

Working with Home Health Aides

What Is Home Care?

Many people receive care at home for illnesses, recovery from surgery, disabilities, and other conditions. This guide discusses working with home health aides, personal care attendants, and others who provide personal care.

For information about the types of home care agencies, insurance coverage, choosing an agency, and the referral process, we encourage you to read a companion guide, "[Home Care: A Family Caregiver's Guide](#)."



Home care services can offer you and your family member trained help with medical and personal care. Keep in mind, though, that home care is limited to specific tasks.

What Are the Types of Personal Care Staff?

Many different people provide direct care in the home. Here are a few:

Home health aides and **personal care attendants** primarily provide personal care, which includes assistance with eating, bathing, walking, and dressing, as well as activities associated with independent living, such as shopping, meal preparation, and doing laundry.

Home health aides are allowed to do certain health-related and personal care tasks. They can take the patient's temperature and check blood pressure. They can change a dry dressing (one that is not oozing blood or pus), moving arms and legs and help the

patient do range-of-motion exercises, such as simple stretches. They are not usually allowed to give a patient medicine; each state has different rules regarding what an aide can do.

Be aware that a home health aide is usually only in the home to provide services to the patient, and is not supposed to provide services for a spouse or for the entire household. If you pay privately, you may assign tasks that include other members of the household. (Some managed care companies will include care for a child if the patient is the head of household.)

Personal care attendants share many of the same duties as home health aides. The differences between home health aides and personal care attendants depend on each state's requirements for training.

Many people think that personal care does not require much skill. That is not the case. Some tasks can be very difficult, such as bathing a person with dementia or moving (transferring) a very heavy patient.

Homemakers can assist your family member with light housekeeping, laundry, light grocery shopping and food preparation, and other household tasks that would enable your family member to remain at home. Homemakers do not generally provide personal care, such as bathing and dressing, and are not maids. Heavier tasks and full household cleaning are not usually performed by a homemaker.

For information about finding and choosing home care assistance, read also "[Home Care: A Family Caregiver's Guide.](#)"

What Should I Know about Working with a Home Health Aide?

Whether you hire aides through an agency or privately, make sure ahead of time that you understand each person's role. Know what each person can and cannot do. You also want to be clear about what **you** can and cannot do. Each situation is different, and you will need to work out the details.

In general, aides will spend more time with your family member than nurses or physical therapists will. When a home health aide comes to your home the first time, plan to spend some time together. Show her or him around, and explain the routines your family member prefers. If you do not live in the same household

as your family member, you may want to call during the day to check in and to drop in from time to time without calling ahead.

Some other things to think about:

- ▶ **Terms and expectations:** If you hire privately, be clear about what you expect. Write these things down in a simple agreement. Include the hours and pay you have agreed on, whether or not the time and costs of meal are included, how much vacation time is included, and a backup plan in case the aide cannot arrive on time or has to cancel. These situations do come up, but if you have a backup plan, you will be better able to make other arrangements. If you are using an agency, make sure you understand its terms.
- ▶ **Emergencies:** Leave a list of emergency phone numbers, including your family member's doctor and all your phone numbers. Put the list where anyone can easily find it. Develop an emergency plan, and make sure everyone knows it. If you are using an agency, you should ask about its emergency policy. For example, who should be called first in the event of an emergency, and when is an aide supposed to call 911?
- ▶ **Valuables:** Just as you would with any stranger or worker entering your home, put away private papers, cash, and valuables in a safe place.
- ▶ **Aides' personal relationships:** Agency workers are not allowed to have visitors. If you are hiring aides on your own, you should discuss whether they may have visitors. Also discuss any other personal issues that might interfere with their providing care to your family member.



Whether you hire agency staff or privately paid workers, make sure ahead of time that you understand each person's role. Know what each person can and cannot do.



If you need the aide to be able to drive your car, review his or her driving record and check with your insurance company to make sure your vehicle is covered in case of an accident. If the person will be driving his or her own car as part of the job, make sure that the car is safe and check the insurance.

Should I Hire Someone Who Does Not Work Through an Agency?

You may need or want to hire more home care help than your insurance company will pay for. Or you may need help once the insurance coverage ends. If your family member still needs help from a home care agency after the insurance runs out, you may want to keep using that agency and pay them directly. In these cases, you will need to pay from your own or your family member's money.



The relationship between you, the aides, and your family member is a business relationship. You and your family member may grow close to the aides, and that is fine, but it is still a business relationship. Aides are hired to perform a service. Do not expect them to do more than they are allowed or prepared to do. On the other hand, know where to draw the line, even when that line is not obvious. You need to be clear about what behavior you consider off limits.

Remember that when you hire someone on your own, you also take on the role of supervisor and financial manager. You might not have backup when she or he calls in sick or has a personal emergency. With notice, you may be able to hire a substitute, but often these schedule changes happen at the last minute. It can upset you and your family member's routine. These issues can be solved, but just keep them in mind if you are thinking about hiring someone on your own.

You may know someone reliable who can do the job and who already knows your family member. Or you can advertise in a neighborhood newspaper or in an on-line service, or ask for names from friends and co-workers. Be sure you screen all applicants on the telephone by telling them about your family member, the kind of help you need, and the basic description of the job. You can then interview in person only those who seem right for the job.

Ask for identification and references. Be sure to call these references, and ask about the person's work habits, attitude, and reliability. If the person is a home health aide, check with the state licensing bureau to make sure she or he has been certified. If the person is not a home health aide, then he or she may use terms such as personal care attendant, homemaker, or companion. A few states have certification for personal care attendants and homemakers. "Companions" and other titles are simply individual choice; there are usually no qualifications, licensing, or state certifications.

Some states keep a database, or registry, that has lists of nurses and home health aides. You can call these registries and ask for a list for your location, or the information may be available on the Internet. In some states, these registries are regulated and licensed. When using these registries, family caregivers should ask specific questions about worker training and qualifications. Check your state's Department of Health website to see if there is a registry.

Make a list of tasks you want the person to perform, and make sure she or he has the training or experience for those tasks. For example, if your family member has memory problems or tends to wander, you will want to make sure the person has training and experience working with people who have similar needs. You will also want to make sure the person is patient and will not get annoyed at your family member's behavior.

What Kinds of Problems May Come Up and How Can I Solve Them?

Regular meetings and open communication can help solve problems before they arise. If the situation cannot be resolved, then you will need a different worker.

Two of the most common problems are resistance to outsiders and cultural differences.

Resistance to Outsiders

Many older people resist the idea of people they don't know coming into their home, and this may include home health aides. They may insist that they don't need this care, that they are perfectly able to take care of themselves, and that you, as their relative, are the only person they trust. If this problem is not resolved, your family member may fire the workers or make it so difficult for them that they quit.

Some of this resistance comes from the fear of theft, abuse, and other harms. Most of it, however, probably comes from the fear of losing one's independence. This is common, and there is no simple solution. You can, however, talk to your family member about the tasks for which no help is needed. Tell your family member that having this help will actually allow him or her to do more and may prevent future health problems.

You can also remind your family member of your other responsibilities. Your job, your family, and your children need you too. Explain that the aides make it possible for you to be both a good daughter or son and a good parent (or whatever the combination of relationships is). You should not feel guilty if you cannot provide all the care. And you should not assume that you can provide all the care for a long time, no matter how much you may want to or feel that you should. It will not help your family member if you are exhausted, anxious, or overwhelmed.

Experienced home health aides know how to handle patients who do not want their help. They do not take rejection personally. Some will be firm, while others will gently distract the patient. You may need to try several aides to find one whose style works best with your family member. Sometimes what starts out as a bad situation will work out very well as the family member and worker learn to understand and appreciate each other.



Your family member's resistance to home care may be from fear of losing independence.



Cultural respect is important to everyone. Make sure you discuss language, food, and other differences in advance.



Good nutrition is essential for good health. As people age, they sometimes find that the foods they used to enjoy don't taste good anymore. Or they may be sensitive to unfamiliar smells. If the home care worker cooks food that is too spicy or has a strong smell, your family member may refuse to eat it. In this case, you will need to work with the worker and your family member to come up with a food plan that they both agree on.

Cultural Differences

Cultural respect between the home health aide and your family member is really important. Start with names. Ask the aides if they want you to use their first name or last name – “Mary” or “Mrs. Jones.” At the same time, tell them what you and your family member want to be called. Some people are quite casual about this. Others, particularly older people, do not like to be called by their first name. Also, many people do not like to be referred to as “sweetie,” “honey,” “mommy,” or other nicknames.

Many problems can be avoided if cultural differences are dealt with up front. Often, though, they only come up after a problem has occurred. Many aides are women from minority or immigrant groups. So are many of the patients they care for. If your family member does not speak English, ask for an aide who speaks the same language. Many aides who speak a different language at home can speak and understand English well enough to talk to your family member.

Other differences can come up that have to do with food, religious practices, or daily routines. If you and your family member follow certain religious or other practices, you need to explain those to the aides. They may have cared for other patients of your religion and may assume your practices are the same when, in fact, they are not. At the same time, you should ask the workers if there is anything you should know about their culture and religious practices – things that can affect their ability to work. Having respect for each other's cultural differences can actually create a bond between the worker and the family member.

Conclusion

Home health aides can make a big difference in your life and in the life of your family member. Home health aide services do not mean that you aren't a good family caregiver. Home care, including home health aides, personal care attendants, homemakers, and companions, can be an invaluable addition to the care you provide to your family member.