Saying Goodbye: Balance and Transitions

In all stages of illness, getting the support you need.

Anne Front, Palliative Care Consultant and Clinical Manager at MPTF
Caring is Infinite

Frank Cunningham, Eldercare and Placement Consultant

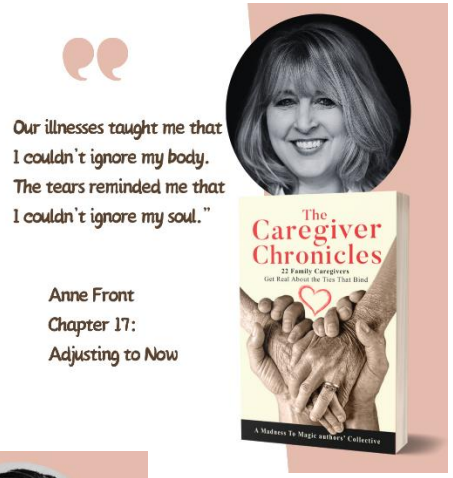
Type a word or a phrase into the chat that shares what you're thinking and/or how you're feeling about today's session topic.

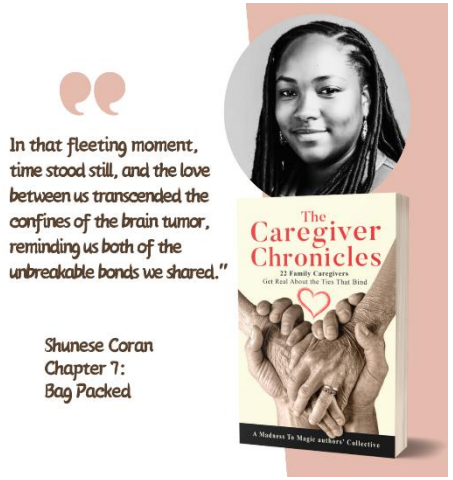
Let’s hear some short Family Caregiver Stories who have considered or made this transition.

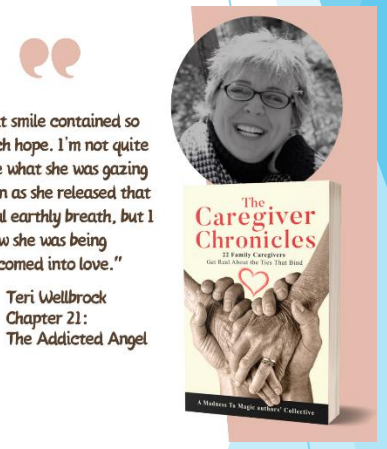
Shunese

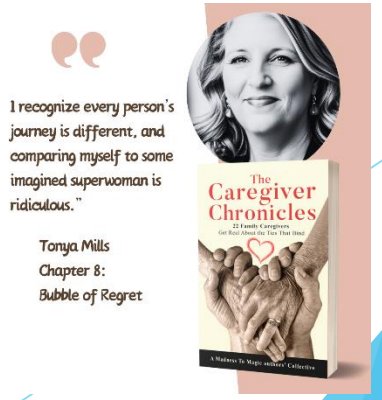
Teri

Tonya









Type “ME” in the chat if you can relate to some of the stories you just heard.

Deciding on Placement

Frank Cunningham, Eldercare and Placement Consultant

When to Consider Finding Placement for Your Loved One

Lifestyle: Activities, socialization, & friendships.

Less Stress: No maintenance, bills, housekeeping or even cooking.

Support: Medication Management or physical support of self or spouse.

Care Needs: Medication management or physical support of self or loved one.

Change in Status: Supporting a Loved one who declines

Types of Facilities

- CCRC: Continuing Contract Facilities
- Assisted Living
- Memory Care
- Residential Board & Care Homes

How to Pay for Placement?

- Private Pay
- Long Term Care Insurance
- Veteran's Administration
- Reverse Mortgage
- Medi-Cal

Recommendations

Why Use a Placement Agent?

- We know the facilities in the area personally.
- We can assess for any violations or complaint history to make safe choices.

What will they do?

Set up tours for you.

- Introduce you to the marketing agent at the facility

What does it cost?

- Placement Agents are FREE to you
- We get paid by the facility once our client decides and moves in.

Ultimately, it is YOUR decision – Go with your gut on deciding which facility to choose.

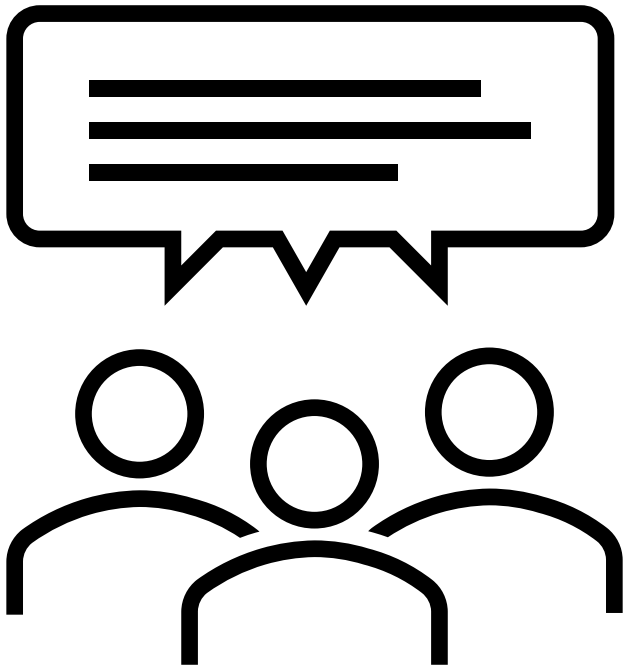
Type “YES” into the chat if this has been helpful

…if you have questions, pop them into the chat or jot them down to ask at the end of today’s session

Palliative Care and Hospice

Anne Front, Palliative Care Consultant and Clinical Manager at

MPTF | 100
Caring is Infinite

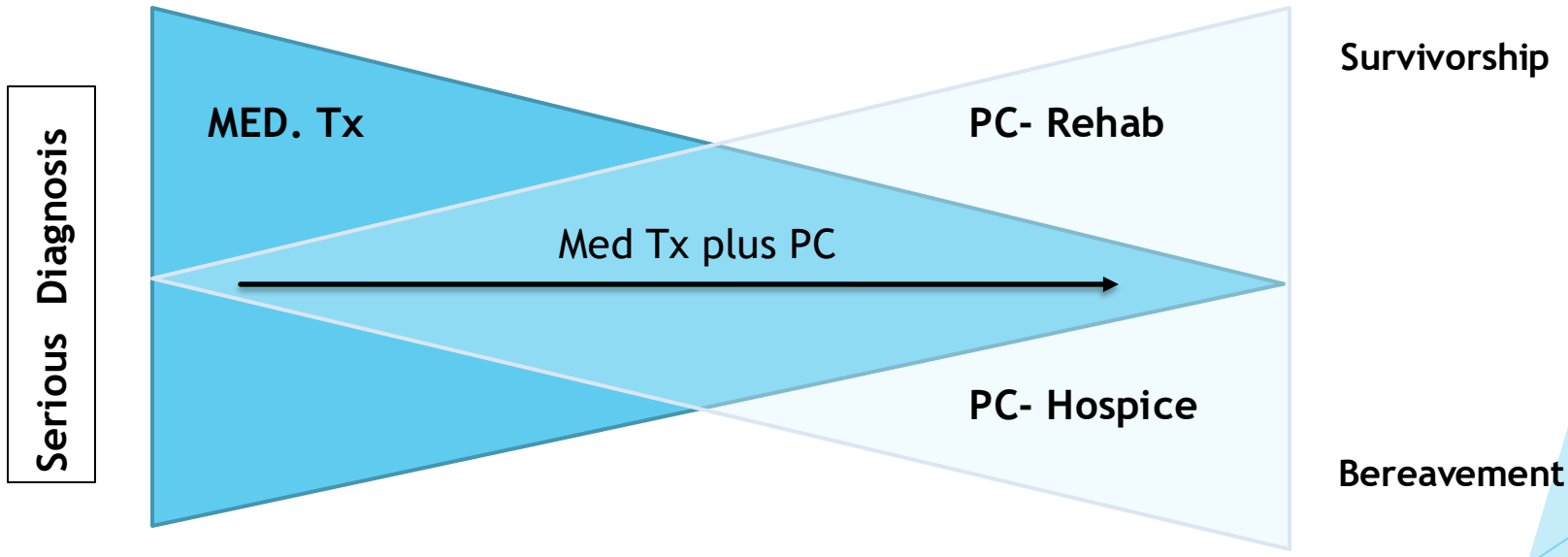


Are Palliative Care & Hospice the Same?

If you think they are, type “YES” in the chat.

If you think they aren’t, type “NO” in chat.

Are Palliative Care and Hospice the Same?



What is Palliative Care?

The Benefit of Palliative Care

- You as a patient, loved one, caregiver, are not alone.
- YOU are respected as the center point of your health care.
- Strong symptom management support.
- A safe place to discuss hard things whether it be health questions, practical needs, emotions or planning for the future.

Palliative Care Criteria

- Palliative Care is available at any stage of illness – through new diagnosis, throughout curative or life-prolonging treatments through to end-of-life.
- Palliative Care can be delivered at in a medical clinic, at home or in a facility.
- Palliative Care is an evolving practice model. Some insurances pay for palliative care teams or medical providers.
- For the other members of the team, they are paid thorough philanthropic support or private pay as an adjunct to the palliative care medical provider.

What is Hospice?

An interdisciplinary team of professionals trained to address physical, psychosocial, and spiritual needs of the person and family

Specialty care that is person-centered, stressing coordination of care, clarification of goals of care, and communication.

Medical Care provided in the home, in assisted living or in a facility.

Periodic visits to the patient and family caregivers by hospice team members.

Crisis access by phone or in-person 24 hours a day, 7 days a week to respond if patient or caregiver concerns arise.

Includes bereavement care for more than a year after the death for the family/intimate network.

The Benefit of Hospice

- Care comes to you in your home meaning you don't have to go outside for help (doctor appointments, urgent care, emergency room or hospitalizations).
- 24/7 Crisis support.
- A full team to support your physical, practical, emotional and spiritual needs.
- Less risk of infection by not going to health centers and hospitals.
- Less stress on the patient and caregiver.
- Supplies are provided: Durable Medical Equipment, Medications, Cleaners, Diapers, etc.

Hospice Criteria

Hospice is a Medicare Benefit that began in the 1980's to assist in better end-of-life care.

- Because it is paid for by Medicare, all hospice agencies have the same guidelines and provide the same services.
- Hospice qualification normally requires a prognosis of 6 months or less depending on the patient's diagnosis.
- For some diseases such as Dementia, Parkinson's, CHF, etc, the disease trajectory might not neatly fit into a "6 months or less" prognosis. This doesn't mean that the patient does not qualify.

How Do I Know What Service to Ask for?

Talk to your health care provider about which option is right for your loved one.

Questions to ask:

What do you recommend?	Where is my loved one in their disease?	How is the treatment working?	Would you be surprised if my loved one was not alive in six months / 1 year / 2 years, etc.?

Type “YES” in chat if this has been helpful

If you have questions, we’ll take them now

Frank Cunningham

Placement Specialist

My Calling Inc.

www.mycallinginc.com

fjcunningham19@gmail.com

Anne Front, LMFT APHSW-C

Palliative Care & Geriatric Consultant

MPTF

Caring is Infinite

www.annefront.com

anne@annefront.com