



USC GWEP Project ECHO Elder Abuse Identification and Clinical Management in Primary Care

Session 5: Clinical Response to Issues in Guardianship: a Conversational Approach

Presented by:
Bonnie Olsen, PhD
Laura Mosqueda, MD
July 8, 2022

Keck Medicine
of **USC**



Keck School of Medicine of **USC**
Geriatric Healthcare Collective

NCEA
National Center on Elder Abuse
1-855-500-3537
ncea.acl.gov

Welcome

Objectives

- Assess for and respond to elder abuse with special consideration for patients with dementia
- Create culturally sensitive & patient-centered interventions for patients who have experienced abuse
- Apply knowledge of decisional capacity and ethics of intervention in elder abuse

Agenda for Today

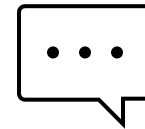
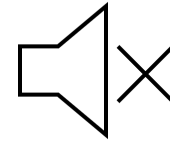
Time	Description	Presenter
5 mins	Introductions & Housekeeping	Dr. Bonnie Olsen
50 mins	Clinical Response to Issues in Guardianship	Dr. Laura Mosqueda

USC Project Echo Team

Bonnie J. Olsen, Ph.D.	Professor of Clinical Family Medicine Vice Chair for Research Department of Family Medicine	bonnie.olsen@med.usc.edu
Laura Mosqueda, M.D.	Professor of Geriatrics and Family Medicine Director, National Center on Elder Abuse Keck School of Medicine	laura.mosqueda@med.usc.edu
Christina Penate, MFT	Clinical Research Program Manager	christina.penate@med.usc.edu
Erin Thayer, MPH	GWEP Research Assistant	erin.thayer@med.usc.edu
Carmen Van Den Heever, B.S.	GWEP/ ECHO Project Coordinator	carmen.vandenneever@med.usc.edu
Lenord Chen	NCEA Technical Project Specialist	yu-hao.chen@med.usc.edu

Housekeeping

- Please use your name and job role as your profile name on screen.
- Please keep yourself on **mute** for didactic session
- For questions during didactic session please use the chat feature. Tech issues should be addressed to Lenord Chen
- Primary Care Providers: Please turn your camera on during the case discussion
- Please remember confidentiality and **DO NOT** disclose any patient PHI





The role of Primary Care in Guardian/Conservator Processes

Laura Mosqueda, M.D.

Bonnie Olsen, PhD

Game plan

- Review
 - Guardianship
 - Conservatorship
 - Trust
 - Advance Directive
 - Wills
- Case scenarios
- Discussion

Guardianship, Conservatorship

- When someone is no longer able to handle his or her own financial or personal affairs, the court can appoint an individual or professional to act on behalf
- Definition of terms varies among states
- Process
 - Someone petitions court to become a conservator and explains rationale
 - Court investigator is assigned and reports back to court with an opinion
 - Family and interested parties are notified and may testify
 - Petition is set for hearing and the proposed conservatee appears unless medically unable to do so
 - Judge determines if conservatorship is justified and if there should be special powers
 - Annual financial review

Trust, Advance Directive, Wills

- Trust:
 - legal document made when the person has capacity and assigns successors who will take control if/when the person lacks capacity
 - Typically provides written directions to the trustee
 - Triggered when two qualified professionals sign a note that says the person lacks capacity
- Advance Directive
 - Provides direction on wishes if one becomes incapacitated and designates an agent who has authority to speak on your behalf
 - Power of Attorney for Health Care
 - Power of Attorney for Finance
- Wills

Example 1: Mr. McC

- 82 year old White man with life-long hoarding issues
- Estranged from family
 - Wife died many years ago
 - 1 daughter and 1 son, both are successful and neither live close by
- Veteran; gets medical care from VA
- Hoarding has gotten much worse, there is extreme filth, city is threatening to close the house, and APS has concluded moderate/severe self-neglect
- Daughter and son are considering applying for conservatorship

Example 2: Mrs. H

- 78 year old woman from the Philippines presents with memory problems and requests work up, accompanied by her daughter
- Evaluation reveals probable Alzheimer's Disease at an early stage
- Family: 5 adult children, 11 grandkids (14 to 31 years of age)
- During the family conference to discuss the diagnosis
 - What might you discuss in order to prevent an abusive situation?
 - How would you approach the conversation?
 - Is it an inappropriate conversation to have at this time and with so many people present?

Example 3: Mrs. T

- Mrs. T is a 94 year old Hispanic woman with moderately advanced dementia brought in to see you by her daughter
- The daughter reports the following about her Mom:
 - Mom owns her home and car outright along with rental property that provides a very good income
 - She has a lot of money in a savings account
 - She has never made a will, trust, or PoA
- During the visit the daughter pulls you aside to say her brother has taken advantage of their mother's confusion and is stealing. She asks you to support her plan to become legal guardian in order to protect her mother

Survey

Please take our 1 minute survey using the QR code below or the link in the chat



Thank you! 

For more information: please visit <https://gwep.usc.edu/echo>

This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U1QHP28740, Geriatrics Workforce Enhancement Program for \$3.5 million. This information or content and conclusions are those of the author and should not be construed as the official position or policy or, nor should any endorsements be inferred by, HRSA, HHS or the U.S. Government.

Keck Medicine
of USC



Keck School of Medicine of USC
Geriatric Healthcare Collective

NCEA
National Center on Elder Abuse
1-855-500-3537
ncea.acl.gov