



STAGES of SENIOR CARE

Your Step-by-Step Guide to Making the Best Decisions

by Paul and Lori Hogan

Chapter 1: Senior Choices

Lifestyle alternatives are far more extensive these days. Each of the following will be explained in detail in later chapters.

- **Aging in place.** The senior remains at home. Living quarters are made friendlier and safer with the addition of such aids as hand railings in the bathtub. Sometimes seniors in the same neighborhood create an informal "village" to contract for commonly needed services like transportation and plumbing.
- **Family care.** The family bears the entire responsibility for taking care of the elderly person--either in the senior's home or in the home of a family member.
- **Senior centers.** Seniors may drop in at these gathering places for social engagement and nutritional, inexpensive meals. These are generally for seniors who can drive or walk to the centers.
- **Adult care centers.** The senior continues to live at home but spends much of the day with peers at a local community center.
- **Nonmedical care at home.** Professional care givers come to the senior's home (and often other care settings) to provide companionship and home helper services such as meal preparation and light housework.
- **Medical care at home.** The senior may need professional medical help for easing respiratory problems, intravenous feeding, or assistance with medications--services not provided by nonmedical organizations.
- **Independent living communities.** These are also referred to as retirement communities. Seniors live in apartments or houses, generally smaller and easier to care for than the homes they have previously lived in. Shops and movie theaters are close by, which minimizes the need for a car
- **Assisted living centers.** Seniors here live in their own apartments, but in the same buildings or cluster of buildings. They take at least some of their meals in a common dining room but otherwise live independently. Medical help is generally close by.
- **Skilled nursing homes.** These were once thought of as institutions where the elderly were simply warehoused until they died. Now the best nursing homes include both mental and physical therapy as well as musical, art, and similar activities to help seniors extend their active lives.
- **Palliative care and hospice.** This is end-of-life treatment. A hospice can be a separate institution or part of a hospital. Or it can also be simply a form of care in other physical surroundings, including the home. The senior is made comfortable, fed, and given water and pain killers. But there is no medical intervention to prolong life.

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