**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
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| 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
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| 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/Or2. https://www.familyassets.com/continuing-care-retirement-communities/1. Check out “Retirement Communities 101, by Dana Bodney, to understand & research CCRC’s
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| 1. Assisted Living

Assumes that you need assistance with daily living. “A nursing home” |  |  |  |
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