



Aging in Place[©]

A Handbook for Decision-making

This publication is a draft. It will be updated as events require.. The most up-to-date draft may be downloaded from www.agingwelllglgp.com

This handbook has been written by Ralph Gutekunst as an information aid for those exploring the option of “aging in place”, that is, staying in

their home rather than moving in with one of their children, to a smaller home or a retirement community.

Mr. Gutekunst has been actively working with the senior community, especially in La Grange and La Grange Park, since the mid-90s when he became involved with a grant from the Robert Wood Johnson Foundation to Age Options of Oak Park, Illinois. The grant was designed to aid communities in greater Lyons Township, Illinois develop programs that would help people who choose to “age in place”. He has been a part of the Aging Well Community Action Team for most of the years since its establishment in 2003.

This publication is drawn from his experience and knowledge of La Grange and La Grange Park, where he has lived since 1973. Born in 1935, Mr. Gutekunst has personally experienced the problems and the need for informed decisions to make the difficult choice of where and how to spend one’s retirement years.

His masters and doctoral work in psychology have helped him develop insights into how to face dilemmas and challenges like those he has experienced over the last two decades.

Copyright© 2017, 2018, 2019. Ralph M. Gutekunst

Table of Contents

Preface	3
Introduction: Rationale for Aging in Place	4
1. Personal Safety and Safe Housing	7
Well-being	9
2. Beyond the Home and Transportation	15
Aging in Place and the Need for Transportation	16
Transportation services available locally	18
3. Aids for Aging in Place and Housing Alternatives	21
Cost Estimates of Home Ownership and Home Owner Subsidies	21
Reverse mortgages	22
Information Resources for Seniors and Those with Disabilities	23
Nutrition Assistance Programs	
Low income energy assistance	28
Property Tax Freeze	28
Handyman Assistance	28
Adult Day Care Services	29
In-Home Caregiver Assistance	29
Shelter and Services for the Homeless	30

Condominium Ownership—a downsizing alternative	30
Subsidized housing for seniors	31
General Apartment Rental Information	33
Retirement Communities with Independent Living Facilities	34
Nursing Homes—Assisted Living Facilities	36
Appendices	38

Preface

Most people say they would prefer to stay in their long-time residence as they age. Aging Well LG/LGP is dedicated to helping them do just that.

But, aging in place does put a lot of responsibilities on those wishing to stay in their homes. They are aging and, so too, is their home. They must consider what changes should be made to their behavior and home to make it safer and protect them from falls and other injuries associated with age.

Seniors have to consider whether, in the future, they will become isolated in their home, unable to get out and socialize. Friends also age, move away and pass away. Children's lives shouldn't be too disrupted by the senior's need to "get out of the house".

There are also financial considerations. Their house is very often the largest financial asset they have. Seniors should look at the financial side of aging in place before they make a decision for the long term.

The **Aging in Place Handbook** explores each of the above facets and provides information on local resources that can assist seniors in making choices regarding safe and affordable housing and transportation.

This handbook has been written especially for the residents of La Grange and La Grange Par, Illinois. The resources listed are unique to these communities. Similar resources exist throughout the country. Residents from other communities should contact their local or county government and ask what the local Area Agency on Aging is called and how they may be contacted.

Every part of the U.S. is served by an Area Agency on Aging, by whatever name, so don't accept a negative answer.

Introduction: Rationale for Aging in Place

Desires of seniors

The term "Aging in Place" was coined to refer to those who, for whatever reasons, wished to remain in their current home rather than to move to an alternate dwelling or a retirement community.

Two sides of the coin

Aging in Place is the preferred choice of the majority of seniors as they age. An American Association of Retired Person (AARP) 2018 nationwide survey indicated that 76 percent of people aged 50 and older would prefer to age in their current home. (*Appendix 1*). Having people age in their own home is also a better choice for public agencies in that, properly administered, aging in place requires fewer support services and can be far less expensive than institutionalization for seniors who lack the means to afford a retirement community. A third choice is to "downsize", that is, move to a smaller, easier to navigate house or apartment. This alternative will be considered in the second section, Financial Comparisons of Aging in Place,

Downsizing and Retirement Community Living.

In 2000 Lyons Township received a grant through Age Options from the Robert Wood Johnson Foundation to assist the villages in and immediately adjacent to Lyons Township to develop programs that would assist aging residents to remain in their homes as they aged.

Aging Well LG/LGP was established to bring the Aging in Place concept to the communities of La Grange and La Grange Park. Its first two initiatives were the establishment of Walk for Health and the popularization of the File of Life. These programs and others that have been developed by

Aging Well LG/LGP are described in the groups' web site agingwell-glgp.com.

Over the almost two decades that it has been operating, Aging Well has met older people who have had to wrestle with the decision to age in place or to downsize, to move to a retirement community, and, if the latter, then when? These are not easy decisions and are best faced when under as little pressure as possible, i.e., not after losing one's spouse or after a serious medical event. *Appendix 2* shows the probable longevity of men, women and couples after the age of 65 which can provide food for thought when planning for the future. This workbook will try and help perfect the decision-making process by focusing on issues related to aging in place. This focus is designed to raise the consciousness of the would-be decision-maker to insure that all aspects of the decision have been recognized. *Appendix 3* summarizes the results of a geriatric study done at Northwestern University that investigated what factors might hinder people from aging in place. The results can be seen in the web site they created www.planyourlife-span.org.

The following may seem daunting but is necessary to make sure that the decision to age in place is made with full understanding of the tasks and responsibilities that come with the choice of independence. What the reader has to realize that if one does not take responsibility for one's future, it is highly likely that at some point someone else will. Should you experience illness, stroke, loss of a spouse or other sudden, catastrophic events, it is likely that the decision as to where you will spend the rest of your life will likely be taken out of your hands. This handbook is not just intended to help those making an initial decision to age in place but should be looked at as a periodic checklist to be used as circumstances change and events happen. Just as you go to your doctor for periodic checkups and talk to your financial advisor, children or other confidants, so you should refer to this Handbook to help you decide whether you should continue to age in place or whether now, or in the near future, you should decide on an alternative. The first section discusses the physical needs that apply to one's home. The second section is a discussion of

socialization, and the need for transportation. Several local transportation resources are listed. The third section is a discussion of the costs of home ownership, financial information on alternatives and resources that make home ownership and senior living more affordable. Contact information for all manner of senior needs is also provided.

1. Personal safety and Safe Housing

Those wishing to age in place, i.e., stay in their homes, should consider their home in a new light — not just as a comfortable, familiar home but as a building that will support their desire to remain independent and safe. Older persons staying in their homes should consider what changes may need to be made over time to allow them to stay safely. It's unfortunate, but true, that one of the leading causes of death for seniors is a fall. (*Appendix 4*) How can the chance of a fall be minimized in a home? Consider the following check list:

- Installation of grab bars in the bath / shower and alongside the toilets
- Installation of better lighting throughout, including night lights in bathrooms, kitchens, etc., and additional lighting on stairways, both at the top and bottom
- Removal of “trip inducers” such as thresholds between rooms and throw rugs, wearing slippers or other “soft soles” footwear. Worn spots in carpeting and linoleum are good trip inducers
- ^a Pets, especially small ones, are trip inducers. So are grandkids, but they're usually smart enough to get out of the way, but be careful anyway especially when they're still crawling.
- ^{*} Medications can cause lightheadedness and dizziness. Blood pressure medications are especially good at making you dizzy to the point of falling if you don't keep hydrated.
- Well-fastened railings of a proper diameter for holding (not just for style) on all stairs and stairways, both sides of the stairway, indoors and out, upstairs and to the cellar.
- Availability of supplemental lighting (e.g., flashlights and task lights) with easy to use on-off switches.

While falls may be the most dangerous element in aging, houses and their occupants have other items to consider in regard to safety. Should a per-

son fall, will they be able to get up without assistance if not injured? This checklist suggests some moves and devices that can aid a person in distress or help them avoid it.

- A personal alarm, either wrist or necklace to summon help
- * A bedside alarm reachable from either the bed or the floor alongside the bed
- A “lockbox” or other such key storing device which allows emergency personnel to enter the home without damage to the home
- Notification to one’s 911 dispatch agency of special needs or circumstances, e.g., extreme deafness, presence of a pet or working dog that may appear to be a threat to first responders
- Smoke & carbon monoxide detectors, preferably tied to house wirings so as not to require standing on a step-stool to replace batteries. Otherwise, your local fire department would be happy to schedule an appointment to come and change your batteries for you.
- Gas stoves and other open-flame devices should be replaced. Even with electric stoves, residents should not wear flimsy clothing such as negligees with electric stoves. Man-made fibers such as nylon and rayon have low ignition points and can burn or melt, causing bad skin burns.
- Emergency lighting & battery-powered weather radio
- Viable phone system, fixed, wireless &/or cellular
- Secure locks on all entrances
- Bars or other barriers on cellar windows & other easy methods of entrance
- A reliable, adequate heating/cooling system that allows for good year-round heating, cooling and humidity control.

Should a person be more handicapped and require additional modifications to their home, the following should be considered:

- A two or three story house would require a stair lift or elevator. Straight stair chair lifts can be rented or bought. Purchase prices run around \$300 to \$400 per floor.
- Toilet seats should be raised to enable a person to sit and stand. A grab bar should also be installed alongside
- Bathtubs should be replaced with walk-in showers with no threshold
- A ramp or ramps would be needed at least one entrance door to accommodate a walker or wheelchair
- Doors throughout the house would have to be widened to accommodate a wheelchair
- Personal help such as a home health care worker, if only for a few hours a day to help with dressing, meal preparation and errands
- Round the clock nursing care in the case of illness or dementia.

See *Case Examples in Appendix 5* for a “worst case scenario”.

Well-being

In the area of well-being, consideration has to be given to how well one will fare taking care of oneself and one’s spouse or companion. The answers vary in each situation depending on the physical strength and agility of the respondent, the acuity of their mind and eyesight.

Meal preparation is a huge consideration for seniors. More and more is known about nutrition and diet as related to age and good health. A recent article in *HealthDay: Mediterranean Diet May Boost Brain Health* in *Appendix 5*) points to controlled studies that report a drop of over 50 percent in the occurrence of Alzheimer’s in subjects holding to diets that approximate the “Mediterranean diet”. Nutrition is also important for physical health and seniors can preserve or diminish their abilities, activities and their lifespan depending on their diet. Persons choosing to “age in place” should be prepared to achieve the following tasks, either alone, with the

help of a spouse, relative or home care attendant or resources listed I Section 3..

- Shop for and purchase a variety of fresh foods, especially fruits, grains and vegetables on at least a weekly basis
- Prepare these foods in a healthy and appetizing fashion
- Be able to safely store left-over foods and recognize when those foods have reached the end of their “shelf life” and discard them
- Abstain entirely from alcohol if living alone or if taking prescription drugs that are negatively affected by alcohol and keep to the new guideline of no more than one drink a day for persons of either gender.
- Be able to organize one’s medications so that they are taken or used in a timely fashion.
- Have the strength and acuity to perform housekeeping tasks such as laundering clothes, changing bed linen, towels, etc., vacuuming carpets, sweeping floors, cleaning countertops, stoves, refrigerators, etc., or have the means or assistance from others to have these chores performed on a timely basis
- Recognize the signs of vermin or insect infestation and know how to successfully deal with it
- Have the strength, ability and acuity to perform routine household operational tasks, e.g., operating the thermostat, locking doors, opening and closing windows, turning TVs and radios on/off, picking up fallen or dropped objects, responding to telephone calls, being able to recognize scams and hucksters trying to take advantage
- Be able to care for pets’ cleanliness, exercise and dietary needs
- Have the energy and motivation to perform reasonable exercises by oneself or be able to join others in walking, stretching, breathing, and core strength exercises
- * Be able to get back on your feet without help after a non injurious fall

- Be able to maintain or have the means to obtain help in maintaining lawn & garden, snow shoveling, gutter cleaning, trash and garbage removal
- Be able to recognize serious problems related to house maintenance such as power outage, smoke detector activation, basement flooding, roof leaking, etc. and be able to get appropriate assistance in a timely manner.

Resources to Aid Personal Safety and Safe Housing

Earlier pages called attention to significant tasks and potential events that should be considered by a person or couple facing the dilemma of whether to age in place or choose other options. The list may be daunting but there are many resources, organizations and actions that you can take to help should you choose to be as independent as your circumstances will allow.

- **Informing 911 Dispatch** of special needs. Don't be afraid to call 911 to inform the dispatch center of special needs. Just call 911 and explain what your needs are. A record of your situation will be entered and will be displayed to the dispatcher should you make an emergency call.
- **File of Life** is a form that helps you list your important medical information. Should you require medical assistance, first responders have to have certain personal and medical information before they can transport you. They need to know your name, date of birth and basic medical information such as recent medical history and current prescriptions, vitamins and herbals being used. The File of Life is a convenient form which, when filled out and kept up to date, provides vital information to physicians receiving you in the hospital. Having this information at hand can save precious minutes in an emergency and reduce potential errors in treatment as a result of a lack of knowledge of previous treatments and medicines.
- The File of Life form comes in a red pouch with a magnetized strip that allows you to stick it on the side of the refrigerator. Included is a small wallet or purse-sized card that has the most vital information on

it that can be carried with you at all times. First responders in La Grange and La Grange Park are trained to look for the File of Life pouch or purse/wallet card and take it with you to the hospital. The pouch and the associated forms are available at both Village Halls, Fire Departments, reception desks or Aging Care Connections on Harris Avenue for a small voluntary donation.

- **Battery operated smoke and carbon monoxide detectors** are available at many local hardware and big box stores such as Ace, True Value, Home Depot, Menards, etc. It may be advisable to have an electrician install a detector powered by house current to avoid having to remember to replace batteries on a regular basis.
- **Battery operated weather station radios** which are tuned to the NOAA weather reports are comforting to have during power outages and when tornados are predicted.
- **Viable phone systems** are very important. Some people buy a cell phone which can be more expensive, must be recharged and may be complicated to operate. An alternative to a cell phone is a wireless home phone that only operates within a limited distance of the base unit provided. It is recommended that whichever type of phone is utilized that the senior wear an apron or skirt, shirt or trousers with a pocket to keep the phone receiver with them at all times and to practice utilizing the 911 “speed dial” feature.
- **Personal medical alarms** come in a large variety of packages, and can be worn around the neck or as a wristband. bestcompany.com website provides links to over two dozen companies’ websites and provides rankings for all of them. Users should look for service responders providing 24/7 service over the geographical area frequented by the wearer.
- **Lockbox** for safe storage of house key: The Lockbox is like a small safe that holds a key to your house. The Lockbox can be opened only by a first responder with a master key. It allows the first responder to enter your house quickly, without damage to property such as when fire personnel have to break down a door to gain entry. The La Grange

Park Fire Department can provide information on the product, cost and safety of operation.

- **Dead bolt locks** can be purchased and installed fairly easily with hand tools but they have their limitations. Used on a door with a window, breaking the window could allow an intruder to reach in and unlock the deadbolt from the outside. Old fashioned sliding bolts can also be installed easily, can be placed out of reach of a window but might not be able to still be in reach of the resident. They also have the disadvantage of not locking automatically. They have to be put into the locked position anytime after the portal is opened. The most secure type of lock would be a deadbolt system installed by a locksmith in the door itself. This is best done with a solid door without a window. This suggestion would apply not just to front and back doors, but especially to doors that might lead from an attached garage into the house. Many people are very lax about keeping such a door locked and intruders are well aware of this and take advantage of this to enter..
- **Bars** on cellar windows and other easily accessible windows low to the ground that can be entered easily should have bars or other devices installed to prevent easy entrance.
- * **A “doorbell” video camera and intercom.** Unfortunately, there are people in this world who want to take advantage of Seniors, who they regard as easy targets. To protect ourselves from scams and intruders, we have to be vigilant as to whom we open our doors. A camera/intercom allows a homeowner to question someone seeking entry. It would allow the resident to vet the person at the door without opening it and possibly being brushed aside by someone pretending to be from a utility , a familiar scam.
- **A reliable heating, cooling and ventilating system** is vital for safety and comfort for everyone, but especially seniors. A heating system that does not provide proper heat, cooling or humidity is very dangerous. Hundreds of people died in Chicago in the summer of 1995 because they were afraid to open their windows in the blistering heat.

Each year deaths are recorded as people with poor or nonexistent heating units attempt to use the kitchen stove as a heat source. Many such events lead to a house fire. Humidity may seem a minor concern but seniors are particularly susceptible to dehydration. They need to continually hydrate themselves by drinking liquids but they also need to live in an environment where the humidity of the air they breathe is at a 30% level. (Lack of proper humidity will cause the skin and nasal passages to become excessively dry allowing bacteria and other microorganisms easy access to the body.) Again, reference to qualified contractors are available through the West Suburban Chamber of Commerce, the La Grange Business Association and the Better Business Bureau. You are urged to get more than one estimate, get them in writing and do not sign anything you do not understand.

The above considerations apply to all who might wish to age in place. However, those who are not fully ambulatory, i.e., forced to use a walker or are wheelchair bound have extra considerations.

Those on a walker may not be able to climb and descend stairs safely. They may be limited to a one story house or have to invest in an electric chair lift. Wheelchair bound residents will not only face this expense but have the problem of being able to transport themselves from their wheelchair to the chair lift and back on the target floor. Those in wheelchairs must consider the necessity of having doorways widened throughout the house and having ramps installed at the external entrances. If the wheelchair-bound person attempts to live alone, cupboards, closets and other storage areas would have to be redesigned to accommodate the lower and shorter reach that the person would be capable of.

Another financial consideration is that, having made these alterations, when the time comes to sell the residence, it is highly likely that the alterations would have to be reversed to make the residence attractive to a po

2. Beyond the Home—Socialization & Transportation

The need for Social Interaction

It goes without saying that humans are social beings. For eons the family was a tight knit social unit with two and three generations living together or in close proximity. The development of the nuclear family has broken up this tradition and for various reasons family members, even of the same generation, are scattered around the country and indeed, around the world.

This breakup of the nuclear family falls heavily on the oldest members of it. The oldest generation of a family are now living into their 80s and 90s and beyond. They no longer live with one or more of their children. They may not even live in the same town or state as their children. The 19th century tradition of a daughter foregoing marriage to take care of her parents is long gone and only occasionally replaced by a senior parent moving in with one of his or her children.

Living in place in the home where a person has lived for years has many advantages. Social and emotional ties are made through church membership, and participation in social and hobby clubs. Many people are fortunate enough to have friends from their grade school and high school days living nearby.

Questions that should be reviewed when considering socialization questions are:

- **Viability of one's circle of friends:** As we age, our circle of friends does as well. Some of them move to warmer climates, go to retirement homes closer to their children, or pass on before we do. It's unfortunate, but we have to realize that the longer we live the fewer old friends we will have.
- **Membership in social and religious groups:** one way to combat the attrition of one's old friends is to continue to make new ones. Persons

who are active in their communities and churches are much more likely to socialize with those not of their generation. Socialization in the community, though, often requires being able to attend functions outside of one's home. That requires transportation and the physical ability to utilize it.

- **Use of social media:** contact with others via social media such as Skype, Facebook, Twitter, *et al.* was not an option available to an earlier generation. The current generation is rather slower to embrace it than are their grandchildren. Nonetheless, it does provide an excellent way for aging in place seniors to develop and maintain personal and familial relationships without leaving their homes. Time and sociologists will tell us how well or how poorly electronic-based friendships fulfill our needs for human interaction. Suffice it to say, those seniors who are adept at and use these media will very likely benefit more than their less sophisticated cohorts. An interesting related article is reproduced in *Appendix 6*.

Those persons who are not “joiners”, nor active members of a church congregation nor adept users of social media may be poor candidates for aging in place. Another criterion predicting success at aging in place is the ability to use available transportation.

Aging in place and the need for transportation

Aging in place in one's home gives the senior the advantage of not needing to find new stores or services, new routes to travel, new activities to enjoy and new friends to make. Staying in the same home one can nestle down in the convenience and pleasure of known things and not have to face the sometimes frightening new world of change.

Unfortunately, making use of these advantages depends on being able to move around. Without transportation the person aging in place becomes isolated in place. The fact is that many seniors are reluctant to use public transportation.

- More and more busses are equipped with stair lifts for those unable to climb an entry step. Seating at the front of the bus is reserved for the handicapped, yet many seniors are reluctant to call themselves handicapped. Even after boarding a bus, it takes courage to walk even a little way as the jerky acceleration can send one to a fall.
- Trains have lifts for handicapped and wheelchair bound riders, but it takes a pretty feisty senior to ask for the lift and stand on it in view of hundreds of other riders because they can't climb the steep stairs to the passenger compartment.
- Traditional cabs are often considered to be expensive. The use of Taxi Discount Coupons (*see below*) can reduce the cost by half. Also, the use of Uber and Lyft are available for people who are comfortable with "unlicensed" cabs.. A new alternative is the for-profit company Go-go Grandparents that provides reduced fare rides for seniors. Touted to be available nationally, details of this service can be seen on line. It may be sooner than we think that driverless cars will be available for local transport which should be a boon to seniors but there will be a time of learning and adjustment before such advances really are used by many seniors.

Given the reluctance to use public transportation, it is easy to understand why seniors are desperate to keep their driver's license. Just as for teenagers, a car is freedom. It is independence.

Sentimental traditions aside, the lack of physically close family ties is a serious problem for seniors who wish to maintain their independence.

Towns and cities in America are not typically designed to accommodate the handicapped or aged. Services are spread out. Corner groceries are a thing of the past. Public transportation is geared to the commuter, not to the grandmother trying to buy groceries.

Even when public transportation is available, many suburbanites are unfamiliar with buses, having driven everywhere all their life.

Transportation services available locally

There are transportation services available in La Grange and La Grange Park that may not be known by a great percentage of the senior population. The following paragraphs lists transportation services for the disabled and seniors in the La Grange and La Grange Park area.

PACE Paratransit

To apply for ADA Paratransit, call the RTA ADA Paratransit Certification Program at 312-663-HELP (4357) between 8:30 am and 5 pm, Monday through Friday, to request an application.

To qualify for ADA Paratransit service, customers must first apply for eligibility with the Regional Transportation Authority (RTA). The RTA ADA Paratransit Certification Program determines eligibility for complimentary paratransit service operated by Pace throughout the region's six-county ADA service area. The process determines which individuals are eligible to use ADA Paratransit Service for some or all of their trips and which individuals can be served by accessible fixed route bus and rail systems. Individuals who are interested in using ADA Paratransit service must apply and be found eligible according to ADA guidelines.

Proviso Township Services Transportation Program

708-344-7430

www.provisotownship.com/?page_id=13

Requirements

- Must be at least 60 years of age
- Must live in Proviso Township
- Must be able to walk unassisted to and from car
- Destination must be within Proviso Township or a nearby hospital or medical facility
- Registration is required (process may take up to five days)
- Request for a ride should be made at least two working days in advance

- Call the number above for more information.

Lyons Township Transportation Program

708.354.0292 // 708.354.0293

www.lyonstownshipil.gov/offices/senior-transportation-office.html

Requirements

- Must be at least 60 years of age or have a doctor-certified disability
- Must live in Lyons Township
- Must be able to walk unassisted to and from car
- Purpose can be medical, social, grocery shopping, etc.
- Destination must be within Lyons Township
- Registration is required. Call Monday–Friday, 8:30 am to 3:30 pm
- Request for a ride should be made one day in advance
- Request for a medically-related ride should be made as soon as the appointment is made
- Call the number above to get a brochure or more information.

Interfaith Community Partners

(708) 354-9328

Interfaithcommunitypartners.org

Local congregations are partners in their mission to help older adults and people with disabilities live independently in the community. In 1999, with grants from the Community Memorial Foundation and the Robert Wood Johnson Foundation (Faith in Action), members of the seven founding churches formed Interfaith Community Partners to better meet the needs of older adults in the Greater Lyons Township area. At this time, there are almost 100 volunteers and three staff members who have served over 335 residents of seventeen west suburban communities. In the past year they have provided over three thousand hours of volunteer transportation.

Volunteers are trained, dedicated members of the communities served. They schedule and arrange escorted transportation to medical appointments, therapies, grocery shopping and other necessary errands to sustain independent living.

Volunteers give physical and emotional support that older adults need to stay in their homes, and supply much needed personal contact to allay isolation.

PeopleCare

(708) 442-1223.

www.peoplecareinc.org/links/

Using primarily volunteers, PeopleCare will assist and support the homebound elderly by providing socialization, emotional support and access to service providers where no one is denied services. In 1990, PeopleCare began providing a volunteer friendly visitation program to the homebound, which often served as a respite for a primary caregiver. Today, PeopleCare is still reaching out to the elderly, specifically targeting communities without programs to benefit those whose age or physical condition limits their mobility. PeopleCare serves more than 1,700 clients annually. To learn more, volunteer or request assistance, please call the above number.

Taxi discount Taxi Coupons

Taxi discount coupons are a benefit provided through Aging Care Connections. They come in a booklet of 10 \$2 coupons for which the suggested donation is \$10. They can be used to purchase \$20 worth of taxi rides.. Participants must be at least 60 years of age and live in Lyons, Riverside or Proviso Townships. The participating cab companies are Blue Cab of Forest Park and American Cab Dispatch.

Other transportation resources

Transportation to certain cultural and entertainment events are also provided by retirement communities in La Grange Park: **Plymouth Place** and

Presence, Bethlehem Woods. They have many activities open to the general public. The activities are listed in the La Grange Park e-newsletter which can be obtained free of charge by contacting Sandy Bakalich by email—sbakalich@lagrangepark.org. Plymouth Place also has movies and schedules visits to some matinee performances at the CSO, Shakespeare Theatre, Civic Opera, etc. Non-residents are welcome to ride to these events as space permits. Round trip cost for Chicago trips is typically \$10.00. Call 708-354-0340 for more information.

La Grange Park District and the **Park District of La Grange Park** have day trips to interesting and scenic places. Catalogs can be obtained by calling 708-354-1762 for the La Grange Park District and 708-354-4580 for the Park District of La Grange.Park They also may be reached by email at pdlginfo@pdlg.org .and info@cpdlgp.com or viewed on their web sites pdlg.org and communityparkdistrict.org respectively

Increasingly, there are a number of organizations, both government and private, that are designed to provide seniors who wish to stay in their home the support they need to do so. Names and vital information concerning these organizations can be obtained through Aging Care Connections at 708.354.1323.

3. Aids to Aging in Place and Housing Alternatives

Cost Estimates of Home Ownership and Homeowner Subsidies

A person's or couple's options as to where they can choose to live may, in part, be dictated by what they can afford. The following analysis is based on a person or couple owning a single-family home with a value in the \$250,000-\$300,000 range. La Grange Park's web site states that the median value of a home in La Grange Park is \$333,000.

Tables in *Appendix 7* show that ownership of a home in this price range will incur expenses of \$18,000–\$20,000 in home usage and upkeep. They are estimates derived from various sources and should only be relied upon to provide a general idea of expenses related to home ownership. The idea is to get people thinking of their own situation and to provide categories of expenses that they might not otherwise consider when drawing up their own retirement plan.

The United State Department of Agriculture (USDA) figures for a couple in the 51 to 70 age bracket, at a moderate cost meal price, will spend about \$95 per month on food. Thus food costs for a year would approximate \$1140. Obviously, meals taken outside the home would add to this cost. For those with low incomes or lessened ability to prepare meals for themselves, the following services and program may be helpful. Both can be accessed by calling Aging Care Connections, 708.354.1323.

Reverse mortgages

Homeowners who have reached the age of 62 and have at least a 50% equity in their home (i.e., the amount of mortgage owed on the house is less than 50% of the appraised value). By assuming a reverse mortgage, they will assure themselves of an income stream for as long as they live in the house. One caution to obtaining a reverse mortgage is that should the person receiving income from the reverse mortgage become disabled to the

degree that living in the home is no longer a viable option, they will not have the ability to sell the house and use the proceeds to pay the deposit at a nursing home. Persons considering a reverse mortgage should have solid alternate plans for how they will accommodate to living with a future disability.

Also, it is important to recognize that no restriction be put on the requirement to live in the house continuously. In some cases, recipients of a reverse mortgage have lost their home as a result of a hospitalization/rehabilitation that exceeded the length of time allowed under the reverse mortgage contract.

Appendix 8 is an article that discusses the suitability of reverse mortgages for individuals & couples. *Appendix 9* is an article that discusses private market reverse mortgage options.

Information Resource for Seniors and Those with Disabilities

Aging Care Connections

111 W. Harris Avenue

La Grange, IL 60525

708-354-1323

Information : tjuricic@agingcareconnections.org

Web site: www.agingcareconnections.org

Many people are not aware that wherever they live, there is an agency with the mission to help seniors achieve their goals, reduce their problems and provide information on a huge number of topics and questions. Nationally, these agencies go under the heading of Area Agencies on Aging. Locally, the agency covering La Grange and La Grange Park is a satellite of Age Options of Oak Park. Aging Care Connections or “the Senior Center” as it was known for years, is supported by donations, grants and some funds from the State of Illinois and the federal government.

Aging Care Connections is staffed by social workers and other professionals who are the most knowledgeable persons available to address the full range of services available to seniors and disabled persons in our commu-

nities. Very often people will be concerned with what they see as a single issue which may well be just one facet of a larger situation that might require multiple resources to deal with it. A call to Aging Care Connections could allow their staff to offer advice and services that might more fully meet the caller's needs than a call to a single specific agency.

Aging Care Connections is well prepared to meet the growing demands for information, resources and access to programs and services to assist older adults in reaching their maximum level of independence and quality of life. Aging Care Connections serves older adults, age 60 and older, and their families who may have questions related to resources for their senior relatives. As *the* aging resource center for La Grange, La Grange Park and 32 other nearby communities, Aging Care Connections annually assists more than 8,000 older adults and families who seek the information and tools they need to consider their options for elder care.

Older adults are encouraged to call Aging Care Connections with questions concerning in-home care resources, long-term care options, benefit information, community resources for transportation, nutrition, socialization and other issues related to aging.

Not to be overlooked are services for seniors who have the responsibility for developmentally disabled children . Aging parents with developmentally challenged children typically have great concerns regarding what will happen to their child when they are no longer able to oversee or care for them. There are a surprising number of group homes for assisted living in the La Grange/La Grange Park area.

Calls may result in individualized assessment and linkage to services, enrollment in a benefit program or Medicare D Plan, or a referral to appropriate community service providers.

- Medicaid & Supplemental Nutritional Aid Program (SNAP)
- SafeLink
- Lifeline
- Medicare Part D & Prescription Plan

- Low Income Housing & Energy Assistance Program (LIHEAP). (*See Appendix 11.*), Electric & Utility Credit
- Senior Tax Freeze
- Options Counseling
- Medicare Extra Financial Help

Proviso Township Senior Services

(708) 449-4307

Solutions for Care

7222 W. Cermak Road, Suite 200

North Riverside, IL 60546

Phone: (708) 447-2448

Website: <http://solutionsforcare.org/>

Nutrition Assistance Programs

Probably the best known nutrition program is the Supplemental Nutrition Assistance Program also known as SNAP. It is also well known as Food Stamps as that was the traditional way of providing financial assistance for the purchase of food items. There is a means test for the SNAP program which is government-speak that indicates eligibility for the program is related to income. Eligibility is determined by the family income and the number of persons in the family. Details concerning eligibility for enrollment are available through Aging Care Connections in La Grange. The phone number is 708-354-1323. Specialized programs serving more specialized populations are:

- **Women, Infants and Children Program**
- **Emergency Food Program.**

Full information can be found at www.dns.state.il.us or by calling 800.843.6154

Congregate Meals is another nutrition program. It provides subsidized meals at local restaurants on a daily basis. The best known one is at Salerno's in Hodgkins at 9301 63rd Street. Daily meals are pro-

vided at the requested donation of \$2.50. No means test is required and the donation is voluntary. Reservations are required 24 hours in advance. Please call (708) 354.1323 by noon the prior day to make or cancel a reservation. A book club meets on Wednesdays before the lunch and other activities such as bingo, crafts and a discussion group are scheduled both before and after the lunch. Again, details on the location, time and requested donation as well as menus and information on the other activities may be obtained from a phone call to Aging Care Connections in LaGrange (708-354-1323).

Food Pantries are administered through the Greater Chicago Food Depository where packaged food is distributed to those in need.

St. Francis of Xavier Church.

- Located in the basement of St. Francis Xavier church rectory at 124 N. Spring Avenue, La Grange (Spring & Ogden Ave.). Entry through black door on east side of rectory.
- Distribution of food every Tuesday from 9:30-11:00 am, 51 weeks of the year (closed week between Christmas and New Year). Random numbers are distributed at 9 am. Food may be picked up at the rectory until 8:30 pm on Tuesdays. Please call (708) 352-0168 to arrange a later pick-up.
- Serves anyone who needs food assistance in the 60525 and 60526 zip codes. Registrants need to provide proof of residence (e.g., driver's license, utility or medical bill, etc.).
- Each family receives non-perishable and perishable food as well as toilet paper.

St. Barbara's Food Pantry

.9300 W. 47th St

Brookfield, IL. 60513

708-295-7336

Open on Mondays from 9am-3pm

The Medical Lending Closet

4008 Prairie Ave

Brookfield, IL. 60513

708-295-7336

Open Tues. Weds. Thurs. 10am-2pm

- St Barbara's program provides emergency meals and supplemental food to families seeking help, with special attention given to expectant mothers, children and infants, as well as senior citizens. Special food baskets are provided for Christmas, Easter and Thanksgiving, allowing families to celebrate the holidays, in spite of their economic circumstances. Cash donations are converted to grocery certificates for a local grocer, Tischler's Foods, so families can purchase fresh food and dairy. Access to school supplies, clothing, and fresh produce are provided as available.
- The Pastoral Care office also serves as a closet for donated medical equipment – re-allocating supplies to those who need assistance.
- Identification required for both Food Pantry and Lending Closet

Meals on Wheels is a program for those who are isolated in their homes. This program provides daily meals delivered to the homes of persons who lack mobility and are isolated. These meals may be hot or frozen, and delivered once or twice a day up to seven days a week. Accommodations can be made for persons with special dietary needs such as vegetarians, those with food allergies, or people needing gluten free food. Application for receiving Meals on Wheels can be made through Aging Care Connections. Subsidized Meal Programs Reservation suggested (not required) donation \$2.50.

Low income energy assistance

Homeowners with low incomes are often eligible for assistance with home heating costs. *Appendix 10* provides more information on eligibility and enrollment.

Property Tax Freeze

The Cook County Assessor's Office grants property tax freezes for homeowners over 65 whose gross income (not Adjusted Gross Income) is less than \$65,000. That is, the property tax on a dwelling would not increase year-to-year if the owner is over 65, lives in the dwelling, has a total gross income of less than \$65,000 and applies for the exemption in a timely fashion.

Handyman assistance

Homeowners in La Grange Park (Proviso Township) who are disabled or over 60 can receive handyman help from the Township

The following is quoted from the Proviso Township web page.

"Handyman will be available to provide advice and referral on a variety of home maintenance issues. In addition, he will be able to do minor repairs for a fuel surcharge of \$5.00 per visit plus the cost of parts, if needed.

"The Handyman is here to help you do all of those things you used to do for yourself but just can't manage anymore, all those simple things that can make life just a little brighter. So next time you find yourself frustrated by some annoying problem around the house, don't get angry, call the Handyman!

"Click the link below to find out which jobs we can and cannot do.

For more information, you can reach the Handyman office at 708-547-4001 or through our [contact page](#).

Adult Day Care Services

Young at Heart

6504 Joliet Road
Countryside, IL 60525
708.639.4342
www.youngatheartc.info

Providing on-site senior activities (adult day-care). Young at Heart provides services for seniors in a niche between complete independence and part-time in-home care. Currently it is the only such facility operating within a reasonable distance from La Grange/La Grange Park. Young at Heart's facility is on Joliet Road between Brainard and Gilbert in Countryside.

Among the services offered in this adult day-care facility are:

- Nutritious Meals
- Exercise Programs
- Spa Services: nail care, shaving, hair care
- Self-Help Care (on-site showers)
- Incontinence Care
- Transportation Services
- Vital Signs Monitoring

In-home Caregiver Assistance

Many companies provide in-home caregiver assistance, typically on an hourly basis with a minimum number of hours per visit. Personal activities range from light housekeeping and help with chores, e.g., preparing meals, doing errands, etc., to help with the necessary activities of daily life, e.g., dressing, washing, etc.

Details regarding the level of care, cost and references may be obtained through Aging Care Connections (708) 354.1323.

Shelter and Services for the Homeless

Beds Plus

96014 Ogden Ave.
La Grange, IL 60525
708-354-0858

The La Grange, La Grange Park neighborhood is rich in resources for the needy, whether of mature age or not. Beds Plus provides apartment units for otherwise homeless people of adult age. Beds Plus also offers housing locator assistance, drug counseling, and more. Supported by a network of local churches, Beds Plus provides day-time support centers and night-time sleeping accommodations.

Condominium Ownership—a downsizing alternative

Condominium ownership is less troublesome than moving to a smaller single-family house. Management is required to maintain all the common areas and in return, the condominium owner pays a monthly fee to the management association. Occasionally, depending on the financial acumen of the management association, special assessments are made to cover the cost of some large common-area improvement or repair. The unit owner actively participates in the operation of the overall building by voting for and possibly serving on, the association's management board.

The condominium owner still has the security of ownership, tax write-offs and so on and, where they exist, has access to common-area amenities. In the La Grange/La Grange Park area another advantage of condominium ownership is that many of them are located within easy walking distance of the PACE bus lines on La Grange Road and the BNSF and Amtrak station at La Grange Road.

The table below shows a variety of condos in La Grange/La Grange Park their addresses and illustrative current prices. These examples range from

a unit in a two-story garden apartment to one in a ten-story mid-rise. Many more condos exist but these were chosen for illustration as they were currently for sale and had easily obtained offering prices as a guide to cost. No information is available as to Condo Association Fees or the quality of the management association. The following addresses were on the market at the prices listed in September of 2018.

Address	Approx. cost	Description	Size
301 Beach Ave. La Grange Park	\$73,000	1 br, 1 bath	900 Sq. Ft.
300 N. La Grange Rd. La Grange Park	\$125,000	1 br, 1 bath	NA
30 S. 6th St. La Grange	\$140,000	1 br. 1 bath	N/A
Location	Approx Cost	Description	Size
500 Barnsdale La Grange Park	#200,000	3 bf, 1 vath	1451 Sq. Ft.
141 N. La Grange Rd La Grange	\$225,000	2 br, 2 bath	N/A
75 6th Ave.La Grange	#\$245,000	2 br, 1.1 bath	N/A
1 N. Beacon Pl. La Grange	\$312,000	2 br, 2 bath	1500 Sq.. Ft
40 S. Ashland La Grange	\$850,000	3 br, 3 bath	2660 Sq. Ft.

Subsidized housing for seniors

Section 8 Eligibility in Illinois

Eligibility requirements cover three main areas: income level, citizenship status, and previous landlord referrals. *Appendix 11* provides detail to the summary of requirements mentioned here. Income level is the most important factor in determining Section 8 eligibility. Income level is determined by the median area income for a county. *Income information by county is available online, or at the local HUD office.* Applicants that make 30 percent of the area's median income fall in the extremely low income bracket. The very low income bracket is for applicants who earn 50 percent of the median income, and applicants that make at least 80 percent of the median income level are in the low income bracket. Applicants who fall in the extremely low or very low income bracket will be eligible for Section 8 housing in Illinois. The requirements for Section 8 aside from income level are family size. Applicants with a larger family will have a higher income bracket since the household will have more income-earning members.

- Applicant must be a legal U.S. citizen
- Applicant must receive a positive evaluation from former landlords.

Housing designed for seniors: La Grange, La Grange Park area

Countryside Senior Apartments 6406 Joliet Road

Countryside, IL 60525

aserna@mercyhousing.org

708.579 0349

Countryside Senior Apartments (CSA) is an apartment building for those 55 years of age and better. There are 70 units; all one bedroom apartments. The apartments are all electric, including the kitchen appliances. Electricity payments are the responsibility of each resident, who may receive winter heating assistance through the Illinois Department of Commerce and Economic Opportunity's Office of Community Assistance. (Application may be made through Aging Care Connections, see p. 21 above.)

. They are designed for seniors that want to live independent lifestyles. In this housing, older adults can live safely on their own and conduct most routine daily living activities. Rents start at \$370. However, the average rent is \$800 a month.

Apartments feature on-site amenities including an activity room and a large parlor for community events and parties. Residents have access to a patio and courtyard, on-site property management and a laundry room centrally located on each of the four floors. On-site staff is available to help plan social events such as holiday parties, community outings and other special events.

Countryside Senior Apartments are a Tax Credit or Affordable Housing complex. A Tax Credit apartment is not government subsidized, but rather the investors receive a tax credit for their investment and there is a maximum that may be charged as rent for each unit.

General Apartment Rental Information

One alternative to maintaining a home is to move into an apartment, either rental or co-op. Rental rates vary widely. In the La Grange–La Grange Park area, for example, a one bedroom apartment in Uptown, the new development at Ogden and La Grange Road, is listed at \$1800 per month, or \$21,600 for a year. A two bedroom in a duplex at 1221 N. La Grange Rd. is currently listed at \$1300 per month or \$15,600 per year.

While the rental costs approximate the cost of home ownership, they do not require the capital costs of home ownership. Thus, a homeowner with no mortgage could sell the house, realizing, say, \$275,000 net after sales expenses. That sum, invested at 5% would yield \$13,750 per year. Other savings, such as set-asides for component replacement, property tax, landscaping, etc. would offset the cost of even a higher cost rental

La Grange Pointe

511 E. Cossitt, La Grange 50625

708.354.7600

lagrangepointe.com

stawczyk@lagrangepointe.com

Handicapped accessible independent living in one and two bedroom apartments on the south edge of downtown La Grange.

Staff includes Activities Director, Driver, Maintenance Head and Executive Director.

The smallest one bedroom apartment starts at \$1,800/month. Included in the monthly rent are: water, local phone service, high speed internet, house-keeping and transportation to scheduled activities. A discounted price meal plan at a restaurant in the building is included.

Retirement Communities with Independent Living Facilities are designed for seniors who are healthy and able to care for themselves and live independently. Depending on the facility and the contract entered into, some or all meals are provided, restaurant style. All maintenance is provided by the management as are social and educational activities. Security, local transportation, and various other services are also provided depending on the facility. Some facilities, known as Continuing Care Retirement Communities (CCRCs) combine independent living with other care levels such as Assisted Care, for those needing some extra help in their daily lives, Nursing Care, for those who may be bedridden or need constant care and Dementia Care, usually a secure section designed for the treatment of Alzheimer's disease and dementia.

Presence Bethlehem Woods Retirement Community

1571 W. Ogden Ave.

La Grange Park, IL 60526

presencehealth.org

708.579.3663

Located on 42 acres in La Grange Park, Presence Bethlehem Woods Retirement Community offers a mix of quiet living with all necessary conveniences. Activities offered include: theater outings, fitness classes, bingo, patio parties and more.

- Studio, one & two bedroom apartment rentals
- Monthly rentals: Studio, \$2600, One bedroom, \$2860
- Rentals have an additional non-refundable \$4000 Community Fee on the front end
- Rental includes: one meal per day (dinner), utilities, cable, wi-fi, laundry services, scheduled transportation, social and recreational activities, wellness clinic.

Plymouth Place Senior Residence

315 N. La Grange Road
La Grange Park, IL 60526
708.354.0340
plymouthplace.org

Plymouth Place is a Continuing Care Retirement Community (CCRC) which provides Independent Living, Assisted Living, Memory Care, Skilled Nursing Care and Rehabilitation in their facility on the northern edge of downtown La Grange.

The Independent living apartments offer:

- One and two bedroom apartments, fully carpeted with full electric kitchens and in-unit washer / dryers.
- One bedroom units start at a 90% refundable deposit of \$336,000.
- Monthly fee of \$2770.00 includes 20 meals per week, maintenance, weekly housekeeping, wi-fi, cable TV, and all utilities.
- Indoor parking is available.
- Large range of activities, recreational, educational, religious, etc. are available.

- Walking distance to downtown La Grange, La Grange Park library, Gordon Park walking track and many churches.
- Free transportation to local drug & grocery stores.
- It should be noted that as a CCRC, contracts are not rental or purchase agreements but rather a long term care insurance agreement. As such, typically 33% or so of the monthly payments are deductible from federal income taxes as long term care insurance.

Nursing Homes—Assisted Living Facilities

Lexington of La Grange

4735 Gilbert Avenue
La Grange, IL

Lexington of La Grange is a for-profit nursing home with 62 beds. While it currently has 19 beds devoted to long-term care, the corporation has changed the direction of Lexington's mission. Going forward, they will be dealing only with rehabilitation and are not accepting any new long-term care residents.

Aspired Living of La Grange Assisted Living

Shamut Ave.
La Grange

Currently under construction, Aspired will be a 116 -bed nursing care facility under the Pathways Brand. Construction is scheduled to be completed in October of 2019

Meadowbrook Rehabilitation, La Grange

339 S. 9th Avenue
La Grange, IL 60525
708-354.4660
www.meadowbrooklagrange.com

Meadowbrook Rehabilitation-La Grange is a newly constructed sub-acute rehabilitation facility located in the residential area of La Grange, near the downtown shopping. Meadowbrook Rehabilitation has over 70 private rooms, with amenities such as garden patios, restaurant-like dining facilities, a library and comfortable meeting rooms in a family-like environment. While primarily focused on rehabilitation, it does have long-term care nursing services as well as some non-secure dementia-care services.

The clinical capabilities include, but are not limited to, in-house hemodialysis and peritoneal dialysis, wound care, IV antibiotics, respiratory care, pain management, physical, occupational, and speech therapy. The physical therapy and occupational therapy gym is over 7,000 square feet filled with state of the art therapy equipment that can support therapy seven days a week.

Meadowbrook is associated with a large number of speciality physicians who help support and manage each guest's individual medical needs. Amita La Grange Hospital is Meadowbrook's primary and emergency hospital but rehabilitation personnel also work with Amita Hinsdale, MacNeal, Loyola University, Elmhurst Memorial, Rush, and West Suburban Hospital depending on each patient's post-acute medical needs.

In addition to short term rehabilitation, Meadowbrook meets the needs of the community with respite stays at a reasonable private pay rate for periods up to two weeks.

Appendix 1

2018 Home and Community Preferences:

A National Survey of Adults Age 18-Plus

by Joanne Binette, Kerri Vasold, AARP Research, August 2018 0

Folks Just Want to Age in Place . . .

Comments:

There's no place like home. A new AARP survey of adults shows that 3 out of 4 adults age 50 and older want to stay in their homes and communities as they age—yet many don't see that happening for them.

While 76% of Americans age 50 and older say they prefer to remain in their current residence and 77% would like to live in their community as long as possible, just 59% anticipate they will be able to stay in their community, either in their current home (46%) or a different home still within their community (13%).

Age-in-Place Alternatives

Communities become a source of support and engagement for residents, particularly for older adults, who have an even stronger desire to age in place. The AARP survey finds many adults age 50 and older are willing to consider alternatives such as home sharing (32%), building an accessory dwelling unit (31%) and villages that provide services that enable aging in place (56%).

The survey uncovers some interesting nuances concerning the topic of home sharing that do not differ between younger and older adults. On the one hand, half of all adults age 18 and older say they would not consider home sharing (28%) or are unsure (23%) about it. Yet of that group, 3 in 5 (58%) say they would in fact consider the option if they needed help with everyday activities like household chores or transportation, and half (50%) would also consider it simply for companionship.

Most adults age 18 and older (63%) own their own homes, but about one-third expect their homes to need major modifications to accommodate aging needs. Rather than making such changes, about 24% of people age 50 and older say they plan to relocate to a new area altogether, according to AARP.

What Adults Want

On that topic, there's the question of where to live. The survey asked respondents what they valued in a community when making those decisions. Considered extremely or very important to about 60% of Americans were the factors of affordable housing, transportation for people with special needs, and fair policies that provide equal opportunities. Equally critical were jobs and job training with flexibility for older adults and people with disabilities, AARP found.

When it comes to volunteering, about half of the survey respondents said transportation to volunteer activities and the opportunity to participate in decision-making was vital. About 50% also said having easy access to local volunteer opportunities, activities and training was extremely or very important in a community.

With regard to outdoor spaces and buildings, well-maintained and convenient hospitals and other health care facilities as well as safe parks were features identified as the most important. Respondents also said well-maintained streets and easy to read traffic signs were also important in communities.

The likelihood of Americans staying in their current residence and never moving increases with age. However, AARP discovered that although the desire to stay in their community and residence remains high among adults age 50 and older, intensity has dropped since 2010.

Transportation is a big issue for older Americans, as their ability to drive can change over time and become a safety issue. Nearly all adults age 50

and older (90%) drive themselves. The survey shows that older Americans also rely on walking, public transportation or someone else to drive.

Ride-share services, such as Uber and Lyft, can be an alternative, but although 94% of Americans age 50 and older have heard of ride-share options, just 29% have ever used it and 68% are not likely to in the next year. Most cite lack of need and concerns about privacy and safety as reasons for not using a ride-share service.

Similarly, most adults (88%) have heard of self-driving cars and are familiar with them but are not willing to ride in them. Younger people and those with a disability are more willing to ride in a driverless car, AARP discovered.

The survey results suggest a need to educate people about the benefits of ride-share services and other options to help them maintain their independence and stay engaged in community life.

Social Isolation Among the Generations

As for feeling connected, 3 in 10 adults report lacking companionship, feeling left out or feeling isolated from others, AARP finds. Experiences of social isolation are more prevalent among younger adults than the older ones surveyed. Most adults (94%) surveyed age 50 and older indicated they had someone they could call for help day or night if they were in trouble, but lower-income and some minority respondents were less likely to say they did.

Methodology

Data for this study was collected by NORC using its online AmeriSpeak Panel that is representative of the U.S. population. Surveyed online and by telephone in March and April of 2018, the total sample of 2,287 adults included a nationally representative sample of adults age 18+ (1,947), with

multicultural over-samples of African American/Blacks (470 total), Hispanic/Latinos (439 total) and LGBT (409 total). A portion of the multicultural samples came from the national survey sample. The survey was conducted in English and Spanish. The Home and Community Preferences Survey provides data and insights that raise awareness of the importance of making our communities "great places for all ages" and serves as a tool for change in our communities. For more information, contact Joanne Binette at jbinette@aarp.org. For media inquiries, contact media@aarp.org.

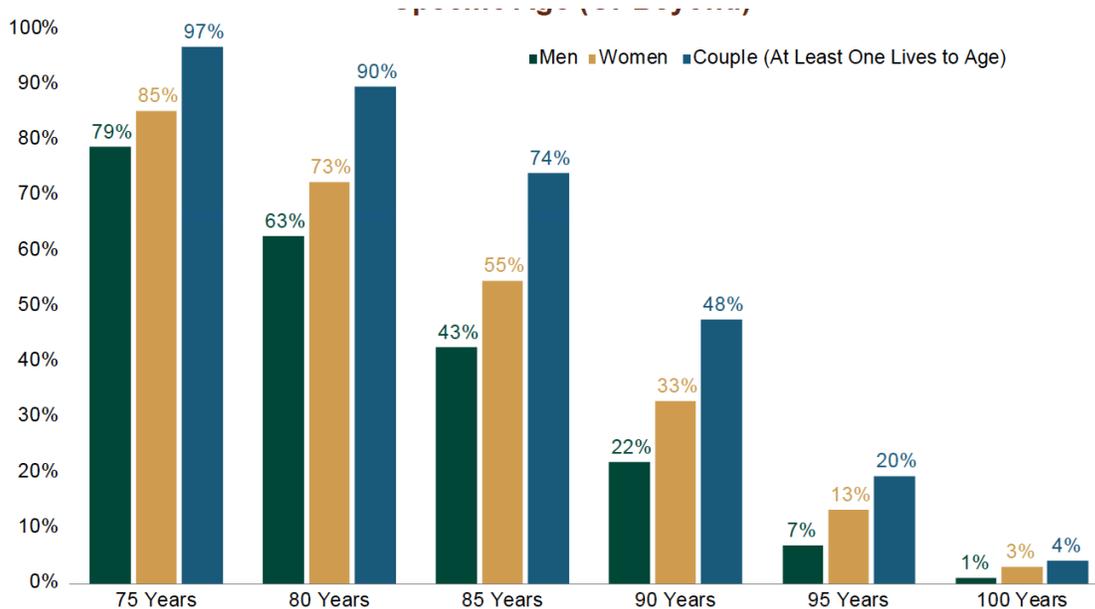
Suggested Citation:

Binette, Joanne and Kerri Vasold. 2018 Home and Community Preferences: A National Survey of Adults Age 18-Plus. Washington, DC: AARP Research, August 2018. <https://doi.org/10.26419/res.00231.00>.

Appendix 2

Mortality for Men, Women & Couples at Age 65

Probability of survival at five year intervals to age 100



*Source: Social Security Administration, Period Life Table 2013

This chart from the Social Security Administration shows the life expectancy of those who are currently 65. If you are older than 65, your probability of survival to the years shown is even higher. For example, if you are an 85 year old male, you are **not** among the 57% who didn't make it from 65 to 85 so a table showing the probability of survival would give you rather higher numbers than those shown here for a 65 year old.

Appendix 3

Plan Your Life Span

Lindquist, chief of geriatrics at Northwestern University's Feinberg School of Medicine in Chicago, wondered if people could become better prepared for such emergencies, and so she designed a research project to find out. The result is a unique website: www.planyourlifespan.org.

Investigators wanted to know which events might make it difficult for people to remain at home. Seniors named five:

- Being hospitalized
- Falling
- Developing dementia
- Having a spouse fall ill or die
- Not being able to keep up their homes

Yet most participants hadn't planned for these kinds of events. Investigators asked why. Among the reasons seniors offered, according to a research report published last year:

- I don't know what to do
- I'm uncomfortable asking for help
- I'm not at immediate risk of something bad happening
- My children will take care of whatever I need
- I'm worried I won't have enough money

Appendix 4

**Why Elderly Patients With Ground Level Falls Die Within 30 Days
and Beyond**

Available online from Gerontology and Geriatric Research

Alicia Mangram, et. [al](#)

Appendix 5:

Potential Consequences of Aging in Place

Maintaining a social network decreases total cost of formal care. Aging in place promotes self-sufficiency, encourages cost-saving interdependence between friends, family members and neighbors in the community, offsets social isolation and does not involve costly professional support unless necessary. Rather than relocating an individual to a facility, aging in place preserves valuable social networks.

In addition, the loss of friendships, familiar shopping and entertainment facilities and informal supports can result in a significant loss in the quality of life, personal control and dignity. Aging in place allows all of these powerful networks to remain intact, offering both quantitative and qualitative benefits. A recent study completed by Harvard University concluded that “compared with persons who had five or six social ties, those who had no social ties were at increased risk for incident cognitive decline after adjusting for a variety of socio-economic and physical factors.”

Appendix 6:

: Mediterranean Diet May Improve your Brain Health

Jan. 4, 2017 (HealthDay News) -- The heart-healthy Mediterranean diet may also help preserve brain health of older adults, new research suggests.

Researchers in Scotland examined the brain volume of hundreds of older adults over three years. The investigators found that people who more closely followed the eating habits common in Mediterranean countries -- lots of fruits, vegetables, olive oil and beans -- retained more brain volume compared to those who did not.

"Research is accumulating to show protective effects of the Mediterranean diet on normal cognitive [mental] decline, dementia and Alzheimer's disease," said study leader Michelle Luciano.

The new study suggests the possible mechanism is in preserving brain volume, said Luciano, of the University of Edinburgh.

The Mediterranean diet is an eating style that emphasizes fruits, vegetables, olive oil instead of butter, beans and cereal grains, such as wheat and rice. Moderate amounts of fish, dairy and wine are included, while red meat and poultry are limited.

Experts know that with age, the brain shrinks and brain cells are lost. This can affect learning and memory, Luciano said.

"In our study, age had the largest effect on brain volume loss," Luciano noted. However, "the effect of the Mediterranean diet was half the size of that due to normal aging," she said. She considers that finding impressive.

Luciano said she found no association from fish or meat intake on preserving brain volume. That suggests it may be other components or the overall Mediterranean diet that provide the benefit.

The combination of foods may protect against factors such as inflammation and vascular disease, which can cause brain shrinkage, she added.

Heather Snyder, director of medical and scientific operations for the Alzheimer's Association, said the new study "is confirming what we have seen before." Snyder wasn't involved in the research. "This paper really adds to the data," she said. However, "these are associations, so we can't say A causes B," Snyder added. Also, the study authors acknowledged that larger studies are needed to confirm the link.

For the study, Luciano's group collected dietary information from almost 1,000 Scots, about age 70 and free of dementia. More than half had a brain scan at age 73. The scans measured overall volume, gray matter and the thickness of the cortex -- the brain's outer layer.

Three years later, 401 study participants returned for another measurement. Even after accounting for other factors that might affect brain volume, such as education level, diabetes, high blood pressure or age, better brain measurements were associated with Mediterranean-style eating, the study authors said.

The study was published online Jan. 4 in the Journal of Neurology. Among the study's strengths, Snyder said, is that the participants were fairly alike in that all were residents of Scotland. That means there is likely less variation in factors that could affect brain health, such as access to medical care, she noted. This research, along with other studies, suggest that overall diet affects thinking and brain health, Snyder added.

The Alzheimer's Association recommends following the Mediterranean diet or the DASH (Dietary Approaches to Stop Hypertension) diet, developed by the U.S. National Institutes of Health. The association's reasoning is that what's good for the heart is also good for the brain.

Besides a healthy diet, evidence suggests that regular physical activity, lifelong learning, and managing heart risk factors -- such as diabetes and high blood pressure -- may also lower the risk of mental decline, said Snyder.

For more about diet and brain health, visit the Alzheimer's Association at: <https://www.alz.org/>.

Appendix 7:

Expense of Home Ownership:

- * On their web page explaining how to understand your property tax bill, La Grange Park indicates that the property taxes on a \$300,000 house would be \$8000 or \$667 per month, more than double the averages the government provides.
- * These figures do not include unforeseen or long-range events such as roof replacement, basement flooding, roof leaks, tree removal, driveway repair, etc. Nor are costs included for optional improvements such as window replacement, storm windows, fences, driveway resurfacing, and garages.

Typical Home Expenses	Monthly	Annualized
Property taxes*	\$667	
Housekeeping	125	
Heating fuel	125	
Electricity	125	
Insurance	111	
Landscaping/ Snow	75	
Cable/Internet	75	
Water/Sewer	50	
Home telephone	50	
Waste disposal	50	
Miscellaneous	50	
Security	25	

Typical Home Expenses	Monthly	Annualized
Monthly maintenance	\$1,174	\$16.836

Prorated Component Replacement Costs*			
Appliance	Life span	Cost	Prorated
Range/Oven	15	2,500	14
Water/Heater	10	1,000	8
Refrigerator	15	1,500	8
Dishwasher	10	1,000	8
Washing machine	10	800	7
Dryer	10	800	7
Prorated Component Replacement Costs			\$316
These figures may be overestimates as seniors are likely to replace appliances not for fashion reasons but only when they fail.			

Appendix 8:

Low Income Home Energy Assistance Program Enrollment

The Illinois Department of Commerce & Economic Opportunity's Office of Community Assistance announced today that the Low Income Home Energy Assistance Program (LEHAP) will begin accepting applications for winter heating assistance for seniors and people with disabilities beginning October 1, 2017.

LIHEAP is a state and federally funded energy assistance program for low-income families in which heating bill payments are made on behalf of households. Applications are processed through a network of 34 local administering agencies around the state. These agencies will begin accepting applications on first-come, first-served basis from the elderly and people with disabilities. For more information, please contact Aging Care Connection, 111 W. Harris St. in La Grange 708.354.1323.

Appendix 9:

Would You Benefit From a Reverse Mortgage?

As house prices have increased, many older Americans may be tempted to tap into the equity in their homes with a reverse mortgage, which is a loan that allows homeowners 62 and older to convert a portion of the equity in their homes into cash.

Most reverse mortgages are home equity conversion mortgages offered through the Department of Housing and Urban Development and are guaranteed by the Federal Housing Administration.

In addition to the age requirement, to qualify for a loan you need to own your home outright or have a low mortgage balance that can be paid off at closing with proceeds from the reverse loan and you must live in the home. You also must be able to pay real estate taxes, utilities and hazard and flood insurance premiums.

The amount you can borrow depends on several factors, including the age of the youngest borrower, the current interest rate, the appraised value of your home and whether the rate is fixed or adjustable. The more valuable your home is, the older you are and the lower the interest rate, the more you can borrow. A reverse mortgage can help retirees convert an illiquid asset - a house - into a liquid one that can help supplement retirement income while allowing them to remain in the home.

When the home is sold or no longer used as a primary residence, the cash, interest and other home equity conversion mortgage finance charges must be repaid. All proceeds beyond the amount owed belong to your spouse or estate. This means any remaining equity can be transferred to heirs. No debt is passed along to the estate or heirs.

If all of this sounds too good to be true, it can be, according to reverse mortgage suitability and abuse expert Sandy Jolley. Jolley's passion for the topic is personal. After her parents saw commercials for reverse mortgages, they contacted a reverse mortgage company. A salesman came to

the house and sold them a reverse mortgage “that was totally unneeded,” Jolley says.

Her father had terminal cancer and her mother had Alzheimer’s disease, which prompted Jolley and her sister to litigate the matter. “All of these commercials talk about features of the reverse mortgage, but don’t talk about whether or not it benefits the borrower,” Jolley says.

After losing the case, Jolley immersed herself in reverse mortgages, became an expert and now educates others through her website at: <https://elderfinancialterrorism.com/>.

Like many other financial products, a reverse mortgage can be useful. But Jolley notes that the HUD-certified counselor or financial salesperson’s role is to inform you of the process and various reverse mortgage programs available to you, and is “not permitted or qualified to give you any legal and/or financial advise to determine if a reverse mortgage is right or harmful for your circumstance. The lender has no responsibility or fiduciary duty to the borrower.”

A big concern of reverse mortgages, as Jolley told Money magazine, is that you’re spending down what’s likely your largest asset. You might need the house later to help pay for assisted living or extended home health care. And, you cannot take out another home equity loan once you have a reverse mortgage.

Appendix 10:

Options for Homeowners Seeking a Reverse Mortgage

Kenneth R. Harney The Nation's Housing. Chicago Tribune, October 23, 2018

You've probably seen actor Tom Selleck suavely pitching federally insured reverse mortgages on TV and thought, *hmm, that sounds interesting*. He says you can turn your home equity into cash and not pay back anything — no principal, no interest, no fees — for years after your retirement.

And it's true: Some form of a reverse mortgage could be a good choice for you, but it might not be the government-backed type Selleck is hawking. Those loans have hit tough times, and growing numbers of lenders have begun offering alternatives — proprietary, nongovernment reverse mortgages, including an innovative variant unveiled last month that allows owners to retain their current low-interest-rate regular mortgages while pulling out additional funds via the industry's only "second-lien" reverse loan.

A little background: Annual volumes of the Federal Housing Administration's reverse mortgages have tanked to their lowest level in 13 years and appear headed for further declines. The program is a financial nightmare for the FHA, performing so poorly that the agency's commissioner, Brian Montgomery, complained recently that it is "still hemorrhaging money" despite repeated reform efforts.

Worse yet, the FHA recently discovered hanky-panky in the appraisals used for reverse mortgages. An internal study by the agency found that in a sample of 134,000 loans, a stunning 37 percent of them had inflated values — the appraisers hyped the numbers — thereby exposing the agency's insurance fund that backs the mortgages to bigger hits down the road. Some of the bogus value estimates billowed as high as 30 percent over actual market value in 2008 and 2009, though the average has moderated more recently.

Federally insured reverse mortgages are targeted at homeowners 62 years and older. They allow borrowers to supplement their retirement incomes by converting their home equity into cash via lump-sum payments, monthly payments or credit lines. No repayment of the debt is required until the homeowners sell the house, move out or die. If the amounts borrowed exceed what the house can bring in a sale, the lender can file a claim against the FHA's mortgage insurance fund and receive compensation.

Because of continuing multibillion-dollar insurance fund losses, the FHA has tried to rein in the reverse-mortgage program by limiting the amounts seniors can borrow against their houses, raising insurance premiums and requiring applicants to demonstrate that they are creditworthy. These restrictions and other issues such as high fees have contributed to the program's sharp plunge in volume, from just under 115,000 new loans in 2009 to 48,385 in fiscal 2018, the lowest total since 2005.

Drastic declines in business volume like this have spurred lenders to come up with alternatives. At least four major companies now offer proprietary, nongovernment reverse mortgages. They include Finance of America Reverse, Reverse Mortgage Funding, Longbridge Financial and One Reverse Mortgage. All of them allow much larger maximum loan amounts than the FHA. They also charge no mortgage insurance premiums, and they may permit loans to owners of condominium units in developments that have not been approved for FHA financing.

Kristen Sieffert, president of Finance of America Reverse — which continues to offer standard FHA-insured reverse mortgages along with its four proprietary alternatives — told me that “we want to create a new proprietary product market for the long haul” that offers homeowners nationwide more flexibility and innovation than the FHA can. For example, at the end of September, her firm debuted the industry's first and only “second-lien” reverse mortgage, which is designed to allow owners who have low fixed rates on a first mortgage to retain that loan while tapping their equity via a fixed-rate second mortgage requiring no immediate repayments.

Other companies' proprietary offerings have their own special niche features designed to improve on the FHA's rules: Equity Edge's program lowers the eligibility age for some borrowers to 60 instead of 62; One Reverse Mortgage permits loans on houses with solar panels, to cite just a couple of examples.

Proprietary reverse loans have their own downsides, however. Generally they are not aimed at the lower- to moderate-cost housing market like the FHA, so they screen out potentially large numbers of owners from coverage. They may limit the total amount of equity you can access more strictly than the FHA and require better credit histories. Like all reverse mortgages, proprietary alternatives should be considered only after discussions with an experienced financial counselor to make certain you're getting a good deal.

Bottom line: They're an important, growing resource for senior homeowners and worth at least a look if you're considering a reverse mortgage.

harneycolumn@gmail.com

Appendix 11:

Use of Social Media

Are you a 'SuperAger'? Why some brains age twice as slowly.

Dennis Thompson

HealthDay

At 89, Donald Tenbrunsel is a bit of a phenomenon. He surfs the internet with ease, happily converses on a broad range of timely topics, volunteers and reads regularly.

Known as a "SuperAger," Tenbrunsel was part of a study that helped researchers discover what factors might set these super-sharp seniors apart from their peers.

The secret? Brain scans showed they experience brain aging twice as slowly as average folks their age.

"This suggests the SuperAgers are on a different trajectory of aging," said senior researcher Emily Rogalski, director of neuroimaging for Northwestern University's Cognitive Neurology & Alzheimer's Disease Center. "They're losing their brain volume at a much slower rate than average agers."

For the study, Rogalski and her colleagues measured brain aging by examining the thickness of each person's cortex — the outer layer of folded gray matter in the brain. The cortex is where consciousness lies, and where all of the neurons that fire thoughts and movements are located. It is a critical part of the brain for higher-level thinking, memory, planning and problem-solving, Rogalski said.

Another neurologist explained it this way:

"That is essentially our brain," said Dr. Paul Wright, chair of neurology at North Shore University Hospital in Manhasset, N.Y., and Long Island Jewish Medical Center in New Hyde Park, N.Y. "Brain shrinkage occurs in the natural progression over time, and when you lose brain volume, you lose function."

Rogalski noted that previous research has shown that the cortexes of SuperAgers look less worn than their average 80-year-old peers, and about the same as people in their 50s or 60s.

But a question remained — were the SuperAgers born with brains that have more volume, and thus could better withstand the travails of aging? Or are their brains the same size as everyone else's, and simply aging less rapidly?

To answer that question, the researchers tracked changes in cortex thickness for a year and a half in 24 SuperAgers and 12 average elderly people.

Both groups lost a significant amount of brain volume to aging, but average elderly people experienced a loss more than twice that of the SuperAgers — over 2.2 percent versus 1.1 percent.

"Part of the reason why they may have different brain volumes is because over the decades they've been losing their brain volume at a different rate," Rogalski said.

The findings were published in April in the *Journal of the American Medical Association*.

Dr. Ezriel Kornel, a neurologist with Weill Cornell Medical College in New York City, said that at least part of the brain advantage of SuperAgers is genetic, with some people simply gifted at birth. But there are likely to be environmental influences that also contribute to healthier brain aging, particularly in the womb and in early childhood, Kornel added. For example, research has shown that children raised in poverty tend to have smaller brains.

Rogalski said that future research will focus on genetic factors that influence brain aging, which hopefully will provide researchers with anti-aging "targets" that could be manipulated with medications or other therapies.

While there's currently no proven method to preserve cortex volume, research has shown specific lifestyle changes that seniors can perform to help keep themselves sharp as they age, Kornel and Wright said. These include:

- Regular physical exercise, including strength training
- A healthy and balanced diet
- Brain workouts that involve challenging puzzles or tasks
- An active social life

Appendix 12:

Eligibility For Section 8 Housing Assistance in Illinois

What are the qualifications for low income housing in Illinois? The Section 8 eligibility requirements cover three main areas: income level, citizenship status, and previous landlord referral. Applicants wondering, “Do I qualify for Section 8 housing in Illinois” will have to evaluate their current situation to see if their household meets the minimum requirements. Income level is the most important factor in determining Section 8 eligibility. Income level is determined by the median area income for a county. Income information by county is available online, or at the local HUD office. Applicants that make 30 percent of the area’s median income fall in the extremely low income bracket. The very low income bracket is for applicants who earn 50 percent of the median income, and applicants that make at least 80 percent of the median income level are in the low income bracket. Applicants who fall in the extremely low or very low income bracket will be eligible for Section 8 housing in Illinois. Family size is also considered when determining Section 8 eligibility in Illinois. Applicants with a larger family will have a higher income bracket since the household will have more income-earning members. Additionally, the applicant must be a legal U.S. citizen and receive a positive evaluation from former landlords. Section 8 applicants wanting to know, “what do I need to apply for Section 8 housing in Illinois?” should know that they will have to gather a number of different documents for themselves and each member of their household.