



SAGE Case Management

What we do

We coordinate the lives and care of people who are having difficulty functioning independently due to physical/cognitive impairments.

We enable people to remain safely in their own homes and in contact with family and friends. Should they be hospitalized or find themselves unable to remain at home, we assist in managing all transitions and advocate for them in all contexts, medical or residential.

We work with caregivers, whether family, friends, or in-situ helpers, to anticipate needs, to recommend options, and to assure that all bases are covered at home, in medical environments, and out in the community.

Our comprehensive services ease the anxieties and arduous daily responsibilities of caring for family members with chronic disabling infirmities, progressive diseases, physical/mental decline due to ageing, or long recuperations from serious illness or accident.

Who we are

Melissa McCool, MSW, LCSW, is a bilingual licensed clinical social worker with fourteen years of experience. During the 1990s she was a case manager for end-stage AIDS patients in New York City, and then the social worker for the medical Emergency Room at Mt. Sinai Hospital. She went on to serve as the social worker for Mt. Sinai's psychiatric Emergency Room, where she applied a hands-on approach to the solution of complex patient problems. She later worked in the Geriatric Psychiatry Department, assessing and treating patients most of whom suffered from Alzheimer's disease, an area in which she developed a sub-specialty. Throughout her career, Melissa has contracted on a part-time basis with visiting nurse companies to case-manage homebound patients, and she has recent experience in California with the concerns of the clients of kidney dialysis units. Her degrees are from UC San Diego and Columbia.

Hillel Schwartz, PhD, has a decade of experience case-managing cancer patients, stroke patients, and the terminally ill, and has worked closely with their families, guiding them when necessary through the Last Days and advising on legal and technical issues as well as plans for memorials. As an historian, poet, translator, and public arts consultant, he has published six books in cultural history, history of religions, and history of technology and medicine. Hillel has served as project scholar for initiatives of the National Endowment for the Humanities, National YMCA, American Library Association and the Parliament of the World's Religions. He has also written, lectured, and taught on topics related to obesity and weight loss, environmental noise, and medical ethics. His degrees are from Brandeis University, UC Berkeley, and Yale, with study and research in Europe and Canada.

Sage Case Management is a limited liability company founded and registered in the State of California.

How we do it

When you first contact us in person, we ask: What worries you? What are your needs?

Then we sit down with all concerned for a Preliminary Evaluation, about an hour long, during which we clarify the issues and identify critical problems that may be anticipated or have already arisen. Afterwards, we make a clear recommendation as to whether case management can be of immediate and significant help. Should we find that other options would be more advisable, we will explain the different paths and how best to embark upon them.

These evaluations and recommendations are complementary.

If we believe that case management will serve you well, we sketch out in some detail what Sage would do to address directly the client's needs and the family's current and longer-term concerns. Should you wish us to engage us further, we will together endorse a Letter of Engagement that lays out the terms upon which we will work with you and on your behalf.

Soon after, we will conduct a Comprehensive Assessment. This entails in-depth interviews with the client and family; a house inspection focused on issues of safety and access; a review of the medical history; and, where advisable, consultations with physicians or service agencies.

Within forty-eight hours, we will present a Plan of Care thorough enough so that the family can use this as a guide for their own caregiving and maintenance of the client.

If the client and family choose instead to hire Sage to implement the Plan of Care, a Formal Contract is signed.

How we do it: Preliminary Evaluation

Here we sit down with all concerned to clarify the most pressing issues with regard to independent living and to help identify critical problems that may be anticipated or have already arisen. The goal is to determine whether independent living at home is a feasible prospect and, if so, what that would entail in terms of case management, caregiving hours, and cost.

We lay out the basic elements of case management and our philosophy as case managers. If we do not consider independent living at home to be a reasonable option, we will describe the other options and explain what it will take to get started on those paths. This evaluation is free.

How we do it: Comprehensive Assessment

Our Comprehensive Assessment entails an in-depth session with the client separately and then with the family.

For and with the client, we assess fine and gross motor skills, gait stability, overall strength and mobility, cognitive functioning, communication skills and deficits, psychological and emotional status, and daily habits of self-maintenance (bathing, toileting, nutrition, dental care, eye care, physical and mental exercise).

We take the client's medical history and current diagnoses, medications, therapeutic regimes, and daily routines, with concern also for abiding interests, anxieties, and enthusiasms.

We conduct a thorough home inspection focused on safety inside and out (stairs and rails, baths and showers, utility shut-off valves, electrical outlets, steps and walks). We also inventory communication devices for visibility and audibility (doorbells and intercoms, telephones, radios, television, music players, computers with e-mail programs).

We ask family members and close friends how they understand their roles, what worries them, and how they may wish to recast their roles in future. We take family medical histories as they may apply to the client's situation.

We discuss the social, ethical, legal, and general financial issues that will need to be addressed or further clarified and resolved.

With the concurrence of clients and family, we may also consult physicians, nurses, counselors, and agencies involved, or likely to be involved, in the trajectory of care.

How we do it: Plan of Care

Building upon our Comprehensive Assessment and our discussions with the client and family, we craft a detailed Plan of Care.

This includes specific recommendations for:

- caregiving (numbers of caregivers, hours and obligations);
- daily activities and monitoring;
- daily and weekly assessment tools (including our proprietary Seven-Minute Assessment);
- home environment realignments, repairs, or additions (to secure the client's safety, mobility, and ability to communicate);
- emergency protocols;
- local connections with agencies and support groups.

These will be presented in a binder that will also contain:

- An Inventory of Needs
- Recommendations for addressing those needs
- A comprehensive List of Contacts
- Emergency Medical Wallet Card
- Essential Medical History
- List of First-Aid supplies that should be in the home
- Model Weekly Schedule, with medications listed
- Sample Documents (Advance Directive, Releases)
- To-Do List for legal, medical, and financial arrangements
- Model List of Questions for Physician Appointments
- Recent Research on medical conditions, their diagnoses, prognoses, and preferred treatments

The Plan of Care will be accompanied by an estimate of monthly costs and expenses for Case Management.

The fee for the Comprehensive Assessment and Plan of Care, which come as one package, is \$600.00.

How we do it: Ongoing Case Management

Ordinarily we contract for a minimum number of hours each week. Once the Plan of Care is approved and the family contracts for its implementation by Sage Case Management, we will take care of:

1. Screening, training, scheduling, and supervising Caregivers who meet our standards for competence, trustworthiness, and calm. Client and family interview caregivers from our candidate pool and decide which to hire. We find back-ups in case of caregiver emergency.
2. Overseeing Medications: laying out medication schedules, obtaining timely refills, reporting bad/odd reactions, assuring compliance, and monitoring the use of OTC drugs or dietary supplements. This also entails an inventory of all prescription and OTC medications at home and the establishment of a well-stocked first-aid kit.

3. Maintaining a weekly hour-by-hour Schedule of appointments and engagements, home attendant visits, caregiver hours, and medications.

4. Completing daily and weekly Assessments to track baseline physical and cognitive status. This includes a personal visit each day from Sage, during which we will check such home Devices as Lifeline alert modules.

5. Scheduling and covering all Appointments with physicians, dentists, optometrists, labs, acupuncturists, chiropractors, therapists, support groups. This includes the writing up of questions for each medical appointment; making sure the client gets to offices on time; attending appointments whenever it is likely that test results, new diagnoses, or new treatments are to be considered or implemented; acting as translator for clients with speech or hearing impairments; issuing complete, articulate, e-mailed reports soon after each substantial appointment, to keep the family informed.

6. Retrieving, explaining, and querying medical Test Results.

7. Maintaining a list of contacts, including family, close friends, neighbors, physicians, on-call nurses, counselors, standby transport, accountants, housecleaners, gardeners, handymen, and (where appropriate) landlords.

8. Handling all medical Emergencies, for which we create beforehand a protocol-code status, flow chart of personal and medical contacts, rules of thumb on when to call 911, name and address of local hospital, an Emergency Information wallet card giving name, DOB, allergies, meds, disabilities, insurance ID, address, and emergency contact numbers, an Essential Medical History; a Kit of items to bring to the hospital for the client. We will be present at all visits to local emergency units and admittances to local hospitals. We will act as advocates for the client in hospitals, skilled nursing facilities, board-and-care, or other temporary establishments.

9. Serving as Intermediary for the client's connections with community: social agencies, religious institutions, interest groups, support groups.

10. Providing Research on medical options regarding diagnoses/treatment.

How we do it: Follow-Through

Sage Case Management works on many fronts for each client, and assures follow-through, where necessary and desired, from early diagnoses or functional difficulties to Last Days, plans for memorials, and household inventories.

We pride ourselves on our depth of concern and engagement, the quality of our advocacy in medical and sociolegal arenas, the quickness and quality of our responsiveness to client needs, and our interpretive, analytic, and synthetic abilities with regard to medical

diagnoses, testing, treatments, and prognoses. We explore and explain alternative modalities.

We honor the wishes of client and family for discretion, for quiet, for privacy, and for companionable, compassionate assistance.

Whether called “eldercare,” senior care, parent care, geriatric care, or “ageing in place,” the help we provide to older adults will ever respect their rights to a life pursued with dignity and as much independence as can be mustered from day to day. For a family coping with chronic or degenerative illnesses in younger adults, the help we provide will always acknowledge that age is no exclusive determinant of wisdom, or insight. Never do we take the pronouncement of a “terminal” condition or evidence of significant decline (memory loss, dementia, loss of motor functions) as a mandate to curtail care, consultation, or engagement with friends and the local community.

Some may wish to make use of our services for a week’s respite care, or for those times when a person needs to make especially difficult transitions from one level of care to another. In general, however, we will be working on behalf of clients and their families all along the way, which allows us to understand and be guided by the hierarchy of values, tacit or explicit, that clients and families invoke when hard choices are to be made. One of our chief roles, from the start, is to make clear the nature and significance of choices at each new crossroads.

When to contact us

Clients:

- When you see that your family and circle of friends find themselves increasingly overwhelmed by the time and forethought required to care for you safely at home.
- When you find yourself becoming increasingly perplexed or frustrated by the medical, physical, emotional, or psychological challenges you and your family are facing.
- When you realize that you need more dedicated help than family or friends can provide in researching and clarifying the options and consequences of serious decisions about your care.
- When you becoming increasingly anxious about how your care will be managed, now or in the near future, so that you can maintain a substantial degree of independence and the assurance that others will appreciate and honor your situation.

Families and Friends:

- When you find that your own efforts on behalf of a family member are drawing you away from other, equally important, ongoing obligations.

- When you find that the medical, physical, emotional, cognitive, and/or psychological issues you must confront each day with regard to the care of a family member are beyond your sphere of competence or just plain getting out of control.

- When you suspect that the close relationship you have with a family member is deteriorating due to the stress, anxiety, and hours of work entailed by the care you provide.

- When you realize that the growing complexity of a situation demands more of you (emotionally, physically, medically) than you are able to handle on your own.

- When you and other family members have begun to doubt your own capacities to continue to keep on top of things (doctor's appointments, specialist referrals, second opinions, medication refills and drug interactions, pain control, housecleaning and home repairs, food shopping, cooking, sheet changing, laundry, clothes mending, occupational or speech or physical therapy, gardening, license renewals, bills, taxes, insurance premiums, correspondence, e-mail connections, computer maintenance and program updating, legal arrangements, travel planning, outings, anniversaries.).

What we will not do

So as to avoid all conflicts of interest, Sage Case Management will NOT:

- hire or pay caregivers, home attendants, or home health aids;
- manage the client's finances or advise on investments;
- serve as legal guardians or conservators;
- witness or subscribe to legal documents for the client or family;
- act with Power of Attorney for medical or financial matters;
- advise on religious activity, attendance, or membership;
- advocate for contributions to charitable or political causes;

So as to secure the privacy and dignity of clients, we will NOT provide information about their physical, cognitive, emotional, or financial status to anyone outside the immediate family without the explicit consent of the client and/or family.

So as to forestall suspicions of larceny or theft, we will NOT ask that the client be furnished with a fund of petty cash. Instead, we will invoice for all incidental expenses. We will also, at the family's request, conduct a home inventory of valuables, with digital photographs if desired.

So as to prevent delays in care and supervision, we do NOT bill Medicare, insurance companies, or other third parties. We invoice the family directly twice a month, at rates agreed upon in the signed contract.

So as to ensure quality of care and quality of life, we will NOT treat any client as a mere cluster of symptoms and complaints.

What we'll always do

We will be available 24-7 to clients and caregivers.

We will respond thoughtfully and expeditiously to requests or questions from family members.

We will continually monitor and reassess the circumstances of our clients, adjusting the Plan of Care with due deliberation and foresight, and concern for the desires of their families.

We will provide regular, articulate updates on relevant medical research and pharmaceutical developments, including alternative therapies and new rehabilitative strategies.

We will pay special attention to changing theories and practices with regard to pain relief and be active advocates on behalf of clients who need such relief, at home as elsewhere.

We will manage each case so that our operating principles and standards of excellence are clear, coherent, and consistent.

We will maintain the highest ethical standards with regard to our clients and their families.

How to reach us

info@sagecase.com
sagecase@cox.net

1-760-436-7748

References upon request