

Programme:	BSc Health and Social Care	
Module:	Living with Care: The Older Person	
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Introduction

- In this presentation I will talk about what older people require to feel happiest using the Maslow's hierarchy of needs. Furthermore, I will also talk about what kind of support is available for old people in several places. For example, care homes, home cares, hospice. Moreover, euthanasia: What are laws governing this in the UK and other countries and how they compare with one another, including, arguments for euthanasia and arguments against euthanasia as well to see both point of views.

Palliative Care

- What is palliative?
- Palliative care is an applied discipline to medical care that aims to improve quality of life and lessen suffering in patients with severe, complex, and frequently terminal illnesses.
- End of life care should help you to live as well as possible until you die and to die with dignity.



(Age UK, 2019)
(Marie Curie, n.d)
(NHS, 2018a)

Care Home

- What is a care home?
- Why is it important for old people?



(Age UK, 2018a)
(NHS, 2019)

Home Care

- What is home care?
- What services are available?



(Age UK, 2018b)

Hospice Care



What is hospice care?



Where can hospice care be received?

(Medical news today, 2020)
(Hospice UK, no date)

The gap between need and availability of end-of-life care.

- The care of the dying is a crucial component of medicine.
- The medical profession as a whole, as well as individual doctors, must be dedicated to providing competent, compassionate care to patients who are dying and their families.
- Patients have a right to expect that their doctors will take care of them and support them with their medical needs as they approach death.
- Not enough care available for the number of patients especially after the pandemic.

Planning for end of Life- Living wills

- An earlier choice would be crucial if a circumstance developed where you were unable to talk or make your own decisions.
- Even if refusing medical treatment might cause you to die, you have the right to do so.
- The individuals who are looking after you have to respect a prior decision since it is legally binding.
- It won't be implemented, though, until you are unable to make or communicate decisions about your care.

(Healthline, 2022)

(NHS,2018b)

Do Not Resuscitate (DNR)

- A do-not-resuscitate (DNR) order is a doctrinal directive that must be followed when a patient requests it. If you abruptly fall into cardiac arrest or cease breathing, it serves as a signal to medical personnel that you do not want to be revived.
- A DNR is frequently viewed as a dignified approach for terminally ill people to leave the world on their terms. The specifics of a DNR are typically covered when someone is admitted to a hospital, nursing home, or hospice programmer.

(Morrow, 2019)
(MedlinePlus, 2018)

What is Euthanasia?

- The deliberate taking of another person's life for their ostensible good is known as euthanasia. It can be either voluntarily done or not. Euthanasia involves one person (typically a doctor) taking another person's life (their patient).
- The act of helping another person commit suicide is known as assisted suicide.
- In the UK, euthanasia and assisted suicide are both prohibited. Only 14 nations worldwide (about 7% of all nations) permit assisted suicide and/or euthanasia. Eg: Belgium, Holland, Luxembourg etc.
- Making euthanasia and assisted suicide legal is unfair to those who are most at risk in our nation and may put pressure on them to terminate their lives.

(RightToLifeUK , 2022)

(NHS, 2020)



Type of Euthanasia

(Garrard, and Wilkinson, 2005)
(Gutierrez Castillo, and Gutierrez Castillo, 2018)
(Brassington, 2020)

- Passive Euthanasia

Euthanasia is the deliberate taking of life by another person who acts only in the deceased's best interests. Keep in mind the difference between motive and intent.

- Active Euthanasia

In active euthanasia, the patient is purposefully and physically killed. Instead of ending the patient's life, passive euthanasia simply allows them to pass away.

- Indirect Euthanasia

Hypoxemia and dehydration can be easily avoided by respirator therapy and fluid delivery in terminal sedation, a case of indirect euthanasia.

Arguments for Euthanasia

The state shouldn't enact laws that prevent people from being able to choose when and how they die, according to the ethical position that people should have the freedom of choice, including the ability to manage their own body and life (as long as they do not violate anybody else's rights).

(Shah, 2017)

(CARE, no date)

Arguments against Euthanasia

(Vivre Dans La Dignité, 2016)

(Shah, 2017)

((CARE, 2022)

(Clearchemist, 2009)

- The patient does not have a terminal illness, as indicated by the incorrect diagnosis.
- The patient won't pass away rapidly since the prognosis is incorrect.
- The patient may be given better treatment, which would lessen their pain.
- The patient may receive a variety of treatments, which the doctor is unaware of. Compared to doctors, veterinarians have five times more training in pain treatment!
- Euthanasia requests are frequently cries for assistance. The patient's true desire is to have his symptoms and concerns treated and allayed, not to pass away.
- The patient is despondent and thinks his circumstances are worse than they actually are.
- The patient still has irrational worries about potential future discomfort.

Laws Governing Euthanasia

- Euthanasia is prohibited in the UK and is prosecuted as murder or manslaughter.
- Countries where Euthanasia is legal include:
- The Netherlands
- Switzerland
- Canada
- Luxembourg
- Belgium
- Spain

(Ashford, 2021)

(Hill, 2022)

Legislation and Policy of ageing, which are relevant to older people approaching the end of their lives.

- **Many laws and policies that affect senior citizens are...**

- Human Rights Act (1998)
- The Equality Act (2010)
- The Care Act (2014)
- NHS policy- National and Regional

(Age UK, 2017)
(Age UK, 2021)
(GOV.UK, 2013)
(Mclachlan, no date)
(NHS esneft, 2022)

Theories of ageing, which are relevant to older people approaching the end of their lives.

Although they are getting older, Maslow states that this does not mean they are not able to reach the top of the hierarchy as they don't only require food, water, shelter etc to survive but also esteem, affection, love and freedom.



Maslow's hierarchy of needs

(McLeod, 2022)

Disengagement Theory

- According to the disengagement theory, older persons' withdrawal from social interactions and close connections as they get older is normal and appropriate.
- An illustration of the disengagement theory is when an older person with heart disease experiences shortness of breath and finds it difficult to continue their daily walks with their friends. The older adult will maintain less contact with friends, which could cause friendships to dwindle.

(Cram, No date)
(Social Sci LibreTexts, 2018)

Activity Theory

- It contends that maintaining older people's social engagement prevents ageing and enhances their quality of life.
- Examples of the activity hypothesis of ageing include enticing older individuals to go on group vacations and even look for a new romantic partner if they are widowed, among other things.

(Drew, 2023)

Advent of the NHS

- The Ministry of Health had to deal with the issue of 70,000 hospital beds in England being filled by chronically ill patients, whose presence could significantly inhibit the development of the new NHS.
- Large philanthropic organisations started funding gerontology research and establishing national committees for the "care and comfort of the aged poor."

Conclusion

When I first started with this presentation, I felt curious to why people would choose the option of assisted suicide. However, now after deep research into arguments for it I am more open to other peoples feelings and their point of view. Furthermore, the many theories give an insight to what older people require excluding just food and water. There was certainly a lot to take in with this presentation.

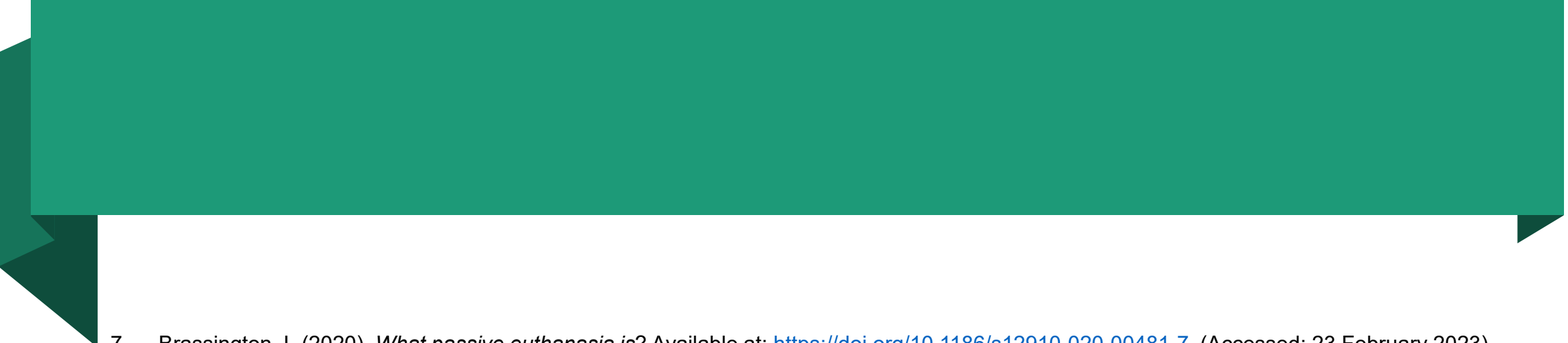
Recommendations

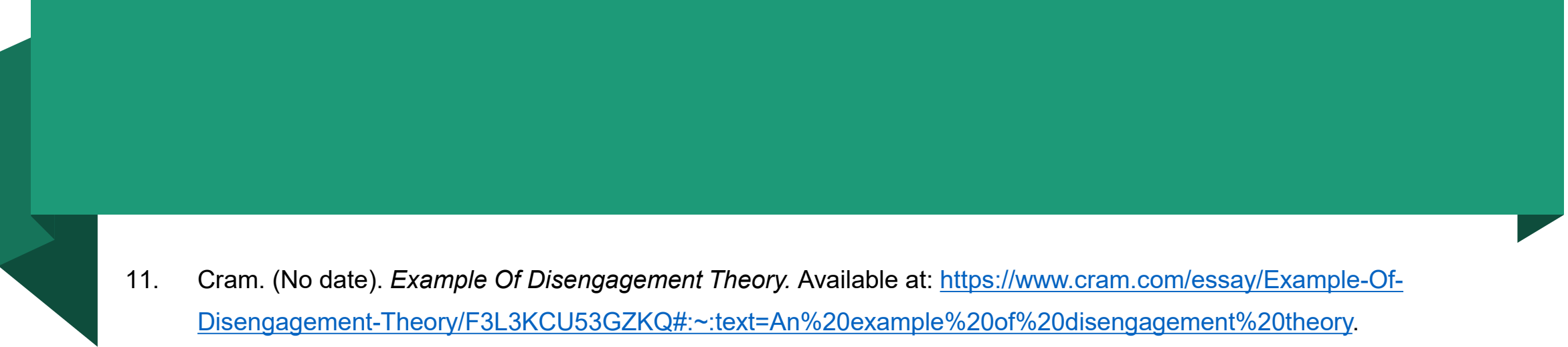
I think that Hospice should be available for everyone at the end of the life as it really has been proven to be the best form of end of life care for many people and those who receive it have also been proven to feel happier.

However, an issue with this would be there not being enough care available for the amount of patients. We can overcome this issue by hiring people who are qualified and willing abroad.

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