

Assessment Component 1

Principles of Health and Social Care Practice

BSc (Hons) Health and Social Care

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Table of Content

Page	Number
Introduction	3
Discussion	3
Detailed Needs Assessment for Mr and Mrs T	6
Action Plan	6
Recommendations	9
Conclusion	9
References	10

Introduction

Home care services are crucial in assisting older adults with chronic illnesses to continue living in their homes (Hsieh and Kenagy, 2020). Home care service refers to the process in which an individual is given assistance in the comfort of their home. This assistance vary; it could be assistance with washing, cleaning or sometimes helping in escorting the individual for a hospital appointment.

This case study critique will be describing, analysing and evaluating the principles of support, policy and practice utilised in Harrow Carers which is a domiciliary care agency, how they will be assisting in meeting the health and social issues that Mr and Mrs T are experiencing. The steps that will be taken to make sure that Mr and Mrs T are able to live as independent and safe as possible. The analysis will include Dementia UK , Harrow local authority which is under Harrow Council, and Harrow meals service as the departments that will play, significant roles in providing the needed support and assistance to Mr and Mrs T. Finally, recommendations will be made on how Mr and Mrs T's situation could have been handled more efficiently.

Discussion

There are various agencies that provide domiciliary care, however Harrow Carers was chosen after a background check on the services they provide and their CQC rating. This healthcare agency is an independent voluntary organisation which was established in 1996. Their vision is to provide care for people in the community who are ill, frail and disadvantaged in many ways.

Harrow Carers work closely with the Harrow Local Authority and sometimes get referrals through them. They have good and impressive rating with the Care Quality Commission as a result of their diligence in meeting relevant requirements on safety, effectiveness, care, responsiveness, and leadership. The Care Quality Commission report highlighted a positive feed - back from people and relatives of the service users, as the care workers were highly spoken of (Harrow Carers Care Quality Commission Report, 2019).

This domiciliary agency demonstrates that the principles of support in health and social care needed for the care of Mr and Mrs T will be practiced effectively and efficiently. Planning care for Mr and Mrs T must be holistic. Their values, culture and religion must be taken into consideration, as such they must be treated with dignity and respect by the care givers from Harrow Carers. The Nursing and Midwifery (2008) stress everyone has the right to dignity, respect and inclusion. It is important that clear and effective communication is undertaken at all times any information provided to Mrs T should be jargon free. She should be free to

question and understand the information placed before her. Mr and Mrs T may be very private people and not used to strangers coming into their home. Their privacy needs to be respected and the wording of information has to be undertaken in a sensitive and compassionate manner. Mrs T should still feel that she has a say and can ask questions at any-time and get clear and honest responses. Ratna (2019) states that 'quality of care will be greatly compromised without effective communication in the delivery of care'.

Due to the age of Mr and Mrs T, safeguarding issues are of utmost importance, therefore members of staff from Harrow Carers must treat them with compassion, empathy and professionalism at all times. The Care Act (2014) is explicit on the legal framework for local authorities and other health care providers in the protection of adults at risk of abuse or neglect.

The six main principles of safeguarding must be followed and these are empowerment, protection, prevention, proportionality, partnership, and accountability. Mr and Mrs T need to play an active role in decisions on their own care and must be given the right information in order for them to make an informed choice.

The first principle, '**Empowerment**', is very vital when dealing with Mrs T as she will be the one speaking on behalf of her husband and herself. It is imperative that the information shared with her makes her feel less anxious about her situation while giving her hope and clarity on next steps in her living in her own home safely, for as long as possible, with the right support hence giving her peace of mind.

The second, '**Protection**', stipulates that all health care providers for Mr and Mrs T, must be protected from abuse and the health care professional should be able to do a risk assessment to ensure safety of the surroundings for both Mr and Mrs T and themselves to carry out their duties.

The third principle, '**Prevention**', is on the safety of Mr and Mrs T. An example of this is the prevention of Mrs T from having another fall. She must be informed of wearing shoes that are 'non-slip', walking slowly and carefully with her walking aid.

The fourth principle is '**Proportionality**'. This describes that Mr and Mrs T should have as much freedom as possible. The staff from Harrow Carers should not intrude in their privacy and should always ask permission before entering their rooms or touch them as this could be counted as assault if permission is not given prior to touching an individual.

The fifth principle is '**Partnership**' it is of utmost importance that whatever decision is to be made as regards the care for Mr and Mrs T, Mrs T has to agree. The Harrow Council when making decisions have to make sure that the couple are comfortable with it and it should not feel that decisions and ideas are only coming from Harrow Council, but it should be seen as a joint decision, the rationale for this is to prevent, taking over the lives of Mr and Mrs T and not allow them to feel that they are equal partners to the decision making. Mrs T has invited Harrow Council to assist them to live a more independent and comfortable live and not to take over completely. Otero et al (2020) argue that patients awareness enable them to have a say in decision making concerning the care they receive.

The sixth and final principle is '**Accountability**'. Any healthcare professional looking after Mr and Mrs T are accountable for their omission or commission (what they do). They must not cause harm, intentionally which is known as maleficent and if or when things go wrong, the healthcare professional must be open and honest to explain what had gone wrong. This is known as duty of '*candour*'. The Health and Social Care Act (2008) emphasize that 'registered persons must act in an open and transparent way with relevant persons in relation to care provided to service users in carrying out any activity'.

The caregivers will need to seek informed consent from Mr and Mrs T before any care is given, hence Mrs T would be deemed to have the ability to make decisions for herself until a mental capacity assessment is undertaken. Informed consent is when all the different options are explained to a person and the person is able to make a decision not because they are forced to do this, for example in the case of Mr and Mrs T.

The care givers from Harrow Carers could explain that they have various services such as being able to make three visits a day for a 30 minutes at a time or the home carers could visit twice a day morning and night, it is up to Mrs T to decide what is needed also what she and Mr T can afford if they will be paying or Harrow council will be giving them some support financially. There are three main points that Harrow council will use to assess the financial assessment for Mr and Mrs T, these are their income, saving and investment and lastly any benefits including tax credit. This will decide if Mr and Mrs T will be given any financial assistance as regards their care. Harrow council (2021).

V Nunez (2019) explains that 'informed consent allows the patient to make decisions with their healthcare provider this collaborative decision-making process is an ethical and legal obligation of healthcare providers'. It is important to be sure that Mrs T has the mental capacity to make an informed choice, this is where the Mental Capacity Act (2005) comes to

play, which states an adult is assumed to be able to make decisions for themselves if an assessment has not been made indicating that they cannot.

Due to Mr and Mrs T's age, It will be good practice for a detailed needs assessment to be carried out, this is normally undertaken by a healthcare professional such a social worker who specialises in the elderly, the rationale for this is to make sure that all the health and social needs of the couple are identified and then a detailed plan can be put in place.

In London borough of Harrow a joint strategic needs assessment is carried out. It examines the health and well-being needs of people living in the borough and help to plan health and social care services. Harrow Council (2020). Below is a detailed needs assessment for both Mr and Mrs T.

Detailed Needs Assessment for Mr and Mrs T

Actual Health and Social care Issues

- a. Mr T has progressive dementia and other chronic problems
- b. Mrs T had a fall and has had a hip operation
- c. Mrs T is mobile with a Zimmer frame needs help to improve mobility
- d. Help with personal care both Mr and Mrs T and administering medication
- e. Help with the domestic chores for both Mr and Mrs T
- f. Follow-up appointments for Mrs T hip replacement
- g. Mr and Mrs T will need with the making their meals

Action Plan

A Mr T has progressive dementia and chronic problems

Dementia is a disease which can be very difficult to manage especially since Mrs T is her husband's main carer. Kobayashi et al (2021) explains that caregivers experience social, physical and psychological burdens in caring for people with dementia. Some dementia patients have been known to lash out when they get frustrated and are unable to make sense of what is going on around them. Marcinkowska et al (2021) support this

line of thought and emphasize that 90% of patients with dementia experience behavioural and psychological symptoms such as psychosis, aggression, agitation and depression. Dementia UK will also be involved in providing support and advise to Mrs T on dealing with the different changes that will occur in the progression of Mr T's dementia diagnosis. Dementia UK, founded in 1994 is able to provide specialist dementia support for Mrs T through their Admiral Nurse service Dementia UK (2021).

B Mrs T had a fall and has had a hip operation

Mrs T having a fall leading to a hip operation. The fall will need to be assessed and determine if it is a mechanical fall or happened as a result of loss of consciousness therefore further investigation would be needed to determine the cause of the fall. Cuevas-Trisan (2017) explains that falls in the elderly are on the increase and sometimes could cause death, health care services been able to assess medically the factors that could lead to patients been at risk of falling reduces the number of patients that fall.

C Mrs T is mobile with a Zimmer frame needs help to improve mobility

Due to that the fact that Mrs T is still having to use a Zimmer frame to walk around shows that she may not be as active as she normally is hence, she may need the community mobility physiotherapist to monitor her progress. There might also be the need for an occupational therapist to undertake a risk assessment of the home as a whole and see if rails will be needed or stairlifts to make thanks easier for Mrs T.

D Help with personal care both Mr and Mrs T and administering medication

Harrow carers agency staff will be able to assist Mr and Mrs T as regards this, they have vetted staff and are well trained their staff have mandatory training and they always work in pairs. This will be very helpful for Mr and Mrs T as Harrow Carers try to make sure there is continuity of care and would normally send the same members of staff to clients. Harrow Carers pride themselves for making sure that all their carers are DBS (Disclosure Barring Service) checked and an enhanced check is carried out so Mr and Mrs T can be rest assure that they are having staff with a clean record attending their home. The Harrow carers agency staff are also trained to administer medication that is already in

the dosette box, however Mr and Mrs T's General Practitioner will have to be contacted also their pharmacist to know what medications they are taken.

E Help with personal care both Mr and Mrs T

Harrow carers agency staff will be of great assistance in respect of this part of the couple's care. Presently, Mrs T would need some help when having her bath because of the fall she had. Mr T in his case, would probably need total care as Mrs T is not able to fulfil that role as she is not back to her baseline before her fall. Harrow Carers are very professional and have the ability to provide alternative staff within a short notice if for any reason the care staff is not able to cover their shift. One of the company policy is not to disappoint their clients.

F Follow-up appointments for Mrs T hip replacement

One of the services provided by Harrow Carers providing support with hospital attendance appointments, therefore Mrs T, will be assisted with this.

G Mr and Mrs T will need by with the making their meals

Harrow Commercial Services is able to provide three meals a day for both Mr and Mrs T. These are freshly cooked and have a variety of dishes to choose from. Harrow Commercial Services (2016)

The needs assessment for Mr and Mrs T is legally required under the Care Act (2014). The rational for the assessment is to provide a full picture of the needs of Mr and Mrs T in regards to the impact of the identified needs on their well-being. It is also to assist the couple to know their strengths and weaknesses. After the completion of the needs assessment, a meeting will be held with Mr and Mrs T to explain how their needs can be met. The care and assistance offered to the couple will be well suited to their needs as it is not an all size fit issue.

Recommendations

When Mrs T was in hospital a full needs assessment should have been undertaken, which would have identified the needs of both Mrs and Mr T. This is because if a proper assessment is not undertaken Mrs T could end up back in hospital and this would be seen as a failed discharge. The fact that Mrs T was Mr T main carer, and she came into hospital due to a fall and had a hip operation, demonstrates that she is not in the position to care for Mr T as she normally would and therefore would need support. Naseri et al (2020) argue that older adults recently discharged from hospital are at high risk of functional decline and falls.

The fact that Mrs T was asking what her options are as regards social services demonstrates that she was not given all this information before leaving the hospital. National Institute for Health and Care Excellence (2020) explain that older people may not know what care they are entitled to or what their funding options might be, this in turn would lead to them not claiming what they should. It is important that information is given to Mrs T as soon as possible for her to make the right choice.

Conclusion

This case study has taken into consideration all the health and social needs of Mr and Mrs T. It has also demonstrated that it is important to involve Mrs T in all decisions that need to be made as regards her husband and her care. Relevant organisations that would assist in making the couple as safe and independent in their home, was also discussed.

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