

Senior Living

OCTOBER 2013

McLean
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Senior Living Calendar

Exciting Things are Happening at McLean's Premier Retirement Community!

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TUESDAY/OCT. 8

Caregiver Support Group. 7-8 p.m. Fairfax County's free family caregiver telephone support group, meets by phone. Register beforehand at www.fairfaxcounty.gov/dfs/olderadultservices/caregiver.htm or call 703-324-5484, TTY 711.

Family Caregiver Seminars. 7-8:30 p.m. at Pohick Regional Library, 6450 Sydenstricker Road, Burke. "Financial Issues for Caregivers." To register, visit www.fairfaxcounty.gov/OlderAdults and link to Register Now for Caregiver Seminars, or call 703-324-5205, TTY 711.

WEDNESDAY/OCT. 9

Medicare 101. 3-4:30 p.m. at Chantilly Regional Library, 4000 Stringfellow Road, Chantilly. Fairfax County is offering Medicare 101 — a two-three hour program on Medicare basics. Information and registration at www.fairfaxcounty.gov/dfs/olderadultservices/vicap.htm or call 703-324-5205.

THURSDAY/OCT. 10

Medicare 101. 10 a.m.-noon at Shepherd's Center of Oakton-Vienna, Unitarian Universalist Congregation of Fairfax, 2709 Hunter Mill Road, Oakton. Fairfax County is offering Medicare 101 — a two-three hour program on Medicare basics. Information and registration at www.fairfaxcounty.gov/dfs/olderadultservices/vicap.htm or call 703-281-0538.

NARFE Meeting. 1:30 p.m. at the Vienna Community Center 120 Cherry St., Vienna. National Association of Federal and Active Retired Employees, Chapter 1116 Vienna-Oakton presents Gayle Nelson from Blue Cross, Blue Shield. Also Del. Mark Keam and

challenger Leiann Luse. Free and is open to all members and their guests. Call 703-938-7346.

WEDNESDAY/OCT. 16

Navigating the Local Transit System. 10 a.m.-12:30 p.m. at Reston Association, 12001 Sunrise Valley Drive. Learn to read bus schedules and route maps, pay the fare and how to signal the driver to stop, as well as other bus travel skills. The bus will deliver participants to a Metrorail station to learn how to determine the fare and purchase Metrorail fare cards, load SmarTrip cards and read the system map. 55 years and older. Free. Call 703-435-6577 to register.

Can I Afford That? 1:30 p.m. at Alzheimer's Family Day Center, 2812 Old Lee Highway, Suite 210, Fairfax. Free educational program. A financial manager will lead the discussion on the cost of long term care, options available. Call 703-204-4664 to RSVP.

NARFE Meeting. 7 p.m. Dinner meeting for Federal Employment Retirement and Benefits Presentation at Neighbor's Restaurant, 252 Cedar Lane, Vienna. There is a cost. Sponsored by NARFE Chapter 1116 (Vienna-Oakton). If interested in attending, call 703-205-9041 or 703-938-7346 for reservations.

WEDNESDAYS/OCT. 16-NOV. 20

Chronic Disease Management. 10 a.m.-noon at The Shepherd's Center of Oakton-Vienna, 541 Marshall Road, S.W., Vienna. Free six-week chronic disease self-management program. Registration deadline: Oct. 11. Attendees register at 703-281-0538. Contact Maureen Riddel, Shepherd's Center volunteer at 703-481-2371 or Casey Tarr, SCOV Health Advocate at 703-821-6838.

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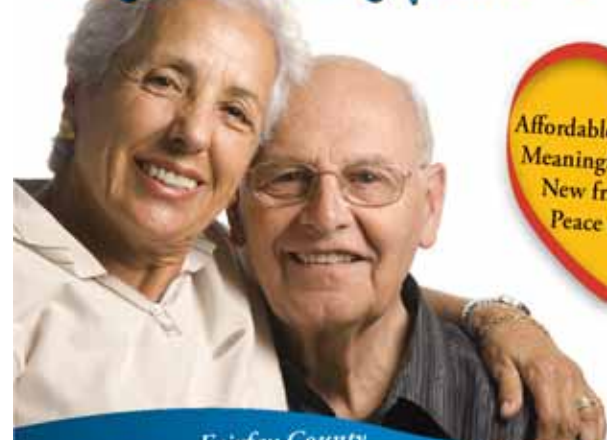
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Senior Living

Choosing a Home for the Golden Years

Many options for retirement communities in the region.

BY MARILYN CAMPBELL
THE CONNECTION

Jim Harkin, 81, and his wife, Phyllis, 80, have little free time these days. Jim spends his days protecting and photographing wildlife on the 60-acre campus at The Fairfax, a Sunrise Senior Living Community, in Fort Belvoir. He helped build, refurbish and maintain more than 20 birdhouses on the grounds, including homes for tree swallows and purple martins.

Phyllis Harkin manages a small gift shop and runs marathon bridge games. The couple moved to The Fairfax more than two-and-a-half years ago from their home in Fairfax because they wanted the freedom to pursue their interests and live among people with similar lifestyles without the responsibility of maintaining a household.

"We were getting older and keeping up a house and yard in Fairfax was getting harder," said Jim Harkin, a retired Navy captain. "We also wanted to make our own decisions about where and when we moved and not have that left up to our busy children."

Phyllis Harkin, a former real estate appraiser, said, "We did it in time, but after living at The Fairfax, we wish we'd done it earlier. You have no idea how much fun it is over here."

Kathy Aust, 67, has lived at Heritage Hunt Golf and Country Club, an independent liv-



Phyllis and Jim Harkin are active residents of the Fairfax, a Sunrise Senior Living Community, in Fort Belvoir. Jim, 81, runs the facility's birding club and Phyllis, 80, manages the campus gift shop. The couple wanted to live among people with similar lifestyles without the responsibility of maintaining a household.

ing retirement community, in Gainesville, Va., since 2001. She moved there from Burke, she said, for social reasons. "I wanted to move into a community where there were people who had lifestyles that were similar to mine," said Aust, a retired federal employee who has no children. "I like living in

a community with people in similar situations. It is very active here. There are indoor and outdoor pools, tennis and golf. There is so much to be done here." Aust volunteers on the Heritage Hunt community task force and with the

Where to Find Help for Seniors

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community's women's group.

THESE TRANSITIONS were smooth and logical for them, based on their own choice.

But the decision to move out of one's home and into a retirement community is often complicated and can be fraught with anxiety. Experts in geriatrics say that reasons to relocate to a retirement community usually boil down to three factors: social connections, physical condition and personal safety.

"It's like a trifecta or a three-legged stool. It is hard to be stable if one leg isn't working" said Andrew Carle, an executive-in-residence at George Mason University's program in senior housing administration in Fairfax. "A person might be physically healthy, but if they are isolated in their home and not driving or have lost touch with friends, they could become depressed."

Carle, who has more than 25 years of

"We wish we'd [moved] earlier. You have no idea how much fun it is over here."

— Phyllis Harkin

SEE CHOOSING A HOME, PAGE 4

Diverse Needs, Desires Drive Mobility Solutions

Seniors increasingly seek innovative plans that embrace both the present and the future.

BY JOHN BYRD

Russ Glickman was a traditional full-service remodeler until the late 1990s when he abruptly added a host of accessibility certifications to a long list of building industry credentials. The service extension was less about opportunity than a personal call to apply what he'd learned from personal experience in helping his son, Michael, who was born with cerebral palsy.

"As a professional builder and a parent, I was fascinated with the challenges entailed in helping people with mobility issues make use of their homes, and really eager to absorb the evolving strategies and technologies that were then beginning to evolve," Glickman said. "I spent several years acquiring new certifications while continuing to execute full-scale remodeling projects."

Starting initially as a helpful neighbor with sound advice, Glickman, who has op-

erated Glickman Design Build for more than 30 years, eventually recognized that the demand for accessibility solutions was larger than he had thought.

"I was offering feasibility studies in special needs situations mostly on referral, but the inquiries pretty quickly became about half of my work," he said. "It wasn't that there weren't other practitioners in this field. But I soon discovered that the need for original solutions was as pronounced among people with mobility requirements as it is in remodeling — may be more so."

His conclusion: an accessibility solution that's tailored to an individual is always best, especially when designed to accommodate both current and probable future needs.

"The reality is that every disability is also uniquely personal, and every house presents challenges that must be fully understood if a solution is to work well."

On top of this, Glickman said, there are

always code and budget issues, emerging technologies and, often, collaborative input from therapists, engineers and other specialists.

"This is an enormous societal issue, with a significant and growing practice literature that must be absorbed," he said. "Having said this, I find that the best solutions arise from effectively collaborating with someone facing challenges who's really passionate about making the most of their situation."

IF THERE'S ONE TREND that's well underway in Northern Virginia, it's that seniors are consistently deciding to age in place — even when a major retrofit is called for.

In McLean, for instance, a retired executive and his wife recently hired Glickman to develop a plan for installing a three-story elevator in their 10,000-plus-square-foot house. "The owners are in their late 60s, and walking without assistance. The stairs have gradually become a chore, however, a situation that was unlikely to improve."

Since elevator access within the home's existing structure wasn't feasible,

Glickman's plan calls for a 60-foot tower designed to house an elevator shaft — a substantial modification that will not be visible from the front facade.

Inside, the tower will connect a finished lower level, a study on the main level and a

SEE DIVERSE NEEDS, PAGE 4

McLean
CONNECTION

Senior Living

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Senior Living

Choosing a Home for the Golden Years

FROM PAGE 3

executive-level senior housing and health care experience, adds that if a person has had a stroke or another condition that affects mobility, living alone is challenging. "If you need assistance with dressing and bathing that would make it difficult for you to stay in your home alone," he said.

Safety issues, such as a risk of falling or medication management, are other reasons that one might not be safe living alone, said Carle. "If you fall and hit your head and nobody comes, you could die," he said. "There is also the medication issue. The average 75-year-old is on between seven to 12 medications each day. The number one cause of hospitalization in people over 75 is medication error. The number one cause of death due to injury in seniors is falls."

Linda Guly, Ph.D., a professor of psychology at Marymount University in Arlington, who teaches aging psychology, says that despite the amenities and services that make retirement communities a good fit for many people, a feeling of losing the ability to make decisions about one's life makes many seniors resistant to moving.

"One of the biggest psychological issues faced by the older person is the feeling they are giving up control of their lives in so many ways and that can be depressing," she said. "Engage the older person in the process as much as possible and respect their choices, whether it is how to decorate their place or what to bring."

Andrew Carle said, "The very best strategy for a resistant parent is respite stay, which is essentially a short-term stay. The family goes on vacation and lets the senior stay at a retirement community for a week or two. It gives the senior a chance to meet the people, eat the food and participate in the activities. Usually after about a week or two the senior realizes that living alone in their home and watching television all day isn't all it is cracked up to be."



John Mutchler



Peg Bixler



Dorothy Lavoie

PHOTOS COURTESY OF THE HERMITAGE

WHEN ONE DECIDES that living alone is no longer wise, there are plenty of options. Local retirement communities run the gamut from independent living where a person lives among fellow seniors, but does not need special care, to levels of assisted living. Assisted living facilities provide different levels of care for those who need help with small tasks such as medication administration, to those who need help with daily tasks such as getting dressed or taking a bath. Skilled nursing facilities, where residents have greater medical needs, are another option.

Some facilities such as The Fairfax and the Hermitage in Alexandria, are continuing care retirement communities that enable residents to transition in the same facility as conditions change.

"Independent living basically meets a person's social needs," said Carle. "Assisted living is for people who have physical needs or limitations. I don't think of nursing homes as senior housing. It is long-term health care or for someone who is recovering from an injury or who needs physical therapy."

Lynette Mitchell, director of marketing and community outreach at The Hermitage, explains that, "We have everything from people who are totally independent to people who need help bathing and dressing. We can deliver all of those services."

Debra Norberg, associate director of marketing at The Hermitage, said that in addition to amenities including a game and fitness rooms, there is support throughout the facility. "There is a community aspect. If someone doesn't show up for a meal, we notice. We work as a team to make sure we all know the residents, and if they don't show up for something, someone is going to check on them." Activities as simple as a meal in the dining room can become an opportunity for socializing. "This is a new chapter in their lives. We try to pair people up and give them a buddy and we have activities every single day of the week."

SOME RETIREMENT COMMUNITIES, such as Great Falls Assisted Living in Reston, Brightview Senior Living in Great Falls and Sunrise At Fox Hill in Bethesda, Md., also offer memory care services for those with Alzheimer's disease or dementia.

Westminster at Lake Ridge in Occoquan, Va., another continuing care retirement community, offers residents an array of activities that run the gamut from performing arts to gardening. "We have the Westminster, a choir and the Westphalians, a drama group," said Carolyn Crosby, assistant administrator at Westminster. "We also have a resident garden, which the residents tend themselves."

They grow vegetables and leave overflow produce for other residents to take."

"Fox Hill's... amenities, services and fascinating residents all combine to offer a distinctive retirement lifestyle that is both very attractive and very accessible," said Julie Sabag, director of marketing at Fox Hill, in Bethesda, Md.

Peg Bixler, an assisted living resident at The Hermitage, said her doctor advised her that she should not live alone anymore. "And I didn't want to be a burden to my children," Bixler, a retired oncology nurse, added. "I do miss my career and I miss traveling, but I've traveled all over the world."

Bixler says living in an assisted living community allows her to maintain an active lifestyle while still getting the help that she needs. She volunteers in the gift shop of the John F. Kennedy Center for the Performing Arts, and for the USO at Washington Reagan National Airport, greeting veterans and passing out flags.

"I'm busy 24 hours a day. I get out and walk every single day," said Bixler. "I do a lot of reading. You socialize at meals here. I go out when they go on the shopping trips, which gets you out and about." Bixler is still able to live in close proximity to her family, which includes a daughter who lives in Alexandria and a son who lives in Maryland.

Relocating from a different state to be close to family is a common choice. That was the case for 93-year-old Dorothy Lavoie, another resident of The Hermitage. Lavoie, a former nurse, served in World War II and the Korean War. "I was living in California, and my niece who lived here wanted me to live near her."

Another Hermitage resident, John Mutchler, a retired chemist, moved from New Jersey to Alexandria to be closer to his family. "I keep busy here. I am the chairman of the executive committee. I am also a member of the poetry group where we read poetry every week. I am a member of the current events group."

Diverse Needs, Desires Drive Mobility Solutions

FROM PAGE 3

third floor sitting room. The owners are also considering an option to build-out the fourth floor as a guest room suite.

The execution is meant to be architecturally seamless, with the tower clad in brick to match the 25-year-old, original masonry.

Not surprisingly, professionals regarded this as a highly specialized assignment. "There aren't lot of local contractors who could execute a project like this," said Andria Gregory of Area Access, Inc, the firm that will install the elevator in the new shaft.

"The specifications are always exacting, so it's important to us to work with people who have a track record," Gregory said.

MEANWHILE, IN ARLINGTON, a mobility plan with incremental components

Details

Russ Glickman periodically offers workshops on accessibility solutions for seniors. Visit www.GlickmanDesignBuild.com or call 301-444-4663

has been implemented in the two-level ranch Jaime and Janice Marquez have occupied for 24 years.

Jaime, 59, who had polio as a child but walked without assistance for most of his adult life, started intermittently using crutches again about 10 years ago.

"This wasn't a surprise," Janice Marquez said. "The research shows that polio survivors can have increased mobility challenges as they age, so we wanted a wheel-chair friendly plan even though it's not a necessity right now."

The biggest obstacles: a curving, rug-

gedly-steep front walk that links up with a front stoop; standard-width interior halls and doorways that had proven restrictive; and a back deck inaccessible to Jaime Marquez from the ground.

"It had become difficult for Jaime to negotiate the house on crutches, so we were looking ahead," Janice Marquez said. "Initially, I wasn't sure if we should remain in this house, but I had read about Glickman and decided to get his feedback."

Compounding the "move vs. improve" question was the couple's mutual concern that an accessibility solution might make the house less functional for others, including two daughters away at college who are frequent visitors.

"I've seen accessibility modifications that become obstructive," Janice Marquez said. "I wanted to see if we could make changes

that would enhance the property — functionally and aesthetically."

To improve front elevation access, Glickman and team removed the existing front walk, re-graded the front slope so that it rises at the rate of one inch per foot and introduced a "zero step" entry.

To facilitate Jaime Marquez's access between the rear deck and the yard, Glickman designed and constructed a wider, low-rise staircase that accommodates his crutches.

While focused and small-scale, the changes have dramatically improved Jaime Marquez's ability to move freely from driveway to front door and throughout the house. They've also bestowed an unexpected benefit.

"The interior now feels much more spacious," Janice Marquez said, "and the wider doorways allow more natural light."