

HOME CARE **SOLUTIONS**

A Guide to the Best Choices for Aging Adults
and Those Who Care About Them



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What is Home Care?

The term home care actually describes two very different types of care:

- Home health care provided by licensed medical professionals for which the individual has received an order or prescription from a healthcare provider.
- In-home care, providing personal care, homemaker or companionship services provided by professional caregivers.

In broader terms, home care that aging adults typically require often revolves around the Activities of Daily Living (ADLs) and the Instrumental Activities of Daily Living (IADLs). These can be provided by non-licensed home care providers.

ADLs are basic activities and functions performed on a daily basis that are usually done without assistance. The six ADLs are:

- eating
- dressing
- bathing
- toileting
- transferring
- continence

IADLs, on the other hand, are those activities instrumental to our daily routines such as:

- driving
- preparing meals
- doing housework
- shopping
- managing finances
- managing medication
- using the telephone

Why Home Care?

A Home Instead® study found an overwhelming majority of older adults (86 percent) want to continue living at home for as long as possible. Aging adults appear to be willing to seek help to do that. The study found that 54 percent of seniors who live alone are four times more likely to use professional care than those who live with their children. The users of in-home care tend to be older: 42 percent of seniors over the age of 80 rely on professionals.

Family caregivers and senior care professionals may notice changes in their loved ones, which send up a red flag that an otherwise healthy older adult needs more assistance to remain safely and independently at home. Or, perhaps, you are seeing these changes in your own health. These signs are an indication it might be time to call for help:

When more help is needed

- 1. Household bills piling up.** Feeling overwhelmed by the simple task of opening and responding to daily mail.
- 2. Reluctance to leave the house.** Problems with walking, remembering and hearing will prompt some to pull away from their community and isolate themselves. Socialization can be an important need to be met for healthy aging to occur.
- 3. Losing interest in meals.** Aging adults who suddenly find themselves alone, perhaps after the death of a spouse, can be easily discouraged by such tasks as cooking and tend not to eat properly.
- 4. Declining personal hygiene.** Changes in appearance, such as unkempt hair and body odor, failing to change clothes for days on end or wearing clothes that are inappropriate for the weather, are among the most obvious signs that an aging adult needs assistance.

When more help is needed continued...

5. **Declining driving skills.** Are parking or speeding tickets, fender-benders, dents and scratches on the car becoming a problem?
6. **Scorched pots and pans.** Cooking ware left forgotten on top of an open flame may be a sign of short-term memory loss.
7. **Possible signs of depression.** Feelings of hopelessness and despair, listlessness, fewer visits with friends and family, a change of sleeping patterns and lack of interest in the usual hobbies and activities may be indicators of depression.
8. **Missed doctors' appointments and social engagements, and isolation.** These can be signs of depression or forgetfulness. But they can also be the result of no longer having a driver's license and not knowing how to get alternative transportation.
9. **Unkempt house.** Changes in housekeeping may come about because of fatigue or inability to keep up with household chores. They could also result from depression.
10. **Losing track of medications.** Aging adults often take multiple prescriptions for various health conditions. Keeping track without reminders and assistance can be confusing to anyone but, for an older adult, signs of forgetting medications show a need for assistance in medication management.

SOURCE: *HomeInstead.com*.

In-Home Care

Just because someone is having more problems at home does not mean it's time to consider a move elsewhere. Such a circumstance could, however, signal the need for more help at home.

The first step in determining if care is warranted is to take an individual's needs and desires into account. Sometimes these are difficult conversations to have with an older adult who is convinced he or she does not need help. The best way for a family caregiver to start these conversations is to acknowledge the senior's desire to stay at home:



"You know, Mom, I want you to stay at home, too, however that might be more difficult if you fall or get sick. A little extra help could keep you safe and independent at home for a longer time."

(For more tips about talking with seniors about sensitive subjects, go to 4070Talk.com.)

In-home care might be ideal for an older adult who is recovering from an illness or a surgery, such as a knee replacement, and does not need medical assistance, but rather help around the home with ADLs and IADLs.

The need can be just as much for emotional and mental support, as physical assistance. An older adult who loses a spouse can become depressed and lonely to the point her own health suffers. A widower's increasing forgetfulness can put him at risk of forgetting to pay the bills or, worse, to take his medications.

Enhancing Lives

The companionship component of a professional caregiver's job can be just as vital as the physical assistance a professional will provide. Older adults thrive on conversation and one-on-one contact to keep their minds alert. Favorite activities include gardening, baking or woodworking, or assistance at the grocery store or companionship to attend a concert or program.

Many older adults need help to get their day started with assistance showering, preparing breakfast and taking their medications. Likewise, help before bedtime, or even overnight, can be an important safety net for individuals at home who often are more apprehensive at nighttime, or who have Alzheimer's disease or another dementia. A reputable in-home caregiving company will provide caregivers who can meet all of those needs.

Let's say an aging adult does eventually need to make the move to a care community. If so, in-home care can continue with that older adult into any community, from independent to skilled.

When In-Home Care is needed

- Eating
- Dressing
- Bathing
- Toileting
- Transferring
- Continence
- Companionship
- Meal preparation
- Light housekeeping
- Medication reminders
- Errands
- Shopping
- Transportation
- Hobbies
- Laundry
- Hospice support
- Specialized senior care services
- In-home care for chronic conditions.

While more and more long-term care insurance companies are covering this option, it is still primarily paid for by the family or the aging adult themselves.

More Americans are requiring care than ever before. Seventy percent of adults age 65+ will need assistance at some point.*

There's also the issue of personal preferences. If someone is happiest at home, the cost of additional care may very well be worth it.

*Caring for America's Seniors: The Value of Home Care; Home Care Association of America and Global Coalition on Aging

Home Health Care

It used to be that a medical crisis could spell the end for someone who wanted to age in their own homes. But today, even older adults who suffer from chronic conditions or life-debilitating illnesses can still remain at home. Advances in technology and lifesaving equipment have kept many aging adults at home longer.

What's more, home health care agencies can also provide licensed medical professionals to go to an older adult's home, offering a wide range of medical and therapeutic services.

Convalescing at home can actually help some older adults not only survive but thrive. For instance, aging adults with dementia may be less confused at home where they will more likely know where everything is located.

As is the case with in-home care, there are signs in an aging adult that can signal when it's time to call for help:

When Home Health Care is needed

- Post-op Rehabilitation
- Skilled Assessments and Teaching
- Occupational Therapy
- Speech Therapy
- Wound Care
- Mobility Training
- Pain Management
- IV Therapy/Injections

According to the Visiting Nurse Association (VNA), a home health agency is likely to employ a range of professionals, including physicians, registered nurses, licensed practical nurses, physical therapists, social workers, speech language pathologists, occupational therapists and certified aides.

Medicare, as well as private insurance, may pay for some services, such as visits by nurses, and speech and occupational therapists. If an older adult is discharged from a hospital, Medicare may pay for a nurse, and occupational and speech therapist for the client at home, but only according to a doctor's prescribed plan of care.

Team Approach

It's possible for an individual to have both in-home and home health care services concurrently. That's because the services of a licensed medical professional will typically be considerably different from those of an in-home caregiver. Both focus on the safety, well-being and healing of an older adult. The in-home caregiver will also focus on building a relationship with the aging adult.

The licensed medical professional generally will have limited contact with an older adult while the relationship with an in-home caregiver may very well be longer term. For example, an older adult recovering at home from heart surgery will likely see a licensed medical professional, as well as an in-home caregiver, until their condition has improved.

Who to Call for In-Home Care

Professional caregivers can generally be grouped into three different categories: agency employee, independent contractor with a registry and independent caregivers. As there may be different business models for each caregiver category in the marketplace, the following information is intended as a general summary of typical differences between these categories. This is not intended as an exhaustive description of every home care model. To confirm whether the descriptions below apply to the caregiver you are considering, please consult with the caregiver and/or the referring agency or registry.

Agency Employees

Most agencies hire caregivers who are screened, trained, bonded and insured. They are employees of the individual company for whom they work. As the agency pays these caregivers, it also typically handles all payroll-related taxes and other employment obligations such as obtaining workers' compensation and liability coverage, and addressing performance issues. The third party agency also usually provides additional support between the family, caregiver and client.

Independent Contractor with a Registry

An independent contractor with a registry is usually recruited, screened and referred to the client. Depending on the registry's business model, the older adult may become the employer and may then become responsible for employment responsibilities such as hiring, scheduling, handling performance issues, and paying/reporting applicable taxes. The older adult may assume risk if the independent contractor is not covered by workers' compensation, liability and bond insurance. While the contractor may have had a criminal background check and reference checks, he or she may not be receiving support, training and continuing education. A replacement caregiver may be unavailable depending on the registry's model.

Independent Caregivers

Otherwise referred to as “the gray market,” the independent caregiver is usually responsible for marketing themselves and finding their own clients. On a case-by-case basis, they may have a criminal background, reference checks and training. The older adult may become the employer and may then be responsible for all employment responsibilities such as hiring, scheduling, handling performance issues and paying/reporting applicable taxes. The older adult may assume the risk as the employer since the independent contractor may not be covered by workers’ compensation, liability and bond insurance. The independent caregiver may not receive support, training and continuing education, nor may a replacement caregiver be available should the independent caregiver become unavailable.

The following, from Home Instead, are the questions to ask an in-home care service provider:

Questions to ask an in-home care provider:

- ? Is the individual an agency employee (recommended arrangement), an independent contractor with a registry, or are they working on their own/independent?
- ? Have the caregivers been trained? Do they receive ongoing training?
 - By whom?
 - Extent of training?
 - Does this training include special dementia or Alzheimer’s training?
- ? Have the caregivers undergone a criminal background check and drug screening, and have personal references been secured on all caregivers?
- ? Are the caregivers bonded and insured? This means the company covers claims and insurance, so the home owner is not liable should something happen.
- ? Does the caregiver have workers’ compensation coverage?
- ? Can you check references on the company?
- ? Does the agency or registry offer back-up / replacement caregivers?

- ? How much input will you have in selecting the caregivers?
- ? What restrictions (if any) apply to the services provided?
 - Hours of service?
 - Lifting restrictions?
- ? Who pays the caregiver and pays/reports any applicable taxes?
- ? How much flexibility will you have in setting a schedule for services?
Who schedules the caregiver?
- ? Is there a time contract required for 3 months, 6 months etc.? Is there a penalty if service ends earlier?
- ? How much notice does the agency or registry need to begin or cancel service? Is there a charge to cancel?
- ? What is the cost of service including:
- ? Minimum hours of service per visit / week / month?
 - Special overnight rates?
- ? Does the agency or registry maintain a quality assurance or supervisory program?
- ? What is the agency's or registry's communication plan to keep families informed?
- ? Is a service deposit required and, if so, how much is it?
- ? Does the home care agency or registry offer the personal care services the patient needs, like assistance with bathing, dressing, and using the bathroom?
- ? Are patients' special needs accommodated?

Who to Call for Home Health Care

When hiring home health care, some experts recommend seeking out licensed medical caregivers designated as “home health agency,” advises James Summerfelt, chief executive officer of the Visiting Nurse Association. “This term often indicates the provider is Medicare-certified and has met minimum federal requirements for patient care and management.”

To learn whether your aging loved one may be eligible to receive Medicare coverage for home health services, visit [Medicare.gov/coverage/home-health-services.html](https://www.medicare.gov/coverage/home-health-services.html).

Home health services are typically delivered at home to recovering, disabled, chronically or terminally ill persons in need of medical, nursing, social, or therapeutic treatment and/or assistance with the essential activities of daily living.

When interviewing an agency make sure you understand exactly what services it will provide and those it will not provide, including those it is forbidden to provide by law. Families are allowed to provide any care for a family member, but professionals have to abide by applicable law. For instance, in many jurisdictions, invasive procedures such as injections and maintenance of feeding tubes may not be administered by non-skilled professionals. You may need a doctor or a nurse to perform these procedures.*

Questions to ask a home health care provider:

- ? Is the individual an agency employee (recommended arrangement)?
- ? An independent contractor with a registry, or are they working on their own/independent?
- ? Have the caregivers been trained? Do they receive ongoing training?
 - By whom?
 - Extent of training?
 - Does this training include dementia or Alzheimer’s training?

* SOURCE: Visiting Nurse Association; online at thevna.org.

- ? Have the caregivers undergone a criminal background check and drug screening, and have personal references been secured on all caregivers?
- ? Are the caregivers bonded and insured? This means the company covers claims and insurance, so the home owner is not liable should something happen?
- ? Does the caregiver have workers' compensation coverage?
- ? Can you check references on the company?
- ? Does the agency or registry offer back-up / replacement caregivers?
- ? How much input will you have in selecting the caregivers?
- ? What restrictions (if any) apply to the services provided?
 - Hours of service?
 - Lifting restrictions?
 - Who pays the caregiver and pays/reports any applicable taxes?
- ? How much flexibility will you have in setting a schedule for services? Who schedules the caregiver?
- ? How much notice does the agency or registry need to begin or cancel service?
- ? What is the cost of service including:
 - Minimum hours of service per visit / week / month?
 - Special overnight rates?
- ? Do they work with other agencies such as home care when the client needs additional services?

Information about Medicare-certified agencies in your geographic area are available online at [Medicare.gov](https://www.medicare.gov), including Home Health Compare, which allows you to compare the home health care agencies in your area. You can also call 1-800-MEDICARE for more information.

Resources

Following are resources that offer more information about home care or assisting aging adults at home:

Home Instead

HomeInstead.com

Simple Meds

SimpleMeds.com

Alzheimer's Support

HelpforAlzheimersFamilies.com

ConfidencetoCare.com

Home Care Association of America

hcaoa.org

Centers for Medicare and Medicaid

cms.hhs.gov

Ready to Care by Home Instead

ReadytoCare.com