



# FINANCIAL PREPAREDNESS

*"One of life's most painful moments comes when we must admit that we didn't do our homework, that we are not prepared." ~ Merlin Olsen*

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## Helping Aging Parents

Last week was the first in the last 200 weeks that I didn't publish a new issue of this newsletter. But I had a good excuse. I was out of town helping my 87-year-old father find the care he needs. It has been an eye opener. Helping an aging parent can be a challenging, frustrating, time-consuming, energy-draining and expensive ordeal, much like it must have been for them when they were raising you.

Conditions such as Modern Man diseases (e.g., type 2 diabetes, obesity and lymphedema), declining memory, wound care, overprescription of pharmaceutical products, sugar and wheat addiction, low energy, brain fog and frequent (and urgent) potty stops can make it feel more like a full-time job. Having to deal with problems (such as finding someone to help them get a shower) when they're a seven-hour drive away from you can be especially frustrating and time-consuming.

My father was in a physical rehabilitation center for 54 days. It was a very nice facility with a world-class gym and physical therapists, but it was also very noisy and somewhat depressing. It was shocking to see how broken (physically and/or mentally) some people were, and at least a third of those were not even elderly. (There but for the grace of god go I.) I suspect that the vast majority of these people are the victims of Big Food, Big Pharma and Big Furniture (sitting inside on soft furniture all day watching TV). It's so sad,

because [it doesn't have to be that way](#).

Although my dad received great physical and occupational therapy five days a week, the nutritional component of that was obviously lacking. Every meal I saw them bring him included a glass of apple juice (which even his doctor there referred to as “sugar water”). Breakfast included a bowl of cereal such as Frosted Flakes or Raisin Bran (the primary ingredients of which are either wheat or corn, and cancer-feeding sugar). It was like they were going through the motions of providing physical and occupational rehab so they could bill Medicare and Medicaid for the service, but they didn't provide their patients with the full nutrition they needed to actually get better, which results in a longer stay. I'm not sure if this was deliberate or merely due to ignorance. Either way, it's not good.

As long as a patient is improving (but not too much to “graduate,”) Medicare will pay for up to 100 days in a physical rehabilitation center. If you want to stay after either of those two events, the cost for this facility is \$13,500 per month. Yet I often found myself spending much of a day looking for a pair of 4X hospital socks (because they gave him only a couple of pairs and no one could find a pair in the supply room) or finding someone to help him get a shower.

The hallways were as noisy as a hospital, including constantly beeping call alarms, piped in saccharine-cheery music and TVs blaring at full volume from nearby patient rooms with open doors. It was soul-crushing. I don't see how anyone could find that conducive to recuperation.

Some patients spent a lot of time hanging out in the hallways in their wheelchairs, with nothing to do, nowhere to go, no one to see and probably no plans for the future. Those were the ones who could move and were actually trying. Some of the worst cases seemed to take turns sitting at the nurse's station with the CNAs, but doing nothing. I got the sense they had no family and nowhere else to go. It was a very sad situation.

Most of the staff were great. One night after a 12-hour day there I was leaving and told a tech who'd been working with my dad that he was about to take a shower by himself, so please check on him in 20 minutes. When he assured me that he had us covered, I gave him a hug and started crying. It can be an emotional time; for me that happened suddenly and at unexpected times.

After checking out a couple of dozen assisted living facilities online, I got a tour of two near where I live and two near where my father was before I found one that I thought was perfect for his needs (including a nice apartment with a door that opened to a landscaped courtyard). I persuaded my family to come back for lunch and a tour, but even though we thought it was a slam dunk, my father was reluctant to put down a risk-free deposit on a room. He liked where he was and the private pay rate for it didn't seem to faze him, which was strange for someone whose entire life had been defined by thrift. Fortunately my sister was able to persuade him to put down a deposit.

The next morning I went to see the Discharge Director at the rehab facility, who casually mentioned that they were planning to discharge my father in two days. They had not

informed my family about this, so it's a good thing we had a landing spot. My dad went to PT, I started filling out a lot of forms and then we met for lunch, where an employee informed us that my father and all of his belongings had been moved to a semi-private room on the second floor. WTF? Why would they move a patient they were about to discharge, and not inform them before they did so?

While I was pushing my father in a wheelchair to go see his new home, he had to use the bathroom, so we found one in the hall and I left him inside. A sister called to ask what was happening when suddenly an alarm started going off (I didn't really notice, because they were *always* going off) and suddenly two employees were crashing into the bathroom my dad was using. It turns out he accidentally pulled the emergency cord when he was getting up from the toilet. I couldn't imagine how the situation could be more chaotic.

As soon as my father saw his new semi-private room, with its curtain separating the beds, lack of furniture and shared bathroom, he realized he didn't want to be there (especially at \$13,500 per month), so I started trying to get him out of there as soon as possible. I made calls and tried to find three different people to expedite the process, but couldn't make it happen that day. So I started planning our escape for the next morning. That night I bought some paper products and healthy snacks for my dad and some ratchet straps for moving his furniture, and stayed up until midnight reading a 27-page lease agreement and new resident information.

My last day in town was a long one. I had to move out of my hotel (which was actually the second one I stayed in, because the first one had no hot water, as my room was “on the opposite side of the hotel from the boiler”), be at my sister's house by 8:00 to pick up my dad's furniture, and sign a lease agreement (which included making decisions about medication management and clarifying care needs). During this time, my sister moved my dad and all of his belongings out of rehab and brought him to the assisted living facility just in time for lunch. I unloaded his furniture and got him squared away in his new home.

As I kissed him on his head during my final farewell, I suddenly broke down crying. It was a combination of sadness at having to institutionalize him (the only option given his physical condition and my family situation), knowing that I had busted ass and done a good job to get him across the goal line, exhaustion, and the realization that this might be the last time I ever saw him.

It was now 1:00 and I still had an eight hour drive ahead of me, including picking up my son from college. Due to several delays, we didn't get home until midnight. I was exhausted. I now know what it feels like to be in the [sandwich generation](#).

Although I got a lot done during the week with my dad, I now have a lot of new tasks and responsibilities, as I am my dad's attorney-in-fact for finances and health care. It's almost like a full-time job (at least initially). I have to find him a new doctor (These days, apparently no decent doctors are even accepting new patients, though their practice may have a new resident you can see eight months from now. And of course functional/holistic/integrative doctors are few and far between, and some of those are merely in the business of selling overpriced supplements.), order needed items, get him integrated into

the assisted living facility (help button, blood sugar testing, physical therapy [which requires a doctor's prescription] and exercise classes), deal with crises (he accidentally received a double dose of several medications four hours apart instead of 12), pay his bills, manage his investment portfolio, etc.

If you don't have a perfect family, then of course you'll often have to deal with “family dynamics.” I highly recommend that you stay focused on helping your parent and don't worry about things or people you can't control. Always try to be calm, kind, gracious and patient. Try to be the bigger person and the adult in the room. Give people the benefit of the doubt. Be a leader if leadership is needed, and of course lead by example. Be a diplomat and try to maintain communications and a working relationship with everyone. Show your children how they should take care of their parents. And act in a way such that you will have no regrets.

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