

Hiring In-Home Care

by Suzann Ogland-Hand, PhD

“My mom is getting discharged from the hospital in a few days. I think she is going to need some in-home care. What kinds of things do I need to be thinking about?”

Learn the terms

There are two different levels of home care: Home Health Care and Home Care.

Home Health Care refers to a skilled professional (nurse, physical therapist, social worker, etc.) who provides medical care at home. Typically, a physician prescribes the type of skilled care needed. Often, these costs can be covered by Medicare and/or Medicaid. (See “Top Ten Tips in Selecting a Home Care Agency” in this issue.) Often, home health care workers and agencies are more expensive because of the higher level of expertise. Health care workers have professional standards to meet to maintain their licenses or credentials.

Home Care refers to a caregiver who provides assistance in the home and attends to the elder’s personal needs (bathing, dressing, eating, house cleaning, etc.) Home care workers are non-medical caregivers. No official credentialing or government agency oversees home care agencies. Frequently, it is paid for privately. Some examples are:

- **Personal care** is assistance with bathing, dressing, ambulation, etc.
- **Home chore workers** typically perform house or yard tasks, such as seasonal cleaning, running essential errands, yard work, lifting and moving, simple household repairs, etc.
- **Case management services** typically begin with an initial client intake, and involve assessment of need, service planning for the client, provision and/or arranging for services.
- **Homemaker services** include specific home management duties, such as light housekeeping, meal planning and preparation, shopping assistance, and routine household activities.
- **Home delivered meals** are meals that meet one-third of the current daily Recommended Dietary Allowances, served in the home to a functionally-impaired, housebound elder.

Understanding your need

A first step in hiring an in-home caregiver is determining what kind of help is needed. Most caregiving needs are not medical in nature. Does your loved one need assistance with personal care activities (such as bathing), or homemaker services (such as light housekeeping or paying bills)? People frequently start off wanting someone a few hours to fix meals, do the laundry, and perform light housekeeping. In this situation, a home care worker is needed. Family and friends may be available to help with some of these issues. A paid home care worker can probably do the rest.

Learning to accept help from others

For some, a complicated emotional issue is that of learning to accept help from others. This is a milestone for both the caregiver and the care recipient. Some caregivers may struggle with the acceptance of their human limitations, that is, that feel guilty that they "can't do it all". It's more helpful to see home care as an addition that allows the loved one to remain at home, and provides the caregiver some respite time or time to focus on other caregiver duties.

Care recipients may voice reluctance to allow "someone else" in the home. It can be helpful in these situations to trial a home care worker. Instead of seeing a home care as "something I'll need for the rest of my life," view home care as "something I'll try for a period of time" and then evaluate the pro's and con's. Clearly, home care is more successful when both the caregiver and care recipient are comfortable with it.

The relationship between the caregiver and care receiver also involves expectations. Misunderstandings can cause dissatisfaction with the home care experience. For this situation to remain as clear and conflict-free as possible, each needs to understand the expectations of the other. Cooperation and communication between you and your loved one help the process to go more smoothly.

Where to begin finding a home care worker

Start your search by talking to hospital discharge planners, doctor's office staff and friends. There are three main ways to find a home caregiver.

- **Relative as caregiver.** Many elders prefer care from a relative (child, grandchild, sibling, spouse) to that of a stranger. A relative may care for an elder without any compensation or in exchange for room and board, or some other mutually-agreed-upon arrangement.
- **Private agencies.** Many agencies provide paid caregivers. It is important to know whether the caregiver provided by the agency is an employee of the agency or an independent contractor. This issue involves who is responsible for withholding and paying various payroll taxes on behalf of the caregiver. Check with an accounting professional for more information.
- **Other sources.** Hiring a caregiver through a referral from a friend, professional, or service organization (senior center, church or synagogue, etc.) is a final source.

The interview and hiring process

A number of key factors are involved in the interviewing and hiring process. Screening and references are important. Don't assume because a home care worker is coming from an agency that proper screenings (personal interview, criminal background check, drug screen, credit check, references contacted) have been done.

Look at trying to match the personality of the caregiver with the person receiving care. How do they get along? Could they work together? Is there some mutual respect? Don't be surprised if several candidates are interviewed before you find a good match.

Expectations

A clear understanding of the duties and expectations for the caregiver is useful for the working relationship. Write down the duties so it is clear to all parties involved. Monitor the duties over time.

More resources

If you want more information about resources here in Kent County, the Caregiver Resource Network is a great place to turn for help. Their web-page (www.caregiverresource.net) can provide you with information about local programs and services, fact sheets, and a questionnaire about caregiver strain. Or call Area Agency on Aging of Western Michigan (616.456.5664), HHS Health Options (616.285.2590), Senior Neighbors (616.459.6019), or Gerontology Network (616.771.9748) for more help.

Primary Sources:

<http://www.SeniorJournal.com/NEWS/2000>.

<http://www.mfaaa.org/hccprg>.

<http://www.help4srs.com/health/homecare>.

Send your caregiving questions to: Dr. Suzann Ogland-Hand, Caregiver's Corner, Pine Rest (MC), PO Box 165 Grand Rapids, MI 49501-0165, or email at suzann.ogland-hand@pinerest.org.

Column written by Suzann Ogland-Hand, PhD, clinical geropsychologist at Pine Rest Christian Mental Health Services, and member of Caregiver Resource Network, a partnership of Kent County organizations dedicated to providing information and support for family and professional caregivers within the community. Please send your caregiving questions to suzann.ogland-hand@pinerest.org, and look for the Caregiver's Corner in the next edition of Mature Lifestyles.