



Home Health Services For Memory Disorders



Duke HomeCare & Hospice

Welcome

Duke HomeCare and Hospice thanks you for inviting us to be a part of your journey. Our goal is for this booklet to assist you, your family members, your caregivers, and your loved ones in discovering how to support and care for those with a memory disorder.

The booklet includes information about memory loss, helpful and practical caregiver tips, the benefits of home health support, and the roles of the home health team members.

To see if you are eligible for home health, please contact Duke HomeCare and Hospice at 800-599-9339.

You are not alone in this journey; we are here for you.

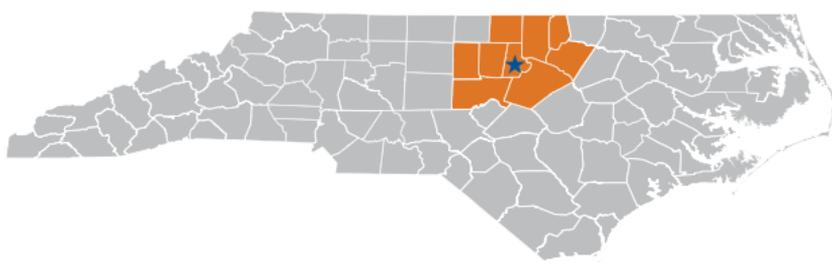


The hummingbird is a symbol of inspiration and hope. At Duke HomeCare and Hospice, we strive to provide this to our patients and families.



People with memory disorders like dementia or Alzheimer's may experience the following changes:

- Early memory loss may include personality changes, memory lapse, and safety concerns.
- The middle stage of memory loss may include an increased need for help with all activities. In this stage, patients often have vision problems. They stop driving and cooking and need more hands-on care.
- In the late stage, patients need much more assistance, including help with mobility.



A Wide Service Area

Duke HomeCare and Hospice provides services in all or part of Alamance, Chatham, Durham, Franklin, Granville, Orange, Person, Vance and Wake counties. Duke Home Infusion is available in North Carolina, South Carolina, and Virginia.

Who Are the Team Members From Duke HomeCare and Hospice?

Depending on your needs, your provider will order different services provided by members of the Duke HomeCare and Hospice team. This may include skilled nurse case manager, social work (MSW), physical therapy (PT), occupational therapy (OT), or speech therapy (ST).

Skilled Nurse Case Manager

What will the nurse check during these visits?

- How well your pain is managed
- How well you are eating and drinking
- Your safety
- Your medicines and how you are taking them
- How your skin looks and whether you have wound care needs

Your case manager will partner with you and your caregiver in:

- Planning your care to help you stay as independent as possible
- Making sure your plan of care is tailored to your needs
- Making sure you have the services you need (nurse aides, OT, PT, ST, SW)
- Making sure you know when to expect a team member to visit you

Social Work

The social worker will talk with you and your loved ones to find out what matters most to you. They may provide education on the care you may need as the dementia gets worse:

- **Bridge Program** is a referral program to help you and your family deal with life-limiting illness while you remain in the comfort of your home. Duke's Home Health Care members help you manage pain and other symptoms, create a plan for end-of-life care, and discuss your healthcare options.
- **Hospital-based and in-home palliative care** is care that focuses on pain and symptom relief to improve quality of life for people with serious illness. It may be provided at a healthcare facility or at home.
- **Hospice care** is care that focuses on comfort and dignity at the end of life. It may also be provided at home or at a healthcare facility.
- **Other long-term care options** may include memory care assisted living facilities, nursing homes, adult day programs, and programs of all-inclusive care for the elderly (PACE).



Your social worker may offer assistance with Advanced Care Planning (ACP), which is a process that helps you make decisions about what care you would like to receive in the future. Some examples of ACP include:

- The Conversation Project:
TheConversationProject.org
- Healthcare power of attorney
- Living will
- Alzheimer's specific living will (addendum or supplement): Dementia-Directive.org
- Durable power of attorney
- Medical Orders for Scope of Treatment (MOST) form
- Do-Not-Resuscitate order (DNR)

They may offer respite and ongoing support resources:

- Duke Dementia Family Support Program
- Alzheimer's Association Emergency Respite
- NC Lifespan Respite Program



Physical Therapy

Your physical therapist (PT) helps you maintain and improve your ability to get around both inside and outside of the home. They can help with things such as:

- Using walkers, canes, and other assistive devices
- Safety concerns inside and outside of the home
- Balance and preventing falls
- Educating family members and caregivers in ways to keep both the patient and caregiver safe
- Getting up and down from a bed, chair, car, and other surfaces

Use the camera on your iPhone or QR Code reader on your Android phone to access two short videos about finding and fixing some common tripping hazards around your home.



Occupational Therapy

Your occupational therapist (OT) can help identify ways for you to safely complete everyday tasks. Your OT may provide the following:

- Caregiver education and training (fall prevention, safety during activity)
- Therapeutic activity (gardening, crafts, baking, painting pictures)
- Cognitive re-training for everyday activities, which may include learning simple strategies to help keep you focused on tasks
- Activities of daily living training (for both patient and caregiver) which may include dressing, bathing, eating, grooming, or meal prep
- Check your home for safety and make suggestions to you or your caregiver to increase the safety of your home (such as adding grab bars in the bathroom, removing rugs, or moving furniture to make it easier to walk to the bathroom)
- Help you choose the right memory aids (such as calendars, pill boxes, or daily schedules)
- Physical exercise (such as walking around the block or doing a few simple yoga poses to help with your strength, muscle control, balance, and safety)

Speech Therapy

Speech Language Pathologists (SLP), also called speech therapists, work on more than your speech. They work to help you maintain your quality of life, communicate with your caregivers, and stay as safe and independent as possible.

SLPs can help you in the following ways:

- When you have trouble talking or communicating
 - Aphasia (when you have trouble talking, reading, or writing)
 - Dysarthria (when you have problems with the muscles that help you talk)
 - General weakness
- Develop verbal and nonverbal systems for communication
- Educate in using oral motor exercises, breathing exercises, and compensatory strategies
- Promoting thinking and learning skills
 - Develop programs with structured memory tasks, problem solving, reasoning, visual and auditory aids, calendars, and family education.
- Swallowing and eating
 - They will work with you to choose a diet
 - Teach you how to swallow safely
 - Practice swallowing exercises



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