



"Planning now, for peace of mind later."

Senior Care Management, Inc.
& Care Consultants

Navigating Medical Management

Lina Supnet-Zapata MBA, CMC, TxCG

www.mircareconsultants.com



Why do Medical Crisis Occur?

- Not Being Prepared
- Inappropriate Medication Management
- Hospital Discharge
- Denial
- Sibling or family dynamics blended family
- Relying on non-professional
- BUSY
- Stubborn Parents
- Lack of knowledge on parent's health information and health history
- I can do it on my own
-



Being a Great Advocate for Your Aging Loved One

ADVOCACY

Are the things that you do to ensure that your loved one receives the best of care and services from the entire care team that you have in place. You are their voice.



Foundation for Being a Good Advocate

- ▶ **Establish a Care Team**
- ▶ **Get Organized**
- ▶ **Know what they want**
- ▶ **Take Care of Legalities**
- ▶ **Observe and Question**
- ▶ **Communicate**
- ▶ **Trust Yourself**
- ▶ **Practice Self Care**



Medical Issues

Not Being Prepared

Appropriate Medication
Management

Preparing for
Hospital Discharge



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SCENARIO 1

A parent needs to go to the hospital for a emergency situation.

What do you need?

THE BOOK

- ▶ Legal Documents
- ▶ Financial and Medical Power of Attorney
- ▶ Directives
- ▶ Directive to Physician DNR
- ▶ Insurance Cards, Identification Card, Social Security, Prescription Card, Military ID
- ▶ Medication Lists Most recent
- ▶ Provider Information
- ▶ Family Contacts
- ▶ HIPPA Release
- ▶ Life Insurance Policies Long Term Care Policy
- ▶ Final Arrangements
- ▶ Important Numbers
- ▶ Pharmacy



WHAT IS A DNR?

The Out-of-Hospital Do-Not-Resuscitate State of Texas logo

Keep your signed, original form in a place where emergency medical professionals can find it.

If it is not accessible CPR will be administered



A person wearing a maroon uniform is holding a black duffel bag with both hands. The bag has a handle and a shoulder strap. The background is a blurred outdoor setting with a building and a sidewalk.

BE PREPARED FOR SUDDEN HOSPITAL TRIPS

The Book
Copies of key paperwork
Vital Statistics
Medication List
Insurance Card

FOR YOU

Important phone numbers
Reading Glasses
Extra Phone Chargers
Small change and bills
Ear Plugs and Eye Masks
Reading material and other items
Pen and notepad



Scenario #2

Mom has 4 doctors
They all prescribe different
medications

Effective Medication
Management



POLYPHARMACY

The concurrent use of multiple medications by a patient to treat usually coexisting conditions and which may result in adverse drug interactions



ROLE OF PATIENT AND CAREGIVERS IN MANAGING POLYPHARMACY

- **KEY QUESTIONS**

- What is the indication for the medication?
- What is the name, color, shape, and routine of administration?
- Who prescribed the medication?
- When will the medication start working?
- What should be monitored when the medication is used?
- What medications, nonprescription medications, vitamins, or herbals should be avoided while using this medication?



STATISTICS

- Older adults (65 years or older) visit emergency departments almost 450,000 times each year, more than twice as often as younger persons.
- Adverse drug events cause approximately 1.3 million emergency department visits each year.
- About 350,000 patients each year need to be hospitalized for further treatment after emergency visits for adverse drug events.
- Source: CDC www.cdc.org

GATHER AND ORGANIZE

Gather all medications, vitamins, OTC meds, and supplements into one location

To stay organized and increase medication safety, keep all their current pill bottles and packages in a clear plastic storage bin

Use a separate bin for their backup medication supply or medicines that are only used occasionally.



MEDICATION TRACKING LIST

My Personal Medication Record		AARP
My Personal Information		How to Use This Guide <ul style="list-style-type: none"> • Save this document to your PC. • Edit the copy on your PC to keep track of your medications (including prescription drugs, over-the-counter drugs, herbal supplements, and vitamins.) • Share the information with your doctors and pharmacists at all visits. • Keep a printed copy always with you. <p><i>You should review this record <u>when</u></i></p> <ul style="list-style-type: none"> • Starting or stopping a new medicine. • Changing a dose. • Visiting your doctor <p>Last Updated:</p>
Name		
Date of Birth		
Phone Number		
Emergency Contact		
Name		
Relationship		
Phone Number		
Primary Care Physician		
Name		
Phone Number		
Pharmacy/Drugstore		
Pharmacist		
Phone Number		
Other Physicians		My Allergies
Name of Physician		
Specialty		
Phone Number		
Name of Physician		My Medical Conditions
Specialty		
Phone Number		
Name of Physician		
Specialty		
Phone Number		

	What I'm taking	Form (pill, injection, liquid, patch, etc.)	Dosage	How Much and When	Use (regularly or occasionally)	Start/Stop Dates (1/5/05 - 3/5/05) (1/5/05 - ongoing)	Notes, Directions, Reasons for Use
* Be sure to include ALL prescription drugs over-the-counter drugs, vitamins, and herbal supplements.							
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

CREATE AND MAINTAIN UP TO DATE MED LIST

SOURCE AARP www.aarp.org

Good Medication Management

- ▶ Invest in a pillbox or dispenser
- ▶ Set reminders
- ▶ use a single pharmacy
- ▶ Store your medications properly and take them as recommended (AM vs. PM)
- ▶ Review your medications with your doctor regularly



MEDICATION MANAGEMENT SYSTEMS

MEDICATION MANAGEMENT SYSTEMS

- ▶ Automatic Pill Dispensers (HERO)
- ▶ Pill Pak (AMAZON)
- ▶ Blister Packs (PHARMACY)
- ▶ Plastic Medication Pill Organizer (DRUG STORE, AMAZON)





SCENARIO #3

DISCHARGE PLANNING

Dad/Mom is
being discharged

What do I do?



The best time to start planning for discharge is just after your family member is admitted.

While it may seem too soon to think about going home, planning gives you more time to prepare.



PLANNING THE DISCHARGE

Know Who Is on the Discharge Team

GETTING READY TO GO HOME

Equipment and Supplies

Home Space

Health Care Tasks

Special Foods or Dietary Changes

Medication Management

Follow Up Appointments

Name: _____
Reason for admission: _____

During your stay, your doctor and the staff will work with you to plan for your discharge. You and your caregiver (a family member or friend who may be helping you) are important members of the planning team. You and your caregiver can use this checklist to prepare for your discharge.

Instructions:

- Use this checklist early and often during your stay.
- Talk to your doctor and the staff (like a discharge planner, social worker, or nurse) about the items on this checklist.
- Check the box next to each item when you and your caregiver complete it. ☒
- Use the notes column to write down important information (like names and phone numbers).
- Skip any items that don't apply to you.

Action items	Notes
Care after discharge	
<input type="checkbox"/> Ask where you'll get care after you're discharged. Do you have options (like home health care)? Tell the staff what you prefer.	
<input type="checkbox"/> If a caregiver will be helping you after discharge, write down their name and phone number.	
Your health	
<input type="checkbox"/> Ask the staff about your health condition and what you can do to get better.	
<input type="checkbox"/> Ask about problems to watch for and what to do about them. Write down a name and phone number of a person to call if you have problems.	

2

Action items	Notes
<input type="checkbox"/> Use "My drug list" on page 5 to write down your prescription drugs, over-the-counter drugs, vitamins, and herbal supplements.	
<input type="checkbox"/> Review the list with the staff.	
<input type="checkbox"/> Tell the staff what drugs, vitamins, or supplements you took before you were admitted. Ask if you should still take these after you leave.	
<input type="checkbox"/> Write down a name and phone number of a person to call if you have questions.	
Recovery & support	
<input type="checkbox"/> Ask if you'll need medical equipment (like a walker). Who will arrange for this? Write down a name and phone number of a person you can call if you have questions about equipment.	
<input type="checkbox"/> Ask if you're ready to do the activities below. Circle the ones you need help with, and tell the staff:	
• Bathing, dressing, using the bathroom, climbing stairs	
• Cooking, food shopping, house cleaning, paying bills	
• Getting to doctors' appointments, picking up prescription drugs	
<input type="checkbox"/> Have support in place that can help you. See "Resources" on page 6 for more information.	
<input type="checkbox"/> Ask the staff to show you and your caregiver any other tasks that require special skills (like changing a bandage or giving a shot). Then, show them you can do these tasks. Write down a name and phone number of a person you can call if you need help.	
<input type="checkbox"/> Talk to a social worker if you're concerned about how you and your family are coping with your illness. Write down information about support groups and other resources.	
<input type="checkbox"/> Talk to a social worker or your health plan if you have questions about what your insurance will cover	

Action items	Notes
<input type="checkbox"/> Ask for written discharge instructions (that you can read and understand) and a summary of your current health status. Bring this information and your completed "My drug list" to your follow-up appointments.	
<input type="checkbox"/> Use "My appointments" on page 5 to write down upcoming appointments and tests.	
For the caregiver	
<input type="checkbox"/> Write down and discuss with staff any questions you have about the items on this checklist or on the discharge instructions.	
<input type="checkbox"/> Can you give the patient the help he or she needs?	
<input type="checkbox"/> What tasks do you need help with?	
<input type="checkbox"/> Do you need any education or training?	
<input type="checkbox"/> Talk to the staff about getting the help you need before discharge.	
<input type="checkbox"/> Write down a name and phone number of a person you can call if you have questions.	
<input type="checkbox"/> Get prescriptions and any special diet instructions early, so you won't have to make extra trips after discharge.	
More information for people with Medicare	
<p>If you need help choosing a home health agency or nursing home:</p> <ul style="list-style-type: none"> • Talk to the staff. • Visit Medicare.gov to compare the quality of home health agencies, nursing homes, dialysis facilities, inpatient rehabilitation facilities, and hospitals in your area. • Call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048. <p>If you think you're being asked to leave a hospital or other health care setting (discharged) too soon: You may have the right to ask for a review of the discharge decision by the Beneficiary and Family Centered Care Quality Improvement Organization (BFCC-QIO) before you leave. A BFCC-QIO is a type of quality improvement organization (a group of doctors and other health care experts under contract with Medicare) that reviews complaints and quality of care for people with Medicare. To get the phone number for your BFCC-QIO, visit Medicare.gov/contacts, or call 1-800-MEDICARE. You can also ask the staff for this information. If you're in a hospital, the staff should give you a notice called "Important Message from Medicare", which contains</p>	

[HTTPS://WWW.MEDICARE.GOV/PUBS/PDF/11376-DISCHARGE-PLANNING-CHECKLIST.PDF](https://www.medicare.gov/pubs/pdf/11376-DISCHARGE-PLANNING-CHECKLIST.PDF)

www.aginglifecare.org

AGING (i)fe CARE®
A S S O C I A T I O N

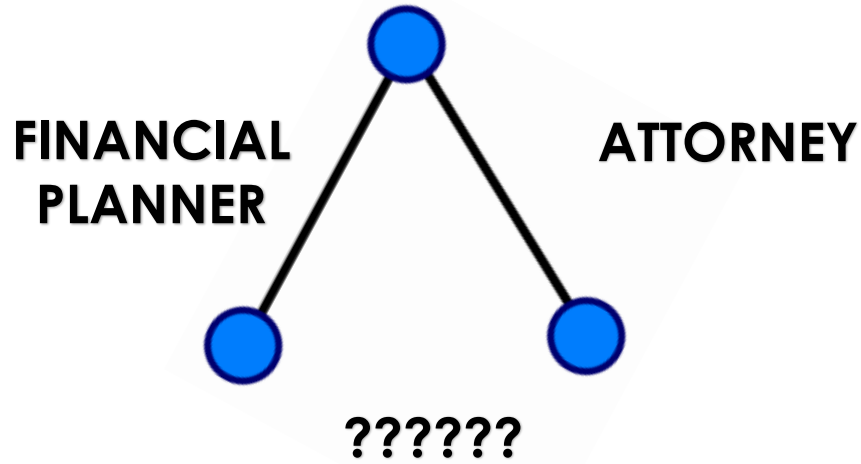
The experts in aging well.



"Planning now, for peace of mind later."

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- ▶ Personalized and compassionate service—focusing on the individual's goals and needs.
- ▶ Advocacy—communication can be coordinated between family members, doctors, and other professionals service providers.
- ▶ Cost containment—can avoid inappropriate placements, duplication of services, and unnecessary hospitalizations.
- ▶ Quality control—services follow ALCA's Code of Ethics and Standards of Practice.



ATTORNEY LEGAL ISSUES

FINANCIAL PLANNER –MONEY MATTERS



AGING LIFE CARE MANAGERS ARE EXPERTS IN AGING ISSUES



AGING **(i)fe** CARE[®]
ASSOCIATION

The experts in aging well.



CERTIFYING
AND
LICENSING BODIES

AGING LIFE CARE
MANAGERS ARE EXPERTS IN
AGING ISSUES

ALCA
8
knowledge
areas



Care Management Support in the time of COVID 19 and other disasters

Professional Support

Safety Assessment and
Planning Guidelines

Develops a Corona Virus plan

Advocacy for ward/client in
clinical setting

Liaison with guardian, family,
medical, facility staff

Crisis intervention, help to
admit to higher level of care

Advanced Directive Assessment and Planning

Ensure PPE and infection
control measures in place

Environmental Assessment
(Medications and monitoring)

Isolation preparation plan

Ongoing assessment of
available providers, respite,
long term stay resources

Safety training and instruction for
care

Coordinates Care

Assist with monitoring of all
federal and infection control
guidelines

Facilitate hospital or rehab
discharge planning

Initiate, implement and
coordinate in home support
services home health

Provide support for end of life
care

Helps if new problems
arise (caregiver/spouse)
becomes ill



AGING LIFE CARE MANAGERS ARE AIR TRAFFIC CONTROL FOR NAVIGATING HEALTHCARE

Resources

The agencies listed here have information on community services, (like home-delivered meals and rides to appointments). You can also get help making long-term care decisions. Ask the staff in your health care setting for more information.



Area Agencies on Aging (AAAs) and Aging and Disability Resource Centers (ADRCs):

Helps older adults, people with disabilities, and their caregivers. To find the AAA or ADRC in your area, visit the Eldercare Locator at eldercare.acl.gov, or call 1-800-677-1116.

Medicare: Provides information and support to caregivers and people with Medicare. Visit Medicare.gov.

Long-Term Care (LTC) Ombudsman Program: Advocates for and promotes the rights of residents in LTC facilities. Visit ltcombudsman.org.

Senior Medicare Patrol (SMP) Programs: Works with seniors to protect themselves from the economic and health-related consequences of Medicare and Medicaid fraud, error, and abuse. To find a local SMP program, visit smpresource.org.

Centers for Independent Living (CILs): Helps people with disabilities live independently. For a state-by-state directory of CILs, visit ilru.org/html/publications/directory/index.html.

State Technology Assistance Project: Has information on medical equipment and other assistive technology. Visit resna.org, or call 1-703-524-6686 to get the contact information in your state.

National Long-Term Care Clearinghouse: Provides information and resources to plan for your long-term care needs. Visit longtermcare.gov.

National Council on Aging: Provides information about programs that help pay for prescription drugs, utility bills, meals, health care, and more. Visit benefitscheckup.org.

State Health Insurance Assistance Programs (SHIPs): Offer counseling on health insurance and programs for people with limited income. Also help with claims, billing, and appeals. Visit shiptacenter.org, or call 1-800-MEDICARE (1-800-633-4227) to get your SHIP's phone number. TTY users can call 1-877-486-2048.

Medicaid: Helps with medical costs for some people with limited income and resources. To find your local office, visit Medicare.gov/contacts, or call 1-800-MEDICARE.





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QUESTIONS