Quick Reference Guide

Memory Support

Assisted Living

Skilled Nursing & Rehabilitation

Santa Marta

A Catholic community that welcomes all.

W. 116th Street & Pflumm Road
These resources are provided to help anyone who’s looking for information about memory support, assisted living, or skilled nursing and rehabilitation for seniors.

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When it’s your loved one, you want the best. And for many people, that means doing it yourself. We understand how much there is to manage when you become a caregiver, and we’re eager to support and help equip you for the role. This Quick Reference Guide offers tips and insights for caregiving, along with basic information about memory support, assisted living, and skilled nursing and rehabilitation. And because we appreciate you and what you do, we’ve included ideas for taking care of yourself too.

You care, and we can help

We wish you well. And remember, you’ve got a friend in Santa Marta.
Knowing about Medicare is critical for caregivers.

FOR DETAILED INFORMATION:
Call 1-800-MEDICARE (1-800-633-4227)
or visit medicare.gov

MEDICARE BASICS
Medicare is a federal insurance program for people 65 and older and those who’ve been disabled for at least two consecutive years. There are several kinds of coverage:

• Medicare Part A covers comprehensive nursing care and rehabilitation services immediately following a hospital stay, limited to a period of 100 days per incident of illness. Part A also covers hospitalization, home health and hospice.
• Medicare Part B helps cover services such as outpatient therapy, durable medical equipment (DME) and other services.
• Medicare Part C provides Advantage Plans/Medicare replacement plans (Santa Marta accepts only traditional Medicare for skilled nursing and rehab).
• Medicare Part D covers medications.

ELIGIBILITY FOR SKILLED REHAB AT SANTA MARTA
For the Medicare Part A benefit, the insured must meet these qualifications:

• Medicare is their primary form of insurance. They can have a secondary insurance policy but can’t have coverage through an HMO/Medicare Advantage Plan.
• They’ve spent at least 3 consecutive inpatient midnights in a hospital within the last 30 days.
• They have a qualifying diagnosis and a need for daily skilled services, such as nursing or therapy services.
• Their doctor has written orders allowing them to be discharged from the hospital to a Medicare-certified comprehensive nursing care facility.

WHAT’S USUALLY COVERED
When rehabilitation services are needed, Medicare covers room and board, dietary counseling, medications, medical social services, medical supplies and equipment used, and ambulance transportation (when other transportation endangers health). And when needed as part of the insured’s health goals, Medicare also covers physical, occupational and speech therapies.
CARING ABOUT CAREGIVERS

By tending to your mind, body and spirit, you can avoid burnout and operate from a base of wellness and strength.

- PHYSICAL NEEDS | You need hydration, nutrition, physical fitness, and the attention of medical professionals when you’re sick.

- MENTAL NEEDS | You need mental breaks, intellectual stimulation, and a way to refresh your perspective with positivity and gratitude.

- EMOTIONAL NEEDS | You need a social network, good friends and helpful support.

THE FAMILY CAREGIVER’S BILL OF RIGHTS*

I have the right to …

- Take care of myself. This is not an act of selfishness. It will give me the capability of taking better care of my loved one.

- Seek help from others even though my loved ones may object. I recognize the limits of my own endurance and strength.

- Maintain facets of my own life that do not include the person I care for, just as I would if he or she didn’t need my help. I know that I do everything that I reasonably can for this person, and I have the right to do some things just for myself.

- Get angry, be depressed and express other difficult feelings occasionally.

- Reject any attempts by my loved one (either conscious or unconscious) to manipulate me through guilt and/or depression.

- Receive consideration, affection, forgiveness and acceptance for what I do, from my loved ones, for as long as I offer these qualities in return.

- Take pride in what I am accomplishing and to applaud the courage it has sometimes taken to meet the needs of my loved one.

- Protect my individuality and my right to make a life for myself that will sustain me in the time when my loved one no longer needs my full-time help.

- Expect and demand that as new strides are made in finding resources to aid physically and mentally impaired persons in our country, similar strides will be made toward aiding and supporting caregivers.

*From “Caregiving: Helping an Aging Loved One” by Jo Horne
Consider the triad of nutrition, activity and safety as you collaborate with your loved one on their healthy living plan.

GOOD NUTRITION
The sense of taste and thirst weakens with age, so boost the flavor profiles of meals with lemon juice, herbs and spices. Bump up the appeal further by creating plates of various colored foods prepared with crispy-to-creamy textures. And keep plenty of water and fresh fruits and vegetables readily available all day.

The Nutrients List
Make sure these are in the plan:
- Calcium and vitamin D for bone health
- Vitamin B-12 for healthy metabolism, blood cells, bones and nerves
- Potassium to reduce the risk of high blood pressure
- Fiber to control weight gain and lower risks of heart disease and Type 2 diabetes

PHYSICAL ACTIVITY
By being physically active, seniors can lower their mortality rates, raise their cognitive and functional health, and reduce their risks of heart disease and Type 2 diabetes. Here are 4 ideas to help you get them moving.
- Keep it fun with activities they like doing.
- Take it easy with low-impact exercise.
- Build strength with simple regimens of weight lifting or resistance training.
- Rediscover the joy of fresh air and sunshine.

Brains Need Activity, Too
A healthy brain aids motor control, interpretation of and responses to emotions, and how well the body senses function. A sensible plan for brain health is also simple:
- Keep connected. Encourage socialization, group activities and volunteerism.
- Keep moving. Consider yoga, gardening, tai chi or even a brisk walk.
- Keep learning. Learn a new skill, try a language, take a class, or find creative expression through art or writing.
SAFE HOME
Prevent falls and increase the safety of the home environment by eliminating tripping hazards, upgrading lighting and paying attention to:

• **Floors.** Eliminate loose rugs, clutter, and wires and cords, and organize furniture for easy navigation.

• **Stairways.** Are they stable and secure, and are handrails in place?

• **Common areas.** Stow away the cleaning materials. Add proper lighting. Make sure smoke and carbon monoxide detectors are operating correctly. And keep remote controls and kitchen utensils within easy reach.

• **Bathroom.** Reduce or eliminate slippery surfaces, install grab bars, and upgrade to hands-free faucets.

• **Bedroom.** Is it on the main floor, and are drawers and closets easily accessible? Is a phone or intercom system needed?
Alzheimer’s disease (AD) and other forms of age-related dementia are brain/memory disorders that adversely affect a person’s job or lifestyle. Dementia may be caused by stress, depression, nutritional deficiencies, Parkinson’s disease or other illnesses. Alzheimer’s is the most common cause of dementia among older people; it involves the part of the brain that controls thought, memory and language. Progressive and degenerative, Alzheimer’s usually begins after age 60, and the risk rises with age. Nearly half of those over 85 show symptoms. Still, researchers frequently remind us that Alzheimer’s is “not a normal part of aging.”

Want to know how to spot dementia? Watch for these behavior and lifestyle changes, and when help is clearly needed, go with your loved one to seek a professional evaluation.

- Problems with walking, talking, eating, dressing, managing medications
- Uncharacteristic in appearance and personal hygiene
- Incontinence
- Wandering
- Loss of short-term memory and diminished reasoning and task completion skills
- Stacks of unopened mail, unpaid bills
- Changes in appetite or sleep patterns
- Depression or abuse of alcohol

Adding Memory Support to the Caregiver’s Job

When your loved one has Alzheimer’s or another form of dementia, and you’re considering providing care yourself, keep these questions in mind.

- Can you make the home secure and safe?
- Can you hire nurses, home health aides or companions to help with your loved one in your home while giving you time off for yourself?
- Is there a nearby adult day care center for memory-impaired seniors?
- Are there opportunities for interaction and mental stimulation for your loved one beyond what you offer as the caregiver?
- Do you have a reliable network for your emotional support?
PRACTICAL TIPS

In the early stages of dementia-related conditions, home care may be the best option. You can begin to prepare yourself for a caregiver role by familiarizing yourself with these guidelines.

- Talk with family and friends as soon as you know the diagnosis; continue to communicate regularly and often.
- Ask for and accept practical help.
- Try to keep a balanced schedule for yourself and your family member.
- Learn everything you can about the condition.
- Simplify the environment for your loved one.
- Do things slowly for the affected person.
- Distract if there’s confusion.
- Acknowledge the disability.
- Treat the person with dignity.
- Praise the person for what they can do.
- Avoid confrontation.
- Be sure the person has something to do.
- Keep your sense of humor intact.
- Acknowledge the person’s feelings.
- Don’t threaten abandonment.
- Reassure if the person shows fear.
- Use lots of physical contact — touching, hugs — to show things are okay.
- Know that fantasy may be a coping device.
- Use person’s name when speaking to them.
- Avoid memory questions to limit frustration.
- Approach the person from the front to avoid surprise or fear.
- Use repetition.
- Use statements instead of questions.
- Allow time for understanding and processing information.
- Make positive statements unless it’s a safety issue.
- Use specifics like “chair” and “table” instead of “it” or “there.”
- Break tasks into smaller parts.
CHOOSING A DEDICATED MEMORY SUPPORT COMMUNITY

As driving ceases and other losses of independence occur in the progression of the memory loss, it’s time to explore the specialized memory support options offered in dedicated settings. In recent years, advances in programs and treatment have resulted in sophisticated residential programs that help residents live contentedly and engaged with their daily lives.

When you’re looking for a new environment for your family member — whether it’s at a continuing care retirement community, a free-standing assisted living or skilled care community, or a specific memory care and Alzheimer’s community — keep these questions in mind:

Setting
- Is it comfortable and clean?
- Does it provide for safe wandering indoors and out?
- Are there colors or other cues to define areas?
- Is the overall lighting even?
- Are the bathrooms identifiable and safe?
- Do the furniture arrangements encourage interaction?
- Are there personal private places?
- Are there private places for the family to interact with the resident?
- Is the location convenient for you and your family?

Program
- Is it specifically designed for people with Alzheimer’s or other forms of dementia?
- Are there opportunities for nurturing?
- Are behaviors accommodated without the use of restraints?
- Is there a full daily schedule for residents?
- What’s the philosophy of care?

People
- Who completes the initial assessment of your family member?
- How often are subsequent assessments done?
- What training does the staff receive?
- Are current residents active?
The goal is independence — as much as possible. And when seniors receive assistance to accomplish the daily tasks like bathing, dressing and grooming, their sense of independence and individuality can grow.

**HOW DOES ASSISTED LIVING HELP?**

The services offered within assisted living communities vary, but typically you should expect your loved one will have the following:

- Safety and security
- Personal care and assistance — especially with the activities of daily living
- Housekeeping and laundry services
- Meals in a community setting
- Social activities with an overall wellness emphasis
- Transportation services for shopping and medical appointments
- Health services, as needed — including medication management

How do you know if your loved one needs assisted living?

Start with an honest appraisal of their competence with basic and ordinary activities, including bathing, dressing, toileting, getting in and out of bed, and feeding themselves. Have their health conditions worsened? Are they keeping up with bill paying, housecleaning, cooking, transportation and socializing? If not, it may be time to explore the area’s assisted living options. When you do, use a checklist like the one provided here to organize your review.
ASSISTED LIVING VISIT CHECKLIST
Community name: __________________________ Date of visit: __________

LOCATION
☐ Is it convenient for friend and family visits?
☐ How close is the nearest hospital or medical plaza?
☐ Is the neighborhood safe?
☐ What’s the visiting schedule? Will you have privacy during your visits?
☐ Can you take your loved one off campus?
☐ What's covered in the basic fee, and what's extra?
☐ Can you talk to residents’ family members to get their perspective on the available assistance and community?

PHYSICAL ENVIRONMENT
☐ Is it specifically designed for assisted living?
☐ Is the setting clean, well-maintained and odor-free?
☐ Are the doors and rooms clearly labeled with words and/or pictures?
☐ Are there private areas provided for family interaction?
☐ Are areas well-lit with plenty of natural light?
☐ Are outdoor areas provided for residents?
☐ Are the apartments private?
☐ Are handrails provided in hallways?
☐ Are grab bars provided in bathrooms?
☐ Is a 24/7 emergency response system available?
ASSISTED LIVING (CONT.)

ASSISTANCE

☐ Is the community licensed for assisted living?
☐ How is the staff trained?
☐ Are there staff background checks?
☐ What’s the staff-to-resident ratio?
☐ Are there individualized, personal assessment plans, and are they updated regularly?
☐ Is family support and education available?
☐ Are enrichment activities scheduled daily to keep residents alert, stimulated and entertained?
☐ Does staff assist with and participate in activities?
☐ Is there an on-site health clinic?
☐ Does the community offer additional levels of living if medical needs develop?
☐ Do doctors visit regularly?
☐ Can residents visit their own doctors and dentists?
SKILLED NURSING & REHABILITATION

SKILLED NURSING

Long-term diagnoses call for long-term plans. When, for any reason and at any time, your loved one’s condition requires a licensed nurse 24/7 for days, weeks or even months, skilled nursing may be the answer.

Anchor your search for skilled nursing for your loved one in a physician’s evaluation. The professional assessment of medical and daily living needs will help you know what’s needed next. If home care and/or outpatient care are inadequate to meet the demands presented by an acute illness, injury or post-op condition that doesn’t require hospitalization, you’re likely to discover skilled nursing is the right choice.

For an aging senior, the following health conditions often require long-term skilled nursing:

- CARDIAC FAILURE
- COPD (CHRONIC OBSTRUCTIVE PULMONARY DISEASE)
- CHF (CONGESTIVE HEART FAILURE)
- DIABETES
- PARKINSON’S DISEASE
- SEVERE OSTEOARTHITIS
- STROKE
REHABILITATION

Many don’t know that rehabilitation is often offered within a skilled nursing setting, where staff, technology and services are ideally suited to delivering both long-term care and short-term skilled nursing — or “rehab.” When your loved one needs the right space for his or her body to heal and be its best — skilled rehab may be the answer.

Rehab is usually prescribed following an injury, surgery or illness that would heal faster or more thoroughly from new muscle memory, strength training, antibiotic IV therapy or other treatment. Ordinarily, rehab treatment can range from several days to weeks, and successfully concludes when all treatment goals are met and the resident is released to return home.

For aging seniors, rehab treatment may include these conditions:

- CARDIAC CARE
- JOINT REPLACEMENT
- ORTHOPEDICS
- PAIN MANAGEMENT
- NEUROLOGIC RECOVERY
- STROKE RECOVERY
- OTHER MAJOR ILLNESS, EVENT OR SURGERY
- WOUND HEALING
- RESPIRATORY CARE
SKILLED NURSING/REHAB VISIT CHECKLIST
Community name: __________________________________ Date of visit: ________________

LOCATION
☑ Is it convenient for friend and family visits?
☑ How close is the nearest hospital or medical plaza?
☑ Is the neighborhood safe?
☑ What’s the visiting schedule? Will you have privacy during your visits?
☑ What’s covered in the basic fee, and what’s extra?
☑ Can you talk to residents’ family members to get their perspective on the available assistance and community?

PHYSICAL ENVIRONMENT
☑ Is it specifically designed for skilled nursing?
☑ Is the setting clean, well-maintained and odor-free?
☑ Are the doors and rooms clearly labeled with words and/or pictures?
☑ Are there private areas provided for family interaction?
☑ Are areas well-lit with plenty of natural light?
☑ Are outdoor areas provided for residents?
☑ Are the apartments private?
☑ Are nametags worn by all staff members?
☑ Is there evidence of a warm, polite and respectful relationship between staff and residents?
☑ Are all common areas and resident rooms designed for wheelchair access?
☑ Do hallways have handrails and bathrooms have grab bars?
☑ Is a 24/7 emergency response system available?
☑ Are all exits clearly marked?

The Plaza at Santa Marta has a 5-Star rating from the Centers for Medicare & Medicaid Services (CMS). Only 10% of the communities in Kansas earn a 5-Star rating. Every health center ranking is based on annual health department surveys, staffing ratios and quality metrics. You can find the CMS ranking for all the communities you’re considering at CMS.gov.
ASSISTANCE
- Is the skilled nursing community Medicare-certified?
- Is the skilled nursing community Medicaid-certified?
- Is a full-time RN (registered nurse) on duty in the community at all times?
- Is a full-time social worker on staff?
- Is there longevity among key staff?
- Can the on-staff doctor be reached 24/7?
- Are background checks performed on all staff members?
- What is the staff-to-resident ratio?
- Are individualized, personal assessment plans updated regularly?
- Are family support and education available?
- Are enrichment activities scheduled daily to keep residents alert, stimulated and entertained?
- Do staff members assist with and participate in activities?
- Can residents visit their own doctors and dentists?

RESIDENCES
- Are personal belongings and furniture permitted?
- Is personal storage space offered to each resident?
- Are residences private or semiprivate?
- Do rooms include television, cable, phone and a recliner?
- Are there policies and procedures in place to protect residents' possessions?
AARP-Caregiving
Alzheimer’s Association
American Parkinson Disease Association
Family Caregiver Alliance
Health in Aging
Mayo Clinic
Medicare
National Alliance for Caregiving
The National Consumer Voice for Quality Long-Term Care
National Council on Aging
National Multiple Sclerosis Society
National Osteoporosis Foundation
National Stroke Association
A Senior’s Guide to Good Nutrition
Social Security Administration

aarp.org/family/caregiving
alz.org
apdaparkinson.org
caregiver.org
healthinaging.org
mayoclinic.org
medicare.gov
caregiving.org
thecomsumervoice.org
ncoa.org
nationalmssociety.org
nof.org
stroke.org
vrg.org/nutrition/seniors.htm
ssa.gov

A nonprofit Life Care senior living community sponsored by the Archdiocese of Kansas City in Kansas