

# HOW TO INTERVIEW AN AGENCY FOR HOME HEALTH CARE:

by Marianne Troy

1. Call at Least 3 different agencies. Follow your instincts regarding which ones you want to go into detail with - you will know.

2. Know what you want before you call. You can use the following list as a guideline:

A. Ask if they have personnel trained and experienced in care of dementia/Alzheimer patients. If you like/trust their answer, then go on.

B. Ask if they are licensed in Florida. Are their caregivers Licensed and Bonded? If the answers are "Yes," by law they have to screen each employee for felonies and abuse records (This does not always tell the whole story.) Ask if they drug-test their people and how often.

C. Decide if you want/need COMPANION level care:

1) Companions cannot do "hands-on" care, e.g. bathing, incontinence.

They can ASSIST in easy transfers.

2) Companions are best used for companionship, outings, stimulation, light cleaning, cooking, shopping.

3) If a Companion Agency only, there is no RN supervision required by State law. Therefore, medication needs can not be addressed. If you choose a "full service" agency, you will have an RN responsible for Companion care and medication needs can be addressed.

D. Decide if you want/need HOME HEALTH AIDE level care:

1) Home Health Aides may also be CNAs (Certified Nurses Aide). They are trained for "hand's on" care. They are supervised by an R.N. who oversees the care of your family member. They have specific things they cannot do regarding medications, enemas, cutting toenails, etc. These are State guidelines and for the safety of your loved one.

2) If your family member is incontinent or needs help with bathing, this level is very appropriate.

E. Decide if you want/need LICENSED PRACTICAL NURSE (LPN) or a REGISTERED NURSE (R.N.)

1) Sometimes your insurance may demand this SKILLED CARE, but make sure you know that you qualify for it before you start. It will take your Doctor's order.

2) LPN's and RN's can follow Doctor's orders regarding medication administration and complicated nursing care, e.g. wounds/dressing changes, specialized orders regarding meds and treatments, etc. The Director of Nurses still is responsible for Nursing Care given.

F. Does the agency have a minimum number of hours per day? (Usually a 4 hr. minimum sometimes an 8 hr minimum). Minimum number of hours per week?

G. Does the agency have a BATH VISIT charge? How long do the aides stay? (Usually 1 ½ hour max) Cost? Clarify if aide will stay whole 1 ½ hour and clean up bathroom, bedroom, etc. THEY SHOULD. If still time they can do other tasks needed, e.g. put in a load of wash, check clothing in closet for cleanliness, make breakfast or lunch or visit with family member. GET YOUR MONEY'S WORTH and get an aide who would see these things to be done on her/his own.

H. CAN YOU COUNT ON HAVING THE SAME AIDE IF YOU LIKE HER/HIM? INSIST ON IT UP FRONT. Because people are people and things happen, you would be best served to start out with 2 aides rotating days until you see which one is best. Then you have already trained a back up which you will most certainly need for one reason or another. If you have gotten to this point successfully, now it is time to set up an appointment to meet the Administrator, Director of Nurses and or Nurse Case Manager and Scheduler. You can tell them it is to meet them and get a copy of their contract for signing. It is best not to sign contracts until you have interviewed more than one Agency. They may allow you to take contract home "for your attorney" to see.

I. In the above meeting, ask to interview three candidates before you start. Tell them your cultural preferences - language skills - accents a problem? Personality type and body size preferences - male or female? Have them come to your home with your family member present if possible. You can learn a lot about them up front – are they on time, appearance, language skills, rapport with your family member – rapport with you. Ask them their experience with dementia patients – their understanding of the disease – are they good at re-directing? Can they cook? Etc.

J. PRICING QUESTIONS:

1) Clarify hourly rate and any differentials for evening and or night hours and on weekends.

2) Do they charge for travel time?

3) Do they charge time and half for Holiday? What are their Holidays? Do they go from Midnight to Midnight?

### 3. HELPFUL HINTS:

A. Know that YOU ARE IN CHARGE OF ALL TRANSACTIONS - YOU ARE HIRING THEM - YOU CAN FIRE THEM. THEY WANT YOUR BUSINESS (especially AFTER high season!)

B. Get to know the Director of Nurses (DON) and/or Nurse Case Manager, the Scheduler(s), and Billing Person. These are the KEY PEOPLE for most all your concerns.

C. KEEP RECORDS (on your calendar) of name of Caregiver who worked and actual time in and out. Some agencies have their employee leave you a copy of their time slip after you sign it. YOU HAVE A RIGHT TO THE WEEKLY/MONTHLY SCHEDULE. In any event - if a billing mistake is made, adjust your payment so that it is correct and mail it back with a note giving specifics and let them follow up. DO CHECK THEIR BILLS CLOSELY.. it's a stressful business with lots of interruptions .. Mistakes happen.

D. INSURANCE – IF THE Agency is helping you fill out paper work do keep on them. Know that NURSES NOTES are a key factor in getting coverage paid. Find out the name of the person working on it and touch base often.

E. REPORT PROBLEMS IMMEDIATELY if Caregiver doesn't work out for ANY reason and there are a lot of good reasons you may need a change in Caregiver (for your sake as well as for your family member's sake).

F. DO NOT PUT UP WITH "TEACHING A PARADE." Substitutions will be necessary until you get to know the Scheduler and you KNOW she understands your criteria. You can request changes or substitutions be okayed with you first. (It probably won't happen 100% of the time, but you will make your point.)

G. Know that THE FIRST THREE WEEKS ARE THE HARDEST! If you have a good agency that listens and communicates with you, IT WILL SMOOTH OUT! Everyone is adjusting, especially you.

H. BE AWARE OF YOUR VALUABLES - HOUSEHOLD AND JEWELRY. Remove all very expensive jewelry - to protect yourself and the Caregiver. Dementia patients do hide, move and give things away.

I. NEVER PAY CAREGIVERS DIRECTLY - OR GIVE TIPS. At the end of the job - if you want - you can send a check or gift to them in care of the Agency. A

NOTE OF APPRECIATION NAMING EXCEPTIONAL CAREGIVERS IS THE BEST IDEA. This helps the Caregiver get recognition from her Agency and hopefully raises. It definitely boosts self-esteem.

J. BABY MONITOR (a receiver in loved one's room to pick up conversation, breathing, etc) CAN BE USEFUL TO HELP MONITOR CARE BEING GIVEN – ESPECIALLY IF YOU HAVE ANY DOUBTS.

K. Don't be afraid of telling your agency that you are GOING TO INTERVIEW ANOTHER AGENCY IF YOUR NEEDS AREN'T BEING MET. They may try harder. But, do follow through and be ready to move if they can't change for the better.

L. If you have a good agency and a good Caregiver, KEEP THEM ENLISTED.. Even if you have to cut down to a very few hours per week. You run the risk of losing your "regular" person, but you'll get a chance to get a good new one willing to be part time. You may need them if you get sick and it is a BLESSING FOR YOU AND YOUR SPOUSE to have a 'FAIL-SAFE" until your Emergency Plan kicks in.

BE AWARE - SAY WHAT YOU DON'T LIKE OR DON'T WANT AND EXPECT THE BEST!

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