

Options Counseling

**Personal Stories about
how the Community
Living Program and
Option Counseling
is making a difference
in the lives of older
Hoosiers.**



Options Counseling is an interactive process where individuals receive guidance in their deliberations to make informed choices about long term services and supports (L TTS). The process is directed by the individual and may include others that the person chooses or those that are legally authorized to represent the individual

Wilbur's Story:

Wilbur, is a spry, sharp-witted 96-year-old Navy veteran whose religious upbringing led him to a lifelong commitment of service to others. He dedicated his young life to ministering to what was considered "riffraff" in his community, and he also ministered to inmates at the local jail.

In the 1940s during World War II, Wilbur enlisted in the Navy. He saw action on July 30, 1945, when low flying Japanese Kamikaze planes snuck under combat air patrol and crashed into the destroyer, Borie, being escorted by USS Benner DD807, the destroyer on which he was assigned. Wilbur said many lives were lost in the sea that night.

After the war, Wilbur returned home and married the love of his life, Mary with whom he made a happy life for more than 60 years. Mary passed away in 2006 and he has lived alone ever since.

Wilbur remained fairly independent until his vision began to fail, and he had to stop driving at night. Eventually, however, a friend and fellow preacher became concerned about him, realizing Wilbur needed help to remain living independently, and made a call to the local Area Agency

on Aging for assistance. Wilbur was experiencing physical health issues and falls. He was, and is still, adamant about his desire to stay put, in his own home.

Through his local Area Agency on Aging, Wilbur was set up with an



**Above, Wilbur Shoen, 96.
Below, Wilbur and wife,
Mary, in the 1940s.**



Options Counselor and placed on the CHOICE Community Living Program. He received multiple in-home services through this program including an in-home care attendant, home-delivered meals and a personal emergency response system (help button). Although hesitant at first, when asked what these services, now, mean to him, Wilbur said, "They mean everything."

And because Wilbur has the help he needs, he is able to remain at his church and continue his gentle ministry to those in need in the community.

What might this chipper veteran, who has lived a long life of service to his fellow man and to his community, tell State leaders about the CHOICE Community Living Program? "I'd tell them, I can't express how great it has been. It means so much to me to stay right here. There is no place like home."

Ed's Story:

Ed is a 104-year-old widower who lives alone in his own home which sits at the center of 50 acres on his family farm. He was born and raised on a farm in Alabama along with 15 siblings. He worked on his family farm until finishing the 10th grade when he left home for paid employment. He found work in an Alabama coal mine and met his wife Ella Mae during this time. The two married in 1934 and had four children – one son, and three daughters. When Ed retired in 1958, he and Ella Mae bought their farm in rural southern Indiana. They celebrated their 81st wedding anniversary before Ella passed away in 2015, at the age of 98.

Even though Ed no longer managed his orchards and fields, he still cooked. The problem was he could no longer drive to the store. He insisted, however, on staying in his own home, near his farm, but family members were several towns away and could not come every day to prepare meals. Eventually, a call was made to the Area Agency on

Aging, and an Options Counselor was sent out to assess his situation. The Options Counselor was able to set Ed up with home-delivered meals on the CHOICE Community Living Program. Problem solved.

Ed continues to live independently in the farm house on the land he loves so much. He still only requires minimal assistance from the CHOICE Community Living Program, which continues to supply his home-delivered meals, and also a personal help button he wears on his wrist. Ed said he pushed his button by accident not too long ago when he took a tumble down his front porch. He was surprised, and a bit embarrassed, when three ambulances came quickly screaming up his drive. He admits, however, it was a relief to know they'd come so soon if he ever needs help again.

Ed is the epitome of a self-sufficient man, but even he admits that having the minimal assistance of home-delivered meals is "real helpful." He and his family believe the meals, and the help button, are imperative, without which, he would undoubtedly have to live in a long-term care facility. He is, after all, 104 years old.



Above, Ed at 104.

Below, Ed, with wife, Ella Mae (left) and two of their daughters in the 1940s.



Joyce's Story

Joyce is 72 years old and lives in her home in a rural area with her spouse. Though he is her caregiver, he is on oxygen and has health problems of his own.

Joyce has been diagnosed with bone cancer, Parkinson's disease, neuropathy and rheumatoid arthritis. She has had Parkinson's for ten years and her mobility has worsened to the point that she is now wheelchair-bound.

She began receiving minimal in-home services in 2014 through the Family Care Giver Funding. This program provided Joyce with some homemaking services, but her condition deteriorated, and she needed additional services in order to remain safe in her own home.

She was assessed by an Options Counselor for the CHOICE Community Living Program. She needed home health aide services for bathing and personal care and also needed an emergency response system for times when her spouse was not available.

Through Community Living Program funding, Joyce was able to receive the additional services which have allowed her to remain in her own home. In addition, this has provided relief for her spouse.

At her Case Manager's last home visit, Joyce stated that services have been a huge help. Also during this visit, Joyce's husband mentioned that he needs a hearing aid. Joyce's Case Manager offered to provide a list of community resources for this equipment and will be sending the information to the spouse.

Joyce is a Medicare recipient and is receiving Medicare skilled nursing services in addition to service provided by the Community Living Program.

Pam and Paul's Story:

Pam and Paul met in the 1950s when she was 14 and he was 17. They were married as soon as Pam graduated from high school.

Several years ago, Pam experienced a series of hospitalizations and Paul began his life as a caregiver. He made bath renovations and installed handrails to assist with her mobility. He assisted with her bathing and dressing needs, and he kept up with the housework and cooking.

However, Paul began experiencing his own health issues which resulted in back surgery. Even after this, he was reluctant to ask for assistance.

Eventually, Pam went through a knee surgery, which left her with limited mobility. At this point, Paul contacted the Aging and Disability Resource Center and set up an appointment for an Options Counselor to come out and assess his wife for services.

"We got put on a waiting list for the services, and I forgot about it, until about a year later, when I got a call back," Paul said.

The second time, the Options Counselor was able to get assistance set

up for the couple, and they were both ready to accept help.

Under the CHOICE Community Living Program, Pam, who is now 70, has a personal care attendant to help her with her bathing and dressing. This has taken a huge burden off of Paul,



who is 72.

She also has a personal help button which provides peace of mind to them both since Paul still works part-time. In fact, he was gone recently

Above, Pam, 70 and Paul, 72, and below, on their wedding day.

when Pam experienced a fall. Thanks to the personal help button, she was able to summon help.



"Having these services has been a Godsend," Paul said. "I have nothing but high praises for LifeSpan and the folks who come here to help us.

"It's made a big difference in our lives. I don't have to worry so much about her any more. It takes a lot of the pressure off.

"I would say to those in charge of deciding whether or not to keep the CHOICE program going, it is well worth the funding. I don't know where we'd be without it.

"I'm grateful for every day. The Lord lets me get up each day, open my eyes, and do my best."

Naomi's Story:

Naomi is an 86-year-old who lives in a senior housing high rise. She lives alone, and her family assists her as much as possible; however, she simply needs more care than her family is able to provide.

She called the Aged and Disability Resource line seeking assistance. Naomi wants to remain in her own residence, but was concerned about her ability to fully care for herself.

An Options Counselor met with Naomi and it was determined that she is both a Medicare and Medicaid recipient. The Options Counselor was able to connect Naomi with a Medicaid Prior Authorization vendor. Through Prior Authorization, Naomi began to receive home health aide services, as well as some nursing care.

Naomi's daughter agreed to continue to monitor her mother's care, help manage her finances, and provide light housekeeping and laundry care.

Through the Community Living Program, Naomi's needs were met without having to be placed on a waitlist.

A Veteran's Story:

Thomas is 80 years old. He lives with his daughter and her family. His family needed options for his care because his daughter was going back to work and her children were returning to school. Thomas would have no one to care for him during the day while they were all away.

Through the Community Living Program, an Options Counselor met with Thomas and his family members. During the course of the assessment, the Options Counselor discovered that Thomas is a veteran and explained to the family that he may be eligible for services through the Veterans Administration. His daughter agreed to check into VA services and indicated that she would really like it if he could attend Adult Day Services.

The Community Living Program made it possible to provide Adult Day Services for Thomas for a short period of time until his VA funding kicked in. Within one week, VA was paying for his Adult Day Services.

Thomas' daughter was amazed at the difference in him and said that he looks forward to his days there, not to mention, she and other family members have the peace of mind of knowing that he is safe and able to receive his services in a community-based setting.

Don's Story:

Don is a 75-year-old veteran who lives alone and was referred by Adult Protective Services. He was at risk and vulnerable in numerous ways including environmentally (unsafe housing), physically (hearing loss, poor vision, poor mobility), emotionally (resigned and defeated), financially (low income), cognitively (poor short term memory) and socially (few informal supports).

After a thorough in-home assessment, the Options Counselor and Don established a care plan to address the areas of concern resulting in significant improvements and stability for the client. Interventions included: obtaining a cell phone, accessing transportation, obtaining rollator and shower bench to increase mobility and safety, accessing Extra Help & Medicare Savings Program, obtaining shoes so he could feel comfortable going to church, and assisting in the application process for subsidized housing which will allow him to move into safer housing community. The Options Counselor plans to recruit volunteers to assist Don in moving once his apartment opens up.

The Community Living Program's needs-based model made it possible to meet this gentleman's needs while diverting him from the wait list.



Glenda's Story:

Glenda is a 53-year-old who had initially called the Aging and Disability Resource line to inquire about homemaking services. She stated that she lives with her elderly mother and needs homemaking services because she, nor her mother, are able to complete homemaking tasks due to their health conditions. Glenda stated that they do have family that assists whenever possible, but that their family members' time is limited due to their own family commitments.

The Option Counselor who completed Glenda's intake noted that her home had no clear walking path and that there were boxes and clutter piled all over the floor, kitchen countertops and kitchen table. The Options Counselor was able to initiate homemaking services and handy care person services in the client's home which has helped tremendously.

Glenda's current Case Manager has witnessed how these services have been able to assist client with both the cleaning and organization of her home, along with maintaining this cleanliness. Services have also made Glenda and her mother safer in their home, as the clutter that would have previously presented a fall risk has been cleared.

Glenda has expressed sincere appreciation for these services and says that she does not know what she would do without them.

Frank's Story:

Frank is 62 years old and lives alone. He was in need of a ramp due to poor mobility and use of a scooter. Frank's apartment was located in a very small town which made access to goods and services difficult for a variety of reasons.

After assessing the need, the Options Counselor and client came up with a care plan that resulted in accessible housing located near a variety of goods and services, as well as neighbors that have become friends.

Interventions included: connection to Section 8 Housing wait list and finally funding; coaching through the housing transition process; connection to low income housing; and phone assistance to the client to answer questions related to Medicare, Medicaid or questions about community resources.

Because of assistance made possible through the Community Living Program, Frank's needs were met and he was diverted from the wait list.

A Grandmother's Story:

Ethel is a 79-year-old grandmother with advanced dementia who was being cared for by her grandson and his wife and three small children. Her grandson's wife called the Aging and Disability Resource Center requesting respite due to heavy caregiving responsibilities. After a thorough assessment, the Options Counselor and grandson's wife developed a care plan that more accurately addressed all aspects of the situation.

The grandson's wife had quit her job to care for Ethel which resulted in a loss of income that put added stress on the family. Ethel's condition is so far advanced that she requires 24-hour supervision. Her grandson is on the road for his job most of the week putting the bulk of the caregiving on his wife. The service of Structured Family Care was introduced to allow his wife to receive a stipend for caring for Ethel. This will, in turn, relieve stress on the family budget and allow her to pay out of pocket for respite when she needs a break or tend to other business. It will also make it possible for the grandson's wife to remain at home caring for her children, as well as his grandmother.

Ethel did come to funded service which allowed this family to remain together at home rather than place her in a long-term care facility which would have been more costly in so many ways.

Michael's Story:

Fifty-eight-year-old Michael lives alone and has no local informal supports. He is at risk physically from past stroke, emotionally from depression, educationally from inability to read and financially from poor financial literacy.

After a thorough in-home assessment, the Options Counselor and client established a care plan to address the areas of concern resulting in significant increase in independence and stability for the client. Interventions included: recommendations on alternative cleaning equipment that he could use even with impairments; connection with an occupational therapist to assist in finding new, efficient ways to compensate for physical limitations; connection to the local mental health center for therapy; case management services and financial coaching; and enrollment in a literacy program.

This assistance, made possible through the Community Living Program, will help to empower Michael and provide him with the tools and skills to be self-sufficient without coming to funded services.

Robert's Story:

Robert, a 67-year-old widower, was referred to the Aging and Disability Resource Center due to increased health problems and inability to take care of his personal needs. He had been hospitalized on two recent occasions due to heart issues. He was also having some financial troubles, as well as housing issues and had been issued an eviction notice for bedbug infestation.

The Options Counselor completed a face-to-face assessment and found that Robert needed alternative living arrangements and would be eligible for Medicaid services, but not necessarily a Medicaid Waiver. The Options Counselor initiated the Medicaid process and contacted a caregiver to follow up with the paperwork. She also contacted each eligible housing unit in the county and assisted Robert with completing applications for assistance. In the end, he secured housing with a family member and was approved for Medicaid so that he can receive assistance with personal care.

Prior to the Community Living Program, there would have been no way to assist this client because he didn't qualify for any of the programs. However, because of the CLP needs-based model, this gentleman was able to receive assistance with his actual needs through community and family resources which resulted in him being diverted from the wait list.

Karen's Story:

Sixty-three-year-old Karen was referred to the Aging and Disability Resource Center. She is obese and a brittle diabetic and suffers from painful osteoarthritis. She has difficulty getting in and out of a chair because of her arthritis. Karen did not want personal care assistance as she wants to remain as independent as possible in her own home. She does require some assistance with transfers.

After a complete assessment and determination of her needs, it was determined that Karen would benefit the most from the use of a lift chair. The Options Counselor was able to use local contacts and resources from the expanded resource database. It took several phone calls and several weeks, but the Options Counselor was able to provide Karen with a donated lift chair. Arrangements were also made to have the chair delivered. The client was very appreciative and happy that she will not need to depend on home care services at this time. All it took was a lift chair to meet her needs and improve the quality of her life.

Prior to the Community Living Program, Karen may have been placed on the wait list for services, possibly attendant care. She continues to receive home-delivered meals. However, because of the CLP needs-based model, community resources were tapped to assist Karen and she was diverted from the wait list.

The Story of Roger and Marsha:

Roger is 65 years old with a new cancer diagnosis. He and his 62-year-old overwhelmed wife Marsha phoned the Aging and Disability Resource Center seeking assistance with health insurance questions and options prompted by his cancer diagnosis. Roger had battled cancer a few years ago and was not satisfied with the care that he received through the Veterans Administration. This time, he wanted alternative health insurance that would expand his options for care and treatments.

An Options Counselor provided information and assistance, on the phone and in person, to help Roger enroll in Medicare and assisted him with applications for MSP and Extra Help which reduced his cost and gave him alternative health coverage. As a result, he now has choices and can focus his energies on fighting cancer. The Options Counselor also provided additional resources for this couple to consider that could also help with medical costs and relieve their stretched budget.

The Community Living Program made it possible to assist Roger and Marsha without adding him to the waitlist.

Rodney's Story:

Rodney is a 91 year old with congestive heart failure. He was originally assessed and approved for CHOICE funded services in May 2015 after his wife was admitted to a nursing facility. He received handy care person services, homemaking services, and home-delivered meals.

Rodney has a son who lives out of state, and he had not had a lot of contact with him over the years. Rodney had been independent his entire life and did not want to reach out for help; however, as his health continued to decline due to complications of congestive heart failure, he began to reach out to his son and other family members at the suggestion of his Case Manager.

His niece agreed to assist him with homemaking and meals, and his son was more than happy to help his father out and even planned to move in with him to help him with yard work and other needs.

Eventually, Rodney was receiving enough informal support through family members that he called his local Area Agency on Aging to inform them that his needs were being met and that he no longer wished to receive services. He was so appreciative of the services that had been provided to him, but was happy that he had reached out to family who were, now, able to meet all of his needs.

Rodney's CHOICE care plan was ended.

Stories and pictures provided by:



Area 1 Agency on Aging



Area 12 Agency on Aging



Area 14 Agency on Aging