

BMHP 6009 BIRM

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Assessment 2 – Written report

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Introduction

This report is based on a case study of Sadie Evans. She is an 82-year-old lady, who lives alone in a three-bedroom house. Sadie lost her husband 4 years ago. Sent then her health condition getting worse, having problems with her eyesight, and hearing, is overweight, and she is at risk to have diabetes. She also had a hip replacement operation a few years ago. Having problems with her hygiene, her health is going down quickly. Sadie also is suspected of dementia, and she is not safe to live alone anymore. Her daughter trying to hire domiciliary care to help Sadie with personal care and house chores. This report will outline the challenges Sadie faces for the moment, and, what help she can get from Local Authority to help her to still live in her home. Relevant pieces of legislation will be outlined to support Sadie in her needs, and recommendations on how she can improve her actual condition. All the relevant help which Sadie can have will be written within the report. The report will have Conclusions and Recommendations for Sadie where to seek further help with her needs.

Main Body

In general, a person over the age of 65 may be seen as elderly. Since individuals advance biologically at various rates, it is difficult to apply a rigid definition; for instance, a person at 75 may be in a healthier state than a person aged 60.

Over the years, a lot of authors and academics have written about the onset of old age (Covey, 1992; Balcombe and Sinclair, 2001). Although some believed it began around age 40 most sources from ancient literature to the present day agree that old age begins around age 60 (Roebuck, 1979). When old age was supposed to start, high death rates had very little of an impact (Covey, 1992; (Balcombe and Sinclair, 2001). Given that women were often perceived as ageing more quickly than males, gender may have had a greater impact (Roebuck, 1979). The age range considered to begin old age has remained constant (Covey, 1992). However, different views on when old age begins have coexisted within historical settings, and distinctions between young-old and old-old have been accepted (Covey, 1992; Balcombe and Sinclair, 2001). As history progressed, greater attention was placed on the individual's relationship with society and capacity for task completion rather than on the outside factors that were once thought to decide the onset of old age (Covey, 1992). With the advent of formal retirement, ability became less important and more

focused on chronological age (Covey, 1992). As a result, finding the start of old age was focused on chronological age rather than internal considerations like political and economic standards (Roebuck, 1979). Future developments could result in either new conditions or a reconsideration of whether it is even essential to find the start of old age (Roebuck, 1979).

For some illnesses, people receive formal or informal care. Based on people's condition, those who receive formal care are still in their homes, and families provide care services for them.

It is occasionally necessary to estimate the health issues facing the elderly in emerging nations to forecast trends in disease load and organise aged care (Thakur, Banerjee, and VB Nikumb, 2013). The equal distribution of medical services has a poor track record in developing nations. Those who live in rural areas and urban slums who are marginalised have low access to health care (Roebuck, 1979).
Goals: To discover ¹⁹geriatric health issues in samples taken from a village and a slum, as well as to investigate both males and females and urban/rural disparities in morbidity (Thakur, Banerjee, and VB Nikumb, 2013). Numerous hypotheses that could explain the ageing process have been developed because of research. Sadie might suffer from mental health issues, due to living alone now. Most people suffer from mental health illnesses, especially after losing their pair. ¹²With a ringfenced contribution of at least £2.3 billion annually for mental health services by 2023/24, the NHS Long Term Plan (LTP) reaffirms its commitment to ensuring that psychological health care expands faster than the general NHS expenditure. Sadie is living in a rural area, and she has no driving licence. Her need for transport is urgent.

According to one definition, ageing is the gradual decline in biological function over time, including a decline in performance (Tiwari et al., 2010 ; (Roebuck, 1979).). Thus, in several developing nations, old age is viewed to begin when active participation in society is no longer possible, as opposed to the chronological milestones that characterise life stages in the industrialised world (Tiwari et al., 2010; (Roebuck, 1979).). Health researchers have long been interested in age-related deterioration in cognitive function. All high-level brain activities, including speech comprehension and creation, perception of visuals and construction, numerical ability, memory, focus, and mental processes like organising and resolving issues,

are cognitive (Tiwari et al., 2010; Ouslander, and Beck, 1982). Numerous studies showed that 43% of men and 35 % of women over 65 were limited in activity due to chronic illnesses (Ouslander and Beck, 1982). All the elderly in the community needs family attention and support. Most families supply care for their members, while others look for alternatives (Irelli, 1990).

⁶ The Mental Capacity Act (MCA) was created to protect and empower those who might not be able to make independent choices regarding the treatment and care they receive. Anyone who is 16 years old or older is covered (NHS, 2021). The MCA also enables individuals to express their preferences for care and treatment and to choose a reliable individual to act on their behalf if they lose the ability in the years to come. Considering Sadie's condition, her daughter (Hannah)should apply for her Lasting Power of Attorney (LPA) in case of her mother's condition gets worse. Hannah should consider putting in place 10 years health plan.

According to Gov. UK,(1983), in Mental Health Act 1983 stipulated that any individual with mental health problems needs to have guardianship to make decisions for the person. In Sadie's case, Hannah should be her guardian because she lives close, she is more aware of Sadie's condition.

Sadie has more medical help, due to her hip operation, gaining weight, poor eyesight, and poor hearing. She needs to readdress to her GP for further health assessments. The Individual Health Act is stipulated that every person has access to the health system. For Sadie's mental health issues, she needs to address her GP to get an appointment with a psychiatrist.

⁴ The most prevalent sensory impairment in older people is hearing loss, which is now considered a serious social and health issue. Hearing loss, particularly in the elderly, can hinder communication and have a substantial negative influence on day-to-day activities, leading to feelings of dependency, loneliness, and frustration in addition to behavioural difficulties (Ciorba et al., 2012). Presbycusis is a developing issue that has been reported to lower quality of life (QoL) because of the ageing population in the developed world. Presbycusis cannot be stopped from progressing, hence effective treatment of this condition causes not only early diagnosis and recovery but also an evaluation of the patient's quality of life (QoL) (Ciorba et al., 2012).

Diabetes is a prevalent condition among the elderly. About 20% of people in the population have this disease by the age of 75. Diabetes in older persons has a different blood sugar level than diabetes in younger patient populations, needing a different therapeutic strategy (Meneilly and Tessier, 2001). Significant morbidity from macro- and microvascular problems is linked to diabetes (Meneilly and Tessier, 2001; Kirkman et al., 2012). The best glycaemic management and risk factor reduction, according to several lines of evidence, can significantly lower the risk of complications in senior patients (Meneilly and Tessier, 2001; Kirkman et al., 2012). Treatment choices were scarce in the past. Nevertheless, current research has identified several innovative and promising therapy options for diabetic older people.

Obesity lowers the quality of life and leads to major medical issues. Furthermore, obesity in elderly people might hasten the ageing-related deterioration in physical function and cause frailty (Villareal et al., 2005; Kalish, 2016). However, the reduction in relative health risks linked to an increase in body mass index and the worry that weight loss may have unfavourable impacts on older people's health makes the proper therapy for obesity in older people debatable. The American Society for Nutrition and the NAASO, The Obesity Society have released a collaborative statement that examines the clinical problems associated with obesity in older people and offers medical professionals adequate weight-management recommendations for these individuals (Villareal et al., 2005; Kalish, 2016). According to the most recent statistics, weight-loss therapy helps elderly people who are obese with their physical function, quality of life, and medical issues. Therefore, for older people who are obese and have functional limitations or medical issues that potentially might benefit from weight loss, weight-loss therapy that minimises muscle and bone loss is advised (Villareal et al., 2005; Kalish, 2016).

Being overweight, Sadie puts added strain on a hip replacement and increases the chance that it could come loose or dislocate. Obese patients are more likely to require readmission to the hospital or revision joint replacements to remove and replace a failing implant (Rhind, Baker, and Roberts, 2020; Orthopaedics, 2021).

Sadie also has serious problems with her care (she is not able to do it by herself), which is why Hannah appealed to Age Cymru and a domiciliary care company to keep Sadie in her own home.

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The Care Act of 2014 outlines the responsibilities of local authorities when deciding a person's care and aid needs. The information supplied here, which was last updated in December 2022, aids healthcare professionals and provides answers to their inquiries about qualifying determination and criteria evaluation (Social Care Institute for Excellence, 2016).

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Eight essential principles are woven throughout the Care Act, and as a social care professional, you should be able to see them in action when conducting assessments and deciding eligibility: a strategy based on strengths, transparency, family as a whole/holistic maximise individual participation, Understanding changing demands, encourage personal freedom and decision-making, the Need, Proportionality. Based on the above criteria, Sadie met most of them to receive the extra help that she needs. Some of the most important criteria is that all people must live with dignity and respect. At this moment, Sadie did have not such a thing. Her care is not good, her house is miserable.

According to Equality Act 2010, every person should get the help needed. Sadie need help with her transport, health, care, and house chores. Hannah needs to address to Local Authority to name a Social Worker to assess what kind of professional help Sadie needs.

The dread of death is distinct from the fear of dying. The psychological parallels of the dying process include primary anxiety, the feeling of impending collapse, and the fear of passing away. It has been established that a death phobia is unintentionally linked to "rational" anxieties (LWW, 2019).

For patients, whose deaths are imminent, euthanasia—death without suffering—includes appropriate dying. The typical view of euthanasia, which views it as hastening the deaths of patients with terminal illnesses, is the exact opposite of the dignified approach to dying those psychiatric interventions promote (LWW, 2019).

The tacit imposition of isolation, quiet, denial, and deceit onto the dying patient can result in the bereavement of the dying, which is characterised by premortem loneliness, emotional abandonment, and a lack of interest on the part of the

survivors. Examples of how altered interpersonal interactions can serve as prodromal indicators of impending death are given (LWW, 2019).

² Denial, anger, bargaining, depression, and acceptance (DABDA) are the five phases of mourning. Both when you are dealing with a terminal diagnosis and when you are grieving the loss of a loved one do they apply (Verywell Health, 2023).

These phases aid in describing the emotional process of dealing with these defining moments in life. But keep in mind that most people do not feel emotions in a straight line, and everyone's reactions to disease, death, or grief are different (Verywell Health, 2023). ² Elisabeth Kübler-Ross first identified the five stages of mourning (DABDA) in 1969 in her seminal work, "On Death and Dying." The abbreviation DABDA stands for the five stages that Kübler-Ross described. The symbols represent: ²² Denial Anger Bargaining Depression Acceptance

Elisabeth Kubler Ross, "On Death and Dying." 2014; Scribner ; Mayahara and Paun, 2023).

Social Theories Related to elderly people

An explanation for behaviour, interactions with others, and social systems is provided by a theory. According to the patterns seen, a hypothesis explains why certain facts or other social phenomena are connected. a structured collection of concepts and assertions about society that can be seen and evaluated by empirical (practical) means.

¹ The term "social theory" refers to concepts, justifications, theories, research, and hypotheses that supply explanations about how and why human societies, or aspects or structures of such societies, are created, evolve over some time, or vanish.

- ¹ • Disengagement Theory-Older folks eventually become less active in society as they age. Disengagement is a two-way process in which older people disconnect from society and society disconnects from them (Larkin, 2009). The elderly become more focused on themselves, form less emotional connections with

others, and show less interest in social activities (Larkin, 2009). Due to her health condition, Sadie is quite disengaged to interact with other people.

- Activity Theory-Opposite view of Disengagement Theory -The supplementary¹ active and involved the elderly are, the more likely that they are fulfilled with their lives (Mauk, 2010). Sadie is not active anymore due to her problems with gaining weight. Makes her heavier to move. She not taking part in church activities sent she lost her husband and her driving licence.
- Continuity Theory -Similar to Activity Theory, which asserts that a lack of social engagement is more likely to be caused by ill health or a disability than by a societal need to "disengage" elderly individuals from their traditional roles (Wang, 2012). Sadie is feeling that she has nothing to offer so she prefers to stay at home.
- Social Breakdown Reconstruction Theory -According to this hypothesis, ageing is fostered by the bad mental health that is brought on by society's unfavourable attitudes towards the old and the insufficient services that are supplied for them (Tornstam, 2005). Sadie having problems with her mental health since she lost her husband, 4 years ago. She suffers because cannot see her boys often.
- Modernization Theory claims that as civilizations get more modern, the status of the elderly diminishes (Morgan and Kunkel, 2011). In agrarian societies where the elderly owned the land, old age was valued. It is often believed that urbanisation and modernization have lowered the socioeconomic standing of the elderly worldwide (Morgan and Kunkel, 2011). Sadie has some savings, and she has a three-bedroom detached house. She prefers to save everything for her children, instead to make some updates house towards her needs.
- Gero transcendence -Older people grow less self-centred, let go of disputes and experience greater peace and global connection (Tornstam, 1994). Lifestyle pleasure and gerotranscendence are positively related. Additionally, studies show that individuals who sense significance in their lives typically have superior physical health (Tornstam, 1994). Sadie does not think about her needs, she is saving for her children.

- Symbolic Interaction -Old age is a construct of society that is influenced by symbols that resemble interactions between people (Settersten and Angel, 2012; Fung, 2013). Being considered old or young is a social creation, even though ageing is an inevitable occurrence. Age-related habits and connotations are assigned by culture, such as rock climbing or going topless! distinct cultures have distinct attitudes towards ageing (Settersten and Angel, 2012; Fung, 2013). The case study person does not have such interactions with anybody except her daughter. Neighbours offered to help her, but she refused their help, considering them noisy.

Before ⁸ addressing needs higher up the hierarchy, people must attention to those lower down. The needs include physiological, safety, love and belonging, esteem, and self-actualization, going up the hierarchy in order of importance. Deficit needs and growth needs can be used to categorise this five-stage structure (McLeod, 2023).



Maslow's hierarchy of needs

(McLeod, image;2023)

According to Maslow s hierarchy of needs, Sadie needs to focus more on a second stage, and that is her health. If Sadie's needs will be met, she can significantly improve her health, and self-esteem, and become the best person she can be.

Conclusions

To conclude this report, everything that is written above can be used to help and improve Sadie's condition. To be admitted to Age Cymru, for Sadie will be the best thing. That will reduce her loneliness, she will be treated for all her health problems, and she can live with dignity and respect.

Recommendations

Sadie needs urgent help with her health and care, and she needs to be referred to a social worker, to GP to reassess her medical condition and to a psychiatrist. Hannah needs to apply to be an LPA for her mother.

A healthy diet will also be helpful for Sadie to reduce her obesity.

Trying to join Sadie in some group activities can reduce her mental health problems.

New eyesight test to improve her visual contact.

Getting help with personal care and house chores might help her as well.

If Sadie will be admitted to Age Cymru, she will not feel lonely anymore, and she will get support from the care home staff.

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