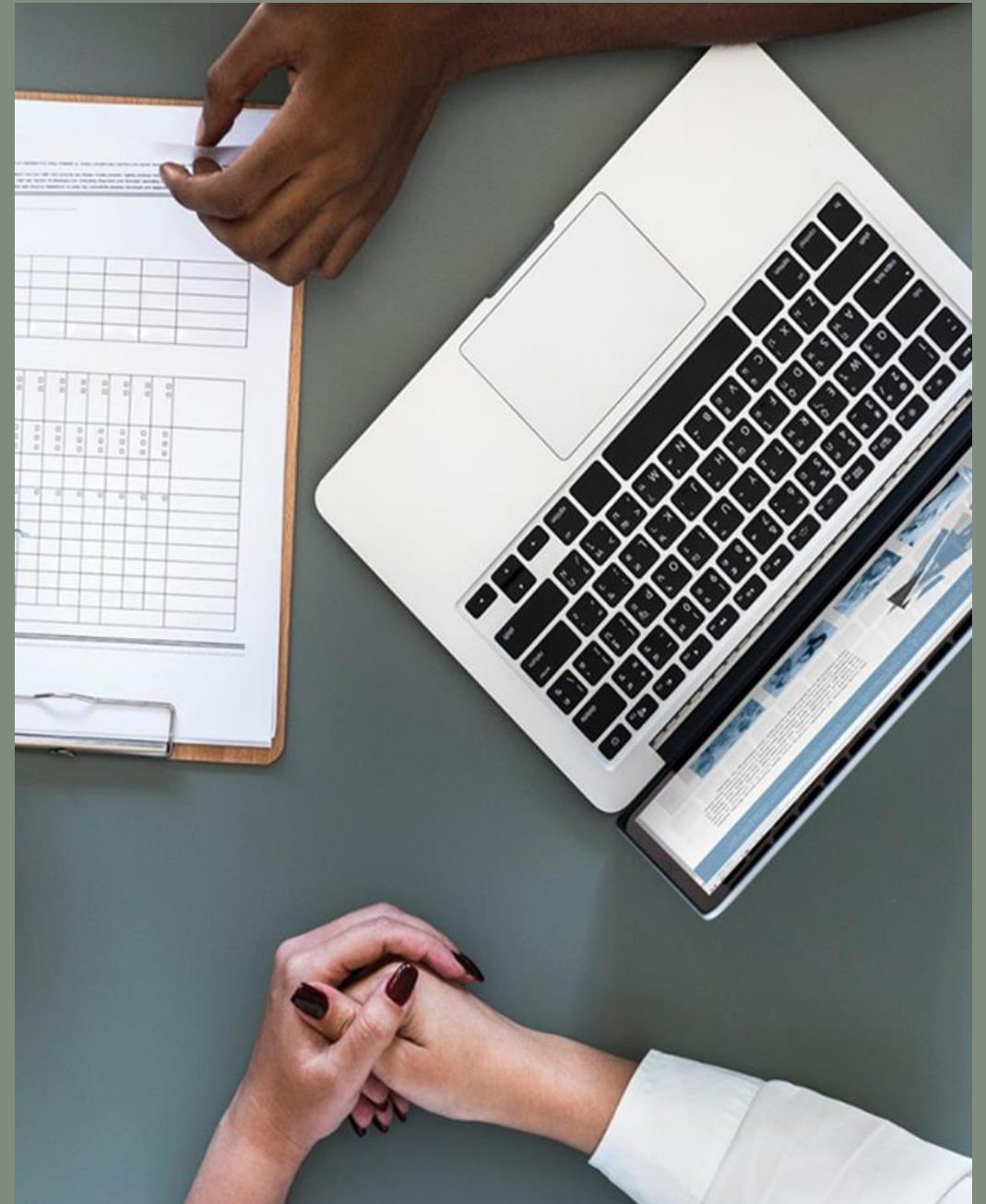




Module Code: SJSS5022
Assessment Number: 2
Student Name: Hannah Mari John
Student Number: 2302532

Who am I?

- Hannah Mari John
- 2nd Year Student
- BA Social Studies: Health and Social Care
- Completing this Assignment for the Reflective Practice Module SJSS5022

SJSI5022 Reflective Practice Case Study

Mrs A

Background summary

Ms A is a 35 year old woman, who currently lives in a residential (mental health) placement. Ms A suffers from visual impairment, renal failure, diabetes, and emotionally unstable personality disorder. She was allocated to a Social Worker in April 2015 for the purpose of conducting a Needs Assessment to assess her eligibility for services under the Care Act 2015.

When the Social Worker met Ms A, she presented as stable, and demonstrated a good insight into her health needs. She was assessed as having the mental capacity to make her own best interests decisions and demonstrated independent living skills that assured social work she could manage her own needs independently in the community.

At the time, Ms A expressed her wish to move from her family home and live in a council property to pursue independent living. For this reason, Ms A was encouraged to apply for housing through the housing department and in doing so, she became frustrated that her housing application would not be fast tracked or prioritised on the grounds that she has physical health care needs. This resulted in a rapid decline in her mental health.

Ms A's case was complex and challenging during the six month period the Social Worker was allocated to her. As a consequence of her not receiving housing on an immediate basis, she began to present challenging behaviours that was in conjunction with the effects of her emotionally unstable personality disorder and social circumstances.

The presenting issues were as follows: a breakdown in the family dynamics; both intentional and unintentional homelessness; regular hospital admission due to her non-compliance with her medication regime i.e. insulin; harassing professionals from Multi-Disciplinary Teams involved in her care; withdrawing from support services set up in her best interests; threats to self-harm and suicidal ideation; regular police arrests for anti-social behaviour, including physical and verbal altercations with others; past and current trauma associated with the death of her brother; and developing inappropriate relationships with strange men via dating websites/members of the public that resulted in financial and sexual exploitation.

Different perception of capacity by health/social care professionals

The main responsibility of the allocated Social Worker was to monitor her health and safety. This was extremely challenging due to a constant fluctuation in Ms A's mental state that impinged on her physical health and behaviours. The Social Worker was of the opinion that Ms A lacked the capacity to 'weigh up' the consequences of her decision making whilst in the midst of an episode, and therefore required specialist input from the Community Mental Health Team (CMHT) for the purpose of receiving long-term therapeutic intervention. The Social Worker's assessment of Ms A's capacity was often disputed by members of the mental health profession, whereby she was assessed as having the mental capacity to weigh up, retain, communicate and understand information over five separate occasions by either an Approved Mental Health Practitioner (AMHP), the Child and Adolescent Mental Health

Based on work by the Social Care Institute for Excellence

SJSI5022 Reflective Practice Case Study

Service (CAMHS), doctors or an independent consultant practitioner. It was made clear to the social worker that in order for Ms A to receive support from the CMHT, she would need to willingly approach their service. Despite the social worker's efforts to encourage Ms A to accept support from the CMHT, she refused to do so, on the grounds that she feared being sectioned under the Mental Health Act 1983 and did not feel she warranted the need for mental health support.

Multi-Disciplinary approach

Social services remained involved for the purpose of ensuring Ms A was in a secure place of shelter and to manage her care needs. The Social Worker sought regular guidance from her manager, and chaired safeguarding meetings to explore a multi-disciplinary approach to managing Ms A's care and support needs, involving her family, members of the health profession, the Police, Mental Health Services, the Housing Department, and Occupational Therapy.

Conflict of interest

On one occasion a Vulnerable Adults and Risk Management Meeting (VARM) was held, however there were no clear outcomes identified due to a conflict of interest between professionals who argued that Ms A had the mental capacity to make her own best interests decisions, against a duty of care to monitor her safety which did not impinge on her human rights and ethical codes of practice.

Referral to Community Multi-Agency Risk Assessment Panel (CMARAP)

Eventually, Ms A's case was referred to CMARAP on two separate occasions. It was agreed at CMARAP that Ms A's primary diagnosis concerned her mental health condition, whereby a combined state of depression and anxiety was impinging on her behaviours and resulted in her physical, emotional and psychological health deterioration. As a result of this, a case transfer was agreed between adult social services and the CMHT on the grounds that the CMHT have more appropriate housing options and specialist services to meet her immediate and long-term needs. The CMHT remain involved and it has been reported that she is currently settled at her placement.

Based on work by the Social Care Institute for Excellence

Consider the
case study and
outline the risks
and ethical
considerations
and how these
could be
overcome.

Content

- The Use of Role Play.
- Purpose of a Case Study.
- Summary of the Service User.
- Summary of the Case Study.
- What are Risks and Ethical consideration?
- Issue 1.
- Issue 2.
- Issue 3.
- Reflective Practice.
- Conclusion.

Role Play

- Acting the part of someone

(Hitchin, 2016)

- Learning Device
 - Knowledge
 - Values
 - Skills
- Preparation and Development
- Allows for Mistakes
- Finesse Professionalism

(Tufford, Asakura, Bogo, 2018; Hargreaves and Hadlow, 1997)

Social Worker

- A Social Worker is someone that aims to support and improve people's lives during difficult situations
- Identifying areas of required assistance
- To empower and promote
 - Human rights and Well-being

(Trevithick, 2009; Horner, 2009; Davies, 2008)

Case Study

- What is a case study?

‘A report based on a client, situation or organisation, written and usually shared for the purpose of learning’

(Craig, 2009, p.175)
- What is the purpose of a case study?
 - Given content
 - Participants
 - Background
 - Multi-faceted
 - Complex Issues
 - Teaching tool
 - Assessment
 - Process of Intervention
 - Outcomes of Intervention
 - Reflection

(Jackson and Thurgate, 2011; Crowne *et al.*, 2011; Craig, 2009; Runyan, 1982, cited in Gilgun, 1994).

Summary of Service User

- Summary of Service User
 - Ms A
 - Confidentiality
- 35 years old
- Visual impairment
- Renal failure
- Diabetes
- Emotionally unstable personality disorder.

(Coffelt, 2017)

(University of Wales Trinity Saint David, 2019; Social Care Institute for Excellence, 2015)

Summary of Case Study

Social Worker allocated in April 2015

- for needs assessment

Presented as stable

Case was complex and challenging

- family breakdown
- death of brother
- failure to take medication
- self-harm concerns
- anti-social behaviour
- developing inappropriate relations
- being financially exploited

Multi-disciplinary meetings

Resulted in Ms A being placed in a residential mental health placement

Risks

‘probability of harm occurring’

(Whittaker and Taylor, 2017, p. 375).

- Identify Risks
- Probability and likelihood of risk occurring
- Impact of risks
- Consequences

(Whittaker and Taylor, 2017; Seden, 2016)

- Risk posed to service user
- Risks posed to others

(Kemshall, 2013, cited in Seden, 2016)

Ethical Considerations

- Ethical awareness is fundamental
- Acting ethically means
 - ‘Respecting Human Rights
 - Promoting Social Justice’

(British Association of Social Workers, 2014)

1. ‘promote and protect service users
2. communicate appropriately and effectively
3. work within the limits of their knowledge and skills
4. delegate appropriately
5. respect confidentiality
6. manage risk
7. report concerns about safety
8. be open when things go wrong
9. be honest and trustworthy
10. keep records of their work’

(Health & Care Professions Council, 2018)

- Perception of right or wrong

(Du Bois, 2018, cited in Sobočan, Bertotti and Strom-Gottfried, 2019)

Issues discovered in the Case Study.

Wrong Legislation

- Care Act (2015) should be the **Care Act (2014)**

(University of Wales Trinity Saint David, 2019; Social Care Institute for Excellence, 2015)

Relevance of Service that would not be provided

- Child and Adolescent Mental Health Service
 - transition to adult support at either 16 or 18

(National Health Service, 2019)

Background Information

- There is no structure to establish an order of how the events occurred

(University of Wales Trinity Saint David, 2019; Social Care Institute for Excellence, 2015)

Incomplete or Inaccurate records can cause harm

(Social Care Institute of Excellence, 2019)

Risk and Ethical Consideration 1

Record Keeping

Why the Issues Occur in Record Keeping.

Not a task that many are enthusiastic about undertaking

Practitioners complain that there is too much paperwork

And not enough time to complete it

Reported that practitioners are not trained

Managers signing off on different recording styles

Delays in Recording

Been an increase in anxiety due to legislation

- Data Protection Act 1998
- Freedom of Information Act 2000

(O'Reilly, 2010)

(Kagle, 1983)

(O'Rourke, 2010)

Risk and Ethical Consideration 1

Record Keeping

The Importance of Record Keeping.

Regarded by many as an essential task

Demonstrates Good Professional Practice

Distinguish fact from fiction

Accountability

(O'Reilly, 2010)

‘clear and accurate records to defend against allegations of malpractice’

(Barsky, 2010, p.182)

Records must be available to share

- Service users
- Managers
- Multi-disciplinary Teams

(Wilkins, 2013)

Risk and Ethical Consideration 1

Record Keeping

How to Overcome the Issues in Record Keeping.

Need for training has been identified

(O'Rourke, 2010)

Use the Acronym – PARTNERSHIP

(Social Care Institute of Excellence, 2019).

Ensuring that the case notes has

- a comprehensive summary
- records should be in a chronological order

(Craig, 2009)

(Social Work Inspection Agency, 2010)

Risk and Ethical Consideration 1

Record Keeping

Death of Brother.

Elevated mental health concerns

- Emotions of anger, guilt, sadness

(Dyregrov and Dyregrov, 2008)

Stages of Kübler-Ross Grief model

- Shock & Denial
- Anger
- Bargaining
- Depression
- Acceptance

(Prigerson and Maciejewski, 2008)

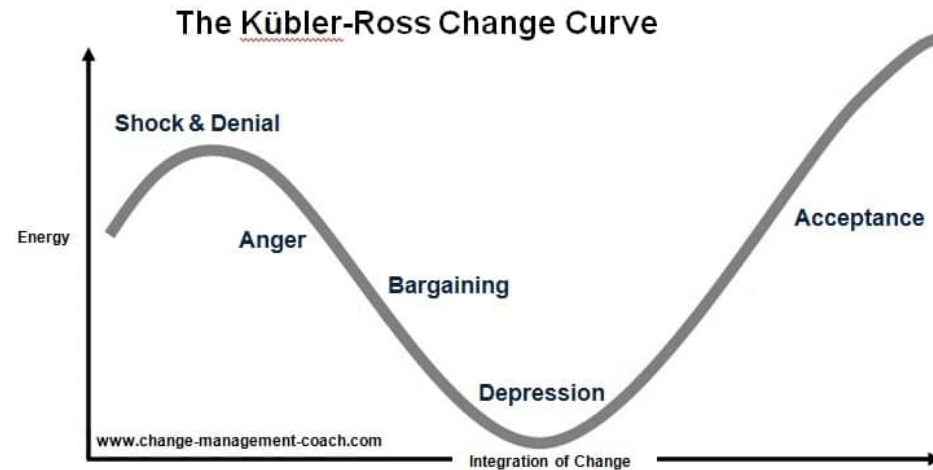


Image 1: Change Management Coach (2018)

Risk and Ethical Consideration 2

Death of Brother

How to Overcome Bereavement.

Referral

(Trevithick, 2009)

Bereavement Counselling

- Assist in overcoming the loss
- To avoid deterioration in mental health

(McLeod, 1998)

Cognitive Behavioural Therapy

(Worden, 2009)

Talking Therapy

(Simon, 2010)

Mental Health Helplines

(National Health Service, 2018)

Risk and Ethical Consideration 2

Death of Brother

Safeguarding Concerns.

Several areas of concern

- failure to take medication
- self-harm concerns
- anti-social behaviour
- developing inappropriate relations
- being financially exploited

(University of Wales Trinity Saint David, 2019; Social Care Institute for Excellence, 2015)

Emotionally Unstable Personality Disorder

- also known as Borderline Personality Disorder

(Marlowe and Sugarman, 2018)

Sexual abuse and exploitation

(Fortaleza de Aquino Ferreira *et al.*, 2018)

Risk and Ethical Consideration 3

Safeguarding

How to Manage Safeguarding Concerns.

Care Act 2014 defines

- Safeguarding vulnerable adults as
 - ‘protecting the rights of adults to live in safety, free from abuse and neglect’
- Relevant training
- Role of an “aleter”
 - Raise concerns within agency
 - Following policy and procedures

(Gov.uk, 2018)

(Johnson and Boland, 2019)

(NHS London, 2012)

Risk and Ethical Consideration 3 Safeguarding

Reflective Practice

- Reflective Practice

- Process of analysing events that have been encountered

(Bolton, 2010)

- Current and Relevant Practice

(Knott, 2016)

- Skills, growth and ethical development

(Cottrell, 1999)

- Continuous Professional Development

(Knott, 2016)

- Ethical Practice Principle No. 12

(British Association of Social Workers, 2014)

Conclusion

- Discussed many concept of
 - Risk
 - Ethical consideration
 - Discussed 3 issues of concern
 - With methods of overcoming these issues
 - Briefly touched upon Reflective Practice
-
- Thank You for listening to my video presentation, should you have any questions I would be grateful if you could email me.

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