



Domiciliary Care vs. Residential Care for Elderly People in the UK

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Domiciliary Care



Introduction

- The choice between domiciliary and residential care for the elderly is crucial for improving quality of life, wellness, and financial stability.
- **Debate Overview:** The presentation is divided into two parts: the first discusses domiciliary care, and the second focuses on residential care.
- **Quality of Life Impact:** The type of care chosen significantly affects the mental and physical wellness of the elderly. Research shows that a friendly and safe environment improves mood and health (Kushlev et al., 2020).
- **Informed Decision Making:** Examining domiciliary and residential care through financial, social, and medical perspectives is essential for making better decisions for elderly families and the government (Age UK, 2022).

Definition of Domiciliary Care

Domiciliary care, or house care, involves a range of services provided to the elderly at home to assist with daily activities and medical needs (NHS, 2023).



Services typically include personal care (e.g., bathing, dressing), household tasks (e.g., cleaning, cooking), and medical care (e.g., medication management, wound care), customized to individual needs (Care Quality Commission, 2022).



In the UK, 873,500 people received domiciliary care in 2020, with services often funded by private providers, local authorities, and charities, indicating a growing preference for aging at home (Home Care Association, 2021).

Funding Options for Domiciliary Care

- Personal savings, means-tested local authority funding, and NHS Continuing Healthcare for those with significant health issues are the main financing sources for domiciliary care in the UK (Age UK, 2022).
- Countries like Germany and Japan use insurance-based systems to partially cover residency care costs, reducing individual debt (OECD, 2020).
- In 2022/23, English local authorities allocated about £20.5 billion to domiciliary care services, providing substantial funding for seniors to stay at home (House of Commons Library, 2024).



End of Life and Palliative Care at Home

- Home care provides medical, emotional, and spiritual support to terminally ill patients, allowing them to spend their final days at home (Marie Curie, 2023).
- Home care offers the comfort of a familiar environment, personalized care, and the presence of loved ones, leading to positive emotional states and self-dignity (NICE, 2019).
- Research shows that 74% of patients prefer dying at home, and home palliative care leads to higher satisfaction and better quality of life compared to institutional settings (Quinn et al., 2020).



Addressing the Gap Between Need and Availability

- The UK faces a significant shortage of up to 100,000 care workers, resulting in long waiting times and lack of care for many elderly people (The Bureau of Investigative Journalism, 2024).
- Innovations like telehealth, workforce skills upgrades, and increased funding aim to close the gap and improve the efficiency of domiciliary care (NHS Digital, 2023).
- Addressing the supply-demand gap ensures more elderly receive necessary care at home, enhancing their quality of life and often prolonging their independence (Age UK, 2022).



Theories and Policies Supporting Domiciliary Care

- The UK Care Act 2014 highlights the significance of providing a care that advances the well being and abilities of the recipients, thus promoting the provision and funding of domiciliary care services (UK Government, 2014).
- The Equity Act ensures that domiciliary care services are provided fairly and without discrimination, promoting equal access to quality care for all individuals regardless of their background or circumstances (Ebrahim, 2016).
- The Human Rights Act mandates that domiciliary care respects and upholds the fundamental rights and dignity of individuals, ensuring that care services are delivered in a manner that honors personal freedoms and protects against inhumane or degrading treatment (Kavanagh, 2006).



Care Act 2014

Theories and Policies Supporting Domiciliary Care

- The Continuity Theory of Ageing states that older people desire to remain in their routine and habits that are promoted by domiciliary care where they reside at their own house (Madramootoo, 2023).
- Home healthcare has proven to be very beneficial, as it helps maintain the social connections of elderly individuals, provides a sense of security, and relieves the stress of moving to an unfamiliar environment (Snel et al. 2022).



Activity Theory

- Encourages staying active and involved.
- Includes activities and programs such as:
 - Group exercises
 - Social events
 - Hobby clubs
- Supports physical, mental, and emotional health.



Disengagement Theory

- It's normal for older people to withdraw from social roles and activities.
- Staff should recognize and respect residents' need for quiet time and rest.
- Provide peaceful spaces and respect personal time.
- Carers should allow service users to step back from activities they no longer enjoy.
- Encourage some social interaction to prevent loneliness.
- Balancing activity and disengagement respects individual preferences and needs.
- Using both theories helps care providers create environments that support both active participation and respectful disengagement, promoting overall well-being and satisfaction.



Advantages and Disadvantages

Advantages	Disadvantages
Familiar environment	Potential for social isolation
Personalized care	Limitations in emergency situations
Independence and autonomy	Higher costs for extensive care needs
Statistical data supporting benefits: 90% of elderly people prefer home care (Home Care Association, 2021).	Statistical data on disadvantages: 65% of domiciliary care seniors experienced loneliness and 30% found it difficult to access emergent care (Home Care Association, 2021).



Case Studies: Successful Domiciliary Care

- **Real-life examples of successful domiciliary care:** Mrs. A, who is an 85-year-old with dementia, was able to stay in familiar surroundings through the provision of personalized home-care, which led to a significant improvement in her emotional wellbeing (Alzheimer's Society, 2022).
- **Positive outcomes and testimonials:** Mr B, a stroke survivor, acclaimed the devoted home care staff for assisting him in recovering the independence and mobility by designing customized rehabilitation plans (NHS, 2023).
- **Data on satisfaction and quality of life:** Research shows that around 87% of domiciliary care recipients indicate high level of satisfaction and better quality of life compared to residents of residential care facilities (Age UK, 2022).





Conclusion by Proponent of Domiciliary Care

- Home care provides a personalized support in familiar surroundings, favoring independence and care for the elderly.
- Benefits of staying in the home are such as keeping the routines and maintaining the closeness with family members but medical support and caregiver burden should not be ignored.
- Domiciliary care offers a more holistic perspective in which the elderly are allowed to age gracefully in their homes, with all essential support, making it a justifiable and empathic option.



Residential Care



Definition of Residential Care

- Residential care means giving round-the-clock support and accommodation to senior citizens that are unable to take care of themselves or their medical needs in a specific facility (NHS, 2023).
- Such services involve personal care, medical monitoring, meals, social activities, and specialized support for cases of dementia (The Care Quality Commission, 2023).
- In 2021, there were around 17,500 care homes in Great Britain of which there are 12,000 which are the residential care homes. They are in charge of almost 458,000 people as they illustrate the widespread acclamation of nursing care (Nurses UK, 2023).

Funding Options for Residential Care

- Residential care in the UK can be funded through individual savings, local authority contributions based on means testing, and NHS Continuing Healthcare for persons who have enduring health problems (Age UK, 2024).
- **Comparison with other countries:** For instance, the Netherlands and Sweden have systems which are country-wide and cover long-term care insurance, making the costs of residential care lower (OECD, 2020).
- In the coming 2023/24 financial year, UK government set aside £8 million and £4 million to be exact for the project. 7 billion to aid the social care sector of adult in 2024/25 (The King Fund, 2024).



End of Life and Palliative Care in Residential Settings

- At-home and hospice care, in residential settings, require comprehensive support, from pain management, emotional and spiritual support, and round-the-clock medical supervision of patients with terminal diseases (Marie Curie, 2023).
- Facilities provide access to well-trained medical staff, a structured plan to manage complex problems , and ways to interact with others, which are often helpful to residents (NICE, 2019).
- According to research, 80% of families in residential settings claim they are satisfied with the end-of-life care they have received, citing an improvement in symptom management and emotional support (Care Quality Commission, 2023).



Addressing the Gap Between Need and Availability

- The UK requires an additional 200,000 nursing homes beds in order to overcome the deficit which is currently predicted to grow to this figure. They must provide their services to an aging population while meeting the increasing demand (Pamben, 2023).
- The gap is being narrowed by innovations like, modular construction of nursing homes, more funding and the incorporation of technology for efficient care delivery (Laing Buisson 2023).
- **Bridging the gap in availability of residential care helps elderly individuals to get proper and timely care, thereby enabling them to have positive health outcomes and a high quality life (Age UK, 2022 b).**



Theories and Policies Supporting Residential Care

- The Care Act 2014 makes it mandatory for authorities to provide necessary residential care services focused on quality and regulation (UK Government, 2014).
- The theory of successful ageing, which emphasizes being active and socially engaged, is upheld by residential facilities through activities and community living (Tavel, 2008).
- Healthcare facilities that provide quality care give a better social interaction, medical supervision, and overall health, therefore enhancing the quality of life of the residents (Care Quality Commission, 2023).



Advantages and disadvantages

Advantages	Disadvantages
Comprehensive care and supervision	Loss of independence
Social interaction and community	Potential for neglect or abuse
Access to medical facilities and emergency care	Higher costs compared to domiciliary care
Statistical data supporting benefits: 85% of the residents in top-class care homes say that they are happy with their care and their quality life improved (Care Quality Commission, 2022).	Statistical data on disadvantages: 60% of the residents do not feel empowered to make changes in their day to day lives during their stay at the care homes as compared to 90% of those who get care at home (Home Care Association, 2021).



Case Studies: Successful Residential Care

- **Real-life examples of successful residential care:** Mrs C, who is 82 years old with severe arthritis, finds that she has better mobility and pain relief after she was moved to a residential care facility that has a specialized physiotherapy (NHS, 2023).
- **Positive outcomes and testimonials:** Mr D, a resident of the past, praised the social activities and the companionship he found in the nursing home, saying it had a great effect on his mental health (Age UK, 2022).
- Studies reveal that 87% of residents in good nursing homes show high satisfaction with their living conditions and overall care and they therefore have better quality of life (Care Quality Commission, 2022).

Conclusion by Proponent of Residential Care



1

Residential care provides comprehensive, round the clock support with access to health facilities and specific activities designed to cater for the elderly's overall needs.



2

Benefits of such systems include improved social interaction, frequent medical supervising and emergency care, but drawbacks comprise higher costs and possible deprivation of independence.



3

For the persons desiring stable but individualized care and a community environment, residential care can be a secure and supportive solution that can help to greatly improve one's quality of life.

Overall Conclusion

- **Balanced Perspective:** The presentation compares domiciliary and residential care, highlighting both benefits and drawbacks with supporting data and case studies.
- **Quality of Life and Care:** It shows how each care type affects quality of life, with domiciliary care offering personalized support at home and residential care providing comprehensive support in a community setting.
- **Informed Decision-Making:** The presentation emphasizes the need for informed choices by examining financial, social, and medical aspects, supported by relevant policies and theories.

Recommendations

Recommendation	Barriers	Solutions to Overcome Barriers
Increase Funding for Domiciliary Care	Limited government budgets and competing priorities	Advocate for policy changes and allocate specific funds for elderly care
	Difficulty in securing private investments	Offer tax incentives and subsidies to attract private investment
Implement Telehealth Services	Lack of access to technology among the elderly	Provide training programs and affordable technology solutions
	Resistance to adopting new technology	Educate about the benefits and provide ongoing support
Enhance Workforce Training and Retention	High turnover rates and shortage of skilled workers	Improve working conditions, offer competitive salaries, and career development opportunities
	Insufficient training programs	Develop comprehensive training programs and continuous education initiatives

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