As Alzheimer's disease progresses, the issue of long term care (for example, in-home care, residential care or skilled nursing care) arises, and there is confusion as to what the various terms mean. The following definitions provide assistance in making informed decisions regarding care. Please keep in mind that not every person with dementia will need all of the levels of care.

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**Respite Care**
Caring for a person with Alzheimer’s disease can be overwhelming at times. That's why it's important to take an occasional break, or **respite**, from caregiving; whether it's for a few hours, a few days, or longer. With intermittent relief, one may be able to care for the person with Alzheimer’s disease at home longer than would otherwise be possible.

**Home Care**
Visiting nurses, home health aides, homemakers and paid companions can provide services ranging from health care to assistance with activities of daily living (ADLs) such as bathing, dressing, grooming, and toileting. They can also provide services such as shopping, cooking and light housekeeping. Their assistance can significantly ease the burden of caregiving.

When selecting home care, keep in mind that the helper must understand the nature of the person's disability and be trained in working with that type of disability. You may have to do some of that training yourself. Be aware that financial assistance for in-home care is very limited.

**Adult Day Care, Social Models**
Social models of adult day care centers offer supervised social and educational activities, such as exercise programs, special events, nutrition, music, art, guest speakers, and family counseling. They are licensed by the State of California Department of Social Services Community Care Licensing.

**Adult Day Health Care Centers, Health Care Models**
These centers offer the same programs as the social model centers, with the addition of comprehensive medical treatment such as nursing and social services, recreation services, physical or occupational therapy or other rehabilitation services. They are licensed by the State of California Health Services, and are reimbursable by MediCal.
**Short-term Residential Care**
Some residential care facilities may offer a short-term stay of a few days to a few weeks. Such stays give families a chance to take a vacation (or respite), at home or away.

A short-term stay can sometimes be disorienting to people with Alzheimer’s disease. However, once they are in a program geared to their needs, the benefits of mental and physical stimulation may well outweigh the drawbacks.

Medical documentation and completion of registration applications are required in advance of the stay.

**Long-term residential care**
Many people are reluctant to give up the care of a loved one with AD, even when that care has become a severe burden. However, the time may come when the person with Alzheimer’s disease can no longer live at home, and it may be necessary to make other living arrangements. While placing a family member in a nursing home or other long-term facility is a difficult choice, at some point it may be the most responsible decision you can make.

The following list includes several different types of long-term residential care possibilities for seniors:

**Active Retirement Community**
Active retirement communities provide a residential environment typical in nature to conventional housing tracts. They are generally focused around an exterior amenity (e.g. golf course, community clubhouse, etc.). Housing types include single-family dwellings, town-homes, and other attached housing. In-home care or assistance is not provided by the community, but may be arranged for by the residents or their family members independently.

**Independent Living Units**
This category consists of senior apartments or attached housing around a community atmosphere or a community building. Services may include security and activities. (Independent living units may be included in a CCRC, see below.) Residents are generally very active and independent. Again, the community does not provide in-home assistance.

**Congregate Housing (sometimes called independent living)**
Congregate housing provides small apartments with kitchens and the option of congregate dining, planned activities, security, emergency monitoring, and housekeeping services. Kitchens are included in the units as a marketing feature, and are not necessarily extensively used by residents. Meals are offered as part of the service package. No health care or assisted living is provided. Wellness programs may be offered.
Residential Care Facility for the Elderly
These are referred to as assisted living, personal care, or board and care facilities. They are licensed by the California State Department of Social Services. Services offered include congregate meals, assistance with one or more activities of daily living, housekeeping services, transportation to and from doctor’s appointments, field trips or community activities, security, and emergency monitoring.

Basic service packages differ so much from facility to facility that cost comparisons can be difficult. Questions must be asked as to what is included in the basic package and what will generate additional costs. Incontinence care, assistance to and from the dining room, special exercises, and special diets are some of the services that may not be included in the basic package.

Assisted living facilities may be licensed for both ambulatory and non-ambulatory residents. Medical services are not provided, but the staff may include a health professional.

Skilled Nursing Facility
Skilled nursing facilities are licensed by the California Department of Public Health to provide health care services for extremely frail and/or severely cognitively impaired residents. Acute care and short-term geropsychiatric care services are not provided.

Skilled nursing facilities provide an intermediate or skilled nursing setting for those who require more care. Though the term "nursing home" has been much maligned, many offer good care, and some specialize in the care of persons with dementia.

Continuing Care Retirement Community (CCRC)
A Continuing Care Retirement Community is designed to provide several levels of care on one campus, to allow residents to age in one place; they can move from independent living to assisted living to skilled nursing units in one location. Some CCRCs require the residents to “buy-in” at the independent living level, in which case they may be guaranteed life-long care. Basic service packages differ greatly; care must be taken to note what is included and what is not.

Reviewed AlzOC January 2016