



MODULE CODE: BMH6009

**MODULE TITLE: ARE OLDER PEOPLE
CARED FOR BEST IN THEIR OWN HOMES
OR RESIDENTIAL CARE?**

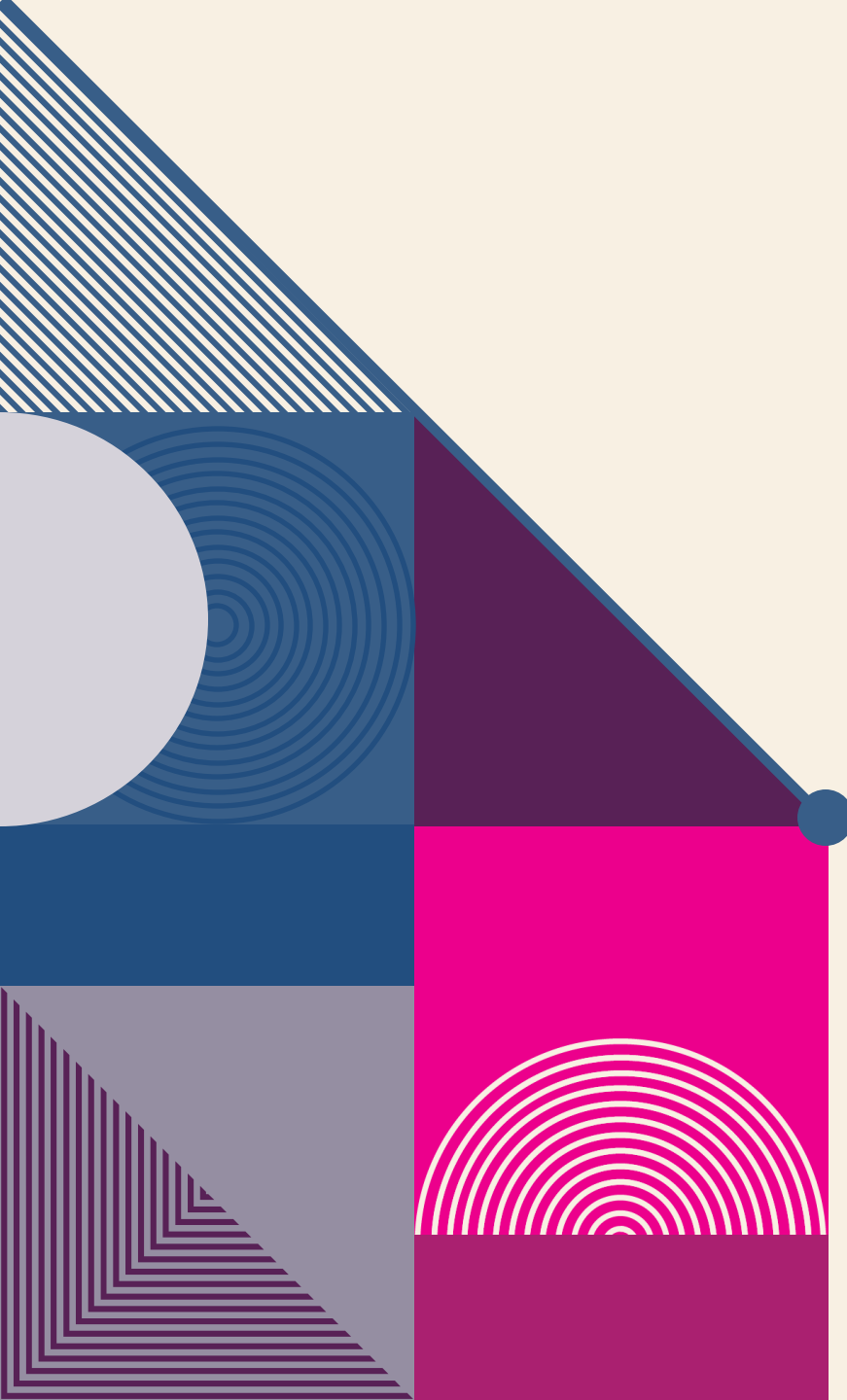
**ASSIGNMENT TITLE: DEBATE
PRESENTATION**

COMPONENT: 1

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INTRODUCTION

Domiciliary Care: to explain domiciliary care provided in the individual's own home, including personal care, housekeeping, and medical support (Genet et al., 2011).

Residential Care: to explain care provided in a dedicated facility, such as a residential care home, where individuals live full-time and receive comprehensive support (Moore et al., 2019).

Both:

We going to look at -old age definition, end of life care, the gap between need and availability of care and the challenges, safety and security for both residential and domiciliary care, benefits and challenges on both care settings, Policy and legislation relevant to older people receiving care, theory relevant to older people receiving care, conclusion, recommendation and references

Old Age Definition:

- **Generally Considered to Start at 65 Years:**
 - Widely recognized as the age marking the beginning of old age, aligning with retirement and pension eligibility
- **Varies Culturally and Individually:**
 - In some cultures, old age is associated with social roles rather than a specific age.
 - Factors like genetics, lifestyle, and health can influence when old age begins

(Harper, 2014).

End-of-Life Care:

- **Includes Palliative Care and Planning for Terminal Conditions:**
 - **Palliative Care:**
 - Focuses on relieving symptoms and stress of serious illness to improve quality of life (Gomes et al., 2013).
 - **Planning for Terminal Conditions:**
 - Involves advance directives and discussions with family and healthcare providers.
- **Delivered in Various Settings:**
 - **Homes:** Preferred by many for comfort and familiarity.
 - **Hospitals:** Provide acute care for complex medical needs.
 - **Hospices:** Offer specialized care focused on comfort in a homelike environment.
- **Care Homes:** Provide 24/7 support, including medical and personal care.

THE GAP BETWEEN NEED AND AVAILABILITY OF CARE

Increasing Elderly Population:

- It is projected that the number of people aged 65 and above across the world will double from 703 million in 2019 to 1.5 billion by 2050. (United Nations, 2019)
- Pressure on Health and Social Care Services
- The aging population is a significant contributing factor to the increasing pressure on health and social care services worldwide.
- In the UK, the proportion of elderly individuals is growing, leading to an increased need for specialized care services to support their health and well-being. (Cumming & Henry, 1961).

Insufficient End-of-Life Care Resources:

- Only 14% of people worldwide who need palliative care receive it. (WHO, 2020)
- In the UK, there are significant gaps in palliative care provision, with 48% of people who die having unmet palliative care needs (Bradshaw et al., 2023).

THE GAP BETWEEN NEED AND AVAILABILITY- CHALLENGES

Funding Shortages:

- Funding for elder care and palliative care services is inadequate, leading to long waiting times and reduced quality of care (OECD, 2017)

Geographic Disparities:

- Access to end-of-life care varies significantly between urban and rural areas, with rural areas often lacking specialized facilities and trained professionals.
- Geographic and Disparities in Health care, (2018).

RESIDENTIAL CARE

Provides 24/7 Care for Individuals Who Cannot Live Independently:

- ✓ Continuous monitoring and assistance are always available for residents.
- ✓ Designed for individuals with significant physical or cognitive impairments that prevent them from managing daily tasks on their own (Drennan et al., 2012).
- ✓ Ensures that residents' needs are met promptly, enhancing their safety and well-being.

Includes Facilities Like Residential Homes

Residential Homes: Offer medical care and extensive support for individuals with severe health conditions (Lima, 2022).

- ✓ Staff includes certified nursing assistants, licensed practical nurses, and registered nurses.



DOMICILIARY CARE?



Care Provided in the Person's Own Home:

Delivered directly to the individual's home, allowing them to stay in a familiar environment (Reed et al., 2005).

Includes Personal Care:

Assistance with daily activities like dressing, bathing, grooming, and mobility.

Domestic Assistance:

Help with household chores such as shopping, meal preparation, laundry, and cleaning.

Medical Support:

Administering medications, monitoring health conditions, and providing basic medical care.

BENEFIT OF RESIDENTIAL CARE

- The presence of trained staff

who can provide round-the-clock care and assistance to residents.

- Residential care facilities

often offer a sense of community and social interaction for elderly residents

- Participating in group activities

social events, and outings (Johnson, L. et al. 2020).

- quality of care are valid

the presence of trained staff, access to medical assistance.



BENEFITS OF DOMICILIARY CARE

❖ **Familiar Environment:**

- ✓ Comfort and familiarity of home (Bolton and Wibberley, 2013).

• **Independence:**

- ✓ Maintains personal routines and autonomy (Bolton and Wibberley, 2013).

• **Family Involvement:**

- ✓ Closer proximity to family members.

• **Often provides personalized care:**

- ✓ plans tailored to the specific needs and preferences of each individual

(Brown, 2018)



DISADVANTAGES/ CHALLENGES OF RESIDENTIAL CARE



- ❖ One of the primary challenges of residential care for the elderly is the potential loss of independence and autonomy.
- ❖ High cost associated with such services. Many families struggle to afford the steep fees charged by care facilities, leading to financial strain
- ❖ Quality of care and staff turnover can also pose challenges in residential care settings, risk of falls and more Smith, (2019).

CHALLENGES/DISADVANTAGES OF DOMICILIARY CARE

❖ **Resource Limitations:**

- ✓ Limited access to specialized services.
- ✓ lack of round-the-clock supervision and immediate access to medical assistance

❖ **Caregiver Strain:**

- ✓ Burden on family members and professional caregivers.

❖ **Safety and Emergency Concerns:**

- ✓ Delays in medical emergencies.
- ✓ Costs and feasibility of adapting homes for safety. (Brown, 2018).



SAFETY AND SECURITY FOR RESIDENTIAL CARE

- **Controlled Environment**

- Reduced risk of accidents and emergencies (Gartshore et al., 2017).
- Features include non-slip flooring, grab bars, and emergency call systems.

- **Professional Care**

- Skilled and trained staff on-site (Castle & Ferguson, 2010).
- Staff can handle medical emergencies and administer medications correctly.
- Residential care provide a safe and secure environment with round-the-clock supervision and support.
- However, challenges such as the risk of falls, medication errors, and abuse by staff or other residents can still pose threats to the safety and security of elderly individuals in residential care (Smith, 2019)



SAFETY AND SECURITY FOR DOMICILLARY CARE.

- Presents distinct safety considerations compared to residential care settings.
- Elderly individuals benefit from the familiarity and comfort of their home environment,
- However, they may face risks such as social isolation, falls, and delayed access to medical assistance in emergencies.

Johnson, L. et al. (2022)



POLICY AND LEGISLATION RELEVANT TO OLDER PEOPLE RECEIVING CARE



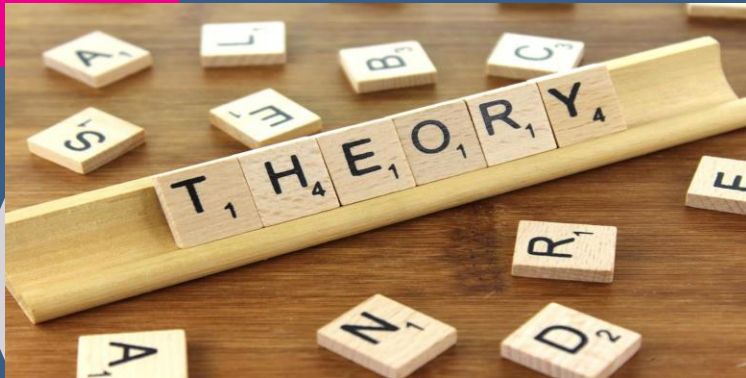
- The implementation of relevant policies and legislation, including the Care Act 2014 and the Health and Social Care Act 2008, significantly influences the quality and accessibility of elderly care services in the UK. Department of Health and Social Care. (2014)
- These regulations set standards for care provision and promote person-centered approaches to care delivery. UK Parliament. (2008).
- Through a collaborative effort involving policymakers, care providers, and the community, the UK can create a more age-friendly and supportive environment that empowers older individuals. [This Photo](#) by Unknown Author is licensed under [CC BY](#) World Health Organization. (2022).
- In the current era, health and social care services are facing increasing pressure globally and in the UK due to various factors. (Johnson & Wiener, 2010).
- The Equal Act(2010) protects the vulnerable adults from discrimination due to their disability and also to promote equality of opportunity between disabled people and others.

THEORY RELEVANT TO OLDER PEOPLE RECEIVING CARE



- The integration of Maslow's theory and the regulatory framework in the UK
- Provides a holistic approach to understanding and improving elderly care services.
- By acknowledging the diverse needs of older individuals and implementing policies that prioritize person-centered care,
- The UK can continue to be a leader in promoting the well-being and dignity of its aging population (Maslow, 1943).
- The integration of Maslow's Hierarchy of Needs with policy frameworks in the UK offers valuable insights into how domiciliary and residential care services can effectively address the multifaceted needs of older people.

THEORY RELEVANT TO OLDER PEOPLE RECEIVING CARE



Theories on Care Provision

- These theories significantly influence the provision of domiciliary and residential care for older adults.
- For example, the disengagement theory may inform care practices that respect an individual's desire for solitude and independence while ensuring they receive necessary support and social interaction.
- The activity theory may guide caregivers in promoting engagement in meaningful activities that enhance the quality of life for older adults.
- Similarly, the continuity theory can help in establishing routines and environments that maintain a sense of familiarity and continuity for individuals receiving care (Atchley, 1989).

CONCLUSION

Balanced view of both domiciliary and residential care.

- ❖ Residential care offers comprehensive support but may impact independence.
- ❖ Domiciliary care provides a familiar environment but has resource limitations.
- ❖ A residential care facility often means giving up control over one's daily routine and living environment, which can be distressing for many seniors.
- ❖ The institutional nature of residential care facilities can lead to feelings of isolation and loneliness among residents, particularly if they do not have regular visits from family and friends.
- ❖ individuals receiving domiciliary care may face delays in receiving help during emergencies or outside of scheduled visit times.
- ❖ This can be concerning for both the elderly person and their family members, who may worry about their loved one's safety and well-being.
- ❖ Domiciliary Caregivers can focus on delivering one-on-one attention and support
- ❖ Residential care many families struggle to afford the steep fees charged by care facilities, leading to financial strain

RECOMMENDATION

Providing Quality Care for the Elderly:

- ❖ Person-Centered Care, Training and Education, Health and Well-being Programs, Community Engagement, Regular Monitoring and Evaluation, Family and Caregiver Involvement.
- ❖ The provision of high-quality care for the elderly is paramount in ensuring their well-being and quality of life. Whether through residential care or domiciliary care, it is essential to prioritize creating a homelike environment and promoting community living.
- ❖ By focusing on personalized care, social engagement, and maintaining a sense of purpose, we can enhance the lives of the elderly and provide them with the support and care they deserve.
- ❖ The key to providing the elderly with high-quality care lies in creating a homelike environment that fosters a sense of community and belonging.
- ❖ Research by (Smith et al, 2019) highlights the importance of promoting social interactions and a supportive community living environment in elder care facilities.
- ❖ By encouraging activities that promote social engagement and a sense of belonging, the overall well-being and quality of life of the elderly can be significantly enhanced.

RECOMMENDATIONS

- ❖ The safety and security of older people in residential homes and domiciliary care settings requires a comprehensive approach that addresses the unique challenges and considerations of each care setting.
- ❖ By implementing safety protocols, staff training initiatives, risk assessments, and technological solutions, caregivers and care providers can create a safe and secure environment for elderly individuals to age with dignity and peace of mind.
- ❖ By recognizing the pros and cons of domiciliary care, families can make informed decisions that prioritize the well-being and independence of their elderly loved ones.
- ❖ By weighing the pros and cons of residential care, families can make informed decisions that prioritize the well-being and happiness of their elderly relatives.
- ❖ Understanding and applying theoretical perspectives such as the disengagement, activity, and continuity theories can help healthcare providers deliver personalized and effective care to older adults.
- ❖ By adapting care practices to align with these theories, the healthcare system can better address the evolving needs of the aging population and promote healthy aging and well-being.

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THANK YOU