



Home Care and Hospice

Helping seniors age with dignity and security

Most seniors want to live in their own homes as they age, according to AARP Research.* Wherever they call home, licensed home care and hospice caregivers can help seniors maintain an independent and safe environment as long as is appropriate. Choosing an agency to provide services is an important decision, and the relationship between a person receiving services in home care and hospice is critical for security and peace of mind.

Rose's story of aging and living with an illness illustrates the important role that home care and hospice can play in people's lives. Rose received in-home care services that included medication management, foot care to aid with her diabetes and some light housekeeping twice a week. Rose eventually installed a stove guard to help monitor the safety of cooking. As she aged, she was diagnosed with dementia. Rose soon required hospice care through a support network that included her family, attending physician and hospice care team. Family, physician and hospice care staff worked closely together, which allowed Rose to age with dignity and security.



People have options in choosing an agency to provide services.

Choosing a home care or hospice agency for you or your loved one can be a difficult decision. Agencies are required to follow guidelines. When researching agencies, please consider the following checklist. Ask:

- what makes their agency unique.
- if they contract nurses or use regular, consistent nursing staff.
- if they visit the patient at the time of death.
- if they are Medicare certified.
- what licenses and accreditations they have.
- what bereavement services they offer.
- if they offer a continuum of care to provide services and housing options like senior housing, assisted living, care centers, home health, or hospice.

* <https://www.aarp.org/research/topics/community/info-2018/2018-home-community-preference.html>

Home Care

Home care offers supportive services wherever you call home. Caregivers work with patients, their families, and physicians to develop individualized care plans that may include skilled nursing, physical therapy, occupational therapy, speech therapy, assistive technology, home health aides, and 24/7 live-in care. Services may also include medication management, wound care, mobility strengthening, foot care, transportation, and light housekeeping.

Services are appropriate when:

- support is needed to transition from hospitalization to home or a skilled nursing facility.
- there is an overall decline in cognitive skills affecting a person's ability to make decisions regarding their safety.
- help is needed with daily activities.
- there is a new medical diagnosis or major change in the state of health.
- a person may be socially isolated and in need of companionship.

Costs are covered through Medicare (on a short-term basis), or Medicaid, Veterans benefits, private insurance, and private pay. Agencies will work with patients and their caregivers to determine the appropriate payment source.

Hospice

The right time for hospice will be different for each person.

Hospice care is a personalized program that provides medical, emotional, social, and spiritual support for patients with a limited life expectancy. Care

is provided to people with a life expectancy of six months or less but doesn't mean death must come within six months. Hospice care requires certification by the attending physician and hospice medical director—emphasizing living remaining days as fully as possible in comfort and dignity.

Members of the hospice team make the patient and family the center of all decisions.

The hospice team provides support, teaching, and expertise to help the family provide needed care. Services can be provided in a private home, long-term care facility or other residence. Hospice teams provide relief from physical, spiritual and emotional pain that often accompany a limited life expectancy. Teams include the patient and family, primary care physician, medical director, social worker, registered nurse, certified nursing assistants, pharmacist, massage therapist, music therapist, spiritual counselor, bereavement counselor, and volunteers.

Hospice care costs are covered under Medicare, Medicaid hospice benefits, most private insurance plans, Veteran's benefits, or private pay.

Randy Leja

Director of Home Health and Hospice at Mary T. Inc.

Helpful Resources for Home Care and Hospice Agencies and Services

- Information on an array of senior services and assistance

Senior Linkage Line: 1-800-333-2433

- Inquire about the licensing of any agency

Minnesota Department of Health: (651) 215-8701 or

<http://www.health.state.mn.us/divs/fpc/directory/hhasurveyselect.cfm>

- Inquire about economic assistance for seniors

Minnesota Department of Human Services:

<https://mn.gov/dhs/people-we-serve/adults/economic-assistance/>