

Dorothy's Story: When Family Lives at a Distance

By
Judith S. Parnes
LCSW, CMC
Executive Director



Today's column takes a more personal approach to understanding the needs and concerns of older adults. When Family lives at a Distance: Dorothy's Story, clearly illustrates how care management can help.

For the past 15 years Dorothy had been residing in an apartment in Central New Jersey. She was always very active in her church community and was a retired Bell Labs employee. Dorothy is 87 years old, has been widowed for many years and had no children. Her closest surviving family member was a nephew who lived in California. Michael maintained regular contact with Dorothy, calling once a week and visiting at least once a year. Dorothy and Michael's mother were sisters.

During Michael's last visit he was very alarmed to see

the decline in his aunt. Her apartment, which was always immaculate, was not clean. Her appearance -- always so neat -- had now changed, and she seemed so frail. Michael discovered, by speaking with the management office at the apartment complex, that Dorothy was not always current with the rent. They actually told Michael that they were glad to see that Dorothy had someone who could help her. Michael made an appointment and accompanied Dorothy to her physician. The doctor said he had been discussing with Dorothy the need to move. He was also concerned about her continued weight loss. The physician told Dorothy she really shouldn't be living on her own any more and the recent emergency room visits due to falls were certainly of concern. Michael didn't even know about the falls.

When Michael asked his aunt why didn't she tell him that she needed help when he called each week, her response, " I didn't want to worry you...What could you really do since you

live so far away and I am not your responsibility."

She repeated what she had told the doctor in the past, that she would be all right, and no, she didn't need any help.

Michael couldn't believe no one had contacted him, or that no one had intervened and gotten his aunt to agree to move or receive help. Everyone said they were so happy that he was here.

Michael was at a loss as to what his next steps would be. He needed to return to work in California and had only three days remaining in New Jersey. The doctor had suggested a few facilities for him to visit. He also contacted the local Office on Aging and research information on the Internet. Dorothy was beginning to see that she really would be happier not being so isolated in her apartment but was very concerned about what she would be able to afford.

One of the nursing homes Michael visited referred him to Elder Life Management. The admissions person at the facility told him

Elder Life Management would be able to “put *all* the pieces together” by working directly with his aunt and coordinating what would be necessary to ensure an appropriate care plan.

An appointment was made to meet with Judith S. Parnes, the Executive Director of Elder Life Management; Dorothy explained her circumstances and Michael expressed his concerns. After a two hour meeting, Michael was able to return to California with a comprehensive plan in place.

The Elder Life assessment determined that nursing home care was not necessary, and that Dorothy would do well in an assisted living setting.

Elder Life Management took on the role of facilitating Dorothy's selection of the assisted living community. This included identifying which setting would accept Medicaid funding in the future, bringing Dorothy to see the places and assisting in her transition and adjustment. Dorothy returned to her apartment several times after her move to assure that she had all the possessions she wanted, prior to the remainder being donated to her favorite charity. Two months later, Michael came back to New Jersey to visit his aunt in her new home at the assisted living center and couldn't believe that he had his "old Aunt back again.”

Dorothy remains a client of Elder Life Management, being seen quarterly by a Care Manager who also follows up with her nephew. She has been hospitalized once resulting in a brief sub-acute stay for rehabilitation, with Elder Life Management becoming more involved at that time. Elder Life Management also filed her Medicaid application and assured its approval.

Michael believes that the assistance Elder Life Management provided has not only enhanced the quality of Dorothy's life but also his own. Dorothy continues to live comfortably in assisted living and Michael remains the caregiver at a distance, with Elder Life Management support.