More information is available through our website: www.quakeragingresources.org

#### ADDITIONAL SUGGESTED RESOURCES:

Friends Services for the Aging www.fsainfo.org

National Long Term Care Ombudsman Resource Center – <u>www.LTCombudsman.org</u>

How to choose a nursing home guides:

http://www.nursinghomeguide.org/NHG/nhg\_txt\_howtoc hoose.lasso

http://www.aarpmagazine.org/health/embedded sb.html ?print=yes (this has good info also if someone is going straight from the hospital)

http://www.aarp.org/family/caregiving/articles/state\_guid e to nursing home.html

Financing Long Term Carewww.financinglongtermcare.umn.edu





Aging Resources Consultation Help

## www.quakeragingresources.org

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# Discernment for Long Term Care





PYM Faith and Practice, 2002

**Discernment for Long Term Care** : For people facing long-term health challenges and their loved ones, choosing residential health care can be one of life's most difficult decisions. The loss felt when one faces letting go of independence and a long time home may be complicated by the stigma associated with nursing homes or other care environments. Many people are not sure where to begin.

*Clearness:* Practicing discernment based in our values can help us make decisions that honor our individual priorities. We can employ Quaker clearness process to assist in discerning what is best for the individual and those involved in care. One may start by requesting a Clearness Committee for loving guidance.

*"Nothing about me without me."* This phrase is a reminder used by advocates for people with disabilities to help us remember that if we are talking about someone, we should be talking with that person. Throughout the process, it is important that the person who is at the center of the discussion is included and listened to.

**Assessment of the Whole Person**: Think of the person, not just the illness or challenge. Look for their capacity, likes, wants and values in addition to the immediate needs or concerns.

**Assessment of Daily Needs**: A professional assessment can help determine how well a person can function. The ability to prepare food, get to the bathroom, use a telephone, and any specific needs may be evaluated. Your Yearly Meeting office can help identify professionals who can conduct such an assessment.

Assessment of Resources: Consider options. An assessment may reveal that a person is not able to cook. Is there a family member close by who can deliver meals? Can organizations such as Meals on Wheels or the Meeting help? Is the person's safety at risk—will they forget that they have turned on the stove? Are there adaptations that can be made—technology available to offset any risk? Finally, assess whether combined services and adaptations meet the person's needs:

### **Essential Questions:**

- Will he or she be safe?
- How well can he or she maintain reasonable physical well being?
- How will the person stay socially, spiritually and emotionally connected?

• What does the person most value and how can those values be supported?

### Simple things to consider in choosing a long term care facility:

The basics: Is the home close enough to allow frequent visits by loved ones? Is it affordable? Does it provide the appropriate level of care, and if one's needs change, will they still be able to provide that care? If not, what are the options –moving to another facility or supplemental services?

Once a few facilities are identified, schedule visits and consider: What is important to the person who will live there—to be in a city, to be close to nature or children? What types of educational, creative, spiritual, wellness or other activities are provided? Are they consistent with the values and interests of the person? Are residents involved in decision making? What adaptations are made so that frail residents can pass time meaningfully? How might the person be able to get to beloved activities outside the residence, such as Meeting or family visits?

Are residents encouraged to walk, as they are able, wheelchairs used only as needed, not for convenience? Are adaptations made, such as opportunities for rest?

Do residents seem engaged? Do their rooms have personal touches? What do the interactions feel like between residents and staff? Does the environment feel home-like?

Direct Caregivers will spend the most time with residents. Are staff respected? Does it look like care workers have time to spend or do they seem rushed? Are their interactions kind and friendly?

