

4 Group Homes:
Pros and Cons
for Senior Care

6 What's the
Difference With
Levels of Care in
Assisted Living?



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The Newsletter of **INDEPENDENT YOU** Senior Services

Spring 2023 Vol. 8 Issue 2



Geriatric Care Managers Advocate for Older Adults — and Their Caregivers

by Barbara Mooch

With changing times come changes in the way we care for our elders. In the past, extended families often shared the job of tending to older loved ones. These days, families may live farther apart, and the responsibility for care can fall on one overwhelmed family member.

The good news is that geriatric care managers can help.

These professionals, sometimes called aging life care managers, are usually licensed nurses or social workers

trained in caring for older adults. They act as private advocates and guides for family members who want to ensure their loved one is in the best hands, and they generally serve clients and families whose incomes are too high to qualify for publicly financed services.

“Caring for a senior can often be an overwhelming process,” says Cathryn A. Devons, an assistant clinical professor of geriatrics and palliative medicine at Mount Sinai Hospital in New York City. “Geriatric care managers seek to

Find a Geriatric Care Manager

Keep in mind that many people can refer to themselves as care managers without having the proper qualifications, so check carefully.

- **Aging Life Care Association** expert search
- **Eldercare Locator** support services (enter your location information to find the nearest Area Agency on Aging — they often have lists of local providers)

make the process easier by serving as an advocate or counselor — taking the pressure off of family members who often have other commitments, such as parenting and workplace responsibilities.”

As the population ages — the number of Americans age 65 and older is projected to nearly double to 95 million by 2060, according to the Washington, D.C.-based Population Research Bureau — the number of caregivers needing help will likely increase as well. The COVID-19 pandemic accelerated the trend, according to geriatric care managers, who report more families turning to them for assistance.

“Seniors were in their homes and not getting out and about, and their functioning really declined,” says Debra Feldman, board president of the Aging Life Care Association, a professional organization for geriatric care managers. “What we’re encountering now are the adult children seeing their parents who declined so much.”

The association, formed in 1985 and based in Tucson, Arizona, has more than 2,000 care managers as members.

How geriatric care managers can help

Along with assessments, other care management services may include:

- Evaluating, arranging for and monitoring hired caregivers such as home health aides.

- Coordinating medical appointments and arranging transportation.
- Identifying social services and programs that could help the care recipient.
- Making referrals to financial, legal or medical professionals and suggesting ways to avert problems.
- Explaining complex or difficult topics to care recipients and their

families.

- Creating short- and long-term care plans that could include assisted living or a rehab center.
- Acting as a liaison to families who may be hundreds of miles away.
- Answering questions and addressing emotional concerns of caregivers and their loved ones.
- Arranging for relief or respite care for stressed-out caregivers.

“The manager ensures that the senior’s personal and practical needs are met and can help with more mundane tasks, freeing up family members so that they can enjoy more quality, stress-free time with their loved one,” Devons says. “Very often, we see geriatric care managers become a much-valued part of the family.”

Count on paying out of pocket

The cost of an initial assessment can vary widely by region but will generally run from about \$800 to \$2,000, says Julie Wagner, CEO of the Aging Life Care Association. Hourly rates for on-going services range from \$90 to \$250.

Some care managers also charge for long-distance calls, mileage and travel time. Be sure to find out about these billing details and get them in writing before you agree to the services.

Neither Medicare nor Medicaid will pay for geriatric care management services. Long-term care insurance may cover some of the costs of care coordination, but most private insurance

policies, including Medigap and Medicare Advantage plans, do not.

You may be able to get help from your workplace, Wagner says. Some employee assistance programs cover some geriatric care management fees because the services a manager provides can help family caregivers stay focused on their paying jobs and miss less work time.

Roughly 3 out of 5 family caregivers work full or part time, and of that group, more than half report having to go in late, leave early or take time off from their job to attend to caregiving responsibilities, according to a 2020 study by AARP and the National Alliance for Caregiving.

Check references and credentials

Unlike medical doctors and registered nurses, geriatric care managers don't have state-level license requirements. But because many started in health care or social work, they often maintain certifications in their original field.

Two nonprofit organizations, the Commission for Case Manager Certification (CCMC) in Mount Laurel, New Jersey, and the National Academy of Certified Case Managers (NACCM) in Tucson, Oklahoma, offer certification programs. Both require specialized degrees, experience and successful completion of an examination.

Those who fulfill CCMC requirements become certified case managers and must renew the certification every five years, a process that requires con-



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tinuing education and another exam. Those who satisfy NACCM requirements become certified care managers. They must renew every three years and meet continuing education requirements.

9 questions to ask before you hire

Be clear about your expectations. That starts with asking a prospective care-management provider the right questions.

- 1. Resources:** What are your business's main services, and do they include in-home care?
 - 2. Size:** How many geriatric care managers do you have on staff?
 - 3. Qualifications:** What credentials and professional licenses do you and your managers have?
 - 4. Longevity:** How many years have you been providing care-management services?
 - 5. Initial costs:** What fee, if any, do you charge for a consultation?
 - 6. Continuing costs:** What are your ongoing fees, and may I get them in writing?
 - 7. Communication:** How will you keep in contact with us?
 - 8. Flexibility:** What happens if my family has an emergency — will you be available?
 - 9. References:** Who has used your services, and may I contact them?
- Source: Aging Life Care Association*

* Independent You offers Geriatric Care Management services



Group Homes: Pros and Cons for Senior Care

You won't walk lengthy corridors with identical rooms, or see a calendar chock-full of structured activities – but you may smell a home-cooked meal. For some older adults who need long-term care, group homes are providing a more family-style alternative to nursing homes or assisted living facilities.

Also known as adult family homes or board and care homes, these relatively small residences are found in regular neighborhoods. Older adults who require help with their daily personal needs, and who may have dementia or cognitive impairment, live among peers with 24/7 assistance and supervision from caregivers. Some group homes offer skilled nursing care, similar to a nursing home. Still, a home-like setting – not an institutional atmosphere – is a key attraction.

As with other long-term care options, group homes are licensed in their state and must meet certain standards. Staff members undergo mandatory yearly training, plus additional education and training by the facility.

Typically, group home care costs less than traditional long-term care options, particularly if you're paying for long-term care out of pocket. However, group

homes aren't for everyone – but they're worth considering for older adults who can't live independently but still crave the feeling of being at home.

Group home definitions, licensure, costs, services, availability and even names vary from state to state. In Washington, for instance, adult family homes provide skilled nursing care, in addition to personal caregiving and assistance with activities of daily living, for older adults.

"They're a good fit when people need more one-on-one assistance, particularly if they're a fall risk or need additional help with toileting or eating," says Lisa Mayfield, the founder of Aging Wisdom, a care management practice in the Seattle area, and a past president of the Aging Life Care Association. "Also, there are smaller settings to navigate, which can be an advantage as mobility decreases. They tend to be on one level, which makes navigating easier and safe."

Each home has a relationship with a nurse delegator, who can supervise and oversee nursing skills or tasks that residents require. In addition, residents have an array of health care services available, when needed.

"In our state, there are many visiting

medical providers that will visit the adult family home to provide the primary care onsite,” Mayfield says. These homes can help coordinate care for residents with providers such as primary care physicians, physical and occupational therapists and extra nursing support. “You can even engage hospice support in adult family homes,” she notes.

“Typically, they’re privately owned, so you really need to dig in to find out what services and supports they offer.” As with any long-term care decision, she says, “There should be a lot of questions when you move someone into a group home situation.”

Advantages

Higher staff-to-resident ratio allows individualized care. “You get more personalized care because they’re usually five to 10, maybe maximum 20 people in a facility, so the staff-client ratio is much better,” Markwood says.

Homelike vs. more institutional feel. “In some ways, it’s much more homelike,” Markwood says. “Sometimes the meals are much better because they’re not as institutional as they may be in an assisted living (facility).”

Typically lower-cost than nursing homes or assisted living facilities in the surrounding area.

Smaller, more manageable spaces for those with mobility issues.

When group homes are a suitable choice, feedback from families is positive, Mayfield says. “We find that when people move to adult family homes, they actually tend to improve because they’re getting that extra attention and TLC,” she says. “The caregivers can really dote on them and make sure they’re getting their meds, and eating and drinking.”

Downsides

Structured activities are minimal. If ongoing activities such as games, exercise classes or communal movie nights are important to an older adult, group homes might not be the best bet. “One of the biggest downsides in adult family homes is lack of structured

activities that families would find in a setting such as assisted living or memory care – although families can certainly find ways to supplement social engagement or activities,” Mayfield says.

Privacy can be a challenge. Some group homes offer all private bedrooms, while two people share bedrooms in others. From a social and compatibility standpoint, “You’re with a smaller group of people, so you better hope you like them,” Markwood says. “You oftentimes have less privacy than you do in a larger-scale living situation.” Common areas are often smaller than those in larger assisted living facilities, she adds.

Private pay is the norm. “Some long-term care policies will cover it,” Mayfield says. Caregivers are certified nursing assistants with extra training to work in the group home model. They typically do housekeeping, laundry and cooking along with engaging with residents and providing their daily care.

Group Homes in the Pandemic

The COVID-19 pandemic put a spotlight on long-term care issues with infection control as many vulnerable residents became extremely sick with the virus. Then, as nursing homes and assisted living facilities followed Centers for Disease Control and Prevention guidelines on restricting visitors and keeping residents apart from one another, social isolation and depression often resulted, despite facilities’ best efforts with virtual activities and window visits. Some family members were motivated to seek alternatives.

“What we found here with COVID was when facilities would go into lockdown, people would be isolated in their rooms in assisted living and memory care,” Mayfield says. “But in adult family homes, if the home went into lockdown, that meant they couldn’t have visitors – but within the home, they operated as normal. So, the residents weren’t stuck in their room all alone (in contrast) to where they were in assisted living and memory care.”

By Lisa Esposito, U.S. News & World Report



What's the Difference With Levels of Care in Assisted Living?

By Paul Kelley

Senior living can provide care and options for older adults who live with different challenges and preferences. Assisted living “levels of care” refers to how much assistance a person needs with activities of daily living (ADLs) as well as management of one’s health. Each of these assisted living levels of care features a different cost, as well as a different amount of hands-on care. Today’s seniors are fortunate to have a variety of solutions to suit their needs, but so many choices can quickly lead to feeling overwhelmed. If you have made the decision that you may need assisted living, you now need to educate yourself about the multiple levels of care within your assisted living community.

Knowing about the varying levels of care will help you form excellent questions to ask when touring communities, as well as know what supports are available to you or your loved one as the years pass. Although levels of care can be unique to each assisted living

community, these three categories will give you perspective into what to expect and a framework for tailoring your questions during your next meeting or tour.

Why Levels of Care?

Assisted living, although regulated across state guidelines, is not as heavily regulated as skilled nursing facilities, once called nursing homes. Instead, assisted living communities are able to offer excellent care in a less clinical environment. Help with bathing, grooming, eating, medication, mobility or incontinence are all examples of activities of daily living that a senior might need assistance with. Assisted living “levels of care” refers to how much assistance a person needs with these activities of daily living, as well as management of one’s health.

Levels of care also allow residents in the assisted living community to age in place longer, as they are able to receive more care while in their apartment and

community. Levels of care allow for residents to safely and happily live in their assisted living apartments longer than usual.

Levels of care allow assisted living administrators to hire the staff they need to give the assistance residents require. For example, an assisted living community that has more residents who require assistance to get to and from the dining room three times per day needs to hire more caregivers than a community that has residents who walk on their own to meals. Dividing residents into categories, or levels of care, based on their needs allows administrators to have the staff available to offer those solutions.

Types of Levels of Care

Most states do not dictate levels of care within the assisted living industry. This means it is up to each community to outline levels of care, along with the needs that make up each level. Generally, it is common to find communities that feature two to four levels of care within assisted living, including residential living, skilled nursing, memory care, assisted living, and rehabilitation.

Lower Levels of Care

Lower levels of care typically are for residents who need minimal assistance. These residents can ambulate without assistance, whether walking on their own, with an assistive device, or with a wheelchair. Residents have no memory loss and are able to make their preferences known. They may need some help fastening buttons while getting ready in the morning, and use help while showering, but are otherwise independent in their daily hygiene and care. They are able to manage their toileting needs, even if they do require incontinence products. Nurses manage their medications and even take blood sugar levels or perform other regular tests at the community, but the resident does not require complex medical monitoring.

Higher Levels of Care

Higher levels of care are for residents who need more hands-on assistance from caregivers. These residents may not be able to ambulate independently and need help walking or wheeling from one place to another. Residents need more extensive help dressing, bathing, or managing their toileting or incontinence. These residents may exhibit some signs of memory loss and require more verbal or physical cueing to make decisions or manage their day successfully. Finally, these residents may require some complex medical monitoring or assistance managing chronic pain, and they could have increased fall risks or other safety concerns.

Memory Care

Finally, assisted living communities often feature memory care units, which function as a higher level of care designed for seniors living with Alzheimer's disease or dementia. These environments were built from the ground up to help seniors with memory loss succeed and feel at home. Activities are failure-free and dining programs emphasize dignity. Staff members receive additional and ongoing specialized training in dementia care and often lead support groups or educational opportunities for family members as well.

Next Steps

If you are pursuing assisted living as a viable option for you or your loved one, take time to talk about levels of care during your tour. Most assisted living communities will assess potential residents in order to make a guess about their initial level of care needs. Use this information not only to plan for your initial costs, but also to gauge your future costs based on any decline due to medical conditions.



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