

Case Scenario: Mr. Y

Mr. Y is an 86-year-old Korean American male who lives in his own apartment condo in Makiki. Mr. Y was born in Honolulu Hawaii and moved to Maryland so his father, a Korean freedom fighter against the Japanese, could pursue political support for the state of the South Korean government. Their family moved back to Oahu after his father became editor of the Korean Herald newspaper in Honolulu. Mr. Y attended public school and graduated from Roosevelt High School and later with honors from University of Hawaii at Manoa. Mr. Y's early career was with the IRS first in Honolulu, where his three children were born and then in Washington where he received a master's degree in public administration. He returned to Honolulu and worked for the University of Hawaii in high profile positions related to the development of the Community College system. He has been retired for the past 21 years.

Mr. Y's first wife passed away from cancer after their first grandchild was born, which was a huge blow to the entire family. He later remarried a childhood friend Mrs. W. Despite all his personal accomplishments, Mr. Y seems most proud of his family, and continuously mentions various grandchildren in conversation. His daughter and youngest son are still alive today, as well as seven grandchildren and two great grandchildren. His second wife Mrs. W is a resident in a nursing facility nearby as she suffers from vertigo which affects her ability to balance and perform daily activities. She has been a resident for the past 3 months ever since she fell in their home and broke her hip. Mr. Y is a practicing Catholic and prior to her fall attended weekly mass with his wife.

Mr. Y began to have trouble breathing with heart palpitations and chest pain. He called his son-in-law who then called 9-1-1 for an ambulance. Mr. Y was treated at his home by first responder technicians but refused to be taken to the hospital by ambulance. First responders described his mental state to be distressed but lucid. Client was able to coherently describe his physical condition and was taken to the Kaiser Medical Center Moanalua Urgent Care by his son-in-law who arrived 5 minutes after the ambulance. Upon initial intake, Mr. Y was admitted to the hospital after worsening symptoms of chest pain and labored breathing were observed. After examination by doctor, a chest x-ray and echocardiogram were administered which uncovered a leaky mitral valve, and significantly blocked pulmonary artery were discovered. Mr. Y was diagnosed with hypertension along with multiple transient ischemic attacks (TIAs) which are believed to have begun about two years ago. These conditions have been managed through medication; however, because his TIAs are sporadic, mild, and do not last long, so tracking them has been difficult.

After further consultation with a cardiologist, open heart surgery to replace the valve and insert a stent was recommended. Both Mr. Y and his family members were made aware of the risks involved with open heart surgery particularly with Mr. Y's advanced age and pre-existing heart conditions. Mr. Y elected to have the surgery after a similar second opinion from another cardiologist and went through successful surgical procedures two weeks after his diagnosis. This was a hard decision to make since oldest son passed away six months ago which was also a very significant loss for Mr. Y as well as the rest of the family. While in the recovery ward at Kaiser, Mrs. W, in order to have Mr. Y closer to her, pressured family members and his current hospital social worker to have him transferred to the nursing facility she resides in. Mr. Y's youngest son who has power of attorney has reservations about moving his father too soon or to the "wrong facility" and contacted the hospital social work department to ask about his eligibility for placements and support services. Multiple members of the family help him as part-time caregivers and are very adamant that consideration is given mainly to what Mr. Y wants and is very open to hearing alternative plans for his care.

Client has an Advance Care Directive and has appointed his son as Durable Power of Attorney. Hospital SW reviewed the directives with client before the elective surgery. SW will review the current directives with client and family members present to make sure it is in line with the client's wishes moving forward. The hospital social worker shared that they will work with Mr. Y's care team along with the family to prepare a reasonable timeline and care plan to accommodate his recovery needs post-surgery. Because Mr. Y has an extensive support network of family members, the social worker will both keep all relevant parties abreast of his current circumstances, but to also have an individual planning session with Mr. Y to confirm he is aware of his care plan and consents to treatments and services to maintain self-efficacy.

Discussion Questions

- Do you resonate with this scenario in any way?
- What strengths and resources does Mrs. N have?
- What are the different people and systems influencing Mrs. N's situation?
- What problems can you identify in this scenario? What are ways of addressing them?