

TITLE: HOME CARE AND CLIENT RELATIONSHIP IN WORK PLACE

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Introduction

Home care is directly solitary the most needed develop department within health care, so far it the topic that weight the medical practitioner understand slight surrounding. The point of this conversation is, firstly to research the basis for the universal protection of the medicating career from home care; following describe the reason surgeon should enlighten one selves within home care while a lot organisation of assistance is accessory to the care home arrangement of kindness to supplementation. The care services they bestow to patients in their branch including the association of ternary to confirm for what reason medicating information remain involve to secure victim hence fetching of instrument of marketplace pressure together with capital. Koren, (1986)

Home care and client's relationship

"One of the ways we make connections with our elderly clients is having parties where we play bingo with them. The game bingo truly excites the elderly community it seems to bring joy to them. They laughed and joke, and we have a meal at the end to wrap up the party with them, looking forward to next time. We have found as an agency that playing bingo makes a wonderful connection with the senior community that can never be broken. In order for agencies to build relationships, we have to create a bond with our clients that are not easily broken."

One of the best ways to build a connection and a relationship is to listen

"At time we are so quick to just do our job instead of listening. Don't allow the job duties to come before the relationship and the key point of simply listening. Treat them as mother and father it's our own responsibility to listen to our parent's elders. These strategies of listening has allowed me to grow my senior care agencies by leaps and bound. Yes, it may take a few hours out of your day to listen, but it's been proven to grow your business because of the relations"

SECONDARY RESEARCH ABOUT WHAT CAN WE DO TO IMPROVE CARE HOME IN THE HOME(2013)

Our presently organisation that is outsmart can award to support poverty-stricken care and motivate low earning and permit abandon to grow. Although we understand that home care, for the biggest part, is to carry out the quality level – it stillness leaves far much countless expression of poor and unsatisfactory altitude of care in home.

One of the major usual criticism we came across is position care is carried out by the clock. These elder people needs worker to be there for them every minute but with this time limits offer to worker. The ways worker can improve is by allowing more time to help them with some various activities.

Silver (1995)"The most common nutritional problems in nursing home residents are weight loss and concomitant protein energy under nutrition. Although the causes of weight loss in these patients can usually be treated, they are rarely identified in the nursing home. Depression and adverse drug effects are the most common causes of weight loss .We discuss the appropriate use of feeding tubes in the nursing home and the early use of enteral feeding to prevent the development of severe

protein energy under nutrition. Vitamin deficiencies especially foliate and pyridoxine deficiencies frequently develop in nursing home residents. Hip fractures are often associated with vitamin D deficiency”.

Wellman(2002)”Family caregivers, although uncompensated, provide daily care for more than 75% of the older adults who are depended on home care technologies such as home enteral nutrition. The high complication rates and poor outcomes seen in older adults suggest that being an effective care giver requires specialised training in home care technologies, and dietitians need to more actively involve in discharge planning and follow-up home care. The level of knowledge and skill mastery required for technology dependent care, along with the chronic, intensive nature of family caregiver and the disruptions in caregiver’s daily lives, lead to negative emotional and physical consequences that may interfere with. Recognizing that care recipients and caregivers are underserved populations.”

“Burchfield (2005) Telemedicine may represent the salvation for home health agencies reeling under the effects of the balanced budget Act of 1997. Implementation of the home health PPS under the BBA mandate created a tremendous challenge for these agencies to reduce costs and improve efficiencies or go out of business. Agencies that were initially unprofitable under PPS understood that if they wanted to become profitable once again, they had to reduce the number of home visits per episode without compromising the quality of care. For many of these home agencies, It has enable these agencies to monitor patients daily and schedule visits based on the patients need rather than according to a set schedule, as has been the traditional practice”

7 ways to improve caregiver patient relationship (2015)

1. Learn to ask for help: The caregiver/ patient relationship is very intimate and it often involves difficult, confusing or emotionally challenging scenarios one of the first steps toward high-quality communication and a safe, healing relation is transparency and the ability to ask for help.
2. Exercise compassion: A home care environment often entails a severely disabled or wounded person who may not have full command of brain function and capacities such as motor skills memory and speech. These types of disabilities are difficult and can easily create frustration within both the client and the patient
3. Be patient: patients who have suffered a traumatic brain injury often have difficulty with skills like speech and memory. Additionally, since traumatic brain injuries often affect the part of the brain that deals with response to stimuli, risk- taking and adherence to rulers injured people may exhibit less concern for rules and an increased level of risky or downright dangerous behaviour. Patience is the most important virtue a caregiver can have in situations like these. It is important for caregiver to understand that injured people are not always in complete control of their actions and, with that in mind, to give the person extra time to calm down and make different decisions. This often requires reasoning, positivity and empathy.
4. Use encouragement: Encouragement Is an underrated soft skill in addition to motivating patients to behave differently when needed, encouragement also goes a long ways toward boosting a patient’s self esteem and making him or her feel capable and in charge once more.
5. “Be an active Listener: Each client has a story to tell and learning to truly listen to that story will quickly foster a bond and encourage increased communication and understanding.”

“Do what the patient Loves: Do you have a patient who loves to read but cannot anymore due to poor vision or impaired brain function? Maybe you have a patient who loves puzzles, scrapbooking or board games. ”

6. “Practice Respect: caregiver must have a deep respect for the patient and his or her family. The patient’s home is a workplace and must be treated like one. When a caregiver is respectful of a patient’s home, belongings and preferences, the patient feels respected in turn, which leads to less distress and an increased feeling of relaxation and comfort.”

Primary research about how home care can be improve in workplace

Interviews: The first anonymous person to be interview worked at assistant teacher in Roding primary school in barking and Dagenham, London. The interview time was 10.am to 11.am on 29/4/2018. Ask her, what did she think of how can we care home improve. She said that are mother is in care home that one way she will love them to improve by listening to them and communicating with them mostly the elderly people and more fun activities . She said that her mum is not happy to be in home care because of the way they treat her. Eventually she said she will love to have her own house so her mum can move out from care home and fully take the responsibility for her mum.

Second- interview: Second anonymous person worked at care assistant in hope super jobs Ilford, London. The interview started about 11.am to 11:30 on 30/4/2018, she talked about training staffs to be more compassionate, experienced o f ideas how they can treat their client professional and also pay attention to patient and also providing care needs to help patient. Always be on time when dealing with elderly people, be positive around them always.

FINDINGS: Grimshaw (2003) .Important labour appear to be organize proof that objective guideline to the pattern everyday use. Importance display to countless cleint stop collect proper guardianship, nor get inessential without dangerous protection. Multiple begin case are recommend output for the issue that a lone to be already to be majority successful with well organized to uncertain.Our point is supply the review the existing understanding surrounding creativity to adjust pharmaceutical exeercise material documentation submit to there form conuct in achieveable, besides that reshape mostly need full begin of uncommon measure (physician, group, operation outspread surroundings) change the particular background with objective category.

QUALITATIVE/ QUANTITATIVE RESEARCH

Dewar (2011) “It has been argued that mixed methods research can be useful in nursing and health science because of the complexity of the phenomena studied. However, the integration of qualitative and quantitative approaches continues to be one of much debate and there is a need for a rigorous framework for designing and interpreting mixed methods research (i.e parallel, concurrent or sequential) used in mixed methods studies with healthcare and exemplifies the use of

triangulation as methodological metaphor for drawing inferences from qualitative and quantitative findings originating from such analyses”

DISCUSSION MIXTURE OF PRIMARY& SECONDARY DATA

The overall perspective in secondary research it's to support broke community of care to motivate low earning and permit them to grow. The primary is base on staffs to be more experienced and also have compassion on how they treat their patients in professional way .Pay attention to patient and also providing care needs to patient. Be positive around patient, always be on time to client houses and always communicate with client, although to the understand that home care is the biggest development that carryout the quality level of user. The poor unsatisfactory altitude of homes care are one of the major usual criticism that are affect home care across are time limit offer to worker.

The most common nutrition is problem that nursing home resident face are weight loss problems and concomitant of protein energy under nutrition considering the causes of how patients can usually be treated. Depression and drug effect are most common causes of weight loss. We discuss the appropriate use of enteral feeding tube in the nursing home, the early use of enteral feeding to prevent the development of severe protein energy under nutrition.

RECOMMENDATION& CONCLUSION

Considering the(2011) “overall health care is moving into the home increasingly often and involving a mixture of people, a variety of tasks, and a broad diversity of devices and technologies, it is also occurring in a range of residential environments. The factors driving this migration include the rising costs of providing health care, the growing numbers of older adult, the increasing prevalence of chronic disease; improved survival(including those of fragile newborns)

The conclusion and conclusion is presented below reflect the most critical steps that the committee thinks should be taken to improve the stated of health care in the home, based on the literature reviewed in this report examined through a human factors lens. They are organized into four areas

- 1:” Health care technologies, including medical devices and health information technologies involved in health care in home
- 2: caregivers and care recipients.”

Home health care saver and more effective contribution to reduce the cost. The committees choosing not to supply recommendation, as they focus on different areas of health care in the home are similar important to the different electorate affected areas of home care.

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