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# **SCENARIOS**

**Do not share.**

**Instructions:**

**Read these scenarios and refer to them as you answer questions 1 through 31.**

**STEVEN SCENARIO:        QUESTIONS 1-16**

**MICHELLE SCENARIO:    QUESTIONS 17-31**

**You may separate these pages if you wish.**

**Please dispose of this packet after submitting your CST.**

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**SCENARIO: STEVEN**

**APPLIES TO QUESTIONS 1-16**

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<b>Name:</b>	Steven
<b>Age:</b>	53
<b>Current Verified Diagnoses:</b>	Spinal cord injury, autonomic dysreflexia, neurogenic bladder, hyperlipidemia, neurogenic bowel, and depression.

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Steven has a spinal cord injury from a car accident that happened when he was 40 and, as a result, Steven has no use of his limbs, including his hands. Steven does not have a cognitive impairment.

Steven lives in his own home with his sister, Shelly. He has had numerous modifications made to his home, including ramps on the outside of his home, power door openers, and a walk-in shower with a built-in tub bench. Steven has his caregivers assist him with bed baths daily, as that is his preference. Due to his spinal cord injury, he needs assist to dress/undress upper and lower half of body. Steven gets around his home independently with the use of a power wheelchair which he is able to control with his tongue. Steven has a suprapubic catheter that his caregivers irrigate daily to prevent the tube from plugging. He goes in to the urology clinic every 3-4 weeks to have this changed. Steven is on a daily bowel program consisting of a suppository and digital stimulation. Steven prefers to use a bedpan for his bowel movements. Even though Steven's bowel program is effective, he has issues with bowel incontinence occurring about once a week. Caregivers use a Hoyer mechanical lift for all transfers.

Steven depends on his sister Shelly for assistance with grocery shopping and all meal preparation due to his spinal cord injury. Steven and Shelly go grocery shopping once a week. Steven prefers to go along and decide what food to purchase for the week. Due to his spinal cord injury, and no use of hands, Steven has his caregivers put his medications into his mouth and assist with a drink. Steven is knowledgeable about his medications and takes medications three times a day. Steven has issues with autonomic dysreflexia from his spinal cord injury and damaged nerves. This is a potential medical emergency in which Steven exhibits high blood pressure, racing heart rate, anxiety, and a severe headache. Steven typically experiences these signs of autonomic dysreflexia when he has a bladder infection or is constipated. At the onset of these symptoms, Steven needs his caregivers to check his blood pressure and administer medication if his blood pressure is elevated. Steven typically needs his caregivers to check his blood pressure and administer this medication once a month.

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Steven pays some of his bills online, but relies on Shelly to help him write checks when they are needed, such as the monthly rent check. When he makes purchases at a store, he asks the cashier to get his cash or his debit card out of his backpack.

Steven uses a voice-activated telephone to make and receive calls. He depends on a van service for transportation as he no longer drives due to his physical disabilities, which he arranges using his adapted phone. He had hoped to drive himself using an adapted vehicle, but having no use of his limbs or hands made it impossible for him.

Steven spends some of his days volunteering as a motivational speaker, going to various universities and rehabilitation centers. Other days, he watches television while in bed and spends time visiting with friends. Overnight, he relies on Shelly to help him with repositioning every 2-3 hours and, if needed, bowel incontinence care. Steven has a verified diagnosis of depression and once a month, he meets with his therapist. Steven reports his mood has been stable with therapy and medication.

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**PLEASE USE THIS SCENARIO TO RESPOND TO QUESTIONS 1-16.**

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**SCENARIO: MICHELLE**

**APPLIES TO QUESTIONS 17-31**

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**Name:** Michelle

**Age:** 41

**Current Verified Diagnoses:** Autism and hypertension

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Michelle has a cognitive impairment due to her autism. She lives in an adult family home (AFH) with one other housemate. Jackie and Dan are the AFH owners.

Due to the cognitive impairment related to her diagnosis of autism, Michelle needs some assistance with her ADLs and IADLs. She prefers to take a shower on the days that she works (Mon, Wed, Fri, Sat). She's able to initiate the task, get in and out of the tub, turn the faucets on and off, and dry herself. The AFH owners report they do need to cue Michelle to use soap to wash her body and hair, and they check to ensure that she rinses all of the soap out of her hair. Due to her autism, she is hypersensitive to the feeling of soap and water touching her body. Michelle is able to use the bathroom on her own, but with her sensory difficulties, she needs reminders to wash her hands.

She has a steady gait and ambulates safely without any assistance. Due to her autism, she does become anxious out in the community or around large crowds and, in these instances, she tends to walk very fast and does not always look where she is going, requiring cues to slow down.

Michelle is independent with all components of meal preparation, except that she needs assistance with grocery shopping. She will often go along with Dan or Jackie when they go grocery shopping, and she helps with finding items and putting them in the cart. But due to her autism, she can get overwhelmed and anxious trying to retrieve the food, so Jackie and Dan help her as needed.

Once a week Michelle's brother, Rick, comes by to assist Michelle with budgeting her money and paying her bills. After they have finished that, Rick drives Michelle to the convenience store, as Michelle is unable to drive due to her cognitive impairment. Michelle likes having \$20 in her wallet and likes to use this to independently purchase soda and treats.

Jackie and Dan say Michelle is very helpful around the house but, because of her cognitive impairment, she does require cues to remember to do her laundry once a

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week. She independently cleans up after meals and takes care of all her dishes. Michelle also helps to shovel snow in the winter.

Michelle works 20 hours a week at the local hardware store, where she bags items, empties the garbage cans and keeps the entrance swept and tidy. Michelle enjoys going to work, but gets overwhelmed when customers approach her with questions. About weekly, she gets so overwhelmed that she loses track of her job duties and needs Mike or Jennifer, the store owners, to help her.

Michelle takes Lisinopril for her hypertension, and every morning she takes it independently right after eating breakfast. Due to her cognitive impairment, she does need her medication to be set up for her, otherwise she does not know if she has taken a pill or not, and would either miss a dose or take 2 doses. The pharmacy delivers 2 weekly medication boxes at a time and Michelle knows which box to use when.

Maintaining routine is critical to Michelle, due to her autism. Part of her routine is exercising every evening, which she says helps her to feel healthy and strong. It also helps reduce any anxious feelings. She walks outside with Jackie or Dan when the weather is nice and has access to an exercise bike at the AFH that she uses during the winter months and bad weather.

At times Michelle's routine is disrupted. When this occurs, she becomes anxious, which can lead to her slamming her bedroom door and refusing to participate in activities. This behavior happens one to two times per month according to Jackie. She and Dan try to minimize any change in routine, and they rely on interventions outlined in her informal behavior support plan when a disruption in routine does occur.

Also due to her autism, Michelle compulsively picks and scratches at her forehead, which can aggravate a recurring open area. Michelle has required medical attention in the past when the open area has become infected. She has a prescribed PRN antibiotic ointment to help prevent infection when she reopens the area, which happens once every other month. To discourage her from picking at her forehead, Jackie and Dan ensure Michelle's fingernails are trimmed short, she wears a baseball cap, and they try to keep her busy by offering activities such as reorganizing her baseball card collection or helping out around the house. These interventions occur 1-2 times per day and are incorporated into Michelle's daily routine. Without these interventions in place, Michelle would be at risk for injury and infection.

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**PLEASE USE THIS SCENARIO TO RESPOND TO QUESTIONS 17-31**