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**Mary Beth Faller, Writer**

Heather Frenette often plays the bad guy.

She's in the middle of many a family dispute as siblings try to arrange care for their aging parents. Frenette is counselor and referee, paid to find the best solution for all involved.

Frenette's official title is geriatric-care manager, a job necessitated by Boomers who want the best for parents who no longer can take care of themselves. She is the impartial third party in determining the best course of action.

"I have no emotional relationship with that person (who needs care), so I can tell you this is what needs to be done now and in the future," said Frenette, a registered nurse and chief operating officer of Arizona Care Management in Tempe.

Care managers come from various backgrounds -- social work, nursing, counseling, law. Some are affiliated with institutions, such as nursing homes, and some are independent.

Barbara Applegate, a principal in A.G.E. Consultants in Phoenix, cared for both her parents before they died.

"Families know that we've walked the walk," she said. "We have great empathy for them."

Frenette also knows what it's like; her mother has Alzheimer's disease.

"I know what it's like to have a parent who doesn't recognize you anymore," she said.

### **Aging population**

In 2005, about 7.3 percent of the U.S. population was ages 70 to 84. That number will increase to 10.3 percent in 2025, according to Caregiving in America, a 2006 report from the International Longevity Center, a division of Columbia University. Other points in the report:

- \* Currently, more than 6 million people older than 65 need some kind of long-term care.
- \* Only about 20 percent of that population lives in a nursing home, with the rest in their own home, caregiver's home or some sort of assisted-living facility.
- \* Half of all caregivers contribute financially to the care of their recipients, averaging about \$200 a month.

\* Disruptions due to caregiving responsibilities cost U.S. employers more than \$33 billion a year, with 57 percent of caregivers reporting that they must come in late or leave early. Half of caregivers report that they must cut back time for other family members and friends, and give up leisure time, hobbies and vacations.

### **Manager's job**

Care managers often hear first from a spouse or adult child of an elderly person. Sometimes, Frenette said, she hears from extended-family members, neighbors or clergy. Applegate receives many referrals from neurologists.

Managers assess the situation, talking with family members and their older loved one. It can be an informal conversation at first, especially if the elderly person is resistant to the idea.

"Their biggest fear is, 'They'll take me out of my home, stick me in a nursing home and take away my independence,'" Frenette said. "A professional knows how to do that initial assessment in a non-threatening way. They know what the coping mechanisms are for people with memory problems."

The care manager will create a care plan based on formal cognitive testing, medical records, the condition of the home and the financial situation. The plan usually will include short-term options, such as arranging for groceries to be delivered, and long-term options, ranging from occasional home care to placement in a care facility. The manager will provide a list of vendors, service providers and facilities that can meet the family's needs. This process, which costs about \$500, might take a few weeks.

At that point, the family members choose whether to follow the recommendations. They also can further employ the care manager to implement the plan. Some care managers work for clients for several years.

### **Practical matters**

Though there are many resources for caregivers, few family members have the time or energy to sort through everything, Frenette said. Care managers, who deal daily with elderly care, know how to manage practical issues. They know where to go if seniors need groceries delivered, grab bars installed in their bathrooms, or devices that remind them to take medications.

Managers also know geriatricians, doctors who specialize in treating older people. And they know about care facilities.

"I'm doing this all the time," Frenette said. "I know that facility looks pretty, but they put all the money into decorations and not into care."

She also busts myths.

"I need to get people out of the mind-set that all nursing homes are skanky and smell like urine and they stick you in a room with three weird people," she said. "They are not like that anymore."

In addition, care managers are paid to be the "bad guy," pressing people to go to the doctor or accept a housecleaner.

"The kids can say, 'Mom, we'll modify your bathroom and make it beautiful,' and I'll do the stuff Mom's not going to like," Frenette said. "I'm not going to lose my inheritance by forcing the issue."

### **Time to heal**

Caretaking can be a thankless job. Frenette often hears from family members tired of watching an elderly loved one.

"The big complaint I get from people is that they don't like having to spend all the time with their mother helping her to shower or picking up the house or having to set up the pills," Frenette said. "They want to enjoy an afternoon with Mom."

Freedom from those chores can lead to healing.

"It's a time for family members and the elderly to come together and close some doors and bring some peace to the end process," Applegate said. "When they see their parents in that vulnerable situation, most mature adults open their eyes and say, 'Why am I holding so tightly onto this anger or that issue?'"

Scott Gibson, a Mesa attorney, hired Frenette to help with his father, who had amyotrophic lateral sclerosis, also known as Lou Gehrig's disease. Sufferers remain of sound mind but slowly lose muscle control.

"She talked about what types of services were available through Medicare and recommended ways to adapt the house so my father could get around easier," Gibson said. "It took some of the burden off and allowed us to focus in on my dad in the last bit of his life."

His father died in 2003.

"Sometimes people get the idea that, 'If I'm not taking care of my mom or dad, then I'm an ungrateful child,'" Gibson said.

"And really, that's not true."

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## **Expert's tips for hiring a geriatric-care manager**

Heather Frenette, a geriatric-care manager based in Tempe, said it's important to know what you want before hiring a care manager. "Some only do information and referral, some only do placement," she said. "Some do the whole spectrum, from assessment to ongoing care. If your parent has a lot of complex medical problems, you may want one with a nursing background. If there's a messed-up family dynamic, you might want a counselor."

Ask up-front about fees. A survey of geriatric-care managers by AARP in 2002 found that the average fee is about \$75 an hour. Frenette said she can provide an assessment and care plan for about \$500.

A very complex case, such as one involving many siblings who disagree, would require more time and money.

Two places to find these professionals are the National Association of Professional Geriatric Care Managers, [www.caremanagers.org](http://www.caremanagers.org) or 520-881-8008, or the western branch of that organization, Western Region Geriatric Care Management, [www.westerngcm.org](http://www.westerngcm.org).

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