



# Understanding Care Options.



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A "how-to" guide for anyone navigating  
the maze of choices in senior care.



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## FINDING YOUR WAY: HEALTHCARE CHOICES FOR SENIORS

Change can be frightening, so we often avoid facing situations that involve change unless we're forced to do so. As family members age, we may be tempted to avoid confronting the decline we see in their health and care needs unless a crisis situation, such as a sudden hospital stay, makes us take a long look at what our loved ones are facing and what options they may have for care. Because the changes we see as our loved ones age may frighten us or may cause us to question changing boundaries in our relationships, coping with these changes can be stressful and can be emotionally challenging.

At The Springs of Simpsonville, we want to provide resources that will help guide you and your family as you confront the changing dynamics of aging with your loved ones. We've helped many families cope with these changes and have helped them find answers regarding the care their loved ones need. Over and over, we've seen families in crisis situations who are trying to make quick decisions about placement or healthcare options, so we realize that, first and foremost, families need reliable information quickly—often immediately. We also know families need to have the advice of professionals they trust, and families need to understand better the different options available to them.

Whether a family decides to move a loved one to The Springs at Simpsonville or not, we are here to offer support and guidance. In the pages ahead, we'll help you understand the most common options available for senior healthcare and senior living arrangements. Armed with this information, we trust you will be able to make the best choices for you and your loved ones.

### THE FIRST STEP

Before looking at care options, you'll need to take a very candid look at the current situation for your loved one. Without an accurate assessment of your loved one's circumstances and needs, you won't know what the next steps should be regarding your loved one's care. These are the basic functions we would measure during the assessment stage:

#### *Mobility*

- Does your loved one need assistance to walk (cane, walker, the assistance of another person)?
- How difficult is it for your loved one to get into or out of the bed or a chair?
- Does your loved one's home have elements that make it hard to get around (stairs, for instance)?
- Does your loved one avoid using the entire home because it's difficult to get around?
- Is your loved one still driving?
- Does your loved one travel outside the home to get groceries or run other errands?
- Is there anyone else living in the home?
- How many falls, illnesses, or other emergencies has your loved one experienced over the last six months?

Mobility and safety go hand in hand. An accurate assessment of your loved one's challenges regarding mobility will let you know how well your loved one can avoid dangerous situations (being able to get out of the house in case of a fire or being comfortable in accessing the entire home) will let you know if intervention is warranted. If your loved one is living alone and may not be able to protect himself or herself through movement, you will want to consider additional care options.

### *Personal Hygiene and Cleanliness*

- Can your loved one bathe and take care of other personal hygiene tasks independently (shaving, grooming, maintaining fingernails and toenails)?
- Does your loved one need assistance to use the toilet? If so, how many times a day does he or she need assistance with toileting?
- Is your loved one able to manage routine tasks of cleaning the home, doing laundry, washing dishes, taking out the garbage?
- If your loved one has a pet, is he or she able to care for the pet, including cleaning up after the pet?

Challenges in accomplishing routine hygiene tasks and keeping a home sanitary can, like mobility challenges, signal a need for additional care. If personal hygiene and a sanitary environment are compromised, your loved one may be more susceptible to infections and diseases that can be particularly detrimental for the elderly. If your loved one needs assistance to maintain his or her personal hygiene and to maintain a clean and safe environment, you will want to consider having help to accomplish these tasks.

### *Nutrition*

- Does your loved one have access to fresh fruits and vegetables?
- Can your loved one still cook his or her own meals?
- How often does your loved one rely on frozen, pre-packaged, or canned foods?
- Does your loved one drink “meal replacement” drinks instead of eating?
- Does your loved one’s refrigerator and pantry have many expired foods?
- What type of support is available to help with meal preparation?
- If your loved one cooks, are you afraid that he or she will forget to turn off the stove after cooking?

Adequate nutrition is crucial to health and well-being for everyone. Nutritional needs do change as we age, so your loved one won’t need as many calories as a young athlete in training; however, eating fresh foods is important at any age in maintaining a healthy immune system as well as overall general health. Eating can be a pleasurable experience that also enhances our quality of life, so if your loved one is not able to eat healthy meals, you will want to look at options that will help him or her have access to nutritious and gratifying foods.

### *Life Skills*

- Can your loved one still manage his or her own finances, including paying the bills?
- Are bills paid on time?
- Does your loved one have any problems taking his or her medications?
- Are medications taken at the right time and in the right amount?
- Has your loved one seemed more confused or shown personality changes lately?
- How much time per week do you spend helping your loved one?

Unless there is a crisis that we must confront, we often make the assumption that our loved ones are just fine on their own. We want them to maintain their independence as long as possible, so usually don’t consider any changes in living arrangements or additional care options until after an injury or illness occurs. By considering the questions above, you will be better equipped with an accurate assessment of your loved one’s current situation and any challenges or needs he or she may have. You

will also be better able to imagine how scary the changes may be for your loved one as he or she experiences declining memory, confidence, vision, and mobility. These changes are worrying for your loved one because the changes impact his or her ability to be independent.

## SO WHAT'S NEXT?

You've assessed your loved one's current situation. You may have asked for advice from physicians or other experts you trust. You have a better understanding of challenges your loved one may be facing, and you're wondering what's next. How do you know the best way to help your loved one? During your research, you may have heard of numerous options – and it's confusing to try to determine what the differences are and what best suits your needs. We'll help you decipher the differences in the options available. The most common options you will encounter are

- In-home Care,
- Home Health Care,
- Independent Living Communities,
- Assisted Living Communities,
- Skilled Nursing Facilities,
- Rehab Centers, and
- Hospice Care.

Note that the list above includes both **places** where a person can receive care and **types** of care a person can receive in multiple locations. The concept of “aging in place” has gained popularity over the last few decades. Aging in place means allowing people to grow older in the place they call home. Ideally, there are few moves from the home setting and, instead, any additional care is delivered within the home if needed. With an aging in place solution, your loved one can potentially spend the rest of his or her life at home or in the assisted living community that has become his or her home. In order to age in place, we may need to make changes to allow our loved ones to live safely and securely while remaining as independent as possible. Maybe it's not likely that your loved one can be totally independent any more, but there are some accommodations that can make home safer, and there are senior living arrangements that may broaden the notion of home for your loved one. Different living arrangements can cater to different aging needs. Incorporating additional care services and resources may be appropriate to accomplish the aging in place plan for your loved one. Let's take a look first at the care resources that are available, and then we'll review some living arrangements for seniors.

## RESOURCES/TYPES OF CARE

Three in-home healthcare services are most commonly used: homecare (also referred to as private duty care), home health care, and hospice. People are most often confused about the differences between private duty home care and home health care, so let's compare these two services first.

Both private duty homecare and home health care provide care in the home to assist with specific needs. Private duty home care is more flexible in that a wider array of services are offered. Home health care companies are limited in what services they can provide based on Medicare and other insurance regulations.

### *Private Duty Home Care*

A private duty home care company will meet with you and your loved one to determine your particular needs and will develop a plan to meet the care needs while staying within your defined budget. Often,

care can be provided any time of the day and can range from 4-hour sessions to 24-hour coverage. Private duty home care companies most often provide hourly services, but hiring an in-home caregiver may also be an option. Some of the services a private duty home care company will provide are listed below:

- Bathing, dressing, grooming
- Medication reminders
- Walking and doing mobility exercises
- Getting to and from doctor's appointments and running errands or providing other transportation
- Health maintenance tasks such as changing a feeding tube or a colostomy bag
- Assistance with toileting
- Taking vital signs
- Respite care or supervision while the primary caregiver takes a break

When interviewing a private duty home care company, you will want to ask some specific questions to gain a better understanding of the company's services and whether or not the company will be a good fit for your needs.

- Is the company independently owned? Is the company part of a larger franchise?
- What services does the company provide?
- How do they staff their caregivers? Are staff employees of the company or hired through an agency?
- What type of training do the caregivers receive?
- How flexible is the company in scheduling services?
- Does the company require a contract or a minimum number of hours?
- Is the company licensed, bonded, and insured?
- What is the company's cancellation policy?
- How easily is the company reached after hours or on the weekend if needed?

#### *Home Health Care*

Home health care companies provide some services that are similar to services provided through private duty home care, but the focus is on a skilled nursing need and there are limitations on the scope and duration of home health care services. Often, physicians will order home health care after a hospitalization or rehab stay to help the patient regain strength and continue the recuperation process, and physicians may also order home health for patients experiencing failing health if the doctor believes therapy will improve the patient's condition. Services home health care can provide include the following:

- Wound care, including dressing changes
- Skilled nursing services
- Pain management
- Prescription management
- Assistance with bathing, dressing, and grooming
- Physical, occupational, and/or speech therapy services in the home
- Guidance for healthcare related concerns from a licensed social worker
- Monitoring vital signs
- Obtaining specimens for lab tests

Even though your loved one's physician will order home health care, you will still have the opportunity to interview the company to make sure that it's a good fit for you. If you're not happy with the company the physician has recommended, you can always ask the doctor to give you another choice in home health care providers. The questions listed below may be helpful as you interview home health companies.

- Is the home health company certified?
- Can the company provide any patient satisfaction statistics?
- What staff will handle your needs? Does the company provide RNs or LPNs? Are the therapists licensed physical therapists (PT) or physical therapy assistants (PTA)?
- What happens if you have an emergency and need help?
- Is everyone on staff an employee or does the company use contract workers?
- Are background checks performed on employees?
- Are there any special rehabilitation or therapy programs offered?
- What sets this company apart from others?
- Does the home health provider accept your insurance carrier?
- How will the care be coordinated between the home health company and family members or other caregivers who are assisting with care?

The table below provides a quick comparison between private duty home care and home health care. Remember that these two services are not mutually exclusive. If your loved one is eligible for home health care through a physician's order, your loved one may also hire a private duty home care company to provide services outside the scope of what the home health company can do.

<i>Private Duty Home Care</i>	<i>Home Health Care</i>
<ul style="list-style-type: none"> <li>• Contracted Independently (no physician's order needed)</li> </ul>	<ul style="list-style-type: none"> <li>• Requires an order from a physician to begin receiving services</li> </ul>
<ul style="list-style-type: none"> <li>• Paid for privately with costs averaging between \$17 and \$22 per hour; some long-term insurance policies or assistance through VA benefits may help defray costs</li> </ul>	<ul style="list-style-type: none"> <li>• Covered either in full or in part by Medicare and most insurances</li> </ul>
<ul style="list-style-type: none"> <li>• Can be contracted on an ongoing basis as long as services are needed. No time limit.</li> </ul>	<ul style="list-style-type: none"> <li>• Designed for short-term intervention to address specific skilled nursing or therapeutic needs. Ongoing care requires recertification and approval by Medicare/insurance carrier</li> </ul>
<ul style="list-style-type: none"> <li>• Typically hired on an hourly basis and caregivers can be in the home for specific time frames that meet the family's needs</li> </ul>	<ul style="list-style-type: none"> <li>• Average time spent in the home is about 45 minutes per day and nurses are typically scheduled to visit between one and five times per week</li> </ul>
<ul style="list-style-type: none"> <li>• Staff are usually Certified Nursing Assistants (CNAs)</li> </ul>	<ul style="list-style-type: none"> <li>• Staff will include LPNs, CNAs, social workers, and therapists</li> </ul>

### *Hospice Care*

The third type of in-home care available is hospice. Hospice is a special type of care for those who have a terminal illness with a life expectancy of six months or less. Though many people have an automatic negative response to the term "hospice," the goal of hospice care is to provide the patient and family

and friends support and to focus on quality of life. Allowing the patient to be free from pain and as alert and active as possible are key elements of hospice care. Below are some other important facts about hospice care.

- Hospice care requires a physician's order to initiate.
- Patients under hospice care agree to forego any treatments or therapies that are aggressive or curative in nature (such as chemotherapy).
- Hospice care provides a comfort and quality of life approach.
- The hospice team will provide emotional and caregiving support not only for the patient, but also for any family and friends or other caregivers.
- The team will include nurses (usually RNs), CNAs, social workers, volunteers, and chaplains.
- Hospice is covered in full by Medicare and by most insurance carriers.
- Grief support and counseling is available both before the patient passes away and for up to 13 months after the patient passes away.
- Hospice services are delivered anywhere the patient lives.
- The patient can change his or her mind and cancel hospice services at any time.
- If a hospice patient is in a crisis situation that requires 24-hour nursing supervision, hospice agencies may provide continuous care services in the patient's home, or, if eligible under Medicare regulations, the hospice agency may transfer the patient to an inpatient facility for 24-hour care and monitoring.

As with interviewing private duty home care and home health care companies, you will want to ask important questions when talking with potential hospice providers. Always remember that you have choices regarding the agencies providing care for you and your loved one. We've listed below some helpful questions you may want to ask before contracting with a hospice agency. Please note that hospice care and private duty home care are not mutually exclusive; private duty home care can provide services to complement those provided by a hospice agency.

- What sets the hospice agency apart from others?
- Will your loved one have to change his or her doctors?
- What type of changes in your loved one's healthcare routine can you expect?
- How active are volunteers?
- What happens if you have an emergency and need help?
- What is the hospice agency's response time in an emergency situation?
- What professionals are part of the hospice team?
- How often will hospice staff visit and how flexible are they with scheduling?
- Does the hospice agency have its own staff or does it use contract staff?
- What type of training do the staff receive?
- Are background checks performed on caregivers coming into my home?
- How long have most staff worked for this hospice agency?
- Can the agency provide you with any patient satisfaction data?
- Will a hospice staff member be with your loved one when he or she is near death or at the time of death?
- Are there any circumstances when the hospice agency would provide therapeutic services such as rehab services?

*Additional Resources*



One of the three types of in-home care may help older adults age in place either in their own homes or in a community that has become their home. You may also want to consider other resources, especially if you and your loved one decide that staying at home is the best option. Technology and services are thriving in today's market that caters to aging baby boomers:

- **Adult Day Care** providers make it possible for adult children to work during the day and provide care in the evening so that their parents are safe and secure at all times. Adult day care services include medication assistance and daily monitoring, meal services, and opportunities for your loved one to participate in activities and make new friends. Seniors with memory impairments may especially benefit from these services, and adult day care can also provide a much-needed break for caregivers.
- **Respite Care** can also provide a worry-free break for the primary caregiving team. You may hire a private duty home care company to provide assistance for a short-term vacation, or you may want to place your loved one in an assisted living community for a short-term break or for continuing recuperation after a hospital or rehab stay. You may also use respite care as a way to convince your loved one to consider a move to assisted living since the respite period provides a trial stay.
- **Home Modification Services** can also provide added security and safety if your loved one is staying at home. Some of the more common home modifications include installing handicapped ramps, installing grab bars in the restrooms and/or railings in hallways, installing a chair lift for the stairs, or renovating the bathroom to get rid of bathtubs that create fall hazards. Costs for these services may range from a few hundred dollars to thousands of dollars, depending on the type of work and the extent of the renovations.

You may also find the following resources to be helpful. Always check with your local senior center for additional suggestions in your local area.

- Meals on Wheels
- Transportation Services
- Companionship through Church or Other Groups
- Using smartphone and computer technology to monitor health (such as vital sign monitoring and medication management tools)
- Geriatric Care Managers
- Push-button Alert Systems in Case of Emergencies

## PLACES

You and your loved one may decide that staying at home isn't an option any longer. Looking for senior housing options can be confusing and overwhelming. Knowing what services each type of senior living arrangement offers and having done an accurate assessment of what type of care your loved one needs, you'll be better able to make the best decision.

Senior living arrangements progress from those that are most independent to those that provide the highest level of assistance:

Independent Living Communities  
Assisted Living Communities  
Memory Care Communities  
Skilled Nursing Facilities

Again, we want to stress that the assessment process is crucial in knowing what your loved one's care needs are and knowing which environment will be best suited to provide that level of care. Seek the advice of your loved one's healthcare professionals if you or your loved one is not comfortable in your ability to make an honest assessment.

Regardless of the type of community you are researching, there are some key pieces of information you'll want to get from each community and some important qualities to be mindful of when touring.

- Who owns the community? How long has the owner had the community?
- Does the ownership manage the community, or is a third party retained to manage the community? If a third party is involved, how long has the company managed the property?
- Obtain a copy of the latest survey from the community or from the Department of Public Health or from Medicare. (Some of this information will be available online.)
- What is the staff to resident/patient ratio?
- What is the average tenure of staff? Of managers?
- How would a move to this community be paid?
- Tour without an appointment in order to see the community "as is."
- When touring, look for staff interaction with one another and with residents/patients as well as their interaction with you.
- What is the look and feel of the community? Does it feel like a home environment? Does it seem clean and well cared for?
- Always discuss options with your loved one's physician.

### *Independent Living Communities*

Independent living communities provide the most independence of all senior living arrangements outside the senior's own home. These communities may also be known as retirement communities or retirement homes. For active seniors, an independent living community can provide a way to maintain independence while also being part of a larger community that affords them safety and security. The independent living setting also gives seniors the opportunity to participate in events and social activities both on site and off. Ideally, seniors can enjoy their retirement years without the hassle of upkeep on a home with the added benefits of more social interaction and opportunities to stay active than they might otherwise enjoy. Costs for independent living will vary depending on the community and the geographic location, but the price range will typically be in the \$2500 to \$5000 per month range, with an additional fee for a second person residing in the apartment.

Usually an independent living community will provide the following services and features:

- Includes some meals—typically one or two per day
- Includes housekeeping and maintenance services. Some may include laundry services.
- Affords greater opportunities for seniors to live active, social lives
- Age ranges may vary, but typically residents will range in age from 70 to 90 years old
- Many residents continue to drive and will have reserved parking spaces
- Offers physical fitness, continuing education and cultural programming
- Includes a full kitchen
- Provides some type of emergency call system in the senior's residence
- Typically do not offer any type of assistance with personal needs such as dressing, bathing, or taking medications

- Some communities may hire an outside agency to provide additional care services if needed
- Require residents to be able to evacuate their residences independently in case of an emergency
- Includes resident-run councils or other governing bodies to promote resident input and involvement in the management of the community

If you're researching an independent living community, be sure to find out

- What's included in the lease agreement,
- How often you can expect a rent increase,
- What types of programming are available,
- What happens if you have an emergency and need assistance,
- What additional healthcare services can you bring into the community if needed, and
- Under what circumstances would you have to move from the community.

### *Assisted Living Communities*

If your loved one needs assistance with personal care that cannot be provided in either an in-home situation or an independent living community, an assisted living community may be the type of care to consider. Assisted living communities are designed to help residents with daily activities such as bathing, dressing, grooming, and taking medications; all meals are also provided. The community will develop a care plan for each resident that determines what types of assistance that particular resident will need, and the needs may change over time. Some residents may have memory impairments as well as physical limitations. Residents will need assistance with some tasks while continuing to tackle as many activities as possible independently. A physician's evaluation will be required in order to ensure the appropriate assistance and setting for each resident.

Below are some basic elements of an assisted living community.

- Residents typically range in age from 85 to 100.
- The community is a home setting for each resident that offers privacy and a place to house their own belongings.
- The community will provide housekeeping and laundry services as well as transportation services.
- Floor plans are typically smaller studio or one bedroom plans that accommodate seniors with mobility challenges.
- Residents can receive assistance with a variety of daily activities depending on their individual needs.
- Activities and event programming will be part of daily life at the community in order to keep residents engaged and active.
- The cost for an apartment in an assisted living community is paid for privately; however, long-term care insurance policies and some benefits through the Veterans Administration may help cover the cost.
- Leases typically are on a month-to-month basis with a 30-day move-out notification clause.
- Some assisted living communities also provide separate living arrangements for those with memory impairments (memory care units).
- The cost for an apartment in an assisted living community will vary depending on the community and the geographic location, but an average range would be between \$3500 and \$6500 per month.

- In addition to the monthly rent, additional fees will be assessed for care provided to each resident.

Again, there are some pertinent questions you will want to ask when researching an assisted living community:

- Are staff available on a 24-hour basis to assist with needs?
- How are the staff trained?
- Is a nurse on site at all times?
- How is the community licensed—as an assisted living community or a personal care home?
- How will your loved one be assessed for the type of care he or she needs?
- How often will your loved one's care needs be re-assessed?
- Is the community conveniently located for family and friends to visit?
- What is the staff to resident ratio?
- How will the fees be broken down each month (will the fees for care be billed separately from the rent)?
- How long have the managers been in their roles?
- How well do the staff seem to interact with the residents during your visit?
- What healthcare needs or conditions would cause you to have to move your loved one from the community?

#### *Skilled Nursing Facilities*

Skilled nursing facilities (SNF) are more commonly known as nursing homes. Over the last few decades, however, there has been a shift in the type of care predominantly provided at a SNF. Whereas most people think of a nursing home as a place where someone can go to live out the rest of his or her days, the modern concept of a nursing home is based primarily on rehabilitation. The two types of care offered in a SNF are long-term care (the SNF becomes the resident's home) and rehab/skilled care (provided after a hospital stay for recuperation). There are some basic facts you'll need to know about SNFs.

- A stay for rehab in an SNF is a short-term stay only (typically around 20 days) and is covered by Medicare in full or in part, depending on the total number of days in rehab.
- Medicare requires a 3-day hospital admission prior to covering a rehab stay.
- Rehab stays are focused on physical, occupational, and speech therapies as needed.
- Short-term skilled nursing stays may also be covered for wound care or other specialized post-hospitalization or post-surgical needs.
- The SNF provides 24-hour care and oversight by both Certified Nursing Assistants (CNAs) and nurses (both LPN and RN).
- Physicians who are affiliated with the SNF will oversee patients' care during their stay.
- Medicare will not cover a long-term care stay for a resident in a SNF (the SNF becomes the person's home rather than a short-term placement).
- Long-term care may be covered in full or in part through long-term care insurance benefits, benefits through the Veterans Administration, and/or through Medicaid.
- Long-term care is warranted when a person needs 24-hour care and observation beyond what can be provided in the person's home or in an assisted living community.

*You Can't Get There From Here*

We've worked with family members who were seeking to place a loved one in a skilled nursing facility directly from their home, and we've found that people are often confused about the typical process for a person to be placed in a nursing home setting. For long-term care, there may be some scenarios where a direct placement from the patient's home is possible; however, it's unlikely. Most SNF admissions staff work directly with hospital discharge planners because Medicare regulations require a 3-day hospital stay before a short-term rehab or skilled nursing stay will be covered. In much the same way, most long-term care residents get to the nursing home via a stay at the hospital first as that's the easiest and most direct placement route. Sometimes patients may initially be referred to a SNF for rehab, but become long-term care residents if rehab is not successful and the patient still requires a high level of care.

If you're encouraged to seek a skilled nursing placement for your loved one, usually a hospital discharge planner will give you options of local facilities that have beds available. Be sure to do your own investigation of the facility as well. Tour the facility rather than relying only on the recommendation of hospital staff. You will get a feel for the facility and know whether or not you think your loved one will be comfortable and well cared for. As you tour and talk with staff at a skilled nursing facility, you may want to consider the following questions:

- Who owns the SNF and how long has it been under the current ownership?
- How long have the managers and key personnel been working there?
- What is the Medicare rating for the facility (a one- to five-star rating which you may also find available online)?
- How often will your loved one be in therapy? What kinds of therapy?
- What are the therapy goals?
- How will the therapists and other staff communicate with you regarding your loved one's progress?

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

Tying all the types of senior living arrangements together are Continuing Care Retirement Communities. These communities offer a range of services along the healthcare spectrum on one campus—from independent living arrangements to a skilled nursing facility. These communities can be very appealing for married couples who may need different living arrangements, but wish to remain close to one another and to be able to visit easily. A CCRC may also be attractive because of the guaranteed availability of care at any level as the individual's needs change. A CCRC operates on a "buy-in" basis which is a different concept from the month-to-month leasing agreements for other types of communities. A large sum is usually required as an initial investment, and monthly charges are also incurred. The basics of care at each level in a CCRC would be the same as we've discussed above under separate headings, and the questions you'd want to ask would be the same. You would also want to get detailed financial information on the CCRC, though, since the initial payment is a large investment into your future care and you will want to see how the funds have historically been managed.

#### **RELIEVING YOUR ANXIETY**

Yes, change can be frightening. You've already taken the first step toward relieving that anxiety by reading this information—your research and your increased knowledge will alleviate the anxiety you and your loved one may feel about the changes you're both encountering. Don't underestimate the power of your own instincts in this process as well. Trust your instincts and gather as much information as you can.

The staff at The Springs of Simpsonville are always willing to serve as guides through the changes you are experiencing. We are only a phone call away. Reach out to us at (864) 962-8570 with any questions.

One final piece of advice we can give is to take care of yourself as a caregiver. Remember that you're not alone. You may find support groups helpful, or there may be other ways you find to nourish your own spirit during this time of change. Like your loved one, you may go through the five stages of grief over the changes you both are experiencing: denial, anger, bargaining, depression, and acceptance. Don't expect to breeze through all five of these stages in this particular order or with the same duration for each phase. Watching your loved one's health and abilities decline can be emotionally draining and emotionally complex. Your feelings of grief, pain, and sadness will lessen over time. What will endure is the love and the laughter and joy you can share with your loved one through his or her journey.



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