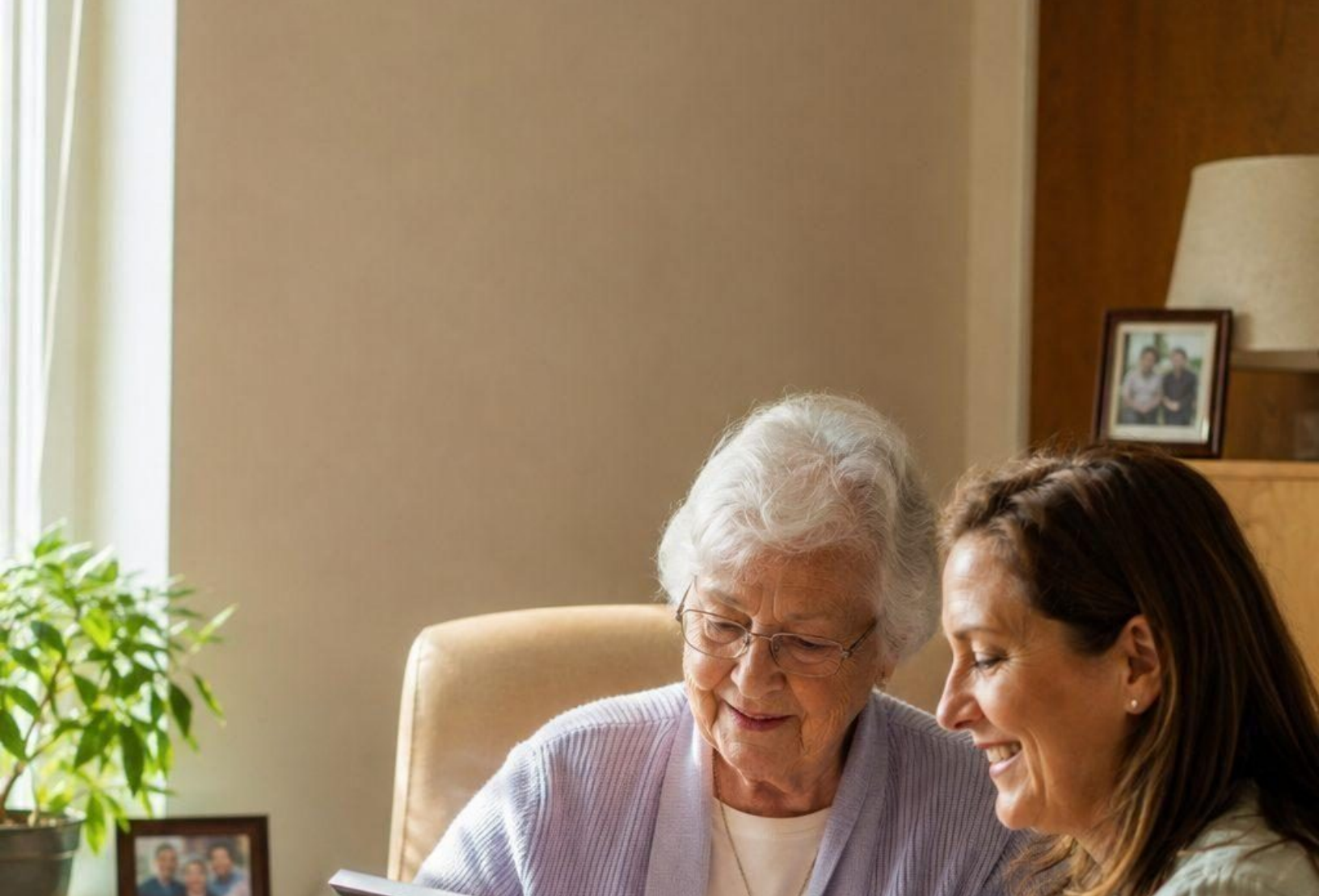




FAMILY TRANSITION

MOVING INTO SENIOR CARE

A family checklist for preparing, moving, settling in, and protecting the person's routines and identity

“A move changes the address, not the person.”

A PRACTICAL GUIDE FOR

Families | Caregivers | Older adults | Senior-care
teams



SECTION 1

Before the move

A CLEARER WAY FORWARD

When possible, include the older adult in decisions and begin preparing before a crisis. If the move is urgent, focus first on safety, medications, legal documents, and the information staff need to provide care.

Confirm the fit

- ☐ Review the assessment, services, staffing, costs, contract, and discharge criteria
- ☐ Ask how current medical, mobility, dementia, and behavioral needs will be managed
- ☐ Confirm the move-in date, room, transportation, and first point of contact

Gather records

- ☐ Medication list, allergies, diagnoses, providers, pharmacy, insurance, and recent orders
- ☐ Advance directive, health care representative or power of attorney, and code-status documents if applicable
- ☐ Emergency contacts and copies of identification and benefit cards

Keep originals safe

Provide copies unless an original is specifically required. Ask the community which documents and physician orders must arrive before admission so the move is not delayed.



SECTION 2

What to bring

A CLEARER WAY FORWARD

A familiar, uncluttered room is usually more helpful than trying to recreate an entire household at once. Measure the space and follow the facility's safety rules.

Daily essentials

- ☐ Comfortable, washable clothing and shoes for the season
- ☐ Glasses, hearing aids, dentures, mobility devices, chargers, and labeled storage cases
- ☐ Preferred toiletries if permitted

Familiar identity

- ☐ Family photographs, a favorite blanket, artwork, faith items, books, music, or a familiar chair
- ☐ A simple life-story page with preferred name, routines, work, hobbies, family, pets, and dislikes
- ☐ Items that support current interests and meaningful activity

Ask before packing

- ☐ Medications, over-the-counter products, supplements, food, appliances, extension cords, candles, and sharp items
- ☐ Large furniture or anything that blocks safe movement

Protect valuables

Leave expensive jewelry, large amounts of cash, irreplaceable documents, and fragile keepsakes at home unless the community has a secure plan. Photograph and label belongings according to policy.



SECTION 3

Moving day

A CLEARER WAY FORWARD

Keep the day as calm and predictable as possible. The goal is not a perfect goodbye. The goal is a safe handoff and a beginning that feels personal.

Plan the timing

- ☐ Choose the person's best time of day when possible
- ☐ Avoid arriving during shift change or a rushed meal unless the community recommends it
- ☐ Have the room and essential items ready before the person arrives

Make the handoff personal

- ☐ Introduce the primary staff contact
- ☐ Review urgent health information, routines, communication needs, and calming approaches
- ☐ Confirm how the family will receive updates and who may make decisions

For a person living with dementia

Use simple, reassuring explanations that match the person's ability to understand. Avoid arguing or repeatedly forcing details that increase distress. Bring familiar items, share effective calming approaches, and let staff know which words, routines, and people feel safe.



SECTION 4

The first week

A CLEARER WAY FORWARD

Adjustment can include relief, sadness, anger, confusion, fatigue, or repeated requests to go home. One difficult day does not automatically mean the placement is wrong, but concerns still deserve attention.

What family can do

- ☐ Ask how sleep, meals, medications, toileting, pain, mood, and participation are going
- ☐ Visit in a way that supports the resident, adjusting timing or length based on the person's response
- ☐ Share small details staff can use to create comfort and connection

What to observe

- ☐ Is the call light, water, mobility device, and needed sensory equipment within reach?
- ☐ Do staff use the preferred name and explain care?
- ☐ Are new symptoms, injuries, medication changes, poor intake, or distress being communicated?

Create one communication lane

Choose a primary family contact when possible. Keep a shared question list and avoid giving conflicting instructions to staff. Know who to call for nursing, billing, activities, dietary needs, social services, and urgent concerns.



SECTION 5

The first 30 days

A CLEARER WAY FORWARD

The first month is a time to compare the plan on paper with the person's actual daily life and make reasonable adjustments.

Review the care plan

- ☐ Ask when the assessment and care-plan meeting will occur
- ☐ Bring the resident's priorities, routines, risks, abilities, and goals
- ☐ Clarify who is responsible for each follow-up item and when it will be reviewed

Review the practical details

- ☐ Check bills, pharmacy arrangements, laundry, transportation, appointments, and personal funds
- ☐ Confirm equipment and therapy orders
- ☐ Update the contact list and emergency plan

Look for patterns

Document repeated concerns rather than relying on one snapshot. Sudden confusion, weakness, trouble speaking, severe breathing difficulty, chest pain, a serious fall, or another urgent change requires immediate medical attention.



SECTION 6

Adjustment, emotion, and advocacy

A CLEARER WAY FORWARD

A move can be the safest decision and still feel like a loss. Families and residents may need time, support, and honest space for mixed emotions.

Support identity

- ☐ Keep meaningful roles, faith practices, music, hobbies, and relationships present
- ☐ Ask what the person still wants to do for themselves
- ☐ Notice strengths and successful moments, not only problems

Build a partnership

- ☐ Share concerns specifically and respectfully
- ☐ Ask what staff are observing across shifts
- ☐ Request a care-plan meeting when needs or approaches are not working

Get outside help when needed

The Long-Term Care Ombudsman can explain rights and help residents work through concerns in nursing homes, assisted living, and similar settings. For immediate danger or a medical emergency, call 911.



SECTION 7

Quick checklist and sources

A CLEARER WAY FORWARD

Use this final review before move-in and again during the first month.

Before arrival

- ☐ Care level and costs confirmed
- ☐ Admission documents complete
- ☐ Medication and medical orders coordinated
- ☐ Room measured and belongings labeled
- ☐ Family and facility contacts exchanged

After arrival

- ☐ Routines and preferences shared
- ☐ Care-plan meeting scheduled
- ☐ Bills and pharmacy reviewed
- ☐ Questions documented and followed up
- ☐ Resident's voice included

National Institute on Aging

How to Choose a Long-Term Care Facility
What Is Long-Term Care?

Additional trusted tools

Medicare Care Compare
Eldercare Locator
Long-Term Care Ombudsman Program

Important

Educational information only. Admission requirements, medical orders, contracts, payment rules, and personal-property policies vary. Confirm the plan directly with the receiving community and the person's health care professionals.



A note from Leah

Senior care can feel complicated, especially when decisions have to be made quickly. I created Navigating Senior Care with Leah to give families and caregivers clear information, practical questions, and a steadier next step.

Use this guide as a starting point, keep the person's voice at the center, and reach out when you need help organizing the options.



LEAH | NAVIGATING SENIOR CARE WITH LEAH

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