



Senior Housing Options

Decision Making

<http://www.archhousing.org/current-residents/senior-housing.html>

Additional Personal Assessment and Evaluation Worksheets

The purpose of these worksheets, along with other resources on the ARCH/Senior Housing Option web pages is to help you assess your values and needs; and evaluate personal options. You will be ready to “Evaluate My Personal Options” once you have completed assessment worksheets and have also reviewed the Senior Housing Options - Aging in Place and Transitioning from Home web pages (see web page addresses above).

1. Quality of Life - What Do I Value Most?

For each value, place a check (✓) in the column that best describes your feelings.

What I would like to:	Not Important	Somewhat Important	Very Important
a. Stay in my current home.			
b. Be independent; make my own decisions.			
c. Be near family or friends.			
d. Live near my place of worship.			
e. Live near my doctor or clinic.			
f. Have easy access to stores, restaurants, and theaters.			
g. Be more involved in community activities.			
h. Keep my pet(s).			
i. Keep my personal belongings.			
j. Join an exercise program for seniors.			
k. Have plenty of space.			
l. Have privacy.			
m. Maintain control over my finances.			
n. Share living space with another person.			
o. Have a stronger support system (family, friends, or neighbors).			

2. Financial Resources /Personal Economics to Consider

Along with your responses to the values assessment, your financial resources will partially drive your decision about future housing and other lifestyle changes.

Household Income (Monthly)		Household Expenses (Monthly)	
Social Security		Mortgage/rent	
Employment income		Utilities	
Retirement/Pension		Food	
Investment income		Transportation	
Alimony		Clothing	
Other income		Medications	
Total Income		Insurance prem.*	
Assets (Estimated Market Value)		Entertainment	
House/Condominium		Credit card paymts	
Other property		Loan payments	
Stocks, bonds, etc.		Taxes	
Pension (IRA, 401k, etc.)		Home maintenance**	
Savings/money market		Other expenses	
CDs		Other expenses	
Insurance (cash value)		Total Expenses	
Annuities			
Checking acct. balance		* Includes health, car, homeowner, and long-term care premiums. ** Includes major household repairs, such as exterior painting, roof repairs, and window repair/replacement.	
Automobile(s)			
Prepaid burial			
Furnishings			
Collectibles			
Jewelry			
Other assets			
Total Assets			

Now, calculate your monthly disposable income by subtracting total expenses from total income:

$$\frac{\text{Total Income}}{\text{(Total Income)}} - \frac{\text{Total Expenses}}{\text{(Total Expenses)}} = \frac{\text{Disposable Income}}{\text{(Disposable Income)}}$$

When can I afford to stop working? How long will my money last?

The interactive retirement calculator provided by the American Association of Retired Persons' (AARP) will help you answer these questions. If you wish to access this outside website – www.aarp.org/retirement_calculator/

If you have concerns about paying for long-term care, you may want to check into publicly funded programs, including subsidized rental apartments for seniors. Affordable East King County Rental Housing Information and Guidelines for Seniors is available at ARCH - www.archhousing.org/rentals-seniors.pdf.

Cost of Services and Care in the Seattle Area is shown by Genworth, Inc. along with costs in other cities across the U.S. This commercial website is available at www.genworth.com/long_term_care_cost.

Needs Assessments - Assessments 3 through 7 on the following pages. Add up the number of checks in each column and record the total in the last row of the chart. Finally, you will want to “Compile Your Results” in Section 8 which follows these assessments.

3. Assessing Mobility Around Home

On my own, I am able to:	Hardly Ever	Some-times	Almost Always
a. Cook or prepare nutritious meals.			
b. Do the dishes.			
c. Clean the house or apartment.			
d. Do the laundry.			
e. Do yard work (mowing, raking, snow removal, etc.).			
f. Handle inside maintenance (painting, plumbing, etc.).			
g. Handle outside maintenance (window washing, etc.).			
h. Do grocery or other kinds of shopping.			
i. Use the telephone.			
Total number of checks in each column			

4. Family & Social Community Considerations

On my own, I am able to:	Hardly Ever	Some-times	Almost Always
a. Spend sufficient time with family or friends.			
b. Ask my family or friends for help.			
c. Feel “connected” with my neighbors.			
d. Keep myself busy.			
e. Contribute to my community.			
f. Attend social, cultural, or religious events.			
g. Get where I want to go (appointments, etc.).			
Total number of checks in each column			

5. Personal Finance Record-keeping

On my own, I am able to:	Hardly Ever	Some-times	Almost Always
a. Balance my checkbook.			
b. Make deposits or withdrawals at the bank.			
c. Pay my bills on time.			
d. Handle insurance claims.			
e. Live within my income.			
Total number of checks in each column			

The Washington Society of CPAs' CPA Referral Service will help you find a local certified public accountant firm that offers elder care accounting. This is a subscriber paid service and includes only those CPAs who have chosen to list.

[CLICK HERE](#) to access this CPA Referral Service website.

<http://www.wscpa.org/public/referral/findcpa.aspx>

6. Health Care & Health Limitations

On my own, I am able to:	Hardly Ever	Some-times	Almost Always
a. Manage my own health care (make and keep appointments, etc.).			
b. Take medications as prescribed.			
c. Get sufficient exercise.			
Total number of checks in each column			

7. Personal Care Assessment

On my own, I am able to:	Hardly Ever	Some-times	Almost Always
a. Take a bath or shower.			
b. Get dressed.			
c. Brush my teeth.			
d. Comb or style my hair.			
e. Use the toilet.			
f. Cut my food or eat meals.			
Total number of checks in each column			

8. Lifestyle Evaluation

The following chart can help you prioritize and plan for your future needs. To complete this chart, transfer your total scores from each individual assessment numbered from 3-7 above to the appropriate column in the lifestyle chart below. Consult the recommended pages of the East King County Resource Guide 2010-2012* shown in the last column for assistance options. [CLICK HERE](http://www.overlakehospital.org/pdf/SeniorResourceGuide_2010.pdf) to access this guide. http://www.overlakehospital.org/pdf/SeniorResourceGuide_2010.pdf

Lifestyle Evaluation	Hardly Ever	Some-times	Almost Always	Turn to Pages *
3. Assessing Your Mobility Around Home				5, 29, 30, 33, 34
4. Family & Social Community				39, 41-43, 47
5. Personal Finance Record-keeping				31, 35, 38, 46
6. Health Care & Health Limitations				9, 31, 39
7. Personal Care Assessment				29-31

Here's a brief example. If your chart resembled the one below, you might want to concentrate on those pages of the guide shown in the shaded boxes.

Lifestyle Evaluation	Hardly Ever	Some-times	Almost Always	Turn to Pages*
3. Assessing Your Mobility Around Home	5	3	1	5, 29, 30, 33, 34
4. Family & Social Community	2	1	4	39, 41-43, 47
5. Personal Finance Record-keeping	0	2	3	31, 35, 38, 46,
6. Health Care & Health Limitations	0	1	2	9, 31, 39
7. Personal Care Assessment	3	2	1	29-31

After you've investigated your Aging in Place options and Transitioning from Home options, you may want to review examples of the costs of making particular lifestyle changes. Check the ARCH website to view the Senior Profiles with Lifestyle Cost Estimates (Examples).

Evaluating My Personal Options

Use the following worksheet to compare the costs of staying in your current home with the costs of moving to alternate housing that provides the services you need. To complete this worksheet accurately, you will first need to obtain the actual costs of the service and housing options you are considering.

Staying at Home		Moving to Alternative Housing	
Possible Services Needed	Estimated Monthly Cost	Possible Services Needed	Estimated Monthly Cost
Home-delivered Meals		Meals	
Chore Service		Chore Service	
Homemaking Service		Homemaking Service	
Respite Care		Respite Care	
Home Nursing		Home Nursing	
Transportation		Transportation	
Other Service		Other Service	
Other Service		Other Service	
Household Expenses Rent/Mortgage Other Expenses (food, clothing, insurance, etc.)		Household Expenses Rent/Mortgage (may include utilities) Other Expenses (food, clothing, insurance, etc.)	
Total		Total	

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