



# Getting started... Step I

## *Determine your needs*

Determining your needs and options can be an emotional and challenging experience. Often, families do not know where to begin, let alone what questions to ask. To help you get started please carefully review the following survey and answer each question to the best of your ability.

### **1. MOBILITY**

- Capable of moving about independently. Able to seek and follow directions. Able to evacuate independently in case of emergency. *(1 point)*
- Ambulatory with cane or walker. Independent with wheelchair but needs help in emergencies. *(3 points)*
- Requires occasional assistance to move about, but usually independent. *(4 points)*
- Mobile, but may require assistance due to confusion, poor vision, weakness or poor motivation. *(6 points)*
- May require assistance when transferring from bed, chair or toilet. *(7 points)*
- Requires transfer and transport assistance. Requires turning in bed and in wheelchair. *(10 points)*

### **2. NUTRITION**

- Able to prepare own meals. Eats meals without assistance. *(1 point)*
- Can do some meal preparation, but needs main meal prepared daily. *(4 points)*
- Needs all meals prepared and served. *(6 points)*
- May require assistance when eating, such as opening cartons or cutting food. *(8 points)*
- Mostly or totally dependent on others for nourishment, includes reminders to eat. *(10 points)*

### **3. HYGIENE**

- Independent in all care including bathing, shaving, dressing. *(1 point)*
- May require assistance with bathing or hygiene, reminders or initiation assistance. *(4 points)*
- Dependent on others for most or all personal hygiene tasks. *(6 points)*

### **4. HOUSEKEEPING**

- Independent in performing housekeeping functions such as bedmaking, vacuuming, cleaning and laundry. *(1 points)*
- May need assistance with heavy housekeeping, vacuuming, laundry, changing linens. *(4 points)*
- Needs laundry and housekeeping services provided. *(6 points)*

### **5. DRESSING**

- Independent and dresses appropriately. *(1 point)*
- May require assistance with shoelaces, zippers, medical appliances or garments. May require reminders, motivation or initiation assistance. *(6 points)*
- Dependent on others for dressing. *(10 points)*

### **6. TOILETING**

- Independent and completely continent. *(1 point)*
- May have incontinence, a colostomy or catheter, but is independent in caring for self. *(3 points)*
- May have incontinence, a colostomy or catheter, but requires assistance in caring for self. *(5 points)*
- May be unwilling or unable to manage own incontinence through proper use of supplies or requires physical assistance with toileting on a regular basis. *(8 points)*
- Regularly and uncontrollably incontinent, dependent or unable to communicate needs. *(10 points)*





## Step I (continued)

### 7. MEDICATIONS

- Responsible for self-administration of medications. (1 point)
- Able to self-administer medications, but others may need to remind and monitor the actual process. (5 points)
- Requires medication administration system with reminders and monitoring by family members or others. (8 points)
- Cannot administer own medications, even with supervision. Medications must be administered by licensed personnel. (12 points)

### 8. MENTAL STATUS

- Oriented to person, place and time. Memory is intact but may have occasional forgetfulness with no pattern of memory loss. Able to reason, plan and organize daily events. Has mental capacity to identify environmental needs and meet them. (2 points)
- May require occasional direction or guidance in getting from place to place, or may have difficulty with occasional confusion that may result in anxiety, social withdrawal or depression. Orientation to time, place or person may be minimally impaired. (5 points)
- Judgment may be poor. May not attempt tasks that are not within capabilities. May require strong orientation assistance and reminders. (10 points)
- Disoriented to time, place and person, or memory is severely impaired. Often unable to follow directions. (15 points)

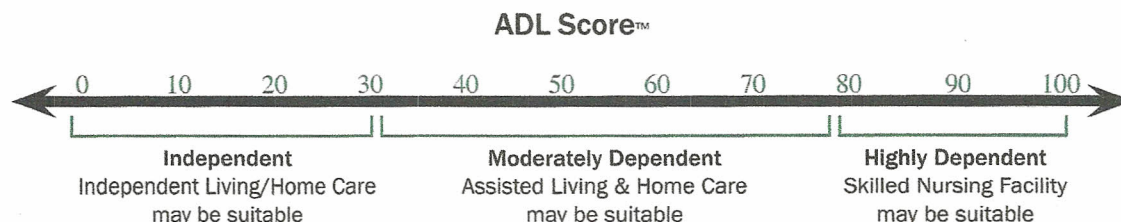
### 9. BEHAVIORAL STATUS

- Deals appropriately with emotions and uses available resources to cope with inner stress. Deals appropriately with others. (1 point)
- May require periodic intervention from others to facilitate expression of feelings in order to cope with inner stress. May require periodic intervention from others to resolve conflicts and cope with stress. (2 points)
- May require regular intervention from others to facilitate expression of feelings and to deal with periodic outbursts of anxiety or agitation. (8 points)
- Maximum intervention is required to manage behavior. May pose physical danger to self or others. Is abusive or unacceptably uncooperative. (20 points)

### 10. ADDITIONAL CONSIDERATIONS

- Do I want to remain at home or move into a community with other people?
- Am I lonely? Would I like to have people to do things with?
- Are there people or places I would like to live close to?
- What is my monthly budget?
- What services am I entitled to through my insurance? Medicare? VA benefits? Public benefits?

To compute your ADL Score™ and appropriate care options, add up the points from above and compare to the scale below. Please note that your ADL Score is only intended as a guide. Other considerations should also be measured when assessing your actual ADL needs. Your physician, trained clinician or social worker may be able to provide you with further assistance. You may also contact us at 480-246-3515.







## Getting started... Step II

### *Evaluate your options*

There are several types of housing and care options for seniors, each offering services specific to the clientele they serve.

#### **Alternative Living - New -**

Alternative Living communities are increasingly becoming a popular choice among seniors that no longer wish to live alone or maintain a private residence. These communities are committed to the philosophy of "Aging in Place" and "Self Directed Care". Aging in Place advocates allowing the resident to choose to remain in his/her living environment despite the physical and or mental decline that may occur with the aging process. Communities may or may not be licensed by a public agency as personal care services are provided by out-side community health care agencies. Services may include: nursing, therapies, health education, case management, on-site assessments, information and referral services, counseling, education/prevention programs and assistance with Activities of Daily Living (ADL's) such as eating, bathing, dressing, grooming, toileting, transferring. Self Directed Care provides a high degree of flexibility, freedom and control over how, when and by whom delivers health care services.. Self Directed Care results in more choices and develops a sense of empowerment for seniors and their families.

#### **Independent Living**

These communities are geared for the independent senior. They often offer an abundance of amenities that may include; meal plans, housekeeping services, organized social activities, wellness programs, transportation, swimming pool/spa, clubhouse, library, beauty salon/barber shop, fitness room, patrolled security, etc.

#### **Assisted Living**

Assisted Living centers are for people needing assistance with Activities of Daily Living. Assisted Living exists to bridge the gap between Independent Living and Skilled Nursing Facilities, whereby residents are often not able to live by themselves but do not require constant care either. The State licenses Assisted Living in to two categories, Homes and Centers. Homes and Centers are licensed for 10 or fewer and 11 or more residents, respectively.

#### **Memory Care or Alzheimer's Care**

This type of Assisted Living provides a secure environment with staff that has additional training in the care of persons with dementia. These facilities are licensed as Directed Care by the State.

#### **Skilled Nursing Facilities**

Licensed nursing care facilities provide the highest level of medical care for persons who are not able to perform Activities of Daily Living. Skilled nursing is often used for acute, short stays after a hospitalization. Long-term care in a skilled setting is usually the final placement for an elderly adult.

#### **Continuing Care Retirement Communities (CCRC's)**

The combination of Independent Living, Assisted Living and Skilled Nursing Facilities on a single campus is commonly known as a Continuing Care Retirement Community. The resident can take advantage of the full range of services available and the ease of transfer to a different type of facility as his or her condition and needs change; alleviating the needing to look for a new facility, relocate, or adapt to a new setting. For example, a resident may begin in the Independent Living residences, move to Assisted Living as he or she needs help with activities of daily living, and eventually move to the Skilled Nursing Facility as ongoing care becomes necessary.





## Getting started... Step III

### *Select services/community*

Once you have determined your needs and evaluated your options it's time to make your selection.

- ☐ This guide and our website, [www.seniorhousing.org](http://www.seniorhousing.org), offer the most comprehensive and current information available.
- ☐ Make a list of the communities you are interested in visiting. It is important that you visit a community at least two times to get a good feel for the environment. The first visit should be scheduled with someone at the community who can answer your questions and give you a tour. This is usually a marketing or admissions person. The second visit should be unannounced, preferably in the evening or on a weekend. This will give you a second perspective of the community.
- ☐ Facilities licensed by the state can be checked out for deficiencies. This can be done by contacting the Arizona Department of Health Services or going to their website [www.azdhs.gov/als/](http://www.azdhs.gov/als/). This website also offers a guide for choosing an assisted living facility in the consumer guides section. The guide lists some good questions to ask when comparing communities.
- ☐ Get references. One of the best ways to evaluate a facility is to talk with its current residents as well as professionals in the community.
- ☐ Consider ancillary services that may make your transition smoother. For example, Elder Law Attorneys, Geriatric Case Managers, Medical Social Workers, Home Modification Specialists, Certified Caregivers and Realtors.
- ☐ While not likely to occur, if you suspect abuse or neglect the Area Agency on Aging Ombudsman Program is a valuable resource for individuals in long-term care facilities. They can be reached at (602) 264-HELP or toll free at (888) 783-7500.
- ☐ Involve loved ones. Input from family, friends and in particular the prospective resident is critical to long-term success of any transition.
- ☐ Seek support. Selecting a community may seem overwhelming, but taking it one step at a time will help make this task more manageable. If you still need assistance with this process, there are professionals available to help. The Area Agency on Aging Senior HELP LINE is available 24-hours a day for support. They can be reached by calling (602) 264-4357. You can also visit their website at [www.aaaphx.org](http://www.aaaphx.org).

**If you need additional assistance, please do not  
hesitate to contact us at 480-246-3515.**

