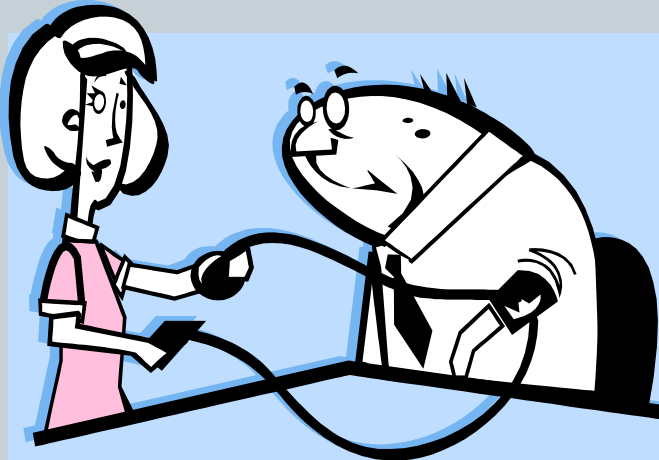


Skilled Nursing Facilities



HOW TO ARRANGE PLACEMENT



Difficult choices



- What is best for the person needing care?
- Can the family provide the care?
- Dealing with guilt and grief
- Dealing with other family members



Financial considerations



- Medicare covers only “skilled” care for a limited amount of time
 - Generally must follow a hospital stay
 - Needing physical and/or occupational therapy
 - Receiving intravenous therapy
 - Care for a G-tube or deep pressure ulcer



Financial considerations



- Medicaid is available only when financial assets are depleted
- Medicaid beds are limited in many facilities
- The private-pay rate in a nursing home is frequently around \$200 to \$300 a day

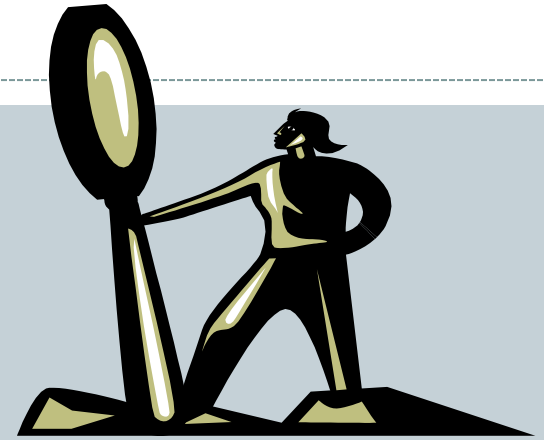


Spousal impoverishment provisions



- The resident must be in a Medicaid-certified bed.
- Assets such as savings, investments, and whole life insurance are divided in half, up to a certain maximum, and only the resident's half must be depleted to become eligible for Medicaid.
- If necessary, some of the resident's income may be allocated to the community spouse.

Investigate



- “Find Skilled Nursing Facilities” at www.medicare.gov
- www.dhss.mo.gov
- Read the most recent Statement of Deficiencies, online or at the facility
- Visit and use all your senses. Does it smell? Look clean and well-maintained? Do residents and staff look happy?
- Ask about specialized units if applicable

Do the Work



- Powers of Attorney
- Change of address
- Choice of physician
- Choosing and labeling clothing
- Signing paperwork
- Meeting the staff



Skilled Nursing Facilities



WORKING THE SYSTEM



Key Staff



- Director of Nursing
 - Other nurse managers
- Administrator
- Charge Nurse
- Certified Nurse Aides
- Social Services
- Dietary Manager
- Housekeeping and Laundry
- Activities





The Care Plan Meeting



- **Do Not Miss This Meeting!**
- An opportunity for the resident and family to discuss the resident's care with the interdisciplinary team.
- Results in a written care plan which lists the goals of care and each discipline's part in meeting them.
- (Secret: In most facilities, no one looks at the care plan outside of the meeting.)

Resident's Rights



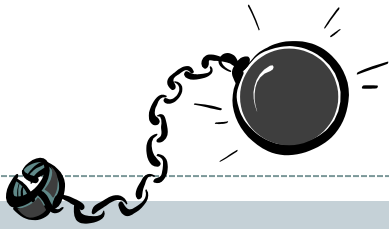
- Read them.
- Unless he/she is completely unable to understand, insist they be read to the resident.
- Assist in enforcing the resident's rights, or exercise them for the resident if he/she can not exercise them.
- Remember that the resident has the right to be treated with dignity and respect.

Complaints



- For most complaints, start with the charge nurse. If he/she asks you to speak with the Director of Nursing, do so.
- Never be abusive, and recognize that some staff can not distinguish between appropriate expressions of anger and abuse.
- Be reasonable. If staff say they can not do what you ask, ask why, and listen respectfully to the answer.





Restraints



- Restraints are dangerous.
- Restraints can trigger anxiety and depression in a resident.
- There are other means of providing for a resident's safety.
- Sometimes a restraining item is used appropriately for positioning or independent movement.

Abuse



- If you witness abuse, report it immediately to the Director of Nursing, Administrator, or whoever is in charge that day.
- If the resident reports abuse to you, and you doubt the allegations, report the allegation and your doubts.
- The Elder Hotline is 1-800-392-0210.
- Realize that most of the staff will be grateful to you. They probably did not enjoy working with the person you reported.