

Masuma Begum-1915403-Final report- task 2

by Masuma Begum

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Student name: Masuma Begum

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Introduction:

The purpose of this report is to evaluate the social and medical needs of elderly people in the UK including, Sarah a 70-year-old diabetic female experiencing dementia. This report closely examines the services offered to older persons on a local level nationwide, while taking into consideration current initiatives and legislation. Old age is difficult to define because people age differently, and ¹ someone who is 75 years old may be healthier than someone who is 60 (NHS, 2023). Additionally, Old age is marked ⁴¹ by the build-up of molecular and cellular damage, which causes a decline in physical and mental abilities, increased risk of disease, and ultimately death (WHO, 2022). These changes are not solely based on a person's age and differ greatly among individuals. Along with biological changes, old age often involves other life changes such as retirement, finding suitable housing, and dealing with the loss of loved ones (WHO, 2022). This report closely examines the services offered to the elderly on a local level nationwide to achieve healthy ageing, while taking into consideration current initiatives and legislation. Nonetheless, it is evident Sarah is in her old age due to her age and declining health (see Appendix 1).

Ageing Population:

Medical and technological advances have considerably contributed to people's longevity in England, resulting in a significant increase in elderly people. This tendency is anticipated to accelerate further during the subsequent twenty years (NHS, 2023). As people live longer lives, the concept of old age is always evolving. Furthermore, better medication, healthier lifestyles, and illness-prevention approaches are now more widely available. In addition, scientific development has created practices that encourage a youthful and healthier life for a longer period of time (Alderslade, 2020). While this is encouraging, it poses a challenge for the NHS considering older people generally experience persistent health concerns that necessitate greater care (NHS, 2023).

Nonetheless, The aging population is a praiseworthy achievement for the Government as older individuals constitute a rising percentage of the population, consequently

making a progressively valuable contribution to society. They serve as dedicated workers, volunteers, taxpayers, and caregivers (Government Office for Science, 2016). Additionally, healthy aging is crucial for the population. Healthy ageing refers to the process of maintaining and developing the ability to function well in older age. This includes the ability to interact with one's environment and engage in activities that are important to them. The action plan for the Decade of Healthy Ageing emphasizes the importance of collaboration with older individuals and creating age-friendly environments, both physically and socially, in order to enhance the quality of life (Kuppen et al, 2023).

Sarah's Health and Environment:

Sarah, a 70-year-old woman, lives with her daughter Emily after her husband David died during the Covid-19 pandemic. Emily, who is a single mother of three, now has the responsibility of taking care of Sarah along with her own family and work. Sarah's behaviour has undergone a significant change since her husband's death during the Covid-19 pandemic. She has developed a smoking habit and is less enthusiastic about spending time with her loved ones (see Appendix 1). This shift in behaviour is consistent with the pattern observed in individuals with dementia, who gradually become less engaged in activities and conversations as the disease progresses (Alzheimer's Society, 2021b). Sarah used to be social and have visitors, but now she is grieving and sometimes sees and talks to her deceased husband due to her dementia. Emily now assists Sarah with basic tasks like bathing, dressing, and taking medication because of her dementia and diabetes (see Appendix 1).

Moreover, the unfortunate loss of her husband amidst the pandemic has understandably caused her to experience deep emotions of guilt, loneliness, and hopelessness, as she was unable to be by his side during his final moments due to the necessary regulations surrounding Covid-19 (Almekinder, 2020). Sarah's health is in danger of further deterioration because Dementia is a brain disorder that progressively deteriorates memory and cognitive ability (NIA, 2021). Additionally, there is no cure for dementia, over time, an increasing number of brain cells are destroyed, leading to the aggravation of symptoms such as no longer recognising family

members, and behaviour changes (Dementia UK, 2023a). It could be said that Sarah's diabetes and smoking habit exacerbate the risk of severe health issues including heart disease, kidney failure, blindness, and nerve damage potentially leading to amputation (CDC, 2022).

Sarah's Health and Social Care Needs:

Sarah has developed a habit of smoking heavily since the passing of her husband (see Appendix 1). It would be beneficial for her to consider addressing the need to quit smoking, and this can be achieved with the assistance of her GP or local pharmacy. Numerous options are available for Sarah to explore in order to quit smoking, such as Nicotine replacement therapy, E-cigarettes, and medication, which can be obtained from various shops, pharmacies, or by prescription (NHS, 2022a). Sarah is at risk of developing cancer, cardiovascular disease, chronic obstructive pulmonary disease (COPD), and other related health conditions (NHS, 2022b). Therefore, medical intervention is of utmost importance for her smoking cessation.

Sarah occasionally experiences hallucinations in which she converses with and sees her deceased husband (see Appendix 1). Visual hallucinations are typically a result of brain damage and can also be caused by physical illnesses like fever, seizures, strokes, migraines, and infections (Alzheimer's Society, 2021a). Conditions that cause inflammation and infection, such as pneumonia, can disrupt brain function and lead to delirium and hallucinations (Alzheimer's Society, 2021a). Since delirium is a serious medical condition, Sarah requires medical help to identify and treat the underlying cause of her hallucinations. Sarah is receiving domiciliary care (see Appendix 1); nonetheless, it is best suited for individuals with less acute diseases, such as early-stage dementia, where limited assistance is required. In contrast, based on Sarah's symptoms, it is evident that her dementia has progressed, and her needs are not being met, therefore it is critical to address the type of care she needs (Elder, 2023).

Additionally, living with dementia does not change a person's social needs, but it does change the way they communicate those needs (B&M Care, 2023). Currently, Sarah is not participating in social interactions and prefers to be alone in her room (see Appendix 1). This suggests that Sarah is being excluded from society. To promote her

independence and improve her social interactions, it is important to follow the social model of dementia care and provide person-centered care that focuses on her rights. This means treating Sarah as an individual and understanding her specific social needs (B&M Care, 2023).

Furthermore, Sarah appears to struggle with the presence of her social care workers (see Appendix 1), which could be attributable to issues such as a lack of comprehension, overstimulation, inadequate physical conditions, and even undiagnosed discomfort. To address and reduce these troublesome behaviours, it is critical to prioritise effective communication, which can only be accomplished through an in-depth comprehension and awareness of Sarah's individual needs and preferences (B&M Care, 2023). Furthermore, according to Dementia UK (2023b), it would be beneficial for Sarah to undergo a comprehensive Assessment of need in order to determine her health and social care requirements. It should be noted that, although care services are not completely free, individuals with dementia are eligible for NHS continuing healthcare (CHC) funding, which can help cover certain aspects of her care needs (Dementia UK, 2023b).

Support and Intervention:

First and foremost, it would be advisable to conduct a needs assessment in order to address the necessary intervention for Sarah's care. The outcome of this assessment will then enable her care coordinator to develop a comprehensive care plan that ensures she receives the appropriate care and support (Mind, 2023). According to the ⁵⁰ National Collaborating Centre for Mental Health, Dementia Care Pathway (2018), Sarah's care plan should be evaluated annually to ensure that it meets her requirements as well as the needs of her family or carer. The plan should be amended as needed, and Sarah is entitled to interventions to help her manage her health and well-being. She should also be given aid in remaining self-sufficient, such as access to dementia-friendly communities, assistance with advocacy, and care at home. Sarah additionally needs to be assisted in engaging in meaningful daily activities that are suited to her needs (National Collaborating Centre for Mental Health, 2018).

Sarah presently receives domiciliary care (see Appendix 1), nevertheless due to her advancing dementia intervention is needed, and she would benefit more from having a live-in carer. This is due to the fact that she is frequently alone at home while her daughter is at work, and as her dementia advances, domiciliary care may be unable to provide the required consistency and routine. Furthermore, there is the risk of missed carer visits, and domiciliary care may not be the safest option for Sarah as she could wander or become more prone to accidents if left alone (Elder, 2023).

Having a live-in carer may benefit Sarah, as it will provide person-centered care, and reduces stress from the change of environment, eliminates the need for her to be home alone while her daughter is at work, and allows for personalised activities, meals, and routines. A live-in carer can provide her support 24 hours a day, seven days a week to meet her complex care needs. However, the drawback is that a new person will be coming into the home, which may necessitate home adjustments (Elder, 2023). However, it is important to note that as of 31 March 2023, there was a considerable number of 434,243 people waiting for assessments, care packages, direct payments, or reviews, this means that Sarah may have to wait for longer than 6 months for her care needs assessment (MA Education, 2023).

Unfortunately, the limited funding available to the NHS and local authorities necessitates the prioritization of acute care and high-need individuals, resulting in some individuals being inadvertently overlooked (Centre for Ageing Better, 2023). The shortage of funding for community health care, intermediate care, and social care further contributes to delays in needs assessments, decisions on care packages, and home modifications. Consequently, individuals experience prolonged hospital stays and an increased risk of losing their mobility and independence. Additionally, the lack of available staff for rehabilitation often leads to individuals deteriorating to the point of permanent disability and dependency (Centre for Ageing Better, 2023).

Moreover, the implementation of technology such as artificial intelligence in suitable situations has the potential to greatly improve the quality of care and support provided to individuals like Sarah, enabling them to extend their stay in the comfort of their own homes (Alzheimer's Society, 2023). Experts are currently investigating the feasibility of utilizing sensors strategically placed around the household to intelligently observe an individual's actions. This would be beneficial for Sarah as it enables prompt

identification of potentially hazardous activities or indications of declining health and allows for immediate assistance to be provided (Alzheimer's Society, 2023).

Additionally, according to Marie Curie (2023), Sarah should be encouraged to create an advance care plan due to her advancing dementia and the potential loss of mental capacity. This plan will document her preferences for future care, including where she wants to be looked after and what medical treatments she does or does not want. Healthcare professionals will follow this plan once she no longer has the ability to make decisions (Marie Curie, 2023). Advocacy would be beneficial for Sarah due to her cognitive decline (Marie Curie, 2023).

In addition, referring Sarah to Age UK could be very helpful for her. Age UK offers various services that improve the quality of life and provide important assistance to older individuals. These services include befriending service, 24/7 helpline, social gatherings, exercise programs, services to help with daily tasks and additional services to enable seniors to remain in their homes for longer (Age UK, 2023a). There is also a need for intervention to assist Sarah in quitting smoking, which could be achieved by suggesting a referral to the NHS stop smoking service (Diabetes UK, 2023).

Theories:

Sarah appears to be displaying signs of disengagement from society, as she has chosen to distance herself from social activities (see Appendix 1). According to the disengagement theory, this is considered a natural part of the aging process. The theory suggests that as individuals anticipate their own mortality and the decline of their personal capabilities, they tend to withdraw from both personal and social interactions within society, this is a mutual occurrence and society also withdraws from them. Consequently, their social circle gradually becomes more limited (Actforlibraries, 201 : Asiamah, N., 2017). However, The disengagement theory is contradicted by the activity theory of ageing, which says that older persons who keep active and maintain social relationships are the happiest (Asiamah, N., 2017: HRF, 2017). According to this view, elderly people age successfully when they continue to engage in activities and relationships that they enjoy. It also claims that engagement in activities is related to

overall contentment. According to the activity theory, it is important for Sarah to keep active and socially engaged in order to age successfully (Asiamah, N., 2017: HRF, 2017).

Additionally, Maslow's hierarchy of needs proposes ³⁶ that human behaviour is driven by different levels of needs. These needs must be fulfilled in a specific order, with basic necessities like food and shelter being prioritized over love, self-esteem, and personal growth (Bailey, 2022).



- Sarah's physiological needs are similar to those of younger individuals, including the need for food, water, shelter, and sleep. However, her declining health may necessitate additional care and attention to meet these needs.
- Sarah's safety needs must be achieved, this includes having a safe and accessible living environment, receiving adequate medical care, and being safeguarded from abuse and neglect. Addressing these requirements can provide her with a sense of security and tranquillity, increasing her general well-being and quality of life.
- Sarah is currently facing social isolation and loneliness, particularly following the passing of her partner. Unfortunately, this has had a detrimental effect on both her mental and physical well-being. Engaging in social support and interaction would greatly contribute to enhancing her mood and fostering a strong sense of purpose and belonging.

- Sarah's family can express her admiration for her everyday accomplishments, which will help her self-esteem increase.
- Finally, Although Sarah may not prioritize self-actualization needs, they are still necessary for her to feel fulfilled and purposeful. Encouraging her independence can help meet her self-actualization needs.

Relevant Policy and Legislation:

According to Prato (2023) Outsourcing, workforce shortages, and financial cuts have harmed the NHS's quality. According to studies, there is a ⁵¹ tension between legal and performance legitimacy and legitimacy based on shared values. As a result, when rules and regulations prioritise inequality over public well-being, the healthcare system's credibility deteriorates.

The Care Act 2014 aimed to ⁴⁹ empower individuals in need of care by giving them more control and authority over the services they receive (SCIE, 2021). ²³ The care Act 2014 is considered the most significant legislation since the establishment of the welfare state and highlights the importance of preventing or delaying the need for care and support (SCIE, 2021). ³⁰ Despite this, according to Care Quality Commission, an annual assessment of health care and social care in England- The state of health care and adult social care in England 2021/22, ³ "Around half a million people may be waiting either for an adult social care assessment, for care or a direct payment to begin or for a review of their care. In the first 3 months of 2022, 2.2 million hours of homecare could not be delivered because of insufficient workforce capacity, leading to unmet and under-met needs" (CQC, 2022). However, it is worth mentioning that the COVID-19 pandemic has put the NHS in a vulnerable position, as it is currently dealing with a backlog of patients waiting for treatment and facing staff shortages (Vacek et al., 2023).

Additionally, Caregiving and maintaining people's dignity both depend on anti-discriminatory practices. The Equality Act 2010 prevents discrimination and unjust treatment for both healthcare recipients and providers (SCI, 2020). However, it is important to note that ²⁵ the COVID-19 epidemic has brought to light the issue of ageism and prejudice against older individuals (Mahler, 2021). Unfortunately, there has been

a tendency to blame older people for the implementation of lockdowns, portraying them as vulnerable and burdensome to society. This situation has led to a compromise on their human rights and has further worsened existing inequalities, especially considering the significance of digital communication in today's world (Mahler, 2021). Ageist judgments have also made it more difficult for older individuals to access necessary medical treatment, especially with the increase in remote healthcare services during the pandemic. Consequently, this has widened the already-existing digital gap and prevented them from receiving crucial information regarding the pandemic and healthcare (Mahler, 2021).

According to ²⁹Ms. Claudia Mahler, an independent expert appointed by the UN Human Rights Council, older people face various obstacles in fully enjoying their human rights. They encounter discrimination and inequality in areas such as healthcare, employment, and accessing services (OHCHR, 2021a). That said, Ms. Claudia Mahler urges countries to address the inadequacy ⁵⁵of human rights protection in the international legal framework and to implement legislation and policies that prevent age discrimination. She also emphasises the importance of combating ageism in all measures affecting older people (OHCHR, 2021b).

Conclusion:

The definition of old age is not exclusively established by a person's age (WHO, 2022). As individuals live longer, the definition of "old" has shifted; breakthroughs in medicine, lifestyle choices, and disease prevention have resulted in a better and longer life (Alderslade, 2020). Sarah, on the other hand, is clearly in her old age. In order to ensure that the older person receives the appropriate care and support, it is crucial to evaluate their needs, this can be accomplished by conducting a needs assessment (Mind, 2023).

The COVID-19 pandemic has left the NHS vulnerable, with a backlog ²⁵of patients waiting for treatment and staff shortages (Vacek et al., 2023). This has resulted in people waiting for more than 6 months for assessments, care packages, and reviews (Elder, 2023; MA Education, 2023). Although care services are not completely free, individuals with dementia can receive NHS continuing healthcare funding to cover

some of their needs (Dementia UK, 2023b). However, limited funding has caused certain older people to be overlooked (Centre for Ageing Better, 2023). Ageism in accessing healthcare services has been a major concern, especially during the pandemic (Mahler, 2021; OHCHR, 2021a). Ms. Claudia Mahler urges countries to address the lack of human rights protection and implement legislation and policies to prevent age discrimination and combat ageism affecting older people (OHCHR, 2021b).

Additionally, the use of technology like artificial intelligence can greatly enhance the care and support received by individuals like Sarah, allowing them to stay in their own homes for longer (Alzheimer's Society, 2023). Advocacy and advance care planning are also important for elderly individuals with cognitive decline (Marie Curie, 2023). Charity organizations like Age UK are effective in aiding the elderly and helping them age successfully (Age UK, 2023a). Overall, the ageing population is a significant achievement for the Government (Government Office for Science, 2016).

Recommendations:

It would be highly recommended that healthcare professionals support positive attitudes toward Sarah, implement person-centered care planning, and enhance their skills in delivering personalized care. This is of utmost importance in enhancing Sarah's quality of life. Additionally, it is essential to ensure convenient access to assistive devices for Sarah to effectively manage her diabetes. Moreover, implementing a flexible service model could contribute to her improved diabetes management.

A highly significant suggestion for Sarah would be to assist her in quitting smoking. It is important to note that smoking, along with diabetes, increases her risk of developing heart disease (CDC, 2022). One of the main obstacles that may hinder her from quitting smoking is the unwanted withdrawal symptoms resulting from prolonged nicotine use (National Behavioural Health Network, 2019). Nonetheless, this barrier can be overcome with the help of the local NHS Stop-Smoking Service, which provides one-on-one or group counselling along with the use of prescribed drugs and nicotine products such as gum, lozenges, or patches. (Age UK, 2023b).

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References:

Actforlibraries (2017) 'An overview of cumming and henrys social disengagement theory', *Actforlibraries.org*. Available at: <http://www.actforlibraries.org/an-overview-of-cumming-and-henrys-social-disengagement-theory/> (Accessed: 27 July 2023).

1
Alderslade, L. (2020) *What age is considered 'old'?*, *Aged Care Guide*. Available at: <https://www.agedcareguide.com.au/talking-aged-care/what-age-is-considered-old> (Accessed: 28 July 2023).

39
Age UK (2023a) *Services*, *Age UK*. Available at: <https://www.ageuk.org.uk/services/> (Accessed: 26 July 2023).

35
Age UK (2023b) *Smoking*, *Age UK*. Available at: <https://www.ageuk.org.uk/information-advice/health-wellbeing/mind-body/smoking/> (Accessed: 28 July 2023).

22
Almekinder, E. (2020) 'The elderly and diabetes: Everything you need to know', *TheDiabetesCouncil.com*. Available at: <https://www.thediabetescouncil.com/the-elderly-and-diabetes-everything-you-need-to-know/#:~:text=High%20blood%20pressure%2C%20high%20LDL%20cholesterol%20and%20triglycerides%2C,that%20cause%20problems%20for%20the%20elderly%20with%20diabetes.> (Accessed: 24 July 2023).

34
Alzheimer's Society (2021a) *Hallucinations and dementia*, *Alzheimer's Society*. Available at: <https://www.alzheimers.org.uk/about-dementia/symptoms-and-diagnosis/hallucinations> (Accessed: 24 July 2023).

21

Alzheimer's Society (2021b) *Social withdrawal and dementia, Alzheimer's Society*. Available at: <https://www.alzheimers.org.uk/about-dementia/symptoms-and-diagnosis/symptoms/social-withdrawal#content-start> (Accessed: 24 July 2023).

2

Alzheimer's Society (2023) *How artificial intelligence can help people affected by dementia, Alzheimer's Society*. Available at: <https://www.alzheimers.org.uk/blog/artificial-intelligence-ai-dementia> (Accessed: 26 July 2023).

9

Asiamah, N., 2017. 'Social engagement and physical activity: Commentary on why the activity and disengagement theories of ageing may both be valid'. *Cogent Medicine*, 4(1), p.1289664. Available at:

<https://www.tandfonline.com/doi/full/10.1080/2331205X.2017.1289664> (Accessed: 28 July 2023).

14

Bailey, A. (2022) 'What is the hierarchy of needs?', *Verywell Health*. Available at: <https://www.verywellhealth.com/hierarchy-of-needs-maslow-s-five-categories-of-needs-5220468> (Accessed: 27 July 2023).

10

B&M Care (2023) *What is the social model of dementia?, What is the Social Model of Dementia? | B&M Care*. Available at: <https://www.bmcare.co.uk/blog/What-is-the-Social-Model-of-Dementia/> (Accessed: 26 July 2023).

⁴
CDC (2022) *Smoking and diabetes, Centers for Disease Control and Prevention*. Available at: <https://www.cdc.gov/diabetes/library/features/smoking-and-diabetes.html> (Accessed: 24 July 2023).

¹⁸
Centre for Ageing Better (2023) *Mind the gap: Between Health and Social Care, Centre for Ageing Better*. Available at: <https://ageing-better.org.uk/blogs/mind-gap-between-health-social-care> (Accessed: 26 July 2023).

³⁷
³¹
CQC (2022) *The state of health care and adult social care in England 2021/22-Access to Care, Access to care - Care Quality Commission*. Available at: <https://www.cqc.org.uk/publication/state-care-202122/access> (Accessed: 26 July 2023). ²⁷

Dementia UK (2023a) *Alzheimer's disease, Dementia UK*. Available at: <https://www.dementiauk.org/about-dementia/types-of-dementia/alzheimers-disease/#middlestages> (Accessed: 23 July 2023). ⁸

Dementia UK (2023b) *Guide to continuing healthcare (CHC) funding, Dementia UK*. Available at: https://www.dementiauk.org/get-support/legal-and-financial-information/guide-to-continuing-healthcare-funding/?msclkid=52c85fb1103216ead02c3b701af08988&utm_source=bing&utm_medium=cpc&utm_campaign=Financial+support+%5BTier+2%5D&utm_term=dementia+uk+chc&utm_content=CHC#application (Accessed: 26 July 2023).

⁴
Diabetes UK (2023) *Help with giving up smoking, Diabetes UK*. Available at: <https://www.diabetes.org.uk/guide-to-diabetes/life-with-diabetes/help-with-giving-up-smoking> (Accessed: 26 July 2023).

32

Elder (2023) *What is domiciliary care for the elderly?*, Elder. Available at:
<https://www.elder.org/domiciliary-care/> (Accessed: 24 July 2023).

42

Government Office for Science (2016) *Future of an ageing population* - gov.uk, GOV.UK. Available at:
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/816458/future-of-an-ageing-population.pdf (Accessed: 28 July 2023).

11

Kuppen, R., de Leede, M., Lindenberg, J. and van Bodegom, D., 2023. 'Collective prevention of non-communicable diseases in an ageing population with community care'. *International Journal of Environmental Research and Public Health*, *20*(4), p.3134. Available at: <https://www.mdpi.com/1660-4601/20/4/3134> (Accessed: 28 July 2023).

MA Education (2023) *60,000 cut in social care waiting lists but needs continues to mount, says Adass, Community Care*. Available at:
<https://www.communitycare.co.uk/2023/06/21/60000-cut-in-social-care-waiting-lists-but-need-continues-to-mount-says-adass/> (Accessed: 26 July 2023).

Mahler, C. (2021) *A/HRC/48/53- Report of the Independent Expert on the enjoyment of all human rights by older persons*. Available at: <https://undocs.org/A/HRC/48/53> (Accessed: 27 July 2023).

Marie Curie (2023) *Advance Care Planning: Information for Professionals*, Marie Curie. Available at: <https://www.mariecurie.org.uk/professionals/palliative-care->

knowledge-zone/proving-good-quality-care/advance-care-planning?msclkid=0e277126306d1da5ac5315e707f4159b (Accessed: 26 July 2023).¹

Mind (2023) *Needs assessments*, Mind. Available at: <https://www.mind.org.uk/information-support/legal-rights/health-and-social-care-rights/needs-assessments/> (Accessed: 26 July 2023).

⁶ National Behavioural Health Network (2019) *Older adults, behavioural health, and smoking: Why quitting smoking is still a conversation worth having*, The National Behavioural Health Network for Tobacco & Cancer Control. Available at: https://www.bhthechange.org/resources/older-adults-behavioral-health-and-smoking-why-quitting-smoking-is-still-a-conversation-worth-having/#_ednref8 (Accessed: 28 July 2023).

⁵⁶ National Collaborating Centre for Mental Health (2018) *Dementia pathway: Royal College of Psychiatrists*, www.rcpsych.ac.uk. Available at: <https://www.rcpsych.ac.uk/improving-care/nccmh/service-design-and-development/dementia> (Accessed: 26 July 2023).²

²⁶ NIA (2021) *What is Alzheimer's disease?*, National Institute on Aging. Available at: <https://www.nia.nih.gov/health/what-alzheimers-disease> (Accessed: 23 July 2023).

² NHS (2022a) *Stop smoking treatments*, NHS choices. Available at: <https://www.nhs.uk/conditions/stop-smoking-treatments/> (Accessed: 24 July 2023).¹⁷

NHS (2022b) *What are the health risks of smoking?*, NHS choices. Available at: <https://www.nhs.uk/common-health-questions/lifestyle/what-are-the-health-risks-of-smoking/> (Accessed: 24 July 2023).

NHS (2023) NHS: ¹² *Living well, ageing well and tackling premature mortality, Older people, Improving care for older people*, NHS choices. Available at: <https://www.england.nhs.uk/ourwork/clinical-policy/older-people/improving-care-for-older-people/> (Accessed: 14 July 2023).

OHCHR (2021a) ¹⁵ *Independent expert on the enjoyment of all human rights by older persons, The Office of the High Commissioner for Human Rights*. Available at: <https://www.ohchr.org/en/special-procedures/ie-older-persons> (Accessed: 27 July 2023).

OHCHR (2021b) ²⁹ *Pandemic exposes ageism and age discrimination in society, says UN expert, OHCHR* ¹ *The Office of the High Commissioner* for Human Rights. Available at: <https://www.ohchr.org/en/press-releases/2021/09/pandemic-exposes-ageism-and-age-discrimination-society-says-un-expert> ⁵ (Accessed: 27 July 2023).

Prato, G.B., 2023. *'Health Inequalities and Ethics of Responsibility: A Comparative Ethnography'*. In *The Legitimacy of Healthcare and Public Health: Anthropological Perspectives* (pp. 19-43). Cham: Springer International Publishing. Available at: https://link.springer.com/chapter/10.1007/978-3-031-25592-2_2 (Accessed: 28 July 2023).

²⁰
SCI (2020) *Equality Act 2010 - overview for social care*, Social Care Institute for Excellence (SCIE). Available at: <https://www.scie.org.uk/key-social-care-legislation/equality-act> (Accessed: 27 July 2023).

²⁸
SCIE (2021) *Care act 2014: Video introduction*, Social Care Institute for Excellence (SCIE). Available at: <https://www.scie.org.uk/care-act-2014/video> (Accessed: 26 July 2023).

¹⁶
Vacek, A. *et al.* (2023) 'Looking back to look forward: Surviving COVID-19 and the future of the NHS', *Journal of the Royal College of Physicians of Edinburgh*. Available at: <https://journals.sagepub.com/doi/10.1177/14782715231173667> (Accessed: 27 July ¹2023).

WHO (2022) *Ageing and health*, World Health Organization. Available at: <https://www.who.int/news-room/fact-sheets/detail/ageing-and-health> (Accessed: 24 July 2023).

Appendices:

Appendix 1:

Sarah, a 70-year-old female with diabetes and dementia, previously resided in her own home alongside her late husband David, who unfortunately passed away during the Covid-19 pandemic. Because of this, Sarah had to move in with her only daughter, Emily, who is now the primary source of support for Sarah. Emily, who is a single mother of three, faces numerous challenges as she tries to balance her work responsibilities, taking care of her own family, and looking after her mother.

Emily has noticed significant changes in Sarah's behaviour since the move, as Sarah seems to be less engaged and less interested in spending time with her loved ones. She likes to be alone in her bedroom all the time. In the past, Sarah was known for being a social butterfly, frequently bringing friends and extended family to her home. She used to enjoy attending the be-active group club, where other elderly individuals would meet and participate in group activities, now she has cut back on her social engagements. However, due to her husband's passing, Sarah is still grieving, and since has become a heavy smoker, she occasionally experiences hallucinations where she sees him alive and even engages in conversations with him, even though he is not really there.

Sarah is currently receiving domiciliary care- multiple visits per day, although she does not particularly appreciate the presence of her carers. Instead, she heavily depends on Emily for even the most fundamental activities, including bathing, dressing, and taking her medications. Sarah is currently feeling lonely and isolated because she is not as active as she used to be. She no longer enjoys participating in social activities. Emily, Sarah's daughter, is particularly worried about her mother's well-being because she cannot leave her alone at home. Occasionally, Sarah unintentionally wanders off when Emily is at work, and there have been a few occasions where neighbours have found her wandering in the nearby park. However, Emily is against care homes and wants to keep her mother at home for as long as she can.

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