

# TOUGH DECISIONS

*A Bethesda geriatric care manager helps families confront the challenges of aging*

BY CARALEE ADAMS | PHOTO BY LISA HELFERT

**IT COULD BE A** call from someone wondering what to do when her mother is released from the hospital, where she is recovering from a broken hip. Or a retiree who just received a medical diagnosis and wants to know how he can continue living at home as his condition progresses.

As a geriatric care manager and registered nurse in solo practice, Anita Rothwell helps seniors and their families make decisions about eldercare. Her work can involve crisis management, long-term care planning and even mediation as she guides families through a process that can be difficult and emotional. After assessing a client's situation, Rothwell presents options that may include modifying a home to make it safer for an older resident—such as installing grab bars in a bathroom—arranging for in-home care, or moving an individual to a long-term care facility.

"I tell my clients I will give them the best information I have based on my knowledge and experience, and it may be what you don't want to hear, but that's my job," says Rothwell, 61, of Bethesda. "Then I can help walk alongside them as they're trying to make these decisions and navigate the challenges of aging."

Last year, Rothwell worked with a man who lived out of state and came to stay with his daughter because of the pandemic. The daughter traveled for work and didn't want to leave him home alone, but she didn't think he would consider moving to an assisted living facility. So Rothwell served as a mediator. The man told Rothwell he was interested in making the move to assisted living, but had concerns that he felt more comfortable discussing with her than his daughter. He wondered whether he would be able

to come and go as he liked, Rothwell says. Eventually she helped him find a place that fit his needs.

Rothwell is among a growing number of geriatric care managers—also known as aging life care professionals—who are often licensed nurses or social workers. She received her bachelor's degree in nursing at the University of Texas at Austin and earned her Master of Science in nursing at The Catholic University in Washington, D.C. She worked as a nurse at Georgetown University Hospital, Kaiser Permanente and a private neurology practice before entering the field of care management 12 years ago. In 2014, she started her own business, Rothwell Care Management, and now serves clients in lower Montgomery County and Northwest D.C.

Rothwell says the pandemic has created unprecedented problems for older people in need of care. "Patients and families have been pushed into making decisions about health care without a lot of preparation. I've had to have a lot of difficult conversations," says Rothwell, who has been consumed with finding ways to keep clients safe at home and to deal with their isolation. With hospitals and long-term care facilities limiting visitors, she is often serving as the link between patients, families and health care providers. Once vaccines became available, she began helping clients and caregivers secure appointments.

"I've lost a lot of clients in the past year," says Rothwell, who has attended many funerals on Zoom. "I am optimistic about the future now that we've got vaccines. I feel like there's a light at the end of the tunnel, and it's not a train coming at me." ■

Anita Rothwell, right, with her client Choko Sumiyoshi, a retired nurse

## IN HER OWN WORDS...

### READING THE TEA LEAVES

"On my initial visit, I'd ask for a tour of the house and if the person minded making me a cup of tea. You can get a lot of information out of that—you can see how they walk, navigate steps, what their memory is like. [They] have to remember to fill the kettle, turn the stove on and off. There are a lot of steps. Since the pandemic, I've had to be innovative. Now, I often do video visits."

### ON THE SAME TEAM

"If you can get everyone together—even if it's a phone conference call—I find people have their parents' best interests at heart...only they have different ideas about how to get there. By talking to them, you can find out a son might be the person to do the finances, or the daughter might be good at interviewing caregivers. Everybody has different strengths. I try to get people to work together to help their parents, rather than working against each other."



## DOLLARS AND SENSE

"When someone wants to stay in their home, but the children want them to move into a senior community, I often talk about the pros and cons. Usually there is a financial component, and I recommend that they work with their financial adviser to go over what they can afford. Looking at their financial interest is as important...as the care they receive. Somehow having a third party who is looking at the facts can help a family make the decision."

## THEIR LAST WISHES

"This past year, I frequently had to have the difficult conversations with clients and adult children about their parents' advanced directives—almost daily—especially because of the virus. [The children] might have had to go to the hospital and make a decision about whether or not their parents should be intubated. The hardest part of having power of attorney is to abide by a person's wishes and not what you want to do."