Planning Ahead for Later Years

Information and decisions
- Make a list of the “what if”s. Write them down!
- Make the unknown less so by gathering information
- List your available options for each “what if”.
- Know where you stand financially.

Health care concerns

Health care concerns
- Make a list of questions for your physician
  - Known health issues
  - Potential health issues based on family history and lifestyle choices
- Get information about the best and the worst case scenarios for your future wellness
- Learn about available treatment options and outcomes
  - What will the treatment potentially give you?
  - What will it take away?
- Make your decisions. Have a plan A and a plan B.
- Plan for the worst. It is not morbid; it is prudent!
- Complete your advance directives

Some people plan to stay in their home until they die. Others plan to stay in their home as long as possible. Either way, thinking and planning ahead will make life easier.
Residence options

Planning to remain in your home

- Make your home safe: grab bars, high rise toilets, shower conversions, steps and stairs. Make room for a walker or a wheel chair.
- Two story living? The challenge of stairs
  - Live only on the lower level
  - Get a stair lift installed before you need it
- People and services you might need:
  - Handyman
  - House cleaning service
  - Yard service
  - In-Home personal Assistance agencies
  - Alert response services
  - Laundry and dry cleaners that pick up and deliver
  - Grocery store that delivers
  - Meals on Wheels
  - Transportation options
- Know what community assistance programs and resources are available: Area Agency on Aging. Texas Department of Aging and disabilities Services
- Know your finances. Discuss options with a financial manager. Learn about reverse mortgages.
- If you have long term care insurance, find out if it covers in-home assistance
- Just in case: Visit local residential care facilities, find out which home health and hospices agencies others recommend.
Planning to relocate

- Make decisions before relocation is a necessity
- Where to?
  - Close to your children?
  - In your current neighborhood?
  - Closer to civilization?
- Research neighborhoods and facilities: Senior living apartments or complexes, assisted living, nursing homes, and residential care homes.
- Visit facilities and observe the residents. Do they look well cared for? Does staff interact with residents as they go about their work? What is the staff turn-over rate?
- Will you be able to keep your current medical professionals in a new location?
- Eligibility for Medicaid? Elder-law attorneys can help.
- Research re-location services: they are amazing!

Long Distance Re-location

- Requires more energy: more things will be unfamiliar
- Expectations regarding family and friends
  - What are your expectations?
  - What are theirs?
- Prioritize and let go of non-essentials
- Shared space: Negotiation and compromise
- The Family Council
- Leave a back door open

There will always be unknowns
Documents you need

Advance Directives
- Documentation of health care preferences
- Effective only when you cannot make or communicate your own decisions.
- Legally binding
- Supercede the authority of next-of-kin
- Requires two non-relation witnesses to the signature

Directive to Physicians and Family or Surrogates.
- Commonly known as a “Living Will”
- Documents your specific wishes regarding life supportive and life extending medical treatments
- Can specify treatment you do or do not want
  - Life support: Artificial ventilation (breathing machine), kidney dialysis, feeding tubes. (Temporary or permanent)
  - Life saving: CPR, Cardio-Pulmonary Resuscitation, blood transfusions, IV antibiotics

Medical Power of Attorney
- Allows an individual to designate a spokesperson to make health care decisions on their behalf
- Goes in effect only when you are unable to make decisions
- Your agent is required by law to honor your preferences
- A Medical Power of Attorney should be someone who is not conflicted by following your wishes
**Out of Hospital Do Not Resuscitate Order**

- Appropriate in case of terminal illness or advanced age when you do not wish hospitalization or ANY type of life support or life extending treatment
- When presented with this completed document, health care and emergency personnel are not obligated to perform CPR or take other life saving measures
- Requires a physicians signature in addition to two non-relation witnesses to the signature

**Disposition of completed documents**

- Keep the original in the glove compartment of your car
- Give copies to family, your medical POA, your medical professionals, hospitals and clinics
- Store online at Docubank.com. The documents you have filed with your physician and at the hospital might not be readily available outside regular business hours

**Power of Attorney**

- Allows someone you trust to manage your obligations when you are unable to do so yourself
- Does not have to be honored by financial institutions, including Social Security

**Last Will and Testament**

- Documents your wishes regarding the disposition of your property after your death
- If you do not have a will, the state of Texas will decide how your things will be divided among your surviving family members
- The executor does not have to be a family member
Funeral plans
- Preplanning saves your family from making tough decisions in an emotional turmoil
- Cremation: if not pre-arranges, all your children have to sign an agreement
- Willed body program: Southwest Medical

Information and documents your family will need
- Create a special place where all this is kept together
- Legal documents including trusts
- Insurance cards and information, including Medicare, Social Security, health care supplements, long term care, life, disability, and mortgage insurance
- Property deeds and titles
- Medical professionals, names and phone numbers
- Bank and financial management agent
- Safety deposit box: get names added
- Accounts numbers and passwords
- Loans and mortgage information
- Credit cards, numbers, and passwords
- Name and phone number of attorney
- Name and number of Accountant
- Last year’s tax return
- Birth certificates
- Marriage license
- Military discharge documents
- Computer access and passwords
Asking for and accepting help,

- Swallow your pride
- Make a list of things others can do for you – give people choices when you call on them for help
- Schedule extended respite periods in advance – it helps to know you have a get-away coming.
- Call in family or arrange for temporary residential care
- **Do not wait until you are at the point of exhaustion!**
- Let go of non-essentials. Ask “Who will it bother?” and “Does it really matter?”
- Let go of expectations – your own and those perceived from others

**Honor all your losses**

- **Honor and acknowledge your losses**
  - Major losses: People you love, serious health problems, retirement, re-location
  - Cumulative losses: age related physical changes
- Do not minimize the impact of your losses
- Express your feelings; share your grief with others
- For specific concerns consider support groups or online chat rooms

**Important Note:** Be very aware that the stress of the uncertainties in your life as well as the frustrations and grief of the many changes and losses inherent in aging will put you at high risk for depression.

- Care givers are twice as likely to develop depression.
- Older adults who are depressed are more than twice as likely to develop dementia.
- **Take depression seriously!**
End-of-Life Options

If you are given a choice:

- Talk to your family
- Where would you feel the safest?
- What would be best for you family?

The Hospice Option.
Hospice provides comprehensive holistic care for the terminally ill and their families.

Frequently Asked Questions

- Who is eligible to receive Hospice care?
- Who pays for all this?
- Will I keep my own doctor?
- How do I get signed up?
- What if I live more than six months or change my mind?
- How do you know when it is time to call hospice?

Hospice Myths

- Hospice is only for the last few days of life
- Hospice means you are giving up
- Hospice means you will die sooner
- Hospice stops all medications
- Hospice is only for cancer patients
- Hospice withholds food
- Hospice is only there for the patient
- Hospice is a place
**What Hospice provides**

- Regular scheduled visits by hospice team members
- 24 hour on-call nurses and social workers
- Medications for primary diagnosis and for comfort
- Durable medical equipment and disposable medical supplies
- Continuous care and respite care when needed
- Additional services: Legal services, Community support

**Hospice does not change what is happening; it simply changes the conversation!**

**Books you might find helpful:**

Doughty, Caitlin. “Smoke Gets in Your Eyes: And other lessons from the crematory


Kaae, Kirsten. “It Is about Time: Straight Talk about Aging and End of Life”


Shaw, Eva. “What to Do When a Loved One Dies: A Practical and Compassionate Guide to Dealing with Death on Life’s Terms”


Viorst Judith. “Necessary Losses”

Weil, Andrew. “8 Weeks to Optimum Health”