

APS Intake Examples

#1:

Allegation: R/S states that Ms. Montezuma is an elderly 83 year old woman that lives alone at Blue Lake Apartments. It is reported that Ms. Montezuma is originally from Iraq and was widowed several years ago. She doesn't speak much English and has no friends or family to assist her. Caller states that Ms. Montezuma was seen wearing a wool coat last week in 80 plus degree heat while on the bus to the grocery store. She only eats canned meats and seems very frail. Neighbors report that she leaves her windows open all the time regardless of the weather and is overheard talking to herself a lot. It is unknown if Ms. Montezuma sees a doctor or the last time she was seen by one. Caller is concerned for Ms. Montezuma's health and feels that she is unsafe in her home. Caller reports that Ms. Montezuma needs nursing home placement.

Response: APS 19.3.3 Self-Neglect

Does not meet criteria for investigation. APS SOP 19.5 provides examples of referrals that may be rejected for investigation. In this referral, there is insufficient information to determine that Ms. Montezuma meets the definition of "adult" as defined in KRS 209 and as an otherwise functioning person she would not be eligible for APS investigation. While her clothing and nutritional preferences may not be optimal and her lack of routine medical care not recommended, these are viewed as lifestyle choices regardless of how they may or may not impact her health, safety and well-being.

#2:

Allegation: Lucy Carr is a resident of Happy Hills Rest Home, a skilled nursing facility. Ms. Carr is unable to ambulate independently and is incontinent of bowel and bladder. On Sunday, Ms. Carr was in the dining hall eating dinner when she soiled herself. A witness reported that Certified Nursing Assistant, (CNA), Marcia Gay who was assisting with another resident seated at the table asked Ms. Carr if she had had a bowel movement by asking in a loud angry tone "did you mess your pants again Lucy? You have got to be kidding me, that is the last time I bring you out to dinner. You'll just have to sit in it until we are done eating. You ought not be allowed out of your room if all you are gonna do is stink up the place". Ms. Carr started to cry and apologized for the accident. Later in the evening Ms. Carr was observed to be in her room crying and declined to join other residents for a prayer meeting, an event that she normally participates in.

Response: APS SOP 19.3.2 Adult Abuse-Mental Injury

Meets acceptance criteria for investigation. Adult mental injury is the infliction of mental anguish caused by actions or verbal assaults against an adult's well-being that may result in an adverse change in behavior in the adult. The abuse can be spontaneous, protracted or systemic efforts to dehumanize the adult while instilling fear.

#3:

Allegation: Mr. Cathy is a 98 year old resident of Oak Hills Rest Home. Until recently he resided in his own home with his adult son Robert. Facility reports that Mr. Cathy is in arrears for over \$14,000.00 and is requesting that APS file for state guardianship so payments can be recieved. Attempts to contact Mr. Cathy's son Robert have not been successful. Nursing home feels that Mr. Cathy is being exploited by his son. A discharge notice has not been issued at this time.

Response: APS SOP 19.3.5 Exploitation *Does not meet criteria for investigation. While unpaid bills may be an indicator of financial exploitation, alone it would not meet criteria. There is no allegation that Mr. Cathy's son is improperly using his father's resources for his own profit or advantage or is doing so by force, misrepresentation, threats, coercion or deception. Historically the threshold for APS involvement in a referral similar to the one above is determined by when or if the provider issues a formal notice of discharge to the resident due to non-payment. When this occurs the allegation may be viewed as a form of suspected caretaker neglect in that the adult's responsible party's failure to ensure payments for the provision of care has resulted in the adult's discharge and loss of service needed to maintain the adult's health and welfare.*

#4:

Allegation: JC-3 states that KSP arrived on scene and observed injuries to both subjects. Female subject reported that her live in boyfriend had been drinking all day and accused her of cheating when he came at her with a hunting knife, pinning her against the bedroom wall and holding the knife against her throat. She fought back and was able to free herself running to a neighbor's house and calling 911. Male subject reported that his girlfriend became hysterical during an argument and attacked him while he was sharpening his knife. He denied any wrongdoing. Female subject has visible red marks on neck and arms. Male subject had a scratch mark on his face. Both subjects arrested for Assault 4th.

Response: APS SOP 19.3.6 Spouse/Partner Abuse

Meets acceptance criteria for investigation. A physical assault that results in physical pain or injury perpetrated against a spouse/partner by a spouse/partner warrants a protective service investigation. While identifying a primary aggressor in reports of mutual violence is not easy to discern, the SSW should make every effort to do so and avoid any further victimization of the actual victim of domestic violence. Keep in mind that victims of domestic violence may inflict physical injuries on their abusers in defending themselves from an assault.

#5:

Allegation: Rena Warner is a 51 year old woman with type II diabetes and a history of alcohol dependency. On 9/19 she had a hysterectomy and while in recovery she complained that she could not feel her right arm. This information was given to the physician and Ms. Warner was referred to a neurologist prior to discharge home. The neurologist did not respond until 6 hours after surgery and Ms. Warner had to spend another night in the hospital. The neurologist diagnosed her with radial nerve palsy. The radiologist told the family that the patient's radial nerve was crushed during surgery. Ms. Warner is receiving physical therapy with no improvements. She requested her medical records two weeks ago and has not received it. Feels like the hospital is giving her the run around. Caller states that hospital neglected Ms. Warner.

Response: APS SOP 19.3.4 Caretaker Neglect

Does not meet criteria for investigation. APS SOP 19.5 provides examples of referrals that may be rejected for investigation. While Ms. Warner's physical functioning may or may not impact her ability to protect herself from abuse, neglect or exploitation or carry out the activities of daily living without the assistance from others, the allegation of "neglect" as defined in KRS 209 does not apply here and the nerve damage caused by surgery and the difficulty accessing hospital records should be viewed in the context of a medical malpractice or regulatory complaint respectively, and not an APS matter.