











I'm really not a fan of the phrase "new normal." I prefer to think of this phase of our lives as educating us to the need for flexibility—that this is a time of temporary retooling—and for empathy, until the time comes when we don't have to think about COVID-19 every day. For sure, this pandemic is turning out to be harder for some than for others, on multiple levels. And now, with schools starting in whatever format they've decided on, we have

to live with yet another degree of uncertainty. Are college kids (and their partying) a danger to the community at large? Is it safe for grandparents to visit grandkids who are attending grade school with a hundred other kids who like to huddle together and share art supplies? What about parents who have to stay home from work to be with their online learners? Or grandparents who fill that role? The whole situation is just really hard, and it's infuriating that our country hasn't handled it better. But we as individuals can take control of our own lives, and be gentle with ourselves as we make our way through this.

One way through is to stay as connected to the things you love as possible. Do you feel best about yourself after you've worked out, pushed yourself, reached a new milestone? Keep at it! Why not try something new in your workout routine—kettlebells. Learn more about them on the next page.

Do you find yourself spending more time online? If you're an old hand at Facebook, you might have seen the posts about "why do I keep seeing the same 25 people?" I did. And while not a menacing hoax that can hurt you, those posts aren't necessarily on the up and up. But you *can* connect more reliably with your friends by following the tips on page 5.

And even though Sunday, September 13 is officially Grandparents Day, this year, we could just call it Staying Connected to Family Day. Gather all the generations together to spend some time laughing, learning or lolling around. Just remind everyone that Grandma and Grandpa get extra hugs!

Happy September! Karyn and Heidi



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Vital! Magazine 4556 Simon Road Wilmington, DE 19803 302-544-0684 www.vitalmagonline.com

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Kettlebells After 60 – Are They Right for You?



trength training only gets more important as you get older. For most people, starting a kettlebell routine at 60 will be more challenging than it would be at 20, but the benefits of working with these weights will often outweigh the difficulties. Before beginning any weight-training routine, however, schedule a check-up with your doctor to get the all-clear.

Benefits of Strength Training

Working with weights such as kettlebells can slow down a number of conditions that tend to accompany aging. According to the Centers for Disease Control and Prevention, strength training can decrease pain from arthritis and help you manage diabetes.

Even if you're in perfect health, working with weights can improve your mood, help you sleep better and lower your risk of heart disease. Using kettlebells may also improve your bone density, so if you fall, your bones won't fracture as easily.

Kettlebell Basics

Kettlebells may not be in your home gym, but these weights have been around since the 1700s. Each weight is shaped like a cannonball with an iron handle attached, and they come in a variety of weights.

Unlike hand weights, however, you aren't likely to find kettlebells that weigh 2 or 5 pounds. They tend to come in heavier weights—think 8,

15, 25 and 50 pounds. Since they're tough to heft around, kettlebells will not only work your muscles, but you'll get your heart pounding.

In a study done by the American Council on Exercise, participants burned an average of 272 calories in a 20-minute kettlebell session.

Starting a Routine

You may be able to do some biceps curls in your living room but don't attempt to work with kettlebells there as well. Head to a gym when you're first working with these weights, and find a trainer who has kettlebell experience. A trainer can help you choose the correct weight of kettlebell, show you proper form and teach you a variety of exercises.

You may hold kettlebells while you do shoulder presses and lunges. Kettlebells are also often used in swing exercises, in which you'll lift the bell from between your feet, quick-

ly swing your arms straight out so they're parallel to the floor and then lower the bell back to the floor.

Safety Precautions

Even a fit, 20-something athlete can become injured when working with heavy kettlebells. Always warm up before lifting. Five to 10 minutes of light cardio, like walking, and stretching will reduce your risk of pulling a muscle.

You may find that wearing braces on your wrists and knees gives these areas extra support, but if you've had problems with your wrists, knees or back in the past, kettlebells might not be the right strength-training equipment for you. Give yourself at least a day's break in between kettlebell workouts and don't ignore any twinges of pain. Stop what you're doing and visit your doctor if you have any sudden or sharp pains.

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YOUR VITAL LIFE



Beware of the "25 Friends" Facebook Hoax!

By Brooke Miles, Delaware ShoutOut

Lately, a bunch of posts have been floating around Facebook that say something like this:



Jane Doe

I wondered where everybody had been! This is good to know: It's ridiculous to have friends and only 25 are allowed to see my posts. It WORKS!! I have a whole new news feed. I'm seeing posts from people I haven't seen in years. Here's how to bypass the system FB now has in place that limits posts on your news feed. Their new algorithm chooses the same few people - about 25 who will read your posts. Therefore, hold your finger down anywhere in this post and "copy" will pop up. Click "copy". Then go to your page, start a new post and pur your finger anywhere in the blank field. "Paste" wll pop up and click "paste". This will bypass the system.

It's a hoax!

Facebook does NOT have an algorithm that limits delivery of your posts to 25 friends. It does have *a* limiting algorithm—which I'll explain with some legitimate workarounds—but the post above is bogus.

Besides, the post is just telling you to copy-andpaste the message and send it to your friends. The instructions make it seem like some devious hack. But it's not.

The good news? The hoax won't lead to identity theft, account hijacking, or other security night-mares. It's only an annoyance.

To be clear, Facebook does limit how many friends see your posts...but there's no specific number like 25. The algorithm is based on which friends you engage with most. So if you think certain friends aren't getting your posts, then like, share, or comment on their posts! (You may have to visit their pages if you're not already getting their posts in your news feed.) The interaction should prompt

Facebook to deliver your posts to their news feeds, and vice versa.

Similarly, you might want to see more of your friends' posts. You can control this 100%! You have two options (make sure you're in Classic View):

- 1 In the top left corner of your home page (the page that shows your news feed), click on the three dots next to **News Feed**. In the dropdown menu, click on **Most Recent**. You'll now see ALL the posts you've been missing!
- 2 Instead of selecting **Most Recent**, click on **Edit Preferences** in the same dropdown menu. Then click on **Prioritize who to see first.** You can choose which friends you want to hear from, which may be different than what the algorithm originally chose.

Remember to trust your gut if something seems suspicious. This applies to Facebook, Instagram, all other social media sites, and everything else in life! At Delaware ShoutOut, we're here to set the record straight.





Keep Yourself Safe from COVID-19 Contact Tracing Scams

cammers are trying to take advantage of confusion over CO-VID-19 contact tracing. Scammers are reading the news just as you are, except that they're trying to benefit monetarily on confusion over CO-VID-19 contact tracing campaigns.

Since there is no centralized contact tracing program established by the federal government, it makes it difficult to separate legitimate contact tracing campaigns from those that are simply scammers angling to obtain your personal information. For instance, you may receive a call and/or a text message from a local state agency or county health department, or you may even receive a phone call and/or text message which appears to be from the U.S. Department of Health and Social Services. So how do you know if it's legit?

First, if you receive a call from someone identifying themselves as a con-

tact tracer from a county or state health department, take their name and then hang up. Contact the department yourself to verify the information. It is also recommended you do an online search for the telephone number. NEVER rely on the information provided to you in the initial contact.

If you have already undergone a COVID-19 test, ask the caller when and where your COVID-19 test was administered. Anyone officially working with a county or state health department will have access to this system information.

NEVER click on the links sent in text messages from anonymous text messages. Oftentimes scammers send malware designed to steal your personal information through these links.

Legitimate contact tracers WILL ask for information such as name,

address, birthdate, places you've visited where you have crossed paths with multiple people and/or the current condition of your health and whether you're feeling well.

A legitimate contract tracer will NOT ask you for your Medicare number, insurance information, social security number, immigration status, inquire about who you know who may have tested positive for COVID-19, and most of all, a legitimate contact rracer will never threaten you.

Other COVID-19 Scams to Watch

- Additional Medicare coverage for a fee.
- At-home Coronavirus tests.
- Testing requiring payment in advance.
- Cures or preventative measures resulting in worthless information

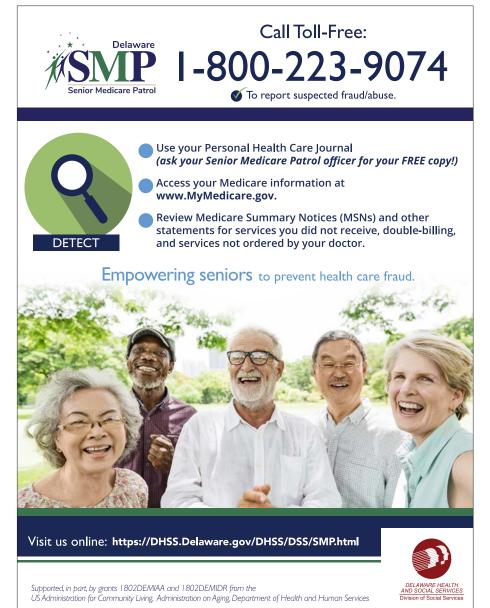
For more information on COVID-19 Contact Tracer Scams/Fraud, visit: https://www.smpresource.org/News/20200729/370/-Contact-Tracers-Capitalize-on-COVID-Confusion.aspx

If you suspect you've been a victim of a COVID-19 Scam/Fraud, contact: Delaware Senior Medicare Patrol at 1-800-223-9074 www.dhss.delaware.gov/dhss/dsaapd/

Federal Trade Commission/FTC at 1-877-382-4357

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Social Security In Plain Language

By Davida Smith-Reed, Social Security District Manager in Wilmington, DE



Some of the terms and acronyms people use when they talk about Social Security can be a little confusing. We're here to help you understand all you need to know.

We strive to explain your benefits using easyto-understand, plain language. The Plain Writing Act of 2010 requires federal agencies to communicate clearly in a way "the public can understand and use." This can be particularly challenging when talking about complicated programs like Social Security, Supplemental Security Income, and Medicare. If there's a technical term or acronym that you don't know, you can easily find the meaning in our online glossary at www.ssa.gov/agency/glossary.

Everyone uses shorter versions of words nowadays. We do too. Social Security's acronyms function as shorthand in conversations about our programs and services. If you're nearing retirement, you may want to know what PIA (primary insurance amount), FRA (full retirement age), and DRCs (delayed retirement credits) mean. These terms describe your benefit amount—based on when you decide to take it. If you take your retirement benefit at FRA, you'll receive the full PIA (amount payable for a retired worker who starts benefits at full re-

tirement age). So, FRA is an age and PIA is an amount.

Once you receive benefits, you get a COLA most years. A COLA is a Cost-of-Living Adjustment, and that will usually mean a little extra money in your monthly benefit.

What about DRCs? Delayed retirement credits are the incremental increases added to the PIA if you delay taking retirement benefits beyond your full retirement age. If you wait to begin benefits beyond FRA—say, at age 68 or even 70—your benefit increases.

If one of those terms or acronyms comes up in conversation, you can be the one to supply the definition using our online glossary. Sometimes learning the terminology can deepen your understanding of how Social Security works for you.

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Falls Prevention Conversation Guide

Caregivers, let's talk about keeping you and your family safe and active. It seems like common sense—everybody falls, no matter what age. However, for many older adults, an unexpected fall can result in a serious and costly injury. The good news is that most falls can be prevented. As the caregiver, you have the power to reduce your loved one's risk of falling, and your own fall risk as well.

Many people think falling is common as we age. The truth is, older adults can improve balance and strength. Taking action to address the risk of falling is an important way to stay healthy and independent as long as possible.

Use the following tools if you or the person you are caring for has had a fall, is experiencing decreased mobility, is unsteady on their feet, or is fearful of falling. When needed, use it to talk with other members of your family or health care professionals about creating a falls prevention action plan.

Why Is Falls Prevention Important?

Falls Are Common

- Falls are the leading cause of fatal and non-fatal injuries for older Americans. One in 4 older adults falls each year.
- Every 11 seconds, an older adult is treated in the emergency room for a fall.
- Every 19 minutes, an older adult dies from a fall.

Falls Can Cause Serious Injuries

• Falls often result in injuries, such as hip fractures, broken bones, and head injuries. In fact, more than 2.8 million older adults are treated in emergency departments annually because of a fall, resulting in over 800,000 hospitalizations.

Falls Are Costly

• The average hospital cost for a fall injury is over \$30,000. Falls, with or without injury, carry a heavy burden on quality of life. After a fall, many older adults develop a fear of falling and, as a result, limit their activities and social engagements. Fear of falling can result in further physical decline, depression, social isolation, and feelings of helplessness.

Falls Impact Caregivers, Too

 Research has shown that after a care recipient's first fall, caregivers report a significant increase in caregiver burden, fear of falling, and depression.

Falls Prevention Basics

Staying healthy as we get older improves our day-to-day life. Those who are less physically active are at higher risk of falling. Strength and balance exercises, properly managing medications, regular vision checks, and making the living environment safer are some of the steps you and your loved one can take to prevent a fall.

The most common risk factors that can result in a fall:

Physical Risk Factors: Changes in your body that increase your risk for a fall.

Behavioral Risk Factors: Things we do or don't do that increase our falls risk.

Environmental Risk Factors: Hazards in our home or community.

The key is to know where to look.

Muscle Weakness, Balance, And Gait Problems: As we age, most of us lose some strength, coordination, flexibility, and balance—primarily through inactivity, making it easier to fall.

Vision: In the aging eye, less light reaches the retina, which makes it harder to see contrasting edges, tripping hazards, and obstacles.

Medication Use: Some prescription and over-the-counter medications can cause dizziness, sleepiness, dehydration, or interactions with each other that can lead to a fall.

Environment: Most older adults have lived in their homes for a long time and have never thought about simple modifications that can keep it safer as they age.

Chronic Conditions: More than 90% of older adults have at least one chronic condition like diabetes, heart disease, or arthritis. Often, these increase the risk of falling because they result in lost function, inactivity, depression, pain, or use of multiple medications.

Here are some steps you can take to prevent a fall.

Falls prevention is a team effort. Here are three steps designed to help you most effectively prevent a serious injury, stay healthy, and maintain an independent lifestyle. Use the information gathered in these steps to start a conversation with the person you are caring for to determine if they are at risk for a fall and identify whether you may be at risk for a fall and develop an action plan to ensure you are a strong and healthy caregiver.

Step 1: Is It Time To Talk About Falls Prevention?

This checklist will help determine if you or the person you are caring for is at risk for a fall and if further action is needed. It is meant to be answered individually. Answer the questions for yourself first, then answer them for the person you are caring for. An individual score of 4 or more points indicates that person may be at risk for a serious fall in the future.

	YES OR IENT BEL	NO FOR EACH .OW	WHY IT MATTERS
Yes (2)	No (0)	I have fallen in the past year.	People who have fallen once are likely to fall again.
Yes (2)	No (0)	I can, or have been advised to use, a cane or walker to get around safely.	People who have been advised to use a cane or walker may already be more likely to fall.
Yes (1)	No (0)	Sometimes I feel unsteady when I am walking.	Unsteadiness or needing support while walking are signs of poor balance. People who are worried about falling are more likely to fall.
Yes (1)	No (0)	I steady myself by holding onto furniture when walking at home.	This is also a sign of poor balance.
Yes (1)	No (0)	I am worried about falling.	People who are worried about falling are more likely to fall.
Yes (1)	No (0)	I need to push with my hands to stand up from a chair.	This is a sign of weak leg muscles, a major reason for falling.
Yes (1)	No (0)	I have trouble stepping up onto a curb.	This is also a sign of weak leg muscles.
Yes (1)	No (0)	I often have to rush to the toilet.	Rushing to the bathroom, especially at night, increases your chance of falling.
Yes (1)	No (0)	I have lost some feeling in my feet.	Numbness in your feet can cause stumbles and lead to falls.
Yes (1)	No (0)	I take medicine that sometimes makes me feel light-headed or more tired than usual.	Side effects from medicines can sometimes increase your chance of falling.
Yes (1)	No (0)	I take medicine to help me sleep or improve my mood.	These medicines can sometimes increase your chance of falling.
Yes (1)	No (0)	I often feel sad or depressed.	Symptoms of depression, such as not feeling well or slowed down, are linked to falls.
Total			nts for each Yes answer. If you ou may be at risk of falling.

This checklist was developed by the Greater Los Angeles VA Geriatric Research Education Clinical Center and affiliates and is a validated falls risk self-assessment tool (Rubenstein et al. J Safety Res; 2011:42(6)493-499). This checklist was adapted by the Centers for Disease Control and Prevention with permission of the authors.



For Caregivers

Step 2: Talk About Falls Prevention With Others

If you or the person you are caring for is at risk of falling based on the previous questions, the next step is to have a conversation with family, friends, or those in the community who may be supportive. Take notes of your observations and bring them up at doctor appointments or when talking to anyone else who is in a position to help.

Step 3: Develop A Falls Prevention Action Plan

This last step provides seven strategies you can take immediately to create a falls prevention action plan.

Use the risks identified in Step 1 and the conversation notes in Step 2 to inform your action plan.

Enlist support in taking steps to stay safe.

Determine if there is a reason to be concerned about falling. Many adults recognize that falling is a risk, but they believe it won't happen to them or they won't get hurt – even if they've already fallen in the past. A good place to start is by having a conversation about it – that's what this tool is intended to do. If there are concerns about falling, dizziness, or balance, it might be best to discuss with a health care provider who can further assess risk and suggest programs or services that could help.

Discuss current health conditions.

Determine if you or the care recipient is experiencing any problems with managing your health. Has there been difficulty in remembering to take medications – or have there been side effects? Is it getting more difficult to do things that used to be easy?

Also make sure to take advantage of all the preventive benefits now offered under Medicare, such as the Annual Wellness visit. Speak openly with your health care provider about all concerns.

Note when the last eye checkup was.

Get your vision checked annually. If you or the person you are caring for wears glasses, make sure the prescription is current and the glasses are as advised by the eye doctor.

Remember that using tint-changing lenses can be hazardous when going from bright sun into darkened buildings and homes. A simple strategy is to change glasses upon entry or stop until the lenses adjust.

Bifocals can also be problematic on stairs, so it's important to be cautious. Those struggling with low vision should consult with a low-vision specialist for ways to make the most of their eyesight.

Notice if you or the person you are caring for is holding onto walls, furniture, or someone else when walking, or if there is difficulty arising from a chair.

These are all signs that it might be time to see a physical therapist. A trained physical therapist can help improve balance, strength, and gait through exercise. They might also suggest a cane or walker—and provide guidance on how to use these aids. Make sure to follow their advice. Poorly fitted aids actually can increase the risk of falling.

Talk about medications.

If you or the person you are caring for is having a hard time keeping track of medicines or is experiencing side effects like feeling dizzy or sleepy, discuss these concerns with a doctor and pharmacist. It may be best to have medications reviewed each time there is a new prescription. Keep a list of medications, including over-the-counter medications and supplements, so the list is easily accessible when visiting a doctor or pharmacist.



Do a walk-through safety assessment of the home.

Most falls happen at home. There are many simple and inexpensive ways to make a home safer. For professional assistance, consult an occupational therapist. Here are some examples:

- **Lighting:** Increase lighting throughout the house, especially at the top and bottom of stairs. Ensure that lighting is readily available when getting up in the middle of the night.
- Stairs: Make sure there are two secure rails on all stairs.
- Bathrooms: Install grab bars in the tub/shower and near the toilet. Make sure they're installed where your loved one would actually use them. For even greater safety, consider using a shower chair and hand-held shower.
- Floors: Keep floors clutter free. Remove small throw rugs or use double-sided tape to keep the rugs from slipping.

Find an appropriate community-based falls prevention program.

Many communities across the country offer falls prevention programs that have been proven to help people reduce their risk and fear of falling. Below are four common programs:

Matter Of Balance For adults with moderate to high falls risk.

The program emphasizes practical coping tactics to reduce fear of falling and teaches falls prevention strategies. Structured group intervention activities include group discussion, skill building, and exercise training that can be done sitting.

Stepping On For adults with moderate to high falls risk.

The program offers strategies and exercises to reduce falls and increase self-confidence in making decisions and behavioral change in situations where older adults are at risk of falling. Participants should feel safe standing and walking independently before beginning this program.

Tai Chi For adults with lower falls risk.

Tai Chi programs help adults improve mobility, balance, strength, flexibility, and psychological health. Prior to starting Tai Chi, the participant should be able to stand on one leg for 5 or more seconds and not be fearful of falling.

Stay Active And Independent For Life For adults with lower falls risk.

This physical activity program reduces falls risk factors by increasing strength and improving balance. Each class includes a warm-up, aerobics, balance activities, strengthening and stretching exercises that can be done seated or standing, and educational components.

Where To Find Falls Prevention Programs

- Local Area Agencies on Aging
- State Falls Prevention Coalitions
- Local senior center, YMCA, hospital, health clinic, or county Council on Aging

CAREGIVER'S CORNER



Moving into Senior Living? Questions to Ask During COVID-19

By Andrea Cooper, NextAvenue.org

bout 45% of all COVID-19 deaths in the U.S. have occurred in long-term care facilities, according to The Kaiser Family Foundation. Most of the widely reported outbreaks have been in nursing homes, which differ substantially from assisted living communities. In nursing homes, residents require care from a licensed nurse; some may be bed-bound or have feeding tubes. Independent and assisted living residents, in comparison, can live on their own or somewhat independently.

Concerns about moving into senior living in 2020 go beyond whether residents may contract coronavirus, though. There's also the issue of being able to see your parent after move-in if the community has rules pertaining to visitation.

Before the pandemic, visiting potential senior living communities was a smart way to choose. But in-person tours are rare right now; virtual tours via Facetime or Zoom with the opportunity to ask the communities' managers questions by phone are now the norm.

Questions to Ask

What are your testing protocols for both residents and staff? The Alzheimer's Association's goals for

coronavirus testing in assisted living communities include daily testing of staff, testing all residents now to identify cases, and administering additional tests later for residents showing symptoms. That's just the ideal, however. Many assisted living communities aren't close to that yet, partly due to lack of availability of COVID-19 tests. That said, regular testing of staff is critical because it's the staff that comes and goes from the community and is exposed to the surrounding community at large.

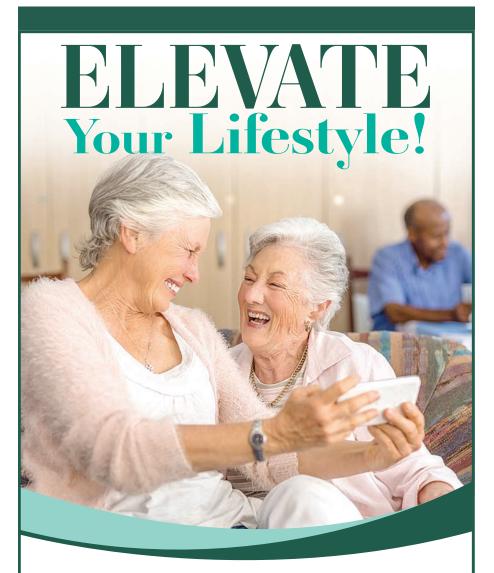
Has your facility had COVID-19 cases? What is the infection rate and how are you communicating

with families about it? If there have been cases, ask how quickly the leadership notified families once they were diagnosed and how regularly updates are sent. Also find out what the facility's plan is if a coronavirus outbreak occurs.

What safety protocols are in place to prevent COVID-19 from **spreading?** Among the things you'll want to know: how frequently are high-traffic spots such as elevator buttons disinfected, and whether the community has shifted from congregate dining rooms to meals delivered to apartments. Learn about the current move-in process, too. Are new residents quarantined or tested for coronavirus prior to or upon arrival in the facility?

What are you doing to maintain and support your staff? The key to a great community is its staff. Hero pay, additional sick leave and supplemental benefits such as assistance with groceries or transportation are tangible ways to support their employees. The incentives can help limit turnover, which is a clear benefit for residents. Since some employees may worry about working in senior communities during COVID-19 and passing the disease to their own families, it's also worth asking if the facility has been able to maintain its pre-pandemic staffing

What are you doing to engage residents? Social isolation increases the risk of depression and cognitive decline in older adults, a particular problem during the pandemic. Many group activities that give life to senior living communities have been put on hold. At a minimum, staff should help its residents set up virtual visits or "window visits" when possible with family and friends outside. Your last question: Has the community been creative in developing alternatives to keep residents entertained and active, mentally and physically.



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Perception

A simple shift in attitude can help us recognize the hidden potential for fulfillment in every event.

By Madisyn Taylor, www.dailyom.com

here is no secret recipe for happiness and contentment. The individuals who move through life joyously have not necessarily been blessed with lives of abundance, love, success, and prosperity. Such people have, however, been blessed with the ability to take the circumstances they've been handed and make them into something great. Our individual realities are colored by perception—delight and despair come from within rather than without. Situations we regard as fortuitous please us while situations we judge inauspicious cause us no end of grief. Yet if we can look at all we have accomplished without dwelling on our perceived misfortune and make each new circumstance our own, the world as a whole becomes a brighter place. A simple shift in attitude can help us recognize and unearth the hidden potential for personal and outer world fulfillment in every event, every relationship, every duty, and every setback.

The universe is often an unpredictable and chaotic place, and the human tendency is to focus on the negative and assume the positive will care for itself. But life can be no more or no less than what you make of it. If you are working in a job you dislike, you can concentrate on the positive aspects of the position and approach your work with gusto. What can you do with this job that can turn it around so you do love it? When faced with the prospect of undertaking a task you fear, you can view it as an opportunity to discover what you are truly capable of doing. Similarly, unexpected events, when viewed as surprises, can add flavor to your existence. By choosing to love life no matter what crosses your path, you can create an atmosphere of jubilance that is wonderfully infectious. A change in perspective is all it takes to change your world, but you must be willing to adopt an optimistic, hopeful mind-set.

To make a conscious decision to be happy is not enough. You must learn to observe life's complexities through the eyes of a child seeing everything for the first time. You must furthermore divest yourself of preconceived notions of what is good and what is bad so that you can appreciate the rich insights concealed in each stage of your life's journey. And you must strive to discover the dual joys of wanting what you have. As you gradually shift your perspective, your existence will be imbued with happiness and contentment that will remain with you forever.



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Happy Grandparents Day 2020!



Grandparents Day is celebrated on the first Sunday in September after Labor Day, and it is the perfect opportunity to spend time with the grandparents we love so much!

History of Grandparents Day

In 1969, nine-year-old Russell Capper sent President Nixon a letter suggesting that a day should be set aside in order to celebrate grandparents. On June 12, 1969, he received a letter back from Rose Mary Woods, Personal Secretary to the President, reading, "Dear Russell, Thank you for your letter to President Nixon. Your suggestion regarding a Grandparent's Day is appreciated, but the President ordinarily issues proclamations designating periods for special observance only when a Congressional resolution authorizes him to do so. With best wishes, Sincerely, Rose Mary Woods, Personal Secretary to the President."

Young Russell was helped in his endeavor by Marian McQuade, who is

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recognized by the U.S. Senate and by President Jimmy Carter as the founder of National Grandparents Day. McQuade wanted to educate the youth about the importance of seniors and the contributions they have made throughout history. She urged the youth to "adopt" a grandparent and learn more about their lives, challenges, and desires for the future.

Ms. McQuade lobbied Congress, and in 1977 Senator Randolph, with the help of other senators, introduced a joint resolution to the senate requesting the president to "issue annually a proclamation designating the first Sunday of September after Labor Day of each year as 'National Grandparents Day'." Congress passed the legislation, proclaiming the first Sunday after Labor Day as National Grandparents Day. On August 3, 1978, Jimmy Carter signed the proclamation, and the day was finally celebrated the following year.

1	5	9	6	2	4	7	3	8
6	2	8	7	3	5	4	9	1
7	3	4	9	8	1	5	2	6
2	6	1	8	4	9	3	5	7
9	8	5	3	1	7	6	4	2
3	4	7	2	5	6	1	8	9
8	1	6	5	9	3	2	7	4
4	9	3	1	7	2	8	6	5
5	7	2	4	6	8	9	1	3

Grandparents Day Activities and Gifts

Let's appreciate all the joy and wisdom that grandparents bring to our lives! This year we might not be having grandparents' day at school, but that doesn't mean we can't celebrate.

Some families get cards or gifts for grandparents. Most grandparents would say that a handwritten card is the perfect gift. Time is the most precious give one can give. Some ideas: Ask grandparents to show the kids one of their favorite hobbies, or teach them a skill, like how to fish. Arts and crafts together are always fun. If a grandparent would prefer a calm day, ask them to watch their favorite movie together. Or make one of the family's traditional family dishes together. No matter what, the best Grandparents Day activity involves children and grandparents together, celebrating family and each other.

5 Facts You Didn't Know About National Grandparents Day

1 It Has Its Own Song The official song for National Grandparents Day is "A Song for Grandma and Grandpa" by Johnny Prill.

2 It Has Its Own Flower The official flower is the "forget-menot" flower.

3 lt's Not Actually a Public Holiday Even though it was signed in as a national holiday it is celebrated more as an observance than a public holiday.

4 On Average 4 Million Cards Are Sent People are honoring their grandparents with cards—lots of cards. It's the least we can do.

5 Highest Day for Visits in Nursing Homes There are many days you'd want to spend with your grandparents but National Grandparents day was on average the highest day for nursing home visits.

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HAVE SOME FUN

Crossword By Dave Fisher

1	2	3	4	5		6	7	8	9		10	11	12	13
14						15					16			
17						18					19			
20					21						22			
				23					24	25				
26	27	28	29		30				31					
32					33			34		35		36	37	38
39				40				41	42					
43						44	45				46			
			47		48		49				50			
51	52	53					54			55				
56					57	58					59	60	61	62
63					64					65				
66					67					68				
69					70					71				

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Answers on page 13

ACROSS

- 1. Electrical pioneer
- 6. Brusque
- 10. District
- 14. Different
- 15. Dwarf buffalo
- 16. Love
- 17. Seeking damages
- 18. Celebrity
- 19. Glove
- 20. A language of India
- 22.1111
- 23. Close violently
- 24. Showy attire
- 26. Wise one
- 30. Reverence
- 31. A law enforcement agency
- 32. 64 in Roman numerals
- 33. Nil
- 35. A small island
- 39. Hypersensitivity
- 41. African pullover
- 43. Keno
- 44. Views
- 46. Always
- 47. Derisive laugh
- 49. Secret agent
- 50. Start over
- 51. Highly seasoned fatty sausage
- 54. Goulash
- 56. Small songbird
- 57. Finally
- 63. Quaint outburst
- 64. Head of hair
- 65. A person who is owned by someone
- 66. Unadulterated
- 67. Circle fragments
- 68. Indian antelope
- 69. Care for
- 70. Caustics
- 71. Abominable snowmen

DOWN

- 1. Nonsense (British)
- 2. Decorative case
- 3. Tibia
- 4. Extend credit
- 5. A giant with 100 eyes
- 6. Shipwrecked people
- 7. Wild
- 8. A soft sheepskin leather
- 9. A government tax
- 10. One who reproves
- 11. French for "Queen"
- 12. Consumer of food
- 13. Pretentious
- 21. Jargon
- 25. Nile bird
- 26. Thick piece
- 27. Spindle
- 28. Arizona river
- 29 Fair
- 34. Deftness
- 36. Not pre-recorded
- 37. Barely managed
- 38. Novice
- 40. Wander
- 42. Heretofore (2 words)
- 45. Gist
- 48. Characteristic of winter
- 51. Used a broom
- 52. Bicker
- 53. Gain knowledge
- 55. Weakling
- 58. Deviate
- 59. Wings
- 60. Not first
- 61. 57 in Roman numerals
- 62. Cravings

BAKED EGGPLAN WITH LEMON COUSCO

Often mistaken for a grain, couscous is actually more akin to pasta as it is made from tiny granules of durum wheat. While you could use a protein-packed option like quinoa (and feel free to do so), there's something so tempting about a mouthful of lemon-infused couscous.



· Level of Difficulty: Easy

• Serving Size: 2

Prep Time: 30 minutes • Cook Time: 1 hour 30 minutes

- 1 eggplant, halved lengthwise
- 2 teaspoons Harissa

INGREDIENTS

- 4 5 tablespoons olive oil
- Salt and freshly ground black pepper
- 3/4 cup couscous
- pared strips of zest from ½ lemon
- juice of 1 lemon
- 1 teaspoon smoked paprika
- 3 tablespoons pine nuts, toasted
- 3/4 cup fresh flat-leaf parsley, chopped, plus extra to garnish
- 1 teaspoon sesame seeds, toasted, to garnish

Tahini Dressing

- ½ cup tahini
- 2 tablespoons lemon juice
- 2 tablespoons olive oil
- 1 tablespoon maple syrup or agave nectar
- 1/4 teaspoon salt

DIRECTIONS

- 1. Preheat the oven to 350°F and lightly oil a baking sheet.
- 2. Score the eggplant flesh diagonally both ways, creating a diamond pattern.
- 3. Place on the baking sheet.
- 4. Spread a teaspoon of harissa over each half, covering all the crevices.
- 5. Drizzle 1 tablespoon of the oil over each, season with salt and pepper, and bake for 40 minutes or until the flesh is completely soft, turning over halfway through to ensure the skin doesn't crisp or dry out.
- 6. Place the couscous in a bowl with the lemon zest strips.
- 7. Add 2/3 cup freshly boiled water, cover and set aside until all the liquid has been absorbed-about 10 minutes.
- 8. Discard the lemon zest and fluff the couscous with a fork.
- 9. Scoop the flesh from the center of each eggplant half, leaving enough around the sides to keep its shape.
- 10. Roughly chop the flesh and place in a bowl.
- 11. Stir through the couscous along with the lemon juice, smoked paprika and remaining olive oil.
- 12. Season, then add the toasted pine nuts and parsley.
- 13. Divide the mixture evenly between the eggplant skins.
- 14. Return to the baking sheet and bake for another 15-20 minutes.
- 15. To make the dressing, place the tahini in a bowl with the lemon juice, oil, maple syrup or agave nectar, salt and 2 tablespoons water.
- 16. Whisk until smooth, adding a little more water if necessaryor use a hand-held blender.
- 17. Remove the stuffed eggplants from the oven and serve with a dollop of tahini dressing and a sprinkling of sesame seeds and parsley.

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Sudoku

Fill in the blank squares so that each row, each column and each 3-by-3 block contain all of the digits 1 thru 9.

				4	7	3	
				5			1
			9		5		6
2			8				7
	8	5			6	4	
3				6			9
3 8 4		6		3			
4			1				
	7	2	4				

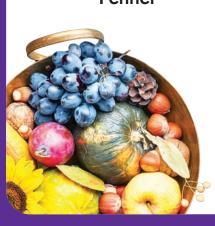
Answers on page 13

(courtesy of KrazyDad.com)

WHAT'S IN SEASON — in September —

This will vary depending on the time of the month and where you live.

Apples
Arugula
Beans
Beets
Corn
Cucumbers
Eggplant
Fennel



Figs
Grapes
Mangoes
Melons
Okra
Pears
Peppers
Plums
Pumpkins

Raspberries
Shallots
Sorrel
Summer Squash
Tomatoes
Watercress
Winter Squash

THE FUNNY Pone

Mathematics:

This comes from 2 math teachers with a combined total of 70 yrs. experience. It has an indisputable mathematical logic.

What does giving 100% mean? What does it mean to give MORE than 100%? Ever wonder about those people who say they're giving 110%? We've all been to those meetings. How about achieving 103%?

What makes up 100% in life? Here's a little mathematical formula that might help you answer these questions:

lf٠

ABCDEFGHIJKLMNOPQRSTUVWXYZ is represented as:

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26

Then:

H-A-R-D-W-O-R-K 8+1+18+4+23+15+18+11 = 98%

And K-N-O-W-L-E-D-G-E 11+14+15+23+12+5+4+7+5 = 96%

But A-T-T-I-T-U-D-E 1+20+20+9+20+21+4+5 = 100%

And B-U-L-L-S-H-I-T 2+21+12+12+19+8+9+20 = 103%

And look how far ass-kissing will take you! A-S-S-K-I-S-S-I-N-G 1+19+19+11+9+19+19+9+14+7 = 118%

So – one can conclude with mathematical certainty that, while Hard Work and Knowledge will get you close, and Attitude will get you there, it's the Bullshit and Ass-Kissing that will put you over the top.

Now you know why politicians are where they are!

Teacher: "If I gave you 2 cats and another 2 cats and another 2, how many would you have?"

Johnny: "Seven."

Teacher: "No, listen carefully... If I gave you two cats, and another two cats and another two, how many would you have?"

Johnny: "Seven."

Teacher: "Let me put it to you differently. If I gave you two apples, and another two apples and another two, how many would you have?"

Johnny: "Six."

Teacher: "Good. Now if I gave you two cats, and another two cats and another two, how many would you have?"

Johnny: "Seven!"

Teacher: "Johnny, where in the heck do you get seven from?!"

Johnny: "Because I've already got a cat!"



We've spent nearly 50 years at one job. Maybe you can relate?



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