**What’s Next, Alternatives**

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| **Alternative** | **Pros** | **Cons** | **Comments** |
| 1. Stay at home in a house | 1. Individual stays in familiar surroundings. 2. Doesn’t have to move | 1. Existing home may eventually require modifications- stairs, doorways, showers 2. Ind. still has to contend with house maintenance 3. Health care will rely on visiting staff 4. As ind. ages, may lose friends and neighbors creating isolation |  |
| 1. Stay at home in an apartment | Ditto #1 | 1. Health care will rely on visiting staff 2. As ind. ages, may lose friends and neighbors creating isolation | Note: for both #1 and #2, having someone move in to provide care could take care of some issues. |
| 1. Move in with someone, a sibling, child | 1. Could lessen costs 2. Ind. has someone who would look after her | #1 a and c would still apply. |  |
| 1. Stay at home but live in a  “connected community”, like the one in Bethesda MD. Neighbors help each other: bmavillage.org | 1. Creates a support community, for basic things like getting to the Dr. etc. 2. The community lessens the possible isolation | All the cons of #1 still apply, except isolation is mitigated. |  |
| 1. Move into an age 55+ community | 1. Socialization with multiple activities organized. 2. No longer responsible for outdoor maintenance | 1. Most such communities do not have medical facilities 2. May need to move again if health concerns mount |  |
| 1. Move into a Continuing Care Retirement Community   (“CCRC”). Such Communities proved a full spectrum of living modes:   * Independent living * Assisted living * Memory care * Rehab& skilled nursing   Usually have healthcare facilities on campus | 1. Not responsible for outdoor maintenance 2. Facilities are usually designed with elderly issues addressed (showers, etc). 3. Community activities to keep ind. engaged 4. Facilities provide a continuum of medical care 5. Offers meal plans 6. Flexibility for spouse with different medical and care needs | 1. Some people may not be able to afford them 2. May not have as many activities as age 55+ communities 3. Have to apply and get accepted while “healthy” 4. May have to be on a waiting list of several years | 1. Ind. must assess the various financial models (for profit, not for profit), the initial purchase price and whether the money reverts to family or not, etc. 2. Check the following:   1. caring.com/senior-living/continuing-care-retirement-communities/  Or  2. https://www.familyassets.com/continuing-care-retirement-communities/   1. Check out “Retirement Communities 101, by Dana Bodney, to understand & research CCRC’s |
| 1. Assisted Living   Assumes that you need assistance with daily living. “A nursing home” |  |  |  |
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