



ABODE
HOME HEALTH
of Colorado

Recognizing When Alzheimer's Patients Need Home Health Care

Meet Joel



Patient Profile:

Joel is a 78-year-old male recently diagnosed with moderate-stage Alzheimer's disease. He is married and lives at home, where his wife has taken on the role of primary caregiver. Joel has a history of hypertension and osteoarthritis, and over the past several months, his short-term memory loss and confusion have worsened. He occasionally becomes agitated in the evenings, forgets to take medications, and has had two near-falls due to imbalance while navigating stairs.

When Should Home Health Be Introduced?

The optimal window to initiate home health services is when cognitive decline begins to impact safety, independence, and the ability to manage chronic conditions. This frequently occurs in the mild to moderate stages of Alzheimer's, when symptoms like forgetfulness, wandering, and physical deconditioning start to compromise daily life.

In Joel's case, several clinical red flags have emerged:

- **Progressive short-term memory loss**
- **Increased fall risk and mobility challenges**
- **Episodes of sundowning/agitation**
- **Missed medication doses**
- **Caregiver stress and risk of burnout**

These indicators suggest that Joel—and his wife—could benefit from coordinated, in-home support through home health services.

How Home Health Supports Alzheimer's Patients Like Joel

1. Skilled Nursing for Chronic Disease Management & Medication Oversight

Alzheimer's patients are often unable to report symptoms or comply with treatment regimens. A skilled nurse can help Joel remain medically stable by managing his hypertension, monitoring for polypharmacy risks, and ensuring proper medication administration—issues known to lead to preventable hospitalizations (Alzheimer's Association, 2024).

2. Physical Therapy to Improve Balance and Prevent Falls

Studies show that **approximately 60% of people with dementia will fall each year**, often resulting in significant morbidity (Taylor et al., 2019). A physical therapist can work with Joel to build strength and improve balance, significantly lowering fall risk.

3. Occupational Therapy for Daily Living and Environmental Modifications

Occupational therapy can help Joel learn strategies to navigate his home safely and establish structured routines, reducing confusion and helping preserve independence. This is especially beneficial in the moderate stage of Alzheimer's.

4. Speech Therapy for Cognitive-Communication Support

While commonly overlooked, **speech-language pathologists can address the cognitive-communication decline** in Alzheimer's patients, helping to maintain social engagement and improve safety awareness (American Speech-Language-Hearing Association [ASHA], 2023).

5. Caregiver Education and Support

Joel's wife will receive training on safe mobility assistance, medication management, and managing behaviors like agitation or confusion—helping delay institutionalization and reducing caregiver stress.



Why Timely Referral Matters

Patients like Joel often go too long without receiving necessary care at home.

According to recent data, only **15% of patients with dementia receive home health care in the early stages of functional decline**, despite evidence that early intervention leads to **lower hospitalization rates and improved quality of life** (Grabowski et al., 2022).

Early referral is key to maximizing benefit, delaying disease progression, and preventing caregiver exhaustion.

Next Steps

If your patient with Alzheimer's shows signs of declining function, missed medications, fall risk, or caregiver burden—refer to home health care. Our interdisciplinary team is trained to help patients like Joel safely remain in their homes while reducing the burden on caregivers.

Let's work together to provide *the care they need, at the speed they deserve.*

References

- Alzheimer's Association. (2024). *2024 Alzheimer's disease facts and figures*. <https://www.alz.org/media/Documents/alzheimers-facts-and-figures.pdf>
- Taylor, M. E., Delbaere, K., Mikolaizak, A. S., Lord, S. R., & Close, J. C. T. (2019). Gait improvements in response to rehabilitation are associated with changes to striatal dopamine in people with Parkinson's disease. *Neurorehabilitation and Neural Repair*, 33(8), 609-618. \
- American Speech-Language-Hearing Association (ASHA). (2023). *Dementia and speech-language pathology*. <https://www.asha.org/Practice-Portal/Clinical-Topics/Dementia/>
- Grabowski, D. C., Stevenson, D. G., & O'Malley, A. J. (2022). Use of home health services among older adults with dementia: Results from a national sample. *Health Affairs*, 41(3), 385-392.