

There's No Place Like HOME

Area services and volunteers enable senior citizens to 'age in place' — safely, comfortably and where they most want to be

By Lynn R. Parks | Photographs by Carolyn Watson

Ellen Jinx Jenkins suffered a serious stroke in 2013. While she eventually recovered to the point that she could return to her home, she still had trouble going up and down steps. And difficulty with balance meant that she had a tendency to fall.

The former vocational rehabilitation counselor, who moved to the Lewes area in 2002 and who lives alone, was looking at the very real possibility that she would have to leave her townhouse for a group home or an assisted-living facility.

"I couldn't use my shower," she says. "It was very tiny, and I was afraid to close my eyes in there, for fear that I would fall. I have

two steps at the front door, and two steps up from the garage into a hallway, and I had trouble using them. At the front door, I held onto the side of the house so I could get up the steps."

Through her niece Katie Leister, who works for the Lewes-Rehoboth chapter of Meals On Wheels, Jenkins connected with Kathryn Cieniewicz, a physical therapist and owner of Aging in Place Specialists, located near Lewes. Cieniewicz visited Jenkins's home and evaluated its accessibility. "She asked me where I had problems, what I was able to do and what I wanted to do," Jenkins recalls. "Then she came back with a plan." ▶

Ellen Jinx Jenkins, left, walks on Lewes Beach with her physical therapist, Kathryn Cieniewicz. For people who remain in their homes as they age, it's important that they have opportunities for exercise and social interaction, Cieniewicz says.



Janice Willey Dorrell of Angola exercises at Every1Fitness, near Midway. Dorrell relies on volunteers with the Greater Lewes Community Village to drive her to the gym and to the grocery store. Once a week, she also has them drive her to the organization's office, where she volunteers.

“As baby boomers move to the beach area, we should work to ensure that they have the resources to live independently as long as they can.”

WALKING ON THE SAND

The effort to help people age in place means more than just enabling them to continue living in their homes, says Nicole Minni, assistant policy scientist for the University of Delaware Institute for Public Administration. It also means getting them outside of their homes and providing them with opportunities for exercise and social interaction.

No one understands that better than Lewes-area resident Ellen Jinx Jenkins. After suffering a stroke in 2013, she was no longer able to visit the beach. Her favorite spot was North Shores, near Rehoboth Beach. But her gait was so unsteady that she couldn't walk on the sand.

In 2016, Jenkins suffered a medical setback that left her even more debilitated. After several rounds of physical therapy that, she says, “all failed,” she once again summoned the help of Kathryn Cieniewicz, a physical therapist who had worked with her in 2013. Last summer, Cieniewicz took Jenkins to the beach and “we walked up and down the dunes,” Jenkins says. The physical therapist taught Jenkins how to walk on sand, and how to get up in case she did fall.

“I hadn't been to the beach since 2013,” Jenkins says. “But this summer, I'm going back to North Shores. I'm looking forward to that — yes, I am!” ■

The plan included installation of two parallel railings at the front steps, which Jenkins could hold onto instead of the side of the house; hand grips near the garage steps so Jenkins could pull herself up those two steps; and replacement of a soaking tub with a large shower, complete with a seat bolted to the wall and numerous hand grips. “There are so many bars, I could sell drinks in there,” Jenkins jokes.

Cieniewicz also gave Jenkins physical therapy, enabling her to once again engage in one of her favorite activities: going to the beach (see “Walking on the Sand” on page 47).

The modifications to her home “meant the difference between being able to live alone or not,” Jenkins says. “I couldn't stay here if I was falling, or if I couldn't get in through the doors. Now, I don't have to leave the place where I want to stay. I am truly aging in place.”

That term, as defined by the U.S. Centers for Disease Control and Prevention, is the ability to live at home and in the community, safely, independently and comfortably, regardless of age, income and physical ability level. Julia O'Hanlon, a policy scientist at the University of Delaware's Institute for Public Administration, says the concept is especially relevant for Sussex County, where 44 percent of the population is expected to be 55 or older by 2035, and particularly in coastal Sussex, which is what demographers call a “naturally occurring retirement community.” A NORC — it even has its own acronym — is a community that has a large percentage of people who are 60 or older but that was not planned with the needs of those people in mind.

“People are retiring here for what the area has to offer, its beauty and its charm,” O'Hanlon says. “As all those

baby boomers move to the beach area, we should work to ensure that they have the resources to live independently as long as they can.”

A broad support system

There's more to enabling an aging population to live at home than building homes with wheelchair access, says Danielle Swallow, coastal hazards specialist for Delaware Sea Grant, a University of Delaware program that researches how coastal communities can thrive, protect the environment and withstand storms and other hazards associated with living near the ocean. (Swallow is studying ways to help ensure that senior citizens are able to weather emergencies. See “Preparing for Emergencies” on page 50.)

“Aging in place is a comprehensive way of looking at aging,” she explains. “Most adults don't have just a single need. They want to be able to live a full life.”

AARP has identified various “domains” that work in concert to ensure successful aging in place. In addition to accessible housing — the domain that Jenkins had to deal with — they include social participation, transportation, and community and health services. It is in assisting with those domains that “villages” come into play.

“It takes a village to support older adults,” says Deb Dobransky, member services manager with the Greater Lewes Community Village, playing off the proverb “It takes a village to raise a child.” Founded in 2013, the GLCV is one of about 300 “villages” across the country that enlist volunteers to help paying members of the senior population. The local iteration serves members who live in the Lewes, Milton and Rehoboth Beach ZIP codes (see “Village People” on page 49). ►

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“We provide support so that people, as they get old, have what they need to remain in their home, as opposed to having to go to a facility,” Dobransky explains. “We want people to live independently, safely, as long as they can.”

The village has about 200 members that it helps — with the aid of 120 volunteers. Its target ratio is one volunteer for every 1.6 members; eventually, “we would love for it to be 1 to 1,” says Executive Director Jackie Sullivan. “We know that government cannot meet all of the needs, and we know that family members have to work and cannot always be there for their parents. We are filling a need that 50 years ago your neighbors would have done for older adults in their communities. Our volunteers are your neighbors.”

In coastal Sussex, where beyond Route 1 there isn’t much in the way of accessible public transit, the biggest need is for transportation, Dobransky says. “Our volunteers drive people to doctor’s appointments. They drive them to shops, to grocery stores, to restaurants, to farmers markets, even to the gym. A number of our members [do volunteer work], so our volunteers drive them to wherever they need to go [for that]. We do what we can, so that our members can continue to do what they want to do.”

Ruth Meell, who lives near Lewes, has been a GLCV member for three years, ever since she recuperated from a broken hip. Volunteers with the village take her to doctor’s appointments, to get her hair done and for pedicures. Recently, when she was preparing to attend a wedding, a volunteer took her shopping and helped her pick out clothes.

“As someone who had been independent all my life, it was the hardest thing for me to do, to have to ask for help,” Meell notes. “But my son lives in Seattle and my daughter in New York. I can’t count on them very much. Friends say, ‘Call me, call me!’ But you can’t do that with friends. Once or twice, maybe, and then you’re a pain in the neck. The volunteers are all wonderful, and never

make you feel as though you are a chore. With the village, all of the major things are taken care of. I am still able to take care of myself, because of them.”

“Oh, boy — the things that they do for me,” says Lewes-area resident Bob Cahill. He recently purchased a new iPad and a volunteer transferred onto it the data from his old one. And “every two weeks, a volunteer goes grocery shopping with me. I have difficulty seeing and they help me find and pick out food.”

Cahill feels that he could stay in his home without the help of the village, “but everything that I need, I would have to pay for” — an amount sure to exceed the membership fee.

“If I wanted to go to the doctor, I would have to call a taxi to take me, then call another taxi when I was finished. And I guess that I really don’t know how I would do my grocery shopping.”

Design and function

Jackie Sunderland Finer is the founder of the Greater Lewes Community Village. She started working in gerontology (the study of aging processes and problems) as a volunteer when she was just 24 years old and now is retired after a 20-year professional career with the National Council on Aging.

In 2004, Finer and her husband, Leslie, built the Lewes house in which she still lives. (Leslie died in 2010.) The home is constructed according to the principles of “universal design,” a concept that guides construction of buildings to ensure that they are completely accessible to everyone, regardless of physical abilities.



Jackie Sunderland Finer, founder of the Greater Lewes Community Village, shows off the elevated dishwasher in her home, which is easier to load and unload. It’s an element of the “universal design” concept that makes a home accessible to everyone, regardless of physical abilities.

WHERE TO GET ADVICE

Jackie Sunderland Finer, a retired gerontologist and founder of the Greater Lewes Community Village, suggests that anyone who is contemplating building a new home according to universal design standards (to ensure that the home is fully accessible to everyone), or

renovating a home according to the same standards, do their homework first.

“You’d better equip yourself with as much knowledge as you can, so you can tell if the contractors you’re dealing with know what they’re doing,” she warns.

The National Association

of Home Builders offers a Certified Aging-in-Place Specialist designation to contractors who complete the association’s three courses on building a livable home. For information, and to find a certified specialist, visit nahb.org; click on “Consumers” and then on

“Finding a Credentialed Building Professional.”

VGM Live at Home, a trade group for contractors who do home modifications, offers training to its members who want to become Certified Environmental Access Consultants. For details, visit vgmliveathome.com. ■

Finer’s home has no steps. The floor plan is wide open, to allow easy maneuvering. There’s space beneath the kitchen sink and stove so that someone in a wheelchair can roll up to the counter and work there. And the dishwasher stands 8 inches off the floor, to make loading and unloading it easier. “It doesn’t sound like much, but it means a lot,” Finer says.

She dismisses the notion that a house built according to universal design standards can’t be attractive: “It can be as stylish as the next house. My house does not look like an institution.”

The design of Finer’s home came into play after she fell on Christmas Day, suffering a concussion and spraining her neck and back. She spent six days in hospitals and then two weeks at a rehabilitation center, where she worked to regain her strength. Then, instead of having to go to another facility in order to recover further, she was allowed to go home.

“It was because of my house, and the fact that it is so accessible,” she says. “Otherwise, I would have had to go someplace else.”

Since her fall, Finer has taken advantage of the services offered by the program she founded. Volunteers drive her to medical appointments, take her clothes to the dry cleaners, “take care of the bits and pieces of daily living,” she says.

They also “drop by to say hello and just cheer me up.”

That kind of interaction is a vital part of successfully aging in place, says village volunteer Kitty Bennett. Every week, the Lewes-area resident visits Tom and Blanche Link at their home at Brandywine Assisted Living near Fenwick Island. Bennett was supposed to go there just to sit with Tom, who has macular degeneration and

VILLAGE PEOPLE

The Greater Lewes Community Village serves people living in the Lewes, Milton and Rehoboth Beach ZIP codes. Members, who pay an annual fee of \$500 (or less, depending on income), have to be at least 50 years old and, if transportation is requested, must be able to get in and out of a vehicle.

The annual fee provides up to 25 hours of service a month, which equates in cost to \$1.67 an hour if all 25 are used.

GLCV volunteers can put in as much time as

they want, Executive Director Jackie Sullivan says.

On average, they donate about six hours a month.

“Our goal is that you volunteer *your way*,” she adds. “If you want to drive, that’s all you get requests to do. If you are available to volunteer on Wednesdays only, that’s OK too.”

For information, call 703-2568 or visit glcv.clubexpress.com.

And for details about the movement to build a worldwide network of villages, visit vtvnetwork.org. ■

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PREPARING FOR EMERGENCIES

Danielle Swallow is a coastal hazards specialist for Delaware Sea Grant in Lewes, working with communities to improve their resiliency during weather emergencies. She points out that older residents often have particular needs that make them more vulnerable than the general public in situations requiring evacuation or during which their home is damaged.

Understanding those needs, and taking steps to handle them, could help senior citizens feel comfortable about continuing to live at home, she adds.

Swallow suggests that older people regularly take stock of their situations. "You may be pretty mobile on a daily basis. But if there's a major ice storm, are you going to feel comfortable crawling over fallen trees? Do you live in a flood plain? How close are you to a hospital? Once you know the risks, you can make a plan to mitigate those risks."

She says that senior citizens should know how they will get in touch with family and friends in case of evacuation. That is especially important in coastal Sussex, where so many people are recent transplants and have relatives who live elsewhere.

Swallow also suggests that they have information about all of their prescription medicines written down, and that they have a plan in case their pharmacy is forced to close for a day or more.

"None of us likes to think that we're getting older, or that we have special needs," she says. "But this is something that happens to everyone. If you have plans, when something happens you will be able to take informed action." ■

back problems, to allow his wife time for herself. But when Blanche, who used to make quilts and had just taken up knitting again, found out that Bennett knits, she opted to stay in. "I don't want to go anywhere," she told her visitor. "I just want to sit here and knit with you."

"It's a good social time, just sitting and chatting," Bennett says. "It breaks up the loneliness. Anything that will keep the mind and body active is important."

Bennett, who has been volunteering with the village for 2½ years, also provides transportation for members and leads a knitting club that meets weekly at the village facility near Lewes. "I'm going to do this until I can't anymore," she says. "I want to help keep the village robust, in case I need it someday."

Lewes-area resident Janice Willey Dorrell appreciates the value of the village as a volunteer and as a client. While she doesn't suffer from any medical problems that keep her from driving, she hasn't owned a car since hers was totaled a couple of years ago in an accident. Every Tuesday and Thursday, village volunteers take her to Every1Fitness near Rehoboth Beach, where she exercises. On Thursday afternoons, they take her grocery shopping. And on Tuesday afternoons, they take her to the village office, where she puts in three hours as a volunteer.

"I'm really glad that the village is here," Dorrell says. "Not just

It's a good social time, just sitting and chatting. It breaks up the loneliness. Anything that will keep the mind and body active is important."

for me, but for the people who have medical issues and who really need it."

As much as aging in place is about volunteers who are willing to help out and the physical characteristics of the home, it is also about access to services, such as health care and transportation.

"There's a connectivity aspect to all of this," says O'Hanlon of UD's Institute for Public Administration. "You can't just plop a house or a development in the middle of nowhere, no

matter how it's built, and say that it's good for aging in place. It has to have a connection to the community at large."

In the end, the ability to stay at home enables older adults to feel that they are in control of their own lives, says GLCV director Jackie Sullivan. "The value of remaining independent, in control and socially engaged — all of these things help older adults to fight for their health and their independence, and they enjoy their lives."

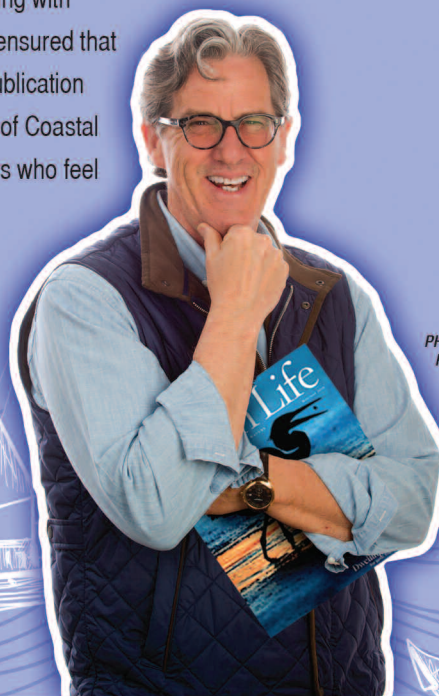
Ruth Meell, the Lewes-area woman who counts on help from the GLCV, and who still enjoys her weekly pedicures, understands that.

"I don't want to go into a nursing home, or have to go into an assisted living place," says the 97-year-old. "I want to stay as independent as long as I can." ■

LYNN R. PARKS is a regular contributor to Delaware Beach Life.

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