

Fall Class 3 Case Studies and Additional Slides

Case study discussion

- Each break-out room will have a unique case study to review and discuss for 30 minutes.
 - One person volunteer to read the case study out loud for the group.
 - One person volunteer to report back on discussion.
- What tools would you consider using and why?
 - What steps would you take to support testing environment?
 - What questions would you ask to explore capacity?
 - What follow up would you recommend?

If you have extra time, discuss any tools you've used and what you've found helpful/challenging, etc.

Akiko: DPOA, financial decisions

- Presenting concern: Daughter overwhelmed, called because she found her mother's DPOA document done 20 years ago was never signed, attorney said to get assessment before re-doing documents. Daughter has questions around financial decisions, sharing of home expenses vs compensation for care tasks.
- Akiko is an 80yo Japanese American woman. Born and raised in Japan, while in college there she married an American serviceman and had a daughter then they came to Seattle in the 1970s. Akiko's husband died over 10 years ago. She has some difficulty with English but seems to understand nearly everything and speaks hesitantly, needing help with certain words at times. Her daughter not fluent in Japanese but often acts as interpreter at medical appointments.
- Akiko lives in a large 3-story home in Ballard which she and her husband bought after his retirement. The ground-level garden apartment was a rental unit until last year, when her daughter and her children moved in so they could all help each other (daughter's husband is in military on submarine, away 2-6 months at a time, home up to a month between, but that may change – their kids are 6 and 8 years old).
- At your arrival, she is friendly and gracious but doesn't want to get up. Introduces daughter but has harder time with grandkids names. She is a lifelong Mariners fan, says she watches "every game" but can't recall if season started already or not.
- Financials: Akiko owns her home and has substantial assets, income is at least 4000+/mo – she can't recall exactly. Akiko is agreeable to have her daughter's help but "thought my husband arranged everything already before he died." Akiko wants to pay daughter for helping her; daughter says she doesn't want to take advantage and doesn't know what would be fair.
- Diagnoses: 2020 severe covid hospitalization, dementia diagnosed later that year. Prior osteoporosis, hypothyroid, bilateral knee replacements, chronic pain.
- Medications: thyroid, calcium, vitamin D, vitamin B12, ibuprofen, topical diclofenac gel for pain.

Beverly: will, DPOA, financial, independent living

- Beverly is an 82 year old widowed woman, recently hospitalized for pneumonia, now in nursing rehab for functional decline, unsteady gait, weight loss, and difficulty swallowing. History: diabetes, hypertension, coronary artery disease, heart failure.
- She has been living alone last 7 yrs in a senior independent living apartment. She is on the third floor and the only elevator is often out of service.
- Only daughter lives nearby and is very involved, more in last few months, helping more with things at home, cleaning, etc. At mom's request, daughter is driving her to store and appointments, and helping her pay bills.
- Daughter has also noticed slow weight loss. Beverly states she has never been a big eater but admits lower appetite. Since the pneumonia, she has had poor activity tolerance and requires frequent rest periods.
- Her chief complaints are fatigue, poor appetite, leg weakness, and nonproductive cough. She appears frail, though alert and cooperative. She is in no apparent pain or distress sitting up in a wheelchair.
- Unit reports normal vitals/sats, some swelling legs/feet. Weight 107 pounds, height 5'4" so slightly underweight. On physical, occupational, and speech therapy.
- Meds: aspirin 81 mg/day, metoprolol 50 mg twice per day, furosemide 40 mg/day, potassium chloride 20 mEq/day, metformin 500 mg twice per day, levofloxacin 500 mg daily for five more days, and nebulizer lpratripium/albuterol every four hours as needed.
- Beverly can't remember her medications but recognizes them when listed, and says she will need help with organizing meds at home.
- In initial questioning, Beverly was unable to recall her income or typical bills or how they were paid. She said she is still driving and doesn't need much help from her daughter but appreciates her support. Beverly said she needs to do a will as she did not do one when her husband died 10 years ago, but she doesn't understand why facility wants her to do DPOA and advance directive – says daughter helps her and they "shouldn't need any documents to do that."

Carlos: independent living, driving

- Presenting concern: Son wants him to move to assisted living and thinks dad is “incompetent” – son has DPOA and wants to sell condo he owns that his dad has lived in for past 12 years.
- Carlos is an 83yo Hispanic male, widowed, fairly fluent but not native English speaker. Has lived in WA since high school years. He didn’t graduate but got his GED.
- He has one son – had a daughter who died of uterine cancer with kidney disease. His son, who is named as his DPOA agent, lives in Oregon and visits a few times a year.
- Carlos lives alone in a 2-bedroom condo that his son owns in a larger community with townhome style buildings, with lots of stairs and no elevators.
- Carlos is still driving, which his son is upset about – there are some dents and dings on the car but he denies having any accidents.
- Financials: Income Social Security 1000/mo. Savings about \$4000.
- In discussion at visit, you commented the condo has lots of stairs. He insists he is fine on the stairs as there are railings on both sides and he’s never fallen there – only fallen on flat areas, getting into/out of bed or car.
- He has a housecleaner come in once a month and is friendly with his neighbors – they often socialize and have dinners together. He spends most mornings at coffee shop on corner from condo with a few older gentlemen neighbors.
- Diagnoses: history of vertigo, which Carlos said “comes and goes” – multiple falls, only a couple resulted in injuries needing stitches, but no concussion/CVA (per son who checked records). Uses a 4-wheeled-walker but sometimes forgets, and that’s when falls happen.
- Meds: metformin 500mg, levothyroxine 100mcg.
- Carlos doesn’t want to move to “an old people home” – son retorts that many of his neighbors and guys at the coffee shop are younger than he is and some of them have moved already.

Our next classes/events

November 5	<i>Email your case studies to me!</i>
November 12	Case studies and discussion, and next steps for your work
November 19	Collaborative Working Group Kick-Off 11am-12pm Pacific time, on zoom

Seattle area: Saturday Nov 1 event



Legacy of Love African American Caregivers Forum Registration

This Saturday, November 1, from 10am-3pm
at the Northwest African American Museum
2300 S Massachusetts Street
Seattle, WA 98144

Pre-register to receive event updates
and follow-up info:
tinyurl.com/caregiversforum2025

November 3 – court observation

- Monday, November 3 – around 1pm
- King County Superior Court, 516 Third Avenue, Seattle 98104
- 8th floor, Judge Liu – courtroom number will be on monitors.
- I won't be able to chat much, but you're welcome to observe.

Online: UW SW Innovations in Aging Series

- Thursdays, 12:30 - 1:30 PM on Zoom (Pacific time)
 - Meeting ID: 932 1649 9536 Passcode: 973329
 - Join by phone : 206.337.9723
- November 6th – CHANGES AT THE LAST MINUTE: Family Dynamics at the End of Life. With Wendy Lustbader, MSW.
- November 20th – TRANSGENDER AGING: What Trans Elders Need from Social Workers. With Marsha Botzer, MA.

For fun:

- <https://survey.pesi.com/networker-celebrity-quiz>