## Care Services



## CONTINUUM LIFEPLAN: WHAT MY PATIENT ADVOCATE SHOULD KNOW

- · Initial assessment of current care needs in clients' residential setting
- · Assessment and personalized care plan creation
- · Access to online centralized medical information and care plan
- Access to care coordination team including registered nurse/geriatric consultant at an hourly rate as the need may arise



## ANNUAL REVIEW OF THE CONTINUUM LIFEPLAN

- Assess for optimal care services based on health fluctuations as evidenced by physician care, hospitalizations, alternate residential care settings, rehabilitation, altered mental status, altered mobility, medication changes, or other pertinent issues
- · Reassess and update the care plan to meet current healthcare needs



## **CARE MANAGEMENT**

Customized navigation of care needs and advocacy to improve quality of life of the individual or couple in the home or senior living community.

- · Care plan implementation
- · Arrange and monitor home health or facility services
- · Coordinate medical appointments and self-care appointments
- Routine wellness checks with client's needs assessed by a Care Coordinator
- · Review financial, legal, or medical issues and arrange referrals as needed
- · Attend doctor appointments as requested and advocate for the client
- Act as a liaison for patient advocates needing additional support, monitoring, and oversight
- Assist with moving a client to and from a senior living community or care facility
- Hospital visits to assist in discharge planning and necessary rehab services

All services billed at an hourly rate.

Quarterly or Monthly Oversight plans may be available upon request.

NOTE: It is the client's responsibility to make known any pertinent healthcare changes. The care plan will be updated on behalf of the client. A printed copy available upon request.

