

ELDER ABUSE SCENARIOS FOR NURSING STUDENTS

- 1) A 75-year old man with pulmonary fibrosis is admitted for pneumonia. As you are going towards his room to give him his medications, you hear his partner say to him in a nasty tone of voice: “Stop being so stubborn. I need you to give me access to your bank accounts. You’re going to die alone unless you start cooperating.” As you enter the room, the young man leaves quickly and you notice that the patient has tears in his eyes. You ask if everything is OK and the patient shakes his head “Yes”, but doesn’t say anything. After administering the medication you leave, but the exchange between them keeps re-playing in your head.

Are any signs of elder abuse present? *Threats of abandonment if the patient doesn’t cooperate.*

If yes, what types of elder abuse should the nurse be suspicious of? *Emotional, potential financial.*

What actions could the nurse take? *The nurse could talk to his/her supervisor; talk to the social worker on staff; talk to the patient when he is not upset (ask the Hwalek-Sengstock questions); report suspicions to Adult Protective Services.*

What action should the nurse not take? *The nurse should not investigate her suspicions by talking to other family members or friends that visit the patient. The nurse should not accuse the young man of elder abuse either to the patient or to the young man himself. The nurse should not play a mediator role between the patient and his partner even if asked to.*

What if: *The patient had said “No” when you asked if everything was OK?*

- 2) A 93-year old bed-bound woman comes to the emergency room alone by ambulance. She is experiencing severe abdominal pain. While interviewing her, she asks that someone contact her son who lives with her. She doesn’t know where he is nor does she know how to contact him. You learn that they live alone in an apartment. During the physical exam, you notice bruising on her right inner thigh.

Are any signs of elder abuse present? *Bruising: though the patient is bed-bound she was apparently left alone during the day.*

If yes, what types of possible elder abuse should the nurse be suspicious of? *Sexual, physical, neglect*

What actions could the nurse take? *The nurse could talk to his/her supervisor; talk to the social worker on staff; talk to the patient (ask the Hwalek-Sengstock questions); report suspicions to Adult Protective Services.*

Continued on next page

This is part of the “**Elder Abuse Training for Nursing Students**” **Nurse Educator’s toolkit**, created by the Center of Excellence on Elder Abuse & Neglect and the Program in Nursing Science at University of California, Irvine. **Download materials for free**—visit www.centeronelderabuse.org, click “**by Professional Discipline**” and “**Nursing**”

What action should the nurse not take? The nurse should not investigate her suspicions by talking to other family members or friends that visit the patient. The nurse should not accuse the son of elder abuse to the patient or to the son himself. The nurse should not play a mediator role between the patient and the son even if asked to.

What if: there was no bruising?

- 3) You are a home health care nurse supervising the care of a 56-year old woman who has multiple sclerosis. You have heard from the aides that they feel intimidated by the woman's husband. He loses his temper easily with them and with his wife and when he does he yells and uses foul language to all around him. He doesn't seem to understand that his wife can no longer do the things she used to be able to do. He tells you that he is resentful of his wife and her illness. One day an aide tells you that she noticed bruising on both of the wife's upper arms. The husband refuses to let you talk to the wife by herself.

Are any signs of elder abuse present? Yelling, bruising, refusing to let you speak to the wife in private, expressing of resentment, lack of understanding of the wife's medical condition.

If yes, what types of possible elder abuse should the nurse be suspicious of? Emotional, physical

What actions could the nurse take? The nurse could talk to his/her supervisor; talk to the social worker on staff; talk to the patient (ask the Hwalek-Sengstock questions); report suspicions to Adult Protective Services.

What action should the nurse not take? The nurse should not investigate her suspicions by talking to other family members or friends that visit the patient. The nurse should not accuse the son of elder abuse to the patient or to the husband himself. The nurse should not play a mediator role between the patient and her husband even if asked to.

What if: there was no bruising? The husband allowed the nurse to speak to the wife privately? The wife tells you that he has always been a "yeller", but that nothing bad is going on?



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