

Case Summary of Mrs. B.

APS team made an initial unannounced home visit to this 78-year-old client in response to referral for investigation of self-neglect. We could not gain access to her condo unit without the assistance of her next-door-neighbor who holds a key to the unit. Client is most often unlikely to get out of bed and unable to ambulate sufficiently to reach the front door. She was lying in bed fully clothed upon our arrival. She explained that she had been unable to sponge-bathe for at least 4 days. She apologized repeatedly for the condition of her hair and stated that she frequently urinates on herself due to prescribed diuretics and her inability to get to the bathroom in time. She is not wearing Depends. Her home was cluttered with neatly piled personal items which did not block our access to her. It is a one-bedroom condo unit in which she has resided for the past 35 years, the past 13 of them alone, since her husband's death. She owns the unit but pays \$401/month for the condo fee.

The home was odorous; and the client explained that she is unable to launder her clothes, so has been throwing them away when soiled. She hand-washes her underwear. She was oriented in all 3 spheres, was congenial and cooperative with interview, and communicated coherently and in a goal-directed fashion. She hails from Charlottesville, VA and spent a lot of the interview time telling stories about her Southern heritage and how she and her spouse first met. She suffers from osteoarthritis, glaucoma, chronic pain, high cholesterol, and hypothyroid. She had bilateral edema of the legs and feet, as well as cellulitis. Her toenails were long and looked rotted. She said she has a hard time getting up from her bed and spends most of her time there. She complained today of muscle spasms in her back, she guesses the result of her recent fall. She has difficulty getting around in the kitchen and cannot cook; so she says she has been eating mostly canned soup. She was not underweight. Per client, she has not seen a doctor since she saw her PCP a year ago. She had a cane next to her bed. Client has medical insurances. She has some savings from an on-the-job injury settlement for her deceased husband as well as receives Social Security survivor's benefit and \$400/month from his civil service pension. While the client has a large immediate family, she only wanted team members to contact her grandson Robert, whom she says she has made the sole recipient in her will. Client said she speaks with her grandson weekly but has not permitted him to visit her at home because she is so embarrassed that she is unable to keep up with her condo. She is the youngest of 6 children herself, now having lost all of her siblings. The client receives ongoing supportive assistance from a group of neighbors, one of whom does her grocery shopping and another who keeps her key and frequently comes by to "tuck (her) in,"

Client is in need of medical care as soon as possible. It was difficult, though, to even persuade her to consider a home visit from a visiting doctor. She repeatedly insisted that she would not permit a physical exam, finally agreeing when we assured her that there would be no internal exam done and that the physician is a white female. She is also in need of physical therapy which would best be delivered in an inpatient rehabilitation setting. Client said that she would not even consider leaving her condo for a day; and that her sister died in a rehabilitation hospital. Team explained to the client that she needed a physical exam by a doctor before an order could even be written for in-home PT. Client was seen by a visiting doctor for a full physical and, thereafter, referred to a nurse practitioner for follow-up. She was prescribed pain medication as well as visiting nurse, PT & OT. Nursing visits are in progress as of the date of this case closing and PT is scheduled to begin soon thereafter. Client rejected OT services. She rejected home health/personal care, stating she did not need assistance. She told the home health agency it was because she did not want an African American aide in her home and all of the aides are African American. Case was closed with the outcome of indicated self-neglect. Client is not currently in need of any further APS services and risk was reduced.