



CASE STUDY: Social Work Connects Frail, Elderly Couple with LIFE Program



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An elderly couple was referred to the population health social worker by their primary care physician. This married couple in their 70s were referred due to inconsistent use of medication, uncontrolled diabetes and the potential need for home health and oversight/assessment of living conditions. The husband also suffered from hypertension, and the PCP also suspected dementia. The husband had a craniotomy at another hospital for which the reasons were unclear; the PCP was trying to trace those records. The couple's granddaughter was their paid caregiver.



Intervention

The population health social worker spoke with the wife about their living situation; the wife insisted that their home health services (from their paid caregiver granddaughter) were sufficient. Community health worker (CHW) services in the home were offered and the couple reluctantly agreed. The social worker contacted the Philadelphia Corporation for Aging and learned that PCA had assigned the wife a case worker and that an adult protective services report had been filed previously.

The CHW tried multiple times to contact the couple but was denied access to the home, so the CHW contacted an out-of-state daughter who holds power of attorney to convey the doctor and social worker's concerns. The daughter expressed doubts about the care her parents were receiving through the paid caregiver program. The CHW arranged for a LIFE* program liaison to consult with the social worker and daughter.



Results

After an increase in concern for the patients' well-being, their daughter was encouraged to have a candid conversation about their future health expectations. The LIFE liaison completed the referral with permission from the daughter. Their enrollment paperwork was completed and the couple entered the LIFE program. Since entering the Mercy Life Program, the patients have had no hospital admissions or ED visits. They remain active in Mercy Life.

* A Federal PACE program, LIFE provides low-income seniors with the medical care and non-medical support they need to remain in their homes.