



Prifysgol Cymru
Y Drindod Dewi Sant
University of Wales
Trinity Saint David

Empowering the Older Person (BMHP6027_BIRM)

Week 3:

Assessing the Needs of Older Persons. Challenges Associated with Care- The Carers' Role.

Trawsnewid Addysg; Trawsnewid Bywydau
Transforming Education; Transforming Lives



www.uwtsd.ac.uk

GROUND RULES

- Attendance & Punctuality
- Class timings are according to your timetable
- Mobile phones should be muted
- Should not be eating, bringing coffees or any drinks (apart from water bottles), etc.
- Mutual respect to your peers, lecturers, and University staff in general
- Confidentiality
- The Student Code of Conduct of the University should be followed.



Module Aim & Learning Objectives

AIM:

To critically evaluate the contemporary provision when caring for and empowering the older person as well as implications for future development

LEARNING OUTCOMES

- Identify and evaluate the care, empowerment and support needs of the older person and how these are met by current local and / or national
- Analyse the emergent technological provision and innovations in meeting the care, empowerment and support needs of the older person

Objectives of today's session

- Assessing holistically (physical, social, mental and emotional) the needs of older adults.
- Discuss Age dependency.
- Discuss the Role of carers.
- Discuss palliative, and end of life care.
- Discuss the Care for dementia.

Group work

In small group discuss

- What are the physical, social, mental and emotional needs of older adults?

Assessing the Needs (physical, social, mental and emotional) of Older Adults

Assessing the holistic needs of older adults involves considering their entire well-being.

Physical Needs: Regular health check-ups, medication management, mobility assistance, and proper nutrition.

Social Needs: Opportunities for interaction, community engagement, and maintaining relationships.

Assessing the Needs (physical, social, mental and emotional) of Older Adults

- **Mental Needs:** Cognitive stimulation activities, support for mental health issues, and ensuring a sense of purpose.
- **Emotional Needs:** Empathy, listening to their concerns, and providing emotional support

Age Dependency Ratios (ADP)



- ***Dependency ratios*** are a numerical measure of the economic burden on the working population caused by those not in the labour force.
- This ratio is an indicator of the “dependency burden” on persons active in the labour force.
- It indicates, for example, how many active workers are needed to support one person who is receiving social security.
- The ADP in the United Kingdom was reported at 57.67 % in 2021

The Old Age Dependency Ratio

- The Old-age dependency ratio is the number of individuals aged 65 or older per 100 people of working age, defined as those aged between 20 to 64 years old.

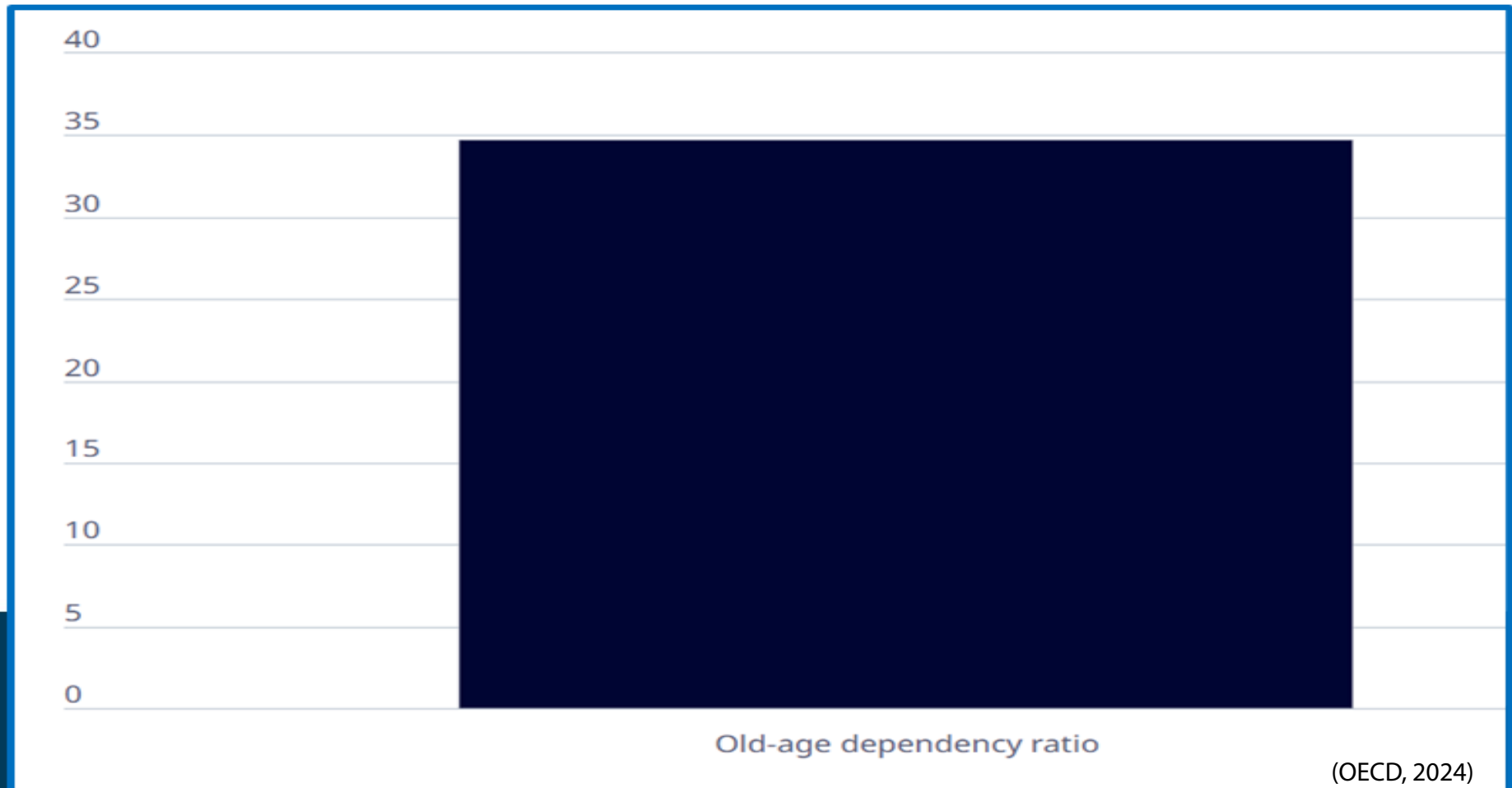
(OECD, 2024)

Let's Watch and Understand

<https://www.youtube.com/watch?v=iVXXJDZpjWU>

The Old Age Dependency Ratio in the UK

In 2024 the Old Age Dependency Rate in the UK was **34.80**
This had increased from **30.30** in **2014** and **26.80** in **2004**



The Old Age Dependency Ratio in the UK

Class Discussion...

Before we move on, think about what this means not only to health and social care provisions, but UK society as a whole.

Health and Health Care of the Ageing Population in the UK

- An increasing number of people with long-term disability, chronic conditions and multiple health conditions will increase the need for care and change the nature of the demand.
- This will put pressure on health and care systems to adapt to meet these changing demands.
- New and emerging technologies have the potential to change care in the home and community.

(The Health Foundation, 2018; Fujisawa, and Colombo, 2009)

Health and Health Care of the Ageing Population in the UK

- Demand for people to provide care for family and friends will increase.
- Interventions throughout a person's lifetime, such as those promoting healthy living and decreasing social isolation, have significant potential to affect their health in old age.



(AgeUK, 2023; Fujisawa and Colombo, 2009)

Burden of Chronic Diseases 65+

Mental disorders

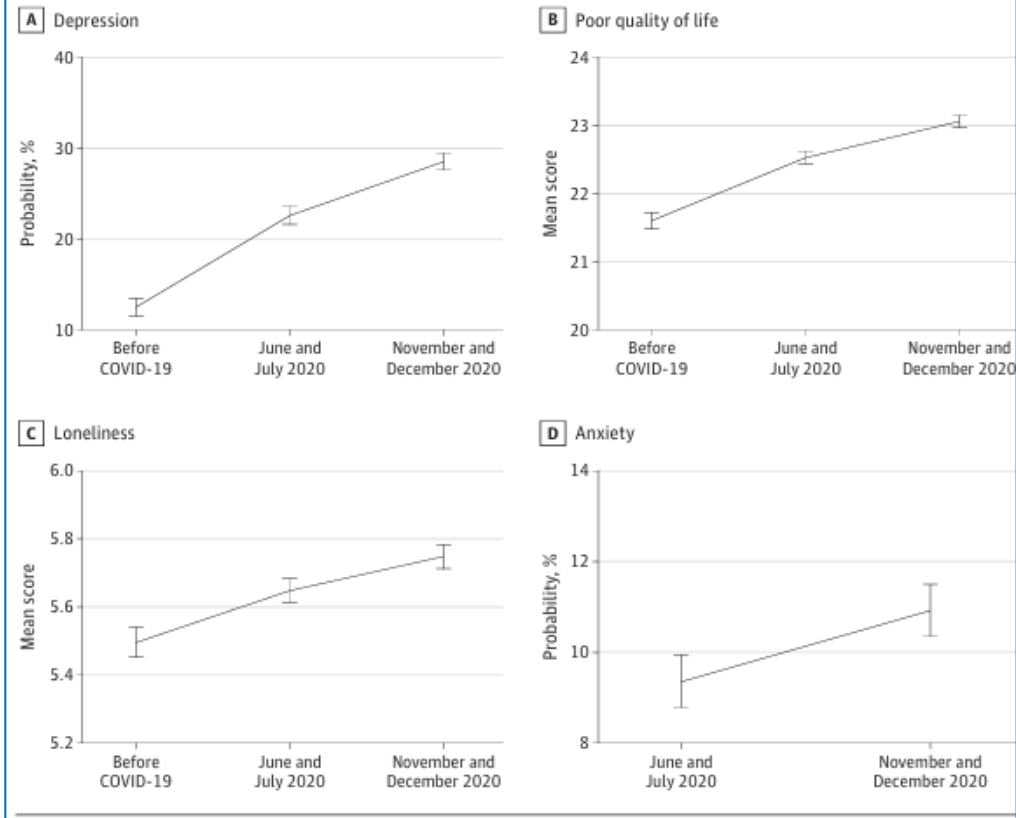
- There are currently 5.5 million people with dementia in Europe.
- Alzheimer's disease affects 4% of people over the age of 65 and is set to double within 50 years.
- Alzheimer's disease prevalence rises from 2% amongst 65-69 years old to 22% amongst 85-89 years old.

[illegible]

- (Age UK 2019)

Mental Health of Older Adults after Covid

Figure 1. Predicted Outcome Trajectories Before and During the COVID-19 Pandemic



The Effects of COVID-19 on Older People

- What effect did the pandemic have on the physical and mental health of many older people?
- Can you give reasons for this?
- The full impact is not yet known, and much research is still ongoing...

The Effects of COVID-19 on Older People

- Anxiety and depression increased, which can be partially attributed to loneliness and social isolation.
- Developing new health conditions and worsening existing ones due to lack of access to services
- As well as being more likely to experience severe COVID-19 infection, hospitalisation, and mortality, the older adult population was identified early in the pandemic as particularly likely to disproportionately experience the wider impacts of COVID-19

These include...

- Negative changes in health behaviours (smoking, diet, alcohol consumption, and physical activity)
- Deconditioning and sedentary behaviours which are associated with strength, mobility and balance and leads to greater risk of falls.

(PHE, 2021)

The Effects of COVID-19 on Older People

- AgeUK- Research showing just how badly the pandemic was impacting older people- <https://www.ageuk.org.uk/latest-press/research-pandemic-impact/#:~:text=Many%20other%20over%2065s%20were,the%20start%20of%20the%20pandemic>
- NHS- Ground-breaking trial prevents loneliness among older people during COVID- <https://www.tewv.nhs.uk/news/ground-breaking-trial-prevents-loneliness-among-older-people-during-covid/>

Burden of Chronic Diseases

Falls and Fractures

- Falls are a major health problem for older adults.
- 30% of people older than age 65, and 50% of people older than age 85, who live in the community, will fall at least once each year.
- Falls are even more common in long-term care facilities, occurring annually in more than 50% of people older than age 65.
- Significant injuries occur in 4–15% of falls, and 23-40% of injury-related deaths in older adults are due to falls.

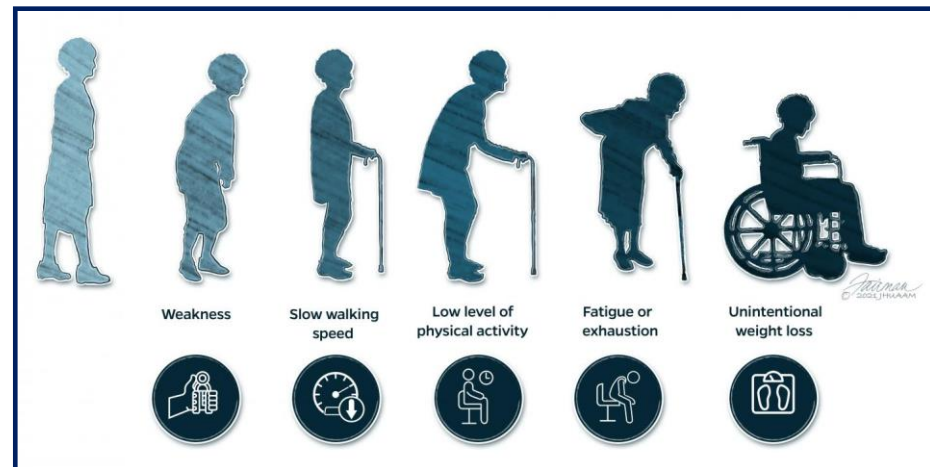
Ageing and Multimorbidity

- As people age, they are more likely to experience multiple chronic conditions at the same time, and as a result the risk of declines in capacity.
 - 65% of 65-84 years old have 2 or more diseases and
 - 82% of > 85 years old have 3 or more diseases
- As a result, the impact of multimorbidity on functioning, quality of life and risk of mortality is significantly greater than the sum of the individual effects that might be expected from these conditions.
- Predictably, multimorbidity is also associated with higher rates of health-care utilisation and higher costs.

Frailty in Older People

Frailty is a consequence of a decline in several physiological systems, which results in vulnerability to health state changes and lack of resilience.

- Related to the ageing process
- Independently associated with adverse outcomes
- Common
- Progressive
- Episodic deteriorations
- Preventable components
- Impact quality of life
- Expensive



(Harrison, et al 2015)

Trawsnewid Addysg; Trawsnewid Bywydau
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Beveridge 1942 and the new Welfare State

- Commissioned in 1939 published in 1942 implemented in 1948 after second world war. It was the most influential piece of legislation and social policy in the UK and was designed to provide care from the cradle to the grave.
- At the heart of the report was Beveridge's verdict that future action to improve social insurance, steps on the road of 'social progress', should not be hindered by 'Five Great Evils' which plagued society:
- 'Five Giants'
 - Want – social security
 - Idleness (laziness) – full employment
 - Disease – National Health Service
 - Squalor – public housing
 - Ignorance – comprehensive education

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- **The 'Five Giants' (and actions to combat these)**
 - Want – social security
 - Idleness (laziness) – full employment
 - Disease – National Health Service
 - Squalor – public housing
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(Peden, 2017).

Social Security: Financial Support for the Elderly

- The statutory State Pension is a government-administered pension and full pension amount is currently £221.20 per week.
- It is based on the number of qualifying years gained through National Insurance contributions (NICs) paid or credited throughout the applicant's working life, but if someone has not contributed enough, their income will be topped up by Pension Credit.
- State pension age for now is 66 years for both men and women however the government agreed that State Pension age will increase from 67 to 68 in between 2026-2028.

(Department for Work and Pensions, 2023)

Caring for the Elderly, UK

As the population grows the need for healthcare will rise

- Nearly two-thirds of people admitted to hospital are over 65 years old.
- There has been a 65% increase in hospital treatment.
- Someone over 85 is 25 times more likely to spend a day in hospital than someone under 65 – and spends around eight days longer in hospital per stay than someone under 65 (11 days compared to 3).
- The number of older people with a care need is predicted to rise by 61% by 2030.

Older People Receiving Social Care

In England...

- On 31 March 2024, there were 660,460 people receiving long-term local authority provided or organised adult social care:
 - 483,255 people were receiving support in the community
 - 132,510 people were receiving support in residential care homes
 - 52,950 people were receiving support in nursing homes
 - 220 people were receiving support in prison
 - Of those receiving long-term support, **387,420** were aged 65 or above
- (GOV.UK, 2024)

Elderly Care Settings

- Residential Care
- Residential Nursing Care
- Hospital Care
- Domiciliary Care
- Live-in Care
- Assisted or supported living



Types of Elderly Care

- **Residential Care-** Offers living accommodations and personal care services for elderly who do not need constant nursing attention but require assistance with daily activities.
- **Residential Nursing Care-** Provides 24-hour medical care plus personal care, tailored for elderly with significant health conditions needing constant medical supervision.
- **Domiciliary Care** (Homecare)- Delivers care in the individual's own home, ranging from occasional visits for domestic help to daily medical care, preserving independence as much as possible.

*(Please look at the document on Moodle **FACT-SHEET- Elderly Care and Support**, for more information on this topic)*

Limitations of Elderly Care Settings

Residential Care

- Limited access to specialised medical care, potential feelings of loss of independence, and possible social isolation if not managed with engaging activities.

Residential Nursing Care

- Can be more costly due to intensive care requirements, may reduce personal autonomy, and residents might experience institutional feel rather than a home-like environment.

Domiciliary Care (Homecare)

- Quality and extent of care can vary depending on the provider and caregiver. There might be higher costs associated with intensive home care, and it requires management of several different caregivers coming into the home.

Each care setting has its advantages and challenges. Suitability may vary depending on the individual's health, financial situation, and personal preferences.

Unpaid Carers

Every year unpaid carers save the economy over £132 billion

- 5 million people in England and Wales are juggling caring responsibilities with work - that's 1 in 7 of the workforce.
- However, the significant demands of caring mean that 600 people give up work every day to care for an older or disabled relative.
- [Carer's Allowance](#) is the main carer's benefit and is **£81.90** for a minimum of 35 hours, the lowest benefit of its kind (you can earn a maximum of £150 after tax).

(CarersUK, 2024)

Unpaid Carers

- Every day another 6,000 people take on a caring responsibility – that equals over 2 million people each year.
- 59% of carers are women and 42% are men.
- 1.3 million people provide over 50 hours of care per week.
- Over 1 million people care for more than one person
- As of 2020, Carers UK estimates there are around 13.6 million people caring through the pandemic

(Carers UK 2020)

Cost of Social Care...

- The cost of residential care varies depending on area and need but can vary from just over £800 to nearly £1500.
- Domiciliary care can cost between £15 and £30 per hour.
- Unlike health care, social care is **means tested**
- Some older people are forced to sell their homes to pay for their care.

Current Funding Context and Issues in H+SC

- In England, the NHS long term plan is supported by a funding settlement up to 2023/24, with average annual increases of 3.3% a year.
- However, this comes against significant challenges such as hospital deficits, a maintenance backlog, and workforce shortages due to previous inadequate investment.
- Additionally, there are various grants determined for 2023 to 2024 aimed at social care funding improvements.

(GOV.UK 2023)

Small group Activity : Case study

Jaishree has been living in a care home for the last month. She is frail and cannot walk alone. Jaishree is not an active person and spends lots of time alone. She does not interact much with anyone. Sometimes, while sitting alone, she cries. This is a challenging situation that requires our understanding and empathy.

- First, identify Jaishree's Physical, mental, emotional and social needs.
- As a health and social care worker, envision the positive impact your plan of action could have on Jaishree's life.
- What will be your comprehensive plan to address her physical, mental, emotional, and social needs?

Palliative and End of Life Care

Palliative care is for people at any stage of serious illness, even as early as the day of diagnosis, and is provided alongside curative treatment.

End-of-life care is specifically for people diagnosed with a terminal illness who have six months or less to live.

Palliative and End of Life Care for Older Adults

- End of life care is support for people who are in the last months or years of their life.
- End of life care help to live as well as possible until one die and to die with dignity.
- people providing care should ask about wishes and preferences and take these into account as they work with you to plan care.
- Health care workers also provides support to family, carers or other people who are important to the dying person.
- Palliative and end of life care can be delivered in any care setting including in a hospice, residential home or in an older person's own home

(NHS, 2022; Haun et al 2007)

Let's watch to further understand Palliative Care

- [Understanding Palliative Care \(youtube.com\)](#)

Care for Patients with Dementia

When caring for people with dementia, consider the following;

- Enhance communication by maintaining eye contact.
- Encourage exercise to improve strength, balance, and cardiovascular health.
- Engage in activities the person with dementia enjoys.
- Establish a night-time routine.

Care for Patients with Dementia

- Keep a calendar.
- Plan for the future.
- Avoid arguing with the patient.
- Allow them some independence.
- Create a safe home environment.
- Understand sundowning.
- Use music to soothe and engage.

(Hammar et al 2011)

Lets watch a video

- [Living in a care home: A positive outcome for a person with dementia \(youtube.com\)](#)

Conclusion

- Assessing the holistic needs of older adults involves considering their entire well-being.
- Dependency ratios are a numerical measure of the economic burden on the working population caused by those not in the labor force.
- Predictably, multimorbidity is also associated with higher rates of health-care utilization and higher costs.
- New and emerging technologies have the potential to change care in the home and community.

Any questions?

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