



LIFE KEEPING,
NOT JUST BOOKKEEPING®

PREPARING FOR HOMECOMING FROM HOSPITAL OR REHAB

IS THE HOME READY FOR MOVE-IN?

Cleaning

- Has the home been thoroughly cleaned? An outside cleaning service may be useful.
- Are towels and sheets freshly laundered? Do more need to be purchased?
- Check for infestations (bedbugs, cockroaches, carpet beetles, etc). A pest control specialist can check for infestations.

Food

- Has old food been discarded?
- What fresh food needs to be purchased?
- Who will make sure fresh food is brought in regularly?
- Consider setting up a telephone or on-line order/delivery account with a local grocer.

Clothing

- Is there enough appropriate clothing for the patient?
- Has the clothing been cleaned?
- Soft knits, and layers of them, will likely be more useful than street wear.

Guarding valuables

- Are jewelry and valuable collectibles stored securely?

PATIENT CARE

Home organization:

- Are furnishings arranged to accommodate equipment, such as wheelchairs and crutches, and to prevent accidents or falls?
- A geriatric care manager or home health aide agency can provide an advance safety review of the premises to maximize safety.

Durable medical equipment:

- Are walkers, wheelchairs, hospital beds and other equipment in place and set up for the patient's arrival?

Supplies:

- Are disposable care products, such as bandages, wipes and tissues on hand?
- A regular periodic delivery system for disposable items may be helpful and can be set up with a local pharmacy.

Medications

- Is there a supply of prescription and over the counter medications coming with the patient to the home?
- If not, have they been ordered to be delivered or picked up from a pharmacy?
- Has a refill pick-up/delivery system been set up?
- Are there clear instructions for medication dosage and timing?
- Is there oxygen in the home? Has the family been trained on the use of home oxygen?

In-Home Care:

- Will the patient benefit from part-time or full-time home health aides?
 - If so, has this been arranged?
 - Has the decision maker been apprised of the difference between a home health aide from an agency and a skilled family-employed worker? In some cases, a family-employed arrangement permits workers to drive, administer medication, travel between states, and provide skilled care.
 - Has the discharge planner thoroughly explained the difference between Medicare covered services vs. private pay?
- How will home health aides learn the procedures to follow and the medications they are to dispense? Has the family been informed that home health aides are not permitted to administer medications? If so, who has been identified to assist?
- If aides will stay overnight, where will they sleep?
- Who will provide in-home medical care?
- Will a family member be the point person linking services from aides and from the rehab center?
 - Or will a geriatric care manager be engaged to coordinate and oversee these services?

Notifying friends:

- Who will let friends, neighbors and family know how the patient is doing?
- Who will coordinate calls and visits?

Social Needs:

- Does the individual require ancillary services and referrals?
- Are there additional unmet social needs?
- A geriatric care manager can arrange for visiting music and art therapists, friendly visitors, etc.

Family Support:

- If there is a spouse involved, how will they adjust to a potentially new caregiving role?
- Who will provide ongoing monitoring if the family or decision maker lives out of town or has a very busy work schedule?
- How will the family cope if/when conflict develops?
- Sometimes our loved ones experience physical and cognitive decline requiring changes to care plans and even workers. Who will provide realistic and honest guidance about end-of-life choices and options?

Certified Geriatric Care Managers are equipped to provide these services on a 24/7 basis. Visit the National Association of Professional Geriatric Care Managers website at www.napgcm.org for more information.

FINANCIAL ORGANIZING

Will the lights go on?

- Were the bills paid during the rehab stay?
- If not, bring utility and other accounts current.

Paying bills:

- Is the patient able to pay bills and manage financial transactions?
- If not, is someone else set to do so? Does that person have Power of Attorney? And who is the backup Power of Attorney?

Health and Long Term Care Insurance:

- Have claims been filed for all applicable benefits, such as long term care insurance?
- Who will review ongoing medical bills, submit claims, and confirm that insurance payments have been received?
- Does the client need to become Medicaid eligible in order to stay at home with home health aides? Who will contact an Elder Law Attorney, gather the necessary documents, marshal assets?
- Who is the Health Care Proxy? And who is the back up?

Advance planning on these issues will avoid last minute shortages and emergencies. It will also enable family and friends to keep their focus where it should be — on the patient's comfort and recovery.