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INTERVENTION ASSOCIATES

CARE MANAGEMENT ADVISOR

Providing trusted care management solutions for your clients need.

Intervention Associates is a subsidiary of The Friends Life Care at Home® System, which operates continuing-care-at-home plans in the greater Mid-Atlantic region. This innovative program is designed to support independent and healthy adults who wish to remain in their own homes, as well as receive the financial protection offered by traditional long-term care insurance.

Modeled on the concept of a continuing care retirement community, it is a total plan that provides and pays for care with the goal of helping its members live at home safely for as long as it is possible. For more information about how Friends Life Care at Home® can help your clients, please logon to www.friendslifecareathome.org or call (215) 628-8964.



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Assessing the Needs of Your Older Client

By Shari VanderGast, LCSW, JD
Executive Director of Intervention Associates

Working with older clients can be both very rewarding and challenging. At times you may be concerned about the physical or mental health and well-being of your older client. In this article we will review some of the common questions and concerns that may arise in your work with your older client, and suggest steps that you or the client's family may take to ensure that she/he is getting the care and services that are needed. When assessing the needs of your older client, you will want to ask the following questions:

- Do I know when my client has last seen a doctor? A dentist?
- Do I know what her diagnoses are?
- Is my client a candidate for geriatric assessment?

In determining whether further medical assessment is needed you may want to consider the following:

- Does your client appear unclean or inappropriately dressed?
- Does your client remember past interactions with you?
- Is your client repetitive or perseverative?
- Have family members or friends expressed concern?
- Does your client seem unduly influenced by family or friends?
- Has your client expressed feelings of hopelessness/helplessness or does she seem depressed, anxious, forgetful or even delusional?
- Has there been involvement from the police or older adult protective services?

A geriatric assessment is a comprehensive, interdisciplinary assessment of a client's medical, functional, social and emotional status, which results in a written report with recommendations for both current and future support and care needs. Components of a geriatric assessment may include:

- Internal medicine/geriatric physician evaluation;
- Laboratory or other diagnostic tests;
- Mini-mental status evaluation;
- Neurological evaluation;
- Psychiatric evaluation;
- Nursing or functional status evaluation; and
- Occupational, speech and/or physical therapy evaluations.



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ASK THE CARE MANAGER

In this issue of *Care Management Advisor*, care manager **Kate Foster, MSS/LSW**, will answer one of the many questions we receive about assessing older adults' needs. Kate has been with Intervention Associates for 16 years and has worked with children, clients with mental illness and many older adults in a variety of settings and circumstances.

Question from a local trust manager:

I manage the trust of an 80-year-old man. His only daughter lives several hours away and he spends most of his time alone. On a recent visit to his home, he showed me a stack of unpaid bills and asked me what he should do with them. When I opened them, I noticed that some were more than 3 months overdue. I think this gentleman needs more help than I can provide. Please help.

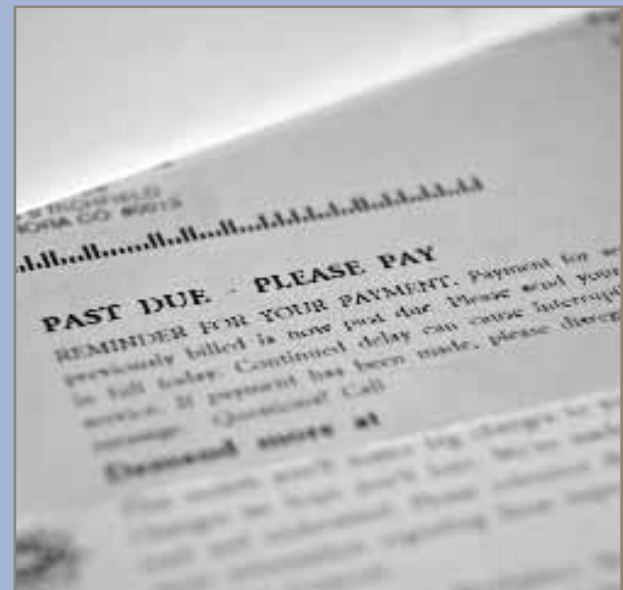
Kate's Answer:

If your client is having trouble paying bills, I suspect he's having trouble with other life management issues. Unpaid bills can often be a symptom of a medical problem in an older adult. Depression, drug interactions, a mini-stroke or even a urinary tract infection can present with the symptom of confusion or memory loss. It is a good idea to suggest a thorough medical exam with a practitioner who regularly treats older adults. If a physical problem is ruled out, the physician can also do a mental status evaluation to determine if the client might be in the beginning stages of an Alzheimer's-type dementia. There are several medications that can be effective to mitigate some of the symptoms of memory loss. Often seniors with early dementia are also depressed, so it is useful to have a neuropsychiatric evaluation done so that proper treatment can be started.

Some other questions come to my mind about this gentleman who is forgetting to pay his bills. Is his nutrition adequate? If he is forgetting to pay bills, the chances are that he is not eating well. Would he know what to do in case of emergency? Is he at risk of falling in his home? If he has a car, is it safe for him to be driving? He should have a power of attorney and a living will, in case someone needs to make decisions on his behalf. It would be important to assess whether or not he takes his medication and if he is receiving ongoing medical care. We would be concerned about his social interactions and support system in the community. These are just some of the things that we try to assess when we are visiting someone for the first time.

Often children who live out of town are not able to "see" the day-to-day problems of their parents. There is a tendency for both generations to minimize their concerns. When there is no crisis, it is easier to think that "if dad says he is fine, he must be okay," since he was always so independent and in charge of things.

As a care manager who often has to respond to crisis situations where an elderly person has fallen or perhaps started a fire in his home, I am always glad when families are able to contact us before there is an emergency. Early evaluation can identify problem areas that might be addressed with minimal supports, such as a few hours of in-home care, help with bill paying, an emergency response system or perhaps Meals on Wheels, to name a few.



Geriatric assessment centers can be found at many major university medical centers. Most assessments are covered by Medicare or other medical insurance plans.

Do you suspect that your client is suffering from memory loss? Memory loss may be a result of a number of medical and neurological problems, including cardiac, pulmonary and metabolic problems. Always recommend that your client receive a complete medical workup when memory loss is present. Short-term memory loss is more indicative of conditions such as Alzheimer's Disease and multiinfarct dementia. Sudden loss of memory may be a symptom of more sudden and severe problems such as stroke or medically induced delirium. Does your client have a long history of alcohol use/abuse? Korsakov's Syndrome is an alcohol-induced dementia that his physician should consider.

Once you have determined that your client has a memory impairment, it is important to assess her level of functioning. Some important questions to ask are:

- Can my client perform activities of daily living (ADLs) such as bathing, dressing, walking or personal care?
- Can my client complete instrumental activities of daily living (IADLs) such as shopping, meal preparation, basic cleaning of her residence, paying bills or making telephone calls?

In the moderate or later stages of memory loss or dementia, an assessment of the individual's ability to live safely is crucial. Many clients will need additional supportive services to enable them to continue to live at home, or may need to consider a residential placement of some kind. In determining whether a client is living at home safely, you will want to consider whether your client has:

- Wandered away from her residence, even one time;
- Failed to keep doctors' appointments;
- Forgotten prior discussions with you or agreements that she has made or signed;
- Left the water or stove on in her home;
- Gotten lost while driving or taking public transportation;
- Fallen without the ability to get up;
- Experienced a significant medical problem but refused to accept treatment;
- Had substantial problems with household management; or
- Called police or other authorities to report problems that are later unsubstantiated.

At some point, it may be necessary for your client to stop driving. This is often a difficult and painful decision for both the client and his/her adult children. In the best of circumstances, family members identify the problem and speak with their older relative, who agrees to cease driving. At times, the older adult disagrees with this assessment, and a professional may need to become involved. In this circumstance an evaluation with the client's physician should be arranged.

Once a physician evaluates the older adult, a referral to a driving evaluation center may be made. Such centers are affiliated with rehabilitation hospitals, and can be helpful if evaluating drivers for visual, hearing or neurological impairments that may affect driving ability, as well as provide functional assessments of clients' motor skills and response times. All of these factors will determine whether an individual can continue to drive safely. If needed, physicians and driving evaluation centers may begin the process of notifying the state Department of Motor Vehicles that a client's driving privileges must be revoked.

Your older client may present challenges that take you outside your usual scope of practice. For that reason, it may be helpful for you to form relationships with quality physicians, psychiatrists, care managers and home care agencies whom you trust to provide service to your clients. This will help you to be prepared when the inevitable urgent phone call comes.

OUR CARE MANAGEMENT SERVICES



Working with individuals who are reluctant to accept help or don't see the need for it?

At Intervention Associates we've created a dynamic staff group model to make sure every aspect of care management is supported. Through creative problem solving and an experienced staff, we solve care management problems for your clients so you can do what you do best—take care of their trusts, handle their legal affairs or manage their finances. We provide the following services.

- Care planning assessments to identify problems, eligibility for assistance or need for services.
- Screening, arranging and monitoring in-home help or other services.
- Acting as a liaison to families at a distance, making sure things are going well and alerting families to problems.
- Reviewing financial, legal or medical issues and offering referrals to specialists to avoid future problems and conserve assets.
- Assistance in moving to or from a retirement complex, care home or nursing home.
- Counseling and support.
- Crisis intervention.
- Consumer education and advocacy.
- Reliable home care services through our parent company, Friends Life Care at Home.

In addition, Intervention Associates provides free inservice training for your staff on a number of topics that affect your clients' care management needs. For more information about how Intervention Associates can help, call us at (610) 254-9001 or logon to www.interventionassociates.org

New Home Health Services Brochure Available

An illness or accident happens all too often when a family is least prepared to manage the crisis. Sometimes the needed help can be hard to find, and sometimes there are so many avenues to explore that it can become paralyzing.



Intervention Associates has produced a straightforward brochure that clearly explains its care management services. From needs assessment to patient advocacy to resources for the homebound, Intervention Associates is uniquely positioned to help. When home health aides are

required or homemakers who help with meals and housekeeping would ease the burden, this brochure will reassure family members that they can have confidence in the aides who come into their homes.

Use the attached response card to order a supply of these brochures for those times when your clients turn to you for advice.



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