

Penn Association of Senior and Emeritus Faculty

Resource Guide for Living Options in Retirement

INTRODUCTION: In only ten years, one in five Americans will be over age 65. Despite attention by government, age-related organizations and the private sector to the changing housing needs of this aging 'baby boomer' population, identifying just what mix of housing options will be acceptable and needed has slowed progress toward solutions. Most Americans (~90%) still wish to stay in their current homes as long as possible. Some may wish to relocate to be closer to relatives, better climates or convenient resources. Others recognize that changes over time in function and health may necessitate home adaptations for safety and support as well as access to assistance and/or care beyond what can be readily managed at home. Further, to age in place seniors need access to safe, age-friendly communities with adequate transportation options and access to grocery stores, healthcare and community activities. Planning for where to live in retirement, thus, often becomes one of the most important AND stressful of later life decisions. This guide clarifies current types of housing options and identifies on-line resources for further exploration. Self-assessment and systematic exploration will aid in making decisions best for you and your family.

SENIOR HOUSING OPTIONS:

- **Aging in Place:** Continuing to live in one's home, often with physical adaptations to provide for safety, ease in self-care, and so on. Responsible for meeting social, health, self-care, transportation, home maintenance and housekeeping needs via contracted services with, e.g., home care agencies, meal delivery, cleaning services, handyperson, social groups/neighbors.
- **The Village Concept:** Neighbors helping neighbors age in place through volunteer assistance with home maintenance & simple repairs, transportation, social and educational activities, bookkeeping, information system management, companionship, support and assistance with health care appointments, etc. Small annual membership fees are normally charged; most services are provided by volunteers.
- **Independent Living Communities - Congregate Housing, Naturally Occurring Retirement Communities (NORCs), Retirement Communities, Over 55 Communities:** These retirement communities often resemble any other apartment complex or subdivision—but there's usually a minimum age limit. Good option for those who wish to live in an active (sometimes) age-restricted community setting free from worries about home maintenance, cooking, housekeeping, etc. Many offer a broad range of social, recreational and wellness activities and other services; some provide communal dining and housekeeping options, social clubs, education and entertainment, and on site salons, legal and health services, and so on.
- **Home Sharing:** Friends (or strangers) agree to live together in one house or apartment, usually with separate bedrooms/baths & common spaces. May be affiliated with a Retirement Community for access to services and amenities. If in a private home, provides extra income for homeowner, or owner gets assistance with cooking, cleaning, other chores from 'tenant'; also helpful in preventing social isolation and loneliness. Look for 'Co-housing Matchmakers.'
- **Living with Family:** May be a shared home, 'granny flat' / or accessory apartment or free-standing structure, or the reverse, i.e., family member(s) move(s) in with older adult for ease in providing care/ assistance.
- **Residential Care Home:** Small facilities offering personalized service to small groups of adults in a homelike environment, e.g., adult family home, board and care home, personal care home, dementia care home. Provides lodging, meal services and assistance with Activities of Daily Living (ADLs). Licensed by the State.
- **Assisted Living Community:** Private or semi-private rooms or small apartments (especially in the newer, 'small house,' styles) with shared common spaces for dining, social, recreational & wellness activities and 24

hour/day on-site staff. Provides some assistance with meals, medication management, ADLs, housekeeping, and transportation in a care community setting. State Licensed.

- **Dementia or Memory Care Assisted Living:** Freestanding special facilities or units in Assisted Living or Skilled Nursing facilities dedicated to the needs of those whose decisional and self-care capacities are diminished by cognitive impairment. State licensed.
- **Nursing Home/Skilled Nursing Facilities (SNF):** In addition to short-term post-hospital rehabilitation, the SNF provides long term care for those requiring 24 hour supervised care with meals, activities, & health management. Provides for physician, professional nursing and rehabilitation services; some may include memory care neighborhoods. Stated licensed; Quality standards set by Centers for Medicare & Medicaid.
- **Continuing Care Retirement Community (CCRC):** Includes independent and assisted living as well as skilled nursing care on one campus, facilitating 'aging in place.' ([See PASEF website for resource on CCRCs.](#)) Designed to meet the changing needs of people as they age or their health status changes; provides a variety of housing options, services and a broad range of activities and health/wellness services.

DECISION-MAKING RESOURCES:

- **Information Gathering-Where to Start?** One can raise awareness of options and potential obstacles in making retirement living decisions through talking with others (including friends and family), attending information sessions, observing and visiting different types of options, and so on. Online research is another source, although it helps to begin with a reputable organization's website. See examples below.
- **Geriatric Care Managers** (also known as Aging Life Care Professionals or Care Navigators) are usually registered professional nurses or social workers who assess seniors' individual needs, form comprehensive care plans and then help execute them; GCMs are a resource for identifying the level of care needed by an older person and assisting in finding a resource that is a good fit for the person. A GCM's services can also include physical and mental health counseling, crisis intervention, care management and coordination, medication management, and assistance with benefits enrollment and other financial resources. To help identify GCMs in the Philadelphia area, see <https://www.agingcare.com/Articles/geriatric-care-managers-help-for-elders-needs-138976.htm>.
- **Local resources for older adults Aging in Place:**
 - Any of the Village Programs in the Philadelphia area, e.g. www.pennsvillage.org, www.northwestvillagenetwork.org/, <http://eastfallsvillage.org/> or see the national organization at www.villagetovillage.org
 - Life Plan Organizations like Friends Life Care (www.friendslifecare.org) or FitC-PLUS (<http://friendscentercity.org/content/fitc-plus-independence-convenience-peace-mind>)
 - Home health agencies, personal care agencies
- **Additional Websites of interest:**
 - Consumer Affairs: www.consumeraffairs.com/health/senior-living: Summary of senior living options
 - AARP: <https://www.aarp.org/caregiving/basics/info-2018/types-of-housing.html?intcmp=AE-CAR-BAS-R3-C2>
 - AoA: <https://seniorsresourceguide.com/2022/04/01/seniors-e-guide/> Excellent description and questions to consider when researching senior housing choices
 - Medline: <https://medlineplus.gov/assistedliving.html>: see PDF re: housing options for older adults
 - NIH: <https://www.nia.nih.gov/health/aging-place-growing-older-home>: Guide to Aging in Place
 - HUD: https://www.hud.gov/topics/information_for_senior_citizens: Options for lower income elders