirring, until the sauce bubbles and thickens, about 2 minutes. Stir in Asiago until melted. Add the sauce to the pasta; gently toss. Serve with more cheese, if desired.

**Nutrition Facts Serving Size: About 1 1/3 Cups. Per Serving:** 384 calories; protein 18.4g; carbohydrates 56.4g; dietary fiber 9.6g; sugars 8.4g; fat 10.2g; saturated fat 4.4g; cholesterol 20.7mg; vitamin a iu 812.2IU; vitamin c 45.1mg; folate 81.8mcg; calcium 288.4mg; iron 3.3mg; magnesium 108.8mg; potassium 597mg; sodium 430.9mg; thiamin 0.4mg. **Exchanges:** 3 Starch, 1 Vegetable, 1 High Fat Meat, 1/2 Fat

**Actual Testimonial:** *Doreen's Dinners are a life saver, literally. I lost 16 lbs. in 4 weeks and I no longer need to get cortisone injections in my knees from my weight. She cooks the foods I need to eat and makes them delicious! J. Logan, Scituate, MA ∞*



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## Alzheimer's Family Support Center of Cape Cod – Until there's a cure, there's community

Join us for the 2021 John Levin Memorial Conference, "Getting to Yes: A Pragmatic Approach to Dementia Care" with Teepa Snow, OTR/L on Friday, August 20, 2021 from 8:30 a.m. to 4 p.m. via live Zoom videoconferencing. Presented by Alzheimer's Family Support Center of Cape Cod, there is NO CHARGE to attend this live videoconference.

Join nationally-known dementia care specialist, Teepa Snow, OTC/L, who will present pragmatic strategies for managing the care of adults with dementia. This live videoconference is intended for persons employed in memory care, skilled nursing facilities, and adult day programs, family and in-home caregivers, and others involved in the care of adults living with dementia.

**Conference topics to include:** Sorting Out the Three D's: Delirium, Depression, and Dementia; Changing Resistance to Care to Participation in Care; Why Do They Do That? Understanding Symptoms and Situations of Dementia; Dealing with Distress: Using Empathy and Support; Improving Your Hands-On Skills for Providing Care. A special panel discussion on Alzheimer's & the Arts will take

place during the lunch hour.

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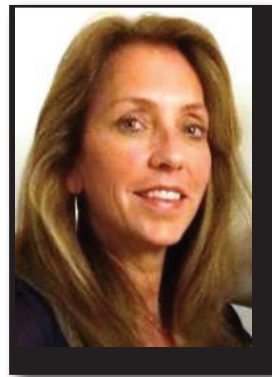
For information about obtaining Continuing Education Credit, please visit: [www.alzheimerscapecod.org](http://www.alzheimerscapecod.org).

All attendees MUST be registered to attend this FREE event. To register, click or paste into browser: <https://www.eventbrite.com/e/getting-to-yes-a-pragmatic-approach-to-successful-dementia-care-tickets-152925992761>.

Questions? Call us at 508-896-5150, or email [info@capecodalz.org](mailto:info@capecodalz.org) This conference is presented by Alzheimer's Family Support Center of Cape Cod, a 501(c)3 nonprofit providing free support, referrals, education and social connection to persons affected by Alzheimer's disease and other dementia-related diseases, and their care providers. To learn more about us, visit [www.alzheimerscapecod.org](http://www.alzheimerscapecod.org). ∞



ASK THE HIPPIE



The journey that caregivers are on when caring for someone with Alzheimer's/Dementia is full of mystery, self-doubt, and loneliness. This column offers a chance to reach out, seek new ideas, and by reading about the experiences of others, learn that you are never alone.

Acceptance

By Phyllis DeLaricheliere, MS

Life changes in a split second. One minute you could be surrounded by friends and family who seek your advice, your time and your company, and the next you are perhaps surrounded by the same friends and family who look at you with sheer concern or even terror. They shy away and now your company feels like a burden. You have dementia, and in some cases, this is what you might experience.

Throughout various times of our lives, we seek some sort of acceptance or validation. Whether it be from a parent, a boss, a loved one. The concept of acceptance in human psychology comes from the Latin word 'acquiescere,' meaning to find rest in. With acceptance comes a sense of peace and belonging. Hand in hand with acceptance is tolerance. To tolerate something demonstrates the willingness to go along with behaviors or opinions that we might not agree with.

When someone is faced with the diagnosis of dementia or Alzheimer's, they go through a monopoly board of emotions having to hit on each place and not being able to pass "GO." Acceptance is one of these places where they must face what they have and accept what is. So here, acceptance is not gaining it from others but finding it within them-



selves. They no longer seek it from others, for their world and concerns have changed, but at the same time there is an unspoken "given" that those in their lives, friends and family would just accept them as is. So, ask yourself, do you?

Here is where I see so many times the challenges families and friends face. Because they at first do not know what's wrong, as perhaps their loved one has not yet been diagnosed or they don't have a real understanding on dementia. Eyes roll, frustration builds, and patience is tested. This is when acceptance and tolerance must be applied.

Although the journey of dementia is a tough one, there are so many things to be thankful for. The first step is being able to see that one of the gifts of dementia is acceptance. Once you accept the reality, you will be able to see the gifts that your loved one will give you and show you while on this journey. The second step is tolerance. The popular phrase, "Don't sweat the small stuff, it's all small stuff," helps us put challenges in perspective. We must exercise patience, find the laughter in each moment, and not disrespect the trust that your loved one diagnosed has placed in you. They believe that you will continue to love them, cherish them, be with them.

REMINDER: All you are seeing with dementia is their Hippie side. Another side of themselves. So, whether or not it's your friend, your partner, your spouse, or your parent, you have loved them through so many times both good and bad. Now is the greatest test of LOVE of all.

Dementia will test both the patient and the caregiver. You must face the journey as a team! Don't let the disease divide and conquer. Acceptance and tolerance are the first two steps in walking hand in hand down that path. This is and always will be your partner, your friend, your parent, your spouse. Don't let Dementia define you, don't shy away, don't be afraid, don't mourn...just because they might be different now does not mean they are not still ours to love!

About the Author: Phyllis A. DeLaricheliere, MS, has made a career of working with seniors. She is a sought-after speaker/educator and author of Embracing the Journey: Knowing your Inner Hippie. To book her for a lecture, or receive a copy of her book, email Phyllis at knowyourhippie@gmail.com. STAY TUNED – HER LIVE WEB CHATS ARE COMING SOON! ∞

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Planning for Care... continued from page 2

- When appointing a trustee, there are many factors to consider. For example, having a sibling or other family member as the trustee could potentially create conflict in the family. If the trustee does not have a full understanding of the rules of disbursements related to the benefits the disabled person is receiving, this could have a negative impact on the benefits. The trustee must be prepared to be responsible for the following:
- To ensure that the money in the trust is used for the sole benefit of the individual;
  - To oversee the accounting, investments, tax preparation and reporting to the appropriate government agencies;
  - To help the beneficiary make good use of their resources;
  - To be impartial;
  - To ensure that funds are spent sensibly, and disbursed and invested properly;
  - To provide fiscal oversight to ensure that funds left for the beneficiary meet their intended goals;
  - To protect public benefits eligibility (administrators are knowledgeable about the rules governing SSI and Medicaid) and safeguard those benefits from being jeopardized.
- Professional trustees help to guide the beneficiary and their family on navigating the complexity of a trust. This alleviates stress from the family members, allowing them to have a positive relationship with the beneficiary. Ultimately, establishing a Special Needs Trust with a Professional

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About the Author: Joan McGrath is executive director of Planned Lifetime Assistance Network of Massachusetts and Rhode Island (PLAN of MA & RI), a nonprofit organization proudly serving people with disabilities and assisting them with preserving assets, protecting access to public benefits, and living well. For more information, please visit www.planofma-ri.org. ∞

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