Answers for Those Struggling with 'After Care'

As an RN at HomeCare Options, Barbara Sous has long seen the struggles families face when a loved one returns home from a hospital or rehabilitation center.

"Families can feel overwhelmed when they suddenly have to care for an elderly and infirmed family member who is stable enough to return home, but still presents with a big decline in their physical and possibly mental and emotional condition," says Sous. "In most cases, families worry about how mom or dad is coping while in the hospital or in sub-acute care and don't think about next steps. Then, once their family member is discharged, they suddenly realize that no one will be home to check on them or

they're expected to perform the kind of care they're not prepared for."

Sous also knows this from personal experience. Her 84-year-old mother-in-law recently returned to her home in Totowa, where she lives alone, after being hospitalized at St. Joseph's Medical Center following an adverse reaction to her treatment. Although both

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HomeCare Options hosted Memory Screening Day in Totowa with student nurses from William Paterson University.

Are You Eligible for Veterans Benefits?

HomeCare Options recently hosted a free seminar on benefits for veterans and their widows.

"Unfortunately, many miss out on benefits they deserve because they are unaware of it," says Alexis Barry, Executive Director of HomeCare Options. "This includes benefits that could help defray the cost of home care."

In fact, according to an estimate by the Veterans Administration, only one in seven of the widows of vets and about one in four veterans who would probably qualify for benefits actually receive them.

Barry has found this to be true when her staff asks new patients about this during the initial assessment process.

"This is a generation where, in many cases, someone served in the military," she says. "And, yet, very often families don't realize they could be eligible for benefits."

Evan Kaltman of the Veterans Home Care NYJ, spoke about the three "M's" needed to qualify for Aid & Attendance Benefits: *Military* (a World War II or Korean War veteran or spouse must have served at least 90 days active duty, at least one day during wartime period – although not necessarily in a war zone – and have been discharged honorably), *Medical* (60 percent homebound and permanent and regular need for assistance with activities of daily living), and *Money* (financial limitation in terms of income and assets).

This program offers monthly benefits of up to \$2,120 for a married veteran, \$1,788 for a veteran, and \$1,149 for a surviving spouse.

It is estimated that an estimated two million wartime veterans or their spouses are eligible for the pension to help pay for home care. In order to qualify for the pension, veterans must be over the age of 65.

Help to Those Struggling with Transitional Care

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Sous and her brother-in-law's family live nearby, their own health and work schedules prevent them from being available to care for her.

"When my mother-in-law returned home she was weak and required a large amount of care," says Sous. "She needed personal care – bathing, dressing, help in going to the bathroom – and there was no one in the family to take care of her during the day. She was confused and disoriented and we wanted to keep her in the nursing home (where she went after leaving the hospital), but she insisted on coming home. This is a problem I see with my patients and their families all the time."

New legislation now offers hope for families who struggle to provide transitional care for loved ones. The bill requires general acute care hospitals to provide patients and their legal guardians with opportunities to designate a family caregiver following the patient's entry into the hospital. In addition to designating the caregiver – a relative, spouse, partner, friend or neighbor – the bill calls for training that may include a live or taped demonstration of the aftercare tasks and the answering of any questions. There is no provision for caregivers provided by home care agencies.

"This is an important start in ensuring that patients are getting the care they need from somebody they know and trust when they return home," says Ken Wessel, president of the Home Care Council of New Jersey, the statewide association of non-profit home care providers. "It's an opportunity for caregiver to become trained and to realize, sooner rather than later, that if it's too much for them to handle or there is no one to manage and monitor the patient's condition once they return home, that they need to arrange for outside resources."

Providers in the field believe that many families will still face stiff challenges.

"We found that when there is a significant change in a family member's health, say after a stroke, surgery or treatment for cancer, many family members feel overwhelmed," says David DiLaura, a registered nurse at HomeCare Options. "There can be a huge learning curve. Often, it's not something that can be taught in a couple of hours to someone who has had little if any prior medical experience."

Care, he says, may require issues involving mobility, medication, wound care and nutrition, in addition to Activities of Daily Living (e.g. bathing, grooming, toileting, feeding).

The new legislation, in effect, provides for the development of a care plan that will help people become more proactive rather than reactive in dealing with after-care.

"Family members need help as soon as their loved one comes home," says Sous. "In today's world, where most people work, this may mean having the patient's designated caregiver's hours supplemented by a home health aide. It also means making use of those community resources that exist, such as Meals on Wheels, voluntary shoppers, and so forth. It can be a very stressful time."

Many families will realize they need around-the-clock care, she says, and can't afford to pay for it – particularly if they don't qualify for Medicaid or can't wait for it to cover the cost. In addition, there may be certain caregiving duties – such as bathing or toileting – that family members may feel uncomfortable performing. The sooner they prepare for this, she says, the better.

This is what she did in getting a grant from the Passaic County Office of the Aging, which helped her pay for a home health aide to come in three days a week to care for her mother-in-law. Having an aide allowed her family to schedule their time around the aide's and to feel a little less overwhelmed about managing the elderly woman's care.



Yvonne Hester, shown with Emily Arowosaye, Director of Services, was honored on Home Health Day for her 40 years of service with HomeCare Options.