



Eldercare

By the numbers

- Nearly **54 million** Americans are caregivers of the elderly or chronically ill.*
- Over **23%** of all U.S. households contain a caregiver.*

* Source: Children of Aging Parents, 2007

Caring for aging parents

At some time in our lives, most of us find that parents, elderly relatives, and friends begin to need much more of our attention. Taking the right steps, as early as possible, to try to secure that older person’s financial situation and find necessary health and household services can allow an elder to remain at home and receive appropriate care.

Housing options — staying at home

You and your older relative may face the question of whether to change living arrangements if

- the cost of maintaining a house or apartment becomes unmanageable
- the house or apartment is unsafe or unsuited to your relative’s needs
- the location of the house or apartment is not convenient
- your older relative becomes too frail to continue living alone

Housing decisions are rarely simple. If your relative decides to remain at home, many options may be available for assistance.

Your older relative who owns a house or rents an apartment may benefit from:

Financial assistance

If your relative is comfortable in his or her home but is considering a move because of the high cost of maintenance, you might explore programs that could reduce monthly expenses or financing options that could generate cash from the house or apartment. Your utility company may be able to recommend steps to save on the cost of fuel. Low- or no-interest loans for maintenance and repair may also be available from your bank.

Home sharing

If your older relative needs help with both the expense of maintaining his or her living arrangement and the day-to-day management of household tasks, home sharing might be an attractive option. In this arrangement, your relative shares a home

Key points

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This material should be used as helpful hints only. Each person’s situation is different. You should consult your financial advisor or other relevant professional for more information prior to making any decisions.

- An older relative may have many options available for assistance that allow that elder to remain at home.
- Most communities provide a range of eldercare and support services. You should begin investigating them as soon as possible.
- Making decisions with the assistance of experienced professionals can help reduce the stress and worry of caring for an older relative.

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with someone who is seeking affordable housing. In return for a relatively low rent, the home sharer agrees to help out with cooking, cleaning, or other chores.

Maintenance and repair programs

Many social service agencies and faith-based organizations provide volunteer or low-cost labor for both minor and major home repairs. Other programs can assess potential safety hazards and make necessary changes. Your local area agency on aging is a good source of this information.

Your older relative who owns his or her own house may also benefit from:

Property tax abatement

Many communities and states recognize that older people may not be able to pay increased property taxes. Property tax exemptions are often available to older homeowners or to those who meet certain income requirements. Contact your city or town hall or a local area agency on aging and ask for information about property tax abatements.

Property tax deferral loans

In some cases, local governments advance loans to older homeowners to pay their property taxes. These are called property tax deferral loans and do not become due until the homeowner moves away, sells, or dies. The rules and guidelines for these programs vary from community to community.

Fuel assistance programs

Older people who maintain their own homes may be eligible for grants to

help pay their fuel bills or, in some cases, to weatherproof their homes. These grants are distributed through local community action agencies or area agencies on aging, both of which are usually listed in the telephone directory.

Home equity conversion plans

There are a variety of plans designed to help older homeowners use the equity in their homes without requiring them to move. Deferred payment loans, sale/leasebacks, and reverse mortgages are the three main types. Not all of these options are available in every state. Because some plans may be more costly than others and contain hidden drawbacks, it is important to consult an attorney and a financial advisor before making decisions or signing documents.

Moving closer to family members

Sometimes older relatives prefer to live near family members but want to retain a measure of independence. An extra apartment, also called an “accessory” apartment, can sometimes be created in a single-family home or added to a two-family home. This option allows older people to be close to their families while preserving their privacy. While some communities allow accessory apartments, many have zoning laws that restrict them. You can find out about the laws in your community by consulting a local attorney with experience in zoning issues.

Accessing help at home

The safety and well-being of your aging relative is of primary concern. Health care and social service agencies are responsible for conducting back-

ground checks on all individuals they send into client homes. If you make such arrangements privately, it is wise to conduct your own search. This can be done through private references or, for a fee, at backgroundchecks.com.

Services — from home health care and delivered meals to services that offer contact and companionship — exist in many communities to help older people and their families.

Home health care

Many frail older people can continue to live at home if they get the health care services they need. A range of home health services is available in many communities, including

- *Registered nurse (RN)* — offers skilled nursing care; coordinates health care services when other doctors, agencies, or individuals are involved; teaches individuals how to care for themselves; teaches family members how they can care for the older person; plans further care based on the individual’s changing needs or physical condition; communicates with doctors about the older person’s medical progress
- *Certified home health aide* — works under the direction of an RN and can administer oral medications as well as provide hands-on care; home health aides can take temperatures, check pulse rates, assist in all the activities of daily living, and change nonsterile dressings.
- *Occupational therapist* — can assess the older person’s physical and mental limitations; recommends changes or adaptations in the environment to promote independence



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- *Physical therapist* — provides therapy to help an older person regain mobility after a serious illness, stroke, or accident; teaches the older person therapeutic exercises and shows family members how to help
- *Speech therapist* — provides therapy to help the older person regain or improve speech
- *Nutritionist* — provides nutritional counseling services and may include instructions for preparing meals on a restricted diet
- *Social worker* — helps with the emotional aspects of illness; helps families access community resources; helps coordinate support services

Things to consider for home health care

Before using a home care or home health agency, find out as much as you can about the agency and its procedures. Compare the prices and services of different agencies, if more than one is available. Look for some key indications of service quality. You should expect that

- the agency and staff have appropriate professional credentials and licensing
- people giving care treat the older person with courtesy and respect
- the plan for care be reviewed and evaluated periodically by supervisors
- there be a formal process for recording and acting on complaints
- phone calls be returned in a reasonable amount of time
- your family, your older relative, and his or her doctor be kept informed of changes and progress

- if a home health aide is ill or fails to show up, another person will be sent

In some communities, there are serious shortages of home health care services. There may be waiting lists. If you think your relative would benefit from home health services, it may be a good idea to begin exploring options as soon as possible.

Accessing community resources

When it comes to caring for an older relative, your community probably has a lot more support to offer than you think. Most communities provide long-standing programs that provide assistance with meals, household chores, companionship, emergency care, and more.

Homemaker and chore services

Homemaker or chore services help with an older person's daily tasks, such as shopping, cleaning, cooking, and other household work. In many communities, government-funded agencies or social service organizations provide these services at little or no cost. Private businesses also supply such services, and some individual homemakers even offer these services individually.

Here are some ways you can find the right services for your older relative. Try contacting the

- Area Agency on Aging (AAA)
- Visiting Nurse Association
- social services department of your local hospital

Also, be aware that if you decide to obtain homemaker services from a private individual, you may have certain legal responsibilities. For

instance, you may be asked to pay Social Security payroll taxes and to ensure that anyone you employ is eligible to work in the United States.

Companionship services

If your relative's activities outside the home are limited, he or she need not live in isolation. Here are some services that provide companionship for older people.

Volunteer companionship services

Social service organizations sometimes arrange for volunteers to visit older people at home. A volunteer may be another older person, someone in mid-life, or a high school or college student who is interested in being a friendly visitor.

Telephone reassurance

These services usually are staffed by volunteers who make phone calls on a daily or weekly basis to homebound older people to offer reassurance, support, and a link with the outside world.

Home-delivered meals (Meals on Wheels)

These services deliver meals to older people who are no longer able to prepare meals for themselves. Hot meals may be delivered daily. Frozen meals may be delivered twice a week. Some programs can accommodate special diets and cultural preferences. Not only do the programs assure you that your relative is getting needed nutrition, they also offer a periodic check to see that your relative is well. Many nutrition programs have a sliding scale fee calculated in relation to your relative's income; some may ask for a minimum donation.



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Senior center programs

These programs offer an opportunity for older people to enjoy nutritious meals in group settings. Some meal programs offer transportation and are linked to other programs and activities such as health clinics, arts and crafts, films, and fitness activities. Fees are generally low, and some programs ask for only a small donation.

Transportation services

Transportation is critical for older people who do not drive. Some communities offer discounted taxi vouchers for seniors. In many places, special transportation services are available to bring older people or people with disabilities to the doctor, to social activities, and sometimes to shopping areas. These services are generally offered by social service agencies, senior centers, or local transit authorities.

Case management or care management services

You may want to consult a case manager (also called “care manager”) if, after a complete medical evaluation and your own review, you feel your older relative’s care is too complex for you to handle.

Case managers help coordinate all aspects of an older person’s support. They can make a full assessment of your older relative’s social and emotional needs, develop a comprehensive

plan for care, help make the necessary contacts and arrangements, screen providers, and even oversee the plan to make sure it is working. The case manager maintains regular contact with the responsible family members, even if they live in another part of the country. Case managers are usually social workers or nurses experienced in geriatrics.

Typically, private case managers charge fees for initial evaluations, follow-up visits to the older person, and ongoing monitoring services. In some communities, nonprofit agencies offer these services to income-eligible seniors at no charge, although the scope of the service may be limited.

Personal emergency response system

These systems enable older people to call for help in the event of a fall or emergency. The older person usually wears a small radio-transmitting device. When it is activated, a message is transmitted to the local hospital or police station that has on file the older person’s name, address, phone number, and a list of people to call. Help is sent to the older person’s home if they do not respond immediately to a phone call. Some systems are activated automatically if, for example, a fall leaves a person unconscious.

Resources

On the Internet or by phone

AARP

www.aarp.org/families/caregiving
1-888-OUR-AARP (1-888-687-2277)

Children of Aging Parents
www.caps4caregivers.org
1-800-227-7294

Eldercare Resource Center
www.eldercare.gov
1-800-677-1116

Family Caregiver Alliance
www.caregiver.org
1-800-445-8106

National Caregiving Foundation
www.caregivingfoundation.org
1-800-930-1357

Well Spouse Association
www.wellspouse.org
1-800-838-0879

Contact your financial advisor for more information, or visit mfs.com.

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