

BMHP6027- Empowering the Older Person

Week 9- Module Recap, Quiz, and Assessment 2 Workshop

Lecture Content

Welcome to the final session of the module!

- Today we will...
- Recap core themes and content including theory and policy.
- Review critical knowledge for Assignment 2.
- Provide support and guidance for preparing debate arguments.

What have you learned from this module?

Module Overview – Key Themes

Empowerment and autonomy in elderly care.

Technological innovations for older adults.

Policy frameworks affecting elder rights and care quality.

Safeguarding and Elder Abuse prevention.

Ethical and practical considerations in dementia and safeguarding.

Relevant Theories

Activity Theory-

- Suggests that staying physically and socially active improves life satisfaction in older adults.
- Application- Encourages caregivers to support meaningful activities to enhance well-being.
- Example- Organising social events or encouraging hobbies can help older adults maintain a sense of purpose.

Continuity Theory-

- Proposes that older adults seek consistency in their lifestyle, behaviors, and preferences.
- Application- Promotes personalised care that respects individuals' routines and values.
- Example- Supporting an older adult in continuing lifelong hobbies or routines provides comfort and stability.

Relevant Theories

Disengagement Theory-

- Suggests that as people age, they naturally withdraw from social roles and relationships to prepare for the end of life.
- **Criticism-** Often viewed as outdated, as it doesn't account for older adults who remain socially active and engaged.

This theory can be used as a basis for understanding social withdrawal while challenging its limitations.

Erikson's Psychosocial Development Theory (Integrity vs. Despair- the final stage in Erikson's model).

- Older adults reflect on their lives; achieving a sense of fulfillment leads to "integrity," while regret can lead to "despair."
- Application- Encourages support in life review activities to help individuals achieve a sense of meaning and acceptance.

Person Centred Care

- Person-Centred Care (PCC) focuses on tailoring care to meet the unique needs, preferences, history, and values of each individual.
- It respects the individual as an active partner in their care, promoting autonomy, dignity, and choice.
- Person Centred Care is enshrined in all UK H+SC legislation and policy.

Person Centred Care

Key Principles of PCC-

- Respect for Individuality- Acknowledges each person's history, preferences, and needs.
- Autonomy and Empowerment- involves the individual in decision-making to the fullest extent possible.
- Holistic Approach- Considers physical, emotional, social, and spiritual well-being.
- Collaboration- Care is planned and delivered with input from the individual and, where appropriate, their family or caregivers.

Person Centred Care

Importance in Elderly Care-

- Enhances Quality of Life- Aligning care with individual preferences leads to greater satisfaction and well-being.
- Improves Health Outcomes- Studies show that PCC can lead to better health outcomes by reducing anxiety, depression, and other stress-related symptoms.
- Reduces Risk of Institutionalization- Older adults who feel empowered are more likely to maintain independence longer.

Challenges to Implementing Person-Centered Care in UK Elderly Care

Key Barriers

- Time Constraints and Workload- High patient-to-staff ratios mean limited time for individualised care
- Financial Limitations- Many care facilities operate with restricted budgets, limiting resources for personalised care activities.
- Staff Shortages and Retention- High turnover rates make continuity in care challenging, which is essential for PCC.
- Knowledge and Training Gaps- Limited training on PCC principles and strategies restricts practical application.

(Care Quality Commission, 2020; King's Fund, 2021).

The Ageing Population and H+SC Needs

Nearly one in four people in the UK will be over 65 by 2041 (ONS, 2022).

Implications-

- Growing demand for healthcare and social support.
- Increased need for long-term, sustainable resources.

Impact-

Emphasises the importance of adaptable, efficient healthcare solutions.

The fact that people are living longer should not be seen as a negative-

It should be celebrated! *Discuss*

Gap Between Need and Availability in H+SC in the UK

- Increasing Demand for Services –ageing population means more frail individuals and an increase in complex, long term care needs.
- Current Shortfalls- Social care faces high vacancy rates and turnover due to low wages and challenging working conditions and there are funding gaps resulting in longer waiting times and reduced support.
- Resource Allocation- Many services focus on immediate needs, leading to reduced availability for preventive and community-based support

Impact on Older People

Older adults may experience delays in receiving care, leading to a decline in health and quality of life.

Increased reliance on unpaid caregivers, often family members, who may not have adequate support or training.

Policy Challenge- Current legislation, including the Care Act 2014, mandates support but lacks the funding and infrastructure to meet growing demand (Care Act, 2014).

How can the UK's health and social care system adapt to bridge this gap and ensure accessible, quality care for older adults? *Discuss*

Chronic Illness and Functional Decline in Ageing

Common Conditions-

- Chronic illnesses such as arthritis, diabetes, cardiovascular disease, and respiratory conditions are prevalent among older adults, with approximately 60% of people over 65 in the UK living with at least one chronic condition (ONS, 2022).

Impact on Care Needs-

- These conditions require continuous management and can lead to increased healthcare demands, including regular monitoring, medication, and therapy.

Chronic Illness and Functional Decline in Ageing

Functional Decline-

- **Mobility Issues-** Conditions like arthritis and osteoporosis can lead to mobility limitations, increasing the risk of falls and injuries. Nearly one-third of older adults experience falls each year, often resulting in hospitalisations (Age UK, 2021).
- **Cognitive Decline-** Dementia and related cognitive impairments affect memory, decision-making, and independence. Around 1 in 14 people over 65 has dementia in the UK, with numbers rising in the aging population (Alzheimer's Society, 2019).
- **Daily Living Challenges-** Chronic conditions often impact Activities of Daily Living (ADLs), such as bathing, dressing, and eating, leading to greater dependency on caregivers and support services.

Chronic Illness and Functional Decline in Ageing

Psychosocial Impact-

- Isolation and Mental Health- Chronic illness and reduced mobility can lead to social isolation and contribute to mental health issues, including depression and anxiety. Social isolation is a major concern, affecting around 1.2 million older adults in the UK (Age UK, 2021).
- Quality of Life- Functional limitations and constant health concerns can diminish life satisfaction and increase feelings of frustration or helplessness, emphasising the need for person-centred and psychosocially supportive care.

Empowerment and Autonomy in Elderly Care

- **Empowerment-** Enabling older adults to make choices about their care promotes dignity, self-worth, and respect for individual values.
- **Autonomy-** Supporting autonomy means allowing control over daily activities, such as choosing meals, routines, and recreational activities, which contributes to better physical and mental well-being.
- **Benefits-** Autonomy is linked to increased life satisfaction and reduced anxiety, particularly in dementia care where person-centred approaches help alleviate distress.

For example, allowing residents to personalise their living spaces respects their identity and enhances quality of life.

(NHS England, 2016; Brooker, 2007).

Challenges to Autonomy and Empowerment in Practice

- Safety Concerns- Balancing autonomy with safety is challenging, especially for those with cognitive impairments, where independence may lead to risks like falls or wandering
- Time and Resource Constraints- High staff-to-patient ratios and limited resources can force a task-oriented approach, reducing opportunities for personalized care
Staff Training- Limited training on autonomy and person-centered care restricts caregivers' ability to empower residents effectively (King's Fund, 2021).
- Family Dynamics- Families may prioritize safety over autonomy, leading to tension in care decisions (Age UK, 2021; Alzheimer's Society, 2019).

Technological Interventions in Elderly Care

Technological advancements have become essential in supporting older adults, enhancing their independence, health management, and social connections.

- **Assistive Technology-** Mobility aids, smart home devices, and hearing aids improve independence, enhancing quality of life for older adults.
- **Health Monitoring-** Wearable devices and remote monitoring provide real-time health data, supporting preventive care and reducing hospital visits
- **Social Connections-** Video calls and social platforms help reduce isolation, connecting older adults with family and friends, especially those in residential care.

(NHS England, 2020).

Ethical Implications and Limitations of Technology in Elderly Care

- Privacy Concerns- Devices like health monitors and GPS trackers provide safety but can raise concerns around personal privacy and autonomy.
- Digital Exclusion- Many older adults have limited digital literacy or access to technology, leading to digital exclusion and increasing dependence on caregivers.
- Dependency on Technology- Over-reliance on technology can reduce face-to-face interaction and personal engagement, which are essential for mental well-being.
- Cost and Accessibility- High costs of devices and required internet access may limit the availability of these technologies to all older adults.

Dementia

- **Dementia** is a progressive condition affecting memory, cognition, and behaviour, often requiring specialised care (WHO, 2022).
- Types of Dementia include-
- Alzheimer's Disease- The most common type, marked by memory loss and cognitive decline.
- Vascular Dementia- Often results from strokes, affecting thinking and reasoning.
- Lewy Body Dementia- Linked to Parkinson's disease, it can cause symptoms like visual hallucinations, motor difficulties, and disrupted sleep, as well as tremors and muscle stiffness similar to Parkinson's (Alzheimer's Society, 2019).

Dementia

- Nearly 1 million people in the UK live with dementia, with cases expected to rise significantly as the population ages Impact on Daily Life- Symptoms like disorientation, mood changes, and language difficulties can impair daily functioning, affecting independence and quality of life.
- Dementia care requires a person-centred approach, focusing on individualised support that includes memory aids, familiar routines, and therapeutic activities to reduce distress, promote comfort, and improve engagement and well-being.

(Alzheimer's Research UK, 2024)

Elder Abuse and Safeguarding

Elder Abuse-A single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person (WHO, 2021).

Those most likely to be abused are...

- Older Adults with Cognitive Impairments
- Individuals with Physical Disabilities
- Socially Isolated Older Adults
- Women and Very Elderly Individuals

Types of Elder Abuse

These Include...

Physical Abuse- Intentional harm, such as hitting or restraining, that can lead to injuries or emotional trauma.

Emotional/Psychological Abuse- Actions like intimidation, humiliation, or isolation that damage mental well-being.

Financial Abuse- Misuse of an older adult's money or assets, often involving fraud or exploitation.

Neglect- Failing to meet basic needs, such as food, hygiene, or medical care, which can severely impact health (Care Act, 2014).

Elder Abuse

Signs of Abuse-

- Physical Signs- Unexplained injuries, bruises, or sudden weight loss.
- Behavioural Signs- Withdrawal, fearfulness, or unusual changes in behaviour.
- Financial Indicators- Sudden changes in bank accounts or unexplained transactions

Who are the Abusers?

- Family Members
- Health and Social Care professionals.
- Friends and Neighbours
- Scammers and Opportunists

(Age UK, 2021).

Elder Abuse

There are no specific legislation regarding Elder Abuse, but older people are protected by the following...

Care Act 2014- This act mandates local authorities to safeguard vulnerable adults, requiring investigation into abuse allegations and provision of support services.

Mental Capacity Act 2005- Ensures decisions made for individuals lacking capacity, including those at risk of abuse, prioritising their best interests and safety

Health and Care Act 2022- Strengthens collaboration across health and social services, aiming to improve coordinated responses to safeguarding needs and elder abuse cases.

Safeguarding Principles- NHS policies focus on preventive and responsive measures to detect, prevent, and address elder abuse, emphasizing dignity and autonomy (NHS England, 2023).

Safeguarding Older People

Safeguarding involves protecting individuals' health, well-being, and human rights to ensure they live free from abuse, neglect, and harm (Care Act, 2014).

Importance in Health and Social Care-

Protects Vulnerable Individuals- Older adults are at greater risk of abuse due to physical, cognitive, and financial vulnerabilities. Safeguarding measures are essential to protect their dignity and autonomy.

Enhances Trust in Care Services- Safeguarding practices build trust, reassuring families and communities that care services prioritise the safety and well-being of older adults.

Legal and Ethical Responsibility- Health and social care providers are legally required to follow safeguarding principles, ensuring abuse prevention and timely intervention when issues arise.

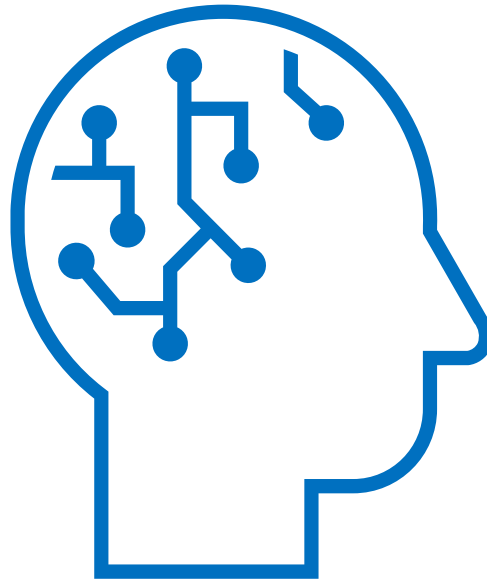
Safeguarding Practices-

Training and Awareness- Ensuring staff understand abuse signs and safeguarding protocols.

Interagency Collaboration- Local authorities, health providers, and social care services work together to provide a coordinated response to safeguarding needs.

(Age UK, 2023; NHS England, 2023)

Module Quiz



Assignment 2 Workshop

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