Case Scenario

The referral source called and reported the following information via the abuse hotline:

"Ms. Georgía Thomas is being physically abused by her son. She is currently living alone in her home, even though she is essentially bedridden. Her son is supposed to be providing care to her as the designated caregiver."

Additional Information gathered at intake:

- Ms. Thomas is 78 years old
- Ms. Thomas is diagnosed with high blood pressure, paraplegia, left-sided weakness from a recent stroke.
- The bed has feces and urine stains, the home has a noticeable foul odor.
- It is believed that she has lost a significant amount of weight over the past several months because of a lack of adequate food.

The APS worker found Ms. Thomas in the home alone, n a hospital bed, totally dependent on others for

Intake Decision

Ms. Thomas meets the definition of adult since she is 78 years old, has a physical dysfunction (paraplegia, left-sided weakness) that is impairing her ability to meet her activities of daily living and she may be in need of protective services.

This referral will meet screening criteria for caretaker neglect since she reportedly has a designated caregiver and has been losing a significant amount of weight from a failure to provide adequate food.

The report is assigned to the APS team that covers the county where Ms. Thomas resides.

care. In an emergency, she could not have left the house unaided. The client was basically alert, but somewhat confused. The son and daughter-in-law worked outside the home during the day. Water and food were left at the bedside within Ms. Thomas' reach. Home Health nurses visited three times weekly, but the client was alone in the house for extended intervals. During the evenings, family members were in an out of the house to meet the client's care needs. At night, the grandson slept in the house and was available to provide care until he left for an 11 a.m. class.

Ms. Thomas suffered from bladder and bowel incontinence and had a bed sore on her buttocks. She

Investigation/Assessment Decision

After conducting an interview with Ms. Thomas, her son, other family members, medical providers and reviewing medical records the APS worker through consultation with the supervisor substantiated caretaker neglect. This decision was based on the preponderance of evidence that as the caretaker, Ms. Thomas' son deprived Ms. Thomas of services that were necessary to maintain her health and welfare. This was evidenced by the Ms. Thomas being found home alone, unable to self-evacuate in an emergency situation (fire), family admitting to leaving her alone for extended periods of time against the doctor's advice and significant weight loss related to inadequate nutrition.

This case was closed at the request of Ms. Thomas as she and her family believed that they have established appropriate expectations now for her care. The APS worker offered an aftercare plan that would provide additional guidance and support if needed. could feed herself but needed much encouragement to eat or drink. She had suffered dehydration in the past.

The family thought they were doing the right thing and the son admitted that he had been advised by medical professionals that she required adequate supervision and that he agreed to be her caretaker. The APS worker explained to them the areas of neglect (supervision, food, medical needs from wounds associated with incontinence). Together, they developed a plan that addressed the need for continuous supervision, adequate nutrition and hydration, and frequent repositioning of the Ms. Thomas to promote good skin condition.

In addition to conversations with the family, the APS worker collected medical records and conducted interviews with the home health agency.

DISCLAIMER This case scenario is not based on specific individuals or situations that have been investigated or assessed by APS.