

Using a Professional Care Manager

Services from care managers should be something that every family takes advantage of, but in reality very few families use them. Care managers could go a long ways towards helping the family find better and more efficient ways of providing care for a loved one.

The concept is simple. The family hires a professional adviser to act as a guide through the maze of long term care services and providers. The care manager has been there many times. The family is experiencing it usually for the first time.

Hiring a care manager should be no different than hiring an attorney to help with legal problems or a CPA to help with tax problems. Most people don't attempt to solve legal problems on their own. And the use of professional tax advice can be an invaluable investment. The same is true of using a care manager.

Unfortunately there are too few care managers and the public is so poorly informed about the services of a care manager, that valuable resources that could be provided go lacking.

The irony of not using a care manager is that most families -- when given the opportunity to use the care manager -- think they can do it themselves and will not pay the money. Yet the services of a care manager most likely will save them considerably more money then do-it-yourself. The cost of the care manager might be only a fraction of the savings the care manager could produce. Care manager services can also greatly reduce family and caregiver stress and help eliminate family disputes and disagreements.

Even the Yellow Pages do not cooperate in helping the public find care managers. To find a care manager one must look in the Yellow Pages under "Senior Services". Who is going to know to look under that subject?

Below is a partial list of what a care manager might do:

1. Assess the level and type of care needed and develop a care plan
2. Take steps to start the care plan and keep it functioning
3. Make sure care is received in a safe and disability friendly environment
4. Resolve family conflicts and other family issues relating to long term care
5. Become an advocate for the care recipient and the family caregiver
6. Manage care for a loved one for out-of-town families
7. Conduct ongoing assessments to monitor and implement changes in care
8. Oversee and direct care provided at home
9. Coordinate the efforts of key support systems
10. Provide personal counseling
11. Help with Medicaid qualification and application
12. Arrange for services of legal and financial advisors
13. Manage a conservatorship for a care recipient
14. Provide assistance with placement in assisted living facilities or nursing homes
15. Monitor the care of a family member in a nursing home or in assisted living
16. Assist with the monitoring of medications
17. Find appropriate solutions to avoid a crisis
18. Coordinate medical appointments and medical information
19. Provide transportation to medical appointments
20. Assist families in positive decision making
21. Develop long range plans for older loved ones not now needing care

Let's look at two hypothetical examples to see how a care manager could be used.

Here is the first example:

Mary is taking care of her aging husband at home. He has diabetes and is overweight. Because of the diabetes her husband has severe neuropathy in his legs and feet and it is difficult for him to walk. He also has diabetic retinopathy and cannot see very well. She has to be careful that he does not injure his feet since the last time that happened he was in the hospital for four weeks with a severe infection. She is having difficulty helping him out of bed and with dressing and using the bathroom. She relies heavily on her son who lives nearby to help her manage her husband's care.

On the advice of a friend Mary is told about a care manager, Susan Brown, who helped the friend's family cope with the care of a loved one. The cost of an initial assessment and care plan from the care manager is \$300.00. Mary thinks she has the situation under control and \$300.00 for someone from the outside to come in and tell her how to deal with her situation seems ridiculous.

One day Mary is trying to lift her husband and injures her back severely. She is bedridden and cannot care for her husband. Her son, who works fulltime, now has two parents to care for. On the advice of the same friend he decides to bring in Susan Brown and pay her fee himself.

Susan does a thorough assessment of the family's needs. She arranges for Mary's doctor to order Medicare home care during Mary's recovery. Therapists come in and help Mary with exercises and advice on lifting. Susan advertises for and finds a private individual who is willing to live in the home for a period of time to help Mary with her recovery and watch over her husband. Susan makes sure the new caregiver is reliable and honest and that taxes are paid for the employment. Susan enlists the support of the local area agency on aging and makes sure all services available are provided for the family. Susan also calls a meeting with Mary's family and explains to them the care needs and how they need to commit to help with those needs. Susan makes arrangements to purchase medical equipment for lifting, moving and easier use of the bathroom facilities. Medicare will pay much of this cost.

Susan suggests using a geriatric care Physician she works closely with to help Mary in the care of her husband. The geriatrician meets with Mary and her husband and spends a great deal of time explaining the proper treatment and care of elderly with diabetes. He rearranges medications and puts Mary's husband on a new insulin regimen to better control his blood sugar. He starts a strict diet and insists on weight loss and exercise. The previous doctor seemed more interested in treating symptoms than in changing lifestyles. In contrast to this attitude, the geriatric Physician feels that Mary's husband has a chance of improving his health with proper treatment.

Susan also works closely with an elder law attorney and a financial planner who specializes in the elderly. The attorney prepares documents for the family including powers of attorney, a living will and advice on preserving Mary's remaining assets. The financial planner recommends a reverse mortgage specialist to help Mary and her husband tap unused assets in their home's equity. In addition, an income vehicle is put into place to convert assets into income in order to provide for Mary for her life when her husband is gone. And finally, with the help of the financial planner, an application for veterans benefits is made for Mary's husband who is a veteran. Depending on the monthly cost of care this additional income could provide up to \$1,800 more a month in household income.

With the help of the care manager, Mary's life and future have been significantly improved. Her husband as well, if he adheres to the care plan, may end up having a better quality of life for his remaining years.

Here is another example of the value of the care manager.

Michelle is a single divorced mother with two teenage children. Her mother, Martha, has a stroke which apparently causes some memory loss as well as some disability in being able to fend for herself. Michelle decides to move in with her mother and take care of her. In return, Michelle who is temporarily out of work, has a place to live and share her mother's retirement income.

Martha is anything but easy to take care of. She has mood swings and often forgets what she is doing. She seems to display a lot of anger and takes it out on Michelle, calling her all kinds of horrible names. She is

never happy and is constantly calling for attention. In trying to take care of her own children as well as her mother, Michelle is quickly being drained of her physical and emotional strength. In addition Michelle's brother and two sisters are happy she is taking care of her mother since they are now absolved of the responsibility, but they treat Michelle terribly. They also call her awful names and accuse her of being a "leech". On the other hand they have plenty of advice on how to deal with their mother but never offer any of their own time to help. After all, they reason, Michelle is receiving benefits from caring for her mother and logically she should be responsible for all the care.

On the advice of a friend, Michelle hires a care manager, Brent Smith, who comes highly recommended in solving family disputes. Brent is a certificated mediator. Brent first does a care assessment of Martha and comes away suspecting there is more to her personality disorder than a stroke. He makes arrangements to take Martha to a geriatric Physician who does a complete physical assessment and recognizes that Martha's mental state is due more to improper medications and severe depression. Martha's medications are reduced and changed and she is put on antidepressants. In addition her diet is upgraded, she is to receive more fluids, more healthy foods and especially receive vitamin supplements. Particularly important is a prescription for vitamin B12 shots.

The doctor insists on as much exercise as Martha can handle. Brent, the care manager, helps convince Martha of the need for her new care program and helps oversee her following through on the exercise program. Over the ensuing months Martha's lack of memory and abusive behavior become less severe. She is also better able to care for herself without Michelle's assistance.

In addition to the assessment, one of the first things Brent does is to contact Michelle's older brother who is the family leader. He has a long talk with her brother and gives the brother a different perspective on the issues. With a better understanding of the situation, the brother calls a family meeting and Brent mediates a successful resolution of the family mistreatment of Michelle and the ensuing bad feelings. Everyone including Michelle is called upon to do their part in managing the care of her mother and to work on better family relations. The issue of Michelle "sponging" off of her mother is addressed and an adequate solution is agreed to by all. Brent will follow up in a month to make sure everyone is following through on his or her commitment.

These two examples concentrate on care in the home but care managers are also actively involved in helping families with the selection of facilities and any appropriate care services. Finally, care managers are indispensable in helping coordinate and arrange for care for a loved one living far away from family members.

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