

## Aging-in-Place Options: Personal Flexibility for You and Your Loved Ones

By Charles E. Symes, II



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**My mother was diagnosed with a terminal illness, suffering a wide variety of symptoms a few years ago. As a home health agency owner and administrator, providing qualified caregivers and skilled nursing for other's loved ones on a daily basis for many years, I was now in a position to see first-hand how home health care personally affected me, and how home care is truly a viable option for adaptable, long-term health care.**

Mother didn't immediately need 24 hour care, so we started initially with nighttime help – one of the many benefits of home care is its flexibility for individual and changing needs. She was still striving to live as independently as possible, to the point where she and my father felt that they had the time and the resources to fulfill their lifelong dream: to go on a cruise through the Panama Canal.

**Mother did this while she was a hospice patient.** As my mother's care needs increased, we felt 24-hour home care was the more valuable life goal. For my father, his first priority was to remain a husband and not a home health aide, so that mother's dignity was preserved from wife to husband, and for the adult children.

Home care as a long-term health care option is a viable solution for aging-in-place. Public opinion is clearly headed in this direction. In a 2009 AARP survey "almost half (49%) of people ages 45 and older say that if they need long-term

care services, they expect to live at home and have an aide for a few hours each day – up from 42% a year ago."

**The desire to live independently** during retirement can be realized by bringing in assistance as needed for personal chore services as people continue to age.

These services may include transportation, medication reminders and assistance with daily living / ADLs, such as help with bathing, dressing and meal preparation, among others. Some seniors are fearful of taking a bath or shower on their own, as they are afraid to fall; this is a typical example of where assistance with ADLs can be implemented through home care, and provide the needed comfort of safety, while still maintaining maximum independence at home.

**Concern about falls is not** unwarranted by seniors. In 2006, there were 27 deaths and 1,573 hospitalizations due to falls in San Mateo County for residents 65 years and older; the average cost of hospitalization for each fall is estimated at \$42,000 in San Mateo County.

If seniors are independent or mostly independent, having a little bit of help on a day-to-day basis can be quite reassuring, allowing them to live mostly unaided for a longer period of time. When confusion enters, it's one of the leading problems that can prevent someone from living independently. Dementia doesn't

necessarily mean loved ones need to be placed in a facility; it may mean that they just need proactive safety measures in the home.

Care provided by family members is usually the preferred method in meeting the needs of the aging; however, when that's not possible and a paid caregiver is required, you have two options: hire a full-service agency that handles all aspects of home care employer responsibility or the family member becomes the employer and is responsible for all employer / employee liabilities.

**Homeowner insurance only** covers people that visit the home and have an accident. Anyone you employ is an employee and you need additional insurance coverage. Employer responsibilities include payment of Social Security, Medicare and Worker's Compensation Insurance.

Because of the breadth of duties as a home care employer, hiring a home health or home care agency alleviates some of the liabilities and eases the process of providing qualified personnel to administer care. It is imperative that great attention is given when choosing a home care or home health agency.

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