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Marjo Madden (right) worked with Jennifer Dials, a registered nurse case manager with Interim HealthCare, after a recent hospitalization.

NO PLACE LIKE HOME

MANY OLDER AMERICANS ESCHEW THE IDEA OF MOVING INTO AN ASSISTED LIVING OR NURSING FACILITY. HOME HEALTH CARE CAN HELP RETIREES FULFILL THAT GOAL AT A REASONABLE PRICE.

BY KRISTIN CAMPBELL

Beginning in January 2011, the first baby boomers turned 65, ushering in a new era. Between 1946 and 1964, more than 76 million American children were born, and as that generation ages, experts anticipate it will have a major impact on our culture and our economy, particularly the health-care sector.

"WE LIKE TO GET OUR PATIENTS INVOLVED IN SURROUNDING CITY SENIOR-RECREATION CENTERS, AND OUR CAREGIVERS WILL TRANSPORT THEM TO THESE FOR A HALF A DAY OR SO TO ASSIST WITH SOCIAL INTERACTION," SAYS RUSS HUBER, PRINCIPAL OF THE POWELL OFFICE OF GRANNY NANNIES.

According to the U.S. Census Bureau, there had been about 37 million seniors (age 65 and older) before the first boomers passed that milestone. Since January, approximately 10,000 more Americans become senior citizens each day. By 2031, their numbers will almost double, and the country will have more than 70 million seniors among its ranks. At that point, roughly one in five Americans will be a senior citizen.

The booming boomer population gives rise to the issue of how these older Americans plan to live out their golden years. For many, remaining independent is the most important consideration. With the help of medical and technological advances, it's easier than ever for adults to remain in their own homes for life—or at the very least, for much longer than they did generations ago.

WHY HOME HEALTH CARE?

In situations where a person needs round-the-clock care or living alone is unsafe, moving into a nursing home or assisted living facility may be the best choice. But most people aren't in that boat. Many need only a little extra help.

Peter Ross, CEO of Senior Helpers, a Maryland-based franchising company, says home health-care services can help with the basic activities of daily living

and allow people to retain their independence for many additional years. "As we age, each of us has difficulty with some tasks, including eating, sleeping, toileting, or bathing and hygiene," he says. "In the past, when there were two of those activities a person couldn't do, it was a prescription for moving to an institution."

With home health care, trained individuals come into a client's home to help with tasks that have become difficult. Some companies provide non-medical assistance such as cooking, meal planning, housekeeping, and transportation to and from appointments or errands. Other companies employ licensed medical professionals who can provide specialized services including wound care, home infusions, catheter care and physical or speech therapy.

Lori Wengerd, owner of the Columbus branch of Home Care Assistance Inc., says home care is very flexible. Some patients might benefit from just an hour or two of assistance each week, while others may require much more attention. In any case, home care helps seniors remain in familiar surroundings.

"It allows them to stay in their own homes safely," Wengerd says. "They may be interdependent on their caregivers, but they are still making their own decisions about what to do when, and how to spend their days. We find that people who stay in their homes tend to thrive, in part because they are able to focus their energies on activities they enjoy."

Ross cited an AARP study in which seniors were surveyed about their living options. "Ninety-three percent said they wanted to stay home," he says. "It's not that facilities aren't good places, but people want to be in their comfort zones."

Russ Huber, principal of the Powell office of home health-care agency Granny Nannies, agrees. "Patients are in favor of staying in their own homes where they are comfortable with their surroundings and can keep their pets if they have them," he says.

While patients have fewer social opportunities at home than in an assisted living or nursing facility, that concern can be managed. "The biggest downside, in my opinion, is the lack of social interaction with other seniors," Huber says. "But we like to get our patients involved in surrounding city senior recreation centers, and our caregivers will transport them to these for a half a day or so to assist with social interaction."

A COST SAVINGS

Proponents say home care not only benefits patients and their families (who may be relieved of some care-giving responsibilities), but it also can be considerably cheaper than full-time care.

Senior Helpers clients pay \$20 an hour, Ross says, which adds up to about \$1,600 per month for 20 hours of personal, individualized care per week. Assisted living or nursing facilities may cost \$4,000 to \$6,000 per month—a significant difference. Debra Studer, chairwoman of the Ohio Council for Home Care and Hospice, says costs average about \$15,000 per year for in-home care, and can top \$60,000 for nursing home care.

Huber says home-based care is flexible not only for the patients, but also for family members who often help foot the bill. "If an out-of-town family member is coming to visit for a couple of weeks, you can simply suspend or reduce service for that time," he says. It's worth noting that if 24/7 care is required in a patient's home, costs will be similar to those of a facility, Huber says.

Some institutions work through the Medicare system and its related supplemental insurance policies. Run-of-the-mill health-care insurance generally does not cover home care, but more specialized insurance may. "We're seeing more people using long-term care insurance," Wengerd says. "Some people don't want it because they think they may not need it when they are older, but we have many patients who are glad they got it."

Patients who don't buy long-term care insurance or those whose income is limited can find help through local and county services. The Central Ohio Area Agency on Aging, for example, helps match seniors with home-care agencies, social workers, therapists and other professionals.

Just like seniors and their families, medical institutions also are taking note of the cost savings that can be realized through home health care. "Hospitals are being reimbursed less and less all the time," Studer says. "The hospital may only be reimbursed for a three-day stay, and if the patient needs more care, the hospital gets nothing." Moving a patient home to finish recuperating with the help of a visiting nurse can save all involved parties money and frustration.

North Columbus resident Marjo Madden was recently hospitalized for several conflicting health issues, chiefly

diabetes. When she returned home, she needed some help getting her condition under control so that she could rebuild her health and stamina. Madden went through eight sessions with home care professionals, who taught her about nutrition, food labels, smart shopping and menu planning. She says going through the process in her home was especially helpful—in contrast to dietary advice she had received in other locations.

“At home, I had no distractions,” Madden says. “Everything here is familiar to me, and we were able to go right to my cupboards and look at what should stay and what needed to go.” Madden says she sometimes feels a little unsteady on her feet, and navigating an unfamiliar place like a doctor’s office or dietitian’s clinic could keep a patient like herself from absorbing all of the information.

“It’s wonderful having them come to your home,” she says. “Here I was able to ask all the questions I might not have thought of had I been away.”

JOB GROWTH

Americans are living longer than ever before, thanks to advances in medicine and technology. Couple the normal processes of aging with the huge numbers of people who are reaching older adulthood right now, and it’s clear that the health-care industry is positioned for a huge boom.

Granny Nannies’ Huber says demand for employees in the home health-care

“WE FIND THAT PEOPLE WHO STAY IN THEIR HOMES TEND TO THRIVE, IN PART BECAUSE THEY ARE ABLE TO FOCUS THEIR ENERGIES ON ACTIVITIES THEY ENJOY,” SAYS LORI WENGERD, OWNER OF THE COLUMBUS BRANCH OF HOME CARE ASSISTANCE INC.

field will continue to blossom over the next 25 years. He says those who possess licensure as a state tested nursing assistant or certified nursing assistant will likely have ample opportunity for work.

Ross says Senior Helpers—ranked at No. 2,764 on the 2011 *Inc. 5000*—has grown to include 300 offices in the United States, Canada and Australia. The company employs 15,000 in the United States alone and was recently featured on “Fox & Friends” as one of the top five companies in the country in terms of hiring. He says 36,000 job applications have been received this year through the company website.

While there currently are plenty of people looking to get into the growing field, it’s uncertain whether the job market can maintain a steady supply of employees to fill what could amount to thousands of jobs in the coming years.

Fran Bäby, vice president of Interim HealthCare in Columbus, says baby boomers’ health concerns will affect all segments of the health-care industry. “I think it will impact everyone in health care, and will affect the availability of quality workers,” she says. “It is important for people to not only be technically competent, but to be compassionate, experienced and be able to look at the patient beyond the clinical aspects.” Employers say that compassion and love for the job are the factors that will keep people coming into the field—even though home health-care workers often make less than their counterparts who work in assisted living and nursing homes.

Studer, of the Ohio Council for Home Care and Hospice, says organizations that are paid through government funds are feeling the budget noose tightening. Like many agencies, home health-care companies were dealt cuts in state and other funding this year. The cuts were based on an increase the agencies received in 1998—the first raise that had been granted in 25 years, Studer says.

Industry officials are in the process of working out a more attractive wage scale by creating a rate-setting methodology that will encourage workers to get into the industry, increase their skills and training, and stay long term. “We’ve got to provide a career ladder for these individuals,” Studer says. She is optimistic that legislators will see the logic in moving toward home-based care and paying people well to provide that care. “They are beginning to see that these programs save the state money,” she says.

As it stands now, companies that

don’t deal with government funding sometimes have an advantage when it comes to the wages they can offer and the employees they attract. “In order to attract and retain the highest quality people, we pay well,” says Wengerd. “They are making more with us than they would anywhere else.” She says while company officials plan to maintain that edge, salary is *not* the deciding factor when it comes to keeping employees happy. As a potential shortage of workers looms, making employees feel valued may be the key for home care providers’ success.

“We work very hard at how we treat our caregivers,” Wengerd says. “They are a part of our team. They are professionals, and they appreciate it when the company respects them. When you find good people, you have to be the kind of company where they want to stay.”

Jennifer Dials is a registered nurse case manager with Interim HealthCare. Although she works with a number of patients, she says she values the opportunity to form personal relationships with each of them. Initial visits start off as all business, with an assessment of the patient in the form of a head-to-toe physical, and then an assessment of the environment, looking for fall risks and other hazards that could cause injury. Then the conversation and relationship-building begin.

“When you’re in someone’s home, they really open up and let you know what their needs are,” Dials says. “In a hospital, it’s not as personal. I really like the high quality of care we can provide for these people.” The relationships often become permanent fixtures in the lives of both the caregiver and the patient. “I meet my patients when I start their assessment, and I follow them all the way through,” Dials says.

Ross founded Senior Helpers in response to a lack of available resources during his mother’s illness. It was, and still is, very personal to him, and that philosophy extends out into the company. “We look at this as a mission—something we can do to make a difference in people’s lives,” he says. “We like to say that we’re not just caregivers. We’re life givers.”

Many patients build friendships with their caregivers that go well beyond professional bounds. “We have patients who’ve invited their caregivers along on family picnics and even vacations,” Ross says. “They truly become part of the family.” ◊

Kristin Campbell is a freelance writer.