

Case Scenario

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

"Ms. Fiona Tamus, a 64-year-old, is currently bed bound and does not have any help. She lives alone as her husband passed away three years ago. It is unknown if she has any family. She is not able to get groceries, medications, take a bath or any other activities of daily living. A neighbor has been kind enough to bring food over twice a day, but this is not sustainable. During the last visit, the neighbor reported that there was a strong smell emanating from Ms. Tamus. When questioned, the neighbor said that it smelled like an infection that is not being treated."

The APS worker attempted to visit with Ms. Tamus at her home with no success. Given the nature of the allegations, the APS worker contacted the referral source to see if there was any chance the neighbor could assist in initiating the referral.

The APS worker was able to visit with Ms. Tamus in her bedroom after the neighbor assisted with getting permission to come in to the home. Ms. Tamus was alert and oriented during the interview. Based on a questions, it appeared that Ms. Tamus still had her decisional capacity. Ms. Tamus understood that she was neglecting her needs, but that she was extremely worried about going to the hospital because her husband died in a hospital after going for something they thought was minor.

After taking some time building a rapport with Ms. Tamus, the APS worker was able to convince her that it would be in her best interest to at least get checked out by EMT. Ms. Tamus allowed the APS worker to contact emergency services. EMT evaluated Ms. Tamus and determined that she did have a bed sore that was extremely infected and would require hospitalization. She agreed to go to the hospital.

Investigation/Assessment Decision

After conducting an interview with Ms. Tamus and reviewing medical records, the APS worker through consultation with the supervisor substantiated self-neglect. This decision was based on the preponderance of evidence that Ms. Tamus was not accessing necessary services to maintain her health and welfare. This was evidenced by Ms. Tamus being found home alone, unable to self-evacuate in an emergency situation (fire), and a severe infection related to a pressure ulcer.

This case was closed at the request of Ms. Tamus as she was able to get the medical care that was needed to assist her in being self-sufficient once again. The APS worker offered an aftercare plan that would provide additional guidance and support if needed.

Intake Decision

Ms. Tamus meets the definition of adult since she is 64 years old, has a physical dysfunction (unknown diagnosis, but bed bound) that is impairing her ability to meet her activities of daily living and her health may be declining (as evidenced by the strong smell, possible infection) and she may be in need of protective services.

This referral will meet screening criteria for self neglect since she unable to obtain services that are necessary maintain her health and there has been an observable decline in her health.

The report is assigned by the intake worker to the APS Team that covers the county where Ms. Tamus resides.

The APS worker followed up with Ms. Tamus at the hospital after she was admitted to a room. Ms. Tamus was able to get her wound addressed, as well as some testing to determine why she was unable to get out of the bed. The tests revealed a medical condition that required surgery and some therapy.

The APS worker obtained and reviewed medical records from the hospital.

Ms. Tamus spent some time at a rehabilitation facility and regained her ability to walk. Ms. Tamus returned to her home where she was able to meet her needs again independently.