

# Live Well at Home Meet the Thrive Tribe



## AWARE SENIOR CARE HOME CARE AGENCY

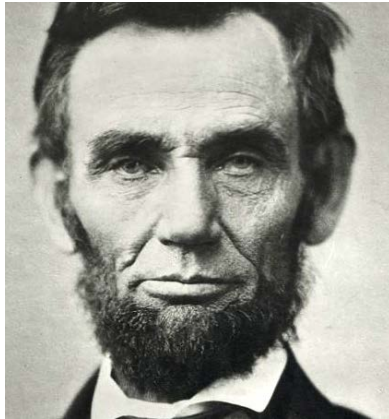
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Founders Aware Senior Care  
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## Who said this?

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**“In the end, it’s not the years  
in you life that count. It’s the  
life in your years”**



Abraham Lincoln



# Live Well at Home - Meet the Thrive Tribe

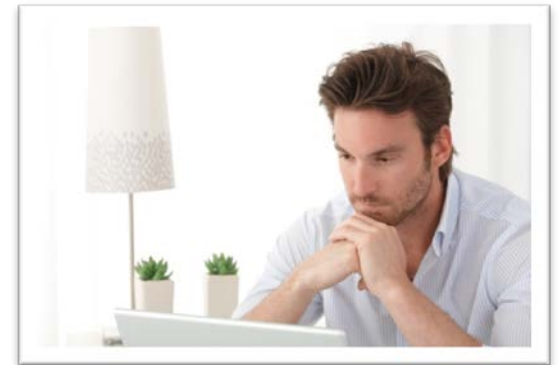
- Be **AWARE** of the signs help at home may be needed
- Be **AWARE** of the community resources to form your care team
- Be **AWARE** of home care

▪ Become  **AWARE**



# Be **AWARE** that help may be needed

- Sometimes it is obvious:
  - A fall with an injury
  - Planned surgery
  - Chronic debilitating condition
- Sometimes it is not obvious:
  - Changes can occur slowly and be subtle
  - What if you have concerns but the person says “I’m fine”?



# Be **AWARE** that help may be needed

## Help define your concerns:

- They stopped doing favorite things?
- Their appearance has changed- weight loss/gain?
- Is the person making comments about things that are challenging?
- Look at their ADLs and iADLs



# ADLs and iADLs

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- **Activities of Daily Living (ADLs)** - basic skills learned in childhood
  - Bathing, grooming, dressing, transfers, walking, eating
- **Independent Activities of daily Living (iADLs)** - complex skills needed to maintain independence.
  - Managing finances, transportation, meals/nutrition, using the telephone, maintaining the household

**Various medical conditions can affect one's ability to independently perform one or more of these**



## ADLs - Red Flags

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- **Mobility**- is help needed to move while in bed, to get out of bed, to walk?
- **Dressing** - are the clothes in need of repair/washing, misbuttoned, appropriate for the season, is help needed to remove clothes?
- **Bathing/Grooming** - are showers/baths refused, hair uncombed/dirty, unshaven, bad breath?
- **Toileting** – is help needed to use the toilet, noticing soiled clothes/bed linens?
- **Walking** – history of falls, not using a cane/walker if directed, unsteady while walking?
- **Eating** – unable to use knife to cut meat, eating soft foods only, stopped using utensils, needs to be fed?



## iADLs - Red Flags

- **Finances** - Are there overdue bills, calls from creditors even though there are sufficient funds?
- **Transportation** - Have there been car accidents (even minor ones), are you uncomfortable as a passenger, do they get flustered with traffic?
- **Meals/nutrition** - is there spoiled food, are they consistently making poor choices for meals, are their clothes looking baggy, have you found burned pots on the stove?
- **Telephones** - do they refuse to answer the phone or return voicemail messages of friends and family, do the mechanics of the phone cause frustration ?
- **Household maintenance** - is the house dangerously dirty/cluttered, appliances that don't work, yard overgrown, essential items missing or in excessive amounts?





## Be **AWARE** that help may be needed

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### **Mental and physical changes can be caused by medical conditions- not necessarily aging**

- Get a thorough physical
- Consider a gerontologist
- Get a thorough review of medications
- Make sure medications are being taken as ordered



## There may be a problem, now what?

- **Take the Aware Senior Care**  
[www.awareseniorcare.com/assess](http://www.awareseniorcare.com/assess) self-assessment
- **The results paint a picture that there may be a need for assistance**
- **Have a conversation or 2 or 3 or 4....**



# Be **AWARE** of community resources



# The Circle of Support– Team Based Care

- **Identify need - find the right professionals**
- **Geriatric care advocates and managers – help manage the overall care plan**
- **It takes a village**



[www.awareseniorcare.com/what-is-the-circle-of-support](http://www.awareseniorcare.com/what-is-the-circle-of-support)



# Hospice vs Palliative Care

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## Hospice

- **Comfort care not curative**
- **Prognosis of 6 months or less by 2 physicians**
- **Paid for by Medicare A, private medical insurance**
- **Team: RN case manager, social worker, spiritual care counselor, CNA, volunteer, hospice MD/NP**
- **Services in your home- including ALFs, SNFs**
- **Numerous agencies serving this area**

## Palliative Care

- **Comfort care through symptom management**
- **Terminal prognosis not needed**
- **Paid for through Medicare B, private medical insurance**
- **Team: MD/NP, social worker**
- **Services in your home- including ALFs, SNFs and rehab**



# Home Care vs Home Health

## Home Care

- **Client chooses when to start and stop services**
- **Visits based on client's needs**
- **No requirement to be housebound**
- **Payment: private pay, Long term care insurance, VA Aid and Attendance, CAPS**
- **Service providers- RN supervisor, CNAs, PCAs, companions**

## Home Health

- **Physician's order needed for service**
- **Visits based on skilled need, usually an hour or less**
- **Must be housebound**
- **Payment: medical insurance including Medicare and Medicaid**
- **Service providers- RN, PT, OT, ST, Social Worker, CNA**



# Be **AWARE** of Home Care

- **Begins with an assessment by RN**
- **Looks at the whole picture**
- **Medical history and review of medication list**
- **Environment: home safety and falls prevention**
- **Current support system**



## Be **AWARE** of Home Care

### Home Care provides assistance with routine tasks:

- Prepare list of meals, create a grocery list, grocery shop and meal preparation
- Shopping, running errands, transportation
- Light housekeeping and laundry/linen changes
- Assistance with personal care
- Companionship





# Be **AWARE** of Home Care

## Licensed Home Care

- Licensed and regulated by State and carries liability insurance
- Background checks, drug testing
- RN with client/family creates the plan of care, reassesses at least every 90 days
- RN supervises staff, assures competent care
- RN supervisor available whenever caregiver is in a home
- Provides coverage – when caregiver unable to make the visit

## Private hire Home Care

- Costs is usually less
- Client/family to determine services- create plan of care
- No oversight to assure competent care
- Liability risk if client or caregiver is injured in your home
- [www.NCOffender.com](http://www.NCOffender.com) – provides public records
- Who will care for client if caregiver doesn't show up?



## Become **AWARE** – Be Proactive

- **Get a thorough physical**
- **Seek advice from your support network - friends, family, your church...**
- **Clear the hurdle - call for an in-home assessment**
- **Put services in place**



## Final thoughts

- **Practice healthy habits and stay active**
- **Notify physician of changes, take meds as ordered**
- **Take an honest look at iADLs/ADLs**
- **Be proactive with support - help avoid a crisis**
- **Try home care – you may like it!**
- **Don't just survive - Thrive!**



# Questions?



## About **Aware Senior Care**

- Our mission is to provide unsurpassed in-home personal care, companion and medication management services
- Helping those choosing to remain in their homes, rather than opting for institutional care, needing assistance due to chronic disabilities and dealing with issues related to memory loss
- We serve Cary, Raleigh and Apex. Home Care License #HC4697

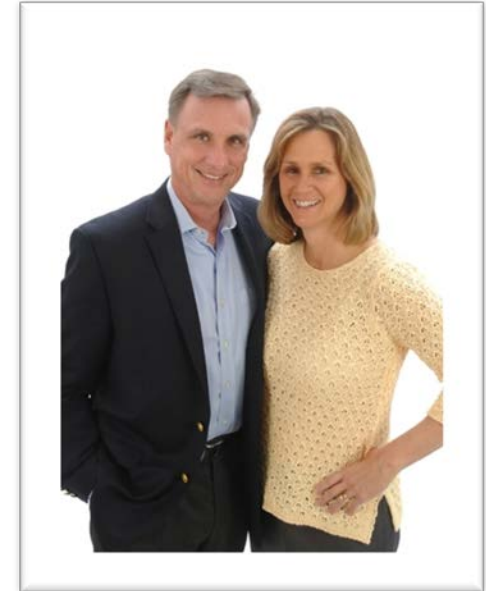


**Veteran owned business**

4.95 out of 5



2015 Client Reviews



Gina and Tim Murray

**A+**  
*Rated*



A Proud Member of



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# Thank You!

