



UNIVERSITY OF WALES TRINITY SAINT DAVID
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LIVING WITH CARE: THE OLDER PERSON
WRITTEN REPORT



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Introduction

In accordance with the NHS, anyone over the age of 65 is considered an older person. However, using a strict definition is difficult because people age biologically at different rates; for example, someone aged 75 may be stronger than someone aged 60 (NHS, 2020).

The reason for the increasing ageing of the UK population is due to better healthcare and hygiene, healthier lifestyles, diet, and better medical care.

This report will be developed around various topics concerning elderly people. First, the report will provide a summary of the Sadie case, including:

Health and social care needs,

Support and Interventions,

The report will review current **Policies, Legislation,** and **Theories** on an ongoing basis and discuss their benefits to individuals.

Finally, a brief conclusion and future recommendations will be presented to improve Sadie's current condition and the situation of all elderly individuals who find themselves in this situation, as there are many of these cases in the UK.



1. Old Age

There are several points of view regarding when 'old age' begins, for example, the World Health Organisation believes that most countries in the developed world define old age as 60. However, countries in Africa disagree with this definition, claiming that traditional seniority, or the elderly, begins between the ages of 50 and 65 (WHO, 2022)

While the majority of Europe holds views on old age that are like those of the World Health Organisation, believing that old age begins at the age of 65. A study in the United States discovered that you are considered old between the ages of 70 and 71 for men and 73 to 73 for women. People in the United Kingdom in 2017 believe that old age began at the age of 59. However, according to a 2018 survey, Brits believed you were considered old at the age of 70 (Aged Care Guide, 2020).

Sadie Evans, 82

Sadie is an 82-year-old widow who lives alone after losing her husband, with whom she had been living for over 40 years and had three children, to a heart attack shortly after she was immobilised due to a hip replacement. As a result, she was barred from driving.

However, she still had some help from her daughter, who is also very busy taking care of her own children, but due to Sadie's behaviour, her daughter stopped visiting her. There have also been a lot of offers from her neighbours, but she has always refused this because of her pride. Because she lives alone in an isolated house with no access to public transport, she is currently dealing with a variety of issues, including a lack of personal care (hygiene), poor vision, and difficulty hearing. (See **Appendix 1**).

Taking all these factors into consideration, Sadie may be at risk of contracting a new disease and worsening her situation. This is because her needs are increasing as she becomes more dependent on others every day.

For the above-mentioned problems (vision, hearing, and obesity), she is becoming weaker by the day because she is not eating a healthy diet as prescribed by the doctors, which is harming her health. Obesity is caused by extra calories being stored in the body as fat, according to the NHS.



Sadie is at risk of developing diabetes as well as other health conditions because of her weight gain, which is limiting her mobility. According to the NHS, smoking is responsible for approximately 7 out of every 10 cases of lung cancer (70%). It also causes cancer in a variety of other areas of the body (NHS, 2022).

Later she may contract an infection due to lack of hygiene, this is because she is not taking care of her personal hygiene. A lack of hygiene can lead to diseases and illnesses and lead to social rejection, bullying, low confidence, and low self-esteem (NHS, no date).

Sadie is starting to develop issues such as forgetting to lock the doors and take her medication. She may face financial difficulties because she is losing items such as money and eyeglasses. The family and friends who expressed an interest in assisting her were refused entry to her home, complicating her health situation because they may be the very people who can help her overcome this.

In this case study, there is no connection with the situation of Covid 19's problems because Sadie can receive visits from friends and family but does not want strange people in her house. However, when compared to the situation that some seniors faced during Covid 19, this case has gathered evidence and exact content of the same situation on which many mental problems are based.

2. Health and Social Care Needs

A healthcare need is one that is associated with the treatment, control, or prevention of an illness, disease, injury, or disability. And the care or aftercare of someone with these requirements. A social care need is defined as the need for assistance with daily activities while maintaining independence and social interaction (Mind, 2023).

Sadie requires a variety of medical care, as well as other types of care. As a result, this person's health and social care needs refer to the specific assistance, support, and services required to maintain her physical, mental, and emotional well-being while meeting her social needs.

Furthermore, the following are some common areas where Sadie may require health and social care assistance:

- **Physical health:** Includes medical care, medication management, assistance with cognitive activities, mobility assistance, and management of chronic conditions such as hip replacement.
- **Mental health:** Sadie requires counselling, therapy, or psychiatric care to address issues such as not seeing their two children, depression, or other mental health conditions.
- **Personal hygiene:** In this case, assistance is extremely necessary for activities such as bathing, personal hygiene, and maintaining personal hygiene because the individual has difficulty performing these tasks independently and does not allow his daughter to see and help her with hygiene in her private part.
- **Nutrition and diet:** here she requires assistance in meal planning, special dietary needs, or food preparation to avoid consuming too many sweets because she believes it is the last thing he wants to eat; this belief is incorrect, as she has no difficulty eating independently.
- **Community Interaction:** Keeping social connections is essential for happiness. So, Sadie needs help with socialisation by allowing her friends and neighbours to help her with cleaning. She needs to rejoin in community service or participate in recreational activities at her church, which she attended.

- **Emotional support:** Is required for Sadie to cope with issues such as grief (her husband's death and estrangement from her two children), stress, or trauma. This category could include counselling, therapy, or support groups.
- **Household care:** she requires assistance with housework, household maintenance, or personal security modifications to maintain a safe and comfortable living environment, such as being cautious with cigarettes to avoid a fire.
- Sadie may require **rehabilitation** services such as physiotherapy, occupational therapy, or speech therapy as she recovers from her surgery and injury.

It is critical to remember that she requires assistance with her mobility to face the challenge of cooking a good meal and switching to healthy food. Because she has already been evaluated by health professionals, such as his doctor, who has already advised her to make food care plans, and his daughter, who has it, who always advises Sadie to take care of her hygiene to ensure her well-being.

3. Support and Intervention Needs.

The NHS (2020) stated that anyone can require care and support plans for themselves or others for whom they care. As a result, this care and support plan will assist Sadie in determining the type of assistance required. How will this assistance be provided, and how much will your municipality spend on care?

This means that she can be as independent as possible and have as much control over her life as possible, allowing her to do what she enjoys and better understand her health condition and care needs. It also assists family and friends in understanding how they can support (NHS, 2020).

Additionally, in her situation, Sadie requires home care, nursing care, and other assistance organisations to help her live every day in her home because the daughter can no longer assist her.

Considering that she is having difficulty with daily tasks at home because she is unable to do them because of her mobility. Age UK believed that a variety of services are available, including assistance with housework, and personal care, including getting in and out of bed (Age UK, no date).

As a result, these home care services can assist her in taking care of her home so that she can remain independent for a longer period. So here are the services that the individual requires:

- Getting into and out of bed, washing,
- Preparing meals, and cleaning
- Installation of home adaptation equipment, such as stairlifts
- Visit a daycare centre (Age UK, no date).

It is very simple for Sadie to locate this type of assistance, beginning with obtaining an assessment of care needs from the city council.

If she is found to be eligible for assistance, they will be given a care plan outlining their needs and how they can get help to meet those needs.

This plan must be centred on Sadie because she will receive assistance in developing her skills and knowledge and assistance in living with her illness and gaining the confidence to manage her own health, care, and well-being.

As a result, this plan will help Sadie live with her conditions or disabilities every day and make decisions about how to deal with them. (NHS, no date). She can learn what works best for her, what information, care, and support she requires, and how it fits into her life over time. In addition to improving Sadie's quality of life, this plan may contribute to her safety and avoid unplanned care, particularly hospitalisations.

Care planning is a systematic approach to ensuring that people, regardless of their health status, can live for a long time. As a result, health and care professionals must engage in more productive and equitable discussions about what is most important to these people (NHS, no date).

3.1. Advice line

This image is an advice line that Sadie, her family, friends, and professional caregivers can call to find out about the advice she needs. This national telephone service is also free and confidential (Age UK, no date).

An advertisement for the Age UK Advice Line. It features a photograph of a smiling woman with grey hair wearing a headset, representing a member of the advice line team. Below the photo, the text describes the service as a free, confidential national telephone service for older people and their support networks. At the bottom, the contact number 0800 678 1602 is provided, along with the operating hours: 8am-7pm, 365 days a year.

Age UK Advice Line

Age UK's Advice Line is a free, confidential national telephone service for older people, as well as their families, friends, carers and professionals. Our team will give you information that's reliable and up to date and help you access the advice you need.

Age UK Advice Line: 0800 678 1602
Lines are open 8am-7pm, 365 days a year.

(Age UK, no date)



3.2. Advocacy

Advocacy is the process of assisting disadvantaged people in having their opinions and concerns heard to secure improved rights and entitlements (Henderson & Pochin, 2001, p. 1). In terms of advocacy, it will benefit Sadie if she and her daughter are unsure how to explain the situation, they can responsiveness to explain for her. In addition, advocacy can help with various types of processes such as Sadie's move to a nursing home, so she will receive better help from her doctor and the professionals who work there. Advocates are people who speak on her behalf. They can assist in filling out forms and sitting in on meetings and assessments, they are typically free (NHS, 2020).

To find the local Council to get help Sadie can use the link below <https://www.gov.uk/find-local-council>.

4. Policy and Legislation

However, there are some policies and legislation relevant to older people:

- Centre for Policy on Ageing Policies and Ageing
- Human Right Act (1989)
- The Equality Right Act (2010)
- The Care Act (2014)
- NHS Policy - National and Regional

The Care Act 2014 consolidates and updates adult care law in England, and it is widely regarded as the most significant piece of legislation in this area in 60 years. As a result, it went into effect on April 1, 2015, with more planned for April 2016 most of the Adult Care Act's provisions (Lawrence, 2016).

The Care Act imposes the following general duties on local governments:

- People well-being promotion
- Preventing the emergence of care and support needs by providing or arranging services, facilities, or resources
- Promotion of care and support integration with health and other services
- Adults and carers are given information and advice.
- Promotion of diversity and quality in service delivery
- Cooperation with third parties, in general, and in specific cases, such as the NHS.

Regardless of the nature or extent of those needs or the ability to finance that care or support, it is the responsibility of local authorities to assess the needs of those who may require care and support, as well as the needs of their careers. Also, Sadie can, however, approach the local authority for an assessment directly or be referred by a third party such as a hospital or GP. In this case, the assessment's goal is to identify her needs and determine whether those needs are eligible for local government assistance and support (Lawrence, 2016).



4.1. Legislation

The Health and Social Care Act 2012, aims to protect service users and holds providers responsible for having robust procedures and processes in place to prevent people using the service from being abused by staff, visitors, and others they could come across while using the service. The Act Protects people from abuse and inappropriate treatment, such as harmful care or treatment that ignores their needs or involves the use of restraint inappropriately (Lawrence, 2016).

5. Theory

A theory is a method of describing and explaining behaviour, social interactions, and social structures (Social Theory Applied, 2016).

5.1. Disengagement Theory

A functionalist approach to ageing is the disengagement theory. That is why, in 1961, Elaine Cumming and William Earle Henry proposed that older people abandon the roles they assumed in middle age to allow younger, presumably more capable people to assume these roles. It is primarily concerned with retirement and the roles that retirees take on when they leave their jobs (Study.com, 2023). Social ties deteriorate because of Sadie's withdrawal from society and loss of touch with societal expectations, according to this theory. Furthermore, the main roles in the family environment were changed, and she fails to get along with the grandchildren, resulting in a shift in the family hierarchy (Study.com, 2023).

5.2. The Activity Theory

This theory contradicts the disengagement theory because the more active and involved the elderly are, the more likely they are to be satisfied with their lives. That is why it is critical to find various types of activities for Sadie to do. As a result, it is believed that the more active she is, the more likely they are to age successfully, which is extremely beneficial to society (Maulk, 2010).

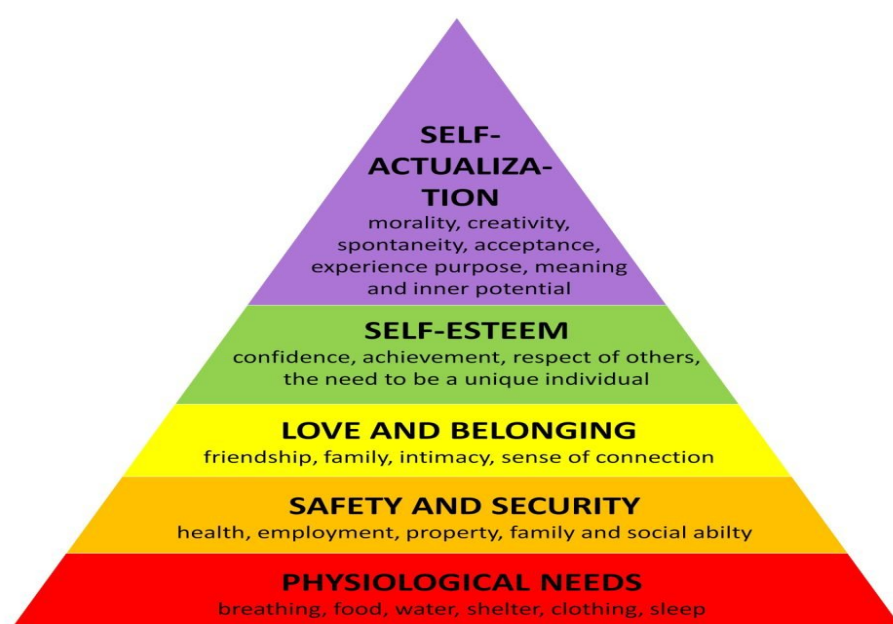
As a result of the physical changes associated with ageing, it can be difficult for her. It does not consider that constraints may prevent her from participating in activities (Maulk, 2010).

5.3. Continuity Theory

According to this theory, Sadie was unable to maintain her younger lifestyle and routines due to ageing, illness, and the death of her husband. (Wang, 2012).

5.4. Maslow's Theory

Abraham Maslow's Hierarchy of Needs, developed in 1943, is a psychological theory that states that humans have specific needs that must be met in a hierarchical order. This theory involves Sadie's situation because she has numerous requirements in various aspects of her life. As a result, this theory would be ideal for meeting existing lower-level needs before progressing to higher-level needs (McLeod, 2023).



(McLeod, 2023)

Physiological needs are defined as the most basic survival needs, such as air, water, food, shelter, and sleep. Also, when physiological needs are met, people seek security and protection in other areas of their lives, such as personal safety, financial security, health, and a stable environment (McLeod, 2023).

Sadie should strive to make social connections, experience love, and develop a sense of belonging and acceptance within their families, friendships, and communities. Also, she must seek recognition, respect, and self-esteem to be satisfied by love. Gaining a sense of accomplishment, mastery, and recognition from others is part of this (McLeod, 2023).



Self-actualization: The desire for personal growth, self-actualization, and realisation of one's full potential is represented at the top of the hierarchy by self-actualization. Pursuing personal interests, creative endeavours, and a meaningful life purpose are all part of this (McLeod, 2023)

It should be noted that Maslow's Hierarchy of Needs is a broad framework, and Sadie may have different variations and priorities in terms of which she needs to prioritise. This theory sheds light on human motivation and the needs that motivate our actions.



6. Conclusion

After researching various aspects of ageing, it can be concluded that a holistic approach to the current situation Sadie faces is needed, addressing various aspects of her well-being, including physical, mental, and social factors. It must be critical to promote healthy lifestyles and provide affordable health services for Sadie so that she can maintain her physical well-being.

In addition, as she is living alone in her house, she may suffer from depression and loneliness due to not seeing two other sons, so it is essential to prioritize mental health support. Counselling, social interactions and cognitive training programs can help improve your mental health and cognitive skills.

Here, social support and community involvement are key in preventing Sadie's social isolation and loneliness. Opportunities for interactions, community activities and the establishment of centres for Sadie can help foster a sense of belonging and connection. Sadie needs tailored financial security measures to ensure a comfortable retirement and access to necessary resources. Pension programs, affordable housing options, and financial literacy initiatives are examples of such initiatives.

Finally, it is critical to promote Sadie-friendly environments that are inclusive, accessible, and safe. This includes creating cities and communities that meet her needs, such as affordable transportation.

Conclusively, it should address her multifaceted needs of her by introducing a comprehensive approach that prioritizes physical health, mental well-being, social support, financial security, and age-friendly environments. Its quality can be improved by implementing policies and programs that address these issues.

7. Recommendations

There are several important recommendations for healthy ageing as people get older. Here are a few of the most important:

- Sadie is recommended to eat a well-balanced diet that includes eating fruits, vegetables, and protein. Proper nutrition can benefit both her physical and mental health.
- One of the other recommendations for Sadie is that she should be social, and maintain relationships and connections with family, friends, and the community because doing so can improve her mental health and can help her overcome loneliness.
- Sadie must schedule regular health check-ups with her doctors to maintain her health.
- It is also recommended that she maintain a safe, clean environment and evaluate the space to reduce the possibility of falls or accidents. Removing mess, cleaning the house regularly, handrails can be installed, lamps can be changed to another one with more lighting to ensure a safe environment.
- However, in addition to the precautions mentioned above, it is recommended that Sadie use communication technology, such as phone calls, video chats, social media, or online communities, as this can help her stay in touch with others, especially children who are geographically distant.
- She may also seek professional help, seeking professional help from therapists, counsellors or mental health professionals can be beneficial. Since these professionals can provide guidance, support, and strategies to deal with loneliness effectively.

There is a lack of social connections on Sadie's part, so she should actively try to build new relationships, putting herself in social situations like re-joining her friend's clubs and family environment, and trying to invite her grandchildren for lunch.

Also, since she already has a computer that was donated by your son, she might consider joining online forums centred around her interests or hobbies.

Remember, overcoming loneliness is a journey that takes time, determination, patience, and persistence, so Sadie should be open to new experiences.

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Appendix 1

Sadie Evans- Aged 82

Sadie is a widow, she sadly lost Jack, her husband of over 60 years four years ago to a sudden heart attack and lives alone. She is not very mobile as she had a hip replacement after a fall two years ago and as a result of this she can no longer drive.

She lives alone in a three bedroom detached house which has been her home since 1963 in a rural area with no public transport links. The house is structurally sound but not in particularly good repair and is getting increasingly messy and dirty in places.

Sadie has been offered help to clean her house by one of her neighbours but she does not want to accept the offer, firstly because she is too proud to accept help and secondly because she feels the neighbour is just being nosey! She lives on a pension and has little money after bills are paid. She owns the house and has some savings but will not use any of this capital as she sees it as her children's legacy.

Family and Friends

Sadie has three children. Ben, 62 (who is married with three children, James 28, Rachel 26 and Josh, 18 and lives in America) Richard, 60, (who is unmarried and lives in London) and Hannah, 44, (who is divorced and lives 12 miles away with her children Bethan, 14, Josh, 11 and Little Ben who is four years old.

The only one of her children that Sadie sees on a regular basis is Hannah as she lives relatively nearby and it is Hannah who sees to her mother's everyday needs, something which is difficult for her as she is a single working mother and also because as Sadie's needs are increasing she is becoming more reliant on her already busy daughter. Sadie feels that her daughter should do everything for her as she lives nearby and also as it is her duty as the only girl! She does have a relationship with Hannah's three children but this has become strained as there is friction between mother and daughter. Sadie talks about her two sons often and boasts about their lives and achievements to anyone that will listen but rarely says anything nice about her daughter and her children.

Sadie used to be a prominent member of her community and was active in her local church and WI but all this has changed since she lost her husband and then her driving license. She has lost many of her friends (deceased) and the few she has left are themselves elderly, also it must be noted that she is a proud woman and is embarrassed about her situation so does not encourage her remaining friends to visit

Health and Well-being

Sadie has poor eyesight and wears glasses and she is hard of hearing, she is also becoming increasingly overweight, something she puts down to her hip replacement and her age! Her diet is nutritionally poor and she eats a lot of convenience foods, sweets and chocolate, she used to cook a lot but now because of mobility and health issues she finds it difficult to use her kitchen. Her daughter has tried to encourage healthy eating

but Sadie gets upset when she tries to limit her sweet treats etc. and says eating is one of the few pleasure she has left. The doctor has told Sadie that if she continues to gain weight she is at risk of developing diabetes as well as other health conditions and that her weight is severely impacting upon her mobility. She is also a smoker which is something that is adversely affecting her health as she is prone to chest infections. Both the doctor and Hannah have tried to get her to consider giving this up but she says it is her choice and if Hannah refuses to bring her cigarettes she telephones the local butcher who brings them with his meat delivery! This is a worry not only on health grounds but also because of fire risk.

Sadie's personal hygiene is not good, she used to take a pride in her appearance but at the moment she has difficulty washing and dressing (and cannot get into the bath) and does not want her daughter to 'see her bits' so will not allow her to help her wash intimate areas of her body.

Sadie is getting very forgetful and increasingly forgets to lock doors, take medication often misplacing things such as money and glasses. When Hannah comments on this she denies it and accuses her daughter of trying to say she is 'mental' so that she can put her in a home.

What Sadie Says

Sadie says she is lonely since her husband left her behind and that she has nothing left anymore, she misses her sons and wishes she could see them more but they are so busy. Ben has bought her a lap-top so that she could skype the family but she does not know how to use it and she is too old to learn. She says that she has had her time and she is no use to anyone anymore and that this is the way things are. She does not want strangers in her home and certainly does not want to leave and go into a 'home'.

After Hannah raising her concerns about her mother to their GP, Sadie was referred to a local domiciliary care company and also given the contact details of Age Cymru as well as local Elderly support services. She is still waiting to be allocated a designated social worker.

TASK 1

You are the team leader of the domiciliary care team in Sadie's area.

Compile a person centred care plan which will meet all of Sadie's needs

Task 2

You work for a local Elderly support charity which has been asked to work with Sadie.

Compile a profile that may be used by people who are interacting with Sadie so that they may be able to better understand her background, needs and requirements and how she would like to be treated