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PUBLIC HEARING
before
SENATE COMMITTEE ON AGING
Issues and Concerns of Senior Citizens

March 16, 1989
Edison Twp. Municipal Complex
Edison, New Jersey

MEMBER OF COMMITTEE PRESENT:

Senator Thomas H. Paterniti, Chairman

ALSO PRESENT:

Anita Saynisch
Office of Legislative Services
Aide, Senate Committee on Aging

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Hearing Recorded and Transcribed by
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Public Information Office
Hearing Unit
State House Annex
CN 068
Trenton, New Jersey 08625





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**New Jersey State Legislature
SENATE COMMITTEE ON AGING**

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MARCH 2, 1989

NOTICE OF A PUBLIC HEARING

THE SENATE COMMITTEE ON AGING
ANNOUNCES A PUBLIC HEARING
ON ISSUES AND CONCERNS OF SENIOR CITIZENS

Thursday, March 16, 1989
Beginning at 10:00 A.M.
Council Chambers
Edison Township Municipal Complex
100 Municipal Boulevard
Edison, New Jersey

The Senate Committee on Aging will hold a public hearing on Thursday, March 16, 1989, beginning at 10:00 A.M. in the Council Chambers of the Edison Township Municipal Complex. The purpose of the hearing is to provide senior citizens and other interested persons the opportunity to communicate their views on the issues affecting the senior citizen community.

Address any questions and requests to testify to Anita Saynisch (609) 292-1646, State House Annex, Trenton, New Jersey 08625. Persons wishing to testify are asked to submit nine copies of their testimony on the day of the hearing. The chairman may find it necessary to limit the number of witnesses or the time available for each witness.

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SENATOR THOMAS H. PATERNITI (Chairman): Good morning, everybody. First of all, I'd like to welcome each and every one of you to the Senate Committee on Aging. Actually, this public hearing is on issues and concerns of our senior citizens. The purpose of this hearing is to provide senior citizens and other interested persons with the opportunity to communicate their views on issues affecting the senior citizen community. This is not the first time we've had a public hearing on senior citizens' concerns. In fact, I'm having a series of four public hearings throughout the State of New Jersey. Last week, we held one in Trenton. This week we're holding one in Edison Township, which is more or less central New Jersey. Next week we'll have one down in Long Branch, which is the southern part of the State, and the following Thursday we'll have one up in Hudson County.

Actually, I started with these public hearings many, many years ago. I had the fortune of being the first Chairman in both houses on the Committee of Aging, when I served in the General Assembly. I was appointed to that Committee about seven years ago. When I was initially appointed, I wanted to find out what were the concerns of the senior citizens. And just by other legislators putting in legislation-- I thought that wasn't enough. It was what they thought the senior citizens wanted.

I wanted to get it firsthand. So, I went out into the public. I went into the urban areas. I went into suburbs, to rural areas. I had input from our senior citizens, and they came across with a lot of their concerns. They were concerned at that time about housing, about taxes, about transportation, about State planning, and about nutrition programs. We've tried to address these problems, a lot of them. Over the years, we've actually found some solutions that we have addressed. There are many of them that, to this day, we haven't found a solution, and we're still looking for

input. A lot of them take a lot of money. So, what we've tried to do is try to find these monies, because in a lot of instances, you had what we call a lot of duplication of services. Sometimes, three, four, or five different groups were doing the same thing. What we tried to do is channel them into one specific service, so that way we can take the extra monies and use them for other programs. Over the years it seemed to work well.

And the concern, as far as the senior citizens and the disabled, has become greater and greater over the years, because back around the early 1900s, we had about three million senior citizens in the U.S., and they made up about four percent of the population. And in the early 1950s, we had about 10 or 11 million senior citizens. Today, we have roughly between 28 and 30 million senior citizens, and by the year 2010 or 2020, we may have as many as 65 million senior citizens. What this means is that we're going to need additional monies to fund programs, because senior citizens are living much longer because we've come up with so many good programs, and medicine has done wonders today. The other thing-- The other problem is that a lot of younger people are having smaller families. Because of that, they have to generate the revenues to actually fund these various programs. So, we're kind of on a collision course, and that's why we're having these hearings.

So, we eliminate duplication, we try to find other ways of accommodating our senior citizens so that we can make their life a lot more pleasant, a lot healthier, and a lot more livable. I truly feel that they've made a major contribution to this country. A lot of them fought in our wars. They are the ones who built our tunnels, and built our railroads, and dug our ditches, and built our plants, and made life so much better for all of us today.

I truly feel that we should take care of them, so that's why I'm holding these public hearings. I will start with my witness list. The first one I have on the witness list would be Edith Edelson, of the New Jersey Federation of Senior Citizens. Would you step forward, please? Edith and I go back a long time. She's been coming to Trenton for many, many years, and she's been very, very helpful as far as input in many of my committees. Thank you, Edith.

E D I T H E D E L S O N: Thank you, Senator Paterniti. Can everyone hear? (negative response)

SENATOR PATERNITI: I think it's the one in the center. (referring to mikes) Pull it closer to you, Edith.

MS. EDELSON: Okay, I'll try this one. It's not on.

SENATOR PATERNITI: It should be. These are on up here. Is it on? (positive response) Okay, fine.

MS. EDELSON: Thank you so much for holding the hearing in different--

SENATOR PATERNITI: Pull it closer to you, Edith.

MS. EDELSON: Thank you so much -- I sound much more convincing this way, don't I? -- for holding hearings in the different areas. It really gives us the ability to get the message across to you. And we're very glad that you have asked us to cover a range of topics that are of interest to us, instead of fragmenting it and speaking only on one issue at a time.

I'm listing a few of the major issues that concern us. The first one is health. We have been advocating that quality health care should be accessible to all. The first point is mandatory Medicare assignment. This is a top priority, not only for our Federation members, but for all the rest of the statewide senior citizens organizations and the Commission on

Aging. The estimated out-of-pocket cost of doctors' services in 1989 is \$143 million -- the excess of doctors' service charges in 1989 over the reasonable fees approved by Medicare. Because of this, many senior citizens forego necessary health care until an acute illness develops. We fully support A-2305 and S-1649, which would require doctors and other health providers to take Medicare assignment. The question of long-term health care, both at home or in nursing homes -- these are the catastrophic illnesses that face senior citizens sooner or later.

I want to mention Senator Van Wagner's bill, S-91, which has been in the Legislature for quite some time. It extends home health care to be conducted by five model home health care projects. It's a demonstration program, and it differs from some of the others in that low-income eligibility is not part of the guidelines, and they use a sliding scale for the fees.

I must speak about the caregivers. In this regard, the Assembly passed A-1243, which establishes a program for the caregivers of the frail elderly at a cost of \$85,000. The bill is in your Committee. It provides for education of caregivers. Very nice, but what they need is energy, time, and money to do a good job -- the continuous job of taking care of their parents. But it should not be funded by the casino fund. I don't think that is the purpose of the casino fund amendment in the Constitution; it would be to help seniors, but not to take care of all of these ancillary problems.

As for nursing home care, recent reports of the quality of care have been most distressing. Stricter regulation is needed, working conditions have to be improved, and there has to be better training for nurses' aides.

Also important for seniors' health, is a program for congregate services in all buildings, in which the majority of tenants are either seniors or disabled. These people need

help to continue to live independently in their apartments. They need congregate services -- meals or housekeeping or both. I've been to some of these senior citizen buildings, and the need for the congregate services is very apparent.

The question of taxes, and a major one is the property tax reform. The SLERP Commission report is a culmination of a two-year study. It has many recommendations for a better balance between State and local taxes. While it recommends repealing the Ford tax credit, we are opposed to repealing this before provision is made for a circuit breaker or some other form of tax relief.

We seem to be moving in the directions of having the State pay for the services it requires localities to provide, such as court costs and welfare administration costs. But the newspapers are reporting property tax increases in city after city. That is a terrific burden for seniors, and many of them are at risk of losing their homes because their fixed incomes cannot absorb the tax on the home, and renters cannot pay the rent increases.

Then there is the high tax under the Catastrophic Care Law. Now that's a Federal law. And it is most unlikely that the Federal government will change the provision where Medicare people will have to pay 15% surtax on every \$150 of Internal Revenue tax. That is a steep increase for them, and I think there's a danger that they will say, "I can't afford to pay this. Let's cut out Medicare altogether." This would fit in with the active program of the Medical Society to do away with Medicare and substitute private insurance and vouchers. So, there's quite a danger involved in this kind of tax. What can the State do about it? The State can establish a State tax credit to replace the 15% surtax under Medicare on every \$150 of Internal Revenue tax.

The question of housing-- This sounds very familiar, I'm sure, to all of us-- Affordable housing and other

approaches to housing on a continuum from complete independence to complete dependence are needed. We fully support the Mt. Laurel decision. Construction or rehabilitation of buildings is a more basic approach to the spreading of homelessness than the current mandated programs.

Condominiums are springing up all over the State. It is a threat to many senior tenants. S-2107 would prevent eviction of certain pre-conversion tenants. The bill passed the Senate. We support it.

The question of the casino fund: There is a tendency to use this fund for any program that has the word "senior citizen" in it. Because the fund is limited, we need a permanent watchdog commission. Assembly Bill 2749 would establish a Casino Revenue Fund Advisory Commission to oversee the use of this fund. The bill passed the Assembly and is in your Committee. We urge its passage. We also believe that no new program using casino funds should be passed until renters' relief and home health care are provided for. These are the two highest priorities for the use of casino funds; not only in the thinking of the Federation, but the other statewide organizations; and the Commission on Aging agrees that those are the two top priorities. The casino fund is rapidly approaching the point where it will not have much more money left for any additional programs, or even for the programs that it has.

The question of auto insurance: The JUA should be abolished, and all insurance companies should have to accept applicants for their insurance. The premiums should be lowered, but not by reducing the coverage.

Transportation: Reduced fares for senior citizens and disabled persons should be extended beyond the peak hours. Very often an elderly person can get to a doctor's office with a reduced fare ticket, but has to take a taxi home, because the time for the reduced fare has passed. Senate Bill 585 would provide for round-the-clock reduced fares.

My last point is one that we feel very strongly about -- living wills. These should be legalized. Senior citizens want the right to make our own decision regarding nutrition and hydration during a terminal illness. We are in complete opposition to Senate Bill 1541 and Assembly Bill 3084 which would require that nourishment and hydration be provided to all patients, regardless of the patient's wishes.

We also completely oppose the Ombudsman's action in notifying all nursing homes that they must provide nutrition and hydration to all nursing home residents. That's a broad brush and it gives no consideration to the individuals living there. Thank you very much.

SENATOR PATERNITI: Thank you very much, Edith. I'm going to go right down the list. The next witness I have is Kenneth Dolan. Is Kenneth Dolan in the audience? (no response) He's coming? All right, we'll get back to Kenneth later on. How about Neal Clark? He's the Executive Vice President of the Senior Citizens Service Corporation. Good morning.

N E A L C. C L A R K E: Good morning. It's certainly a pleasure to be here this morning. While you indicated that these hearings have been held prior to this set of hearings, I apologize because I commend you and the members of the Senate Committee for moving around the State to get direction and solicit input from the community. I find that many of us in the professional field devote little time because of the pressures on us through the legislative process. And I think this office has an opportunity to take advantage of working with your Committee.

My name is Neal Clark. I've served for the past 15 years as the chief executive officer of one of the largest private nonprofit agencies solely devoted to serving older adults in northern New Jersey. We presently employ 190 staff members, reaching over 45,000 residents each year. Our services include home care, telephone reassurance, volunteer

recruitment and placement, senior companions, assistance to the visually impaired, literacy tutoring, respite care, information referral, fixed route, nutrition, employment transportation, newspaper publication, nursing home advocacy, employment training and placement, health insurance counseling, pre-retirement sensitivity, and elder care education programs.

My purpose in coming before this Committee today is to express my concerns for the future provision of services and to attempt to insure that based on the demographic projections for the next century, that we will initiate laws which will provide for the successful continuation of necessary services, even with significant growth in the population over 65.

Presently, it is estimated that 6000 people turn 65 every day and that by the year 2010 the senior population will increase by 30%, and by 50% in the year 2030. At the same time, the population under 35 will drop from the present 55% to 41%. Along this same time period, or by the year 2080, it's projected that life expectancy will grow another six years to an average life of 81 years. These changes will require changes in retirement age rules, strains on the health care system, and a shift in careers for many people. Where we once needed to train teachers, it's going to become more appropriate to train people in geriatric and long-term care.

As an agenda for the next decade, I would ask this Committee to be as innovative as possible in developing legislative proposals. Priorities must take into consideration the growing need for a single entry agency at the community level which would be responsible for informing the public of available services, assessing an older person's need for services, providing and arranging services, coordinating service delivery among private agencies, monitoring the quality of care and service delivery, and developing additional home and community based care services when needed. This single

entry takes on added importance with the 1990 census pointing to the fact that 50% of older adults will reside in the suburbs, outnumbering both urban and rural elderly.

I would now like to address specific programs where I envision the need for significant change.

Transportation: We presently operate a fleet of 17 vans and buses that transport over 700 residents to shopping, jobs, job training, and nutrition sites each day. This includes the easy access to groups at senior housing sites, but also the more arduous task of individual pickups at their homes in the suburban communities. Presently, we operate each vehicle with a driver. They can pull up to a senior housing project, the people walk out of the building, get on the vehicle, we drop them off at a shopping center, they do their shopping, and in a hour and a half, we return, and they walk out with their bags of groceries, get on the vehicle, and we return them home.

However, little by little we are noticing a change as the same participant becomes more frail. They use walkers and canes to move about, and one-and-a-half hours in the shopping center is barely enough time to complete their shopping. When, they come out of the store, they are no longer able to get on the bus alone or carry their bags of groceries, and our drivers are now getting involved in physically assisting these individuals.

The need becomes clear that as the older population ages -- as we know the fastest growing segment of our society is the over 75 age group -- it is going to dramatically change the way we provide services and the number of people we are capable of handling, based on the current systems. I envision in the future that we are going to have to put aides on these vehicles, and the number of people we serve are going to be significantly reduced. As was mentioned earlier about casino revenue, I think it will dramatically affect the way we provide services under the existing casino revenue funding, unless we

begin to plan ahead and cooperate with other service providers, so that we can service the frail elderly population and keep them independent.

On the home care side, we presently administer the Home Friend Program, which is a demonstration in the State of New Jersey. We serve 10 towns in Essex County. We also administer one of two Senior Companion Programs in New Jersey, serving all of Hudson, and parts of Bergen and Essex County. There is a growing need in the community, especially in the income category covered by the Home Friend Program for a single older person with an income of \$15,152 or a couple with an income of \$19,827. The need is growing at a rate almost equal to the present populations we serve. The need will continue to outpace the available funding levels; even more so if the pending minimum wage increase is approved. We currently start Home Friends under the Federal funding at a starting salary of \$3.50 per hour.

However, I would like to bring to the attention of this Committee the Senior Companion Program. By design, it is probably the most cost-effective alternative to basic home care needs in the community. Companions are low-income seniors who are hired and paid a tax-free stipend of \$2.20 an hour, and work 20 hours per week servicing other home bound older persons. Also provided in the funding is reimbursement for out-of-pocket expenses for travel and lunch. The average cost, including administration, is approximately \$2800 per year for 1044 hours of service. This program was initiated by Federal legislation which allows it to pay a tax-free stipend, but it accomplished two very important objectives, especially in our more urban areas; that is, that it provides additional income for qualified low-income seniors who want to work and want to be involved. Without any threat to existing support services, it also provides that very basic care for home bound seniors, who do not need certified home health care or nurses.

Eldercare: A recent study conducted by AARP indicates that nearly 7 million people are engaged in caring for their aging relatives. Fifty-five percent of all caregivers are working people and 39% of them are still raising their own children. This translates into employees in the workplace with a lot on their minds besides work -- with a lot on their minds besides their jobs. Additionally, today it is common to find people over 65 caring for their aging parents. Planning for retirement and suddenly being faced with the needs of a 90-year-old mother or father can be a traumatizing experience.

The future implications are serious and will affect a growing number of people in the work force. Changes will be required in employee assistance programs, company leave policies, and numerous other areas, if we are to support family members as the primary caregiver. The need is upon us for eldercare education programs to assist employers in addressing the concern.

Congregate Housing: The need for congregate housing facilities has reached crisis proportions as older adults who moved into the senior housing projects constructed in the '60s and '70s begin to be in need of daily support services, in order to remain in those projects. Unfortunately, most of these are not designed to support such in-house services, and the result is management frustration as to what to do with these residents.

We need to readdress the need for congregate housing projects with some form of State incentive to both the private and public sectors. Such projects would free up existing senior housing units for many individuals who have been on the waiting list since these units were constructed -- anywhere up to 14 years in Essex County. It would also enable many home bound older adults to move from private housing that is not conducive to independent live. In addition, we need to set certain standards for design, in order to meet further changes

in the needs of the frail population that will initially reside in these facilities.

Long-term Care: The first countywide Nursing Home Ombudsman office was established by Senior Services in Essex County. We counsel families as to the alternatives to nursing home placement and assist in choosing the proper nursing home when there are no alternatives. We also work to protect the rights of residents of nursing homes and publish a consumer's guide to nursing homes in Essex County.

The issue I want to present today is the ongoing discrepancy between Medicaid and general assistance. An individual entering a nursing home in northern New Jersey under a private pay contract will pay an average of \$34,000 per year, before any ancillary charges. Most of those who enter nursing homes have limited resources because they have spent down their funds held in reserve for that "rainy day" by paying for care in the community. Most of our clients seek assistance because there are no longer any resources left, and they can only privately pay for a month or two.

Nursing homes are not willing to contend with these individuals as they don't make any money, and they don't receive any credit towards their Medicaid quotas for taking them in. Those who do meet the Medicaid guidelines join the long waiting list for an available bed. In order of priority: those who are already in the nursing home but have exhausted their funds, those in hospitals, and then those who are waiting at home.

Since Medicaid has an income cap, not everyone is a potential candidate for financial assistance. Those who need a nursing home bed and earn more than \$1104.48 per month must apply for general assistance -- municipal welfare, which is even more restrictive than Medicaid. Medicaid will allow the individual to retain \$2000 in assets; general assistance allows \$105 in assets. Medicaid will also allow \$1500 burial fund, plus ownership of the cemetery plot, and prepayment of

the casket and vault. General assistance does not allow for any specific burial funds, although most do permit a limited amount through either life insurance or burial trust. Medicaid is based on the individual's income and assets for eligibility. General assistance is based on the couple's income and assets and can look at the children's assets up until they reach their 55th birthday.

If you are misfortunate enough to have a parent who does not reside in New Jersey when the need for long-term care arises, you are in for an even more trying time. If an adult child in New Jersey wishes to place a parent who lives outside the State into a New Jersey nursing home, they would have to be Medicaid eligible and have enough funds to privately pay for 12 weeks or more while the eligibility is determined. Medicaid does not transfer from state to state. It would seem obvious that some uniformity needs to be adopted in addressing the financial support system that presently exists in our State in order to assist the families who are already contending with a very difficult and emotional issue.

Literacy Tutoring: A literacy tutoring demonstration program was initiated by the State Division on Aging in Essex and Bergen Counties and has resulted in a true success story. Estimates are that over 450,000 New Jersey residents over the age of 60 are functionally illiterate. The Essex County Literacy Program presently has 32 volunteer tutors servicing 32 clients, with 10 clients on the waiting list. When we asked some of these clients why they wanted to learn to read and write, the response was very interesting: "I need to sign my own social security check; I need to fill out forms for pharmaceutical assistance and other programs; I need to sign hospital forms for my husband or wife; I want to read and understand prescription directions; to be able to use public

transportation; as I grow older, my friends and relatives are dying and I have no one to get help from; I want to read the Bible."

The Senate passed Senate Bill 342, and it is now being held in the Assembly Appropriations Committee awaiting action. The bill calls for a three-year funding and expansion to another county for a total appropriation of \$99,000. In reality, the funding should have been \$99,000 per year in order to expand this program to additional counties and address the need in a broader scope. I would urge this Committee to pressure the Assembly Committee to release this bill for a vote to ensure continuation of this worthwhile service.

In closing, I offer to make myself available to the Senate Committee on Aging for future dialogue regarding programs and services under consideration. In addition to my professional involvement, I also serve as the Vice President of the New Jersey Gerontological Society which presents a cross section of professionals, practitioners, and educators in the field of gerontology. I feel we should all make ourselves available to assist this Committee. I believe that by working together, we can continue to address the needs of our older population in an effective and efficient manner.

In closing, as we talk about future projections of the needs of the older adult population and how we're going to address them other than just dollars, perhaps it might be in the interest of this Committee to recommend that we look at a statewide conference on aging to perhaps sit down and talk with not only people involved -- seniors, professionals, but also people in the private sector -- as to how we're going to address it, because we all realize that we're in for some significant problems as the population grows. Thank you very much.

SENATOR PATERNITI: Thank you very much, Neal. You brought up certain concerns here, and you pointed out one about geriatric training. It's unfortunate. I just had a bill that

passed both houses for geriatric training for interns and residents, and the Governor, because of monies, vetoed the legislation. It was about an \$85,000 appropriation. It actually was a pilot program, which kind of shook me up, but there's not much I could do about it. But both houses in the Legislature -- both -- unanimously approved it in both houses, and he vetoed the legislation about two weeks ago. He pointed out another concern about caring for the seniors as far as in-home care and nursing home care. I was thinking that one area we should really go into is day-care for the elderly. We have some initial programs now, but I think we should really look into it because, actually we know what it costs to keep someone in a nursing home. It costs roughly about \$3000 a month.

We always felt that to keep someone at home with in-home care, you could handle three or maybe four people for what it cost you to keep someone in a nursing home. I think, if you have day-care centers, you can actually handle more people for the same amount of money. Because these various people who have come to attend to their needs, as far as personal care and instruction on medication, if you have them in a day-care center, the same person could actually administer to the needs of more people, and I think we could extend our dollars and handle more people.

The other thing is that -- I've said this before-- Maybe we can incorporate the boards of education, because the same buses that they use to transport children -- maybe in different hours-- They can use those same buses to transport the people to day-care centers, and you know, it would actually put people's minds at ease, because sometimes a person has a parent or a grandparent and they have to leave them at home, and they're getting to the point where they can't administer their own medication. They can't seem to clean themselves properly. If they put them in these day-care centers during

the day, the cost may be nominal, and at least they will have peace of mind. So, I'm glad they brought up that particular area.

Another area you mentioned-- There's a description between Medicaid and general assistance, and I've asked my staff to look into it; to make both at parity where I truly feel that general assistance should follow the same guidelines as Medicaid so at least they'll make more seniors available. But, thank you very much for your input.

I believe Kenneth Dolan came in a few minutes ago and he did drop off-- I'd like to have him come forward as a witness and express his concerns for various senior citizens concerns.

K E N N E T H D O L A N: Senator, I apologize for being late. I got lost on the way here. I'm a little embarrassed. My name is Kenneth Dolan. I'm the Executive Director of the Home Care Council of New Jersey, the State association, which exclusively represents nonprofit home care providers. I'm here today to speak on behalf of the Council's member agencies, the 22 nonprofit homemaker home health aide agencies across the State which provides valuable in-home health and supportive services to thousands of New Jersey's home bound sick, frail elderly, and disabled. Last year, our agencies provided more than 3.3 million hours of service to more than 24,000 clients.

The ability of our agencies to continue providing the needed services to keep people out of nursing homes is currently being undermined by a serious and growing crisis, a severe shortage of homemaker home health aides. In the last three years, the number of aides employed by home care agencies has dropped by more than 35%. Because of this shortage, it is estimated that between 1500 and 2000 patients do not receive or are delayed services each day. It is also estimated that an additional 3000 to 4000 patients receive significantly reduced hours of vitally needed home care services.

I want to explain this. What we mean by reduced hours

is, when a patient goes on one of our programs, the nurse goes out and assesses the need of that patient for services and determines that maybe they'll need 15, 20, 25 hours of service to keep them in their home. But what frequently happens is that there's not the manpower available to give that needed service. So, in order to spread the aides out, they have to provide reduced services to each client.

Every day the homemaker home health aide shortage worsens. More and more frail elderly and disabled New Jersey residents are forced to enter nursing homes because they cannot get the needed care in their own homes. According to the Department of Human Services, nursing home care costs -- on average -- 30% more than the same level of care provided in the patient's home.

While New Jersey's State government has acknowledged that there is a severe homemaker home health aide shortage -- in fact, they had a task force they established to look into this -- little has been done to address the problem. In fact, a new State Department of Health regulation threatens to make the shortage problem much worse. As you may be aware, New Jersey has had a homemaker home health aide certification program in place for the past 19 years. Under the program's current guidelines, home care personnel must complete a 60-hour approved training program before they can be certified by the Department of Health. New Jersey is one of one twelve states nationally which requires home health aides to be trained prior to placement. This training requirement, which has been fully supported by New Jersey home care industry, is one of the reasons there's been so few instances of patient abuse and malpractice by home health aides over the past 20 years.

The Department of Health is now implementing a major change in the certification program, which will require that home health aides pass a written, in addition to completing the training course before they are certified. Department staff have reported that the exam failure rate for nursing home

aides -- that's a program that's been operating for several years -- is currently running at 20% or more every year. If the nonprofit home care industry loses an additional 20% of their homemaker home health aides on top of the 35% they have lost over the past several years, the written exam proposal will spell disaster for many home bound, frail elderly and disabled New Jersey residents.

I'm here today to ask for the support of this Committee in opposing the exam proposal. The Department of Human Services has already voiced their opposition, as have representatives of county offices on aging and human service advisory councils. So really, basically, I'm here to request that this Committee also join in expressing concern to both the Department of Health and the Governor about the adverse ramifications of this new exam proposal.

SENATOR PATERNITI: Okay. Thank you very much. Actually, Senator Codey has a bill, S-3340, which certifies home health aides, and it's in response to the Department of Health, I believe. I wish you would look at the bill. The bill is coming up Monday in Committee. Am I correct? (positive response) Maybe you would like to come and testify on the bill and have some input. This may alleviate some of your concerns.

MR. DOLAN: Yeah. We are going to support that bill. We supported it when it was in the Assembly, and it passed the Assembly. The problem is that we've been told that when it gets to the Governor's desk, even if it passes the Senate -- it passed the Assembly with only one negative vote -- and even if it passes the Senate, our understanding is the Department of Health is going to put tremendous pressure on the Governor to veto the bill.

SENATOR PATERNITI: Well, I think that maybe our senior citizens can put some pressure on the Governor and the Department of Health. I think that if they start a

petition campaign, I believe that it could be effective and I think their voices can be heard. But, thank you for your input.

MR. DOLAN: Thank you, Senator.

SENATOR PATERNITI: The next witness I'd like to call on would be Joseph Riordan, United Senior Action. I believe he's here. Joe?

J O S E P H R I O R D A N: Good morning Senator, ladies. I think it's wonderful that you are conducting these hearings around the State.

UNIDENTIFIED SPEAKER FROM AUDIENCE: We can't hear you.

MR. RIORDAN: (adjusts mike) Better? (positive response) I think it's wonderful that you're conducting these hearings around the State. I have heard nothing this morning that I disagree with, and I could repeat it all and say the things over again. I think about everything I wanted to say was said by Edith Edelson initially. So, I'm not going to go into a lengthy repetition of what she did say. I would just like to read a short statement.

Most older Americans adjust well to the physical and psychological aspects of aging. We adopt a life style, which allows us to live in the surroundings of our choice, reaping some small rewards for our life-long contribution to our country and our families. This is the way it should be, and the way United Senior Action wants to keep it.

However, as most of us realize, things are happening to threaten this. Fixed incomes are being eroded by steadily increasing costs for food, rent, and health care. Many of us are concerned about becoming a burden to our children who have to cope with the difficulties of raising a family and meeting their own needs in today's economy. While we know that they will come to our aid, we sincerely hope this does not become a necessity.

A group of seniors have come to feel a need for a grass roots movement in New Jersey to ensure that our needs are

met. Consequently, we have formed United Senior Action consisting of senior organizations, local clubs, and individuals from all areas, to work together in an educational and advocacy process.

Our initial agenda is -- and I'm going to skip around a bit-- Medicare assignment is a bill that is in both houses of the Legislature at this moment. The bill in the Senate is Carmen Orechio's bill, which has not moved so far. We are beginning to make an effort to see that this happens. On the Assembly side, it's Alan Karcher's bill, and that also is in Committee.

Medicare assignment is fair and equitable, regardless of what the medical profession will say. Medicare assignment rates are established as reasonable rates. If we look at them -- if you look at them -- you'll find that the basis for establishing them, is both fair and reasonable. The doctors object because they think it puts some restrictions on it. Because of Medicare assignment, some people are not prone to go to the doctor because he adds some charges that they just are not in a position to pay. We will be continuing to fight for Medicare assistance.

The second bill that we have been supportive, which came out of the Senate Committee, is the provision of rental assistance from casino revenue funds for seniors threatened with homelessness. When Senator Pallone chaired the Committee, this bill came out of Committee and has now gone to Senate Appropriations as best as I can recall. We can talk a minute later about the casino revenue funds in total.

The problem that we are encountering with casino revenue funds is something that I would like the Senate and the Legislature to address. Five or six years ago, there was a committee put together that determined some of the things that should be met out of casino revenue funds, and called for a permanent committee to oversee them. Last year, in the last

session, Senator Costa introduced a bill which passed both houses with a good majority. It was vetoed by the Governor, because he felt that it didn't leave enough control for the executive part of the government in overseeing the casino revenue funds. For some reason that I'll never understand, neither house of the Legislature made any attempt to override the Governor's veto. The bill just died, and I think I would like to see it come back.

There is a bill on the Assembly side today which is Assemblyman Singer's bill with a little bit of compromise. I would think there is the possibility that a bill could be put together which would create this commission. And creating this commission is essential for lots of reasons. We have looked very hard at what's happening with casino revenue funds, and we see a very real possibility that there will be difficulties in meeting the obligations that are already charged to this fund. There are continually new bills being introduced. Little pieces by different members of the Legislature looking to supply some other small need of the senior citizen group. I'm always afraid that someday the casino revenue fund will not have enough money to meet its commitments, and then I don't want to be around when you start to cut back on something. I think really, that sincere consideration should be given to the passage of that kind of legislation. It would be helpful. It would give you some sort of guidelines for the future uses of the casino revenue funds.

The last thing that I would like to talk about, and I could talk about for hours, because I've been involved with it for a long time-- Long-term care is the major problem in the State of New Jersey and the United States. We must develop a real program on the Federal level, I believe, that will establish long-term care as the absolute necessity for the senior citizens in this country. There are endless problems that we don't hear about because many people never come out to

the forefront with the problems they're having in caring for older people, and the problems seniors are having in trying to be prepared to live out their lives.

The only bill that's around now in the Senate -- it came out of the Senate -- S-91, Senator Van Wagner's bill, which provided for some demonstration projects. This would be wonderful because it would establish what is going to be the need over the long period of time -- established a demonstration -- rather, established a way to determine the need and the eligibility and the kind of services that are required to keep people comfortable, hopefully, in their own home setting. It's the most important thing. I can just end by saying that on the national level, there is a Long-Term Care Campaign. This is operating out of Washington and is funded by some of the larger foundations.

In the State of New Jersey there is an adjunct that's called the New Jersey Coalition of the Long-Term Care Campaign. I happen to be coordinating that in the State of New Jersey. And I can tell you that we have the finest group of members coming after this Coalition. It's only two months old, and we're adding new members everyday. That currently includes the nurses, the Alzheimer people, the New Jersey Retired Educators Association, the Home Health Assembly, the Health Care Coalition, the Association of Retired Citizens, the Cerebral Palsy Group, the Older Women's League, the United Automobile Workers, AFSCME, and the ILGWU -- among about 30 so far. This is going to be a group that will simply monitor at this time, the legislation that will be developing in Washington, trying to determine which will be the best type of legislation, because I see no other resource except that the Long-Term Care Campaign must be a Federal program. They must find a way to fund it, and they it will reach out to the states; maybe the states will administer it, but instead of all the bits and pieces that we have running around now, I

would like to see one long-term care program that will cover people from the cradle to the grave. You folks are talking about aging. I'm talking about people needing long-term care. from their birth to their death -- children, retarded people, CP people, all kinds of people who need long-term care. You saw the beginnings yesterday. The Association of Retarded Citizens are on the streets in Trenton to make their case; and their case is right and their case is good, and a way has to be found to address it. Thank you for your time and consideration.

SENATOR PATERNITI: Thank you, Joe. You stated on the Medicare assignment-- I'd like you to know that I went on as a co-sponsor of Senator Orrechio's legislation. I'm one doctor that's in favor of it. So that's just to let you know. The other thing you mentioned was the casino revenue fund. I sat on that Committee. I was one of the people that was in favor of having a continuing commission so that we can oversee where the monies were going for the casino revenues, but I want to thank you for your input.

MR. RIORDAN: I have spoken to no one who doesn't see the need for it. But I don't see it happening.

SENATOR PATERNITI: But, we did pass it in both houses. Kean vetoed it.

MR. RIORDAN: Yeah, but there was no attempt-- I never knew why there was not an attempt to--

SENATOR PATERNITI: Well, if it ever came up for override my vote would have been there. No problem.

MR. RIORDAN: We're working on it, and you can help, too. I mean, there's got to be some compromise between what Senator (sic) Singer's-- Senator Singer's bill mirrors what the Governor wanted. Assemblyman Singer's bill and Senator Costa's bill represent what the Legislature would like. But I'm sure there's a reasonable compromise. We all know that compromise is the essence of government, and there can be a

reasonable compromise worked out, because of the necessity -- the necessity to control casino revenue funds, before they reach a point where they create problems that are much more difficult than controlling them now. Thank you very much.

SENATOR PATERNITI: Thank you very much, Joe. The next witness I'd like to call upon would be Netty Lowenstein, Visiting Home Health Services of Middlesex County.

N E T T Y L O W E N S T E I N: Hi. I am both a senior citizen, as of a month ago, and I'm Director of Visiting Homemaker Home Health Aide Services--

UNIDENTIFIED SPEAKER FROM AUDIENCE: We can't hear you.

MS. LOWENSTEIN: You can't hear me? Can you hear me now? (adjusts mike) Can you hear me? (positive response) Good. I said I'm both a senior citizen, as of a month ago, and I'm Director of Visiting Homemaker Home Health Aide Services of Middlesex County. And I've been hearing casino revenue, casino revenue, casino revenue, and that's exactly what I'm going to be addressing. In the past two years, our not-for-profit agency incurred substantial financial deficits because of the below cost reimbursement for Medicaid Waiver Programs. This financial hardship has forced us to decrease our services to the most needy home bound elderly client in Middlesex County, the Medicaid eligible client who has an income of less than \$392 per month. We have more than 50 elderly clients waiting for home care services such as personal care, light housekeeping, and shopping. These services prevent unnecessary institutionalization in a nursing home facility if the placement is available. I'm hearing that the placements are not available for these people.

The Medicaid Waiver Programs are funded by casino revenue income, and the reimbursement is set and paid for by the Department of Human Services, Division of Medical Assistance and Health Services. There has been no mechanism to increase the reimbursement caps for the home care services, and

although there have been numerous meetings with the Department of Human Services Director and Commissioner during the past three years, their promise to give the matter consideration has been only lip service.

We realize that there is a budget restraint, but the necessary money for the Medicaid Waiver Service Program has been appropriated by the Legislature, and there may have even been a surplus. However, the Governor's Office of Management and Budget has refused to allocate the increased money needed to pay for the home care services to the Department of Human Services.

We appreciate your Committee making inquiries to both O.M.B. and to Commissioner Altman. New Jersey promised its elderly population compassionate viable alternatives to nursing home placement, and it has broken its promise by providing inadequate funding to the indigent home bound elderly persons. Thank you.

SENATOR PATERNITI: Thank you very much, Netty. Thank you very much for your input. The next witness I'd like to call upon would be Percy Dunn, New Jersey Federation of Senior Citizens. Is Percy Dunn here yet? (positive response) Good.

P E R C Y D U N N: Thank you, sir. My name is Percy Dunn. I'd like to point out that I also represent the Essex County Senior Citizen Council of Clubs. We have 107 clubs representing about 700 members in Essex County. What I want to say has been said, and I've enjoyed it. I'd just like to add a few points to what has been said. On the Medicare assignment, I believe we must have some relief from some our price gouging doctors. There are some senior citizens I know who don't go to the doctor because they don't have the money to pay, and they don't want to be embarrassed. I don't have much to say. Now, I'd like to turn to transportation.

I've been writing letters to the Legislature ever since-- I remember Ms. Leanna Brown, Senator. I think she was a Senator then, Leanna Brown--

SENATOR PATERNITI: She sits on this Committee.

MR. DUNN: --co-signed the bill. She co-sponsored the bill. I think it was S-179 on the half fares. And I've been writing Senator Rand and different members ever since, on Transportation trying to get permission for the senior citizens to use the discount fare around the clock instead of just off-peak hours. Well, you know, a lot of seniors can't go to the doctors, do their shopping, and take care of their business on the off-peak hours.

I would just like to say that even with the Medicare assignment bill and the legislation for transportation being held in committee by the two chairmen of each house and eight other members-- I believe that by these men holding these bills in committee and don't release them, I believe that they are depriving senior citizens of affordable health care that they can pay for and affordable transportation. Thank you.

SENATOR PATERNITI: Thank you very much, Percy. Thank you. The next witness I would like to call upon would be Irene Holst, Comprehensive Services on Aging.

I R E N E H O L S T: Good morning. It's nice to follow several people, because you know you don't have to cover all the bases. They've already been covered. So, I think what I'm here to do now is to reiterate a few of the areas that I see as rather serious ones.

My name is Irene Holst, and I am an outreach worker with the Comprehensive Services on Aging. That's a unit of the Community Mental Health Center in Piscataway, and that is a part of the University of Medicine and Dentistry of New Jersey. This unit has been serving the needs of older persons and their families in nine communities since March of 1975.

In 1982, COPSA helped families organize the Alzheimer's Disease Support Network and with legislative funding, we were able to develop the COPSA Institute for

Alzheimer's Disease and Related Disorders. Under this umbrella, we opened the first day program in New Jersey for persons suffering from dementing illnesses. We also operate a statewide, toll free number offering information and referral on this devastating disease. Our diagnostic clinic is available to those persons experiencing memory loss and confusion for a complete diagnostic workup. And those all take place in Piscataway.

I am here this morning as a representative of the COPSA unit to first thank you for your past and present support, Senator, through the passage of legislation which has already benefited many older residents in our State. I am here to bring to your attention just a few of the problems that we face in our work almost every day. Our goal, or target population, is the home bound, isolated, depressed, and economically depressed older person.

I would like to point out first in reference to Alzheimer's disease, that there are really very special issues and needs in caring for these persons who are confined to nursing homes. These institutions need skilled staff, trained in recreational and stimulation therapy as well as in-service training for all nursing home personnel to manage the symptoms of and relate to those who suffer from dementia. I ask you to consider increasing Medicaid reimbursements to nursing homes, which is the major funding source for large numbers of people in need of long-term care, so that these homes can afford to maintain the appropriate ratio of "hands on" staff in relationship to patients, in order to promote a positive therapeutic environment. It is our hope that meeting this goal will reduce what we believe to be the excessive use of drugs and restraints on these patients.

As the number of aged citizens in our State continues to rise, particularly in the over 85-year-old group, the need for home health aides, which has already been expressed, is

very acute. Many people face difficult hardships and unsafe conditions in their homes as their names remain on waiting lists. We ask that you consider legislation in making this profession more lucrative and attractive, but that you keep in mind that training, testing, certification, and charging fees for same, should be flexible and viable and presented in such a manner as to encourage men and women into this field and not create a barrier. We would encourage -- and I believe that you have seen the Task Force report, and I understand a new report will be issued shortly, that we'll have a chance to give more input -- but we would ask that grandmother/grandfather clause be put in that to retain the men and women presently working as home health aides, many of whom have been doing so for many years very successfully and had never undergone testing. One of the things of flexibility might be oral testing for some, as versus written testing.

While on the topic of home health aides, we ask you to look at the fact that there are many existing programs offering home health care services. We would like to see some effort to consolidate them and avoid duplication and confusion, not only to the consumers, but to us, the workers in the field whose job it is to make appropriate referrals to the agencies. Just to-- As a point of view, I'll name some of the programs where you can get home health aides. There's the Comprehensive Care Program to the Elderly and Disabled, CCPED; Peer Grouping Initiative; Statewide Respite Care; Personal Attendants Program; Certified Hospice Program; Jersey Care Medicaid Program; and there are others. And all of these contract with the same home health care agencies, calling upon the same pool of home health aides of which there are simply not enough to go around.

Another concern is the lack of housing options for the elderly who remain on limited retirement budgets and cannot keep pace with the rising cost of rental units. Many older persons must move into substandard housing, scrimp on heating

and electricity to make ends meet, or are simply forced to leave the State to find a lower cost of living arrangement. I know we all recognize the importance of securing safe, affordable housing for our older population, but this can only happen with a greater commitment on the part of the State and Federal governments.

There were some bills -- or are, I think -- for shared housing programs. I'm aware that these are just a drop in the bucket; to establish shared housing situations and that there are many more units that are needed, but this Legislature would distribute funds and provide technical assistance to qualified nonprofit groups to run these homes. Passage of said bills would provide an effective use of underutilized housing stock, such as oversized homes which an individual cannot maintain alone, but could be converted into shared housing. A turning point of living arrangements and options for affordable housing for the elderly in New Jersey is needed now. The truth is, it was really needed yesterday.

We, who work in the field of mental health want to express our concern that senior citizen needs will not be sacrificed due to new budget constraints. Senator John D. Rockefeller, Democrat of West Virginia testifying before the House Ways and Means Committee said, "The elderly receive less mental health care than any other group. While nearly 7 million elderly need some type of mental health assistance, only a few are receiving that help." That was reported in The New York Times, March 7, 1989. I'd like to add that we are aware that older people are not inclined to come to mental health centers for assistance, and that's why we have to promote the outreach approach. We need to go out into the homes to find them and to assist them.

Again, I thank you for your support in offering this opportunity to come here this morning. And if there's any way that I can be of help, I have left my brochures in your packet, and I will be more than happy to assist.

SENATOR PATERNITI: Thank you very much, Irene. Actually, as far as the shared housing, I had legislation in when I was in the Assembly. I've had it in the Senate. I believe Senator Pallone had legislation. His legislation was released from the Senior Citizens Committee. It's now in the Appropriations Committee, and I don't know what's going to happen to it there. But we have been pushing that issue for many, many years, and I hope that the day will come when we have monies to actually create a lot more shared housing for our senior citizens. But, thank you for your input.

MS. HOLST: Thank you very much.

SENATOR PATERNITI: The next witness I'd like to call upon would be Lee Santangelo, Edison Township Office on Aging. I've known Lee for a good part of my life, and Lee has always had a deep concern for senior citizens. She runs an excellent senior citizens program in Edison Township. I know she has the support of the Mayor and Council in Edison as well as all the legislators in the area. She's been doing a great job, and we're happy to see you here this morning, Lee.

L E E S A N T A N G E L O: Thank you, Doctor. I don't know whether to say Doctor or Senator, but I guess Senator is first here. Thank you, Senator Paterniti. On behalf of the Edison Township senior citizens and myself, I would like to present to Senator Paterniti and your Committee on Aging, the following concerns and needs that have been predominant in my everyday observations of our senior population. Our senior citizen clubs meet each day at the center, comprising of at least 200 seniors each day from a different location in Edison. In all, about 1500 seniors meet weekly. So, I do get input. Hundreds of telephone calls come into the office weekly with reference to I & R.

Their prime concern is rising costs of property taxes, health insurance, automobile insurance, food, and public utilities. Elderly families and individuals spend a

disproportionate amount of their fixed incomes on housing, food, and medical care. Their prime source of income is Social Security. And although Social Security has increased, it has not kept pace with the double digit inflation. I recommend a fairer adjustment of Social Security based on more accurate reflection of living expenses. I also suggest this be done semiannually.

Higher property taxes have caused many of our seniors distress. Their concern is, where will the money come from if there should be another increase? The same house which has been a symbol of their independence now becomes the cause of their impoverishment. When they finally must give up their home, they find that there is very little or no senior housing in the community in which they live and paid taxes all their lives. This problem frightens me, because it traps the senior in their home, being unable to find suitable alternative living arrangements at reasonable cost in a familiar surrounding.

If the senior must sell his or her home, he is now in direct competition with Mt. Laurel decisions. The influx of new homes in the community disallows the senior from selling as readily as need be. If we are to help these independent seniors living alone, then we must give them a wider spectrum of supportive services to stay there. We must put a cap on taxes to the elderly. We must help them maintain both inside and outside of their homes if they are disabled or frail.

A strong need for outreach workers are needed in all communities to seek out those frail and elderly and to put them in contact with services that are here already. They must be assisted in filling out long lengthy health forms. They are having many, many problems with sending forms to Pennsylvania.

I believe a strong work force in the divisions on aging in all communities should be in force. Some are operating on shoestrings. We want to do the job, but we need the means to hire the people. Transportation is always my

prime concern. Large communities such as we, are in need of more buses and drivers. Perhaps the State can release more casino revenues towards this vital service.

Certainly, I know there are many other issues to be addressed in this State, but we must not forget the elderly. We cannot turn our backs on them. We cannot stick our heads in the sand and say these problems do not exist. We must write and fight for legislation to improve their everyday lives and give them a sense of security and a life of dignity. You must carry the torch for the elderly. They cannot do it. We must.

Again, I would like to thank you, Senator Paterniti, and also the Committee, for hearing us. Thank you very much.

SENATOR PATERNITI: Thank you very much, Lee. I know that some of your concerns, we're hoping to try to address. I was looking at the area that you had mentioned as far as a lot of seniors-- A lot of times they've worked all their lives, they even have their homes paid off, but because they are on a fixed income and with the increase in property taxes, a lot of them throughout the State are fearful that they are going to lose their home. Now we've been playing around with legislation as far as what we call reverse mortgages. I've been thinking that maybe the Federal government should go into this area on a national basis.

The way this program could work is if the Federal government used this particular reverse mortgage concept, that they would actually give the seniors the monies for their taxes on an annual basis to pay for their property tax. Say, God forbid, that they live a long time and they've actually used up all the money of what the house is worth, then their house would trigger into what we call a Section-8 type of housing. The government would probably end up owning the house, but they would continue to live there for the rest of their life and they would only pay 30% of their income for taxes or maintenance, and at least they would be assured that they will keep their home for the rest of their life. So, we are looking

at a lot of areas. As far as monies for additional transportation, we probably could look at more monies in the casino revenue. We should check with our county divisions on aging, because the money from casino revenues go to them and they appropriate the monies to various municipalities. We should probably check with them, and if we feel that the money isn't adequate, maybe we should try to get additional monies, you know, designated strictly for transportation, especially for the additional buses and possibly drivers.

But I want to thank you for your input, and I want to thank a lot of people who have had input. And at this point, I would like to call upon our next witness. Thank you, Lee.

MS. SANTANGELO: Thank you, Doctor.

SENATOR PATERNITI: The next witness I have is Salvatore Malanga, New Jersey Federation of Senior Citizens. Sal?

SALVATORE MALANGA: Malanga.

SENATOR PATERNITI: Malanga (corrects his pronunciation). Yes, I'm sorry.

MR. MALANGA: Mr. Chairman, I want to pass a resolution to eliminate toll booths on the Garden State Parkway. Currently the toll booths on the Garden State Parkway are an impediment to the orderly and safe flow of traffic. Now, therefore, be it resolved that the New Jersey Federation urges the Legislature and the Governor to remove the toll barriers on the Garden State Parkway and replace them with toll booths at the entrances and the exits to pay the difference, as they currently exist on the New Jersey Turnpike.

Resolution on auto insurance: Auto insurance rates in New Jersey have soared by at least 30% in the past year, making New Jersey one of the states with the highest car insurance rates in the nation. Now then, be it resolved that the New Jersey Federation urges the Legislature and the Governor to take steps immediately to contain auto insurance rates in New Jersey. And be it further resolved that the Legislature and

the Governor eliminate the Joint Underwriting Association, which they call the JUA, which creates inequities in insurance rates throughout the State, penalizes safe drivers, and increases premium cost.

And this, in writing a letter to the Governor before April 1, is the proclamation to the Honorable Governor Tom Kean, speaking on behalf of seven organizations throughout the State: The Old Guard, 60 years with the AFL-CIO; and autoworkers of the United States; and the Knights of Columbus; Essex County Council Board of Directors, elected and reelected to 13 State Conventions of the New Jersey Federation of Senior Citizens:

1) We urge Congress to repeal the McCarran-Ferguson Act, an antitrust exemption enjoyed by the insurance industry which exists in no other non-utility industry to the extent it is providing of the Federal antitrust laws, allows auto insurers to conspire in the collection of the data relating to their business experience and to make rates in concert.

2) We urge the Legislature and the Governor to remove the toll barriers on the Garden State Parkway and replace them with toll booths at the entrance and the exit of the ramps similar to the toll arrangement which currently exists on the New Jersey Turnpike. Currently, the toll booths on the Garden State Parkway are an impediment to the orderly and safe flow of the traffic.

3) We urge the Legislature and Governor to eliminate the Joint Underwriting Association, JUA, which creates inequities in insurance rates throughout the State and penalizes safe drivers.

4) We urge the Legislature to repeal the current point system which assesses penalties to the drivers throughout the Division of Motor Vehicles and insurance rates, in addition to the civil and monetary penalties already imposed by the courts.

5) We urge the Legislature and the Governor to take steps immediately to contain auto insurance rates in New Jersey. Rates have soared by at least 30% in the past year, making New Jersey one of the states with the highest car insurance rates in the nation.

6) This copy be sent to the President of the United States and to the Speaker of the Assembly to vote on an open ballot and to make New Jersey the 42nd state under \$550 no-fault auto insurance, and \$50 deductible, and abolish the JUA and the point system. Sal Malanga's protest speaking on behalf of seven organizations throughout the State.

I wanted to point one thing, that I was chairman of that Homestead Act and I handed the proclamation to the Governor, Brendan Byrne. At that time -- it was about 10 years ago -- I was elected to present the AFL-CIO throughout the State. I handed the-- He marched me to the President of the Senate, who was Joe Merlino at that time. He was President at that time. And the two of them marched me down to this big room so that I can have them vote on an open ballot. The Homestead Act went through and all the nine other articles that were on the ballot were knocked down. I've exceeded that since then. I've been appointed on all committee throughout the State.

But I'm disabled. My whole left side is dead. I want to resign, but they wouldn't let me. Thank you.

SENATOR PATERNITI: Thank you very much, Sal. Sal is right about the McCarran-Ferguson Act. That was passed in 1945. What it did, it allowed insurance companies where they wouldn't come under any Federal regulations, so they could not come under any antitrust laws. And what happens is that today a whole group of insurance companies can get together, they can actually decide what rates you can have. Yet, if a business, whether it be a group of paving contractors or other groups, try to do the same thing, they would be breaking the law, and they would be going to jail. And he's absolutely correct that

the McCarran-Ferguson Act should be repealed by Congress. This is on the Federal level. I hope that someday it is. Maybe that will reflect on lower insurance rates on our automobiles.

As far as the barriers on the Garden State Parkway, he's also right. They've done a study and they feel that actually you'd have an additional 22% more flow of traffic by eliminating that particular barrier if they had people pay a toll when they get on and when they get off the Parkway and you probably-- Instead of widening the Parkway, you could probably continue to have an extra 22% volume of traffic at the same rate you have today. I think both suggestions are very, very good. Thank you very much.

That concludes the number of people who've asked to come up as witnesses on my witness list. But if anyone in the audience would like to come forward and address this hearing, you're very, very welcome. Because that's what it is for. Do we have anybody in the audience that would like to come forward? (positive response) Yes, please do.

A L I C E A . H E F F E R M A N : I don't have any prepared text. Can you hear me?

SENATOR PATERNITI: Yes.

MS. HEFFERMAN: I'm Miss Alice Hefferman, and I'm a retired social worker.

UNIDENTIFIED SPEAKER FROM AUDIENCE: We can't hear you.

SENATOR PATERNITI: Put the mike closer to your mouth. They can't hear you.

MS. HEFFERMAN: Can you hear me now? (positive response) They generally always can hear me. All right. You never know when I'm going to arrive. Mr. Assemblyman, Dr. Paterniti, we're glad to have you here because we think, in looking over this situation, you have many agencies that have been involved and they've come from different parts of the State and we all have the same problems, if you would look

them over. But we're primarily interested in-- Well, we're interested in all of them. I'm so old now, I'm getting young. However, we have a problem that we are very concerned with, and that is home health care. There have been suggestions made to you today about that. In Middlesex, which is a small part of the county, I think it's four square miles, there are many, many apartments there, of the shut-ins, of seniors who live there and do not have any families. If it weren't for some of the organizations, particularly one that has sprung up through a very esteemed lady that I will introduce, we would have many people in their homes that would never get out. They are paying an exorbitant amount of rent. We think rent in the Middlesex area is one of the highest. And you're free to check that out. They are getting very concerned about the increases and, of course, it affects their medical problems.

Living on the edge of the county also is no help. We're right on the border in Middlesex of Somerset County and many of the people, residents of that area, have to go into another county to get services. And the transportation is not always allowable, or is only allowable on certain days. Well, when it comes to emergencies, someone has to be found to provide that emergency. One of them happened the other day. That wasn't the day that the bus was scheduled to go out. We do get-- We're beginning to get much better service, but nevertheless, it's there.

I have a copy of The Star-Ledger, dated September 22, 1988. I brought this to the attention of another group around that time, but I didn't get very much help. I'd like to read this, because I think it will help some of the people here:

"Passaic County Freeholders announced yesterday that under an agreement with the County Medical Society, Medicare income limits for the elderly and the disabled are being increased. Representatives of both parties met yesterday to

announce that under the new Medicare Courtesy Assistance Program, the annual income limits will be \$20,475 for a single person and \$25,125 for married couples." I haven't followed-up those allowances. "The new income limits become effective in November. Similar income limits already have been established in Bergen County. Currently, the Medicare Courtesy Program applies to elderly and disabled county residents with an annual income of up to \$13,650 for a single person, and \$16,750 for a married couple.

"Medicare is a Federally funded health care program. According to Louise Friedman, Head of County Office on Aging, the new courtesy agreement with the Passaic County Medical Society will mean more residents may receive Medicare Courtesy Cards, and may join the Pharmaceutical Assistance for the Aging and Disabled, the PAAD program. The PAAD program is funded by the State through casino revenue.' Friedman said, That allows senior citizens and disabled residents on fixed incomes to receive breaks on their prescription costs. Subscribers to the program may pay two dollars per prescription.

"Friedman said, 'that under the new agreement with the Medical Society, about 290 doctors, countywide, are available to subscribers. The doctors, who must sign up to be part of the program, will agree to receive 20% of their fee from an elderly or disabled resident and then wait for reimbursement for the remaining 80% from Medicare. 'That arrangement saves the subscriber from an initial outlay while waiting for reimbursement,' Friedman noted.

"Friedman added, 'The number of doctors voluntarily participating in the program is expected to soon rise to more than 400.' The county official said, 'Residents already enrolled in the PAAD program are eligible for the Medicare Courtesy Card. People within the new income limit should apply for the program at her office. Applications will be available beginning October 15. The Medical Society will assign physicians to subscribers,' she said.

"State Assemblyman William Pascrell, a Paterson Democrat who attended yesterday's meeting and press conference has a bill pending in Trenton that would make it mandatory for all doctors in the State to participate in the program."

I don't mind giving this to you, if you'd like to have it, because as far as I know, and maybe it has happened, it's in Essex County -- wait a minute, now -- in Bergen County, that was already in there and Paterson took it up. Which means the people now who do not get any kind of public assistance and have the large income, which is very necessary -- it's very hard to live on \$20,475 and pay our taxes and all -- they would be eligible to be part of this medical care whereby they would only pay \$2 per visit to the pharmacy. And I have a copy, and if you don't mind what I've got written on the back of it, I'll give you my copy because it's a photostat, and it's from The Star-Ledger.

SENATOR PATERNITI: Thank you.

MS. HEFFERMAN: Also, I would like to bring something else up here. We know how necessary it is to have home health care. And we believe that there should be an emergency measure put in the training of home health caseworkers. Education is very necessary, and some parts of the care that must be given. it must be given by an educated person. . But, you can't always get them; but you can get neighbors and friends, and some of them are in the same situation as the person that needs care. I believe in that type of situation, they should be permitted to give the care to the person that requires it without having to be certified as a home health aide. Now, maybe the fee could be different; we've run into problems many times. We had one within the last few days where you had to get somebody to go and stay with a sick person -- they couldn't be left alone. Anyhow, some of these seniors, I've heard it here -- I didn't come prepared to do any of this, and I've heard the notes -- but companion care--

As an old-time social worker, when you have an older person in the family, in a young family, raising children, there is a tremendous cost involved, and sometimes it causes problems in the home because that extra person needs all that care and financial support. We should take that into consideration when we're making allowances. I would be all for it, even making a contribution to a home that had some kind of an income, and judge that and make an allowance for those people to get some care. Because of the high cost of living today and the high cost of housing, it's necessary to have both adult members of families to work in order to meet their bills, and when they take their father or mother in, that's an additional care, and it does cause a problem. Sometimes it causes the disintegration of a family. And we're here to represent families.

I was showing the Senator we have a -- and I'd rather introduce this lady -- where we tried to solve some of these problems of taking people out of their homes one day a week and it's starting in numerous places; and this is all volunteer work. But you know, you can't always have the agencies -- and I was part of an agency -- coming into neighbors and friends and asking them to volunteer, because most neighbors do that when they know one another. But, as I say, this area is a migration area -- people come and they're moving.

And I told my father, if I may be personal, a long, long time ago when there were none of these houses, I told him there's only two people that discovered where we lived: one was Christopher Columbus, and the other was my father. That's how long I've lived and I take exception. People say we have to remember the elderly. I think we ought to tell them we are the elderly or we're the senior citizens. I remember the First World War, not too much of it, but I do; and I lived through the Second World War, and I lived through the Depression. And I'm an old maid because all of my boyfriends didn't have

any money to treat me. So, I went out to work and I earned it for myself. But it was a good experience, and I'm not a bit sorry. I loved being a social worker. I'm sorry I'm not prepared, but think about those seniors.

By the way, I live in my own home that my father, as a carpenter, built. And this is such a serious sort of situation here. A salesman came in and he wanted to buy my house. And he said, "Look, you can take a trip around the world." And I don't know whether he was insulting me or what he was doing to me. So, I said, "When I come back, what are you going to do for me?" Thank you.

SENATOR PATERNITI: Thank you very much. You forgot to introduce your friend. You were going to introduce someone. You were supposed to introduce the good sister.

MS. HEFFERMAN: Oh, excuse me. How could I do a thing like that? It must be approximately a year or more then that our particular parish started a social ministry. And I guess since it was coming before that right from the Diocese of Metuchen, which is comparatively new, if you know anything about this area and the Catholic faith-- But she was doing so much over in our parish, because there were so many needs, that our very wonderful pastor Monsignor Hogmy (phonetic spelling) hired her to take care of all of our problems. And so without much ado, I'd like to introduce Sister Patricia Vayda, from the Social Ministry, Our Lady of Mt. Virgin in Middlesex.

SENATOR PATERNITI: Thank you very much for your input. Is there anyone else who would like to come forward and speak? Please do. Yes, sir? Please give your name so it will be a matter of record. We appreciate your input.

JAMES PEMBERTON: My name is James Pemberton, and I am fortunate to be one of the few who happen to be a kidney transplant patient. Right now, I am on immunized suppressant drugs which now are a necessity to prevent rejection of the kidney. And it's unfortunate that there isn't any legal

restriction placed on the drug stores by either the State or the Federal government which now prohibits them from charging whatever they want for any prescribed drugs.

A local drug store, for example, that I had been dealing with while I was under a prescription program for the past year, was charging me \$246 for a 12-day supply. I complained about this exorbitant cost and talked to the assistant manager who reduced this price to \$226.91. Finding another source outside the State of New Jersey, in Pennsylvania, I was quoted a price for the same drug of \$203.76 and that would be the delivered price to my home. Following along on this, I contacted AARP and for the same drug delivered to my home by AARP, the price is \$176.80. I would respectfully ask and would be willing to participate in any kind of a program whereby we would be able to, for now, control the exorbitant prices of drugs in the State and possibly have the State set a standard that the Federal government could follow, whereby these exorbitant costs could be brought back in to a realistic level for everybody concerned. Thank you.

SENATOR PATERNITI: Thank you very much, Mr. Pemberton. From what you stated, with those kinds of costs every 12 days, they could actually bankrupt somebody. I have legislation in, and I'm beating my head against the wall because I've been getting a lot of problems with the Department of Health. It's what we call a spend down, under the prescription plan. Under the prescription plan, if a person's married, if they make anything over \$16,750 they couldn't qualify for PAAD. What my legislation would do is say someone made \$20,000 or \$22,000. Once their prescription bill -- the difference between the \$16,750 and what their normal income is -- once it hits that or anything over and above that, they would actually trigger into the prescription plan, because sometimes somebody might even be a couple hundred dollars over the prescription plan, and they're not able to trigger into

it. But I've really come up against a stone wall. But I've put that legislation early in this particular session, I hope that maybe they may mend their ways and support it because I think it's truly needed, especially in cases like yours. Because I can't see-- Your Social Security check probably wouldn't even cover what your medication would cost really per month. It's insane.

MR. PEMBERTON: No it doesn't. But there was an article in The Star-Ledger yesterday where CVC was now offering coupons for discounts on drugs and they had been challenged in court about this, and I think that there was a \$500 fine issued against the CVC Drug Store, or CVS, whichever it is. I find it very hard to be able to comprehend how come a fine could be put against anybody for offering this when I contacted the State Citizen Complaint Bureau yesterday to only be told that the State doesn't have any regulations or any laws governing costs of drugs; neither does the Federal government. How can they fine somebody when there isn't any law on the books?

SENATOR PATERNITI: That's true. That's very, very true.

MR. PEMBERTON: But as you had said, the limitation that there is placed, that's exactly the situation that I find myself in. And this is only one drug that I quoted today of eight others that I also have to take on a daily basis. My estimated drug bill per year for just this particular case amounts to about \$7500 a year.

SENATOR PATERNITI: Well, thank you for your input, Mr. Pemberton.

MR. PEMBERTON: Thank you, sir.

SENATOR PATERNITI: Do we have someone else? (positive response) Go ahead. Please come forward. Your name, please?

PEGGY HODGETTS: Peg Hodgetts. I didn't come here to make a speech or anything, but I had a couple of questions that I'd like to put to the Senator. Is the Senator familiar with the S-2893 bill?

UNIDENTIFIED SPEAKER FROM AUDIENCE: We can't hear you.

MS. HODGETTS: Okay. I'm not familiar with this bill I read something about it. I'd like to know if the Senator--

SENATOR PATERNITI: Do you know what's in the bill? Because we have, you know, between the Assembly and the Senate, we must have about 7000 or 8000 bills, so I wouldn't know them by number or exactly what they are. In fact, in most instances, unless this bill comes up in the Committee that I Chair or unless it's going to come up on the floor for a vote, normally we don't know that much about most of the bills unless we've been getting some heavy mail from constituents who are concerned about certain legislation. But, do you know exactly what the bill does?

MS. HODGETTS: Well, I just read a little bit about it myself, and I thought maybe you might be able to give us a little more info. It's the bill to raise the qualifying status of real estate taxes that people who qualify for -- I think it's the senior citizens, probably -- from \$250 to \$500.

SENATOR PATERNITI: Oh, yes, yes. What you're saying is that if a person makes under \$10,000, today they are allowed get a tax deduction of \$250. What they'd like to do is probably either raise it or either raise the -- I believe -- raise it up to \$15,000 per year. If that legislation comes on the floor, you know darn well, you'll have my vote.

MS. HODGETTS: I just want to know if you knew anything about it, because--

SENATOR PATERNITI: Yes. What they are trying to do is increase the eligibility and also the amount, because when that legislation was passed back when we passed the income tax, that was about 11 years ago, and the cost of living was a lot less. So, they'd like to bring it up in parody with inflation. It does make a lot of sense. If that bill comes on the floor, you'll have no problems with that piece of legislation.

MS. HODGETTS: Well, I thought, you know, the fact that it does affect so many seniors, that--

SENATOR PATERNITI: But the thing is that you have to find the monies, and the money might be coming from general revenues. Right now, if you read the newspapers, you'll see where the Governor has been streaming or he's freezing jobs and so on and so forth, because we're fortunate for a number of years in New Jersey where he was getting a lot more monies coming in, and it's kind of dried up. And there's just, right now-- You see, because by law, with our Constitution you have to have a balanced budget. You cannot spend any more money than you take in. And that's the one problem, but if they can find some source of revenue, I'm hopeful that they will fund it, and that will become law.

MS. HODGETTS: Okay.

SENATOR PATERNITI: Thank you very, very much.

MS. HODGETTS: You're welcome.

SENATOR PATERNITI: Would anyone else would like to address this Committee? (positive response) Yes, sir? Your name and who you represent, sir? You can sit down right here.

P E T E R C E R R A T O: Peter Cerrato, 47 Old Post Road. I'm with the New Jersey Bicentennial Commission. It has nothing to do with aging except more on the aging of our country. In case the public didn't know, I'd just like to inform them on April 22, over at St. James Church, off Fort Bridge (phonetic spelling) Avenue, we as a town and a country will be celebrating the 200th anniversary of the Presidency. I am part of a commission through the Federal and State government where we're planning our activities from senior citizens down to five-year-olds. If you're interested in partaking at all, I urge you to contact me at Charles Stanshaut (phonetic spelling), and I have information in the back if anybody would like to be partaking in our celebration.

After hearing what I heard in this room tonight, everybody's worried about their bodies, but what we're all here

for and why you're a Senator, and why we're putting in, hopefully, for a good Governor; the President and what we celebrated in this country is more important. And that's dying also, because we don't have young people who care about our heritage -- because we're not teaching it any more like we should. I think this is one activity where we can tie-in our State and our country back to the way of what we were all talking about in this room today. Thank you.

SENATOR PATERNITI: Thank you very much. Is there anyone who would like to speak? If not, I will close this hearing. I want to thank you all for coming. Oh, yes, Sister. Come forward, please.

S I S T E R P A T R I C I A V A Y D A: I'm Sister Patricia Vayda and I work with the senior citizens in our Lady of Mt. Virgin Church.

UNIDENTIFIED SPEAKER FROM AUDIENCE: We can't hear you.

SISTER PATRICIA: Can you hear me? (negative response) I'm Sister Patricia Vayda, and I work with the senior citizens at Our Lady of Mt. Virgin Church. I run a center for the home bound in Middlesex Borough. And I come in contact with many, many senior citizens. I get many phone calls, and senior citizens really need much help with money, with home health care, senior housing, everything that people have said today. I would just like to go on record encouraging you and your Committee, Senator, to really help us and help our senior citizens in whatever way you can. Thank you.

SENATOR PATERNITI: Thank you, very much, Sister. Is there anyone else who would like to come before this Committee? (no response) If not, I want to thank each and every one of you for coming here today for your input. It's vital. It's needed. It's important. It's the kind of input that we need to digest and ascertain and see what your needs are. Again, thank you for coming and have a nice day.

(HEARING CONCLUDED)

APPENDIX

PRICE \$5.00

CONSUMER Guide to ESSEX COUNTY NURSING HOMES



NURSING HOME ADVOCACY CENTER
439 MAIN STREET, ORANGE, NEW JERSEY 07050
201-673-0640

PUBLISHED BY SENIOR SERVICE THROUGH A GRANT FROM THE NATIONAL COUNCIL OF JEWISH WOMEN, ESSEX COUNTY SECTION

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CONSUMER GUIDE
TO
ESSEX COUNTY NURSING HOMES

* * * * *

THIS EDITION OF THE CONSUMER GUIDE IS
DEDICATED TO ALL THE NURSING HOME ADVOCACY CENTER VOLUNTEERS
WHO MADE THIS PUBLICATION POSSIBLE BY GENEROUSLY
DONATING THEIR TIME AND ENERGY

* * * * *

SPECIAL THANKS TO

Essex County Division on Aging
National Council of Jewish Women
Essex County Section Volunteers
Office of the Essex County Executive
RSVP Volunteers
Student Volunteers from
Seton Hall and Upsala Colleges

VERY SPECIAL THANKS TO ALL THE STAFF AT SENIOR SERVICE CORPS

Published: September, 1987

Editor: Judith T. Seelbach

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INTRODUCTION

Senior Service's Nursing Home Advocacy Center of Essex County is pleased to publish this Fourth Edition of the "Consumer Guide to Essex County Nursing Homes". This guide has been designed to help the individual, the family members and the professionals who are involved in the selection process.

It is our hope that this guide will result in better informed consumers who are able to make intelligent choices about the type of care provided and are then able to select a facility which best meets the needs of the individual for whom they are seeking care.

As well as serving as a resource for anyone wishing information on long-term care in Essex County, the Nursing Home Advocacy Center acts as an advocate for the institutionalized elderly to correct, protect and/or enhance their rights in a Nursing Home. The center promotes volunteerism in Nursing Homes and encourages community involvement by offering sensitivity training programs and consumer information to groups and organizations concerned with our elderly who are in need of long-term care.

If you have any questions, comments or concerns about facilities within Essex County, please call this office during our business hours - Monday through Friday from 9:00 A.M. to 4:30 P.M.
(201) 673-0662

Senior Service is a private not-for-profit organization directed toward improving the quality of life for older adults through direct service, coordination of programs, education and advocacy. Since its founding, in 1962, this agency has grown in scope and offers a variety of programs which reach out and touch many aspects of a senior's existence. By consulting this guide you have been introduced to one component of this agency. Senior Service sponsors and administers the following programs:

RSVP (The Retired Senior Volunteer Program)

Home Friend Program

Senior Companion Program

Senior Transit Services

Information Central

Health Care Advocacy Program

Central Essex Telephone Alert Program

Essex Advisor Newspaper

Respite Care Program

Assistance to Blind and Visually Impaired

Literacy Training

Education and Training Programs

For further information on any and all of the above programs, we invite you to call us at (201) 673-0640. We will be most happy to put you in touch with the service and/or program that will meet your specific need. Thank you.

Senior Service
is a trade name for
SENIOR SERVICE CORPS, INC.
439 Main Street
Orange, New Jersey 07050
(201) 673-0640

IS THERE AN ALTERNATIVE TO NURSING HOME CARE?

Even though a person is having health problems or difficulty managing independently at home, this does not mean moving into a nursing home is the only choice available.

Depending on the individual's emotional, family, social, financial and health needs, there are community services and alternate living arrangements which may meet the needs of your loved one and be less restrictive than a nursing home. Listed below are some of the services available throughout our county.

COMMUNITY SERVICES

Nursing and Home Health Services

These provide professional services in the individual's home and may include nursing care, physical therapy and nurses' aides.

Home Friend Program

Provides a non-medical chore service for homebound or disabled clients.

Adult Day Care

Provides care for the individual during the week.

Medical day care includes nursing supervision and other health care services.

Social day care includes socialization and sheltered activities. Both usually include transportation and a hot noon meal.

Respite Care

Provides short term care for the client in order to allow the caregiver some relief. It is done on a time limited basis. In the community it may mean referral to a Day Care Program or provide assistance in the home.

Senior Citizen Centers and Clubs

Programs vary - most have recreational and educational activities and some have health and social service programs.

Transportation

Medical (On-Call) is available Monday through Friday for those having medical appointments. (It is recommended that arrangements be made as far in advance as possible.)

SHOPPING is available by mini bus/van, in most towns, on a fixed pre-arranged schedule.

Telephone Reassurance and Friendly Visitor

These are volunteer programs which provide regular contact to the homebound.

Counseling and Mental Health Services

A variety of services ranging from individual counseling to group therapy; some provide support groups for the care-giver.

Nutrition Projects

Includes programs serving hot nutritious meals at sites such as senior centers; and meals-on-wheels programs for those unable to leave their homes.

Vial of Life

In a pre-designated spot (the refrigerator), this program provides potentially life saving information to emergency personnel.

Alternative Housing

Senior Apartments

Some communities now offer special housing available for older or handicapped people. Most of these programs are for low and moderate income people and some offer a variety of social services to the residents.

Share-A-Home

For those with room, who wish to remain in their own home, this program can provide help with expenses, help around the house and companionship.

For those who need a place to live and are independent in care, this program can provide a home at affordable rent, greater independence and companionship.

"Rest Homes"

Boarding Homes

There are three classes of boarding homes. To be eligible for entry into any level, she/he must be free of communicable disease, not in need of nursing care and must be ambulatory. A person may be accepted for residence on a ground floor that is fully covered by a sprinkler system if she/he is ambulatory with a device such as a cane or walker.

The three classes of boarding homes are:

Class "A" (commonly called a rooming house) offers no meals or other services.

Class "B" offers meals and laundry, but no other services.

Class C offers both personal (meals & laundry) and financial services (help in budgeting and cashing checks) and may also include supervision of self medication. Usually provides a 24 hour staff.

These are licensed by the Department of Community Affairs, Division of Housing and Development Bureau of Rooming and Boarding House Standards.

Residential Health Care Facilities

These facilities provide supervision and assistance in personal care (dressing, bathing etc.), meals, supervision of self-medication, 24 hour staff and limited nursing care (a minimum of 12 minutes per resident per week).

These are licensed by the State Department of Health, Division of Health Facilities Evaluation.

How Do You Pay For These Types Of Services:

Methods of payment for these services vary. Some are available on a strictly private pay basis, some on a sliding scale (according to an individual's ability to pay), some may be covered by Medicare, some by Medicaid and others are available to persons who meet specific financial criteria. The best way to determine how the needed service can be paid for is to discuss the subject with the agency which provides the service.

How Can You Locate These Services In The Community?

To find out what services are available and appropriate, call the Information-Referral Center listed below. This is a centralized source for up-to-date information for seniors in Essex County. The staff is trained to assist people in locating the most appropriate resource available to provide needed services.

INFORMATION CENTRAL
439 Main Street
Orange, New Jersey 07050
(201) 678-3666

For information outside of Essex County, call that county's Office on Aging, or you can contact:

New Jersey State Division on Aging
Department of Community Affairs
363 West State Street
CN 807
Trenton, New Jersey 08625-0807
1-800-792-8820

WHAT IS A NURSING HOME?

A nursing home is licensed by the New Jersey State Department of Health to provide long term health care services according to the needs of its patients/residents. It is staffed by trained professionals who provide the elderly, chronically ill and the convalescent with essential health and social services according to standards designed to assure quality care. There are two major categories of nursing homes; Intermediate Care Facilities (ICF) and Skilled Nursing Facilities (SNF).

Intermediate Care Facilities (ICF)

These facilities provide regular medical, nursing, social and rehabilitative services, in addition to room and board, for people not capable of full independent living due to their mental or physical state. This facility may choose to participate in the Medicaid program. In New Jersey there are two levels of ICF and a facility may be licensed for one or both.

B (Lower) The individual usually suffers from a mild chronic medical condition, is in need of approximately 1.25 hours of skilled daily care, may be ambulatory or semi-ambulatory (using assistive device, i.e. cane), may be mildly confused and/or disoriented requiring occasional supervision and/or support services, is free of communicable disease, needs supervision/monitoring of medication and, for practical purposes, alternative care in the community is not feasible.

A (Higher) The individual usually suffers from a chronic medical condition, is in need of approximately 2.5 hours of skilled care, has some mental impairment (generally confused and/or disoriented) requiring supervision and/or support services in order to maintain activities of daily living, may be chair or bedfast, needs administration of medication and is free of communicable disease.

Skilled Nursing Facilities (SNF)

These facilities provide continuous nursing service on a 24 hour basis. Registered nurses, licensed practical nurses and nurses' aides provide services prescribed by the physician. Emphasis is on medical nursing care with restorative physical, occupational and other therapies provided. The individual usually suffers from an acute medical or mental condition requiring this level of professional care, is in need of approximately 2.75 hours of skilled care, is free of communicable disease and may be chair or bedfast. This type of facility may choose to participate in the Medicaid and/or Medicare program.

These are licensed by the New Jersey Department of Health
Division of Medical Assistance and
Health Services
Bureau of Long Term Care
324 East State Street
Trenton, New Jersey 08625

WHEN IS NURSING HOME CARE NECESSARY?

When an individual's health situation requires continuous supervised care, placing burdensome demands on those responsible, nursing home placement may be the most realistic choice. In evaluating the need for nursing home care there are a number of factors you should consider, such as: numerous hospitalizations as a result of failing health, need for therapy, non-ambulation or problems ambulating on one's own, impaired judgement, inability to care for one's personal needs independently, incontinence, total withdrawal, or the need for greater stimulation than is available at home or in the community. These are all signs of needing special help. One sign is usually not sufficient to consider nursing home care, there should be a combination of signs.

HOW IS NURSING HOME CARE PAID FOR?

Some facilities are strictly private pay while others are certified to accept Medicaid and/or Medicare when an individual qualifies. It is important to have a clear understanding before admission as to what the facility is certified for; what the arrangements for payment are; what is covered by this and what any ancillary costs will be. Be sure this is all specified in the Admission Agreement and **DO NOT SIGN ANYTHING UNTIL YOU FULLY UNDERSTAND THE TERMS STATED.** Be careful; if an individual has limited funds it is recommended she/he go to a Medicaid Certified Home so it does not become necessary to relocate again. Transfer from one nursing home to another can be very traumatic and should be avoided whenever possible.

Private Pay refers to the complete cost of nursing home care being paid for from the individual's assets/income. It includes both the stated rate for Room and Board and any ancillary costs (most nursing homes do charge extra for specific services such as incontinence care).

Life Care (Continuing Care) Agreements refers to the method of payment where the individual agrees to assign all, or a significant part, of his/her assets and income to the facility, in exchange for the facility's contractual promise to care for him/her for the remainder of his/her life. There may be monthly charges also assessed to the care one receives under this type of an agreement.

Medicaid refers to the medical assistance program for health coverage provided by a combination of federal and state funds for those who meet specific financial criteria, are certified by a physician to be in need of this level of care and are residents of that state.

The New Jersey financial criteria is:

INCOME for 1987 is no more than \$1,020.00 a month.
(This amount can change annually and should be verified)

ASSETS for 1987 is no more than \$1,800.00

for 1988 is no more than \$1,900.00

for 1989, and thereafter, is no more than \$2,000.00

(Assets include all bank accounts, personal property, stocks, bonds etc., on which the individual has been named for the past 24 months with the exception of the house his/her spouse continues to live in.)

BURIAL no more than \$1,500.00 in life insurance and/or prepaid burial trust account.

This criteria should be verified through the county welfare office as there are periodic changes in it.

Applications can be obtained from:

Social Service Departments in local hospitals

Some Nursing Homes

The County Welfare/Board of Social Services Office

In Essex County contact:

Essex County Welfare

498 Main Street

Orange, New Jersey 07050

Att: Nursing Home/Medicaid Division

1-201-733-3039

To complete the application process you will need to submit proof of:

INCOME: Social Security (Awards letter can be obtained from your local Social Security office)

Age/Citizenship/Legal Residency Status: Copy of birth certificate, old passport, if naturalized then naturalization papers, if legal alien, then green card.

Bank Accounts: Any bank statements/passbooks from last 24 months.

Life Insurance/Pre-Paid Burial: Copy of policy or certificate of trust account.

Other: Copy of Medicare Card, any other Health Insurance.

If any assets were liquidated within the last 24 months, a copy of these and an explanation of how the funds were utilized for the individual's care/needs.

Proof of Disability: Doctor's statement on "PA-4" form provided with Medicaid application.

A law signed August, 1985 by Governor Thomas H. Kean, now prohibits a Medicaid Certified Home from denying admission to a Medicaid Eligible individual if a bed is available and the home is below a specific Medicaid occupancy level (this level can be obtained from the local Medicaid office.) The law also prohibits nursing homes from requiring any payment from a Medicaid Eligible individual and/or his/her family as a condition for admission or continued stay at the nursing home. The Medicaid District Office should be notified immediately if this is not adhered to.

In Essex County:

For the Newark Office: 155 Washington Street
Newark, New Jersey 07102
1-201-648-2470

For Suburban Essex: 76 South Orange Avenue
2nd Floor
South Orange, New Jersey 07079
1-201-761-7441

MEDICARE refers to the Health Insurance Coverage of the Federal Social Security Program. It pays for limited nursing home care and only for a limited time. This is determined by a periodic review of the individual's medical needs. Care must be in a licensed skilled nursing facility as approved by Medicare. The individual must have been in the hospital at least 3 consecutive days, require care for a condition which was treated in the hospital, be admitted to the facility within 30 days after leaving the hospital, be certified by a physician that the individual needs and receives skilled nursing/rehabilitative care on a daily basis and the facility's Utilization Review or Peer Review Organization approves the stay (this care does not include custodial care, assistance with activities of daily living nor skilled care needed only on an occasional basis). There is a limited length of stay based upon the Diagnostic Related Group (DRG for the condition), usually 20 days, not more than a total of 100 days.

GENERAL ASSISTANCE (MUNICIPAL WELFARE) refers to the financial assistance programs through the town Welfare Department for those individuals who meet all the criteria for Medicaid except the income level is too high. This program can require financial assistance from family members (any children under age 55) and there may be a specific residency requirement from the town being applied to. It is important for all of this to be verified beforehand. It is also important for this to be understood by the Nursing Home that the person will be converting to General Assistance and that this be reflected in the admissions agreement.

PRIVATE INSURANCE refers to medical insurance which supplements Medicare as well as to insurance which covers long-term custodial care. For Medical Health Insurance (Medi-Gap) this will cover only a facility approved for Medicare and only under similar circumstance to Medicare. There is a fairly new insurance program which an individual will be able to buy into and then use for covering long-term custodial care. For information on these insurances, in Essex County, contact:

Health Care Advocacy
439 Main Street
Orange, New Jersey 07050
1-201-673-9271

WHAT FACTORS SHOULD YOU CONSIDER WHEN NURSING HOME CARE IS NEEDED?

1. CARE: Entering a nursing home means major, and often difficult changes in a person's way of living. Living with a large number of people, the loss of privacy and the regimentation in an institutional setting, are some of the adjustments an individual must deal with.

It is important to choose a home that provides the kind of care which will meet the individual's physical, social, emotional and spiritual needs. There is a variation in the quality and type of services provided in different homes, even though they all must meet state and federal regulations.

2. LOCATIONS: Continued contact between the resident and his/her family is often a crucial factor in the individual's adjustment to a nursing home. Family support and involvement, as well as regular visits, gives the resident and concerned family members the opportunity to deal realistically with many of the troublesome feelings which often accompany admission to a nursing home. If the resident does not have family or friends close by, it may be possible to have a community volunteer fill this gap. National studies clearly indicate that quality care improves when visits to residents increase.

HOW DO YOU SELECT A NURSING HOME?

1. Whenever possible **DO NOT WAIT** until the last minute to begin the process of selecting a nursing home.
- II. Remember.....what is best for one resident will not necessarily be best for another.
- III. Be sure that the future resident, family, friends and physician **ALL** help with this important decision.
- IV. **VISIT EVERY FACILITY UNDER CONSIDERATION.**

The following checklist should help in selecting a good nursing home.

TO GET THE BEST IDEA OF HOW A NURSING HOME IS RUN, the following times to visit are suggested:

1. Meal Times
2. Between 4-8 P.M.
3. Weekends

LOOK AT THE RESIDENTS - appearance can tell you if good personal care is given.

Are the residents' fingernails, hair and clothing clean and well groomed?

Do residents look happy?

Too many drowsy and listless residents may indicate excessive use of drugs and tranquilizers.

LOOK AT THE BUILDING AND FURNISHINGS:

Are floors, walls, furniture, towels and bedding clean and in good repair?

Tour all areas of the nursing home and look at several resident rooms and bathrooms in different sections.

Remember that the care given cannot be judged by the newness of the building.

LOOK AT THE STAFF:

Are they neat and well groomed?

Does the staff appear kind and considerate?

Is there enough staff?

Is the staff actually working with the residents, or are they all clustered at the nursing station, or nowhere in sight?

Is there a Registered Nurse or Licensed Practical Nurse on the floor or wing?

LOOK AT THE FOOD:

Does it look appetizing and is there enough of it?

Are fresh fruits and vegetables served?

Are residents served food on regular dishes with silverware, or must they eat from paper plate with plastic utensils.

Does there appear to be enough staff to help those who cannot feed themselves.

Can residents get food they like?

Are meals served to all residents in an attractive dining area?

Does the staff notice if a resident has sent back a tray with the food uneaten?

LISTEN TO THE RESIDENTS AND STAFF:

Does the staff speak to the residents?

Are the residents spoken to as adults, not children?

The staff, and especially residents, can tell you much about the nursing home.

Is the Administrator responsive to, and familiar with, the residents?

Is the Administrator available for questions?

SMELL: Sometimes your sense of smell can tell you all you need to know about a nursing home.

If strong body and urine odors are present throughout the building, it could indicate poor resident care and/or poor housekeeping.

Strong chemical deodorants should not be substituted for prompt attention and care of residents who are unable to toilet themselves.

QUESTIONS TO ASK THE ADMINISTRATOR

1. Are the following services available:
Activity Program
Recreational Therapy
Physical and Occupational Therapy
Speech and Hearing Therapy
Social, Psychiatric and Psychological Services
What religious services are offered, and how often?
2. Discuss all fees. Request a written list of extra charges and statement of nursing home's policy regarding changes in charges.
Ask specifically how charges are handled for doctor visits, prescription drugs and supplies such as wheelchairs, lotions, tissues, etc.
When a resident's private funds are gone, is the deposit returned?
Will the nursing home keep residents they convert to Medicaid?
Does the nursing home have transfer agreements with a hospital or other nursing homes?
3. Are residents allowed to handle their own personal funds and personal belongings? What provisions are made to handle funds of residents unable to handle money themselves?
4. How is laundry handled? Is it ironed? Is there an extra charge?
5. Will it be necessary to move, if you need more or less care in the future?
6. Is there a resident council? A family council?
7. How are the complaints from residents and relatives handled?
8. Are residents separated according to the level of their physical or mental abilities?
9. Does the administrator have a current State license?
10. Does the nursing home have the required current license from the state?

NEW JERSEY BILL OF RIGHTS FOR NURSING HOME RESIDENTS

As of November 30, 1976, the well-being of New Jersey nursing home residents has been protected by law. The following is an outline of the rights guaranteed to every resident of a nursing home:

1. The right to manage his or her own affairs.
2. The right to wear his or her own clothing.
3. The right to retain and use personal property in immediate living quarters, where safe.
4. The right to receive and send unopened correspondence.
5. The right to unaccompanied access to a telephone.
6. The right to privacy.
7. The right to retain the services of a physician, and the right to obtain complete, current and understandable medical information.
8. The right to refuse treatment.
9. The right to unrestricted communication.
10. The right to present grievances without threat of discharge or reprisal.
11. The right to discharge himself or herself from a nursing home, unless the resident is an adjudicated mental incompetent.
12. No resident may be deprived of any unconstitutional, civil or legal right solely by reason of admission to a nursing home.

FOR AN OFFICIAL COPY OF THE COMPLETE RESIDENT'S BILL OF RIGHTS, OR TO REGISTER A COMPLAINT OR CONCERN, CONTACT:

STATE NURSING HOME OMBUDSMAN OFFICE
28 WEST STATE STREET
ROOM 305
TRENTON, NEW JERSEY 08608

Telephone: 1-(609) 292-8016
1-(800) 624-4262
(This is a 24 hour hot line)

NURSING HOME PROFILES

This guide contains information on the thirty-three facilities licensed for nursing home care in Essex County which have opened by September, 1987. The profiles have been divided into two sections:

Section One contains facilities which operate strictly as nursing homes.

Section Two contains facilities which offer Residential Care and provide nursing home care for its residents.

The type of information we have tried to provide you with is:

1. Name, address and telephone number of the facility.
2. Whether or not the facility accepts Medicare.
3. Whether or not the facility accepts Medicaid.
4. The Levels of Care (see pages 4 and 6)
5. Type of ownership (proprietary, non-profit). Licensed bed capacity/number of private, semi-private rooms.
6. Any known fees/deposits due on, or prior to, admission and whether or not there is a charge for ancillary services.
7. Any known restrictions on applicants.
8. Any known hospitals they may have transfer agreements with.
9. The meal schedule.
10. If the facility is willing to provide respite (short term) care, this is noted.
11. The impressions of the Nursing Home Advocacy Center Volunteers (N.H.A.C.) who visited the home.

There is a chart of regularly scheduled programs on page 49, which indicates the types of therapies, recreation programs, group activities and religious services offered.

THIS GUIDE IS NOT MEANT TO TAKE THE PLACE OF A VISIT TO THE NURSING HOME BEING CONSIDERED.

In order to measure the quality of care at a particular facility, one must observe the attitude of the administrator and the staff. THIS CAN ONLY BE DONE FIRST HAND.

CONSUMER GUIDE TO ESSEX COUNTY NURSING HOMES

ADDITIONS

CLARA MAASS CONTINUING CARE CENTER
1 Franklin Avenue
Belleville, New Jersey 07109
(201) 450-2908

MEDICARE-NO
MEDICAID-YES

CORRECTIONS

<u>PAGE</u>	<u>ITEM</u>	<u>SHOULD READ</u>
8	Medicaid Finacial Criteria	Income for 1989 is no more than \$1104.48 a month.
17	Cedar Grove Manor Medicaid Certification	Medicaid-Yes
25	Hartwyck West Nursing and Rehabilitation Center Medicaid Certification	Medicaid-Yes
34	Parkview Nursing Home (Telephone # missing)	748-4074
43	Baptist Home For The Aged (Telephone # is wrong)	483-6070

SECTION ONE

FACILITIES WHICH OFFER NURSING HOME CARE ONLY

LEVELS OF CARE ICF-B, ICF-A AND/OR SNF

BROOKHAVEN HEALTH CARE CENTER
120 Park End Place
East Orange, New Jersey 07018
(201) 676-6221

Medicare Certified - Yes
Medicaid Certified - Yes
Levels of Care: ICF-B
ICF-A
SNF

Brookhaven Health Care Center is a proprietary facility with a licensed bed capacity of 120; consisting of 8 private and 61 semi-private rooms.

A private pay resident is required to give a one month deposit upon admission, which is refunded after discharge or when he/she converts to Medicaid. There is an extra charge for all ancillary services.

Recent drug addicts, alcoholics or those on a respirator are not accepted for admission.

This Nursing Home utilizes East Orange General and St. Mary's Hospitals.

Meals are scheduled: Breakfast, 7:00 A.M.; Dinner, 12 noon; Supper 5:00 P.M.

This is a new facility which is clean, neat and well decorated. It is located across from a city park and also has an outdoor patio area which is utilized by the residents.

CEDAR GROVE MANOR

398 Pompton Avenue
Cedar Grove, New Jersey 07009
(201) 239-7600

Medicare Certified - Yes
Medicaid Certified - No
Levels of Care: ICF-B
ICF-A
SNF

Cedar Grove Manor is a proprietary facility with a licensed bed capacity of 180; consisting of 12 private and 84 semi-private rooms.

There is a deposit due, upon admission, which is applied toward the last month bill. There is an extra charge for ancillary services.

Those eligible for Medicaid, those on a respirator and discharged mental patients are not accepted for admission.

This Nursing Home has transfer agreements with Montclair Community, Mountainside, West Essex, West Hudson, Irvington General, St. Barnabas and Clara Maass Hospitals.

Respite care is available for a week or longer, depending upon bed availability.

Meals are scheduled: Breakfast, 7:30 A.M.; Dinner 12:15 P.M.; Supper, 5:15 P.M. Snacks are served at 2, 4 and 8 P.M.

The N.H.A.C. Volunteers who visited this home described it as being well decorated, with a pleasant atmosphere and well adapted to those in wheelchairs. The residents' rooms were decorated with photographs and other personal items. The staff was involved with the residents on their floors and the activities programs they observed were geared to those participating in them.

CHERRY NURSING HOME

111-115 Gates Avenue
Montclair, New Jersey 07042
(201) 746-4616

Medicare Certified - No
Medicaid Certified - No
Levels of Care: ICF-B
ICF-A
SNF

Cherry Nursing Home is a proprietary facility with a licensed bed capacity of 58; consisting of 4 private and 27 semi-private rooms.

There is a one week deposit due on admission which is refunded upon discharge. There is an extra charge for ancillary services.

Those eligible for Medicaid, alcoholics, drug abusers and those on life support systems are not accepted for admission.

The facility has transfer agreements with Mountainside and Community Hospitals.

Meals are scheduled: Breakfast, 8:00 A.M.; Dinner, 12:15 P.M.; Supper, 5:30 P.M. Snacks are served at 3:30 P.M. and at bedtime.

Respite care is available for stays of two weeks or longer, depending on bed availability.

The N.H.A.C. volunteers who visited this home described it as being clean and well maintained. The building design indicates consideration for those in wheelchairs and respect for each resident's privacy.

DAUGHTERS OF ISRAEL GERIATRIC CENTER

1155 Pleasant Valley Way
West Orange, New Jersey 07052
(201) 731-5100

Medicare Certified - Yes
Medicaid Certified - Yes
Levels of Care: ICF-B
ICF-A
SNF

Daughters of Israel Geriatric Center is a private non-profit facility with a licensed bed capacity of 286; consisting of 48 private, 113 semi-private and 4 triple rooms.

There is a non-refundable application fee but no deposit due on admission. Ancillary services are included in the regular daily rate with the exceptions of beauty parlor and field trips.

Applicants must be Jewish, age 62 or older (age 55 if chronically ill) and live within the service area of the United Jewish Federation of Metro-West. All other criteria for admission will be discussed at the time of interview.

This Nursing Home has transfer agreements with Newark Beth Israel and St. Barnabas Hospitals.

Meals are scheduled: Breakfast, 7:45 A.M.; Dinner, 11:30 A.M. and Supper, 5:00 P.M. Snacks are served at 10 A.M., 2 P.M. and 7 P.M.

Holiday respite care is available.

This facility strictly follow the Jewish Dietary Laws.

The N.H.A.C. volunteers who visited this home described it as being clean, attractive, well maintained and designed to meet the needs of those in wheelchairs. The staff they observed were involved with the residents and the activities were geared to meet the needs of those participating in them.

EAST ORANGE NURSING HOME
101 North Grove Street
East Orange, New Jersey 07017
(201) 672-1700

Medicare Certified - Yes
Medicaid Certified - Yes
Levels of Care: ICF-B
ICF-A
SNF

East Orange Nursing Home is a proprietary facility with a licensed bed capacity of 195; consisting of 15 private, 35 semi-private, 10 triple and 20 four bedded rooms.

A private pay resident is required to give a one month deposit upon admission which is applied toward the second month's bill. Ancillary services are included in the daily rate except for beauty parlor and dental care, laboratory tests, occupational and physical therapies.

Anyone under the age of sixteen, known alcoholics/drug abusers and those on life support systems are not accepted for admission.

This Nursing Home has transfer agreements with most hospitals in this geographic area.

All meals are kosher. Meals are scheduled: Breakfast between 7:00 and 8:30 A.M.; Dinner between 11:30 and 12:30; Supper between 5:00 and 6:00 P.M. Snacks are served four times a day.

The N.H.A.C. volunteers who visited this home described it as being clean, neat and well adapted to those in wheelchairs. The staff seemed to be warm and responsive to the needs of the residents. The residents they spoke with indicated that the staff is courteous and that the care is satisfactory.

ESSEX COUNTY GERIATRIC CENTER

520 Belleville Avenue
Belleville, New Jersey 07109
(201) 751-7200

Medicare Certified - No
Medicaid Certified - Yes
Levels of Care: ICF-B
ICF-A
SNF

Essex County Geriatric Center is the county operated facility with a licensed bed capacity of 332; consisting of 22 private, 228 semi-private, 42 triple and 10 four bedded rooms.

Applicants must be Essex County residents who are eligible for Medicaid prior to admission.

All ancillary services are included in the Medicaid rate, except for the beauty/barber shop.

This Nursing Home has a transfer agreement with St. Michael's Medical Center.

Meals are scheduled: Breakfast, between 7:00 and 7:30 A.M.; Dinner, between 11:30 and 12:30 and Supper, between 4:30 and 5:30 P.M. Snacks are served in the evening.

The N.H.A.C. Volunteers who visited this home described it as being clean and neat. Even though it has an institutional appearance, efforts are being made to alter this. They felt it was well adapted to those in wheelchairs. The residents they spoke with indicated that the staff is courteous and considerate and seem satisfied with the care they are receiving.

GARDEN STATE HEALTH CARE FACILITY

140 Park Avenue

East Orange, New Jersey 07019

(201) 677-1500

Medicare Certified - Yes

Medicaid Certified - Yes

Levels of Care: ICF-B

ICF-A

SNF

Garden State Health Care Center is a proprietary facility with a licensed bed capacity of 228; consisting of 6 private, 87 semi-private, 12 triple and 3 four bedded rooms.

A private pay resident is required to give a two month deposit upon admission which is later applied to the resident's bill. There is an extra charge for all ancillary services except for personal laundry.

Applicants must be at least 21 years of age and those on life support systems are evaluated on a case by case basis.

This Nursing Home has transfer agreements with all "major local" hospitals.

Meals are scheduled: Breakfast, 8:00 A.M.; Lunch, 12:00 Noon; Dinner, 5:00 P.M. Snacks are offered throughout the day.

The N.H.A.C. Volunteers who visited this home described it as clean, and even though they felt it has a hospital like atmosphere, efforts have been made to give the residents' rooms a homey feeling by encouraging them to display personal possessions. The facility seems well adapted to those in wheelchairs. The residents looked well groomed and cared for.

GERICARE CENTERS, INC.

16 Madison Avenue
Montclair, New Jersey 07042
(201) 783-4501

Gericare Centers is a proprietary corporation which consists of four facilities in Montclair. (See individual homes below for addresses etc.)

There is a one month deposit due on admission which is refunded at the time of discharge.

Those on life support systems, IV's, NG tubes, tracheostomies, colostomies or in need of SNF level of care are not accepted for admission. Residents who become Medicaid eligible are transferred to the Madison Nursing Home.

There are affiliation agreements with Irvington General, St. James and Montclair Community Hospitals.

Meals are scheduled: Breakfast, 7:30 A.M.; Dinner 12:30 P.M.; Supper 5:30 P.M. Snacks are scheduled at 10:00 A.M., 2:00 P.M. and 8:00 P.M.

Respite Care for weekends, and longer, is available.

CLOVER REST NURSING HOME
16 Madison Avenue
Montclair, New Jersey 07042

Medicare Certified - No
Medicaid Certified - No
Levels of Care: ICF-B
ICF-A

Clover Rest Nursing Home has a licensed bed capacity of 24; consisting of 3 private, 2 semi-private, 3 triple and 2 four bedded rooms.

GERICARE CENTERS (cont)

MADISON NURSING HOME

31 Madison Avenue
Montclair, New Jersey 07042

Medicare Certified - No
Medicaid Certified - Yes
Levels of Care: ICF-B
ICF-A

Madison Nursing Home has a licensed bed capacity of 21; consisting of 1 private, 5 semi-private, 2 triple and 1 four bedded rooms.

MONTCALM NURSING HOME

32 Pleasant Avenue
Montclair, New Jersey 07042

Medicare Certified - No
Medicaid Certified - No
Levels of Care: ICF-B
ICF-A

Montcalm Nursing Home has a licensed bed capacity of 36; consisting of 5 private, 10 semi-private, 1 triple and 2 four bedded rooms.

MONTCLAIR NURSING HOME

78 Midland Avenue
Montclair, New Jersey 07042

Medicare Certified - No
Medicaid Certified - No
Levels of Care: ICF-B
ICF-A

Montclair Nursing Home has a licensed bed capacity of 21, consisting of; 1 private, 5 semi-private, 2 triple and 1 four bedded rooms.

**HARTWYCK WEST NURSING AND
REHABILITATION CENTER**

Pompton Avenue and Lindsley Avenue
Cedar Grove, New Jersey 07009
(201) 256-7220

Medicare Certified - Yes
Medicaid Certified - No
Levels of Care: ICF-B
ICF-A
SNF

Hartwyck West Nursing and Rehabilitation Center is a non-profit community corporation, affiliated with the John F. Kennedy Medical Center, with a licensed bed capacity of 113 consisting of; 9 private rooms and 52 semi-private rooms.

There is a deposit due on admission which is held in escrow and applied toward the bill on discharge. There is an extra charge for all ancillary services, except for incontinent care and personal laundry.

Those eligible for Medicaid and active alcoholics are not accepted for admission. Those on life support systems are evaluated on a case by case basis.

This Nursing Home has transfer agreements with Mountainside, St. Joseph's, St. Mary's and Chilton Memorial Hospitals.

Meals are scheduled: Breakfast, 7:30 A.M.; Dinner, 12 Noon; Supper, between 4:30 and 5:00 P.M. Snacks are served every evening, and, Saturday and Sunday "Tea" is served.

This facility does provide for respite care.

The N.H.A.C. Volunteers who visited this home described it as being clean and nicely furnished. At the time of their visit they were informed that the administration was in the process of redecorating and that new furniture for the resident's rooms was on order. They felt it was well adapted to those in wheelchairs. The residents they spoke with seemed satisfied with the quality of care they were receiving.

HAZELCREST MANOR NURSING HOME

60 Hazelwood Road
Bloomfield, New Jersey 07003
(201) 743-2366

Medicare Certified - No
Medicaid Certified - Yes
Levels of Care: ICF-B
ICF-A

Hazelcrest Manor Nursing Home is a proprietary facility with a licensed bed capacity of 18 consisting of; 1 private, 3 semi-private, 1 triple and 2 four bedded rooms.

There is no deposit required on admission. There is an extra charge for ancillary services except for personal laundry.

Those in need of Skilled Nursing Facility level of care are not eligible for admission.

This Nursing Home has transfer agreements with Mountainside and Clara Maass Hospitals.

Respite care is available for weekends or longer, depending on bed availability.

Meals are scheduled: Breakfast, 7:30 A.M.; Dinner, 12 Noon; Supper, 5:30 P.M. Snacks are served in the evening.

The N.H.A.C. Volunteers who visited this home described it as being clean and neat. It is a small facility in a converted house, and those in wheelchairs would have difficulty unless they were placed on the first floor. Residents they spoke with seemed satisfied with the care they were receiving.

HOSPITALITY CARE CENTER
300 Broadway
Newark, New Jersey 07104
(201) 484-4222

Medicare Certified - No
Medicaid Certified - Yes
Levels of Care: ICF-B
ICF-A
SNF

Hospitality Care Center is a proprietary facility with a licensed bed capacity of 420.

A private pay resident is required to give a one month deposit upon admission which is refunded upon discharge or upon converting to Medicaid. There is an extra charge for all ancillary services.

Those on life support systems are not accepted for admission.

Respite care for stays of at least one month is available.

This facility is a converted boys' school. It is large and can be overwhelming. The floors are well decorated and neat and clean.

No other information was available.

INGLEMOOR NURSING HOME

377 South Livingston Avenue
Livingston, New Jersey 07039
(201) 994-0221

Medicare Certified - No
Medicaid Certified - No
Levels of Care: ICF-B
ICF-A
SNF

Inglemoor Nursing Home is a proprietary facility with a licensed bed capacity of 120; consisting of 8 private and 56 semi-private rooms.

There is a one month deposit, due upon admission, which is credited towards the first month's bill. There is an extra charge for all ancillary services.

Those on I.V.'s and discharged mental patients are not accepted for admission.

This nursing home has transfer agreements with St. Barnabas, Overlook, Mountainside and Orange Memorial Hospitals.

Meals are scheduled: Breakfast, between 7:30 and 8:00 A.M.; Lunch, between 11:30 A.M. and 12 noon; Dinner, between 4:15 and 5:15 P.M. Snacks are service in the evening at 8:00 P.M.

Respite care stays of one week or longer is available.

The N.H.A.C. Volunteers who visited this home described it as being clean, neat and pleasant, with many pains taken to make it "cheery". Residents are encouraged to decorate their rooms with personal items such as photographs. It is well adapted to those in wheelchairs, being all on one level with no stairs. The residents they spoke with indicated the staff is considerate and courteous.

LITTLE NURSING HOME
71 Christopher Street
Montclair, New Jersey
(201) 744-5518

Medicare Certified - No
Medicaid Certified - No
Levels of Care: Not Known

Little Nursing Home is a proprietary facility with a licensed bed capacity of 25, consisting of 1 private and 12 semi-private rooms.

Those eligible for Medicaid, alcoholics, drug addicts, mentally retarded and discharged mental patients are not accepted for admission.

No other information was available regarding this facility.

NEW COMMUNITY EXTENDED CARE FACILITY

266 South Orange Avenue
Newark, New Jersey 07103
(201) 624-2020

Medicare Certified - No
Medicaid Certified - Yes
Levels of Care: ICF-A
ICF-B
SNF

New Community Extended Care Facility is a private non-profit facility with a licensed bed capacity of 180; consisting of 12 private and 84 semi-private rooms.

There is a three month deposit, when possible, required upon admission for all private patients. There is an extra charge for all ancillary services except for incontinent care and personal laundry.

This home has transfer agreements with St. Michael's, United, East Orange, University, Irvington General and Holy Name Hospitals.

Meals are scheduled: Breakfast, 8:00 A.M.; Dinner, 12 noon; Supper, 6:00 P.M. Juice and snacks are available throughout the day. Open dining for all meals is available on one of the three floors at this time.

The N.H.A.C. Volunteers who visited this home described it as a new, pretty, attractive facility with bright lighting and a pleasant atmosphere. All the residents they spoke with had been in the home since it opened in January of 1986, and all indicated that the care was good and the staff was courteous and fine.

NEWARK HEALTH AND EXTENDED CARE FACILITY	Medicare Certified - Yes
65 Jay Street	Medicaid Certified - Yes
Newark, New Jersey 07103	Levels of Care: ICF-B
(201) 483-6800	ICF-A
	SNF

Newark Health and Extended Care Facility is a proprietary facility with a licensed bed capacity of 420; consisting of 20 private, 195 semi-private and 5 four bedded rooms.

There is no deposit due upon admission. All ancillary services, except for beauty parlor, are included in the daily rate.

Applicants on respirator and/or I.V.'s are not accepted for admission.

This Home has transfer agreements with St. Mary's, University and St. Michael's Hospitals.

Meals are scheduled: Breakfast, between 7:00 and 8:00 A.M.; Dinner, between 12 noon and 1:00 P.M.; Supper, between 5:00 and 6:00 P.M. Snacks are served throughout the day.

The N.H.A.C. Volunteers who visited this home described it as clean and well maintained. They felt that it is well adapted to the need of those in wheelchairs. The residents they spoke with indicated to them they it is a good home, with a caring staff and that they generally are happy there.

NORTHFIELD MANOR CONVALESCENT HOME
777 Northfield Avenue
West Orange, New Jersey 07052
(201) 731-4500

Medicare Certified - Yes
Medicaid Certified - No
Levels of Care: ICF-B
ICF-A
SNF

Northfield Manor Convalescent Home is a proprietary facility with a licensed bed capacity of 131, consisting of 9 private and 61 semi-private rooms.

There is a two week, plus \$250.00, deposit due on admission which is refunded upon discharge. There is an extra charge for all ancillary services except for field trips and personal laundry.

Applicants must be at least sixteen years of age. Those who are Medicaid eligible and those on respirators are not accepted for admission.

This home has transfer agreements with all local hospitals.

Meals are scheduled: Breakfast, 8:00 A.M.; Dinner, between 12 noon and 12:30 P.M.; Supper, between 5:00 and 5:30 P.M. Snacks are served twice a day.

Respite care of weekend stays, or longer, is available.

The N.H.A.C. Volunteers who visited this home described it as having a "lovely, almost hotel like atmosphere", well suited to the needs of those in wheelchairs.

PARK MANOR NURSING HOME
23 Park Place
Bloomfield, New Jersey 07003
(201) 743-7772

Medicare Certified - No
Medicaid Certified - No
Levels of Care: ICF-B
ICF-A
SNF

Park Manor Nursing Home is a proprietary facility with a licensed bed capacity of 59; consisting of 8 private, 28 semi-private, 15 triple and 8 four bedded rooms.

The deposit due on admission is refunded upon discharge.
There is an extra charge for all ancillary services.

Those who are Medicaid eligible are not accepted for admission unless they are willing to accept transfer to a Medicaid certified facility owned by the same corporation when their private funds are exhausted.

This Home has transfer agreements with Mountainside and Clara Maass Hospitals.

Respite care for weekend stays or longer is available, depending upon bed availability.

The N.H.A.C. Volunteers who visited this home described it as neat, clean and pleasant. Those in wheelchairs, or who have difficulty managing stairs, may have a problem here unless they are placed on the first floor, due to the design of the facility.

PARKVIEW NURSING HOME

15 Church Street

Bloomfield, New Jersey 07003

Medicare Certified - No

Medicaid Certified - Yes

Levels of Care: ICF-B

ICF-A

Parkview Nursing Home is a proprietary facility with a licensed bed capacity of 30; consisting of 1 private, 6 semi-private, 3 triple, 1 four-bedded and 1 five bedded rooms.

There is no deposit due on admission. The following are included in the regular daily rate: catheterization, Decubiti dressing, incontinent care, non-prescription pharmacy and personal laundry.

Those under 18, and those on life support systems are not accepted for admission.

This home has transfer agreements with Mountainside, Irvington General and Clara Maass Hospitals.

Meals are scheduled: Breakfast, 7:30 A.M.; Dinner, 12 noon; Supper, 5:30 P.M. Snacks are offered around 7:00 P.M. each evening.

Respite care for weekends or longer is available depending on bed availability.

The N.H.A.C. Volunteer who visited this home described it as small, clean, neat, with the "general" room being bright and sunny. They considered it well adapted to meet the needs of those in wheelchairs. They said the staff seemed pleasant and cheerful, and the residents they spoke with seemed content with their care.

PARKWAY MANOR HEALTH CENTER
480 North Walnut Street
East Orange, New Jersey 07018
(201) 674-2700

Medicare Certified - No
Medicaid Certified - Yes
Levels of Care: ICF-B
ICF-A
SNF

Parkway Manor is a proprietary facility with a licensed bed capacity of 180; consisting of 8 private and 85 semi-private rooms.

A private pay resident is required to give a one month deposit which is applied to the last month's bill prior to converting to Medicaid, or refunded upon discharge. There is an extra charge for ancillary services.

No one under the age of 16, and alcoholics and drug abusers are not accepted for admission.

This home has transfer agreements with Irvington General, St. Barnabas, East Orange General and Mountainside Hospitals.

There are future plans to offer respite care.

This is a newly built facility, having opened in February, 1987. It is cheerfully decorated and spacious in appearance. When visited, the staff all seemed involved with the residents. The two residents interviewed had both been in Norman Tower Apartments (owned and operated by the same corporation) and seem pleased to be selected to be among the first to enter the nursing home, and, at the same time, be able to remain close to their friends who live in the apartments

... VINCENT'S NURSING HOME
45 Elm Street
Montclair, New Jersey 07042
(201) 746-4000

Medicare Certified - Yes
Medicaid Certified - Yes
Levels of Care: ICF-B
ICF-A
SNF

St. Vincent's Nursing Home, a division of St. Joseph's Hospital and Medical Center, is a private, non-profit facility, with a licensed bed capacity of 135; consisting of 21 private, 51 semi-private and 3 triple rooms.

A private pay resident is required to give a one month deposit upon admission which is either applied to ones' bill during the stay or refunded upon discharge. There is an extra charge for all ancillary services, except for most field trips, incontinent care and personal laundry.

Those on ventilators are not accepted for admission at this time.

This home has transfer agreements with Mountainside and St. Michael's Hospitals.

Meals are scheduled: Breakfast, 7:20 A.M.; Dinner, 12:30 P.M.; Supper, 5:30 P.M. Snacks are served mid-afternoon and again in the evening.

Respite care of weekend stays, or longer, are available depending on bed availability.

This nursing home has developed an expertise in serving the special needs of those suffering with Alzheimer's Disease, or related disorders. (There is usually a long waiting list for this service.)

N.H.A.C. Volunteers who visited this home described it as pleasant, very clean, with the facility being decorated with cheerful colors and nice bright lights. The residents' rooms each had evidence of the residents' personal belongings. They felt the staff courteous, kind and involved with the residents. They also felt the nursing home was well adapted to meet the needs of those in wheelchairs.

THERESA GROTTA CENTER FOR REHABILITATION

20 Summit Street

West Orange, New Jersey 07052

(201) 736-2000

Medicare Certified - Yes

Medicaid Certified - Yes

Levels of Care: ICF-B

ICF-A

SNF

Theresa Grotta Center for Rehabilitation is a private non-profit facility with a licensed bed capacity of 142; consisting of 12 private, 59 semi-private and 3 four bedded rooms.

Private pay residents and Medicare applicants are required to give a one month deposit upon admission, which is later applied to the first month's bill or refunded upon discharge. There is an extra charge for all ancillary services.

Alcoholics and those on life support are not accepted for admissions, and psychiatric patients are evaluated on an individual basis.

This nursing home has transfer agreements with all hospitals in Essex County.

Meals are scheduled: Breakfast, between 7:30 and 8:00 A.M.; Dinner between 12:00 noon and 1:00 P.M.; Supper, between 5:00 and 6:00 P.M. Kosher meals are available upon request. Every afternoon at 3:00 P.M. a "coffee break" is offered and snacks are served every evening.

Respite care for 7 days or longer is available.

This facility is geared, primarily, toward the care of the individual in need of short term care with the focus on rehabilitation.

The N.H.A.C. Volunteers who visited this home described it as having a warm, welcoming atmosphere. They noted that at the time of their visit the administration was in the process of remodeling. They said it was clean, neat and very pleasant. It is very well adapted to meeting the needs of those in wheelchairs.

VAN DYK MANOR OF MONTCLAIR
42 North Mountain Avenue
Montclair, New Jersey 07042
(201) 783-9400

Medicare Certified - No
Medicaid Certified - No
Levels of Care: ICF-B
ICF-A
SNF

Van Dyk Manor of Montclair is a proprietary facility with a licensed bed capacity of 62; consisting of 10 private and 26 semi-private rooms.

There is no deposit required upon admission. There is an extra charge for all ancillary services.

Those eligible for Medicaid, "persistent wanderers" or on life support systems, are not accepted for admission.

This home has transfer agreements with Montclair Community, St. Joseph's and Mountainside Hospitals.

Meals are scheduled: Breakfast, 7:30 A.M.; Dinner, 12 noon; Supper, between 4:30 and 5:00 P.M.

This facility has been described as having a "hotel like" atmosphere. It is clean and well maintained. Residents are encouraged to display personal item in their room. It is well adapted to meeting the needs of those in wheelchairs.

WATERVIEW NURSING HOME

536 Ridge Road

Cedar Grove, New Jersey 07009

(201) 239-9300

Medicare Certified - Yes

Medicaid Certified - Yes

Levels of Care: ICF-B

ICF-A

SNF

Waterview is a proprietary facility with a licensed bed capacity of 180; consisting of 24 private and 74 semi-private rooms.

A private pay resident is required to give a one month deposit upon admission which is refunded upon discharge or converting to Medicaid. There is an extra charge for all ancillary services.

Applicants must be at least 18 years of age.

Respite care for stays of one month, or longer, is available.

This facility is pleasant, bright and well adapted to meeting the needs of those in wheelchairs. Residents are encouraged to decorate their rooms with personal belongings.

WEST CALDWELL CARE CENTER

165 Fairfield Avenue

West Caldwell, New Jersey 07003

(201) 226-1100

Medicare Certified - Pending

Medicaid Certified - Yes

Levels of Care: ICF-B

ICF-A

SNF

West Caldwell Care Center is a proprietary facility with a licensed bed capacity of 180; consisting of 16 private and 82 semi-private rooms.

A private pay resident is required to give a 15 day deposit upon admission which is held in escrow and either applied towards the last month's bill and/or refunded when he/she either converts to Medicaid or is discharged. There is an extra charge for ancillary services.

All applications are reviewed by an admissions committee and are considered on a case by case basis.

This facility has transfer agreements with Mountainside, Montclair Community and St. Barnabas Hospitals.

Meals are scheduled: Breakfast, 7:15 A.M.; Dinner, 12 noon; Supper, 5:15 P.M. Snacks are served in the afternoon and again in the evening, as well as being available, upon request, during the day.

This facility is newly built and opened in July of 1987. It is spacious, handsomely decorated, brightly lit, with skylights in the reception lounge and other areas. At the time of the visit only one section, housing 45 residents, was open. These residents all seemed content with the care they were receiving and easy interaction between the staff and residents was observed. Residents will be encouraged to personalize their rooms with photographs and small personal objects which meet safety standards.

WHITE HOUSE NURSING HOME
560 Berkeley Avenue
Orange, New Jersey 07050
(201) 672-6500

Medicare Certified - No
Medicaid Certified - Yes
Levels of Care: ICF-B
ICF-A
SNF

White House Nursing Home is a proprietary facility with a licensed bed capacity of 176; consisting of 6 private, 49 semi-private and 18 four bedded rooms.

There is no deposit due on admission. There is an extra charge for ancillary services, except for catheter care, decubiti dressing, incontinent care and personal laundry.

Alcoholics are not accepted for admission.

The nursing home has transfer agreements with Hospital Center of Orange, St. Barnabas, Mountainside, Irvington General, St. James, Montclair Community, St. Michael's, St. Mary's, United and Memorial General Hospitals.

All meals are kosher. Meals are scheduled: Breakfast, 7:30 A.M.; Lunch, 12:30 P.M.; Dinner, 5:30 P.M. Snacks are served every evening between 7:30 and 8:00 P.M.. Milk and juice are available every afternoon.

The N.H.A.C. Volunteers who visited this home described it as being very clean and neat with a "hospital" atmosphere. Some of the residents' rooms were decorated with personal belongings. It is well adapted to meeting the needs of those in wheelchairs.

SECTION TWO

**FACILITIES WHICH OFFER RESIDENTIAL CARE AND PROVIDE NURSING HOME
CARE FOR ITS MEMBERS**

(LEVELS OF CARE: RHCF, ICF-B, ICF-A AND/OR SNF)

BAPTIST HOME FOR THE AGED
285 Roseville Avenue
Newark, New Jersey 07107
(201) 583-6070

Medicare Certified - No
Medicaid Certified - No
Levels of Care: RHCF
ICF-B
ICF-A

Baptist Home for the Aged is a private, non-profit facility with a licensed bed capacity of 72; consisting of 55 residential beds and 17 nursing home beds.

There is a non-refundable deposit due upon admission. The regular monthly fee is based upon an individual's ability to pay.

Individuals must be Baptist. They enter at the resident level and then, if they become frail, transfer into the nursing home section.

This home has a transfer agreement with St. Mary's Hospital.

GREEN HILL MEMORIAL CENTER FOR WOMEN
103 Pleasant Valley Way
West Orange, New Jersey 07052
(201) 731-2300

Medicare Certified - No
Medicaid Certified - Yes
Levels of Care: RHCF
 ICF-B
 ICF-A
 SNF

Greenhill Memorial Center for Women is a private non-profit facility with a licensed bed capacity of 172; consisting of 72 private rooms in the residence and 26 private and 74 semi-private rooms in the nursing unit.

There is a non-refundable application fee plus a non-refundable admissions fee. There is no extra charge for ancillary services.

Applicants (women only) must be mentally alert, able to walk, bathe and dress themselves. If a resident becomes unable to care for herself, she will be transferred into the nursing unit.

This facility, formerly Green's Hotel, is located within a park-like setting. Each resident furnishes her own room with private possessions in order to personalize it.

JOB HAINES HOME FOR AGED PEOPLE AND CANFIELD HOME

(201) 743-0792

Job Haines and Canfield Home are a private, non-profit organization.

There is a non-refundable application and a non-refundable admission fee. Ancillary services are included in the daily rate.

Applicants must be at least 65 years of age, U.S. citizens or permanent legal residents of the United States. They must be ambulatory and self caring when entering either home. If a member becomes frail (unable to care for him/herself) then he/she is transferred to the nursing unit located at the Job Haines Home.

This organization has transfer agreements with Mountainside and The Hospital Center at Orange.

JOB HAINES HOME FOR AGED PEOPLE

250 Bloomfield Avenue

Bloomfield, New Jersey 07003

(201) 743-0792

Medicare Certified - No

Medicaid Certified - Yes

Levels of Care: RHCF

ICF-B

ICF-A

SNF

Job Haines Home for Aged People has a licensed bed capacity of 63; consisting of 35 private rooms in the residence and 28 in the nursing unit.

Meals in the residence are scheduled: Breakfast, 8:00 A.M.; Dinner, 12:30 P.M.; Supper, 5:30 P.M. Meals in the nursing unit are scheduled: Breakfast, 8:30 A.M.; Dinner, 12 noon; Supper, 6:00 P.M. Snacks are available throughout the day.

Respite care is available depending on space availability.

(cont)

JOB HAINES HOME FOR AGED PEOPLE (cont)

This home was incorporated in 1897 and the reception area and lounges are decorated in the style of that time. Residents' rooms are personalized with furniture and other belongings they bring with them when they enter the home. The general atmosphere is warm and congenial. The interaction observed between staff and residents seemed relaxed. The nursing unit is well adapted to meeting the needs of those in wheelchairs.

CANFIELD HOME

206 Westville Avenue
West Caldwell, New Jersey 07006

Medicare Certified - No
Medicaid Certified - No
Levels of Care: RHCF

Canfield Home has a licensed bed capacity of 16. All rooms are private.

This home is decorated in a similar manner to Job Haines.

MARCUS L. WARD HOME

125 Boyden Avenue
Maplewood, New Jersey 07040
(201) 762-5050

Medicare Certified - No
Medicaid Certified - No
Levels of Care: RHCF
ICF-B
ICF-A

Marcus L. Ward Home is a private non-profit facility with a licensed bed capacity of 139. All rooms in the residence are private.

There is a non-refundable application fee and a non-refundable admissions fee. There is no extra charge for ancillary services.

Applicants must be at least 65 and individuals must be ambulatory and self caring when entering this facility. Those who are blind, discharged mental patients, mentally retarded, those on life support systems and those with Alzheimer's Disease are not accepted for admission. Applicants enter at the resident level and then, if they become frail, transfer into the infirmary section.

This home is situated on a 37 acre estate, giving an impression of seclusion for its residents. Residents' rooms are private and they are able to personalize them with furniture, pictures and other belongings. The facility is adapted for use by wheelchair residents.

REFORMED CHURCH HOME

720 Nye Avenue

Irvington, New Jersey 07111

(201) 371-7171

Medicare Certified - No

Medicaid Certified - Yes

Levels of Care: RHCF

ICF-B

ICF-A

SNF

Reformed Church Home is a religiously run non-profit facility with a licensed bed capacity of 116; consisting of 34 private and 12 semi-private rooms in the residence sections and 4 private and 27 semi-private in the nursing home unit.

There is no deposit due on admission. Most field trips, incontinent care, occupational therapy and personal laundry are all included in the regular daily rate.

Applicants must be at least 65. First priority for admission is given to members of the Particular Synod of New Jersey. Second priority is given to members of the Reformed Church of America. Third priority is given to all other applicants. All applicants must be assessed and approved by the Admission Review Council. Residents can move between the resident level of care and the nursing home level of care as their individual conditions warrant.

Meals are scheduled: Breakfast, 7:30 A.M.; Dinner, 12 noon; Supper, 5:30 P.M.

This home is bright and cheerful. The residents there indicate they are very comfortable. Efforts have been made to adapt this facility to meet the needs of those in wheelchairs.

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REGULARLY SCHEDULED PROGRAMS

KEY:
D-DAILY
W-WEEKLY
/W-TIMES A WEEK
M-MONTHLY
/M-TIMES A MONTH
Q-QUARTERLY
Y-YEARLY
/Y-TIMES A YEAR
A/N-AS NEEDED (OR PER DOCTOR'S ORDERS)
OCC-OCCASIONALLY

NURSING HOME

	THERAPIES						RECREATION						GROUPS			RELIGIOUS SERVICES			
	OCCUPATIONAL	SPEECH	REALITY ORIENTATION	PHYSICAL	HEARING	EXERCISE	MOVIES	PARTY	MUSIC & DANCE	FIELD TRIPS	ARTS & CRAFTS	GAMES BINGO	DISCUSSION	FAMILY COUNCIL	RESIDENT COUNCIL	BAPTIST	CATHOLIC	JEWISH	PROTESTANT
BROOKHAVEN HEALTH CARE CENTER	D	D	D	D	D	W	W	W	W	—	W	W	M	—	M	W	W	W	W
CEDAR GROVE MANOR	A/N	D	D	D	A/N	W	M	M	2/W	D	2/M	D	2/W	Q	M		W	W	W
CHERRY NURSING HOME	—	—	D	—	—	—	W	OCC	W	OCC	D	W	D	—	Q	W	W	OCC	W
DAUGHTERS OF ISRAEL GERIATRIC CENTER	—	W	W	D	W	D	W	W	W	2/M	D	W	D	M	M	—	—	D	—
EAST ORANGE NURSING HOME	D	D	D	D	W	W	D	M	W	M	D	2/W	W	M	M	—	W	W	W
ESSEX COUNTY GERIATRIC CENTER	—	—	D	A/N	—	D	W	M	D	W	D	2/W	W	M	M	—	W	W	W
GARDEN STATE HEALTH CARE FACILITY	—	A/N	D	A/N	A/N	—	M	W	W	6/Y	D	D	W	M	M	W	W	W	W
GERICARE CENTERS: CLOVER REST NURSING HOME	A/N	A/N	D	A/N	A/N	D	OCC	M	2/W	OCC	2/W	D	D	OCC	M	W	W	OCC	OCC
MADISON NURSING HOME	A/N	A/N	D	A/N	A/N	D	OCC	M	2/W	OCC	2/W	D	D	OCC	M	W	W	OCC	OCC
MONTCALM NURSING HOME	A/N	A/N	D	A/N	A/N	D	OCC	M	2/W	OCC	2/W	D	D	OCC	M	W	W	OCC	OCC
MONTCLAIR NURSING HOME	A/N	A/N	D	A/N	A/N	D	OCC	M	2/W	OCC	2/W	D	D	OCC	M	W	W	OCC	OCC
HARTWYCK WEST NURSING HOME	D	3/W	D	5/W	4/W	D	2/W	W	W	OCC	D	D	2/W	M	M	—	W	2/W	W
HAZELCREST NURSING HOME	—	A/N	A/N	A/N	A/N	W	—	—	W	OCC	W	W	W	—	—	—	—	—	—
HOSPITALITY CARE CENTER	INFORMATION NOT AVAILABLE																		
INGLEMOOR NURSING HOME	—	5/W	2/W	5/W	—	2/W	M	W	—	OCC	D	D	2/W	M	M	—	W	—	W
LITTLE NURSING HOME	INFORMATION NOT AVAILABLE																		
NEW COMMUNITY EXTENDED CARE FACILITY	A/N	A/N	3/W	A/N	A/N	3/W	W	M	W	M	W	W	D	—	M	M	W	A/N	W
NEWARK HEALTH & EXTENDED CARE FACILITY	—	5/W	D	5/W	D	D	—	—	Q	5/Y	D	D	D	—	Q	W	W	W	W
NORTHFIELD MANOR CONVALESCENT HOME	—	A/N	D	A/N	2/W	W	W	M	2/M	M	D	D	W	—	M	M	W	W	W
PARK MANOR NURSING HOME	—	A/N	D	A/N	—	W	—	—	D	OCC	W	W	D	M	M	W	W	W	W
PARKVIEW NURSING HOME	—	A/N	W	A/N	—	W	—	—	W	OCC	W	W	W	—	M	—	—	—	—
PARKWAY MANOR HEALTH CENTER	A/N	A/N	3/W	A/N	—	W	W	3/M	W	—	W	2/W	3/W	M	M	W	W	A/N	W
ST. VINCENT'S NURSING HOME	A/N	A/N	D	A/N	2/W	W	M	M	2/W	M	D	2/W	3/W	—	M	M	5/W	—	2/M
THERESA GROTTA CENTER FOR REHABILITATION	A/N	A/N	D	A/N	2/W	W	M	M	2/W	M	D	2/W	2/W	—	M	M	5/W	—	2/M
VAN DYK MANOR OF MONTCLAIR	—	A/N	D	A/N	A/N	D	W	M	W	Q	W	W	2/W	Y	M	—	M	Q	2/W
WATERVIEW NURSING HOME	A/N	A/N	D	A/N	A/N	W	—	W	M	OCC	D	W	D	Q	M	—	W	W	W
WEST CALDWELL CARE CENTER	A/N	A/N	A/N	A/N	A/N	2/W	2/W	M	M	OCC	W	2/W	W	—	M	—	W	W	W
WHITE HOUSE NURSING HOME	—	A/N	D	3/W	—	D	W	2/M	3/W	6/Y	W	5/W	W	—	M	—	W	A/N	W
BAPTIST HOME FOR THE AGED	—	—	D	A/N	—	W	W	OCC	—	4/Y	M	W	—	—	—	3/W	—	—	—
GREEN HILL HOME FOR WOMEN	A/N	A/N	A/N	D	D	D	W	W	W	2/M	2/W	W	W	M	M	—	—	—	W
JOB HAINES HOME FOR AGED PEOPLE	—	A/N	A/N	A/N	A/N	3/W	W	OCC	M	OCC	2/W	2/W	2/W	—	—	—	M	—	M
MARCUS L. WARD HOME	A/N	A/N	A/N	A/N	—	2/W	W	M	D	—	—	W	W	—	—	—	—	—	—
REFORMED CHURCH HOME	A/N	A/N	A/N	A/N	A/N	4/W	2/M	3/M	5/W	M	2/W	2/W	2/W	—	M	—	—	—	3/W

CONSUMER GUIDE TO ESSEX COUNTY NURSING HOMES

RATE UPDATE FEBRUARY 1988

FACILITIES PROVIDING RESIDENTIAL & NURSING HOME CARE

BAPTIST HOME FOR THE AGED

App. \$500.00 a month--actual charge is based
on an individual's
ability to pay

GREEN HILL HOME FOR WOMEN

RESIDENCE: Weekly Charge \$335.00 to \$551.00
Monthly Charge \$1340.00 - \$2204.00
NURSING UNIT: PRIVATE-Daily \$120.00 to \$135.00
Monthly \$3720.00 - \$4185.00
SEMI-PRIVATE-Daily \$95.00 to \$105.00
Monthly \$2945.00 - \$3255.00

JOB HAINES HOME FOR AGED PEOPLE

RESIDENCE: Daily Charge \$40.00
Monthly Charge \$1240.00
NURSING UNIT: Daily Charge \$85.00
Monthly Charge \$2635.00
Monthly Charge \$1333.33

MARCUS L. WARD HOME

REFORMED CHURCH HOME

RESIDENCE: Daily Charge \$32.46 to \$39.71
Monthly Charge \$1006.26 - \$1231.01
NURSING UNIT: INTERMEDIATE CARE Daily
\$101.06 (P) \$96.13 (S.P.) \$74.84 (P)
Monthly
\$3132.86 (P) \$2980.03 (S.P.) \$2320.04
SKILLED NURSING Daily
\$112.30 (P) \$107.37 (S.P.) \$86.07 (P)
Monthly
\$3481.30 (P) \$3328.47 (S.P.) \$2668.17

THE MONTHLY RATE IS CALCULATED FROM A DAILY RATE ON A 31 DAY MONTH OR FROM A WEEKLY RATE ON A FOUR WEEK MONTH.

THESE RATES ARE SOLELY FOR THE PURPOSE OF GIVING YOU, THE CONSUMER, SOME IDEA OF WHAT THE CURRENT NURSING HOME RATES ARE. THE FACILITY DOES HAVE THE RIGHT TO INCREASE ITS RATES WITH PROPER NOTIFICATION TO THE RESIDENT AND/OR RESPONSIBLE PARTY.

IT IS VERY IMPORTANT FOR YOU TO VERIFY WHAT THE CURRENT RATE IS AND TO REQUEST INFORMATION ON WHAT SERVICES ARE NOT INCLUDED IN THIS RATE. THESE ARE ANCILLARY SERVICES AND YOU SHOULD REQUEST A LIST OF THESE CHARGES.

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CONSUMER GUIDE TO ESSEX COUNTY NURSING HOMES

RATE UPDATE OCTOBER 1988

	PRIVATE			SEMI-PRIVATE			TRIPLE/FOUR BEDDED		
	DAILY	MONTHLY	ANNUAL	DAILY	MONTHLY	ANNUAL	DAILY	MONTHLY	ANNUAL
BROOKHAVENHEALTH CARE CENTER	102.00	3162.00	37230.00	97.00	3007.00	34505.00			
CEDAR GROVE MANOR	115.00	3565.00	41975.00	105.00	3255.00	38325.00			
CHERRY NURSING HOME	110.00	3410.00	40150.00	95.00	2945.00	34675.00			
CLARA MAASS CONTINUING CARE CENTER	110.00	3410.00	40150.00	100.00	3100.00	36500.00			
DAUGHTERS OF ISRAEL GERIATRIC CENTER	107.00	3317.00	39055.00	107.00	3317.00	39055.00	107.00	3317.00	39055.00
EAST ORANGE NURSING HOME	85.00	2635.00	31025.00	85.00	2635.00	31025.00	85.00	2635.00	31025.00
GARDEN STATE HEALTH CARE CENTER	95.00	2945.00	34675.00	95.00	2945.00	34675.00	95.00	2945.00	34675.00
GERICARE CENTERS: CLOVER REST NURSING HOME	100.00	3100.00	36500.00	90.00	2790.00	32850.00	90.00	2790.00	32850.00
MADISON NURSING HOME	100.00	3100.00	36500.00	90.00	2790.00	32850.00	90.00	2790.00	32850.00
MONTCLAM NURSING HOME	100.00	3100.00	36500.00	90.00	2790.00	32850.00	90.00	2790.00	32850.00
MONTCLAIR NURSING HOME	100.00	3100.00	36500.00	90.00	2790.00	32850.00	90.00	2790.00	32850.00
HARTWYCK WEST NURSING HOME	118.00	3658.00	43070.00	102.00	3162.00	37230.00			
HAZELCREST NURSING HOME	75.00	2325.00	27375.00	70.00	2170.00	25550.00	70.00	2170.00	25550.00
HOSPITALITY CARE CENTER	100.00	3100.00	36500.00	100.00	3100.00	36500.00			
INGLEMOOR NURSING HOME	118.00	3658.00	43070.00	101.00	3131.00	36865.00			
LITTLE NURSING HOME	80.00	2480.00	29200.00	75.00	2325.00	27375.00			
NEW COMMUNITY EXTENDED CARE FACILITY	110.00	3410.00	40150.00	100.00	3100.00	36500.00			
NEWARK HEALTH & EXTENDED CARE FACILITY	125.00	3875.00	45625.00	95.00	2945.00	34675.00	95.00	2945.00	34675.00
NORTHFIELD MANOR CONVALESCENT HOME	120.00	3720.00	43800.00	99.00	3069.00	36135.00			
PARK MANOR NURSING HOME	76.00	2356.00	27740.00	74.00	2294.00	27010.00	71.00	2201.00	25915.00
PARKVIEW NURSING HOME	70.00	2170.00	25550.00	70.00	2170.00	25550.00	70.00	2170.00	25550.00
PARKWAY MANOR HEALTH CENTER	110.00	3410.00	40150.00	95.00	2945.00	34675.00			
ST. VINCENT'S NURSING HOME	100.00	3100.00	36500.00	90.00	2790.00	32850.00			
(THERESA) GROTTA CENTER FOR REHABILITATION	116.00	3596.00	42340.00	96.00	2876.00	35040.00	91.00	2821.00	33215.00
VAN DYK MANOR OF MONTCLAIR	135.00	4185.00	49275.00	98.00	3038.00	35770.00			
WATERVIEW NURSING HOME	110.00	3410.00	40150.00	100.00	3100.00	36500.00			
WEST CALDWELL CARE CENTER	120.00	3720.00	43800.00	99.00	3069.00	36135.00			
WHITE HOUSE NURSING HOME	118.00	3658.00	43070.00	97.50	3022.50	35587.50	97.50	3022.50	35587.50

ESSEX COUNTY GERIATRIC CENTER

MEDICAID ONLY--OPEN ONLY TO ESSEX COUNTY RESIDENTS

THE MONTHLY RATE IS CALCULATED ON A 31 DAY MONTH.

THE ANNUAL RATE IS CALCULATED ON 365 DAYS.

THESE RATES ARE SOLELY FOR THE PURPOSE OF GIVING YOU, THE CONSUMER, SOME IDEA OF WHAT THE CURRENT NURSING RATES ARE. THE FACILITIES DO HAVE THE RIGHT TO INCREASE RATES WITH PROPER NOTIFICATION TO THE RESIDENT AND/OR RESPONSIBLE PARTY.

IT IS VERY IMPORTANT TO VERIFY WHAT THE CURRENT RATE IS---ALSO BE SURE TO REQUEST A LIST OF ANY SERVICES NOT INCLUDED IN THE RATE (THESE ARE ANCILLARY SERVICES) AND THE FEES FOR THESE SERVICES.

Home Equity Conversion

For persons age 62 or older and owning their own homes (single-family houses) with little or no outstanding mortgage debt, the U.S. Department of Housing & Urban Development (HUD) is planning to initiate a Home Equity Conversion Mortgage Insurance Demonstration Program this spring. Under this demonstration program, lenders offering home equity conversion mortgages on the homes of older homeowners would be able to apply for this insurance, thus allowing the homeowners to convert the equity in their homes into cash. By the insurance and home equity conversion mortgages, it is hoped that more lenders would be available to help these homeowners convert a portion of accumulated equity into cash. HUD plans to insure a total of 2500 mortgages through September 20, 1991.

Three types of basic reverse mortgages would be insured: (1) tenure, (2) term, and (3) line of credit. The interest rate on these mortgages could be either fixed or adjustable. Fixed rate tenure mortgages providing for shared appreciation between the lender and the borrower would also be insured.

Tenure Mortgages would provide for monthly payments from the lender to the homeowner. Term Mortgages would provide for monthly payments from the lender to the homeowners for fixed periods agreed upon between the two parties; at the expiration of the agreed-upon period, the monthly payments would cease. Line of Credit Mortgages would allow the homeowners to draw amounts as needed until the line of credit became exhausted. In all cases, mortgages would not become due and payable so long as the homeowner occupied his/her home as a principal residence, or another event occurred that would cause the mortgage to become due; such as provisions would have to be incorporated into the mortgage document.

When the mortgage does become due, the lender's recovery will be limited to the value of the home. There is to be no deficiency judgment taken against the homeowner or the estate. The homeowner is to pay a Mortgage Insurance Premium to reduce the risk of loss in the event that the mortgage principal balance should exceed the value of the property at the time that the mortgage becomes due and payable. HUD proposes to issue reservations of insurance authority to HUD-approved lenders wishing to participate in this program. Lenders would be permitted to apply for a minimum of 10 and a maximum of 50 reservations at one time. If their reservations were not to be used within six months, they would expire and then could be reissued to other applicant lenders.

Homeowners would be required to receive adequate counselling by a trained third party who would provide them with information on the benefits and risks of the home equity conversion plans, and explain possible alternatives. HUD proposes to train and certify counselling agencies on this topic.

Any questions or comments on this Demonstration Program may be directed to Mary McGeary, Housing Specialist, Division on Aging, telephone (609) 292-3766.



Thomas P. Giblin

RSVP Recognition Luncheon

The 15th RSVP Recognition Luncheon will be held on Wednesday, June 7, 1989 at the Town and Campus in West Orange. This year RSVP is fortunate to have Thomas Giblin as Honorary Chairperson for this gala event. Mr. Giblin is President of Local 68-68A-68B of the International Union of Operating Engineers, AFL-CIO. He served as Treasurer of the Essex County Vocational School Board in 1975-76 and as a Commissioner of the New Jersey Real Estate Commission from 1979-1982, also as an elected member of the Essex County Charter Study Commission in 1968-1987. Tom is serving his ninth year as Essex County Freeholder.

Once again we are fortunate to have the music of Reeds, Rhythm and All That Brass for our listening and dancing pleasure. This unique sixteen-piece, non-profit orchestra plays the nostalgic music of the '40s.

Over 1700 members of the Retired Senior Volunteer Program of Essex County will be recognized for their service throughout the year. RSVP is sponsored by Senior Service of Ornage, New Jersey.

Nursing Home Information

The Division on Aging in Trenton will be conducting a Nursing Home Information Call-In Day on Wednesday, March 15, 1989 from 9:30 a.m. until 3:30 p.m. on our Senior Citizen's Information and Referral toll-free line, 1-800-792-8820. The Department of Health (Gerontology Program), the Department of Human Services, Division of Medical Assistance and Health Services (Medicaid), the New Jersey Association of Health Care Facilities and the New Jersey Association of Health Care Facilities and the New Jersey Association of Non-Profit Homes for the Aged will assist by providing staff members to respond on the Division's toll-free telephone number to questions about nursing homes.

The objective for the Nursing Home Information Call-In Day is public education. They will be prepared to answer questions about selecting a nursing home, services to expect, Medicare and Medicaid coverage, rights of nursing home residents, nursing home costs, etc.

Questions should be addressed to Jack Ryan, Coordinator for the Nursing Home Information Call-In Day, at (609) 292-4303.

When A Premium Is A Tax

As if the new Catastrophic Health part of Medicare weren't complicated enough, there's another angle which isn't generally known. As you probably know the IRS (Internal Revenue Service) has gotten into the act. They have the job of collecting the new "premiums" as part of the 1989 income tax of those seniors whose income is high enough to make them pay income tax. If the income tax on their income is withheld at the source they don't have to worry about paying any "premium" in 1989; they pay in 1990.

However, if you have to pay estimated amounts of your 1989 income tax during 1989 on a quarterly basis, you will have to include an estimate of a quarter of your Catastrophic Health "premium" with the quarterly estimate of your income tax. This sounds very complicated but, as usual, the IRS has a form for it. If you think you're liable, ask them for a copy of Publication 934 which explains it. (If you can understand it).

If you estimate that your 1989 income tax will be less than \$150.00 there will be no "premium" due. If its larger than that the premium will amount to \$22.50 for each \$150 of income tax with a maximum of \$800.00 if you're single and \$1600.00 if you're married. You will be expected to pay a quarter of the total estimated "premium" with your quarterly estimated income tax payment. Good Luck! The IRS phone number is 622-0600. There is a toll-free number for tax forms only -1-800-424-3676.

Income Tax Assistance

At this less than ideal time of year (you know, dead of winter, income tax preparation, colds) we have printed a list of the locations where you can obtain assistance in making out your income tax. Here is an up-to-date list with phone numbers for some and dates and hours when counselors are available. Both TCE and Vita sites are listed. These are two groups that are performing this service but both perform a similar service of advice for taxpayers.

TCE SITES — ESSEX COUNTY — (07)

- BELLEVILLE**
Public Library, (207817)
221 Washington Ave.
Tues. thru Fri. 10:00-3:30 p.m.
Jan. 24 thru Apr. 14. 450-3400
- BLOOMFIELD**
Public Library, (207001)
90 Broad St.
9:00-12:00 p.m. Feb. 17 thru Apr. 14
By appt. (201) 429-9295
- CALDWELL**
Grover Cleveland Senior Center, (207715)
14 Park Ave.
Be appt. (201) 403-4637. Feb. 22 thru Apr. 14.
- CEDAR GROVE**
Library, Municipal Plaza (207002)
By appt. (201) 239-3562
Feb. 1 thru Apr. 14
- EAST ORANGE**
East Orange Fellowship Center, (207004)
1 Fellowship Circle
Tues. 10:00-1:00 Feb. 14 thru Apr. 11

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Consumer Tips

Advertised merchandise must be available for 3 days unless advertisement states specific time or dates.

If a store provides "rain checks" they must be honored and consumer contracted within 60 days if cost of merchandise exceeds \$15.00 per item.

When a sale is made away from the seller's place of business, the consumer has a right to cancel the contract or sale within 3 business days if the cost of the merchandise or services exceeds \$25.00. The best way to do this is first by phone and then by certified mail — return receipt requested.

If and when a problem develops, the first contact should be with the person who sold the services or merchandise, then the owner or manager of the business and if it is merchandise, then the manufacturer.

Keep all originals of sales and service contracts and make duplicates if a problem arises.

Esther Chernofsky-Senior Investigator/Consumer Protection, 15 South Munn Avenue, East Orange, NJ 07018, 678-8928 will try to help you. She is also available to speak to all senior groups in Essex County on "Justice in the Marketplace" and to answer all questions.

For Beginning Quilters

The Grover Cleveland Senior Center will be starting Quilting session every Wednesday, at 14 Park Ave., Caldwell, from 1:30 - 3:30 P.M. Charlotte Maretsky will instruct. Please bring with you a thimble and a spool of white cotton thread. For reservation and further information, please call Louise Cascella at 403-4637 - 9 A.M. - 3 P.M.

ESSEX ADVISOR

*The Newspaper by and for
Essex County Older Adults*

439 Main Street

Orange, N.J. 07050

Phone: (201) 678-3666

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Essex County Division on Aging

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Essex County Executive
Nicholas R. Amato

Board of Chosen Freeholders

Freeholder President:	Joseph C. Parlavecchio
Freeholder District I	
Freeholder Vice-President	James Cavanaugh
Freeholder-at-Large	
Freeholders:	
Freeholder District II	Dolores Battle
Freeholder District III	Leroy J. Jones
Freeholder District IV	Monroe Lustbader
Freeholder District V	Arthur Clay
Freeholder At-Large	Sara Bost
Freeholder At-Large	Carmine Casiano
Freeholder At-Large	Thomas P. Giblin

Deadline for all news and advertising copy is the 10th of the month preceding the month of publication. To place advertisement call 673-0640.

Not liable for errors appearing in any advertisement beyond the cost of the space occupied by the error; notification must be made in writing within two weeks of publication. The publisher reserves the right to accept or reject any advertisement. Inclusion of advertising in this publication does not imply endorsement.

Bulk Rate: U.S. Postage Paid at Orange, N.J. 07050; Permit No. 27 Copyright 1989 by Senior Service Corps, Inc.

Multi-phasic Blood Testing

Multi-phasic blood screening will be performed on Tuesday, March 14, 1989 from 7:00 to 11:00 a.m. at the Bloomfield Health Department Nursing Division, lower level, Township Hall. The diagnostic computer test that will be performed is the Coronary Risk Profile. This test includes Complete Blood Count, Cholesterol, Triglycerides, Glucose, High Density Lipoprotein, Low Density Lipoprotein and others. Recent studies suggest that total serum cholesterol can no longer be viewed as adequate in evaluating heart risk factors and that HDL, cholesterol may be the single most useful test for predicting coronary artery disease. This screening technique is only a partial indicator of an individual's state of health. For an accurate health profile, it should be utilized in conjunction with an assessment by your physician.

There is a minimum 12 hour fasting period prior to having blood drawn. One cannot eat or drink anything except water during this time. The cost of the blood test is \$20.00.

Pre-registration is required for the blood test. Payments will be collected and appointments will be scheduled. Residents of Bloomfield and Glen Ridge can pre-register at the Bloomfield Health Department, Nursing Division, Municipal Plaza, Monday 9:30 a.m. to 4:00 p.m., Wednesday and Thursday 12:00 p.m. to 4:00 p.m. Please call the Bloomfield Health Department if you have any questions — 680-4058.

South Orange Program

In the upcoming months the South Orange Senior Citizens will have a lot of recreational choices. Each month hosts events such as Movie Time, where the group chooses what they would like to see and a luncheon at a local restaurant like Cryan's. Other choices include a trip to the Roselle Flea Market, the New Jersey Flower and Garden Show, and the all time popular Atlantic City bus ride. April brings not only showers but our Spring Focal Point meeting titled "A Healthier You". The last week will promote Arbor Day activities. Among the May flowers our group will celebrate Older Americans Month with a variety of events. The first week will highlight health seminars and workshop. Our senior craft group will show off their talent at a booth at the Senior Cultural Fair in May. Sundae in the Park is a traditional favorite for June along with the Senior Circle Club Picnic. Several local trips are also being offered. Whatever your interests may be, we are sure to have something you will like. Non-residents are welcome to sign up after an initial period of time. For more information please call the South Orange Parks and Recreation Department at 762-0359 and ask for Pati Rosen.

Friendly Visitors

The Friendly Visitors Program of Belleville, Bloomfield and Nutley needs volunteers who would like to call or visit homebound elderly persons. Volunteers bring the outside world into the lives of those who find it difficult to get out. In addition to visiting, volunteers can also help the "home friend" make appointments, arrange their mail, reminisce or enjoy a hobby together. Activities are only limited by imagination!

If you can share an hour a week, join the Friendly Visitors Program. Orientation for new volunteers will be Tuesday, February 14 or Tuesday, March 14 from 1:00 - 3:00 at 570 Belleville Ave.

Call Jean Libbey at 450-3135 to register for the orientation or to request service for an elderly person.

Face Lift For Dunhill Manor

Dunhill Manor, a shared house for seniors in South Orange, will be receiving a total remodeling thanks to a \$100,000 grant from the Essex County Community Block Grant Program and an additional \$80,000 from the Village of South Orange.

Executive Director, Judy Matthews, is very excited about the whole project, especially the prospects of having the present five bathrooms totally renovated and that six more will be added. Also there will be four more living units added to bring the total number residents to sixteen. Another new feature will be a suite that will house a couple or siblings with a living room, bedroom and full bath.

Over six years ago, the South Orange Senior Citizen Housing Corporation purchased Dunhill Manor with a \$75,000 grant from Community Development and have been providing housing for seniors who do not want to live alone for one reason or another. The house is a large roomy older home right near the library, post office and transportation which seem important to most seniors. The beamed ceilings and fireplaces, along with a great front porch, create a warm homey feeling. The residents have their own rooms and receive home cooked meals and housekeeping assistance, but must be able to get around themselves.

Judy Matthews explains, "Seniors don't prefer shared housing, of course, and many want to live alone. This is not a health facility. But for seniors who are lonely, or tired of food shopping or cooking and want the companionship that meal time brings, or a friend to walk to the stores with, this is an ideal arrangement. If they want to be alone in their rooms, they have the option of watching TV, taking a nap, reading, etc. We try to help our residents maintain this independent life style as long as possible, referring to it as 'Interdependence through interdependence'. With the longevity that people are enjoying, this type of living sometimes becomes more critical when family members and friends are out-lived and the support network of the senior breaks down. We hope to someday repeat this project for another town. Residents like to remain in their own community, near to friends and stores they are familiar with. I like to think that many communities would like to see this as an option they can offer to their older residents."

Anyone wishing further information on Dunhill Manor can contact Judy Matthews, at the Essex County Division on Aging at 678-9700 or 762-1164.

Seniors Gear Up For Camp

Every year some of the senior population of New Community cannot wait for the summer break. This is a chance to get away, meet new friends and see different surroundings.

There are 2 choices of beautiful camps this year. Tecumseh, a long-time favorite of our group is still on the list and has time available during the week of July 19 to 25. Camp Tecumseh is a New Jersey based Salvation Army Camp located in Pittstown, NJ and the cost for 7 nights and 20 meals is only \$110.00.

Camp Ladore, is a Pennsylvania based Salvation Army Camp in Waymatt, PA and has the week of July 31 to August 7th available. The cost for 7 nights and 20 meals is only \$180.00 (there must be a group of 12 or more to make reservations and an additional \$5.00 per person for transportation fees).

Both camps are designed to accommodate seniors and offer a wide range of activities and special events. A \$25.00 deposit is required to hold your space and is due by March 15, 1989.

If you would like to go along with our group, please contact Ms. Joyce Cook, Senior Programmer, NC Manor Senior, 545 Orange St., Newark, NJ 07107 or call (201) 623-6199. Its not too early to make plans for the summer.

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Black History Month

February was Black History Month and throughout the County, a great many organizations contributed to the wealth of activities celebrating it. To name only a few, the Newark Museum, the Newark Public Library, Rutgers University, Essex County College, Essex County Division of Recreation and Cultural Affairs, Newark Board of Education and City Without Walls presented programs. In the area of theater and music, the Ensemble Theater Company, The New Jersey State Opera, Kimako's Blues People, Cathedral Concert Series, Newark Boys Chorus, The Links, Inc. and the New Ark Writers Collective presented performances.

Among the programs at the Newark Public Library was one on February 9 "The Dream Keeper Speaks: The World of Langston Hughes" A poem by him entitled "The Negro Speaks of Rivers," which follows, was used as a theme on its calendar of events by the City of Newark.



I've known rivers:

I've known rivers ancient as the world and older than the flow of human blood in human veins.

My soul has grown deep like the rivers.

I bathed in the EUPHRATES when dawns were young.

I built my hut near the CONGO and it lulled me to sleep.

I looked upon the NILE and raised the pyramids above it.

I heard the singing of the MISSISSIPPI when Abe Lincoln went down to New Orleans, and I've seen its muddy bosom turn all golden in the sunset.

I've known rivers:

Ancient, dusky rivers.

My soul has grown deep like the rivers.

Many of the agencies serving seniors, funded by the Division on Aging, celebrated Black History Month in innovative ways. For example, the Experienced Senior Citizens' Club of the Elizabeth Avenue Community Center in Newark presented an elaborate program on February 22, of prayer, song, readings and fashion show. Many local residents contributed, according to Mrs. Jewel Daniels, Director.

The Newark Day Center presented an inter-generational program with children and seniors cooperating in the activities involving the black heritage on Feb. 23.

Orange Celebrates

Mayor Robert L. Brown of Orange Township encouraged all citizens of all nationalities to highlight the rich heritage Afro-Americans have given to this country as he proclaimed February "Black History Month: The Month of Pride and Heritage."

"Our youth of all nationalities are under

siege throughout this nation. We must provide our youth with forms of ammunition that combat the war on drugs, ignorance, and poverty. It is important that all of us remember the rich heritage that Black people have given to this country as we highlight positive role models for all children this month," stated Mayor Brown.

On February 7, citizens were invited to the hanging of the Black American Flag presented to this city by Melvin Charles, its creator, in front of City Hall.

Citizens were also invited to attend a celebration of Pride and Heritage February 26, at Scotts Manor. The celebration included an art exhibit of local artists, with entertainment in music, poetry and prose. The evening's festivities were highlighted by guest speaker Dr. Lenworth Gunther. For further information contact the Mayor's Office at 266-4005.

1989 Income Limitations

The 1989 maximum benefit for recipients of Supplemental Security Incomes (SSI) is \$399.25 monthly for single-person households. The maximum permissible income or resources is \$2,000 for eligibility for this program. . . The maximum for the Home Energy Assistance Program (HEAP) is \$721 for a single-person household, \$966 for a two-person household. It increases \$245 for each additional household member. Maximum Social Security earnings for 1989 — \$6,480 for persons under 65 and \$8,800 for persons ages 65-69. . . In April, it is expected that the income limitations of the New Jersey Care and Medically Needy programs will increase to take into account the cost-of-living increase in the past year and the new federal poverty level. . . Under the Alzheimer's Disease Day Care Program, there is a new income guideline — for a couple living totally independently in their own house or apartment, the income limitation is \$24,493.

For more information on these programs, call the New Jersey Senior Citizens Information & Referral Service at 1-800-792-8820 and request the Division on Aging's publications STATEWIDE BENEFITS FOR OLDER PERSONS and FEDERAL PROGRAMS FOR OLDER PERSONS.

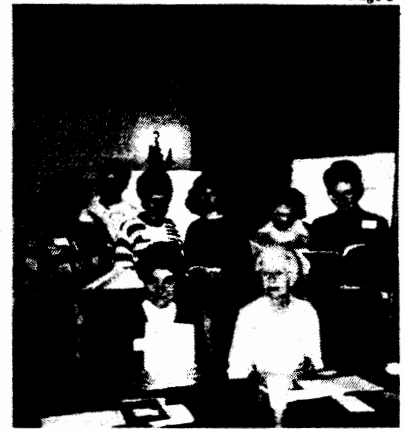
Earn Money

Senior Citizens are returning to the work force in ever-increasing numbers. Retrained workers are a valuable resource for many businesses as well as social service agencies.

A number of businesses are interested in and enthusiastic about hiring older workers because of their generally better attendance, good safety records and years of experience. Older workers are more likely to stay on the job and are more flexible.

The North Ward Center offers a variety of training and employment programs for older workers. The vast majority of people who attend have never had any type of office training. At the North Ward Center, individuals (55 and older) who are looking for increased income and to learn how to operate computers as well as typing and basic business skills, have found the perfect program. Their goal is to be hired in private sector jobs that will pay them comparable wages in the business field.

Call now and inquire about the North Ward Center Senior Citizen Business Training Program, located at 346 Mt. Prospect Avenue, Newark. You will be glad you did. The number is 481-0415, just ask for Maria Rose Smith or call 482-3567 and ask for Jo-Ann Laurel.



Literacy Volunteers, (front row), Ann Spindler, May Glenor, (back row), left to right; Clara Shearin, Dorothy Kemp, Betty Schwartz, Minga Cullen (Reading Specialist), Norma Checchia and Theresa Kieferdorf.

I CAN READ . . . AT LAST!

A 1980 study by the U.S. Department of Education found 35% of the 60+ population of the United States to be functionally illiterate, with many more only marginally literate. And, even though there were existing literacy services available to older adults, it found that very few made use of these services. Accordingly, it was felt that new approaches should be considered.

To provide specific information about how older adults learn, their unique needs, and the ways these needs can be met, Literacy Volunteers of America has now developed a 90-minute workshop for literacy tutors of the edlerly, "I Can Read . . . At Last!" Included in this workshop is a slide/audio cassette program produced by the New Jersey Chapter of Literacy Volunteers of America under a grant from the Division on Aging. "I Can Read . . . At Last!" sensitizes prospective tutors to the special skills or limitations that a particular adult learner may have.

The slide/audio cassette tape "Literacy: I Can Read . . . At Last!" is available for loan from the Division on Aging's Audio Visual Loan Program. Persons desiring to borrow the tape should contact the Division on (609) 292-0920 and ask for Audio Visuals.

BE A BETTER READER

As part of its older adult literacy project, the Division on Aging has had the Channing L. Bete Company develop a scriptographic booklet, "Be a Better Reader." The booklet is designed to encourage older adults to want to read better; it also tells people where they can find out about reading programs in their area. The back cover lists the 21 Area Agencies on Aging and the toll-free number of the New Jersey Senior Citizens Information & Referral Service. The brochure is available from the Division on Aging. To order a copy of this brochure, or for more information, contact Lois Stewart at the Division on Aging, telephone (609) 292-4303.

EMPLOYMENT FOR SENIORS

The Older Worker Program of the Jewish Vocational Service can arrange part or full-time employment for seniors over 55 in a wide variety of jobs in stores, factories, private homes, museums, hotels and other places of employment for Essex County residents. There is no charge for this service. There are also live-in jobs as housekeepers, health care workers, child care workers and similar positions.

The correct phone number is 674-2415.

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Free Blood Pressure Tests

The Caldwell board of health urges all West Essex senior citizens to take advantage of the free blood pressure screenings being offered. This ongoing program has been made available thru a grant from the Essex County Division on Aging. For appointments and information on additional health programs being offered, call Dorothy Burns at 403-4625, the Caldwell Health Department. Blood pressure will be taken by appointment only.

A spokesperson noted, "Hypertension is a major contributing factor to heart disease, stroke and kidney disease. It is important to remember that hypertension usually causes no symptoms until it had become quite serious. Fortunately, once it is detected, high blood pressure can be controlled by carefully following your doctor's recommendations. The prescribed methods for controlling high blood pressure vary from person to person depending upon the individual habits and the severity of the disease.

"In some cases, hypertension can be controlled by following a diet low in sodium, fats and cholesterol, losing weight, getting more exercise, and by quitting smoking. At times medication may be required to bring blood pressure down. Often a combination of these approaches may be prescribed. Once you begin treatment for hypertension, it is important to keep up the treatment program every day, even though you may feel fine," it was explained.

Montclair Spring Programs

Thomas Restaino, Health Officer of the Montclair Health Department is pleased to announce that dates for its Women Health Clinic, SMAC Blood Test, Mammography and blood pressure checks have been set. The Women's Health Clinic, which is offered throughout the year, will be held on the second and third Thursday mornings of the month. At the Clinic, women can receive a Pap Smear, pelvic exam, breast exam, and blood pressure check. Due to a grant from the Essex County Division on Aging the Clinic is free to women 60 and over. Those women who are under 60 will be charged a \$12.00 fee. To make an appointment, which is mandatory, call 744-8743.

During the month of April the Health Department will be conducting a low-cost mammography screening program and a low-cost SMAC blood testing program. The mammography program will be held on April 4th, 5th, and 6th in conjunction with Med-Mobile Inc. Mammography screenings will take place in a Med-Mobile medical unit at the Montclair Municipal Building. It contains state-of-the-art equipment, including the Lo-Rad M-II unit, used at leading hospitals across the country. The cost of the mammography is \$70.00. The program is conducted by appointment only.

The SMAC blood test which stands for Sequential Multiple with Computer, allows a person to have his or her blood chemistry analyzed. Included in this analysis is glucose, triglycerides, total cholesterol, HDL and LDL cholesterol. The SMAC test will be held Saturday, April 15th at the Montclair Municipal Building. The cost of the blood test is \$15.00 and an appointment is required.

In conjunction with these special programs, the Community Nursing Service of Montclair will be conducting its monthly free blood pressure program, which is made possible through funding from the Essex County Division on Aging. Blood pressure checks are held at various sites in Montclair.

For more information about any of the above programs call 744-1400 ext. 254.

An Untapped Resource

On Monday, April 3, 1989, there will be a seminar for child care providers, "Older Adults: An Untapped Resource," jointly sponsored by the Divisions on Aging and Women of the New Jersey Department of Community Affairs. It will be held at the Labor Education Center of Rutgers University in New Brunswick. The seminar will explore ways of increasing the number of child care service workers through utilization of older adults as child care providers.

Currently, the Division on Aging through its Senior Community Service Employment Program (SCSEP) has two demonstration projects which train older workers to become child day care para-professionals — one in Union City in Hudson County and the other in Mercer County. Under these projects, Job Training Partnership Act funds provided to the counties pay for the trainers and the facilities, and the SCSEP provides stipends to the trainees while they are being trained.

The Union City program was the initial demonstration project of SCSEP. Its goals are — (1) providing job-training and employment for low income Hispanic senior citizens of Union City and Hudson County; (2) increasing the availability and affordability of quality child day care; and, (3) creating a working partnership among governmental agencies, non-profit agencies, private sector employers, and others to promote the creation/expansion of self-sustaining child day care capacity in Hudson County communities. Following classroom training, enrollees in this project have approximately six months of SCSEP work site experience before being placed into unsubsidized employment.

Persons desiring further information on the seminar for child-care providers should contact Lois Stewart at the Division on Aging, telephone (609) 292-4302, or Fran Orenstein at the Division on Women, telephone (609) 633-6812.

Bowel Disease Program

Residents of northern New Jersey who suffer from inflammatory bowel disease no longer have to travel to New York City for treatment.

That is because a new comprehensive program designed to help many sufferers of colitis, Crohn's disease and ileocolitis has opened at Saint Mary's Hospital in Orange. Inflammatory Bowel Disease affects some 900,000 people across the country.

"Our Center for Inflammatory Bowel Disease will give the men and women who suffer from these debilitating illnesses the opportunity to receive treatment close to home," according to Andrew Stefaniwsky, MD, of West Orange, said. Prior to this, the closest comprehensive programs were available in Manhattan and on Long Island.

The Center of Inflammatory Bowel Disease therapy designed to control inflammation, nutritional counseling, an intravenous nutrition component, inpatient care and home care when needed. The center will allow patients to receive care as an inpatient or outpatient basis.

For more information on the Center for Inflammatory Bowel Disease, call 673-1291.

ATTENTION ALL SENIORS!

The date of the very popular Cultural Festival at the Arena on South Orange Avenue, formerly held in September, has been changed to May 25th this year. Many attractive new features are planned so be sure to note your calendars and plan to attend.



The Tower Players, Mildred Miko, Ethel Gaidemak, Henrietta Michaelson, Bess Ritz, Maggie Thornton, Gert Bernstein, Goldie Smith, Eva Kordower, Nettie November, Eva Rosenberg, Ann Hollander.

Volunteer Vanities

R.S.V.P.'s Tower Players of Irvington recently appeared at Congregation B'nai Jeshurun in an original musical entitled "Volunteer Vanities." The play tells of the opportunities and rewards of volunteer work. The group has been performing for the past three years in skits of particular interest to seniors. This production is their first musical endeavor.

The play was co-written by Natalie Haiken, Director of the Senior Aides Program and Carol Leit, Assistant Director of the Retired Senior Volunteer Program. The cast pictured from left to right: Standing are Mildred Miko, Ethel Gaidemak, Henrietta Michaelson, Bess Ritz, Maggie Thornton, Gertrude Bernstein, Goldie Smith, Eva Kordower, Nettie November. Seated are Eva Rosenberg and Ann Hollander.

The play can be performed for interested groups. For further information call Carol Leit of RSVP — Senior Service at 673-0640.

South Orange Plans Meeting

The South Orange Recreation Department and the Senior Social Services Unit are planning a Focal Point Meeting entitled, A Healthier You. The meeting is planned for April 5th, 1989. Issues to be discussed at the meeting include nutrition, vital of life, medication information, dental health and dental services available. Free health education books will be available. Health Educator Yvonne Brown will be the presenter for the morning.

Her education includes a Master Degree in Health Education from Columbia University. Ms. Brown's experience encompasses a wide variety of volunteer work throughout the years. Presently she is doing health presentations for all age groups in the Essex County area. In the future she will conduct a Senior Health Awareness Week during May at the Baird Community Center.

Following the meeting there will be a "Health Lunch" available for \$1.00. The lunch will consist of cottage cheese, fruit salad, cold bean salad, pasta salad and a grain bread. Assorted fruit and vegetable juices will be available. Decaffeinated coffee and tea will also be served.

Anyone wishing to attend the meeting is welcome. It will be held at 10:30 a.m. on April 15, 1989 at the Baird Community Center, 5 Mead Street, in South Orange. Reservations for the luncheon can be made by calling the Baird Center at 762-0359.

59x

Lamp Program

The Legal Assistance for Medicare Patients (LAMP) program was established by the New Jersey Legislature as a result of recent cut-backs in benefits available to New Jersey's Medicare. The Community Health Law Project, a non-profit legal services agency, has been selected by the New Jersey Department of Human Services to operate the LAMP program. The purpose of the program is to provide outreach and educational services, as well as direct legal representation, to Medicare beneficiaries who are experiencing difficulty in obtaining payment of Medicare claims. The program is presently concentrating on Medicare coverage of services provided by home health agencies, skilled nursing facilities and rehabilitation hospitals. For more information on the LAMP program, contact either Terence Farrell or Jacqueline Rubino at the Community Health Law Project, 7 Glenwood Ave., East Orange, NJ 07017, Tel. 672-6073.

Diabetes Education

Saint Mary's Hospital offers individualized diabetes education as part of its Diabetes Wellness Program.

The program is designed to provide diabetes education and training for newly diagnosed diabetics or for those who have had diabetes for many years, according to Diabetes Nurse Educator Lori R. Sherman, RN.

Saint Mary's program offers patients instruction in self blood glucose monitoring, insulin adjustment, nutritional requirements and the development of an individualized meal plan.

"The hospital staff will work with referring physicians in developing a plan to help each patient and his family live well with diabetes," Ms. Sherman said.

For more information about this convenient, low-cost program, call 673-1291.

Saint Mary's Hospital in Orange is a division of Cathedral Healthcare System.

ADVERTISEMENTS

SENIORS

Thinking About Selling?

Call **Louis Leone** of
Degan Boyle Realtors for
free estimate! Ask for **Louis**.

731-5848 or 783-1440

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10% DISCOUNT WITH THIS AD

Income Tax Assistance

Continued from Page 1

GLEN RIDGE
Glen Ridge Congregational Church, (207605)
Ridgewood Ave.
Mon., Tues., Thurs., Fri. 10:00-4:00 p.m.
By appt. (201) 748-3730. Feb. 13 thru Apr. 14

IRVINGTON
Senior Citizens Center, (207006)
1077 Springfield Ave.
By appt. (201) 399-6501

LIVINGSTON
Public Library, Memorial Park, (207007)
Livingston Ave.
Mon., Wed. . . Fri. 10:00-1:00 p.m.
By appt. (201) 992-4600

MAPLEWOOD
Hilton Branch Library, (207008)
1688 Springfield Ave.
By appt. (201) 762-1622
Hilton United Methodist Church, (207009)
295 Boyden Ave.
By appt. (201) 761-6676
Maplewood Memorial Library, (207010)
151 Baker St.
By appt. (201) 762-1622

MONTCLAIR
Public Library, (207611)
50 S. Fullerton Ave.
Mon. . . Wed. 9:00-3:00
By appt. (201) 744-0500

NUTLEY
Nutley Parks . . Recreation Bldg. (217918)
44 Park Ave.
By appt. (201) 284-4967

ROSELAND
Roseland Free Pub. Library, (207816)
Tues. . . Thur. 10:00-1:00 p.m.
By appt. (201) 226-8636

VERONA
Free Public Library, (207313)
17 Gould St.
Mon. . . Thur. 9:00-12:30
Feb. 13 thru Apr. 13

LIFE INSURANCE Issued Up To Age 85

CALL MR. SEGAL, Agent
992-5137

Day Trip

A grand and unforgettable one-day trip to the Palatial and Enchanting Winterthur in the state of Delaware will take place on Wednesday, May 3 in the full glory of springtime. Each of the 196 rooms in the mansion of the Duponts is a carefully designed showcase for the estate's priceless paintings, furniture, textiles, ceramics and antiques. We will see the most extensive collection of Americana in the world.

In the spring by tram and by foot the magnificent gardens, breath-taking vistas, flowering trees, rare plants and running brooks will come into view.

We leave Millburn by modern bus at 7:30 a.m. and return about 6:00 p.m. Lunch will be at a moderately priced garden pavilion on the grounds of the estate. The trip fee of \$45 covers bus transportation, tram ride, all admissions, guides, parking, but does not include lunch.

For more information and registration, please call Sigmund C. Taft, 376-2570. Checks may be mailed to Mr. Taft at 46 Undercliff Road, Millburn, N.J. 07041.

WEST ORANGE
Public Library, (207014)
46 Mt. Pleasant Ave.
Mon. . . Fri. 10:00-1:00 p.m.
Starting Feb. 17 thru Apr. 17
By appt. (201) 736-0198

VITA SITES — ESSEX COUNTY — (07)
BLOOMFIELD
Public Library, (107001)
1 Broad St. VI
Sat. 9:00-12:00 p.m.

CALDWELL
Library, (107822)
268 Bloomfield Ave. I
Thurs. 6:00-8:00 p.m. Feb. 9 thru Apr. 13

EAST ORANGE
Islamic Center, (107830)
61 Lincoln Ave. VII
Feb. 25 10:00-2:00 p.m.

Public Library, (107002)
21 South Arlington Ave. II G VII
Feb. 18 12:30-4:00 p.m.
Mar. 4 . . 18 Sat. 1:00-3:00 p.m.
Community Development Corp., (107003)
By appt. (201) 266-5313 IV G
Upsala College, (107009)
Prospect Street III
Agnes Walstron Student Center,
Activity Room

IRVINGTON
Eastern Bible Institute (107827)
Thur. 6:00-7:00 p.m. Feb. 2 thru Apr. 6 X
Restricted to Members
Public Library, Civic Square (107004)
Sat. 9:00-1:00 p.m. V G
Feb. 4 thru Apr. 15

MONTCLAIR
Public Library, (107006)
50 South Fullerton Ave. VI G
Mon. 6:00-8:00 p.m. Sat. 9:00-12:00
Feb. 3 thru Apr. 15.

NEWARK
Essex Probation Dept., (107817)
County Courts Bldg. VII
50 W. Market St.
(above the Hall of Records)
Wed., Feb. 8, 15 . . 22 4:30-7:00 p.m.
Ironbound Section, (107608)
Van Buren Branch Library XI
1040 Van Buren St.
Sat. 10:00-12:00 p.m.
Feb. 11 thru Apr. 15

Ironbound Community Corp. (107714)
By appt. (201) 344-7208 VII
Feb. 25 9:00-1:00 p.m. (One day only)
La Casa De Don Pedro, (107829)
23 Broadway VII
Wed. 5:00-8:00 p.m. Mar. 1 only
Newark Public Library, (107007)
NJ Reference Section VI
5 Washington St.
Sat. 9:00-12:00 p.m. Wed. 5:00-7:00 p.m.
Feb. 15 thru Apr. 15

North End Branch Library, (107825)
722 Summer Ave. VIII
Sat. 9:30-5:00 p.m.
Soul 'O' House Drug Treatment Center, (107826)
178 Prince St. IV
By Appt. (201) 643-3888
Only for Clients in Treatment Program

ORANGE
YWCA Essex . . West Hudson, (107828)
305 Main St. VII
Orange Library, (107820)
348 Main St. IX
Mon. 6:00-8:00 p.m. Feb. 13 thru Apr. 10

SOUTH ORANGE
Seton Hall Univ., (107821)
School of Business Rm 104 XII
Wed. 2:00-6:00 Feb. 10 thru Apr. 12
Baird Community Center, (107818)
5 Mead St. XII
By appt. (201) 762-0359

60x



Things to do for Spring:

Order garden plants

Get car tuned

Paint living room

✓ Call Eye Care Center for exam

The Eye Care Center of New Jersey

*Some people think poor eyesight is part of growing old
We don't see it that way*

COMPLETE EXAMINATIONS MEDICAL & SURGICAL TREATMENT
COLOR & CLEAR CONTACT LENSES OCULAR PLASTIC SURGERY

LOW VISION CLINIC — APPROVED PANELIST
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Bloomfield, New Jersey 07003
743-1331

Andrea T. Markow, O.D.
437 Prospect Avenue
Newark, New Jersey 07104
483-2035

Respite Care Coordinator

Judith Lynn Rinsky who is employed by the Essex County Division on Aging, 15 South Munn Avenue, East Orange, where she is the Essex County Respite Care Coordinator, has been selected for inclusion in three "Who's Who" publications.

Mrs. Rinsky will be listed in "Who's Who of American Women 1989-90," "Who's Who in the East 1989-90" and "Who's Who in Finance and Industry 1990-91." To be included she had to demonstrate outstanding achievement in her own field of endeavor and contribute to the betterment of contemporary society.

A Millburn resident for 24 years, Mrs. Rinsky served for five years as senior citizen coordinator for Millburn-Short Hills.

Mrs. Rinsky is a Certified Home Economist with a bachelor's degree in teaching home economics from Montclair State College. She taught home economics in the Irvington school system and did substitute teaching in township schools prior to becoming a senior citizen coordinator.

Judy is a member of the Millburn Rotary Club and member of the board of Gerontology at Seton Hall University and the board of the Council on Health and Human Services.

For information on the respite care program call Mrs. Rinsky at 201-678-9700.

Vision Problem?

The gift of sight is precious to everyone!

We all wish it could last a lifetime, but changes in vision do occur with age. As a result, proper eye care is needed to prevent or curtail disorders.

If you sense a problem with your vision, call for information about services.

Denise Carroll, Coordinator of Services to Visually Impaired Elderly, Essex County Division on Aging, 678-9700.

Laser Destroys Kidney Stones

Saint Mary's Hospital in Orange has the only laser lithotripter in New Jersey. This laser, recently approved for use by the Food and Drug Administration, destroys many painful stones lodged in the urinary tract.

The lithotripter can disintegrate stones in less than one hour, usually with only an overnight hospital stay. The process permits a surgeon to thread a fine laser-transmitting fiber to a stone trapped in a ureter through a flexible fiber-optic scope. The laser delivers short, rapid light pulses which create sound waves within the stone. The waves disintegrate the stone.

To learn more about the laser lithotripter, or about Saint Mary's other lasers for eye surgery, endometriosis, skin cancer, cysts or hemorrhoids, call 673-1291.

Saint Mary's Hospital is a division of Cathedral Healthcare System.

Nursing Home Advocacy

Senior Service's Nursing Home Advocacy Center recently celebrated its twelfth anniversary. The Center serves as an advocate for the institutionalized elderly to correct, protect, and/or enhance their rights in long term care facilities. It also provides counseling and serves as a resource center for individuals considering long term care alternatives. The Center is funded by grants from Essex County Division on Aging and the United Ways.

Among the questions and concerns brought to the Nursing Home Advocacy Center on a regular basis are: What is the quality of care in our nursing homes? How does one select a nursing home if this is considered to be the best alternative? The answers to these questions can be found in the "Consumer Guide to Essex County Nursing Homes" published and distributed by the Nursing Home Advocacy Center Office. A copy can be obtained by phoning 673-0662 Monday through Friday.

A Regal Affair

The seniors of New Community will have a chance to step out in style and dance among royalty.

On Friday, March 10, 1989, there will be a "Black and White King and Queen Ball," to be held at the St. Rose of Lima School Auditorium, Orange and Gray Streets, Newark from 6 to 9 pm. Tickets are \$2.50 for NCC Seniors and \$4.00 for all others. The attire will be black and white.

Featured at the Ball will be NCC's Older American Kings and Queens of 1987 and 1988.

There will be dancing to some old favorites, light drinks and tempting platters will also be available, you may also B.Y.O.B.

Purely an evening of socializing, dancing and looking good is in store. Come out and join us for this stately gathering.

For tickets and information, please contact: Ms. Joyce Cook, NC Manor Senior, 545 Orange Street, Newark, NJ 07107 or call (201) 623-6299.

RSVP Classifieds Volunteer Opportunities

If you are over 60, have some time and want to make a difference, the Retired Senior Volunteer Program would like to talk to you. For information about volunteer opportunities in Essex County, including those listed below, contact Carol Leit at RSVP, 439 Main Street, Orange, 673-0640.

RSVP OFFICE NEEDS HELP!

BUSINESS AND PROFESSIONAL GROUP & Retired men and women from professional business, academic and technical fields: Join an exciting, stimulating group. Monthly meetings. Combine your wealth of knowledge and experience in tackling special projects. A Speakers' Bureau has been formed which presents varied, informative, and educational programs to agencies and community groups. Training workshops are provided.

LOCATION

VOLUNTEER OPPORTUNITY

Essex County
RSVP Literacy Program
Vision Volunteers

Help an older adult improve reading skills. Work on a one to one basis with blind or visually impaired clients to increase independent living skills and socialization. Both Literacy and Vision programs provide free training and transportation.

Belleville
Multiple Sclerosis

Run weekly bingo games on Wed. evening 7-10 PM at Cerebral Palsy Center.

Cedar Grove
Manor Nursing Home

Morning & Library cart worker. Work in residents' store.

East Orange
Brookhaven Health
Care Center

Help with recreational activities such as Bingo, games, card playing. Also need one-on-one volunteers for conversation and companionship.

Garden State Health
Care Center

Help run crafts, exercise classes and bingo.

U.S. Veterans Adm.
Hospital

Nurses Aides, office assistants, escorts, canteen. (\$4 lunch provided)

Newark
Essex County Child
Placement Review
Board

Review cases of children in foster care supervised by Div. of Youth Family Service.

Montclair
YMCA

After school hours, help children with crafts and learning skills.

Verona
Planned Parenthood

Receptionist, clerical help.

Friendly Visitors

The Friendly Visitors Program of Belleville, Bloomfield and Nutley is in need of a few additional persons to join it ranks of volunteers.

If you enjoy talking on the telephone or visiting with older persons in their home, you are encouraged to join the Friendly Visitors Program. Volunteers help homebound elderly with activities related to daily living, such as organizing mail, letter writing and reading.

A part of the Community Mental Health Way Agency, the Friendly Visitors have been a resource in Belleville, Bloomfield and Nutley for over 10 years.

To secure more information about being a volunteer, contact Jean Libbey at 450-3135.

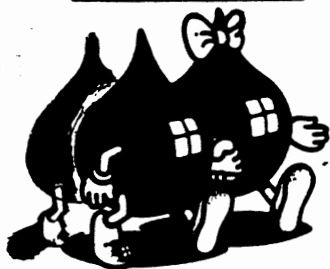
Senior Stay Healthy

The Bloomfield Department of Health, Division of Human Services is sponsoring a Low Impact Aerobic Class. All those residents age 60 and over interested should contact the Division to sign up and gain additional information.

The Class is not strenuous aerobics but a low impact aerobic which will work on balance, coordination, and strengthening one's breathing habits while still presenting a physical challenge.

All those seniors interested should contact the Bloomfield Division of Human Services at 680-4017.

62x

SENIOR CITIZENS

If You are a Senior (65 or older) resident of Livingston or West Orange, you are eligible for three free pints of blood, no matter where you are hospitalized in the United States. Medicare does not pay for the first three units.

For further information, Please call:

VALERIE LOFTON
NORTH JERSEY BLOOD CENTER
45 SOUTH GROVE STREET
EAST ORANGE, NJ 07081
(201) 676-4700

*Based on availability

AN ANNOUNCEMENT FROM SAINT
BARNABAS MEDICAL CENTER AND
THE NORTH JERSEY BLOOD CENTER

Readers Exchange

For a \$3.00 charge, you ad of 20 words or less will be listed in the Reader Exchange for one month. Send ad with \$3 check to ESSEX ADVISOR, 439 Main Street, Orange, N.J. 07050. Or call 678-9700.

EMPLOYMENT WANTED

RELIABLE, experienced man seeks yard maintenance work, cutting lawns, re-sodding, lawn fertilizer, leaves, and general clean up, distance no problem. Call 676-0750.

FOR SALE

TOSHIBA video cassette (Beta) excellent condition. Ladies winter coat size 18 worn only once. Best offer. Call 344-2138.

E/5 — EVERETT JENNINGS wheelchair complete with leg rests — never been used. Gift. Call 484-5164.

GAS RANGE — Caloric 36", electric ignition, gold, excellent condition, black see-through door, ultra-ray broiler, \$225, 992-5141.

RANCH STYLE house in Willingboro, NJ, three bedrooms, 2 baths, living room, dining room, kitchen. Price is \$109,000. Call 201-674-7712.

BLOOMFIELD by owner — 6 room colonial modern eat-in-kitchen, 2 baths \$160,000 maintenance free. Move-in-condition. Immaculate 338-6967.

WANTED TO BUY

SENIOR CITIZEN paying cash for T.V. portables, color, any condition, not over 10 years old. Also wanted VCRs, old clocks & 40 yr. old B&W TVs. Mr. Murphy 743-0380 anytime — Bloomfield, NJ.

RETIRED GENTLEMAN buying older model men's wristwatches, pocket watches. Also buying large WWII binoculars, Japanese swords, WWII souvenirs. Please call 751-9462.

— Literacy Program —

"Can you tell me how to get, how to get to Sesame Street?" This familiar tune is crooned by five year olds at the beginning of the popular children's television show, Sesame Street. The Children's Television Workshop has produced twenty years of programming which have enabled children, especially disadvantaged children, to learn how to read. Fifty years ago, children weren't as fortunate.

Back then, many of these children (now senior citizens) had to leave school at a young age in order to help support their families during the Depression. They went to work in order to survive, and they relied on other people to help them fill in forms, read letters, prepare their taxes, and to read to them.

How did they live their lives without being able to read? They've been clever. They've conveniently forgotten their glasses. They've brought home forms that needed to be filled out. They have friends sign them up for activities. When they go shopping, they remember and look for products by packaging, color, and image. They memorize symbols and pictures for everything. For example, they may recognize a stop sign, but they can't read the word, "Stop."

In the United States today, there are 27 million people who are functionally illiterate. The New Jersey Division on Aging estimates that there are more than 450,000 state residents over the age of 60 who are functionally illiterate. A good portion of them are immigrants who, while literate in their native languages, haven't learned English. These people may recognize letters of the alphabet, but they have difficulty sounding words out. They don't know how to write, how to compose

a letter, and cannot fill out simple application forms. And while they may recognize numbers, they cannot perform simple computation problems that involve addition and subtraction.

Now these people are in their sixties, seventies, and eighties, and maybe their children have moved away, or their friends have passed on. Maybe their spouse is no longer there to protect them. For the first time, they are afraid of not understanding a document. They have to read labels on medications to ensure proper usage. They have to read bus signs. They want to read the Bible, but can't. They must prepare their tax forms. They must balance a check book. They are now afraid of being vulnerable. The gift of literacy will make them self-sufficient, and give them self-esteem.

At the Older Adult Literacy Program of Essex County, sponsored by the Senior Service and funded by the Essex County Division on Aging, a reading specialist conducts literacy training workshops. When individuals become trained tutors, they are matched with students. They meet weekly on a one-on-one basis at a site convenient for both. These sites often include libraries or senior centers.

While Sesame Street is a good instrument for teaching young children, adults feel uncomfortable with its juvenile presentation and format. Instead, these older adults will learn how to read by using free reading material that is on an adult level. Volunteers of all ages are welcome to tutor adults over the age of 60. For more information or to register for the next Training Classes, scheduled for March and May, please call Carol Leit at 673-0640.

Thank You Readers!

Contributors to the Essex Advisor's 1989 fund drive will be listed until all have been acknowledged.

Thank you to these readers for their recent contributions.

Mrs. Thomas Albanese

Emma Balli
Clement Bartash
Anna Becher
Mathilda L. Brundage

Mary Cierpial
Rose Conforti
J. Czajka

Arthur Day
Rose De Santis
Dorothy Dunn

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Essex Advisor

RSVP
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Orange, N.J. 07050

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Permit 29
Orange, N.J. 07050

The Newspaper By and For Older Adults in Essex County

HEALTH CARE ADVOCACY PROGRAM

This program is available to all seniors in the county who desire a one-to-one consultation to review any problems they may have with medicare and the supplemental insurance carrier. It provides assistance in filing claims, preparing reviews and appeals of medicare decisions. The service is extended to the homebound in the manner of home visitations. The program makes clear to the seniors the complicated phraseology of insurance policies so that they can make intelligent choices of the kind of coverage they require at affordable rates.

CENTRAL ESSEX TELEPHONE ALERT PROGRAM

64X This program provides homebound clients with assurance that they are being monitored by a volunteer who checks on them with concern as to their well being on a daily basis. This gives the homebound client security in the knowledge that someone out there cares about them and will come to their assistance should the need arise.

ESSEX ADVISOR NEWSPAPER

The Essex Advisor newspaper was first published 8 years ago in an effort to maintain ongoing communication to the older residents of Essex County.

Today the paper is direct mailed into over 28,000 households ten times each year. The eight page tabloid publication provides readers with information on programs and happenings that will help to make their retirement meaningful and dignified.

Advertising space is available at very competitive rates.

OUR SERVICES INCLUDE:

- DAILY TELEPHONE COMMUNICATION TO THE HOMEBOUND
- HOME CARE SERVICES
- HEALTH INSURANCE CLAIMS & EVALUATION
- LONG TERM CARE PLACEMENT MONITORING
- TRAINING & EDUCATION PROGRAMS
- TRANSPORTATION SERVICES
- VOLUNTEER PLACEMENT
- OVERALL INFORMATION AND REFERRAL

For additional information

Call **673-0640**

Funding to support the services of Senior Service is received from ACTION, The Federal Volunteer Agency; Title IIIB of the Older Americans Act through grants from Essex County and Hudson County Divisions on Aging; Jersey City; The United Way of Bloomfield, Essex and West Hudson and North Essex; The National Council of Jewish Women, Essex County Section; and voluntary contributions from residents and businesses in the communities we serve.

Senior Service
is a trade name for

SENIOR SERVICE CORPS, Inc.
439 Main Street
Orange, New Jersey 07050



THE PATH
TO
INDEPENDENT
LIVING
FOR
OLDER ADULTS

SENIOR SERVICE, founded by the Essex County Section of the National Council of Jewish Women in 1962, is the largest agency serving older adults in the State of New Jersey reaching over 45,000 individuals every year. Volunteers and professionals work together to provide direct services which enable older persons to live independently in the community of their choice.

Senior Service is a private, not-for-profit organization directed toward improving the quality of life for older adults through direct services coordination of programs, education and advocacy.

EDUCATION AND TRAINING

Pre-Retirement Planning

For those 50+ dealing with all aspects of retirement including: psychological issues, financial planning, legal concerns, housing, Medicare, Medicaid and Medigap insurance, senior entitlements and leisure time activities. Can be tailored to individual groups as to time, place, length and number of sessions.

Aging and Sensitivity to Aging Seminars

Programs to train personnel who deal directly with senior citizens to help in understanding their special needs and working effectively with them.

Educational seminars and workshops on issues affecting the elderly and their families including support groups for caregivers, resources in aging, nursing home placement and intergenerational linkage.

Employee Assistance Programs

Consulting assistance to Employee Assistance Personnel in providing support and information to their employees who may be under stress due to the responsibilities of caring for a frail, elderly parent.

RETIRED SENIOR VOLUNTEER PROGRAM (RSVP)

The Retired Senior Volunteer Program (RSVP) provides opportunities for people, age 60 and older, to give of their time, expertise and experience to fill the needs of human service agencies and other community service groups.

Over 1,700 volunteers are matched with agencies at over 150 locations in Essex County.

A Business and Professional Group, with a Speaker's Bureau, recruits volunteers who have managerial, business or professional backgrounds to assist community groups with specific needs.

All RSVP volunteers receive excess personal and accident liability insurance and reimbursement for travel costs

HOME CARE & RESPITE CARE

The Home Friend Program provides basic chore services to homebound elderly and handicapped residents. On a regular schedule the Home Friends will perform light housekeeping, laundry, shopping and meal preparation for clients.

In order to qualify for the service clients must be in need of assistance and meet Title XX guidelines.

Respite Care Services are available to family caregivers for periods ranging from 4 hours to overnight. Fees are based on ability to pay and vary according to income levels.

NURSING HOME ADVOCACY CENTER

The Nursing Home Advocacy Center serves as a resource center for individuals considering placement in a long term care facility. Counseling is provided on types of care, services, fees, accommodations, staffing, admission policies, Medicare and Medicaid coverages.

The Center also serves as an advocate for the institutionalized older adult to correct, protect, and or enhance their rights in long term care facilities.

A consumer guide to nursing homes in Essex County is available upon request.

SENIOR COMPANION PROGRAM—SCP

SCP is the only program of its kind in the State of New Jersey. Designed to provide additional income for low income older persons the program (by Congressional legislation) is allowed to pay a tax free stipend to older persons who qualify to serve as senior companions.

The companions provide basic housekeeping, meal preparation, shopping assistance and general socialization for their clients.

This program presently serves towns in Hudson, Bergen and Essex Counties.

SENIOR TRANSIT SERVICES

Senior Transit coordinates a number of buses and vans to provide daily nutrition transportation in Newark, East Orange, Orange and Montclair. Shopping service is available to older residents of the Ironbound and Central wards in Newark, Fairfield, North Caldwell, Irvington, and parts of Orange and Maplewood.

Service to handicapped residents is provided for job training and private sector employment.

INFORMATION CENTRAL

A countywide hotline service to assist older persons and their families in locating resources to solve their respective problems.

1X
19
5

CALL 463-4442
MONDAY THROUGH FRIDAY
8:30 a.m. to 4:30 p.m.

AN OUTREACH WORKER WILL CONTACT YOU
AS SOON AS POSSIBLE.

WE LOOK FORWARD TO SERVING YOU.

Gene Hilot
OUTREACH WORKER

463-4442

COPSA

**Comprehensive
Services
On
Aging**

463-4442



University of Medicine and
Dentistry of New Jersey
Community Mental Health
Center at Piscataway
671 Hoes Lane
Piscataway, NJ 08854-5633

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COPSA is a service to older people and their families offered by the Community Mental Health Center at Piscataway. All COPSA services are confidential.

THE COPSA OUTREACH PROGRAM enables seniors to overcome isolation, make full use of benefits and community services, find appropriate living arrangements and continue to lead active and productive lives. COPSA also provides support & education to the immediate and extended family members of senior adults.

OUTREACH SERVICE AREA

Piscataway, Middlesex, Dunellen, New Brunswick, Edison, Metuchen, Highland Park, North Brunswick & South Plainfield.

OUTREACH SERVICES OFFERED

HOME VISITS TO SENIORS
INFORMATION & REFERRAL
LINKAGES WITH SOCIAL, HEALTH AND
NUTRITION PROGRAMS
APPLICATION/FORM ASSISTANCE
COMMUNITY EDUCATION
HOUSING INFORMATION
INDIVIDUAL/FAMILY COUNSELING
SUPPORT GROUPS

For **OUTREACH & FAMILY COUNSELING**
Information Call: (201) 463-4442

HOUSING SERVICES: Due to health, social and financial reasons, the housing needs of the elderly often change. The COPSA SHELTER CLEARINGHOUSE provides the following information regarding housing throughout Middlesex County: Rental Assistance Information, Senior Citizen Housing & Nursing/Boarding Home Information.

For **HOUSING** Information Call:
(201) 463-4767

The **COPSA INSTITUTE FOR ALZHEIMER'S DISEASE AND RELATED DISORDERS** provides the following state-wide services to persons with dementia, their families and the professionals who work with them:

RESOURCE CENTER
DIAGNOSTIC CLINIC
DAY HOSPITAL PROGRAM
CONSULTATION & EDUCATION SERVICES

THE COPSA DAY HOSPITAL is a special day program (9:15 am - 3:00 pm weekdays) for individuals with Alzheimer's Disease and related disorders which result in cognitive impairment.

For **DAY HOSPITAL or INSTITUTE**
Information Call:
(201) 463-4430

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47 Old Post Road
Edison, NJ 08817
March 13, 1989

To All Americans:

**NEW JERSEY AND THE BICENTENNIAL OF THE U.S. PRESIDENCY.
THE 200TH ANNIVERSARY OF THE U.S. PRESIDENCY AND NEW JERSEY.
"GENERAL WASHINGTON" TO PASS THROUGH NEW JERSEY ON WAY TO
HIS INAUGURATION IN NEW YORK CITY.
NEW JERSEY AND THE PRESIDENTIAL BICENTENNIAL.**

The Bicentennial of the U.S. Presidency will be observed during April of 1989. New Jersey will play a prominent place in this event as it did in April of 1789 when President-elect Washington passed through this state en route from his home in Virginia to New York City where the inauguration was to take place. He spent three days and two nights in New Jersey, more time than in any other state on this journey.

The Electoral College had met on February 4, 1789 and gave a unanimous vote for George Washington as President of the new nation. The official notification reached the General at Mount Vernon on April 14 1789. With only two days preparation, he left his plantation on April 16 for the trip to New York City where he was to be sworn into office. It had not been a good year economically and he had to borrow \$ 500 (at 6% interest) for the trip. He traveled by coach and was accompanied by Charles Thomson, Secretary of Congress, and Col. David Humphreys, wartime staff member and close friend.

The first stop was nearby Alexandria where there was a public dinner. Then on to Baltimore, Wilmington, Chester, across the Schuylkill River to Philadelphia and across the Delaware River to Trenton.

In the afternoon of April 21 he crossed the Delaware at present-day Morrisville and rode triumphantly by horseback into Trenton. He was met by Philemon Dickinson, Richard Howell (later Governor). Rev. James Armstrong, David Brearley and Dr. Isaac Smith. Many people from near by towns along the river came to greet him. A salute was fired by Captain Bernard Hanlon's battery, and a troop of horse led by Captain Carle, with infantry companies of Captains Hanlon, Munn, Claypoole and Collins, escorted the President-elect into Trenton. At 3 P.M. they proceeded up Ferry Road and over the bridge at Assunpink Creek. Here the ladies of Trenton had prepared an arch of evergreens and laurel, twenty feet high and wide, to honor Washington in appreciation of his Revolutionary War victory. The floral inscription read: "The Defender of the Mothers will also Protect the Daughters." Six girls sang an ode "Welcome, Mighty Chief." [Nathaniel Currier, the New York City illustrator and lithographer, portrayed the scene in several variations of "Washington's Reception by the Ladies, on Passing the Bridge at Trenton, N.J., April 1789, on His way to New York to be Inaugurated First President of the United States." The lithograph first appeared in 1845].

Washington proceeded to Samuel Henry's City Tavern , at the corner of Second and Warren Streets (now the location of New Jersey National Bank), Where he dined and held a reception. He spent the night of the 21th at Vandergrift's Tavern. Several nineteenth century accounts had stated that Washington left the place late that afternoon for Princeton. But a letter from a Jane Ewing of Trenton, dated April 23, 1789, indicates that he stayed overnight in Trenton on April 21.

Before Washington retired for the evening, he wrote a letter to the people of Trenton expressing his impressions of the reception there:

April 21, 1789.

General Washington cannot leave this place without expressing his acknowledgements to the Matrons and Young Ladies who received him in so Novel & Grateful a manner at the Triumphal Arch in Trenton, for the

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exquisite sensation he experienced in that affecting moment. The astonishing contrast between his former and actual situation at the same spot-the elegant taste with which it was adorned for the present occasion- and the innocent appearance of the white-robed Choir who met him with the gratulatory song, have made such impressions on his remembrance, as he assures them, will never be effaced.

Washington left Trenton early on the morning of the 22nd and proceeded to Princeton through Lawrenceville (Then called Maidenhead). He was greeted in the college town at Nassau Hall by the Rev. John Witherspoon, President of the College of New Jersey. Washington probably breakfasted in Princeton, either at Nassau Hall or at Witherspoon's farm, "Tusculum," a mile north of the village. Soon at Nassau Hall or at Witherspoon's farm, "Tusculum," a mile north of the village. Soon after he took the road (now route 27) through Kingston to New Brunswick.

The journey was tedious and the roads were rough and dusty. One observer noted that the dust on the General's clothes made their true colors impossible to determine. Farmers and gentry greeted him along the roadway and at crossroads. His reception was "electrical" in the words of a later historian. Washington knew New Jersey well, having spent much time here during the late Revolution. And Jerseymen knew him, as many of them had served with him during those years.

Washington was met in New Brunswick by Governor William Livingston. Church bells rang out and cannons were fired. The President-elect dined in late afternoon at the home of Major Thomas Egbert, but did not spend the night there. By 5 P.M. he was on his way to the village of Woodbridge.

Crossing the Raritan River, Washington, Governor Livingston and party were in Piscataway Town (now Highland Park and a short distance beyond, Edison). They would have passed by St. James' Anglican Church as they proceeded down the what is now Woodbridge Avenue, and then Old Post Road, through Bonamtown to Woodbridge.

In Woodbridge, Washington spent the night at John Manning's Cross Keys Tavern, then located at the northwest corner of Main Street and Amboy Avenue. The building is still standing (1989), moved back from the original location and greatly altered as a dwelling.

On the morning of April 23 Washington left Woodbridge with a number of military companies (Captain Condict's of Newark,

Captain Wade's of Connecticut Farms [Union] and Captain Meeker's of Elizabeth). The group moved over the road to Lower Rahway and then to Elizabeth. Captain Matthias Ogden, commanding the First Regiment, Continental Line of New Jersey, met Washington and escorted him to Samuel Smith's Red Lion Tavern, located at the corner of Broad Street and Rahway Avenue, where he met a number of prominent citizens. He then went to dinner at Boxwood Hall, the Elias Boudinot mansion on East Jersey Street. A committee from the Congress met him there. Washington and his party embarked for New York City at Crane's Ferry, Elizabethtown Point. A large decorated barge, rowed by thirteen sailors, was ready for the trip up the Kill Van Kull to Manhattan Island. Vessels in the bay, including the Spanish man-of-war "Galveston," saluted the barge with music and artillery. a

Governor George Clinton of New York received Washington at Murray's Wharf, at the foot of Wall Street, between 2 and 3 on the afternoon of April 23. The inauguration of the first President took place seven days later, on April 30, 1789, on the balcony of Federal Hall.

A Washington Inaugural Bicentennial March Committee, formed under the Constitutional Bicentennial Commission of New Jersey, has been planning a re-enactment of the journey of George Washington through New Jersey on April 21, 22 and 23, 1989. Plans are already underway for events in Trenton, Princeton, New Brunswick, Highland Park, Edison, Woodbridge, Rahway and Elizabeth.

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PLAINSBORO SENIOR CITIZENS
Plainsboro, New Jersey 08536

March 12, 1989
Issues and Concerns of
Senior Citizens

Ms. Anita Saynisch
State House Annex
Trenton, N.J. 08625

Dear Ms. Saynisch:

I am president of the Senior Citizens Club of Plainsboro, N.J. with over 100 members. These members are concerned in two areas that affect their ability to maintain their economic level. One is the high cost of schooling as reflected in their property taxes and the other is the steadily increasing cost of medical care.

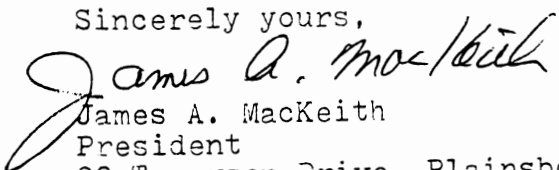
The majority of our Seniors are retired and living on a fixed income whose value is steadily decreasing in our ever expanding economy. The greatest percentage of our property taxes go to the support of our school system in the Plainsbor-West Windsor Regional School District. That percentage increases each year with no end in sight. Other states have recognized the severe impact this has on the ability of their seniors to cope with the problem and have taken steps to minimize the effect.

Texas has fixed the property tax for its seniors at the amount they are paying at the time they become seniors or when first acquiring property after they are seniors. In other jurisdictions, I believe Connecticut is one, seniors are relieved of all school taxes once they attain that status. Either system would enable our seniors to remain in the state with dignity and at their present economic level.

The second concern is primarily a Federal problem, but it has a related state problem. In a recent article in the Newark Star-Ledger it was pointed out the state has imposed a surcharge on hospital charges as well as various taxes that amount to 35% of a hospital's bill. The surcharge is stated as imposed to help defray the cost of indigent hospital care. Our seniors believe this to be discriminatory in that the charge should be borne by the general public as a welfare item and not merely against those hospitalized who are predominately seniors. The surcharge and the various taxes should be covered in the general taxation program and paid by all persons who are taxed in the state. This reduction in hospital costs would also be reflected in a reduction in the cost of hospital insurance for all residents in the state regardless of age.

It would be appreciated if you would bring these problems to the attention of the Senate Committee on Aging.

Sincerely yours,


James A. MacKeith
President

33 Tennyson Drive, Plainsboro, N.J. 08536
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