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‘Rise in the Presence of the Elderly’



The Jewish perspective on aging

By Maayan Jaffe

YOU FIND THEM at the Jewish Community Center, at the supermarket and on the bus. They come in all shapes and sizes, with different strengths and knowledge. They are our elderly and, according to Jewish law, it is our obligation to respect and care for them.

“The Jewish tradition teaches us to venerate people who are older,” says Rabbi Lawrence Ziffer, Executive Vice President of the Louise D. and Morton J. Macks Center for Jewish Education. “In fact, the term ‘*zakein*,’ which is literally translated as ‘old,’ is considered to be a contraction for ‘*zeh kanah chachma*,’ or ‘one who has acquired wisdom.’” This wisdom is a combination of life experiences and intellectual knowledge.

However, it is not just about respect or honor. It is also about care and support. Elderly are considered among those who the Torah mandates Jews to care for: those who are most vulnerable. Rabbi Mitchell Ackerson, Director of the Department of Pastoral Care and Chaplaincy Services for Lifebridge Health System, says there are more than a handful of Biblical sources that discuss this obligation, ranging from sources found directly in the Torah, to mentions by the Prophets, our Sages and even in the High Holiday liturgy.

“We value and respect people of all ages, but most especially those who are older and have life experiences from which we can learn.”

The most well-known verse is found in Leviticus 19:32, which says, *“Mipnei Seiva takum v’hadarta pnei zakein/Rise in the presence of an older person and honor the presence of an elder.”* Ziffer explains that according to one view in the Talmud, this applies to anyone over the age of 70.

In Baltimore, this commandment has become even more relevant, given the results of the 2010 Greater Baltimore Jewish Community Study. According to the study, Baltimore has a growing senior population, with nearly 20 percent of people over the age of 65; the number of seniors over the age of 85 has tripled in the last 10 years. A large portion of area seniors are living alone, with family members outside the area.

Nationwide, people are living longer than before as modern technology keeps them healthier and more stable. (Though, Jewish sources do note that many of our

historic leaders – Abraham, Sarah, Moses and many of the kings – were involved and active well into their old age.)

The local Jewish community, says Ackerson, provides a safety net and services to help its senior age with dignity. For example, Levindale and Levindale Rehabilitation Services, Kosher Meals on Wheels, THE ASSOCIATED/ Comprehensive Housing Assistance, Inc. (CHAI) Weinberg Village buildings, Jewish Community Services’ senior services and social programming through the Jewish Community Center and the Edward Myerberg Senior Center, are among the offerings. There are also more opportunities for seniors to volunteer, give back to Jewish Baltimore and feel needed through programs like Jewish Volunteer Connection.

The services provided, says Ziffer, are in line with our Jewish law and tradition.

“As Jews, we do not worship youth and youthfulness. We value and respect people of all ages, but most especially those who are older and have life experiences from which we can learn,” he says.

Says Ackerson: “We don’t send our elderly out to pasture, we use them for their skills, experience and wisdom.” **JSL**

Maayan Jaffe, a former journalist, is Marketing and Communications Manager at THE ASSOCIATED.





Starting Over:

A Roadmap for Older Job Seekers

Those facing lay-offs and downsizing are struggling with a slow economic recovery and outdated skill sets as they look for new career options.

By Barbara Pash



WHEN CIVICVENTURES, a thinktank for Baby Boomers in the workforce, coined the phrase Encore Careers in 2008, it was intended to encompass those older adults who were winding down their primary careers and had the luxury of the time and resources necessary for them to pursue meaningful endeavors that would feed their souls more than their bank accounts.

But, thanks to an uncertain economic climate unfolding around them, many of the adults who might have considered this option suddenly found themselves in need of their paychecks to compensate for their dwindling retirement accounts.

If one is fortunate enough to have the time and ability to serve the community and utilize his or her skill set, our community does offer a variety of opportunities for hands-on volunteerism. Through THE ASSOCIATED's Jewish Volunteer Connection and ASSOCIATED agencies such as Jewish Community Services (JCS), interested individuals can select volunteer activities that suit their needs and interests.

Likewise, our community provides resources for the older adult who might be looking to re-enter the work force or find a new direction following a layoff or downsizing. Through Career Services at JCS, older adults can find the resources they need to help them through both the preparation and the search process. An important early step in the process is helping the client manage his or her expectations of the job search which can be "a huge shock," says Tracey Cohen

Picture of **Nancy Surosky** by Bryan Dunn, Baltimore County Communications.

Paliath, director of Economic Services at JCS, who oversees career services, service coordination/case management and financial assistance. Paliath noted that career coaches at JCS work very hard to maintain a positive outlook and offer solid, useful advice to their clients who may become disheartened by the rigors of job seeking today.

For many older workers, the search might represent the first time in years – perhaps decades – that they are pounding the pavement looking for work. After a 23-year-long career as an advertising saleswoman for a local magazine, Nancy Surosky was downsized and found herself looking for a new opportunity as print media declined.

She quickly landed another sales job, then spent an unhappy year realizing it was not a good fit. Surosky left and took a few-months break to decide on her next move. During this time, though, Surosky, a 58-year old single mother, hired an expert to update and tailor her resume to different fields, contacted everyone she knew professionally and applied for a range of jobs in communications and marketing.

Today, Surosky is a special assistant to Baltimore County Executive Kevin Kamenetz

“Older workers may not know how to network. Either they don’t follow up [the initial contact] or they follow up too much.”

for community outreach, one of a team of four that serves as the administration’s liaison with local organizations and businesses. “I was available and I could translate my skills,” Surosky says of the transition.

Paliath concurs with that approach. “Our advice is to look for transferable skills,” she said. “Perhaps you’ve been selling wholesale for 25 years. You can talk about transferring those skills within the sales job category.”

Surosky took several important first steps in her initial search and throughout the time she was unemployed. She made sure her resume was up-to-date and she networked with a wide range of contacts throughout the community.

Ronnie Green, a JCS career coach and coordinator of the JCS Center for Business Development and Meetup, recalls a client who touted his 40 years of experience in the first line of his resume. Although he had reason to be proud of his longevity, that line was the first entry on his resume Green suggested he change. “You don’t want to age yourself,” she said.

Age discrimination in hiring (and firing) is illegal. While the interviewer probably won’t mistake you for a thirty-something, you don’t have to “appear” old. For example, Green suggests, at an





Quick Job Hunt Tips

(Especially for the Older Workers)

The Search:

- ✓ **Have a plan and a goal.** Be realistic – you're unlikely to make the same salary you did before.
- ✓ **Tell everyone** you're looking for a job (don't be embarrassed; you have plenty of company).
- ✓ **Network** – attend programs offered by Jewish Community Services and other groups; join LinkedIn.
- ✓ **Update your skills**, especially with computers.

Resume:

- ✓ Choose a format that highlights your skills and accomplishments.
- ✓ Omit graduation date(s).
- ✓ Limit work history to last 10 to 15 years.
- ✓ Include relevant volunteer activities.
- ✓ No spelling mistakes or typos, please.

Cover Letter:

- ✓ Tailor to company and/or job to which you're applying.

Interview:

- ✓ Research company, ask substantive questions.
- ✓ Be friendly but not overly talkative.
- ✓ Do not make comments that age you, ie, "the time before computers," "the good days."
- ✓ Do not immediately ask about vacation days, leave time, salary.

Resources:

- ✓ Jewish Community Services' Center for Business Development, 410-843-7433
- ✓ Jewish Volunteer Connection, 410-843-7490

“It’s important for people to know they are not alone and have a place to turn for guidance and help.”

interview avoid talking about the “good old days,” as obvious as that sounds. She also recommends removing the year you graduated from college on your resume and including only your most recent work history, going back 10 or 15 years.

Networking is also an important tool in helping to find a job. Ideally, networking begins while you have a job, not only with your co-workers but in your wider field. If not, you can network after a job loss. Career coaches generally counsel their clients to share news of their job loss as widely as they can because leads often come from unexpected places. Many job seekers may avoid this approach because they are embarrassed by their situation. Conversely, by sharing the news, they might also learn that they are not alone and can access support from others in similar positions.

“Older workers may not know how to network. Either they don’t follow up [the initial contact] or they follow up too much,” says Paliath, who suggests joining LinkedIn, a business-oriented social networking site. JCS can help clients learn to use the site effectively, and because it enables users to see their contacts’ contacts, the reach can be especially broad in one’s chosen field.

In addition, JCS offers a number of

networking opportunities and resources for job seekers. Jumpstart is a weekly, two-hour session that provides an overview of the job search process. The Job Club meets weekly for networking. Meetup is a monthly networking group for those starting their own businesses. The Career Center also has a library with job leads, resume writing and computer skills classes, and individual career coaches who advise and direct clients.

Some people take another route to a new career. After a discouraging job search, they switch to a new field entirely – usually a hobby or long-time interest. The media are full of stories about second careers, where the burnt-out corporate lawyer becomes a chef and the laid-off top-level advertising executive opens an antiques store. This approach can create a false hope in job seekers who believe they will be able to achieve success by finding the next “big” thing.

Paliath cautions that this is a tough route to take. To her, the story behind the stories is being prepared to finance the venture yourself (“small business loans are unheard of”); taking on all tasks, from administrative to sales; and doing without a steady paycheck. “It’s not a matter of when but if you can make money from it,” Paliath says of such second careers.

Whatever the approach might be, Paliath and Green both recommend finding and using all the resources available for job seekers, in the community and online. Said Green: “It’s important for people to know they are not alone and have a place to turn for guidance and help.” **JSL**

Barbara Pash is a local freelance writer.

Capitol Hill Village members enjoy
the opportunity to dine together.
PHOTO CREDIT: Diane Brockett

It takes a Village



Jewish Baltimore considers a new model to ensure seniors can age in their homes safely and with dignity.

By Maayan Jaffe

MIRIAM GOLDSTEIN,* 83, was an active and vibrant older woman. Last winter, however, she decided to go for an evening stroll. Miriam had just installed a small fence around her garden. She wasn't used to it and in the dark she forgot, stumbled over the fence, incurred three fractures and landed in the hospital. All alone, she called Capitol Hill Village, D.C.'s volunteer-based senior support system. Within 24 hours, Capitol Hill coordinated a plan to ensure Miriam's cat was fed, her plants were watered and her yard was kept while she was in the hospital. When she returned home, a volunteer picked up and delivered her prescriptions and other medical supplies, and rehabilitation services were secured in the comfort of her own home.

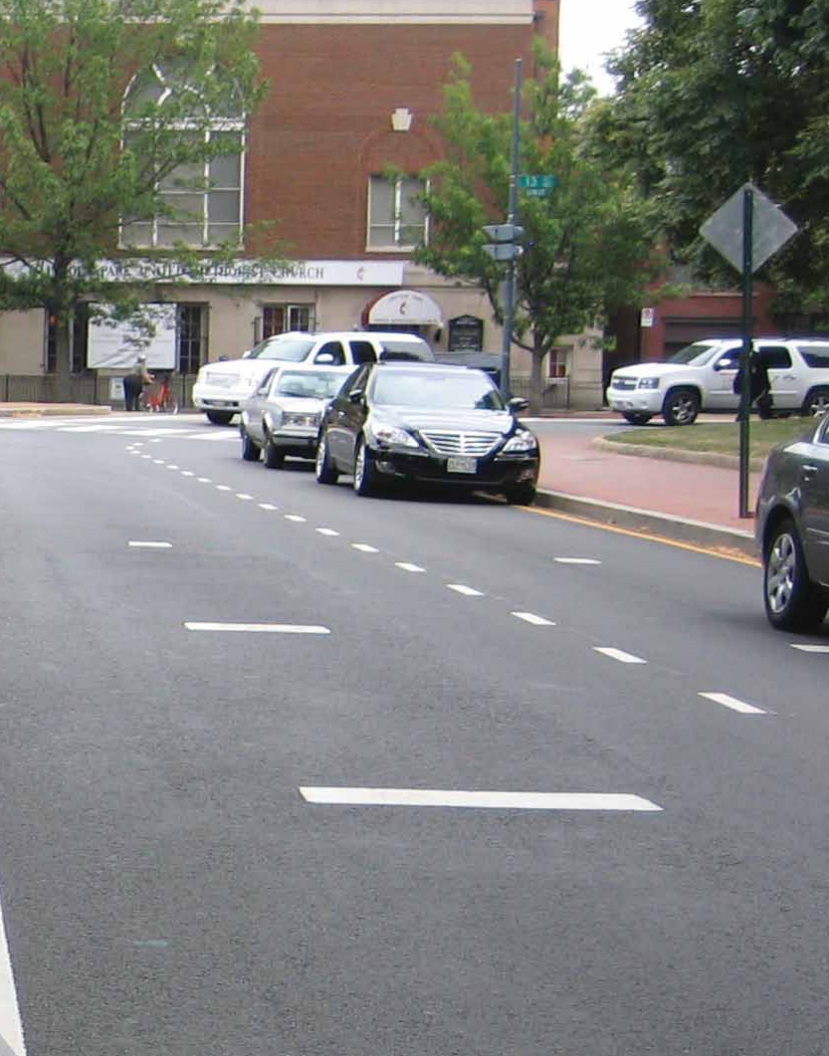
Miriam's story is just one of a collection; before Miriam fell she was an active volunteer member of the community village. After Miriam fell, she needed a village to support her while she recovered. It happened overnight.

Jewish Baltimore has many "Miriams." The results of the 2010 Greater Baltimore Jewish Community Study revealed that the community has a large aging population. The number of seniors over the age of 85 has tripled over the past 10 years. Almost 20 percent of the Jewish population is over the age of 65, which is



slightly up since 1999. These numbers, explains Michael Hoffman, Senior Vice President of Community Planning and Allocations at THE ASSOCIATED: Jewish Community Federation of Baltimore, "will require us to increase our capacity to serve the diverse needs of our seniors. ... It will take an entire community to come together to meet these needs," he says.

As a result of the Community Study, THE ASSOCIATED launched the Senior Life Task Force, a group of lay leaders educated and passionate about aging. Chaired by David Carliner and Lynn Weinberg, the Task Force is an offshoot of THE ASSOCIATED's Commission for a Caring Community. According to Renée Dain, ASSOCIATED Director of Community Services, the Task Force was charged with how to best serve the needs and interests of older adults in the Baltimore Jewish community who wish to



Capitol Hill Village member Roberta Gutman rides a bike through town.
PHOTO PROVIDED BY: Roberta Gutman

remain in their homes and their communities. In addition, according to Weinberg, this will also harness the burgeoning Boomer community, which makes this all the more timely.

The Task Force began with an environmental scan of what programs and services are currently accessible in the Baltimore Jewish community. Then, it surveyed different models across the country and in Israel, including the American Jewish Joint Distribution Committee's Support Communities program, to learn of Jewish Baltimore's options. The village model, or something based on that idea, a grassroots, membership-based model where services are provided to seniors by other senior members, volunteers and vetted vendors, is the recommendation the task force is considering. Says Don Goldman, Executive Director of Jewish Family Services in Overland Park, Kan., the village model means 24/7 assistance, the ability to call for help at anytime.

UNDERSTANDING THE 'VILLAGE'

The village model concept began in Boston's Beacon Hill neighborhood in 2001. According to the Village to Village Network (VtV), close to 60 villages now exist in the United States, with another 120 or so in development. VtV provides assistance to new villages and tracks their growth nationwide. One such model, the Capitol Hill Village in Washington, D.C., is nearly in Baltimore's backyard.

Gail Kohn, Advisor to the Board of Capitol Hill Village, explains that the village model works like this: Members pay an annual fee (in D.C. that is \$530 a year for an individual, \$800 for a household of two or more with low-income members paying as little as \$100 per year) in return for services such as transportation, yard work and other home maintenance, home services like preparing meals, bookkeeping and technical support. The village itself only has less than a handful of employees (three in D.C. with a budget of around \$300,000 a year) and most do not provide services directly. Instead, the village serves as a liaison. The majority of the help comes from other able-bodied village members, younger neighbors or youth volunteers looking to fulfill their community service requirement for school. Kohn says in D.C. 85 percent of requests can be handled by volunteers. The other 15 percent are accomplished by vetted vendors.

Capitol Hill Village boasts 235 volunteers, one-third of which are under the age of 30.

"Volunteers flock to us," she says. "We get around eight new volunteer applications per month."

Kohn says her volunteers stick with the

program because they enjoy being with the senior residents and also because they have created a policy of, “just say ‘no.’”

“It is really important not to create guilt, to guilt people into helping, but rather to motivate them,” Kohn says. “Our ‘just say no’ policy has been our best retaining piece.”

Of course, it is also the connection piece, what social scientists call “social capital,” something which many would argue we don’t have enough of in today’s online, techie world. The village model offers a new way to engineer an old-fashioned kind of connection.

A recent AARP survey found that nearly 90 percent of respondents 45 and older plan to stay in their current residence as long as possible. Kohn believes this is not necessarily because of a tie to the home’s physical structure, but because seniors want to remain outside of senior-only neighborhoods, that they crave interaction with younger people. Capitol Hill Village provides a variety of intergenerational programming to meet that demand. For example, one program brings seniors and high school freshman together in the public library where the kids offer informal computer training. Another program provides young moms with a senior mentor. Yet another couples village members with younger folks interested in learning how to knit.

“The secret to this is as people grow older they have more time and that time can be beneficially used if it is needed by someone else,” says Kohn. “Being needed has a big payoff and can be obtained from having people work with one another.”

BRINGING IT HOME

The big question is whether this model could work 100 miles away in Greater Baltimore. Kohn seems to think yes.

“Baltimore has enough population density to provide the interactive stuff that we do.

“Being needed has a big payoff and can be obtained from having people work with one another.”

Surely there are volunteers and vendors that can do anything. You just need to find them and make sure they are reliable,” she says.

This year, according to Dain of THE ASSOCIATED, the community will focus on what she terms “asset mapping” to determine what services, volunteers and vendors are available and could be of use. The community professionals and organizations that would be charged with spearheading this village will also survey local seniors to feel out their comfort with the village concept. At the conclusion of this process, Dain hopes, THE ASSOCIATED and its partners will be able to make a solid recommendation for and pilot a model that draws upon the service examples the Task Force explored in its first year and Jewish Baltimore’s unique strengths.

“It is essential that THE ASSOCIATED provide impactful services to our seniors to maximize their quality of life and enable them to age in place,” says Task Force Co-chair, David Carliner. “We certainly have the expertise to handle our aging population. We are working to create this new model to help us expand our capacity.”

Adds Lynn Weinberg, “The time is also right for seniors themselves to get involved and give back to their community.” **JSL**

Maayan Jaffe, a former journalist, is Marketing and Communications Manager at THE ASSOCIATED. For more information about the plan for a village inspired model in Baltimore, contact Renée Dain at 410-369-9235 or rdain@associated.org.

FOCUSED ON WHAT YOU GAIN:

Assisted Living

Prior to Assisted Living, older adults had few options as they aged and needed “a little help.” They could stay in their own homes and hire someone to come in to assist them. This often isolated them from their friends and limited their socialization. They could move in with grown children but were fearful of the added burden to their children. They could move to a nursing home where they gave up much of their independence in exchange for receiving the assistance they needed. None of these were viewed as good options. The concept of “assisted living” started in the United States in the 1990’s in response to the need for a practical alternative to allow an older population to ease into their maturity.

Assisted Living Facilities (AL’s) were designed to offer aging individuals the opportunity to live as independently as they would like while still having the assistance they needed right at their fingertips. There is a wide range of options when choosing an AL including, but not limited to, size, services offered, cost, ethnicity, location, and convenience. Weinberg Park is a small (36 bed) AL where we strive to foster independence and maintain dignity while individualizing our care to meet the needs of our residents and their families.

Making the move to an AL involves more than just the physical move. It involves the realization that you can no longer function as independently as you used to or would like to function. Frequently, the decision involves downsizing – moving from a house or apartment to an AL. Although initially uneasy with the smaller space, our residents and families soon realize that while their personal space is small, their living space is large, encompassing the entire Weinberg Park campus. Our residents enjoy a private room with bath and are encouraged to individualize their room to suit their taste and personality.



When making the move to an AL, many people focus on what they are losing. At Weinberg Park, we focus on what our residents and their families gain.

You –

Gain a community. Our trained staff is dedicated to meeting the needs of our residents and families. Our residents look forward to welcoming new residents and introducing them to their new home.

Gain safety and security. Each room is wired with call lights for assistance and each resident carries a portable call light for assistance anywhere in the building. Staff is available 24/7 to provide assistance – bathing, dressing, walking, etc.

Gain freedom from the chores of living alone. Laundry and housekeeping are done by our trained staff. Grocery shopping and meal preparation are no longer a burden.

Gain well-being. Healthcare needs are overseen by a Delegating Registered Nurse, who works in conjunction with the resident, his/her personal physician, and family. Medications and treatments are administered by trained Medication Technicians under the supervision of the Delegating Nurse. Residents enjoy three delicious, nutritious, kosher meals and two snacks each day. Meals and snacks are prepared by trained staff under the supervision of the *Mashgiach* from meal plans developed by a Registered Dietician. We accommodate special dietary needs of our residents.

Regain your role in the family. Family members can once again enjoy their role as a spouse, sibling, or child – instead of a caretaker. We provide the care and your family provides the companionship.

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Home Sweet



Assessing the safety of one's surroundings is a critical aspect of the decision to have older adults remain in their homes as they age. PHOTO CREDIT: Jeffrey Lamont Brown. Copyright: JFNA

Q & A

By Melinda Greenberg

MAKING A DECISION to sell one's home and move to a senior facility can be a very difficult process for older adults, and if their children and caregivers are also involved in the decision, it can be a very emotionally-charged experience. Rona Gross, Senior Home Benefits Coordinator for CHAI (Comprehensive Housing Assistance Inc.), helps older adults and their families navigate this process and select an option that fits everyone's needs. CHAI manages 14 senior buildings in the community and offers a variety of services to seniors and their families to help make this time of transition as smooth as possible. Gross answered questions about this process during a recent interview.

When should an older adult and his or her family begin thinking about housing options?

The timing really depends on how well the individual is functioning physically, emotionally, mentally and socially in the current arrangement. The family can call in a social worker to do assessments of the individual and of the environment to determine if it is safe and a good fit for an older adult.

Also, accessing an apartment in a desirable location, such as the Weinberg buildings, does entail some future planning because, depending on the building, waiting lists for a spot can be one to two years long. I actually advise people to put their names on as many

Home

Q & A

of the Weinberg building waiting lists as possible to increase their chances of obtaining an apartment in the shortest amount of time.

What if the individual wants to remain in his or her home?

Moving can be a jarring experience for an older adult and they are often hesitant to leave behind their homes and the family memories they made there.

If the individual wants to remain in his or her home, it is important to determine if this is a safe option for him or her. In such cases, CHAI's senior home repair program supports them in this goal through our senior home and weatherization days, ongoing subsidized home repairs and modifications, referrals and advocacy for housing-related issues, and safety and home repair services in preparation and in response to events such as the earthquake and hurricane last summer.

What are some of the options available to people who are unable to remain safely in their homes?

The options available fall on a spectrum ranging from independent living communities, such as the Weinberg buildings, to

continuing care communities which provide a range of living situations from independent through skilled nursing care, assisted living facilities and nursing home. Where the older adult falls on this spectrum depends on the level of support he or she needs with daily living activities. If there is an illness or dementia involved, that too will impact the level of care the person needs. It's important that families take a realistic look at the situation when choosing the level of care. It is not ideal to have to move an older adult twice if the need changes in the future.

What are some of the services CHAI offers to help families or older adults facing this decision?

We provide customized advice for each individual, everything from referrals to professional organizers to advocacy to connecting them to our colleagues at Jewish Community Services if there is a need for therapeutic assistance.

What do you see as the greatest challenges in our community pertaining to housing for older adults?

There is a need for support for vulnerable seniors, often those who don't have family

locally. They may not be getting the assistance they need because they do not know how to access what is available to them in the community. We are fortunate to live in a community that does have services available to help our seniors live safely and independently in their homes or comfortably in senior facilities, but if they don't know how to access these services, the seniors may miss out on what they really need.

In addition, many of our buildings have long waiting lists for apartments and people are waiting months or years to move. If someone has the luxury of time to wait, it's not a problem, but if an older adult is in a situation in which he or she must move to be safe, then the wait can present a huge problem for the senior and his or her family.

If you or a family member needs the support services offered by CHAI, please contact Rona Gross at 410-466-1990. **JSL**

Melinda Greenberg is Vice President of Marketing at THE ASSOCIATED.

ASK THE EXPERT: Private Home Care

Imagine you are a woman in your 80s, living alone in Pikesville, facing both the physical challenges of aging and the added burden of dementia. Your children are caring and supportive, but your son lives in California and your daughter's family resides in Canada. Your children come to visit when they can and check in on you regularly. But what about your day to day needs, those you cannot handle alone. Who can you turn to? You want to remain in your home, but that is becoming increasingly more challenging. Where can you go to find the support you need to stay in the home in which you built so many of your most precious memories?

Private Home Care, LLC, strives to fill that void, to provide compassionate care for older adults in their homes and a sense of security and comfort to our clients and their families. It is often difficult to meet the demands of caring for a loved one. The stress and time commitment involved in providing this care can jeopardize the well-being of the caregivers. Private Home Care is able to extend support to the primary caregiver, usually a spouse, and provide respite. We are proud to be a Jewish, women-owned and operated company established by experienced healthcare professionals. Private Home Care, LLC is a licensed Residential Services Agency authorized by the Department of Health and Mental Hygiene to provide personal care aides and skilled nursing services. Our clients range from older adults who need assistance with activities of daily living, or recently discharged hospital patients in need of temporary

help, to those who just need companionship. We are sensitive to diverse religious observances of our clients and ensure kashrut and modesty rules training for our caregivers.

Knowing how substantial the cost of care can be to our clients, we have developed a scaled rate system that allows people who require more care to save by providing them with lower rates than those given to clients requiring less care. We ensure clients stay in their homes longer by making your savings and long-term care policies go a long way. We offer our Holocaust survivors a discounted rate and assist financially-struggling families the same way on an individual basis.

Private Home Care, LLC is insured, and bonded. We strive to provide quality care by assuring the credentials and experience of our caregivers. We put all staff members through a vigorous criminal and professional screening process prior to hiring them and require

them to maintain and grow their level of expertise by participating in continuous training and education programs. All our caregivers work under the oversight of a Registered Nurse. Private Home Care, LLC is a Maryland Medicaid vendor providing services through the Medicaid Waiver for Older Adults Program. In this capacity, we provide personal care, nurse monitoring, respite care, behavioral consultations, and family and consumer training. We serve clients throughout Baltimore City and County and also work in the surrounding counties.

Our staff responds to various needs, combining their expertise and skill with genuine compassion and understanding. Our goal is to enhance the quality of life for our clients, and by doing so, we also give peace of mind to their families. Many of us are also dealing with the care of our own elderly relatives so we know firsthand the difference quality care can make for both our clients and their caregivers. We are proud to be able to provide such an important service to our clients and welcome the chance to serve your family too.

For additional information contact Private Home Care, LLC at 410-486-6565 or go to our website: www.phcmd.com





Pursuing Your Passion

There are many ways for older adults to learn new skills or sample new hobbies at organizations throughout our community.

By Barry L. Silverman

WHAT DO YOU want to do when you grow up? It's a question often asked of young people in their early teens.

And while there are many that get to pursue their dreams, there are many more that have to leave their true desires and passions for later. Well, now it is later.

Do you have a passion for painting a masterpiece or sculpting a piece of art that someone would actually pay real money for?

Have you ever thought of learning Hebrew or delving into the wonders of Jewish learning and getting a baccalaureate degree in Jewish studies?

Or perhaps now that you are grown up and have time on your hands it may be time to feed your passion for volunteering and help make life a little better for others in the community.

If you're passionate about any of these subjects and more, there are plenty of ways to pursue them right in your own backyard.

"We're trying to satisfy as many different passions as we can."

Between the Edward A. Myerberg Center in Baltimore, the Jewish Community Centers in Park Heights and Owings Mills and the Baltimore Hebrew Institute at

Towson University, people's passion for learning, creating and discovering are being satisfied hundreds of different ways every day throughout the year.

At the Myerberg Center, the hallways are adorned with a remarkable array of inspired paintings by seniors. Adrienne

Blumberg, Myerberg's

Program Coordinator,

said that from 150–200 seniors

participate in classes taught by respected art instructors and professional artists.

"Some of our students have never painted before," Blumberg said. "And that's fine. All of our instructors are well known in the art community and are dedicated helping each student develop their own technique."

According to Helen Dagilis, the Myerberg Center's marketing director, the center offers 12 and 13 week classes year round which produce enough work to have two art shows

Paul Timin, like many of his peers, began studying painting later in life and is now enjoying his new found creative outlet.
PHOTO BY: Stuart Zolotorow.

a year. “The shows are exciting for the students and their families,” she said. “Everyone gets a real kick out of having their work displayed.”

For 70-year old Paul Timin, painting became a new passion thanks to an old one. Timin, a semi-retired social worker, said he always enjoyed photography. “Over the years, I’ve shot a wide range of subjects, from city life to people. Someone suggested that I should recreate my photographs as paintings,” Timin said. “Now I’m doing more painting than shooting.”

The students also help each other and look out for each other. “There’s a real bonding among the students and students with the instructors,” Dagilis said. “Everyone looks forward to seeing each other and if someone doesn’t show up a few times they’ll start calling them to see where they are.”

In addition, the Myerberg also offers clay sculpting classes and for those who have a passion for singing, there is the Center’s Chorale that consists of 40–50 members and has performed at the Kennedy Center for the Performing Arts in Washington, D.C.

A passion for Jewish learning?

Take it to a higher degree at the Baltimore Hebrew Institute. Three years ago, Baltimore Hebrew University’s graduate programs were integrated into Towson University, adding seven full time faculty members and top rate graduate programs in Jewish Communal Service, Jewish Education, and Jewish Studies to the university’s extensive academic offerings, and Baltimore Hebrew Institute became a vibrant, new department in the school’s community.

Jill Max, the Institute’s Associate Director, wants people to know that the Baltimore Hebrew Institute (BHI) has a lot to offer adults, who not only want



to broaden their horizons, but also can take undergraduate and graduate courses on their way to a master’s degree.

“We have a broad program,” Max said. “We offer courses in Hebrew language and literature, European Jewish history, Jewish law and ethics, Jewish education and communal service.”

Also offered are lectures, trips, conferences and seminars throughout the year. One trip in September, “Crossing Delancey,” explored the culture, architecture and spiritual significance of the lower east side of New York City.

As for the cost of BHI courses, Program Coordinator Michelle Taylor noted that adults over 60 can take advantage of the university’s Golden I.D. Tuition Waiver Enrollment program.

“For a \$75 flat fee per semester, someone can take up to 11 credits of graduate or undergraduate courses and pay only \$7 a credit,” Taylor said. “The Golden I.D. Program also comes with substantially discounted parking fees and discounts to campus cultural events.”

In addition, BHI’s adult education courses in Biblical Hebrew and Modern Hebrew are hosted at Beth El Congregation in Pikesville.

ASK THE EXPERT: AARP Resources for Older Marylanders

AARP: Helping Americans 50+ Live Their Best Lives

AARP is working to ensure Americans 50+ have choice, control and independence through every stage of their lives.

Finding A Job

AARP is helping older workers find jobs through our online job board. This tool allows users to search among more than 1 million job listings. The jobs are searchable by state and zip code, part-time and full-time status, specific company and further broken down by industry, occupation and title. The job board can be found at <http://jobs.aarp.org>.

Preparing For Your Retirement

AARP is helping Americans prepare for retirement by providing a retirement

calculator that will allow them to answer key questions: Am I saving enough? When can I afford to stop working? How long will my money last? The calculator can be found at www.aarp.org/retirementcalculator.

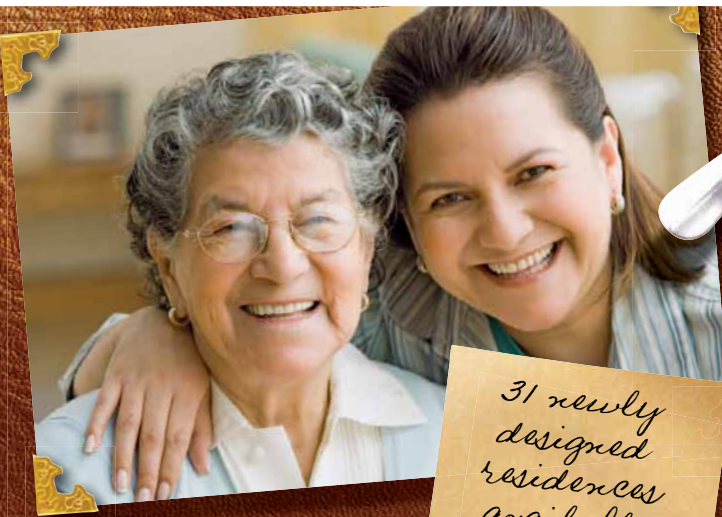
Preserving Your Independence And Choices

Decide.Create.ShareSM is AARP's national campaign dedicated to increasing awareness among boomer women about long-term care planning. The campaign website offers timely, relevant news on long-term care, interactive tools and information tailored to women interested in planning for their long-term care, including glossaries, polls, and an online community for women who are considering their options and planning for their future. Go to: www.aarp.org/decide.

Driving Safely As You Age

Even though older drivers are generally safe drivers, cars have changed. So have traffic rules, driving conditions, and the roads we drive on every day. Older drivers can sharpen their driving skills and refresh their knowledge of the rules of the road by taking the **AARP Driver Safety Program** classroom or online course. To learn more visit www.aarp.org/drive or call 1-888-AARP NOW (1-888-227-7669). Also available is the **Getting Around Guide** (www.aarp.org/gettingaround) for those who no longer drive or are interested in going "car-lite."

AARP www.aarp.org/md



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At the JCC, they're as passionate as you are.

Both the Weinberg Park Heights and Rosenbloom Owings Mills Jewish Community Centers have a full menu of adult life programs and classes. Melissa Berman, Assistant Director of Adult Life, said that the JCC is always working to update the classes and activities to give seniors what they want.

"We're trying to satisfy as many different passions as we can," Berman said. "This year, we started an Introduction to Poetry Workshop and Chair Yoga for age 50 plus."

In addition to sculpture, ceramics, studio painting, wellness classes, computer classes, dance classes, book clubs, field trips, plus Bridge and Mah Jongg for all levels, the JCC also welcomes seniors to get involved in a number of volunteer opportunities throughout the year.

"We have something for everyone," Berman said. "Now we are also able to offer reduced rates on membership for adults 65 plus."

For more information about these programs, please contact the following people:

- **Baltimore Hebrew Institute** – For information about pursuing a degree or auditing credit courses, contact Recruitment Specialist, Loryn Strauzer, at 410-704-4719
- For **Adult Education** information, contact BHI Associate Director, Jill Max, at 410-704-7120
- For **Adult Education Hebrew** courses, contact Program Coordinator, Michelle Taylor, at 410-704-7118
- **Jewish Community Center** – Melissa Berman, 410-559-3593 or mberman@jcc.org
- **Myerberg Center** – Adrienne Blumberg, 410-358-6856; www.myerbergseniorcenter.org

JSL

Barry L. Silverman is a local freelance writer.

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ASK THE EXPERT:

ADVERTORIAL

The smell of freshly baked bread drifts from the kitchen. Old friends chat as a dog chases a tennis ball nearby. These are the sights, sounds and smells of what senior living should be.

Your Golden Years aren't a time to “settle.” After a lifetime of hard work, you should enjoy bright, elegant and friendly surroundings—where you can indulge in hobbies, challenge your mind and commune with nature.

To be happy, you don't have to live in the house where you raised your family. “In fact, the older we get, the more overwhelming owning a home can become,” says Aric

Spitulnik, president of Levindale Hebrew Geriatric Center and Hospital. “That’s when it’s important to research new living options, so you can make life worth living without the headaches.”

His first tip: Start with a checklist of the things most important to you. Examples may include:

- Privacy, both with bedroom suites and bathrooms
- Internet connections
- Pets that live with you
- Beautiful grounds
- Nearness to shopping and museums
- Closeness to family
- Proximity to medical care
- Being treated with respect and compassion

Aric’s second tip: Get recommendations from friends, houses of worship, aging organizations and the

Internet, and check each place yourself, if possible. “The old institutional feel of nursing homes is not good enough for our elders,” continues Aric. “That’s why Levindale’s \$31 million construction project—to create a modern, warm home that fits the desires of seniors ‘on the go’ and of seniors seeking dignified care—will be ready for residents in January 2012.”

Aric’s third tip: Give yourself enough time to figure out what accommodations will guarantee you a lifetime of fulfillment, and then take action.

For more information about Levindale, call **410-601-WELL (9355)**.



ELDER CARE MANAGEMENT

Individualized solutions for the family

By Jacqueline Kreinik, R.N., M.S., CMC

SHARED STORIES

The voice on the telephone paused. “...I don’t remember when my Mom first started to have so much trouble with her memory. I think she’s tried to hide it from me and my sister.” Another pause.... The telephone went suddenly quiet and my mind raced to the many times I have heard this familiar deep pause of sadness. Mom was now forgetting his face and the faces of her grandchildren.

“Dad refuses to give up his driving license. His eyesight and reflexes are failing. My brother and I have pleaded with him for months. He doesn’t want to ask us for a ride every time he wants to get together with friends for coffee or needs to go to the doctor. But he could hurt himself or others. What do we do?”

“My husband has always worked hard to get the job done, but since he had a stroke, now he doesn’t have the same balance. I’m worried about him. I think he is going to fall without using a walker, but he says he doesn’t need one.”

Different families, yet familiar stories of elders and their families needing to adjust to changes brought on by aging. Not all elders experience the same changes and problems, but all elders face the realities of having to adjust their daily

habits and activities to accommodate their personal strengths and weaknesses.

ELDERHOOD: STARTLING STATISTICS

We are facing an explosive growth in the senior population. The U.S. Census estimates that over the next 30 years, the number of seniors age 65+ will double from 40 million to 80 million. The 2010 Greater Baltimore Jewish Community Study, conducted by THE ASSOCIATED, found that, in the past decade, the number of people ages 85+ in Baltimore has more than doubled, from nine percent to 20 percent of the senior population. By the time the last baby boomer turns 65 in 2029, one in five Americans will be age 65 years or older.

With increasing life expectancy, almost all of us will provide care for an aging loved one, whether it is a parent, spouse, or another relative. These responsibilities can be stressful. The current health care system is difficult to navigate, options confusing, and resources hard to find. If you are an elder or you are caring for a loved one, you are probably facing some challenges, and major decisions may be looming. You need answers and solutions, but don’t know where to turn.



ELDER CARE MANAGEMENT PROVIDES SOLUTIONS

Elder Care Management is a comprehensive service designed to support older individuals in their desire to continue living in their own homes or in other settings with maximum independence and dignity. Sometimes called Geriatric Care Management or Senior Care Management, this set of services is designed for individuals 60+ years of age and their families. Whether an elder is aging at home, in an Assisted Living Facility, Continuing Care Retirement Community, or Skilled Nursing Home, Elder Care Management provides practical support and caring options to manage the many issues that develop as we age.

Elder Care Management begins with a thorough individualized assessment by a professional Elder Care Manager, focusing on your older relative's current physical, emotional, mental, cognitive and social health, as well as safety in the current environment.

This assessment identifies and emphasizes the individual's strengths and becomes the basis for a set of recommendations and a personalized plan of care.

The Care Plan involves ongoing communication by the Care Manager with the family, and ensures that all appropriate services are in place and contributing fully to the individual's well-being. The Care Manager can arrange and coordinate services including:

- home health and personal care
- physical and occupational therapies
- bill-paying
- medication management
- companionship to reduce isolation
- podiatry
- home adaptations for safety and comfort
- in-home medical care
- selection of assisted living or other care environments and more...

Professional Elder Care Managers are licensed nurses and social workers who have expertise in aging. Their professional training and certification ensure the knowledge and skills necessary to address the physical, cognitive, emotional, and medical needs of elders.

Elder Care Managers are accessible to the client and family 24/7. They can advocate for their clients with primary care physicians, specialists, and other members of the health care team, to ensure that medical care is coordinated. They can accompany individuals to medical appointments, review and recommend improvements in care for those in assisted living and nursing facilities, and advocate for individuals during crises such as hospitalization.

In sum, Elder Care Management:

- Offers positive solutions to help our aging loved ones cope with individual challenges and changes
- Provides guidance, resources, and respite to family caregivers, whether near or far away
- Assesses individual strengths to build a wellness plan that enables elders to live safely and with as much independence as possible
- Coordinates care and services
- Helps individuals and families plan for their elder years.

PLAN AHEAD WITH ELDER CARE MANAGEMENT

Most of us want to choose where we live and the type of care we wish to have. Elder Care Management can be used as a preventive step in planning ahead for yourself or a loved one. You don't have to wait for a crisis in order to use these services. An Elder Care Manager can work with your family to help you assess strengths and needs, explore options, and plan for the future to ensure the best quality of life for your aging loved one.

JSL

Jacqueline Kreinik, R.N., M.S., CMC, is Manager, Elder Care Services, Jewish Community Services, Baltimore, MD. For more information about Elder Care Management, call 410-466-9200, or visit www.jcsbaltimore.org/care-management.

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ASK THE EXPERT:

Health Care Today—It's Good To Be Home

Preserving independence and quality of life is a primary concern for senior citizens, yet they are often reluctant to admit they need assistance to remain at home. Often, help from family or facilities may be unavailable or cost-prohibitive. For many, the ideal solution is home health care.

What is Home Health Care?

Home health care includes medical or non-medical services provided in a client's own home. Whether you need nursing or therapy to recover after a hospital stay, or assistance with daily activities, home health care services can help people remain safely at home. Medically necessary care may be

covered by Medicare, Medicaid, or private insurances.

Choosing a Provider

The following will help you ask the right questions to ensure you get the answers you need to choose the provider that's right for you.

- How are employees selected and supervised?
- Are employees fully insured and thoroughly screened?
- Is the agency licensed and accredited?
- How is scheduling handled?
- How is the care plan determined?
- How is insurance and billing handled?

Peace of Mind

For many, home health care is the best way to preserve independence and quality of life. By conducting research before hiring an agency, you'll feel better about your decision and ensure that your experience is positive.

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Personalized Planning

One size definitely does not fit all when it comes to preparing for your retirement.

By Barbara Pash

WHEN IT COMES to retirement planning, Charles Winner has seen it all. He has seen people underestimate how much money they will need to live on, not plan realistically for the future, and operate under the belief that they will work forever.

An attorney with 30-plus years of experience, Winner specializes in estates and trusts. To him, estate planning – and that includes making a will – and retirement planning are interrelated.

“Both involve looking ahead. There are tax aspects [to your estate] upon retirement,” said Winner, a partner in Fisher & Winner as well as a board member of THE ASSOCIATED: Jewish Community Federation of Baltimore, chair of THE ASSOCIATED’s Planned Giving Roundtable (PGRT) and past chair and current member of the board of Levindale Hebrew Geriatric Center and Hospital.

Retirement planning is often a team effort. An insurance agent, financial planner, accountant and/or attorney may be involved. Winner begins the process with a comprehensive questionnaire that requires clients to ask themselves the hard questions: assets, debts, tax status, family obligations.

It is a personalized process. “One size

does not fit all,” says Winner, although assets do make a difference in the planning process.

Winner talks of three general categories: wealthy individuals with assets of \$5 million or more; “comfortable” individuals with assets like a house and no major illnesses, but also obligations like children in college; and individuals whose assets are small. The higher the assets’ value, the more complicated the estate planning is likely to be.

Most people rely heavily on their advisor – whoever that person is – for retirement planning advice, according to Michael Friedman, senior vice president of Legacy and Endowment at THE ASSOCIATED.

For that matter, continues Friedman, an attorney himself, the only reason many

“You have to determine how much money you need to continue your lifestyle without earned income, and calculate the cost of living increases.”

people even have a 401(k) retirement plan or pension is because their employer required it, but they haven’t done any other planning.

Friedman works with people of all ages to include a charitable component in their retirement plans. Most of them, though, are either nearing

ASK THE EXPERT: Hospice Care

People often have the misconception that hospice is about giving up. To the contrary, hospice actually adds to the care a patient already receives. It doesn't take away care from their physicians or treatments for other conditions they may have.

It's never easy to know when the time is right, but you may want to discuss hospice with your physician if any or all of the following are present: progressive declining health, frequent hospitalizations, repeated or multiple infections, shortness of breath and/or increased or uncontrolled pain.

The goal of hospice is to provide the care you and your loved one need at a critical time in life through a multi-discipline approach. Seasons Hospice, for instance, has a Circle-of-Care that begins at referral and ends with bereavement; which consists of the patient's personal physician, a hospice physician,

nurses, nurses' aides, social workers, Chaplain/Rabbi, music therapists and volunteers.

These professionals, including the hospice physician, come to you wherever you are for intermittent visits. The frequency is determined by your needs but we are available for questions, concerns and emergencies 24 hours a day, 7 days a week. If you develop uncontrolled symptoms in a home setting and would benefit from round-the clock nursing care, inpatient hospice is available for aggressive symptom management.

These services are covered by most commercial insurances and Medicare and Medicaid at 100%. Regardless of a patient's ability to pay, Seasons Hospice believes all patients deserve end of life care.

We are born into a world of comfort, warmth and love, and it is our belief that we should all leave this world in the same way.



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Retirement Plan

Retirement Planning Tips

FROM MICHAEL FRIEDMAN

- List the value of all the assets you and your spouse own, including: Home and other real estate; cash (in bank accounts, money market accounts and CDs); investments (stocks, bonds, mutual funds); retirement accounts (401(k), IRA, pensions); life insurance; interest in a business; valuable personal property like art, antiques, jewelry, vehicles.
- Have a will, which is often part of an overall estate plan.
- Decide who will take care of you if you are incapacitated; give them power of attorney and a medical advance directive to do so.
- Review your life insurance policies, to make sure they are current and the beneficiary designations are up-to-date.
- Give to charity in a tax-efficient manner.

To learn more about Planned Giving, visit www.associated.org/planyourlegacy.

retirement or have already retired and are looking for an “end-of-life” estate plan.

To Winner, retirement starts when you are no longer receiving a steady paycheck. “You have to determine how much money you need to continue your lifestyle without earned income, and calculate the cost of living increases,” he says.

Winner finds the two most common mistakes are: not being realistic about expenses and not knowing your priorities. “If you love to travel, how are you going to do that when there’s no steady income and your investments are dropping in value?” he asks.

One consideration for retirement planning is home-ownership and second homes. If you currently live in a two-story home, should you sell and move into a one-story home, a condominium or, perhaps, a retirement community? If you own a second home in another state like Florida, have you arranged for its disposal to minimize estate taxes?

One of Winner’s clients owned property in West Virginia. When he died, the state of West Virginia offered to buy the property. He had seven children. Six agree to sell, one did not. Says Winner, “In planning for retirement, it would have been a simple matter to insert a provision that upon his death, the property be sold.”

Another consideration is health care, and, in particular, who will take care of you if you’re incapacitated. That decision may require your assigning someone with both a power of attorney and an advanced medical directive. Winner has seen situations where that decision was not made in advance but, rather, left to siblings who hadn’t spoken to each other in years.

Winner has a career-full of similar stories. He talks about the wealthy man who had a wife, four children and a long-time girlfriend, and who was relieved to hear that the state of Maryland does not recognize palimony. Another client, an elderly widow with adult children who rarely visited, became fond of a neighbor who took care of her and to whom she left her estate when she died.

Friedman sees retirement planning from a different perspective. He helps people

integrate their financial estate and charitable giving into a single plan.

Friedman gives two examples. One is a charitable gift annuity. Life insurance companies offer annuities but so do charitable organizations like THE ASSOCIATED, which offers charitable gift annuities at competitive rates based on age.

“You can give to charity, take a charitable deduction and get a fixed income for life. A portion of the income you received during your lifetime will be tax-free. At death, the remaining balance of your annuity goes to THE ASSOCIATED’s endowment,” says Friedman, adding that this vehicle is especially popular with people age 75 and up.

Another example involves use of IRA retirement accounts for charitable giving.

The federal government requires you to start taking mandatory distributions from your IRA at age 70-1/2. At that age, you can donate up to \$100,000 per person per year from your IRA directly to charity tax-free.

Friedman says this vehicle is popular with a wealthy demographic. “If you are already making charitable gifts and you don’t need the IRA income to live on, using your IRA for charitable giving makes a lot of sense,” he says.

Says Friedman, “There are many tax-advantaged ways to fulfill your estate planning and charitable gift objectives. You can discuss them with your tax advisor and with the professional staff at THE ASSOCIATED.” **JSL**

Barbara Pash is a local freelance writer.



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Johns Hopkins and THE ASSOCIATED:

MAKING

Alzheimer's Care a Priority

A study launched by the two organizations will address the needs of individuals dealing with dementia and the caregivers who work with them.

By Barry L. Silverman

WHILE WAITING to find a cure for Alzheimer's, it only makes sense to improve the level of care.

That's the motivation for a five-year study initiated by Johns Hopkins Hospital neuropsychiatrist, Dr. Constantine Lyketsos, and THE ASSOCIATED: Jewish Community Federation of Baltimore, led by businessman and philanthropist Leroy Hoffberger.

Their motivation and vision are driven by the fact that, within the next two decades, the first of the 90 million baby boomers will turn 65 years of age.

And, according to Alzheimer's Association statistics, there are 5.2 million people today 65 and older with Alzheimer's. And by 2030, that number will increase by nearly 50 percent to 7.7 million.

This staggering number, along with the dearth of local facilities dedicated to caring for Alzheimer's and general lack of knowledge about this most prevalent form of dementia, led Lyketsos to create a study of how best to care for Alzheimer's patients as well as how to train their caregivers.

The only problem was finding the funding needed to do a study that would provide valid

statistics and information needed to create a replicable model of care for community agencies to use in providing needed services. A chance meeting by Hoffberger with a mutual friend of Lyketsos' led to the creation of the study.

"Since I joined the Board of Levindale in 1950, I have had an interest in care for the elderly," Hoffberger said. "When this friend told me of Lyketsos' interest in creating a model of care for Alzheimer's sufferers, I decided to find out more about it and how I could help."

Lyketsos told Hoffberger he needed socio-economic demographic data

on enough elderly persons living in a geographic area large enough for the results of the study to be scientifically valid. His efforts to get government funding were unsuccessful so he could not proceed.

"I told him that I thought THE ASSOCIATED had all the data he needed from its recent 10-year demographic study of the Baltimore Jewish

Community." Hoffberger said. "Needless to say, he was excited and from there, we decided to work together, provided I could raise the money needed to do a five-year study."

"The sooner we can identify those with the onset of dementia, the sooner we can slow down the process and get them the right kind of care and attention."

Waiting is a Losing Proposition

Disability and death are age non-discriminatory. It is therefore a given that some Marylanders will become disabled and/or die every year. Even knowing this, the vast majority of us have not undertaken estate planning and have no Last Will and Testament, Power of Attorney and/or Advanced Health Care Directive. The fact that any person who is legally competent and over 18 years old can sign estate planning documents makes this a larger concern.

A few of the more popular reasons given for neglecting this very important right are: It was too expensive. I refused to face my

mortality. I believed I did not need the planning. My planning is old but, good enough. The forms I found at the library, online or at the office supply store are fine.

Yet, I am regularly retained by clients who are in the midst of a personal or family care crisis or after someone dies without a Will. Failing to plan often results in Maryland's laws and the cases interpreting those laws controlling what occurs, when it occurs etc.

Examples are that failing to pre-plan for disability can result in a court appointing a guardian of person and/or property. Dying without a Will may also create unintended results as the

individual appointed as the personal representative (executor) may not be the decedent's choice. The distribution at the end of probate may also be different than the decedent would want. More important is the key fact that procrastination is more expensive. It can result in higher legal and other fees, court intervention, increased burdens on time management and increased stress levels.

It is therefore critical that Marylanders take control and pre-plan.



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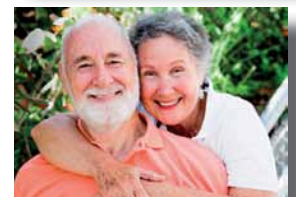
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That study will be finished at the end of 2011 and will be published in 2012. From the research, Lyketsos plans to create a model of care for people with Alzheimer's disease living in a community home, as well as their caregivers. "We believe that this model of care can dramatically improve the quality of life of those with dementia locally and help them stay at home longer delaying entry into assisted living or a nursing home. If successful, it can then be tailored for communities across the country," he said. "The sooner we can identify those with the onset of dementia, the sooner we can slow down the process and get them the right kind of care and attention."

The model of care Lyketsos looks



to implement is one that works with a dementia care coordinator who works with family members, friends and neighbors to take an active role in identifying people with the onset of dementia and making sure several key needs are met.

"If people notice someone with memory loss become more forgetful or more disoriented than usual, they will be able to contact a trained professional from a local agency like Jewish Community Services or Levindale [Hebrew Geriatric Center and Hospital], who can come to the person's home and do a

professional needs assessment," Lyketsos said.

This assessment and intervention, according to Lyketsos, will determine what stage of dementia the person is in and how best to treat him or her.

"We'll determine if they're taking the right medications, what kind of diet they should be on, what activities to get involved in, are any alterations needed in the home and most importantly, who will be the caregiver or caregivers," Lyketsos said.

The model of care will provide professional training for caregivers and explain to them the pressures and stress of caring for someone with Alzheimer's and other forms of dementia. Plus, it will require that caregivers who need it receive some form of respite – and with good reason.

The 2011 Alzheimer's Disease Facts and Figures reports that "caregivers may become 'secondary patients' because of the negative impact that providing care may have on their general health and risk for chronic disease, health-related physiological changes, health-care utilization and even death. The physical and emotional impact of care giving on Alzheimer and other dementia caregivers is estimated to result in \$7.9 billion in increased health-care costs in the United States."

The effects of Alzheimer's and dementia are felt by more than the individual. It has residual impact on caregivers, family members and the nation's health-care costs. Hoffberger noted that this model of care can improve the quality of life for those dealing with Alzheimer's by keeping them in their homes, as opposed to nursing homes or other types of dedicated facilities.

"Right now, Alzheimer's is the sixth leading cause of death in the United States and the fifth leading cause of death of people over 65," Hoffberger said. "And with the growing population of baby boomers something needed to be done. I'm proud that we, as a Jewish community, are in the forefront of providing help." **JSL**

Barry L. Silverman is a local freelance writer.

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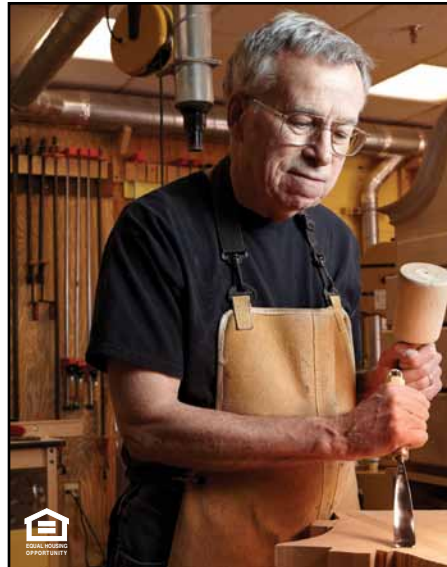
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LEVINDALE

Creating the Next Generation of Caring

By Barry L. Silverman

PRIVATE ROOMS with flat screen televisions, home-style kosher kitchens, meals cooked to order, a pub, a salon and a sensory garden are probably the last things you'd expect to find at a nursing home.

That's because until a decade ago, nursing homes were mostly institutional facilities for the frail and elderly with almost all of the emphasis on medical care rather than on creating a modern building and warm atmosphere.

While Levindale Hebrew Geriatric Center and Hospital has been working on transforming its atmosphere into a caring, joyful environment for several years now, in early December, the physical surroundings will change forever with the dedication of a state-of-the-art 84-bed neighborhood community building complex, featuring six, 14-bed households and an airy, elegant town center.

The facility is scheduled to open its doors for admissions at the beginning of 2012.



Helping to oversee this multi-million dollar capital project is Levindale's President and Chief Operating Officer, Aric R. Spitulnik.

"This new Levindale will propel us into the 21st century and change the way elder-care is delivered," Spitulnik said. "The expansion is on the current Baltimore campus, and the new space will be light and open and is designed to look and feel like home for our residents and their families."

All of the new resident rooms will be private. They will each be 300-square feet and are designed for safety and accessibility.

According to Project Manager Dan Minkiewicz, each room has a large private bathroom and shower area, lots of storage, wireless Internet connections, a flat screen TV, visiting space and individual temperature controls.

"The living space far exceeds that of the standard building code," Minkiewicz said. "The code states that you can have up to three people in a 300-square-foot room. Each of our rooms will only have one person living in it."

In addition to the modern rooms, the

common areas of each household will feature a kosher country kitchen and family dining area, as well as cozy sitting and hearth areas for playing music, reading and good old-fashioned kibitzing.

"This new Levindale will propel us into the 21st century and change the way elder-care is delivered."

"A full-time cook will be on duty to prepare meals

to order," Spitulnik said. "Residents and their family members will also be able to assist with the cooking of their own meals, if they so desire. We want to encourage as much family involvement as possible."

Creating more opportunities for involvement in this new 87,000-square-foot facility is a two-story atrium that features a synagogue, gift shop, cafe, barbershop, beauty salon and a Jewish-themed museum. (Levindale is partnering with the Jewish Museum of Maryland to make this space a permanent exhibition site.) Outside,

Frank, Frank & Scherr can help you plan for difficult times.

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THE TRUTH ABOUT HEARING LOSS AND HEARING AIDS

An estimated 36 million Americans suffer from hearing loss. And yet, NIH estimates that only 20% of people who could benefit from a hearing aid actually wear one. Why? Many think they don't have hearing loss. Or that a hearing aid can't help them. Or they may just think that hearing aids are ugly and don't work properly. Whatever the reason, it may be time to separate myth from fact in order to make an informed decision about your hearing health.

MYTH: If I had hearing loss, my family doctor would know.

FACT: Fewer than 15% of physicians routinely screen for hearing loss during a physical. Since most people with hearing impairments hear well in a quiet environment, it can be difficult to recognize the extent of your problem in a doctor's office. Your physician may not realize that you have a hearing problem.

MYTH: My hearing loss cannot be helped.

FACT: This may have been true many years ago. Fortunately, modern advances in hearing aid technology provide viable options for most people with hearing loss.

MYTH: Hearing aids will make me look older.

FACT: Untreated hearing loss is far more obvious than a hearing aid; your condition is more apparent than any hearing aid if you can't clearly understand conversation. Today's devices come in a wide range of shapes, colors and functions. They are lightweight, neat, and highly inconspicuous.

MYTH: I have only one bad ear. It's enough to wear just one hearing aid.

FACT: We have two ears for a reason: to give us directional hearing so we can pinpoint the source of sound. Most types of hearing loss affect both ears equally, and about 90% of patients are in need of hearing aids for both ears.



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there will be a sensory garden, courtyards, patios and playgrounds for grandchildren.

“There will also be a pub with TVs so residents and families can gather to watch sporting events,” Spitulnik added. “We’ll even have our own version of tailgating right there in the pub.”

Another exclusive feature will be memory boxes outside of each room. “We know that there will be residents who, at times, become disoriented and perhaps have trouble finding their rooms,” said Spitulnik. “A glass box outside each door will allow them to place familiar objects in it, such as a picture of a loved one or a memento, so they’ll know where their room is.”

Spitulnik said that some households may also have a cat or dog living there to further extend the feeling of home, not only for the residents but also for their family members.

So how did this elegant, interactive,

inter-generational care and living concept come into being at a facility that’s been around for 120 years? Spitulnik explained that the project is a natural progression for Levindale.

“Beginning in 1890, this was the Hebrew Friendly Inn, which provided housing for new immigrants. In 1927, the name was changed to Levindale Hebrew Geriatric Center and Hospital in honor of Louis H. Levin, first president of the Associated Jewish Charities, and it became a nursing home,” he said.

Today, Levindale is part of LifeBridge Health, one of the largest providers of health care in northwest Baltimore, which also includes Sinai Hospital of Baltimore, Northwest Hospital and Courtland Gardens Nursing & Rehabilitation Center.

“There are a lot of firsts associated with Levindale. Ten years ago, we became the first Eden Alternative* facility in Maryland, and just five years ago, we became the first





Levindale Town Center
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nursing center to use a neighborhood model,” Spitulnik said. “When this project is complete, we will become one of the first long-term care centers in the state to have built actual households for residents.”

Because Levindale is a non-profit, throughout the decades, it has relied on philanthropy, just as it has for this critical \$31-million project, to make sure that our mothers and fathers are taken care of. Levindale hopes to raise \$20-million to help off-set the building’s cost.

Now with construction heading into its final stages, Spitulnik made it clear that not only will Levindale be advanced and sophisticated, but staff members are already receiving special training that will enhance the living experiences for the residents who call it home.

Spitulnik tried to put things into

perspective, saying that many people who go to nursing homes feel as though they are becoming homeless because, in effect, they are leaving their house and going to a place that is different, unknown and not their own.

“That’s why it’s so important that Levindale is changing nursing home care,” he said. “We want these new households to become their new home, a place that they can be proud of, so our residents can age with privacy, dignity, respect and the ability to make their own choices.”

**The Eden Alternative philosophy is a health care concept based on a belief that companionship, spontaneity and the opportunity to care for other human beings can provide comfort and joy to elders where medications and therapies cannot. JSL*

Barry L. Silverman is a local freelance writer.



Agencies and Programs of **THE ASSOCIATED: Jewish**

Baltimore Hebrew Institute at Towson University (BHI)

www.towson.edu/bhi

410-704-7120

Baltimore Hebrew Institute at Towson University provides adult learners with an array of continuing education course offerings, films, day trips and community lectures in Judaic studies.

Baltimore Jewish Council (BJC)

www.baltjc.org

410-542-4850

The Baltimore Jewish Council is the community relations and advocacy arm of THE ASSOCIATED. It is the designated representative of THE ASSOCIATED and its agencies, as well as the Greater Baltimore Jewish community at all levels of government and is responsible for securing public funding to support their programs and needs. The BJC is also home to the Holocaust Remembrance Commission, which is committed to honoring the memory of the millions who perished during the Nazi era through commemoration and education of the Shoah. The Commission offers a variety of programs for teachers, students, religious, and civic organizations, and serves as a resource and referral point for Holocaust survivors and their families living in the Greater Baltimore community.

The Louise D. & Morton J. Macks Center for Jewish Education (CJE)

www.cjebaltimore.org

410-735-5000

The Macks Center for Jewish Education promotes and facilitates lifelong learning that nurtures Jewish identity and strengthens Jewish community.

CHAI (Comprehensive Housing Assistance, Inc.)

www.chaibaltimore.org

410-466-1990

CHAI strengthens and stabilizes neighborhoods with a large Jewish population. In addition, CHAI provides a host of services and supports for area seniors, such as building affordable housing and repairing homes.

CHANA: Counseling, Helpline & Aid Network for Abused Women

www.chanabaltimore.org

410-234-0023

The mission of CHANA is to provide services to victims of domestic violence and to reduce abuse in the Baltimore Jewish community through awareness, prevention and advocacy. By empowering women and educating the community, we will build a safer world for our children and grandchildren.

The Darrell D. Friedman Institute for Professional Development at the Weinberg Center (DFI)

www.thedfi.org

410-843-7560

DFI's mission is to provide training and leadership development opportunities

to the full spectrum of current and potential Jewish communal professionals and lay leaders serving the Jewish community of Baltimore and surrounding areas. Programming is also available for adult learners.

Edward A. Myerberg Center

www.myerbergseniorcenter.org

410-358-6856

The Edward A. Myerberg Center boasts close to 1,000 members ranging in age from 55 to over 100 and offers over 1,800 class sessions of the core curriculum including painting, sculpture, bridge, current events, computer, and fitness.

Jewish Community Center of Greater Baltimore (JCC)

www.jcc.org

Weinberg Park Heights

410-542-4900

Rosenbloom Owings Mills

410-356-5200

The Jewish Community Center of Greater Baltimore promotes and strengthens Jewish life and values through communal programs and activities for individuals, families and seniors.

Jewish Community Services (JCS)

www.jcsbaltimore.org

410-466-9200

JCS offers a wide range of services including counseling and therapy, addiction services, career services, prevention education, Big Brother Big Sister matches, resources for older adults and caregivers, service

Community Federation of Baltimore Serving Older Adults

coordination, parenting resources, teen outreach, psychiatric services, services for people with special needs and volunteer opportunities.

Jewish Museum of Maryland (JMM) at the Herbert Bearman Campus

www.jewishmuseummd.org
410-732-6400

The Jewish Museum of Maryland increases understanding of the American Jewish experience among diverse audiences. It interprets American Jewish history and culture, preserves the material record of Maryland Jewry, and engages the public in discourse about past, present and future issues of Jewish life.

Jewish Volunteer Connection (JVC)

www.jvcbaltimore.org
410-843-7490

Jewish Volunteer Connection (JVC) creates a culture of volunteerism by providing a coordinated, centralized entry point for Baltimore Jewish community volunteers. In its work, JVC is guided by the Jewish values of tikkun olam (repairing the world), gemilut chasadim (acts of love and kindness) and tzedakah (charity).

Levindale Hebrew Geriatric Center and Hospital

www.lifebridgehealth.org/levindale
410-601-2400

Levindale offers skilled long-term care, a full-time physician staff and a specialty hospital that treats chronic diseases and complex medical conditions.

The Pearlstone Conference and Retreat Center

www.pearlstonecenter.org
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Sinai Hospital of Baltimore

www.lifebridgehealth.org
410-601-9000

Founded in 1866 as the Hebrew Hospital and Asylum, Sinai Hospital of Baltimore has evolved into a Jewish-sponsored health care organization providing care for all people. It is a nonprofit institution with a mission of providing quality patient care, teaching and research.



THE ASSOCIATED

What is THE ASSOCIATED:

Jewish Community Federation of Baltimore?

Established in 1920, THE ASSOCIATED: Jewish Community Federation of Baltimore is Baltimore's central philanthropic and community-building organization whose mission is to preserve and enhance Jewish life. It addresses charitable, educational, religious, humanitarian, health, cultural and social needs of the Jewish community locally, nationally, in Israel and throughout the world.

How does THE ASSOCIATED work?

THE ASSOCIATED is the central fundraising, community planning, allocations and umbrella organization for a network of agencies that serve the local Jewish community, Israel and overseas. THE ASSOCIATED prides itself on lay/professional partnerships. Volunteer leaders from the community help to evaluate current initiatives and programs, identify community priorities and build a lasting safety-net for future generations.

How do I become ASSOCIATED?

Speak to an ASSOCIATED professional about becoming more involved. Call **410-727-4828** or visit our website www.associated.org for more information.

When You've Lost A Loved One

By Donna Kane, MA

LOSS AND GRIEF touch everyone; they are an inevitable part of being human. We all experience the death of someone we've loved. Most people have some understanding of loss and grief, but how people experience grief can be as individual and unique as each and every person.

Bereavement in Judaism

Our Jewish ancestors developed a very effective framework for people to express their grief and integrate it into their lives. It is meaningful and helpful even today. In the first period after a death, *Shiva* brings friends into the home to comfort the mourning family and let them know they are not alone. *Kaddish*, a prayer praising God, is recited in a communal setting by mourners so that they gain support from others. We honor the memory of our loved ones at other set times during the year by reciting *Kaddish* and lighting a candle. These include the *Yizkor* prayers, which are recited during services on *Yom Kippur*, *Sukkot*, *Pesach* and *Shavuot*, and the *Yahrzeit*, or the anniversary of a loved one's death. Thus, our tradition has made death and grieving a part of life and part of our Jewish life cycle. It gives us a structure and permission to honor and grieve for the ones we love and have lost.



Experiencing Grief

How do we protect ourselves from the tremendous pain of losing a loved one? People instinctively try to avoid pain. But in grieving it is best for us to move toward our pain. This is counterintuitive, as it is not only difficult but painful. The expression “grief work” conveys how hard this is to do. Embracing your loss and experiencing your grief is an important step toward healing. During this process of allowing yourself to mourn and to express grief outwardly, it is important to remember that there is absolutely no “right” or “wrong” way to grieve.

Myths and Realities about Grief

Dr. Alan Wolfelt, an educator and grief counselor, has written about several common



misconceptions people have about grief.* For example, there is the belief that grieving is divided into concrete stages and should be resolved within a certain time frame. This myth has arisen as a result of the landmark book, *On Death and Dying*, by Elizabeth Kubler-Ross (1969). Kubler-Ross had no idea that people would interpret her five stages of dying in such a literal way.

In fact, it is quite common for people to move in and out of stages of grief, and there is no timetable for grief to end. In my work as a facilitator of bereavement support groups, I do not teach people how to grieve. I learn from them where they are at that moment and allow them to experience their feelings

in a safe and supportive environment.

Another misconception is the belief that it is better to move away from grief. For example, a person returning to work shortly after the death of a loved one finds himself responding “I’m fine” to colleagues who ask, “How are you doing?” Family, friends, and co-workers often encourage this kind of response. They refrain from talking about loss because it makes them uncomfortable, and they may also feel it exacerbates the pain of the grieving person. This type of interaction causes further isolation for the

*“*Dispelling 5 Common Myths about Grief*,” by Alan D. Wolfelt, Ph.D., Director, Center for Loss and Life Transition, Fort Collins, Colorado

grieving person and causes him to question his mental health. (“Why don’t I feel better yet? What’s wrong with me?”) Our society does encourage people to “hurry up and get over it.” If we want to help people who are grieving, we need to remember that allowing them to experience and express the pain of loss helps in the healing of mind, emotions, and body.

Another myth is that tears are a sign of weakness. On the contrary, Wolfelt believes that for some people, shedding tears indicates a willingness to do the work of mourning. On the other hand, bereavement counselors also meet many people ready and willing to confront their loss who cannot cry. Again, (and this is said over and over in grief groups) there is no right way or wrong way to mourn. People who do not cry are no less devastated than those who do cry. Everyone grieves differently.

Where to Find Support

There are many sources of support for those who have lost a loved one. Fortunately, our society is becoming more understanding of grief and mourning. Friends, family, and clergy can offer great comfort and support. Jewish Community Services (JCS) and other agencies have therapists trained in individual grief counseling. Hospice workers help not only the dying, but also family and others who are affected by the death of a loved one. There are many books that offer insight and comfort to the bereaved.

Support groups like those offered by JCS provide a safe, non-judgmental place for people who have been bereaved to work through their feelings, and to be with

others who truly understand what they are experiencing. Bereavement groups discuss different aspects of grief, such as how to deal with the overwhelming emotions that occur and how to determine what is “normal” grief. Part of each group session is reserved for members to discuss whatever is on their minds on any topic. Groups typically meet once a week for six to eight weeks. People seem to know instinctively when they are

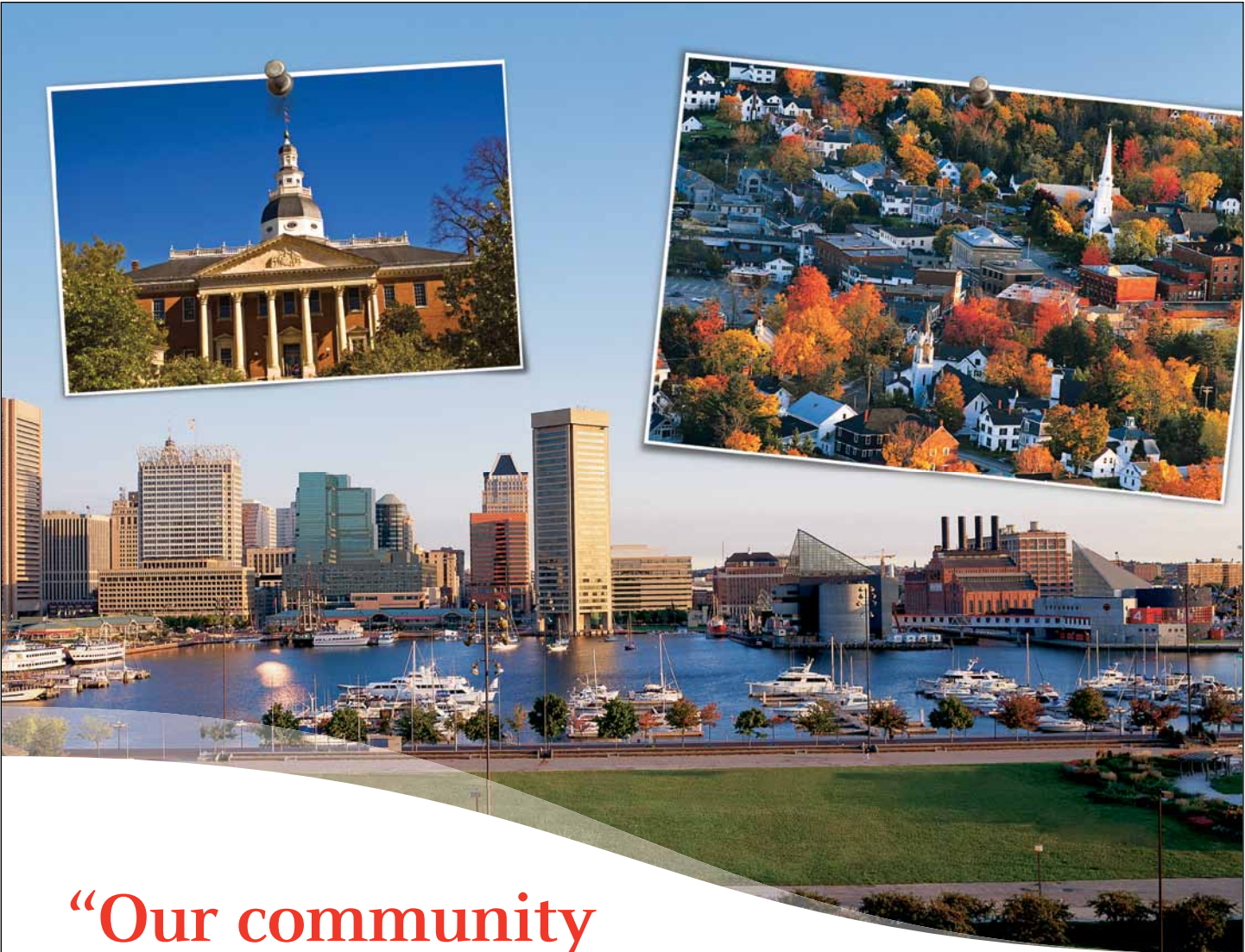
ready to participate in a group. Typically people do best waiting three or four months before starting a group. Questions or concerns may be discussed with the group facilitator before a commitment to attend a group is made. Often these groups continue to meet informally long after the “formal” sessions have ended, thus continuing a cycle of support and the making of new friends.

*Embracing
your loss and
experiencing
your grief is an
important step
toward healing.*

Life after Loss

Judaism is always aware of the fragility of life. We do not “get over” the loss of a loved one. That loss becomes a part of our life, a part of who we are. If you are grieving the death of someone you love, be kind and patient with yourself. Try to remember that the pain will soften and your grief will change over time. Most importantly, remember that there are times and ways that other people will want to offer support. Be open to asking for and accepting help when others reach out. **JSL**

Donna Kane, MA, is Community Liaison, Jewish Community Services Access Services, and she facilitates Community Bereavement Groups for JCS, in partnership with Sol Levinson & Bros., Inc., and Seasons Hospice and Palliative Care.



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