The Home Care Solution
A Guide to the Best Choices for Seniors in Canada and Those Who Care About Them
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is Home Care?</td>
<td>3</td>
</tr>
<tr>
<td>Why Home Care?</td>
<td>4</td>
</tr>
<tr>
<td>Non-Medical Care</td>
<td>6</td>
</tr>
<tr>
<td>Medical (Home Health) Care</td>
<td>8</td>
</tr>
<tr>
<td>Accessing Home Health Care</td>
<td>10</td>
</tr>
<tr>
<td>The Home Care Solution</td>
<td>11</td>
</tr>
<tr>
<td>Who to Call for Non-Medical Care</td>
<td>13</td>
</tr>
<tr>
<td>Resources</td>
<td>15</td>
</tr>
<tr>
<td>About Home Instead Senior Care</td>
<td>16</td>
</tr>
</tbody>
</table>
What is Home Care?

While the definition is simple, the services that encompass home care are broad and varied. Simply put, home care is supportive care provided wherever individuals live, be it in their home, a retirement home, or a care facility by professional caregivers or family and friends.

The term home care actually describes two very different types of care:

• Non-medical homemaker, companionship, or personal care services provided by home helpers, or non-medical caregivers and certified aides.

• Medical home health care provided by regulated and licenced medical professionals and certified aides.

In broader terms, care that seniors typically require often revolves around the Instrumental Activities of Daily Living (IADLs) and Activities of Daily Living (ADLs).

IADLs are those activities instrumental to our daily routines such as:

• driving
• preparing meals
• doing housework
• shopping
• managing finances
• managing medication
• using the telephone

ADLs, on the other hand, are basic activities and functions performed on a daily basis. The six ADLs are:

• eating
• dressing
• bathing
• toileting
• transferring
• continence
Why Home Care?

A study conducted for the Home Instead Senior Care® network found an overwhelming majority of seniors (86%) want to continue living at home for as long as possible and seniors appear to be willing to seek help in order to do that. The study found that the 54% of seniors who live alone are four times more likely to use professional care than those who live with their children. The users of paid care tend to be older - 42% of seniors over the age of 80 rely on professionals.*

*SOURCE: Home Instead Senior Care White Paper, online at HomeInstead.com

Family caregivers and senior care professionals may notice changes in their loved ones, which send up a red flag to say that an otherwise healthy older adult needs more assistance to remain safely and independently at home. These signs are an indication that it might be time to call for help:

When More Help is Needed

1. Household bills piling up. Seniors can feel overwhelmed by the simple task of opening and responding to daily mail.

2. Reluctance to leave the house. Rather than ask for help, seniors who are having trouble with such functions as walking, remembering, and hearing will pull away from their community and isolate themselves.

3. Losing interest in meals. Seniors who suddenly find themselves alone, perhaps after the death of a spouse, can be easily discouraged by such tasks as cooking and tend not to eat properly.

4. Declining personal hygiene. Changes in appearance, such as unkempt hair and body odour, failing to change clothes for days on end, or clothes inappropriate for the weather, are among the most obvious signs that a senior needs assistance.
5. **Declining driving skills.** Look for evidence of parking or speeding tickets, accidents, dents, and scratches on the car.

6. **Scorched pots and pans.** Cooking ware left forgotten on top of an open burner may be a sign of short-term memory loss or even Alzheimer’s disease.

7. **Possible signs of depression.** Feelings of hopelessness and despair, listlessness, fewer visits with friends and family, a change of sleeping patterns, and lack of interest in the usual hobbies and activities are indicators of depression.

8. **Missed doctors’ appointments and social engagements.** These can be signs of depression or forgetfulness, but they can also be the result of no longer having a driver’s licence and not knowing how to get alternative transportation.

9. **Unkempt house.** Changes in housekeeping may come about because the senior is physically tired. They could also result from depression.

10. **Losing track of medications.** Seniors often take multiple prescriptions for various health conditions. Keeping track without reminders and assistance can be confusing.

Non-Medical Care

Just because a senior is having more problems at home does not mean it’s time to recommend a move elsewhere. Such a circumstance could, however, signal the need for more help at home.

The first step in determining if care is warranted is to take the senior’s needs and desires into account. Sometimes these are difficult conversations to have with an older adult who is convinced that he or she does not need help. The best way for a family caregiver to start these conversations is to acknowledge the senior’s desire to stay at home:

“You know, Mom, I want you to stay at home too; however, that might be more difficult if you fall or get sick. A little extra help could keep you safe and independent at home for a longer time.” (For more tips about talking with seniors about sensitive subjects, go to 4070Talk.com.)

Non-medical home care might be ideal for an older adult who is recovering from an illness or a surgery, such as a knee replacement, and needs help around the home but not medical assistance. The need can be just as much for emotional and mental support, as well as physical assistance. A senior who loses a spouse can become depressed and lonely to the point her own health suffers. A widower’s increasing forgetfulness can put him at risk of forgetting to pay the bills or, worse, forgetting to take his medications.

Enhancing Lives

The companionship component of a non-medical caregiver’s job can be just as vital as the physical assistance a professional will provide. Seniors need conversation and one-on-one contact to keep their minds alert. They will thrive with someone to participate in their favourite activities such as gardening, baking, or woodworking, or someone to go to the grocery store or attend a concert.
Many seniors need help to get their day started. Assistance with showering, preparing breakfast, and taking medications may be required. Likewise, help before bedtime, or even overnight, can be an important safety net for seniors at home, who are often more apprehensive at nighttime, or who have Alzheimer’s disease or another dementia. A reputable, non-medical, caregiving company will provide caregivers that can meet all of these needs.

Let’s say a senior does eventually need to make the move to a retirement home or to a care facility. While many retirement homes offer extra services, not all of them offer assisted living. However, non-medical care can continue with that older adult in an assisted living facility, nursing home, or, if acute hospitalization occurs, in a hospital setting.

**Non-Medical Service:**
Non-medical service can help seniors when their ability to perform their ADLs or IADLs, as mentioned earlier, may be compromised. Such services may include:

- care for a senior with dementia
- assistance with eating
- dressing
- bathing
- toileting
- meal preparation
- light housekeeping
- transportation needs for errands
- taking the senior shopping or to medical appointments
- companionship
- laundry
Medical (Home Health) Care

It used to be that a medical crisis could necessitate a move for seniors from their own homes. But today, even older adults who suffer a serious injury, a medical trauma, or a life-threatening illness can still remain at home. Advances in technology and life-saving equipment have kept many seniors out of a nursing home.

What’s more, some home care agencies can also provide medical professionals to go to an older adult’s home, offering a wide range of medical and therapeutic services.

Convalescing at home can actually help some seniors not only survive but thrive. For instance, seniors with dementia may be less confused at home, in a familiar setting, where they will be more likely to know where everything is located.

As is the case with non-medical care, there are signs in a senior that can signal when it’s time to call for help.

When In-Home Medical Care is Needed

- Trauma
- Administering Most Medications
- Chronic Pain Management
- Blood Draws
- Bedsores (wound care)
- Diabetic Foot care
Team Approach

It’s possible for an older adult to have both non-medical and medical services concurrently. That’s because the services of a medical provider will typically be considerably different from those of a non-medical caregiver. While both focus on the safety, well-being and healing of an older adult, the non-medical caregiver will also focus on building a relationship with a senior.

The medical professional will generally have limited contact with a senior while the relationship with a non-medical caregiver may very well be longer term. For example, a senior recovering at home from heart surgery may be covered by the government to receive visits from a medical provider for post-operative care. Most will likely receive visits from a nurse, for example, until their condition has improved. However, if that older adult also suffers from dementia, a non-medical caregiver will likely still be vital to his ongoing well-being at home.
**Accessing Home Health Care**

The delivery of home and community care services is a provincial responsibility. Home care is not enshrined in the Canada Health Act, so the delivery of services is at the discretion of each province.

Home care programs are administered by provincial health departments and regional health authorities. The delivery of services is either by program staff or through contracted agencies (a mix of not-for-profit and for-profit organizations) that act closely with the provinces. These organizations also act as a point of access to long-term placement into residential (nursing facility) care.

In-home services include nursing, rehabilitation, and end-of-life care. These medical services are often provided at no cost to the client but have limits to the frequency and duration of visits. Local rules will determine eligibility for subsidized service based on health needs and income level. Non-medical “homemaking” services such as meal preparation and housekeeping are typically very limited or non-existent within the government funded programs.

**End-of-Life Care**

Hospice palliative care provides physical, emotional and spiritual support for those with life-threatening illness and for their loved ones. Care teams that include physicians, nurses, volunteers, spiritual counselors, friends and family can provide care at home, as well as in facility settings. Some provinces have benefit programs to cover the costs of medications and medical supplies. Visit chpca.net to find out more information about your local palliative care program.
The Home Care Solution

Finding a home care solution can be a daunting task. A good start is to educate yourself on the resources that are available. If unsure, just go to the blue pages of the phone book under “Ministry of Health.” Do this with the goal of having a professional assessment done for the family member in need. This assessment should help to:

- Supply you with community resource lists that include supportive organizations – Alzheimer’s Society of Canada, etc.
- Establish a baseline of physical and mental functioning that addresses ADLs and IADLs from which future assessments can be compared.
- Connect your loved one to a case manager and register them into the system.
- Enroll your loved one into a geriatric outpatient program if available – some regions offer comprehensive geriatric assessments, chronic disease education, information and management, dementia clinics, continence promotion, medication education, dietary counselling and falls and injury prevention education.

The case manager will, in conjunction with family and other health professionals, develop a care plan which may include government subsidized services and/or referrals to other appropriate community resources including non-medical services. Veterans Affairs Canada is also a referral provider that covers non-medical home care services.

The assessment may indicate that with some non-medical assistance your loved one can remain safe and independent at home.

While the first key to finding a solution is to educate, the second is to advocate. Whether you are just beginning to see the red flags indicating more help is needed, or you have a loved one in a hospital hoping to go home soon, choose a family member well suited to be an advocate. Care aides, nurses, social workers, doctors and other professionals are often overwhelmed and working under difficult
circumstances. Appreciate them, develop a positive relationship with them, and engage them assertively. Be a strong advocate. Take the lead in organizing care plan meetings.
Who to Call for Non-Medical Care?

Non-medical home care and companionship services can be the solution for seniors who prefer to remain at home.

Most full-time agencies hire caregivers who are screened, trained, bonded, insured and covered by Workers Compensation. On the other hand, if you decide to hire a caregiver privately, you may become the employer and responsible to pay the caregiver directly. You may also become responsible for all provincial and federal payroll requirements, and any screening, supervising, and training, as well as assuming all professional liabilities.

What should you know in order to determine which care service represents the best fit and value? By addressing each of the following issues and noting the differences between care options, this decision can be made with greater ease and confidence.

Finding the Right Person

• Is there a thorough screening process in place? A caregiver’s background is especially important, as they will be serving within the senior’s home.

• Will you be matched with the right caregiver based on your needs and preferences?

Support and Supervision

• Does the agency provide the training and supervision necessary to assure a high quality of care?

• Does the training provided include specific information on Alzheimer’s disease and other forms of dementia?

• Does the agency train all of its caregivers? Do they receive ongoing training?

• Does the agency have a specific quality assurance supervisory program?

• If the caregiver is sick or away, is a suitable replacement available?
Insurance

• Is the service appropriately insured to cover breakage and dishonesty?
• Is the service covered by Workers Compensation insurance for employee injury?
• Can the provider supply you with family/client references?

Communication

• What is the provider’s communication plan to keep families and other stakeholders informed?
• Is a log of daily activities maintained?

Flexibility of Service

• Is service available at any time of day, seven days a week, including holidays, and can service be increased or decreased over time as your needs change?
• Is the cost structure simple, inclusive, and consistent?
• Do you have to sign a contract? Is a service deposit required and, if so, how much is it?

Remember that medical and non-medical care services are not mutually exclusive – they can work hand-in-hand. For instance, a senior recovering from surgery or an illness may need a nurse to administer medication or care for a wound, and a non-medical caregiver to assist with meals, light housekeeping, and personal care.

Resources

Following are resources that offer more information about home care or assisting seniors at home:

Home Instead Senior Care: HomelInstead.ca

Affiliated Web sites:

Stages of Senior Care: StagesofSeniorCare.com

Talking with Seniors – The 40-70 Rule®: 4070talk.com

Caregiver Stress: CaregiverStress.com®

Intergenerational Living – Too Close for Comfort®: MakeWayforMom.com

Activities for the Mind, Body, and Soul: GetMomMoving.com

The Division of Aging and Seniors – Public Health Agency of Canada: publichealth.gc.ca/seniors

Provides federal leadership on health issues related to seniors and aging. On their website, you will find many excellent articles on aging

Canadian Nurses Association – cna-aiic.ca

Canadian Home Care Association – cdnhomecare.ca

Victorian Order of Nurses family caregiver site: caregiver-connect.ca

The Canadian Hospice Palliative Care Association – chpca.net

The Canadian Caregiver Coalition – ccc-ccan.ca

Canadian Association of Retired Persons (CARP) – carp.ca
About Home Instead Senior Care

Founded in 1994 in Omaha, Nebraska, by Lori and Paul Hogan, the Home Instead Senior Care® network provides personalized care, support and education to help enhance the lives of aging adults and their families. Today, this network is the world’s leading provider of in-home care services for seniors, with more than 1,000 independently owned and operated franchises that are estimated to annually provide more than 50 million hours of care throughout the United States, Canada and 15 other countries. Local Home Instead Senior Care offices employ approximately 65,000 CAREGiversSM worldwide who provide basic support services that enable seniors to live safely and comfortably in their own homes for as long as possible. The Home Instead Senior Care network strives to partner with each client and his or her family members to help meet that individual’s needs. Services span the care continuum -- from providing companionship and personal care to specialized Alzheimer’s care and hospice support. Also available are family caregiver education and support resources. At Home Instead Senior Care, it’s relationship before task, while striving to provide superior quality service.

For a free no-obligation consultation, contact a franchise office near you by visiting HomeInstead.ca
Sorting through the surprisingly complex world of senior care can be overwhelming. That’s why Lori and Paul Hogan wrote *Stages of Senior Care – Your Step-by-Step Guide to Making the Best Decisions*, a practical, comprehensive guide to help you make senior care decisions for your aging loved ones based on their current needs and future desires. *Stages of Senior Care* provides tools to assess your loved ones’ care requirements and illustrates how to calculate costs, avoid pitfalls, identify scams, and choose the right options now and into the future. Lori and Paul Hogan are Founders of the Home Instead Senior Care network, one of the world’s largest providers of non-medical, in-home care for seniors.