



# New Horizons

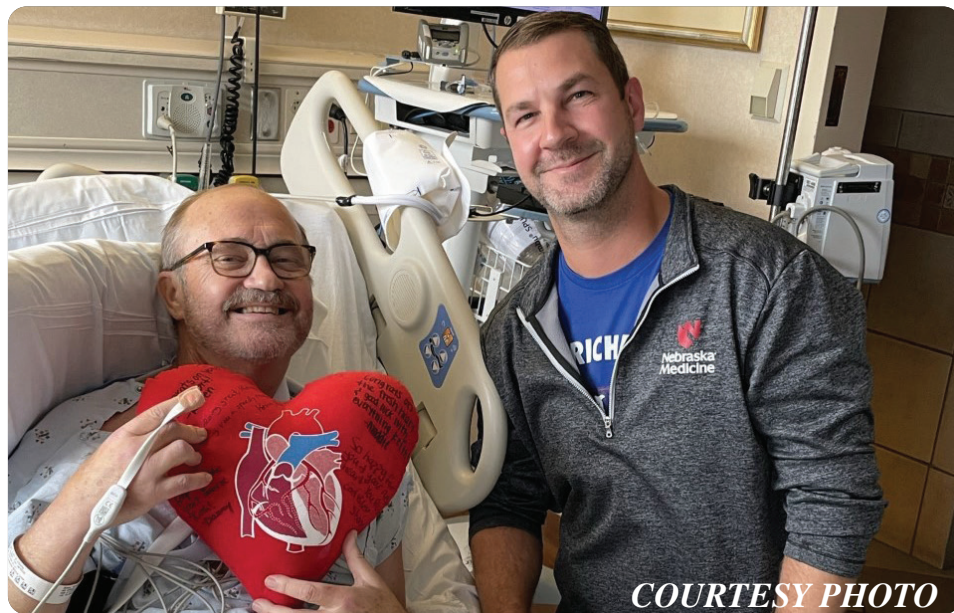
## He's back practicing medicine, delivering babies, sharing his story

*EDITOR'S NOTE: This story reported by New Horizons contributing writer Leo Adam Biga uses excerpts from a book he co-authored with its subject, Dr. Keith Vrbicky.*

By Leo Adam Biga

Life was good for Dr. Keith Vrbicky as Labor Day 2021 approached. Little did he know the greatest trial of his life soon awaited. The board-certified Norfolk OB/GYN physician with 13,000-plus newborn deliveries and countless surgeries to his credit has been a beloved, trusted figure in that northeast part of the state. In a career dedicated to health and medical education, he's shared best practices with residents, interns and peers, advised patients, and connected colleagues over four decades.

The Creighton University and Creighton Medical School graduate was a Creighton faculty member and winner of that school's top teaching prize. He moved to Norfolk in 1984 to join a CU mentor, the late Dr. Patrick Heffron, in private practice. Vrbicky expanded services by creating an urgent-care and family clinic. Always on



COURTESY PHOTO

the cutting edge, he launched a telemedicine company, AET, with local, national and international clients. More recently, he added a mobile health clinic. Serving others stems from childhood, when he worked in his family's Clarkson, Nebraska general store. In choosing medicine he heeded the advice of town doctor, John O'Neill. Vrbicky, a devout Catholic who considered the priesthood, has long viewed his work as vocation and ministry. He

volunteers with his church and the Knights of Columbus.

Things could not have been better heading into fall 2021. Even the pandemic was easing. This husband and father of six enjoyed a thriving practice and business. He and his wife Karyn, a former registered nurse, were happy empty-nesters and doting grandparents. Their life together revolved around routines and traditions that gave them comfort, none more than their family

and faith. On the near horizon was the marriage of their youngest, Michaela, and the onboarding of Keith Jr. into his father's practice.

Then a personal health crisis that no one, least of all Vrbicky himself, saw coming turned his idyll into nightmare. In less than a month he went from seemingly perfect health to a diagnosis of acute congestive heart failure to getting placed on the transplant list to being matched with a new heart to undergoing a transplant at Nebraska Medical Center in Omaha. Being a transplant recipient is humbling. Vrbicky never forgets he's alive today only because someone registered as an organ donor and then died, their heart harvested and transplanted in place of his own within a critical span of time. His donor remains anonymous.

The sheer magnitude of it all has given him a deeper understanding for how precious life is and for how interconnected we all are. He shares his story in the new memoir, "Forever Grateful: The Gift of New Life from Organ Donation" (Graham Publishing Group), at

--Vrbicky continued on page 9.

## Older adults help train fledgling medical pros

By Andy Bradley  
Contributing Writer

These could be scenes right out of Doogie Howser, M.D., or St. Elsewhere. Maybe even Grey's Anatomy. Young medical students or junior residents tested to the max by overbearing and highly demanding attending physicians. Only, in the case of those pursuing a medical degree at the University of Nebraska Medical Center (UNMC), the most impactful teachers may not be professors at all. Instead, ordinary folk playing the role of patients and caregivers are employed to act life-like scenarios intended to test the knowledge, skills and bedside manner of those who aspire to the title of "Doctor."

A team of 75 amateur actors, called "Standardized Patients," are the keystone of The UNMC Human Simulation program. Standardized patients portray not just persons

seeking treatment, but family members and others involved with the care of the "patient." And because many real-life patients and caregivers are older, a comparable percentage of the part-time standardized patients employed are seniors, including several in their 80s.

Human simulation sessions take place in and around the new UNMC Davis Global Center on the northeast corner of 42nd and Leavenworth Streets.

The program offers learners a meaningful way to put book learning into practice before coming face-to-face with actual patients.

"If you think about all the classes someone has to take and then putting that into practice in front of a real patient – that is a big step," said Sarah Kriss, who has managed the Human Simulation program for five years. "So instead of learning on the

--Simulation continued on page 8.



## Whispering Roots grows

Whispering Roots, Inc. is an award winning, IRS certified 501(c)3 organization that is dedicated to bringing healthy fresh food, nutrition education and innovative agriculture techniques. Learn about how Whispering Roots makes an impact in the community on Page 16.

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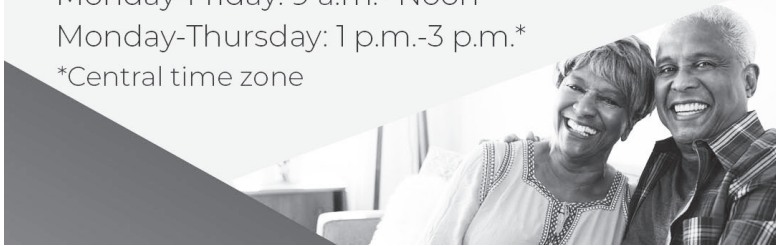
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## Elder law specialist relates to the ravages of Alzheimer's disease

By Andy Bradley  
Contributing Writer

David Thompson knows first hand the challenges seniors face in later years. As an elder care attorney, he helps families every day navigate cumbersome legal hurdles. But beyond his professional experience, Thompson knows first hand the challenges of being that family member – his mother has Alzheimer's disease and lives in a memory care facility. She was diagnosed with Alzheimer's in 2016, moved into assisted living in 2019, then memory care in 2022.

An elder law associate attorney for Burnett Wilson Law, Thompson spoke at a symposium May 26, sponsored by the University of Nebraska at Omaha Department of Gerontology.

Prior to his mother's diagnosis, "dementia is not something that I ever thought about much," Thompson told the audience. "There are still moments with my mother when I think to myself this is not real. This is not happening. I'm going to wake up and I'm going to realize that this was just some episode of a 9 p.m. medical drama, not someone's real life, and certainly not mine."

Because Thompson witnesses the ravages of Alzheimer's both professionally and personally, he has dedicated his professional career and personal time to addressing the torments of the disease. He serves as president as the Alzheimer's Association, Nebraska Chapter. He is also the vice president of the Aging with Spirit Foundation, the non-profit arm of the Eastern Nebraska Office on Aging, and serves on the Governor's Alzheimer's Disease and Other Dementia Advisory Council.

Thompson described his mother as someone who was "too talkative, too energetic, and way too intensely involved with everyone around her to ever succumb to any attempt to rob her of her identity. My mother was, and is, a hundred-watt bulb in a sixty-watt world."

Periods of mental clarity do come and go. "You never know what twists and turns it's going to take," he said. "One of the surprising features of my mother's dementia is how the person she struggles to shine through in moments of star-



COURTESY PHOTO

David Thompson (left) and his mother Nancy, who was diagnosed with Alzheimer's in 2016, pose for a picture.

ting lucidity."

These moments are intertwined with many where she doesn't recognize folks around her, doesn't recognize what a television is, let alone what a remote is for. "Just a few months ago, my mother would stare at the blank wall and tell me that the television wasn't working – only we had taken the television out of her room months earlier."

He described a particularly poignant encounter. "I was sitting on the couch with her in her well-lit room with an Easter bouquet wilting in the vase on the table in the corner. She turned to me and said, 'you know, I just don't understand it. How could someone like me, who spent their whole life taking care of other people, end up alone with nobody to take care of me?'"

"So my first thought was, Hello. What do you think I'm doing here?"

"This made me think that my mother does in fact have someone taking care of her. Indeed, she has a whole team of people taking care of her. In addition to me, there are my mother's two closest friends as well as the doctors and occupational therapists and pharmacists and nurses and all sorts of people that you end up talking to on a regular basis.

"But the most important among all these people are the staff of the facility, from the director of the memory care unit to the activities director, to the

culinary services director, to the med aides who come in three times a day to give her medications, to the people who do the two-hour bed checks at night – all of these people have an incredible impact on someone's life, and it definitely means a lot to my mother. I know that she benefits. One of her favorite people is actually the maintenance man. She loves it when he stops by."

Thompson described how important even short, sporadic encounters with care givers are in the lives of persons living in care facilities. He referenced recent research indicating that those informal interactions with facility staff or volunteers can be every bit as meaningful and rewarding for residents with dementia as relationships with family and close associates. Researchers from the University of Michigan discovered that the number of informal ties and relationships (researchers called these "weak ties") were actually more closely correlated with happiness and well-being than the number of close ties.

"It's not that those ties with family members and intimate friends aren't important. But the people we encounter every day (i.e. weak ties) – the cashier, the security guard you pass as you enter a building, the person at the reception desk – these are the people who have it in their power to make a positive difference

--Thompson continued on page 3.

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# Looking forward to programs at AARP NE Information Center

By Tony Harris  
AARP NE Information Center



The Volunteers at the AARP NE Information Center welcome you back! They are now in their fourth month of being re-open and getting back to a “new normal.”

Following a successful program in June, AARP set the date of Wednesday, July 19th for their next program.

AARP is very pleased to announce that two individuals from the Eastern Nebraska Office on Aging (ENOA) will be available to speak. The topic will be, “Important things to know about the wide variety of services provided by the Eastern Nebraska Office on Aging.” Two speakers from ENOA will come to the AARP Information Center at the Center Mall – MaryAnn Eusebio, Division Director for Information and Assistance/ADRC and Renee Lehnen, Information and Assistance Resource Specialist. Many people simply do not know the extent of human services available to them from ENOA.

This will be a great way to update your knowledge of how to access services for yourself, a friend or a loved one.

The program will begin at 1:30 p.m. on July 19th. The Information Center asks that you call their new telephone number – 402-916-9309 to get more information or to register if you plan to attend. Following the pro-

gram, everyone is invited to stay for light refreshments and coffee or a soft drink and visit with each other and/or with the presenters. This will be an excellent program and they urge you to attend.

An AARP Driver Safety Class was held at the Information Center in June. Another Driver Safety Class is now scheduled for Thursday, July 20. The cost to AARP Members is \$20.00 and for non-members is only \$25.00. Checks and cash are accepted but no credit cards. Please bring your AARP Membership Card if you have one. Payment is due on the day of the class. This class runs from 10 a.m. until 2 p.m.

Class participants are requested to arrive by 9:45 a.m. to get checked in. Many insurance companies provide a discount for taking this class. Check with your vehicle insurance provider to see if they will offer you a discount. Even if your insurance provider does not offer a discount, you will learn or re-learn critical information.

You will need to register in advance for this class. Please call the Information Center telephone number – 402-916-9309 or you may also call 402-210-3472 for more information or to register.

Anyone may use their “lending library” card and

check out a book or two to bring back when you have finished reading it.

The Information Center Volunteers are being trained to use the AARP Volunteer Portal, which is full of information and news – and a way to stay in touch with each other. Our Nebraska Portal Champion has been offering these classes.

On a sad note – they lost an Information Center Volunteer in June. Edna passed away and had volunteered with AARP for 18 years. She will be sorely missed by everyone who was blessed to know her and work with her. She worked right up until near the end of her life. She was a model volunteer.

AARP looks forward to your telephone calls and your attendance at our July Driver Safety Class. They sincerely appreciate all of the volunteers and the support they get from their AARP NE State Office in Lincoln.

The office hours are Tuesdays, Wednesdays and Thursdays from 10 a.m. until 4 p.m. They have a lot of new and updated brochures and pamphlets ready to offer you when you come to visit – plus the AARP Bulletin and AARP Magazine – both of which are filled with great information. Come to the Center Mall, Suite 220, and visit and have a cup of coffee or a soft drink.

For more information call the Information Center at 402-916-9309.

## --Thompson continued from page 2.

in someone’s life every day. This is even more true in the case of seniors with dementia. With dementia patients, the boundary between close ties and weak ties breaks down, for the simple reason that a person with dementia often doesn’t remember who you are.”

Thompson warned that as society ages, and more seniors and their families contend with dementia, the country will be woefully short of the services, resources and facilities needed to care for them.

“We are facing a crisis, a demographic crisis, for which we are not prepared,” said Thompson, adding that in about 10 years, for the first time in history, there will be more Americans over the age of 65 than under 18. That’s already true in Nebraska, where 15 percent of the population – 293,000 – is over 65. Among the 77 million baby boomers in this country, 10,000 of them turn 65 every day. One in three will eventually experience some degree of dementia.

Thompson said the fastest growing age demographic is people over 85, many of whom will eventually require some level of residential care. Yet the number of assisted

living facilities and nursing homes is not keeping pace. “About 25 percent of Americans will require nursing home care at some point. We don’t have the staff. We don’t have the training. We don’t have the beds. We don’t have the facilities to handle what’s coming.”

Instead, nursing homes are closing. “I think we’ve closed six of them in the last 12 months in Nebraska,” said Thompson. “We’re closing nursing homes at the very moment when we need nursing homes the most.”

He said society needs to consider the needs of an aging America in every public policy discussion. “Every conversation we have, whether it’s housing, food security, transportation, urban planning – all of those conversations should factor in the reality of the role of seniors in our society, and how that role is going to expand over the years.”

Thompson said his life’s mission is to create awareness and encourage advocacy surrounding these issues. “It’s going to drive my work from now on. It’s not just more beds. It’s more everything. It’s more training. It’s more education. It’s more support. It’s more pay for health care workers. Yes, it’s everything.”

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## New Horizons

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# Exploring Medicare enrollment options

By Mike Carsey  
Volunteers Assisting  
Seniors

Tom came into the Volunteers Assisting Seniors office looking concerned, confused, and a bit on edge.

"I think I may have messed up my Medicare enrollment and I am concerned about the penalties I keep hearing about. Can you help me? Why does this have to be so complicated?"

Our counselors hear this type of question quite often accompanied by a little panic in the voice of the client. If this is you, you are not alone.

Yes, there are penalties involved if a person does not enroll in Medicare at the correct time.

What are the enrollment options provided by Medicare and what are some of the common questions people have?

Medicare provides several opportunities to enroll. These enrollment windows or scenarios are offered by Medicare to accommodate the wide variety of circumstances encountered by Medicare beneficiaries.

The SHIP/SMP certified counselors at Volunteers Assisting Seniors can help you develop a plan of action specific to your needs. Our counselors are not insurance agents. We provide free, unbiased counseling services to Medicare eligible people in our community.

Have you chosen to receive your Social Security benefits before age 65?

Enrollment in Medicare Parts A and B is automatic for most people who receive Social Security benefits before age 65, Social Security

disability before age 65, or Railroad Retirement Board benefits. You will receive your Medicare card enrolling you in Part A and Part B. You do not have to accept enrollment. If you choose not to enroll you must respond to Social Security and decline enrollment.

Do you want to begin Medicare when you turn 65 and you have not begun to receive Social Security benefits?

People who are not receiving Social Security benefits have the option to enroll in Medicare during their Initial Enrollment Period (IEP). This enrollment must be completed online. The enrollment is not done automatically by Social Security/Medicare. Our counselors can provide written directions and information about Medicare online enrollment.

The IEP is a seven-month period. The seven months include the three months before your 65th birthday month and the three months after. For example, if a person's 65th birthday month is January, the IEP looks like this:

October, November, December, January, February, March, April.

In this example, a person wanting to begin Medicare the first day of their birthday month, should enroll during one of the first three months of their IEP. Volunteers Assisting Seniors recommends people begin the enrollment process between 60-90 days before the desired Medicare effective date.

They may enroll up to three months after their 65th birthday month as well. If



## VOLUNTEERS ASSISTING SENIORS

they choose that option, coverage will begin the month after enrollment.

Why would a person not want to accept the automatic enrollment or use their IEP to begin health coverage using Medicare?

The first reason might be that they are continuing to work and have employer group health insurance for coverage. This coverage may also include family members. If they were to discontinue their employer group health coverage and opt to use Medicare, their family members may lose the coverage provided through their employer.

Second, they have health coverage through their employer, or their spouses, partners, or other family members employer, which is connected to active employment. When comparing Medicare costs and benefits, they find that the health coverage provided by the employer is a better option.

Third, they contribute to a Health Savings Account (HSA) provided by their employer and they want to continue to work and contribute to the HSA after turning 65. People cannot enroll in Medicare and continue to contribute to an HSA without financial penalties on the contributions made after Medicare begins. Importantly, financial contri-

butions made before Medicare begins are not affected.

The financial penalties come from the IRS. If this is your situation, reach out to Volunteers Assisting Seniors for assistance.

Many people choose to enroll in Part A only if they do not contribute to an HSA. Part A is often free, and pays secondary to their employer coverage.

What if I continue to work and want to use my employer group health plan? Or my spouse is working and I am covered on the spouse's employer group health plan? Am I still required to enroll in Medicare?

Not necessarily.

If a person continues to work and is covered by an employer group health plan, they can enroll in Medicare at anytime past the last month of their IEP by using a Special Enrollment Period (SEP). This enrollment can occur up to eight months after the discontinuance or loss of the group health coverage. Most people begin this coverage the month after their group health coverage ends. No one wants to have a period without health coverage if possible. The coverage begins the first of the next month.

How does a person qualify for their Special Enrollment Period (SEP)?

By proving to Social Security/Medicare that they have had continuous health coverage tied to active employment either from their employer or their spouses, partners, or family members employer.

Penalties may occur if enrollment does not take place during the IEP or SEP or that the coverage in place was not tied to active employment.

For example, coverage from COBRA, retiree health plans, VA coverage, and individual health coverage do not prevent penalties for Medicare A and B. The penalties are lifetime penalties and are paid in addition to Medicare premiums.

How can people avoid penalties when enrolling in Medicare?

Enroll at the proper time. Each person has unique circumstances. Medicare is complex but the SHIP/SMP certified counselors at Volunteers Assisting Seniors can assist you in navigating the complexity and help you design a plan of action.

Volunteers Assisting Seniors provides Medicare information to eligible people in Douglas, Cass, Sarpy, Washington, and Dodge counties. In addition, we conduct free Medicare workshops providing comprehensive information about aspects of Medicare enrollment, coverage, and benefits.

Please call our office for more information.

*Volunteers Assisting Seniors 402-444-6617.*

*1941 South 42nd Street, Suite 312 Omaha, Ne. 68105 (The old Center Mall on the corner of 42nd and Center) www.vas-nebraska.org.*

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## Plantar Vibrotactile Stimulation test

James Pierce, who is a doctoral student in the Department of Physical Therapy at the Munroe-Meyer Institute (UNMC), is looking to quantify the effects of vibratory shoe insoles on walking in children and adults with cerebral palsy.

The goal of this research line is to optimize the stimulation to improve walking for individuals with cerebral palsy across the lifespan, and to make the technology low-cost and accessible for daily use in the home.

The experiment will require one visit to the Munroe-Meyer Institute. You (or your child's) visit will last two to three hours, which includes several surveys relating to body perception and fear of falling, being fitted with integrated activity trackers and vibratory insoles, walking on a treadmill, and quiet standing with eyes open and

closed. These tests require you or your child to be able to walk and stand quietly for up to ten minutes unassisted.

They will ask you or your child to participate in a verbal screening interview prior to your visit. You or your child will receive compensation for their participation in the study visits.

To be eligible for this study you must be:

- Diagnosed with Cerebral Palsy (Gross Motor Function Classification System levels I - III) or are Neurotypical.

- Capable of walking unassisted for at least ten minutes (may use an assistive device in daily life).

- Are 6 - 65 years of age.

For more information about the study, please contact: James Pierce, at 402-559-3962 or by email at [james.pierce@unmc.edu](mailto:james.pierce@unmc.edu).

# Updates: Understanding Nebraska's Inheritance Tax Rates, Exemptions

**William E. Seidler, Jr. Seidler & Seidler, P.C.**

Nebraska is among a minority of states that imposes an inheritance tax upon recipients of property from the estate of a deceased individual (the "decedent"). The tax is calculated in a court proceeding in the county where the decedent was domiciled, or, if he or she was not domiciled in Nebraska, in the county in which he or she owned Nebraska real property. The tax is due within one year of the date of the decedent's death. An attorney must file the petition to determine the tax. A county court judge must sign an order regarding the tax. Notice of the tax proceeding must be sent to the Nebraska Department of Health and Human Services. The tax is a lien on real estate. Issues regarding the tax must frequently be resolved before real estate is sold.

Through a 2022 amendment to the Nebraska statutes governing inheritance taxes, the unicameral increased exemption amounts and, in certain instances, lowered tax rates for death after January 1, 2023. Rates and exemptions differ depending on whether transfers of property are made to immediate relatives, remote relatives, or unrelated parties. No tax is imposed on surviving spouses, persons under twenty-two years of age, or gifts to religious organizations and federally tax-exempt entities.

## IMMEDIATE RELATIVES

Immediate relatives—parents, grandparents, siblings, children, descendants born naturally or legally adopted,

and their spouses—receive the most advantageous exempt amount and tax rate. If the decedent acted as any person's acknowledged parent for a period lasting at least ten years, that person is also deemed an immediate relative.

The exempt amount for immediate relatives of decedents dying after January 1, 2023 is one hundred thousand dollars. This represents a significant increase relative to the previous amount of forty thousand dollars, which continues to apply in the case of decedents dying prior to 2023.

The inheritance tax rate is fixed at one percent of the clear market value of property received in excess of the applicable exempt amount. Any interest in property valued at less than or equal to the applicable exempt amount is not subject to tax.

## REMOTE RELATIVES

Remote relatives—uncles, aunts, nieces, nephews, descendants born naturally or legally adopted, and their spouses—are taxed at a higher rate and receive a lower exempt amount compared to immediate relatives, but the 2022 amendment adjusted figures in their favor.

The exempt amount for remote relatives of decedents dying after January 1, 2023 is forty thousand dollars, up from the previous amount of fifteen thousand dollars, which continues to apply if a decedent died prior to 2023.

The inheritance tax rate for remote relatives of decedents dying after January 1, 2023 is eleven percent

of the clear market value in excess of forty thousand dollars. For decedents dying prior to 2023, it is thirteen percent of the clear market value in excess of fifteen thousand dollars. As with immediate relatives, any interest in property valued at less than or equal to the applicable exempt amount is not subject to tax.

## UNRELATED PARTIES

All other parties, those unrelated to the decedent, face the least favorable exempt amount and tax rate, but they still benefitted from the 2022 amendment.

The exempt amount for unrelated parties of decedents dying after January 1, 2023 is twenty-five thousand dollars, with a tax rate of fifteen percent of the clear market value of the beneficial interests in excess of the exempt amount. In the case of decedents dying prior to 2023, other parties are granted a ten thousand dollar exempt amount and face a tax rate of eighteen percent.

## Respite Across the Lifespan

Life can bring on stress for many of us. Finding ways to relieve stress are important to our overall health and well-being.

Caregivers are not immune to this stress.

Please contact Respite Across the Lifespan at edbenett@unmc.edu or 402-559-5732 to find out more about respite services and to locate resources in your area.

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## ENOA

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- \$75 = 17 meals or 3.66 hours of in-home homemaker services or 3 bath aide services for frail older adults.
- \$150 = 35 meals or 7.3 hours of in-home homemaker services or 7 bath aide services for frail older adults.
- \$300 = 70 meals or 14.63 hours of in-home homemaker services or 14 bath aide services for frail older adults.
- Other amount (please designate) \_\_\_\_\_
- Please contact me. I would like to learn more about how to include the Eastern Nebraska Office on Aging in my estate planning.

Traditional funding sources are making it more difficult for ENOA to fulfill its mission. Partnership opportunities are available to businesses and individuals wanting to help us. These opportunities include volunteering, memorials, honorariums, gift annuities, and other contributions.

These gifts are tax exempt.

## Intercultural Senior Center

You're invited to visit the Intercultural Senior Center (ISC), 5545 Center St.

The Intercultural Senior Center facility – open weekdays from 8 a.m. to 4:30 p.m. – offers programs and activities from 8 a.m. to 3 p.m. from Monday to Friday.

The ISC offers a light breakfast, lunch, crafts, health presentations, fitness, language classes, technology, book club, photography club, chair volleyball, gardening and more.

Merrymakers will give a musical performance by Mary Link on July 7 at 12:30 p.m.

The ISC hosts the Farmers Market on July 11 at 9 a.m.

Lunch reservations are due by 9 a.m. A voluntary contribution is suggested for the meal. Please call 402-444-6529 for reservations.

Monthly food pantries are available for adults ages 50 and older.

ISC's SAVE bus (Sustenance Assistance Vitality Engagement), can bring case management services to your doorstep.

For more information, please call 402-444-6529.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_



Please mail your donation with this form to:  
**Eastern Nebraska Office on Aging**  
Attention: Carol Gleason  
4780 S. 131st Street  
Omaha, NE 68137-1822  
(402) 444-6536

Please see the ad on page 3

## Thank you to the New Horizons Club members

\$20

Jeanette Hilton

\$5

Kathleen Koons

### River City Theatre Organ Society

The River City Theatre Organ Society is hosting its annual concert at the Rose Theater, 2001 Farnam St., on Sunday, Aug. 6 at 3 p.m.

Theatre pipe organist Dave Wickerham will be the featured guest performer.

Through Aug. 1, prepaid and discounted tickets for older adults are available via mail for \$15 each by sending a check made out to the RCTOS to RCTOS, 8825 Executive Woods Dr., # 85, Lincoln, Neb. 68512.

Tickets are available at the door the day of the concert for \$20.

For more information, log on to rctos.com (Events) or call 402-421-1356.

### Millard Senior Center

You're invited to visit the Millard Senior Center at Montclair, 2304 S. 135th Ave., this month for the following:

- **July 3:** Begin collecting toiletries for Lydia House
  - **July 4:** Center is closed
  - **July 4-28:** Summer Art Show in Fremont, 92 West 6th Street 5-7 p.m.
  - **July 5:** Board Meeting @ 9:30 a.m.
  - **July 7:** VAS (Volunteer Assisting Seniors) Toni will be discussing Scam and Frauds @ 9:30 a.m.
  - **July 7:** THEOS (To Help Each Other Socially) @ 12:30 p.m.
  - **July 12:** Making clothes @ 10 a.m.
  - **July 14:** Collecting items for a Picnic Basket
  - **July 19:** Annual indoor picnic and basket drawing
  - **July 20:** Benefits of Aging discussion @ 10 a.m.
  - **July 24:** Book Club @ 1 p.m.
- Tai Chi every Mondays and Fridays @ 9:30 a.m.  
MahJongg Wednesdays @ 1 p.m.  
Chair Volleyball Thursdays @ 10 a.m.  
Dominoes Thursdays @ 12:30 p.m.  
For more information, please call 402-546-1270.

### Camelot Friendship Center

You're invited to visit the Camelot Friendship Center, 9270 Cady Ave., for regular activities, which include Chair Yoga, card games, Tai Chi, chair Zumba, Pinochle, 10 Point Pitch, and bingo, this month for the following:

- **July 4:** Center is closed
  - **July 12:** Craft Day – "Learn How to Quill" @ 12:30 p.m.
  - **July 14:** Book Club @ 12:30 p.m.
  - **July 19:** Music by John Worsham performs compliments of Merry-makers @ 12:30 p.m.
  - **July 20:** Jackpot Bingo @ 12:15 p.m.
- Every Wednesday – Chair Volleyball @ 10 a.m.  
Every Monday – Card Game: Manipulation @ 10 a.m.  
Every Monday – Pickleball @ 10 a.m.  
For more information, contact Barb at 402-444-3091 or barbara.white@cityofomaha.org.

### La Vista Senior Center

You're invited to visit the La Vista Senior Center, located at 8116 Park View Blvd. The facility provides activity programs and meals Monday through Friday from 8 a.m. to 5 p.m. Please call 402-331-3455 for general Community Center hours.

# Key considerations when downsizing your house

If you're suffering from too much house, you may be considering a move to a smaller home, apartment, or other senior living arrangement. Whether you have rooms or entire floors you no longer use, a desire for a simpler lifestyle, or would like



**Soucek**

to reduce the costs of having a house with expensive utilities, repairs, and ongoing maintenance, downsizing may be a great option.

However, if you've owned your house for a long time, this process can seem overwhelming.

To ensure a smooth transition, here are five crucial items to consider.

#### • The Location Of Where To Move

The location of your new home or apartment is very important. Knowing about the neighborhood, being in close proximity of a grocery store, church, doctors, social activities, etc. are typically items that most people are concerned about. A convenient location can greatly enhance the quality and enjoyment of life.

I often talk to people that want to sell a house and downsize but stay in their same neighborhood because they like the area of town they're in, but just want a living arrangement that is easier to manage.

#### • Evaluate Your Housing Needs

Moving to a smaller living arrangement requires living with less square feet than you've become accustomed to. How many bedrooms, and room for other activities (like hobbies) do you need? What amount of space is necessary to have the lifestyle you would like, and not create the same issues you currently have?

Two services to consider is contacting a senior placement agent, or other professional to find the right home or apartment, and move manager to help with the transition to a new living arrangement.

A move manager can help by creating a floor plan with your new home so you will know what furniture can be moved, and what other items you will have room for.

#### • Maintenance and Accessibility Issues

One of the biggest benefits of downsizing is reducing or eliminating maintenance and repairs that you are responsible for. Assess items like yard maintenance, snow removal, exterior and interior upkeep, and the availability of services that can take care of items if you would rather not have

to do them yourself.

Accessibility typically is, or will become, a concern for most at some point. I have worked with many individuals that wanted or needed ground floor apartments, or have a building with an elevator to not have to worry about navigating steps.

#### • Financial Considerations

Downsizing certainly can have financial considerations. As mentioned in last month's column, some home owners that have no mortgage payments may be better off financially by staying in their house instead of moving. Others may be better off by not having to incur the higher costs that typically come with owning a house, such as utilities, taxes, insurance, maintenance, and potential repairs.

When looking at the financial aspects of downsizing, factor in the potential sale proceeds of your house or the monthly payments you could receive when selling.

Everyone's situation is unique, so you will want to check your own numbers to determine the best plan for you.

#### • Community And Social Connections

Moving to a smaller home or apartment doesn't mean losing your social connections. As mentioned above, many people that I speak with want to live in the same community so they can keep their social connections, but just want a living arrangement that's easier to manage.

Sometimes downsizing and moving to an apartment community will provide more opportunities for social interaction and allow you to create new relationships.

Selling a house and downsizing from a house you've owned for possibly decades is a significant transition. By considering these key items, you will be much better prepared to make your move.

And, know that there are resources and services such as senior placement agents, move managers and moving companies, downsizing specialists, and real estate professionals to help make a move easier and less stressful.

*Ben Soucek is an author of the book Home Downsizing Secrets, and the owner and founder of Home Downsizing Solutions, a company that specializes in helping home owners transition from their current house to a new home, apartment, or other senior living community for more than 25 years. If you have questions on this subject and/or I can be of assistance, just call or text me at (402)-450-0199.*

## Volunteers needed for research study

Derek Wilson, who is a PhD Candidate of Sociology & Gerontology at the University of Kansas, is looking for older adults who use smart home technology on a regular basis and are willing to participate in interviews related to their experiences.

Volunteers will participate in interviews over Zoom Video Calling that will last approximately 120 minutes but can be split between two separate

interviews.

The experiment involves older adults that use devices in the home, aside from computers or wristwatches, which are connected to the internet and can be operated by voice and/or smartphone. Examples of this technology include Google Nest Devices (doorbells, speakers, thermostats), Amazon Alexa Devices (displays and speakers), Ring Video Doorbells, Smart Lights, Smart TV, or

Smart Appliances (fridge, stove, laundry machines, etc.). Smartphones are not included as smart home devices.

To be eligible you must be ages 60-75 who live in Midwest states surrounding Kansas and use at least two or more devices.

For more information about the study, please contact: Derek Wilson at 913-620-9077 or by email at (derekwilson.ku@gmail.com).

# New vaccination helping prevent RSV in the U.S.

By Lauren Brost  
UNMC Pharm.D.  
Candidate at Kohll's  
Rx Rotation

What is RSV? RSV, respiratory syncytial virus, is a highly contagious virus infecting the lungs and breathing passages in people of all ages.

This is a seasonal virus that usually starts in the fall and culminates in the winter. It frequently causes lower respiratory tract diseases (LRTD) in older adults such as pneumonia, bronchiolitis, or long-term lung or heart conditions. RSV leads to relatively 6,000-10,000 deaths annually among adults 65 years and older in the United States. RSV is additionally very prevalent in children younger than 5 years old, but they generally have a much better recovery rate than the older population.

The FDA panel actively is recommending development of a vaccine that prevents RSV in infants, but as of now, there is no vaccine approved for this age group.

In May of 2023, the Food and Drug Administration (FDA) approved Arexvy, the first RSV vaccine approved for use in the United States. Arexvy was ap-

proved for the prevention of lower respiratory tract disease caused by RSV in individuals 60 years of age and older. This vaccine will be administered prophylactically to prevent the development of RSV-associated conditions which can often-times be fatal.

Arexvy is a single dose (0.5 mL) intramuscular injection similar to a seasonal flu shot. The clinical studies tested participants in age ranges of 60-69, 70-79, and those 80 and older. The most commonly reported local adverse effect was injection site pain (60.9%) with 1% of less reporting swelling or redness.

The most prevalent reported systemic adverse reactions were fatigue (33.6%), myalgia/muscle aches (28.9%), headache (27.2%) and arthralgia/joint pain (18.1%). These were generally mild to moderate symptoms with the only contraindication listed simply as a patient being allergic to any component of the vaccine.

This study excluded participants who were immunocompromised having a pre-existing, chronic, stable disease. Arexvy was found to be 94.6% effective in

those with at least one underlying medical condition. No evidence was detected for interference in immune response to the flu shot, Fluarix Quadrivalent, or Arexvy when given together or one month apart; this vaccine does not contain any preservatives. During the clinical trials, it was found that compared to the control (placebo) group, those who received Arexvy had significantly declined the risk of developing RSV-associated LRTD by 82.6% and declined the risk of developing severe RSV-associated LRTD by 94.1%.

This vaccine is set to become available to the U.S. public before the 2023/24 RSV season. Since the approval of Arexvy, there is a current goal of expanding to ages 50-59 in future trials.

Recently, as of June 7th, the European Commission authorized Arexvy in 30 European countries. The Advisory Committee on Immunization Practices is meeting on June 21st to make recommendations on the appropriate utilization of the vaccine in the U.S. This will likely include when Arexvy will become available to the public, and the duration of its effectiveness.

# Tabitha Hospice receives gold seal accreditation

Tabitha Home Health Care & Hospice, in collaboration with Immanuel, based in the Omaha area, has earned the Accreditation Commission for Health Care's (ACHC) official gold seal.

This achievement represents the exceptional quality and value that Tabitha Hospice offers to its clients and their families.

Receiving accreditation not only means that Tabitha meets and exceeds standards for quality of care, but also recognizes the compassion, commitment and excellence exhibited by members of Tabitha's team.

"Immanuel and Tabitha have a long history of partnership in serving the seniors within our communities," said Eric Gurley, President and CEO of Immanuel. "Tabitha's expertise will join with Immanuel's strong reputation in meeting the needs of seniors and their families, while filling gaps in the continuum of care so needed in life's journey."

Tabitha and Immanuel entered into a joint venture in 2021 to provide Tabitha Hospice services to Immanuel living communities and the Omaha area, with additional plans to expand into Tabitha Home Health Care in the future.

Through this collaboration, Tabitha Hospice has already made an impact on clients

and their families through renowned end-of-life care options.

"Our Tabitha and Immanuel collaboration team is honored and grateful to receive hospice accreditation through ACHC," said Christie Hinrichs, Tabitha President and CEO. "Tabitha Hospice provides life-affirming care that gives clients respect, dignity and choice in their end-of-life journey. Being able to meet clients wherever they call home offers a familiar environment to live out the rest of their days comfortably and with the ability to continue making memories with their loved ones."

ACHC stands as an internationally recognized nonprofit organization and a symbol of quality and excellence since 1986.

*As the state's quality award-winning expert for older adults, nonprofit Tabitha empowers people to live joyfully, age gratefully.*

*Supporting families since 1886 across Nebraska, Tabitha offers a range of services, from results-driven rehabilitation, accessible at-home health care, innovative living communities, resourceful serious illness support and compassionate hospice services. Tabitha is Your Answer; learn more at Tabitha.org.*

## Fremont Friendship Center

You're invited to visit the Fremont Friendship Center, 1730 W. 16<sup>th</sup> St. (Christensen Field). The facility is open Monday through Thursday from 9 a.m. to 3 p.m. and Friday from 9 a.m. to 12:30 p.m.

A meal is served weekdays @ 11:30 a.m. Reservations, which are due by noon the business day prior to the meal the participant wishes to enjoy, can be made by calling 402-727-2815. A \$4.25 contribution is suggested for the meal.

This month's activities will include:

- **July 4:** Center is closed
  - **July 5:** Merry Maker's Presents Music with Louis Watkins @ 10:30 a.m.
  - **July 6:** Nye Presentation from @ 10:30 a.m.
  - **July 7:** Open Game Day @ 10:30 a.m.
  - **July 10-14:** Center is closed
  - **July 18:** Library Book Mobile @ 9:30 a.m.
  - **July 19:** Nye Returns from @ 9:15 a.m.
  - **July 19:** Music with Billy Troy @ 10 a.m.
  - **July 20:** Grab and Go Meals Begin @ 11 a.m.
  - **July 25:** Board Meeting @ 1:30 p.m.
  - **July 26:** Music with Pam Kragt @ 10:30 a.m.
- Tai Chi offered Tuesdays and Friday from 9:15-10 a.m.  
For meal reservations and more information, please call Laurie at 402-727-2815.

*Live life to the fullest, we'll take care of the rest.*



**Florence Home  
Healthcare Center**



**Royale Oaks  
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Providing the very best care for  
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**We want to  
hear from you.**

- Do you have questions about the Eastern Nebraska Office on Aging, its programs, or services?
- Do you have a comment about the agency and how it serves older adults in Douglas, Sarpy, Dodge, Cass, and Washington counties?
- Do you have a story idea for the *New Horizons* newspaper, or would you like to receive a **FREE** copy each month?

Please send your questions, comments, and story ideas to:

**enoa.info@enoa.org**

We appreciate your interest in ENOA and the *New Horizons*.



**--Simulation continued from page 1.**

job with actual patients, we give them the opportunity to learn with practice patients.”

The interactions with standardized patients start soon after the first class in medical school commences, and continues at all stages of their training, including possible residencies and fellowships.

“Within the first couple of weeks in medical school they’re meeting with a standardized patient,” said Kriss, “just to get used to talking with someone.”

These early encounters progress from simple procedures like checking a patient’s reflexes, to more challenging conversations such as confirming a cancer diagnosis.

Learners pursuing careers in every conceivable medical discipline are involved, from future family physicians, internists, obstetricians, psychiatrists and neurologists to physical, occupational and speech therapists, mental health professionals, pharmacists, physician assistants, nurse practitioners – even athletic trainers – the list is extensive. This means the standardized patient must be flexible and adaptable – prepared to mimic a patient with high blood pressure this week, then someone with advanced cancer the next.

The program supports advanced learners as well, including long-tenured professionals who are seeking

ways to enhance their skills and broaden their knowledge.

Think of it as spring training for doctors.

The case scenarios are diverse and often challenging for both the learner and standardized patient.

For example, Bill Rucker was asked to play a father who, for religious reasons, was reluctant to authorize a blood transfusion for his son. The med student practiced how to communicate with empathy and understanding while also stating firmly and under no uncertain terms that a court order could be issued if the father continued to block treatment.

Rucker, who is 83 (and is not the oldest participant) has also played an unconscious man who had fallen from a 35-foot scaffold. In this scenario, six actual trauma doctors engaged in continuing education from throughout the state were in the staged emergency room discussing approaches to the patient’s urgent care.

He has also portrayed a grandfather who just learned his 19-year-old grandson had died while his parents were out of town. How to break shattering news is part of the training and learning experience.

More typically however, Rucker portrays patients with common health conditions. He estimates, for example, that he has received 26 hearts scans in the past several months.

Elisabeth Barrett, the



COURTESY PHOTO

**With the help of older adults, UNMC host, a Standardized Patient or Simulated Participant (SP), which is a person who has been trained to portray the roles of patients, family members, or professionals (confederates) in simulation.**

Marketing and Production Coordinator for the program, described other scenarios, some of which may be videorecorded for education and training purposes. In one case, the patient couldn’t speak after a stroke, and the paramedics-in-training walked through stroke response protocols, which were then incorporated into a training video. The sequence took place in a fully-furnished and equipped apartment at the Davis Center, which is used for realistic training for physical and occupational therapists, home health aides, paramedics, and others.

Mannequins may be used in conjunction with standardized patients, too. They can simulate heart attacks, strokes, even give birth. In one scenario the life-like mannequin was a patient

experiencing a heart attack and medical students were administering CPR. Then, the spouse (a standardized patient) entered the room unexpectedly and descended into paralyzing fear and panic upon witnessing the life-threatening emergency. On the spot, learners had to calm and console the spouse while resuscitating her husband.

Perhaps the most stressful, fearful and realistic scenarios involve domestic violence and active shooters. Standardized patients don body suits, which ooze fake blood and reveal gapping wounds and bruises. The training may involve first responders, tactical response teams, peace officers, and trauma team members.

Since standardized patients are provided details of the case in advance, they can opt out of scenarios they deem too taxing or stressful.

“We need to ensure that they’re comfortable with it,” said Kriss. “A lot of cases we have can be really personal.”

Conversely, learners enter a scenario with a moment’s notice.

Opting out is not an option.

Regardless of the scenario, standardized patients will meet with faculty before the session, so they understand its education objectives, “to make sure they understand what the faculty is wanting them to portray,” said Kriss.

UNMC is recruiting more standardized patients.

“We really need people who care about education and want to have a positive impact on the future of healthcare,” said Kriss. “We look for people who can memorize information and portray that accurately.”

While acting is a part of the job, “we don’t necessarily need people with acting experience because it is not necessarily a performance,” said Kriss. “It’s just an ac-

curate portrayal of a patient or someone who cares about a patient, like their spouse, parents or grandparents.”

She added, “Generally here we are just looking for people who care and can actually put themselves in the shoes of the patient or caregiver.”

“It’s also a way to impact the future of healthcare. That one interaction that the student or learner has with you can potentially stay with them through the rest of their career,” Kriss said.

“It’s a great gig for retirement,” she concluded. Participants typically work a morning or afternoon session at least monthly. Many work considerably more often. “They sign up for whatever they’re interested in and available for.”

New hires shadow experienced standardized patients at least twice. “They just get to observe, to see how it works . . . We want to make sure we set them up for success. There are some people who go through that process and once they’ve seen it is action, decide it isn’t for them. And that’s fine.”

Rucker has participated for about a year.

“I enjoy it immensely. It’s a privilege, an opportunity and a challenge to be in the program,” he said.

He added, “It’s an opportunity to see these people at work and I marvel at what they do.”

Rucker recommends the program for other retirees.

“It’s a way to work with a very well-organized program that is very supportive of the people involved,” he said.

He continued, “I don’t look at it as a job, although I do get paid. That’s the attitude the whole place has.”

To explore the program further, contact Sarah Kriss at (402) 559-8542, or sarah.kriss@unmc.edu. The program’s website is www.unmc.edu/iexcel.

**Come join us as a Senior Companion and bring a smile to a fellow senior in your community!**



**For information to become a Senior Companion Volunteer, call 402-444-6536.**



--Vrbicky continued from page 1.

www.mwhp.com/forever-grateful. He hopes its message of inspiration and gratitude motivates more people to register as donors, to appreciate the power of prayer and family and to recognize the extraordinary care available at the Med Center.

The 186-page book released June 30 online and in bookstores.

### OUT OF THE ORDINARY

The health crisis Vrbicky faced was unusual for several reasons. First, he had no history of heart disease. Second, most heart failure cases become symptomatic years or months before diagnosis. Third, his symptoms did not fit any one disease profile. For example, his arteries were unobstructed – the opposite of what most critical cardiac patients present. He also had no pain. Indeed, the medical team caring for him, first at Norfolk's Faith Regional Health Services where he practices and at NMC, couldn't pinpoint what caused such rapid, severe damage. They just knew his heart was dying from a sudden onset event.

Because there was no buildup, the unfolding crisis took Vrbicky, his family and colleagues aback as if it were a sick joke or bad dream.

"I was busy in my practice, seeing 25 to 30 patients a day in the office, doing about that number of deliveries a month. Performing gynecologic surgery in addition to that," he said. "Outside of work, I had many family, faith and community obligations. Everything was on track, proceeding along nicely. My practice and telemedicine business in full swing. Health-wise, no complaints, no nagging this or that. My energy level high, my personal fitness in peak form.

"Then, without warning, God made me do a serious reset. Take it from someone who's been there, it is the things we never see coming that really put us in our place and force us to take stock. Like everything else, it is what we do with it that counts."

Through the fear and trauma he leaned into loved ones and spiritual beliefs as he surrendered to a situation beyond his control. The Missionary Benedictine Sisters at Immaculate Monastery and Spirituality Center in Norfolk, where Karyn led a prayer chain for him.

The crisis for this doctor-turned-patient started so benignly, so subtly he didn't recognize he was seriously sick at first. Heading into that fateful weekend, he chalked up warning signs to overwork, a cold or mild COVID.

"The Wednesday before Labor Day I woke up in the middle of the night and could not get back to sleep," he recalled, "which is unusual for me. I attributed it to having had a pretty busy week. Duty called me out to the hospital during the night a couple of times to make deliveries, so I kind of brushed off my restlessness and general lethargy to that. But then more out of the ordinary things began happening. My appetite kind of went away. And



COURTESY PHOTO

**Dr. Keith Vrbicky (left) turned patient in late 2021 when diagnosed with acute congestive heart failure, but is back practicing medicine. A July 13 book launch for his memoir "Forever Grateful: The Gift of New Life from Organ Donation" is set for 5 to 7 p.m. at Black Cow Fat Pig in Norfolk.**

then I got congested. I was starting to feel a bit short of breath. I just didn't know what this combination of symptoms added up to, though my inclination was to believe it was a viral bug going around. Given my profile and constitution, I never considered the possibility of a heart problem.

"When you are fit like that or you think you are, you can manufacture a false sense of security and confidence, especially if you are a physician who thinks he knows best. Even for a doc, it takes something extraordinary to shake you out of your complacency. Well, right around the surprise birthday party for my daughter, I could hardly get up the stairs at work that I routinely took with ease, because I was so short of breath. That is when I truly, finally realized, hey, something isn't right here, I need to get this checked out. In fact, I was feeling and looking so haggard by then that I took the nearly unprecedented step of taking a couple of days off."

He went in for an examination right after the holiday. COVID was ruled out and upon further testing he got the shocking diagnosis of acute congestive heart failure. Besides fluid buildup, multiple blood clots clogged both ventricles. For no apparent reason, his heart was failing and his life hanging in the balance.

It all happened so fast that he had precious little time to process it all.

Vrbicky's always considered life sacred. He does not take lightly his role in helping bring new life into the world. Now his own life was slipping away.

To appreciate just how unexpected his predicament was, consider, Vrbicky said, "I was sixty-seven years old and the picture of health. I exercised regularly, riding a bicycle several miles a week. I was free of virtually any medications." Imagine then how strange it was for this robust doctor used to caring for others finding himself a critical care patient dependent on care from others for his survival.

"I went from one day being a highly fit working professional with no history of chronic disease to an acute heart failure patient confined to a bed the next day and from be-

ing the confident physician with answers to the frightened patient with questions."

Just like that, he'd lost all agency.

Teams of doctors scrambled trying to identify what damaged his heart and continued attacking it. He was treated with steroids, scanned, tested, poked, prodded. He underwent a risky heart biopsy. As his heart weakened, he was placed on a balloon pump, then on ECMO. Meanwhile, his other organs were perfused to prevent them from shutting down.

### CONSPIRACY OF HEARTS

Faced with his own morality, it truly became a case of physician, heal thyself by putting faith in the hands of his maker and the physicians and nurses working overtime to keep him alive.

In the tense days and hours that followed, doctors determined his heart was beyond repair and placed him on the transplant list. The culprit: A rare cardiac disorder called giant cell myocarditis that is usually fatal and whose cause is not known.

Less than three weeks from being blindsided by the bad news his life came down to a match being found within 48 hours. He considers it a miracle a match was made in time. He came through surgery in good enough shape that he returned to practicing medicine only months later. He has high praise for the expert, collaborative care that saw him through his ordeal.

"This was truly a conspiracy of hearts that came together to honor the sanctity of life and to ultimately rescue one very frightened man: – me. It started with the physicians and nurses whose diligent, compassionate care got me to the point of being listed for transplant," he said. "Most profoundly, there is the individual who consented to be an organ donor. That person's tragic death provided the heart that allowed me to go on living. Then there is the NMC transplant team that successfully removed the bad organ and inserted the good one. My post-transplant recovery depended on ICU and critical care nurses, techs, and aides whose tough love and tender hearts kept me on track in my recovery."

As a transplant recipient Vrbicky is essentially a critical care patient the rest of his life with all the anti-rejection medications he takes and the blood work he gets done to ensure his heart is healthy. He's grateful for the many prayer warriors who offered up healing prayers and for the many expressions of concern and well-wishes from friends, colleagues, patients, classmates, even complete strangers.

### PAYING IT FORWARD

The life and death equation that made his survival possible nags at him.

"Eventually, my survival depended on someone else dying so that I could get their heart," he said. "If you have not been there yourself, you cannot know the conflicted feelings that bargain elicits."

He concedes a higher power

at work. "I do not pretend to understand why someone else must die for someone else to live. God truly works in mysterious ways. I regard my survival as a miracle or act of divine intervention, pure and simple. By human reasoning, the odds were stacked against things working out the way they did, given how rapid my decline was and the vanishing window of time available for me to remain a viable heart transplant candidate. I believe it was God's plan I experience this, survive it, and use it as a tool for advocacy, information, education, inspiration."

He's uncomfortable with all the attention that attends transplant recipients like himself.

"The real heroes in all of this are the donors. Many of us living with a transplanted organ would not be alive today if not for their gift. Donors often remain unknown to their recipients. Their heroism goes unseen, too. They register as donors without any fanfare and then their donation happens when they are dead. It is up to us recipients to honor them whether we know their identity or not. One way to do that is through prayer."

He tries not letting a day go by without acknowledging who made living possible.

Said Vrbicky, "Every day I pray for my donor and their family. I thank them and God that for some reason this little miracle happened, that I could get a heart so fast when I needed it to stay alive. I do not take it for granted one second of any day. Because of this gift, I am living life with an attitude of gratitude more than ever before. It is a prescription for life I recommend."

Even though he's a physician, Vrbicky gave little thought to his heart until something went wrong with it. That's true of most of us, which is why he's also using his platform to educate the public about not only heart health but overall health, encouraging folks to stay up to date with their check-ups and screenings.

"I will never think about the human heart the same way again," he said. "How can I? Beating inside me is another person's heart given freely so that I might live."

He emphasizes no one's immune from a health crisis.

"If it could happen to me, it could happen to anyone," he added, "and it is happening to people right now. Looking at it through a physician's eyes, I was never sick a day in my life and then all of a sudden a life-threatening event took me down, nearly for the final count. It is crazy how things change so fast. I want to raise awareness of the fact of how your health can change in a New York second, because it did for me, and if it could for me then it can for anybody."

He's using his personal experience as testimony for us to be stewards of our own health. As a transplant recipient, he embodies the gift of new life. His "Forever Grateful" book the latest expression of a lifelong mission to advocate, educate and inspire.

## Volunteer Connect offers a variety of opportunities

**D**o you have some spare time, a skill to share, and wish to contribute to your community? Private and non-profit agencies are looking for your help.

Please contact Tia Schoenfeld with the Eastern Nebraska Office on Aging's Volunteer Connect program at 402-444-6536, ext. 1045 for more information on the following volunteer opportunities:

- Quilters to create 'Busy Lap Blankets' for Duet residents, at their Winter Extravaganza.
- Knitter to create knit prayer shawls, hats mittens, for Duet residents, at their Winter Extravaganza.
- Volunteers to write greeting cards of encouragement to residents in skilled care assisted living facilities and Meal of Wheels recipients.
- Fremont Area Habitat for Humanity construction projects and the Homestore.
- Intercultural Center Early English/English teachers from 10:20-11:20 a.m.

Monday through Friday.

- Royal Oaks Assisted Living looking for volunteers to do a variety of things — book clubs, gardening, arts.

- Siena Francis House, volunteers to assist with serving breakfast and lunch.



- Tip Top Thrift Shop always needs volunteers on Thursday, Friday, or Saturday from 10 a.m. to 1 p.m. or 1-4 p.m. Tip Top is located at 5910 Maple Street in downtown Benson. The volunteers would be stocking the shop and waiting on customers.

- Volunteers Assisting Seniors: VAS Volunteers are needed to provide non-biased Medicare Counseling and Homestead Exemption Application Assistance through Volunteers Assisting Seniors. Free training is provided.

## Flaherty Senior Consulting

Caring for a loved one is difficult, and the challenges are amplified during a pandemic. Join Flaherty Senior Consulting for a series of Solutions Group gatherings that will address the questions and challenges caregivers face.

Solutions Groups provide opportunities for caregivers to learn how to deal with various issues, obtain skills and knowledge, engage in discussions, and interact with others in similar circumstances.

Upcoming meeting dates and locations are:

• **July 11, Sept. 12, Nov. 14**  
St. Vincent de Paul Church  
14330 Eagle Run Dr.

• **Aug. 16, Oct. 18, Dec. 13**  
St. Timothy Lutheran Church  
93rd and Dodge streets

• **Aug. 3, Oct. 5, Dec. 7**  
The Servite Center of Compassion  
72nd St. and Ames Cr.

• **July 22, Sept. 23, Nov. 18**  
Faith Westwood  
United Methodist Church  
4814 Oaks Ln.

The Solutions Groups are facilitated by Nancy Flaherty, MS, CDP, president of Flaherty Senior Consulting. She has extensive experience working with family caregivers and caregiver groups.

Registration is required to attend each gathering. Masks are mandatory and social distancing will be observed.

Visit [flahertyconsulting.net](http://flahertyconsulting.net) or call 402-312-9324 for more information.

Flaherty also provides private consultations with family caregivers to help them develop individual plans for their loved ones.

For information on private consultations, Solutions Group meeting times, and/or to register to attend a Solutions Group, email Nancy at [flahertyconsulting@cox.net](mailto:flahertyconsulting@cox.net) or call/text her at 402-312-9324.

## Corrigan Senior Center

You're invited to visit the Corrigan Senior Center, 3819 X St. this month for a variety of activities.

The Corrigan Senior Center is open weekdays from 8 a.m. until 3:30 p.m. Lunch is served at noon. A \$4.25 donation is suggested for the meal.

On July 3, Red Ravens are going to perform at their July Fourth Party @ 11 a.m.

On July 10, Joyce Torchia from Merry Makers is going to perform @ 11 a.m.

On July 11, monthly breakfast served @ 9 a.m.

On July 20, a nutritionist from CHI present @ 11 a.m. with Mega Bingo to follow @ 12:30 p.m.

On July 24, prize bingo @ 12 p.m.

Bingo is played every Monday and Thursday at 12:30 p.m.

Cards and puzzles is played every day of the week at 8 a.m.

Call 402-731-7210 for more information.

## Elder Access Line

Legal Aid of Nebraska operates a free telephone access line for Nebraskans ages 60 and older.

Information is offered to help the state's older men and women with questions on topics like bankruptcy, homestead exemptions, powers of attorney, Medicare, Medicaid, and Section 8 housing.

The number for the Elder Access Line is 402-827-5656 in Omaha and 1-800-527-7249 statewide.

This service is available to Nebraskans ages 60 and older regardless of income, race, or ethnicity.

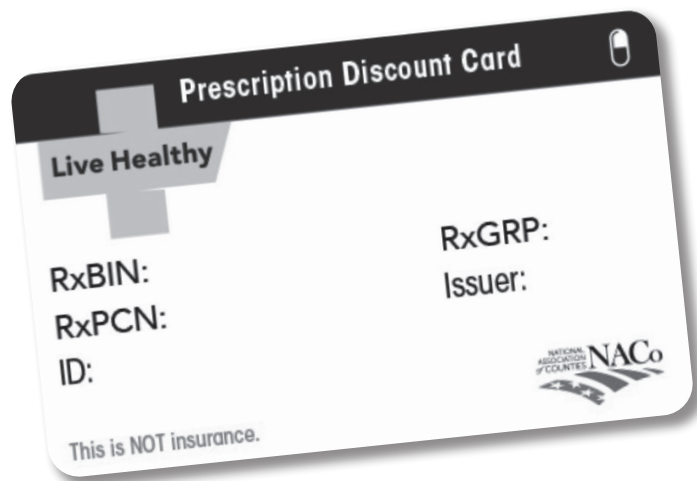
The Legal Aid of Nebraska hours of operation are 9 a.m. to noon and 1 to 3 p.m. Monday through Thursday, and 9 a.m. to noon on Friday.

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# ENOA's Senior Companion Program volunteers honored and recognized



NEW HORIZONS PHOTOS

The Eastern Nebraska Office on Aging (ENOA) Senior Companion Program honored its volunteers during a recognition luncheon at the DC Centre in May.

ENOA honored 50 volunteers and nine retired volunteers for this fiscal year.

The 4-5-year volunteers were: Yvonne Boatman, Valora Mapp, Cheryl Thornton and Bertha Williams. The 2-10-year volunteers were: Sharon Johnson and Mary Sayre. The two veterans are Robert Bass (18 years) and Gary Zander (2 years).

ENOA also honored its stations: ENOA CHOICES; DeFreese Manor Senior Housing; CHI Immanuel Hospital at Heritage Center; Ambassador Health of Omaha, and The Heritage at Shalimar Gardens (Fremont).

"We honor our volunteers every year because of their dedication to ENOA, AmeriCorps Seniors, and especially to their clients, who they serve faithfully throughout the year. We have had the Senior Companion Program at ENOA for 47 years, and continue to go strong, despite COVID," Senior Companion Program Coordinator, Elizabeth Paleogos said. "We are blessed to have the very best volunteers and work hard to retain them, as well as recruit additional ones, which are much needed. We have over 120 clients on a waiting list, so we need more volunteers in all five counties ENOA serves."

The luncheon featured karaoke, lunch along with a speaker, which was Cathy Pacholski, founder of "The Art of Aging, Inc."

Senior Companion Program Specialist, Lexi Richardson and Volunteer Services Director, Mary Parker was also in attendance.



## Volunteers needed for research study

The Aging Brain and Emotion Lab at the University of Nebraska at Omaha is looking for healthy adults and caregivers to an older adult with a chronic disease (e.g., dementia, cancer, cardiovascular disease) to participate in a research study.

Participating in this study will involve an online, at home component (7 hours over 4 days), and one in person visit (2 hours, 30 minutes), which will take place at the University of Nebraska Medical Center (UNMC).

Compensation for study participation is available.

The experiment involves completing online questionnaires, interview and computer tasks, taking samples of saliva for hormone analyses, blood draws for DNA methylation analyses and undergoing brain imaging.

To be eligible for the study, you must be 19-90 years of age, have comprehension of written and spoken English, mobility to travel to the UNO campus, and have completed a minimum of two years of high school or higher.

You are not eligible for the study if you have a diagnosis of a neurological or psychiatric disease (e.g., stroke), history of drug abuse, vision, hearing, cognitive or motor difficulties, or if you are currently pregnant, have metal implanted in your body, or are taking an antidepressant medication or glucocorticoid-based oral medication or cream (e.g., cortisone).

For more information about the study, please contact: Janelle Beadle, Ph.D. at the Aging Brain and Emotion Lab (402-554-5961) or by email at (ABELabUNO@gmail.com).

## King Crossword

### ACROSS

- 1 Two-wheeler
- 5 Bumped into
- 8 Pack (down)
- 12 Ireland
- 13 Peyton's brother
- 14 "The Time Machine" people
- 15 Octopus arm
- 17 Lunch hour
- 18 Request
- 19 IV measures
- 20 Must-haves
- 21 Chai, e.g.
- 22 Vagrant
- 23 More recent
- 26 Goddess of wisdom
- 30 Tehran's country
- 31 Sly one
- 32 Tidy
- 33 Workshop cutter
- 35 Rock
- 36 Very long time
- 37 Possesses
- 38 Brainy
- 41 Small barrel
- 42 "The Wedding

- Planner" actress, to fans
- 45 New York's — Field
- 46 Bicycle type
- 48 N. Mex. neighbor
- 49 — Lingus
- 50 Pitt of "Moneyball"
- 51 Carry
- 52 Layer
- 53 Round Table titles

- 20 Convent manager
- 21 Prepare meat for cooking
- 22 Beiderbecke of jazz
- 23 Pen tip
- 24 Mound stat
- 25 Pallid
- 26 Trim the grass
- 27 Old Oldsmobile
- 28 Moving day rental
- 29 Packed away
- 31 Summer cooler
- 34 Drunkard
- 35 Droops
- 37 Ford or Hudson
- 38 Ella's style
- 39 Surrealist Joan
- 40 Bickering
- 41 Fall (over)
- 42 Ryan of "Boston Public"
- 43 Tragic king
- 44 Probability
- 46 Light touch
- 47 "Frontline" ailer

### DOWN

- 1 Test version
- 2 Enrages
- 3 Neck problem
- 4 Tolkien creature
- 5 Pilgrimage site
- 6 Building wings
- 7 Dead heat
- 8 Some urban homes
- 9 Medicinal plant
- 10 Disposition
- 11 Bowling targets
- 16 Computer brand

1	2	3	4	5	6	7	8	9	10	11
12				13			14			
15			16				17			
18			19			20				
		21			22					
23	24	25			26			27	28	29
30				31			32			
33			34			35				
		36			37					
38	39	40			41			42	43	44
45				46			47			
48				49			50			
51				52			53			

This Month's Crossword Puzzle

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

Place a number in the empty boxes in such a way that each row across, each column down and each small 9-box square contains all of the numbers from one to nine.

This Month's Sudoku

## Foster Grandparent Program volunteers recognized, honored



NEW HORIZONS PHOTO

The Eastern Nebraska Office on Aging (ENOA) Foster Grandparent Program honored its volunteers during a recognition luncheon at the Benson Theatre in June.

ENOA honored 43 volunteers and three retired volunteers for this fiscal year.

The luncheon featured entertainment from Tim Clark, lunch along with a speaker, which was Melissa Mohler.

### First United Methodist Church

First United Methodist Church has some excellent adult curriculums available. They are free for any Christian group, which would like to study prayer, discipleship and beliefs.

Call First United Methodist Church at 402-556-6262 if you wish to receive more information about the list of the studies available.

## Recovering from surgery

Last month I took a short hiatus from writing this column because I had knee replacement surgery. Amidst the pain and the drugs, I was not in any condition to pen some coherent thoughts. Thankfully, after six weeks, healing has progressed, and I am in a much better place now.

This was my seventh major surgery in the last six years, after never having one prior to this run. Each time I have been amazed at the miracle of healing. The initial shock to the body is tough. The first two weeks after this surgery were miserable. Yet, as the surgeon predicted, after two weeks the pain and overall discomfort began to mitigate. Daily I noticed small improvements, moving more easily with less pain. The scar, day by day, has become smoother and less angry.

The wonder of nature in all living things is that non-life-threatening cuts, bruises, and breaks immediately start to mend with healthy cells replacing

damaged cells. By the time we are in the Third Chapter we have experienced the body re-knitting itself time and time again. How many scars do you have that demonstrate this phenomenon? I have quite a few.

The ability of the body to heal itself, albeit with the help of smart doctors and physical therapists, is a source of hope. I know from experience that my broken hip healed and so will my knee. All of creation seeks wholeness. Healing is innate to this coming together to make all things whole.

A corollary to physical hurt and healing is emotional hurt and healing. Physical pain brings with it feelings of discouragement, vulnerability, impatience, self-pity and, at times, anger. Being gentle with ourselves may be the best we can do during the process.

An invaluable aid during times of physical and emotional healing is being around others who are gentle and encouraging with

us. I have been reminded by friends many times that I have been through a lot and need not expect more of myself than I can give. This gives me permission to allow healing to happen in its own time.

After each surgery, a major take-away that is beginning to sink in, is that others need my compassion as they move through physical and emotional trauma. We can trust nature to do its part in the healing process. Being an emotional support with gentleness and encouragement is a great gift we have the opportunity to give. In addition to providing food, rides, and other practical needs, expressions of care and listening are priceless to the total healing process. I am thankful for all who have been here for me!

*(Nancy Hemesath is the owner of Encore Coaching. She is dedicated to supporting people in their Third Chapter of Life and is available for presentations. Contact her at nanhemesath@gmail.com.)*

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# How valuable is a good night's sleep?

How much better is your day after a good night's sleep? There are many factors that make peaceful sleep possible. One of the more important is how comfortable the bed is for a person. If the bed can do even more than help you sleep, that is a great extra bonus.



**Phillips**

James Keyser knows firsthand about how much a good bed can do for quality of life. A retired engineer and a longtime caregiver for his family after retirement, he cheerfully analyzed the features of his Transfer Master Supernal Hi-Low adjustable bed and what it has meant to him. He said that even for him, it was tough to decide which was most important, sleeping well or being able to get in and out of the bed without help. Jim is motivated to take care of himself to stay as independent as possible.

"It's tough to accept help," he said. "I want to take care of myself so I don't need as much help."

His bed is important equipment for his self-care.

Jim, a proud Benson Bunny, was among the first graduates of The University of Nebraska Omaha's Engineering Program. He left Omaha to serve in the Air Force during the Vietnam era. At the end of his tour he ended up in Texas, but he and his family wanted to return to Omaha. He reached out to his friends. One of them from the engineering program told him about a position at Offutt Air Force Base.

Jim said he called the person who was hiring and asked him "When do you want me to start?" His confidence paid off and he was back in Omaha working at Offutt Air Force Base as an Engineer two weeks later. In 2003 he retired as Deputy Base Civil engineer.

The traditional hospital bed his family arranged for him when he recently moved to an Assisted Living Community had a high-low feature he liked. He pointed out that raising the bed height when sitting on the side of the bed helped him get in and out of bed without help. He had used grab bars to pull himself out of the queen bed he had used at home. So the high-low feature which moves his hips higher than his knees was a big improvement. He just couldn't roll over in the bed because it was narrow and the mattress was not comfortable.

He knew he needed more room and a more comfortable mattress to get a healthy good night's sleep. His daughter found an alternate for the traditional hospital bed at the Kohll's Pharmacy and Home Care Showroom. His new bed is a few inches wider. Jim said those few inches make it easier for him to roll and shift during the night. He'd like to have one of the wider versions but conceded that, "you also need the bed to fit in the room."

The mattress is tall and uses modern technology for comfort. He uses the high-low feature to get in and out of the bed more than he uses the adjustment for head and foot at this time, though he will use the head elevation when he wants to watch TV in bed. His bed also has vibration which can be used to ease muscle pain as a standard feature.

Medicare and other insurances may fund traditional hospital beds if a person's positioning needs cannot be met by a regular bed. People are sometimes amazed to discover that their need doesn't meet



PHILLIPS PHOTO

## The high-low feature of the bed makes standing up easier and safer.

the insurance company's definition of medically necessary and they don't qualify for insurance coverage for a hospital bed. A manual elevation or high-low may be covered by insurance if it helps with getting in and out of the bed. Some caregivers find that this feature also makes helping someone in the bed easier. Ease of care giving while important to quality of life is not defined by many medical insurance systems as medically necessary. An electric high-low features the person in bed can use independently is generally considered a convenience by medical insurances and not covered.

A surprising number of either new or used traditional hospital beds are purchased without medical coverage. People buy them to obtain features like head or foot elevation or the high-low features either to help themselves be more independent or to make it easier and safer to provide care for someone in bed. These traditional frames and mattresses are designed for durability and economy whether they are funded by insurance or purchased out of pocket.

In recent years several companies have developed alternatives to the basic bed frames and mattresses of traditional hospital beds to meet a growing demand for function and comfort. People can find alternative mattresses for a traditional hospital bed frame, or they can buy a complete bed and mattress system. Since the alternative beds are designed for a consumer market, a wide variety of sizes, style, and features are available. Comfort sleeping is also important in this market and new mattress technologies are utilized even though the mattresses are still designed to tolerate the bending with head and foot elevations.

Jim and his family weighed the cost of his bed against his long-term comfort and his ability to get in and out of bed safely and independently and found the cost of the alternative bed was well worth it.

"This is definitely an improvement over what we started with and was well worth the money," he said. "You have to have a good night's sleep."

*If you have a success story to share or want additional information about specific solutions mentioned in this article, feel free to reach BevVan Phillips at [bphillipsotr@gmail.com](mailto:bphillipsotr@gmail.com). BevVan Phillips is an Occupational Therapist with over 35 years experience helping people with home modifications and assistive technology.*

# ENOA is recruiting volunteers to become Ombudsman Advocates

The Eastern Nebraska Office on Aging is looking for men and women ages 21 and older to join its Long-term Care Ombudsman Program, which is co-sponsored by the Nebraska State Ombudsman Program.

ENOA's Ombudsman advocates visit residents in local long-term care facilities and assisted living communities to protect the residents' rights, well-being, and quality of life.

Long-term Care Ombudsmen advocates must complete 20 hours of initial classroom training and 18 hours per year after the first year to remain certified.

During the training, the volunteers learn about residents' rights, aging issues, Medicare, Medicaid, communication skills, how to investigate residents' complaints, the importance of confidentiality, and federal and state rules, regulations, and laws regarding Nebraska's long-term care facilities and assisted living communities.

Before being assigned to a long-term care facility or an assisted living community, new volunteers will make four visits to a site with an experienced Ombudsman Advocate to learn more about what the program entails. After a three-month probationary period, the new volunteers are certified as Ombudsman Advocates. Certified Ombudsman Advocates will be assigned to a long-term care facility or an assisted living community where they'll visit for two hours a week to meet with administrators, residents, and the residents' family members to address concerns.

For more information about ENOA's Long-term Care Ombudsman Program, please call Marsha Peters at 402-444-6536.

## Gerontology research study

The University of Nebraska Omaha's Department of Gerontology needs older caregivers for an individual with mild cognitive impairment, Alzheimer's disease, or frontotemporal dementia for a research study titled *Characterizing Risk Factors for Burden in Caregivers to Individuals with Alzheimer's Disease and Frontotemporal Dementia*.

For more information, contact Naomi Adjei at 402-554-5961 or [ABELabUNO@gmail.com](mailto:ABELabUNO@gmail.com).

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SMOKE ALARMS.**

**MAKE A FIRE  
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# Legislative session produces mixed bag of victories and defeats for older Nebraskans

By Andy Bradley  
Contributing Writer

Nebraska state senators in Lincoln passed several bills during the recently-concluded legislative session that would benefit older Nebraskans, although several other measures died in committee.

One of the survivors, Legislative Bill (LB) 683, would continue efforts to expand broadband access in unserved or underserved neighborhoods and commu-

nities. The bill created the Nebraska Broadband Office and builds on the progress lawmakers made in 2022 in providing \$20 million over two years for expanded broadband coverage. Public hearings are scheduled throughout the state this summer to secure input regarding the best way to deploy new federal broadband funds. A hearing is scheduled July 12 in Omaha. The 5:30 p.m. session will be held at the Nebraska

Department of Transportation, 4425 S. 108th St.

The second victory was the passage of LB 727, which protects homeowners from losing all equity in their home if they fall too far behind in property taxes. Previously, Nebraska was one of 11 states where homeowners were at risk of losing their nest egg if property bills went unpaid, according to AARP Nebraska, which supported the bill. Local governments

have been legally able to seize their entire land and home as payment – no matter the size of the debt or the value of the property. LB 727, which was sponsored by Sen. Lou Ann Linehan of Elkhorn, is in alignment with a recent ruling from the U.S. Supreme Court restricting governments from collecting more than what is owed when it forecloses on a property.

In addition to homeowner protections, senators also

secured voter rights on the contentious last day of the session. The voter identification bill passed by lawmakers and signed by the governor allows several forms of ID. Residents of hospitals, nursing homes and assisted living centers can present patient documents with a photo as acceptable forms of voter identification. AARP was generally pleased with the outcome, according to Nebraska AARP Director Todd Stubbendieck.

Stubbendieck was also pleased that senators placed a cap on a 30-day supply of insulin at \$35.

Some older Nebraskans will also benefit from the exemption of state income taxes on Social Security, starting in tax year 2024. Many Nebraskans are already totally exempt from state taxes on Social Security, based upon income.

Finally, senators authorized the creation of a State Dementia Director in the state's budget. The position will be housed within the Department of Health and Human Services and will coordinate the work of the Alzheimer's Disease and Other Dementia Advisory Council.

Several other bills of interest to older Nebraskans failed to advance. They included LB 200, which would allow the importation of certain prescription medicines from Canada; LB 353, would fund upgrades to long-term care facilities; and LB 57, which would establish a paid family and medical leave insurance program for caregivers of seriously ill family members.

The 2023 session was the first of a two-year biennium, which means these bills can theoretically be reconsidered next year. Lawmakers also passed several legislative resolutions (LR) authorizing interim studies of issues of concern to older Nebraskans.

LR 142 will examine state policies that make Nebraska a desirable or undesirable place to retire, especially for veterans. The issue will be studied by the Government, Military and Government Affairs Committee.

LR 155 will review disability classifications under Nebraska's Homestead Exemption program. This will be considered by the Unicameral's Revenue Committee.

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# Enjoying summer days and evenings

By Paula Crozier

When I was researching topics to write about for June, the usual appeared in my Google searches: Healthy eating, exercise, sun care and managing finances. I wanted to highlight something different. I wanted to be more meaningful, and I guess, that meant becoming more introspective.

We all have hit those particular adult milestones like the "7 year itch" if we're married, although my 7th year of marriage was quite happy, I believe the itch in June I had was for the children to get back to school!

There were busy summer days at the swimming pools, camping on weekends, and summer school. Nights consisted of catching fireflies, fireworks and cookouts.

Then, our girls were teenagers. How did this happen so quickly? Our summers transformed into volleyball camps, skateboarding camp in Kansas and Easter Seals camp for our youngest. They were gone for extended weeks at a time, and our quiet household became the time that my husband and I remodeled, painted and spruced up before school once again started.

Summers just seemed as busy as the school year and never enough time for either my husband or I to take care of ourselves. And then, the girls were grown.

Our girls are now young women and recently I reevaluated myself. I was having those typical aches

and pains and when at my physical inquired about the pea sized bumps in my thumbs and was blankly told, "arthritis." What? How can that be?

I totally accepted my gray hair five years ago but to have joint issues this young was a moment that I needed to say, is it time to head downhill or keep climbing?

I chose climbing. It's time. My husband asked about all the activities I used to enjoy before marriage and kids. Racquetball, bicycling (yes, I still do) and hiking. Although I've done these sporadically over the years, I always chose whatever our daughters did over myself. And that is not healthy.

So take this June to start. Each moment can become more fluid, more mobile. Add yoga, stretching and a walk 3-4 times a day. Drink water and give up sugar. Get into that garden and lift those retaining bricks if you can, rake the yard, bicycle and hike. Swim and read a novel! I just finished the first one in about ten years that I've read for myself and not for homeschooling or self-help. I have to do these things for me, so well, frankly so I'll be around and able to keep up with our grandchildren whenever we can.

I'll be around for round 2. I'll keep you posted how it's going.

*Paula Crozier is a wife of 24 years, mom of 3 and Director of Marketing and Development for Florence Home Healthcare Center, Royale Oaks Assisted Living and House of Hope Assisted Living and Memory Care.*

# Drinking water, staying hydrated

Water makes up 50-60% of our body weight and is utilized in many important body functions which makes it imperative for us to stay hydrated throughout the day. We have heard the general recommendation of drinking 8, 8 oz cups every day, but since we are all different, how do we know if this is or is not enough?

How much is enough? The easiest way to tell if we are hydrated is to check our urine color whenever we go to the bathroom. If our urine is a dark color like apple juice, we need to drink more. If our urine is a pale yellow or close to clear, then we are drinking just the right amount.

Hydration sources: Most of our hydration comes from drinking water but we can also get water from juicy foods like lettuce, watermelon, and cucumber. Other liquids like coffee, tea, and milk can help with hydration but only in small amounts. Drinking water is the best way to stay hydrated.

If you struggle with drinking water, try some of these tips:

- Keep water nearby and within eye-sight. Keep it fun by adding flavors like True Lemon, Crystal Lite, fresh fruit, or flavor drops.
  - Drink sparkling water if you want some fizz.
  - Set reminders throughout the day that signals you to take a drink or drink a certain amount by that time.
- Follow these tips to make staying hydrated easier:
- Drink water whenever you eat meals or snacks. Drink water before, during, and after exercise.
  - Make sure to drink water whenever you feel thirsty.
  - Try to drink more water in extreme heat or cold.

*Submitted by Karen Rehm, Wellness Services Manager, Nebraska Safety Council. To schedule a "Healthier & Happier You" presentation, contact Karen at 402-483-2511 ext. 102 or send an email to [Krehm@nesafetycouncil.org](mailto:Krehm@nesafetycouncil.org).*

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402-731-2094

### OLD STUFF WANTED

(before 1975)  
Military, political, toys, jewelry, fountain pens, pottery, kitchen ware, postcards, photos, books, and other old paper, old clothes, garden stuff, tools, old household, etc.  
Call anytime  
402-397-0254 or 402-250-9389

### Senior Citizens (62+)

Accepting applications for HUD-subsidized apartments in Papillion & Bellevue.

**Bellewood Courts**  
1002 Bellewood Court  
Bellevue (402) 292-3300  
[Bellewood@KimballMgmt.com](mailto:Bellewood@KimballMgmt.com)

**Monarch Villas**  
201 Cedar Dale Road  
Papillion (402) 331-6882  
[Monarch@KimballMgmt.com](mailto:Monarch@KimballMgmt.com)



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PO Box 460967  
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[www.kimballmgmt.com](http://www.kimballmgmt.com)

We do business in accordance with the Fair Housing Law.



### TOP CASH PAID

Best & honest prices paid for:

Vintage, Sterling, Turquoise, & Costume jewelry, old watches, old quilts, vintage toys, old postcards, advertising items, military items, pottery, and antique buttons. Also buying estates & partial estates.

Call Bev at 402-339-2856

### I AM COLLECTING

- War relics
- Omaha Police Department badges
- South Omaha Police Department badges

Call 402-551-9038

### 1600 sq/ft House for Rent:

Rent: \$1800/Month.  
3 Bedroom/2 Bathroom on Ammon Ave in quiet, convenient Northeast Lincoln neighborhood.  
2 Car Garage/Washer/Dryer.  
Text/Call 612-417-1114 for info.

### GET RID OF IT!

Haul away, garage, basement, rental clean out...

Johansen Brothers

Call Frank

402-312-4000

### Omaha Fire Department

The Omaha Fire Department's Public Education and Affairs Department will install free smoke and/or carbon monoxide detectors inside the residences of area homeowners.

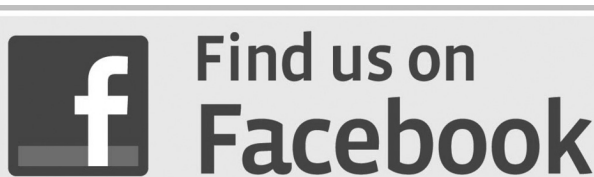
For more information, please call 402-444-3560.

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This Month's Crossword Answers

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

This Month's Sudoku Answers



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# ENOA

# Whispering Roots makes impact in the community

By Ron Petersen

A project that started off as an idea to educate students about bringing healthy fresh food, nutrition education, innovative agriculture techniques and Science, Technology, Engineering and Math (S.T.E.M.) to residents living in urban and rural socially in 2010, grew into an award winning, IRS certified 501(c)3 organization.

Whispering Roots is fulfilling the goal, which uses Aquaculture, Hydroponics, Aquaponics (the combination of Aquaculture and Hydroponics) and Urban Agriculture to grow healthy food and expose children and families to great tasting nutritious food options through “hands on” experiential learning and growing activities.

“The demand for our services has grown,” Whispering Roots founder and executive director Greg Fripp said. “We started in north Omaha with one school putting in one aquaponic system at King Science & Technology Middle School. There’s constant demand for our services, which is very high, and it has increased. We are always looking for the next generation of agriculture.”

Whispering Roots educates students and the public



NEW HORIZONS PHOTO

**Whispering Roots, in collaboration with area food coalitions and Nebraska Tribes, has worked to deliver food to the most vulnerable including the elderly, immunocompromised, quarantined, disabled, and families or individuals who lack access to transportation, traditional emergency food outlets and the like, through their nonprofit efforts.**

in “next generation” farming techniques, hunger alleviation strategies and healthy food production.

Whispering Roots provides several programs for people to use, including:

- **Culinary and Nutrition:** Whispering Roots’ cooking and nutrition classes follow the national Cooking Matters curriculum, which is designed to teach adults who have limited food budgets to shop for and cook healthy meals.

The Culinary Initiative classes are designed to teach

members of the community to cook healthy, budget-friendly recipes. The classes provide hands on experiences and focus on using local, seasonal ingredients.

- **Food Delivery and Logistics:** The onset of the COVID-19 Pandemic magnified a community need for logistics support and food production with a priority on poverty-stricken clients in Omaha and on reservations.

Whispering Roots, in collaboration with area food coalitions and Nebraska

Tribes, worked to deliver food to the most vulnerable including the elderly, immunocompromised, quarantined, disabled, and families or individuals who lack access to transportation, traditional emergency food outlets and the like, through their nonprofit efforts.

- **Native American Agriculture and Health:** Whispering Roots created a program to teach Indigenous tribal members of the Omaha Reservation in Macy, best practice horticulture through funding from USDA and Farm Credit Service of America.

The educational emphasis is on food production, diabetes alleviation, and next-generation agriculture in a controlled greenhouse environment allowing for year-round production of healthy, nutritious food for communities and expose students to career opportunities.

- **Agriculture and STEM (Science, Technology, Engineering, and Mathematics):** Whispering Roots uses Aquaculture, Hydroponics and Urban Agriculture technology to teach children and priority communities how to sustainably breed fish and grow vegetables with affordable resources.

Aquaculture, including aquaponics (the combination of aquaculture and hydroponics), is the fastest growing form of agriculture in the world and with good reason.

This soil-less, controlled environment enables us to organically produce fish and crops year-round with the fish’s natural fertilizer being used by the plants without

man-made chemicals.

As a result, their systems produce up to 30% more crops using 90% less water than traditional growing methods, which allows their team to implement it throughout the Midwest and internationally.

- **Nurture Omaha Farm Stands:** Locals are able to get the freshest, local fruits and vegetables at their summer farm stands. Buy fresh fruits and vegetables straight from local farmers.

Whispering Roots is always looking to grow and expand through cutting-edge work around the community.

“The organization and the services we provide have all expanded,” Fripp said. “There’s a whole range of work — logistics and distribution is a huge part of what we do.”

In 2021, Whispering Roots was named the Food Day Omaha Nonprofit of the Year and then they won the 2022 Food Day Omaha Food Champion of the Year.

For an organization that tends to fly under the radar, Fripp said it was very humbling as he thanked Whispering Roots six fulltime employees and 16 contractors for the hard work they put in.

“It was an honor — I tend to fly under the radar and not be as flashy because we try to just do the work. It felt really good to be recognized by our peers and to acknowledge the work that we are doing that lets us know that we are doing the right thing,” Fripp said. “I am so proud of our team — it takes really good people to do this work. It can be frustrating, challenging, working long hours in difficult temperatures, so it takes really good people to work here. I was excited for our team.”

Whispering Roots have many plans in the future, which includes being fully moved into their new building located on 2624 Edward Babe Gomez Ave and continuing to help people around Nebraska.

“From an organization perspective we tend to fly under the radar but we’re having a huge impact in the community for those who tend to fall through the gaps, which are the ones we serve,” Fripp said. “We go where other organizations don’t go and this work does not get done without the people in this organization.”



## Care Management Services

Eastern Nebraska Office on Aging



**There’s no place like home!**  
Are you age 60 or older and feeling like you might need some help?

If so, the **Care Management Program** at the **Eastern Nebraska Office on Aging** is here to help! ENOA’s trained Care Managers can help guide you in finding the services and resources you want and need to safely remain in your home as long as possible!



**We are here to help!**

Call us at: **402-444-6536**

Ask for “**Information and Assistance**”

for more details about Care Management services.



**ENOA**