**Taking care of parents who live far away or not and preparing for your own aging at home.**

**Get a home assessment**

Make sure the house is safe, that there are no tripping hazards.

If there aren’t grab rails in the bathrooms, have them installed.

If the house is a two story house make sure there is a half bath on the first floor and if possible try to create a bedroom if one is needed.

**Neighbors** - If your parent(s) is friendly with some neighbors, get to know them as they will be invaluable when you can’t reach your parent and you go into panic mode thinking the worst. Make sure one of them has a key to your parent’s house. They also can be a resource for a host of needs, they can recommend vendors that provide different services, places to eat if you are unfamiliar with the area, be your eyes and ears when you can’t be there.

Create a contact list for services vendors, electrician, plumber, lawn maintenance, snow plow etc.

**Legal Matters** - Become a co-signer on their checking account.

* Meet with their lawyer, financial planner.
* Become their Power of Attorney, Healthcare Power of Attorney.
* Discuss end of life plans and if your parent wants a DNR

If you can afford to hire a Geriatric Care Manager/Coordinator, that can be very helpful. They can attend medical appointments and report back to you, coordinate care if CNAs are part of the care plan, some will help with paying bills, coordinate Hospice, etc.

**Medical Matters -** When you are visiting try to schedule your visits when your parent has medical appointments. It is very helpful to establish relationships with their healthcare providers. Be familiar with all of their medications.

**Medical Devices/Aids**

If your parent takes meds but can’t remember if they took them or not or simply forgets to take them , get an electronic pill box with alarms.

Medical Alert systems – some are over a cellular network and have GPS – Consumer Reports reviews them – prices vary, some offer fall detection, but the technology is not perfect

More info on devices can be found at https://www.aarp.org/home-family/personal-technology/info-2014/is-this-the-end-of-the-nursing-home.html

Apple watch can detect falls, am not sure of its accuracy

Alexa care hub – set up between your parent and you. Works best if there is a device in every room. Can call for help, can personalize contacts with a simple voice command. Main drawback is you can’t call 911.

In-home monitoring devices such as Grandcare or GreatCall (used to be Health Sense), monitors your parents activities.

GrandCare places activity sensors in a senior’s home that evaluate what a typical “good day” looks like for a senior and sets alerts accordingly. For example, if a senior typically has breakfast by 9 a.m. and the refrigerator hasn’t been opened by that time, an alert may go out to a caregiver.

The GrandCare system is set up with oversized tablet that can be remotely activated. If a caregiver needs to check on a senior, he or she can open Skype which will activate the camera and microphone on the tablet. At that point, the caregiver can look for the senior and call out to him or her to determine whether help is needed. $650 plus $49/mo.

GreatCall is similar to GrandCare. It monitors activities of daily living such as sleeping, toileting, and kitchen habits.

The in-home wireless sensors collect data and identify baseline patterns of behavior for each individual using proprietary algorithms. For example, sensors in the bedroom can track if a senior gets out of bed more than usual, or conversely, has not left the bed.

When the technology detects a change in an individual’s baseline behavior pattern that could indicate an emerging health issue, it alerts a triage team at GreatCall. Staff then follow up with a call to the senior to assess the situation and determine the appropriate course of action.

**ElliQ elder care robot – for seniors in their 80s and 90s living alone**



*ElliQ can interact naturally with users rather than wait for a prompt. Source: Intuition Robotics*

ElliQ is an Intuition Robotics’ companion robot that isn’t just controlled by commands. It can say, ‘Good morning’ in different ways, using different words, lights, and timing, or not at all. While users may not want overly predictable devices, they are not yet used to proactive ones. ElliQ can do things such as share trivia or suggest that the user listen to music, drink water, go for a walk, or contact grandchildren.

ElliQ can choose the right time to interact, not interrupt you, and say something relevant, based on what else is going on in the room. It’s not just responding in a preprogrammed way; it’s initiating suggestions.

“Users liked ElliQ’s ability to wake up, acknowledge them, and offer interesting facts,” he added. “By being proactive, it can make people feel less lonely and help connect them to the world.”

$1500, free installation, $35-50/mo.

The leader in Healthcare robots is Japan in part because they have the fastest aging population and technology including robots has been used for a long time so it is readily accepted.

If cooking becomes an issue or isn’t safe, i.e., your parent forgets to turn off the burner or oven, arrange meals on wheels. There may be more than one service in your area. My mother enjoyed chatting with the man, a senior himself, who delivered her meals.

Blue Apron, Fresh Harvest – meals that just need to be put together lightens the load with food prep.

**Isolation is** **one of the biggest issues when aging in place**

When aging in place unless you are in a neighborhood where there is support such as Fearrington Village or the Beacon Hill Village Model aka a NORC, a concept that Susan will present at the next meeting, life can be pretty lonely in particular if you live alone.

The pandemic has added to the isolation problem although ZOOM for some has been a great help in terms of connecting with others and maintaining some sense of normalcy. Book clubs, meditation groups, dream groups, classes are readily available.

Some communities have heard the call. Vancouver is one of them. By June, more than 8,850 volunteers have donated their time to make almost 11,000 grocery deliveries to over 10,000 seniors since late March, when [Safe Seniors, Strong Communities](about:blank) was announced and the [211 phone line service expanded](about:blank) to match seniors and volunteers.

Volunteers have also made 54,000 virtual visits and check-in phone calls, and delivered 14,000 meals. Apparently the response was overwhelming in terms of volunteers wanting to help the elderly. One woman described how she just had a melt down over the phone and the volunteer just kept chatting, didn’t shy away from her and helped her get through what was bothering her.

Living in a CCRC just with elders – having to learn to deal with sad news and loss that happens far more frequently than you might expect or be prepared for. And the dangers of Covid resulting in total lockdown that lasted for months.

Price comparison – living at home vs. CCRC or independent living

Two price comparisons using my last house and my condo. The pricing worksheet left out some expenses.

Expenses for a free-standing home, not part of an HOA.

I budgeted $6,000 a year to cover the following:

Replace roof

Repair roof for leaks

Paint exterior of the house

Well repairs, including broken pipes and replacing the well pump

Maintain and eventually replace furnace

Maintain and eventually replace AC

Maintain and eventually replace hot water heater

Maintain and eventually replace water softening system

Maintain and eventually repair septic tank

Window replacement

Glass door replacement

Deck repairs

Clean gutters and replace when needed

Sky light repair

Maintain and eventually replace appliances

Plumbing services

Electrical services

Items in red are also taken into account to determine expenses for living in a condo, I budgeted $3,000 a year for these expenses.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Monthly Cost\* |  | Monthly Cost |
| Home 2300 sf | $1786 | CCRC 650 sf | $3,000+ |
| Condo 1670 sf | $1388 | CCRC 650 sf | $3,000+ |

\*Neither rent nor a mortgage are factored into these costs.

Azalea Estates offers studio, one and two bedroom units. The studio costs $2695/mo for 388 square feet and the two bedrooms are $4695/mo for 1049 square feet.

Let’s compare costs at Galloway Ridge, a Life Care CCRC with Azalea Estates.

First of all the smallest unit at Galloway Ridge is a one bedroom that is 815 sq. ft. which is $3358/month or $4.1/sq ft compared with $6.9/sq. ft.

The smallest two bedroom unit is 1296 sq.ft for $4942/mo vs. 1044 sq.ft. for $4695.

Independent Living facilities have different CDC guidelines according to the marketing person I spoke with.

The Health Industry is rethinking how to redesign CCRCs post Covid.

* Smaller group units in a building.
* Designated area used for isolation.
* Much more outdoor space
* Rethinking the heating and air-conditioning system to circulate air over smaller areas.
* Group activities and communal dining will have to be reinvented and done in smaller groups and buffets will probably be a thing of the past.
* Telemedicine and technology will be much more integrated into communities.

Monthly Cost (from Genworth)

|  |  |  |
| --- | --- | --- |
| **Home Health Care** |  |  |
| Homemaker Services | $3613 | $43,356 |
| Homemaker Health Aide | $4004 | $48,048 |
| **Adult Day Health Care** |  |  |
| Adult Day Health Care | $1278 | $15,336 |
| **Assisted Living** |  |  |
| Private, one bedroom | $4000 | $48,000 |
| **Nursing Home Care** |  |  |
| Semi-private room | $7300 | $87,600 |
| Private room | $8060 | $96,720 |

Homemaker Health Aide is a new term for me. From the description they help more with activities of daily living and can go grocery shopping. CNAs are trained to provide more medically oriented assistance.

**Hiring CNAs**

Get recommendations from friends

Interview company

Carefully read contract

Be aware of the company’s culture

Initially parent might need only a few hours of care a day. Required minimum is usually three hours but some companies might be more flexible. Some provide 2 hrs. but at a higher rate

Average home care cost is $22/hr, range is $16-30.

Most people don’t need round the clock care – 3 hrs/day = $462/week, $1848/mo.

24/7 care = $3696/wk, $14,784/mo. nearly twice as much as a nursing home.

Most people don’t need 24/7 care for an extended period of time. My mother had 24/7 care for 3 months.

Alternative home care

Lumbee Indians provide in-home care that is more economical – they are not necessarily trained as CNAs.

**Alternatives to CCRCs**

Group homes, think the Golden Girls

Granny Flats

Elder Co-housing

NORCs

Independent Living

Green Houses

Fearrington Village and other planned communities

**Life in Fearrington**

Rated by Kipplinger as the third best place in the country to retire to

Becoming more intergenerational

Extremely safe one of the main reasons that people move here

Single women, young women whose husbands travel, families with young children

Community support, people are extremely friendly and kind

Walking trails and beautiful gardens

Shops including a wonderful bookstore – pre-Covid famous authors gave readings at the barn

Live stock – cows, goats, chickens and donkeys

Clubs – my favorite – yacht club for people who don’t own yachts

Committees

Gathering Place

Classes, meetings, concerts, movies (pre-covid)

Fearrington Cares

Nurse available from 9-1, five days a week

Volunteers provide rides (pre -covid) they will still pick up groceries and prescriptions

Medical equipment that can be borrowed

Volunteers help with changing light bulbs, computer issues, minor repairs

Provides speakers on topics related to health, bereavement, supplements etc.

Swim and Croquet Club

Duke Center for Living

Since Covid - Weekly dinners from Fearrington Inn, at reasonable prices can be ordered

Meals from the Goat, will be delivered for free

Veterinarian in residence , makes house calls

Local pharmacy makes free deliveries