



## Solo Wise Handbook

(My Pathway towards Autonomy, Independence, and Peace of Mind)

For many people, starting their Action Plan is the biggest challenge. Let's take the bull by the horns and begin this process together. Remember that the plan will change over time!

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**Please fill in the blanks for these questions. Or, when pertinent, provide “yes” or “no” responses**

**No one else will see the answers in your handbook. It is designed to help you determine where you are on the solo aging path towards fearless solo aging!**

# My Board of Directors

## 1. Financial Foresight and Preparation

My Financial Planner is: \_\_\_\_\_

Contact Information: \_\_\_\_\_

or

I need to identify a Financial Planner to review my finances

Who can I ask to help me find a Financial Planner? \_\_\_\_\_

My Financial Planner will help me to: (Please modify this list if needed)

- Understand my financial status
- Discuss the money I have available for care
- Review my financial allocation in my portfolio to determine if it is appropriate
- Review contracts for retirement communities

What else do I need my Financial Planner to help me with? \_\_\_\_\_

What is my biggest concern about finances?

Write down all concerns: \_\_\_\_\_

Do I have Long Term Care Insurance?

Company: \_\_\_\_\_

Benefits of the Plan and how to trigger it: \_\_\_\_\_

Who can help me plan if I am concerned about my ability to finance my future needs?

What attributes am I seeking in my Financial Board of Director? \_\_\_\_\_

My net worth is: \_\_\_\_\_

My income is: \_\_\_\_\_

Notes: \_\_\_\_\_

**2. Legal Preparation**

My attorney is: \_\_\_\_\_

Contact Information: \_\_\_\_\_

I need to select an attorney who is either an Elder Law Attorney or Estate Attorney  
Who can I ask to make this referral if I don't have one? \_\_\_\_\_

I have a Durable Power of Attorney for Health Care and Finances  
Date of Inception: \_\_\_\_\_

Name(s) of person or people who hold this position \_\_\_\_\_

I have a Will and a Living Will:  
Date of Inception: \_\_\_\_\_

I will explore a POLST and discuss it with my doctor  
I will speak to my doctor by \_\_\_\_\_

- My Attorney will help me to: (Add to this list if appropriate)
- Make sure my affairs are in order
  - Maintain contact information on my power(s) of attorney, Financial Planner, friend(s) on my Board of Directors
  - Be available to review contracts related to Retirement Communities

\_\_\_\_\_

What other questions do I have for my Attorney? \_\_\_\_\_

\_\_\_\_\_

What is my biggest concern about legal issues related to my Estate?  
Write down all concerns: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What attributes am I seeking in my Attorney? \_\_\_\_\_

\_\_\_\_\_

Notes: \_\_\_\_\_

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### 3. Care Decisions: Aging Life Care Partners - Professionals and/or Friends

One of the most important members of your Board of Directors will be the person or persons who will accompany you through the aging process. This role will be ongoing and resemble the role of a surrogate family member who has reviewed your Action Plan in detail and knows you on an ongoing basis. They will be at your beck and call whenever the need arises.

My Aging Life Care Partner(s) (ALCP) is/are: \_\_\_\_\_

My Aging Life Care Partner must have the following attributes: \_\_\_\_\_

\_\_\_\_\_

Contact Information of my ALCP: \_\_\_\_\_

I have reviewed my Action Plan with them on (date) \_\_\_\_\_

I will meet with my ALCP on the following schedule

Semi-Annually \_\_\_\_\_

Quarterly \_\_\_\_\_

Monthly \_\_\_\_\_

Whenever needed \_\_\_\_\_

My ALCP's Role will be to: (To Be Designed by You - examples are below)

- Coordinate meetings with other members of my Board of Directors
- Come to my side 24/7 in case of an emergency such as hospital admission
- Work in concert with others who are serving the same role
- Understand the financial implications of this role whether paid or gratis
- Hold copies of my power of attorney, Will, Polst, Advance Directives
- Have a clear understanding of what I want and don't want in terms of care
- Has a full understanding of my health history and is aware of my health providers
- Has the capacity to work with others on my Board of Directors
- May or may not be my power of attorney of health care and finances
- Is chronologically assumed to be capable of carrying on the role over time

My Ideas about the Role of my ALCP: \_\_\_\_\_

\_\_\_\_\_

Should I consider an Aging Life Care Professional, friends, or both? \_\_\_\_\_

## 4. Housing Plans

Determining where to live is a key component of your peace of mind. The Solo Aging at Home Check-List will help you establish your readiness to determine what to consider about remaining in your current home.

The Solo Aging at Home Check-List:

- Can my home be adapted safely and cost-efficiently should I develop a disability?
- Do I have a support system and network of resources to help me age in my current home?
- Can I afford at-home care?
- Do I have a no step entry?
- Do I have a one floor living design and/or a bathroom and bedroom on the first floor?
- Are my hallways extra wide?
- Do I have electric outlets and switches that can be accessed from a wheelchair?
- Do I have lever style handles on doors and faucets?
- Do I have a means for transportation if I am unable to drive?
- Do I have a shower with grab bars rather than a bathtub?
- Can I afford to remain in my current home and provide for the other services and modifications I may need in the future?

I have investigated the modifications needed to my home and have learned the following about the costs.

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The cost to modify my home is: \_\_\_\_\_

The Village Movement is a non-profit member organization that includes comprehensive support and social involvement to help seniors remain in their homes.

Is my home within a village program community? \_\_\_\_\_

### House Sharing

This option allows seniors to safely share their home with another individual.

I have researched this option via agencies within my geographic area and learned the following:

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### A Continuing Care Retirement Community:

I have explored CCRC's and a Life Care Plan option. Yes\_\_\_\_ No\_\_\_\_

I have visited the following communities:

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When Aging in Place Doesn't Work

How will you know when you can no longer remain in your home?

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Moving to a supportive care community

When does a move to an assisted care community make sense?

What have I learned about assisted care?

What does assisted care cost in my area?

How will I judge the quality of an assisted care community?

How I will know if I require an assisted living community vs. a nursing home?

What are the criteria for a move to a nursing home?

What qualifies me for a nursing home?

How do I judge nursing home quality?

Discovering Other Moving Options:

Will a move to a warmer climate make sense for me?

I have considered a move to be closer to family. What are my thoughts about it?

Moving Abroad and the Steps I Have Taken:

- I have checked into local government taxes
- I have rented in the region in different areas of the country
- I have participated in online chat rooms for expats
- I have considered the costs of visiting the United States and possible home sickness
- I am comfortable with speaking English in a country with a different language. I am open to learning a new language.

- I have researched age-related immigration laws and understand them.
- I have newspapers and other local publications on my country of interest.
- I have explored online sites with reports from expats related to life in my potential adopted country.
- I am aware of the health care system and the criteria to benefit from it.
- I have a plan to tie up my life in the USA before I move.

## 5. Emotional Readiness

I have inoculated myself from loneliness by doing the following:

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Who can I call when I'm feeling down?

What organizations do I belong to?

I belong to a religious community and I participate in the following activities?

I have a psychotherapist/counselor. That person is:

I have a support group. Who participates in my support group?

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I have tried Telehealth. Yes\_\_\_\_\_ No\_\_\_\_\_

I believe that I have outlets for my emotional concerns, and I do the following:



## Mind/Body Strategies for Solo Pioneers

I exercise \_\_\_\_\_times a week.

I participate in Mindfulness Meditation      Yes\_\_\_\_\_      No\_\_\_\_\_

I drink about \_\_\_\_\_ quarts of water each day

I have received the following immunizations:

Covid\_\_\_\_ (How many?)

Pneumonia\_\_\_\_\_

Flu\_\_\_\_\_

RSV\_\_\_\_\_

Shingles\_\_\_\_\_

My diet consists of:

Fruits and vegetables\_\_\_\_\_

Plant based\_\_\_\_\_

Fish\_\_\_\_\_

Red meat\_\_\_\_\_

Chicken\_\_\_\_\_

Oils (what type of oil?)\_\_\_\_\_

I am on a specific diet regimen? \_\_\_\_\_ If so, what type of diet?\_\_\_\_\_

I get \_\_\_\_\_hours of sleep in an average night

I have or may consider dating. \_\_\_\_\_

My concerns about dating are:

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I actively protect yourself from sexually transmitted diseases (STD's)? \_\_\_\_\_

I know how to avoid scammers\_\_\_\_\_

I engage in activities that bring me joy. If so, what are these activities?

I have implemented end-of-life planning? \_\_\_\_\_

I have prepaid for my funeral\_\_\_\_\_

Does your Board of Directors understand your end-of-life plan and have they been instructed how to carry out these plans?

Notes:\_\_\_\_\_

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Thoughts:\_\_\_\_\_

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Feelings:\_\_\_\_\_

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***“Action is the antidote to despair”***  
-Joan Baez

