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Introduction

In this case study, I will critically analyse, and evaluate support, policy, and practice that is available and suitable for Mr. and Mrs. T. keeping in mind their needs want's and wishes to be matched and considered. The couple are over 85 years old; Mr. T has progressive dementia and other chronic conditions I will show what medical attention and help is needed and available to him.

They were independent and able to care for one another until recently, Mrs. T had a fall and was hospitalized, and had a hip operation, when returned home she had a mobility frame to help her.

Being considerate of their wishes and mental wellbeing whilst provide information and support on how to manage their lives better in these conditions now. Help with personal care, ways to improve her mobility, domestic chores, and social events that would help them live independently as possible. A Chosen department or an organization will be evaluated to see if they can provide support for Mr & Mrs. T followed by recommendations for the future.

Health Information of Mr. and Mrs T

According to(Sagon, 2021) "By the time you reach your 50s, your strength, balance, and endurance are already beginning to wane, which is a lot earlier than previously thought, according to a new study, researchers with Duke University's School of Medicine suggest that physical decline begins in the 50s and worsens as we age, especially for those who don't exercise."

As Mr. and Mrs. T Both are over 85-year olds we can understand they may encounter medical issues that need a lot of help and support. Mr T has progressive dementia and other chronic conditions, according to (Summit Medical Group, 2020)

"Progressive dementia is the gradual loss of mental functions such as the ability to think, reason, remember, and plan, Dementia is more common in older adults they may have trouble with things such as:

- Putting thoughts into words/responding to others
- Understanding complex information
- Reading and writing
- Learning new things e.g. remembering directions to unfamiliar places
- Remembering how to do things e.g. how to cook, where their belongings are etc
- Remembering what just happened e.g. already had a shower or things that have just been said
- Concentrating and paying attention is quickly lost
- Organizing, reasoning, and solving problems is forgotten

At the beginning of dementia people can follow routines that are familiar to them, but further down as the disease continues serious problems with thinking, judgment, and the ability to do everyday activities become difficult, and maybe become dependent on others for care. Personality also changes."

Mr T also has other chronic conditions which may be any of the bottom as these conditions are very common at their age according to (Age UK, 2021)

- Alzheimer's
- Arthritis
- Asthma
- Cystic fibrosis
- Diabetes
- Mental health

On the other hand, Mrs. T had an accident and fallen now she has a mobility frame to help with her getting around. According to (What Makes Hip Fractures So Dangerous for the Elderly? 2020) "Bone density and muscle mass tend to decrease with age. Osteoporosis is one of the leading factors, and more common at old age. The disease causes bones to become weak and brittle and new bone isn't produced as quickly as older bone tissue is removed. Osteoporosis-related breaks among the most common types of hip fractures, as bone fractures can occur easily with any type of fall. Older patients are more at risk of falling due to mobility and balance issues and, subsequently, suffering from a hip fracture."

GP & hospital Service

According to (Age UK, 2021) Long-term conditions such as Dementia cannot be cured but can be managed with medication and other treatments. The GP should help you understand and manage your own care. This may include drawing up a care plan to help you manage your condition on a day-to-day basis and recognize symptoms that you should report to your GP. It may also include creating an 'information prescription' with the help of NHS Choices, which helps you find reliable sources of information about your condition.

According to (Recommendations | Dementia: assessment, management and support for people living with dementia and their carers | Guidance | NICE, 2021)

"Care and support providers can be trained in person-centred and outcome-focused care for people living with dementia includes:

- understanding the signs and symptoms of dementia, changes to expect as the condition progresses
- understanding the person as an individual, and their life story
- respecting the person's individual identity, sexuality, and culture
- understanding the needs of the person and their family members or carers
- understanding the organization's model of dementia care and how it provides care
- how to monitor and respond to the lived experience of people living with dementia, including adapting communication styles
- initial training on understanding, reacting to, and helping people living with dementia who experience agitation, aggression, pain, or other behaviours indicating distress
- follow-up sessions where staff can receive additional feedback and discuss situations
- advice on interventions that reduce the need for antipsychotics and allow doses to be safely reduced
- promoting freedom of movement and minimizing the use of restraint."

Care service to your home

According to (Age UK, 2021) Age UK provides short-term, practical help for people who have just returned from hospital to help them to overcome any immediate problems. Usually, this is delivered over a period of a few weeks. This can help to prevent hospital readmission or being prematurely admitted to residential care.

The types of support Age UK can offer for people returning from hospital are:

- Transport home from hospital
- Working with you to set goals to regain confidence and independence
- Helping you to settle in and making sure you are safe and warm
- We keep you in control and provide you with the home care and support you want, where and when you want it. It's your life and your care, so it must be your way.
- Some conditions require specialist care, understanding that when people have special needs due to an illness or injury, they may need extra care and support.
- You can also arrange home help via Age UK if you would like some extra assistance with household tasks

Their services are regulated by the CQC (Care Quality Commission) to ensure the highest standard of care for their clients, details of all Age UK's CQC inspection reports can be found at [cqc.org.uk](https://www.cqc.org.uk)

I found all this information on the Age UK website.

Care Home

According to (Age UK, 2020)

"Safety is possibly the most important benefit of residential care homes and one that sways many decisions. When the elderly and vulnerable can't look after themselves efficiently, quite often they become a hazard to themselves. Care homes are always staffed and in many, there are nurses readily available 24/7 – somebody is always present and ready to look after residents. A friend or relative has opportunities to sit and socialize with people in similar circumstances as them. There should be no fear of them having to go for hours each day without having any human interaction or company. We can provide care and support for people living with dementia including Alzheimer's."

Analyses and evaluation

As Mr. and Mrs. T have always been very independent and able to care for one another, certain changes will affect them but saying that they need these changes for their own health and wellbeing. Mrs. T realized that they needed help if they were to carry on living independently. She was interested in information and support on how to better manage their life with help in areas with personal care, improving her mobility, domestic chores, and any social events that would help them live independently as long as possible.

Looking at Mrs. T requests the information's provided above cover 3 different organization. The GP and hospital provide care plans on Dementia and what steps to take, it is more independent and for people who can move quite freely which would have been fine if Mrs. T didn't need help herself therefore this will not cover or meet Mrs. T needs, Also considering their age will they be able to remember all the steps?

A Care home provides all the services that Mrs. T is looking for, someone is always there on-site in case of emergency or anything else, they have all the qualifications for the medical needs of Mr. and Mrs. T however she wants to live independently a little longer, therefore, her wishes need to be considered.

There are Care Services available to your home, where a carer will attend and meet your needs according to your care plan, do the domestic chores, help with personal care, and provide services that meet your medical needs e.g. physiotherapy, given medicine on time, etc.

Although this is available, we do not know if Mr. and Mrs. T can afford this service, they may be entitled to certain funds, but will it cover them enough is the question. I'm also thinking about Mrs. T's recovery from the hip operation as due to her age she may take longer to recover and need a lot more help than she realizes. If they can afford this service how well will they cope with the change is another question as Mr. T has Progressive Dementia how will he cope with new faces in his home trying to do his personal care and other chores it all may come with challenges.

Recommendation

Understanding the situation with Mr. and Mrs T, I recommend Care services to the home beneficial form them as they will find these services

- They provide free advice and information on health and wellbeing.
- Age UK also provides day centers depending on your location.
- Handyman services to mend household appliances.
- Home help to provide domestic services and tasks.
- Social activities to engage the elderly in various leisure activities.

According to (Age UK,2021) “We provide information and advice that covers every facet of later life, from helping people find out the benefits they are entitled to claim, to discussing options that help make later life at home more manageable. National partners and local Age UK help older people to know about and claim the benefits they’re entitled to help them financially.

Policies, Code of Practice

Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 10.

"The reason for this regulation is to make sure that people using the service are treated with respect and dignity at all times whilst receiving care and treatment. Providers need to make sure that they provide care and treatment that ensures people's dignity and treats them with respect at all times, including making sure that people have privacy when they need and want it, treating them as equals, and providing any support they might need to be autonomous, independent and involved in their local community. Providers must have due regard to the protected characteristics as defined in the Equality Act 2010. CQC cannot prosecute providers for a breach of this regulation or of its parts, but we can take regulatory action." According to (Regulation 10: Dignity and respect | Care Quality Commission, 2020).

"The Code of Conduct sets the standard of conduct expected of healthcare support workers and adult social care workers. It outlines the behaviours and attitudes that you should expect to experience from those workers signed up to the code. It helps them to provide safe, guaranteed care and support. The Code of Conduct is voluntary, but it is seen as a sign of best practice." (User, 2020)

In class, we learned that the Health and Care Professions Council set the standard of care that is acceptable and hold a register of quality assurance education and investigate any complaints. It is their responsibility to make sure the right care is provided at the correct standard by the Law. They aim to make sure the law is abided and that all members of the public are protected from being misled into thinking that a person is a registered professional when they are not. The CQC visit to monitor, take action of care homes making sure clients are taken care of in the appropriate manner, and that the caregiver has up-to-date knowledge with training. From there they put all relevant information out there for the public.

Conclusion

Aging is a natural process the best we can do is make sure we are fit and healthy from a younger age this will have a great impact on our older age. My suggestions for Mr. and Mrs. T are to get the right support they need, depending on their circumstance and where they live, they may not get all their requests meet. This is disturbing as we all live in a country that understands and has all the correct policies and acts, but unfortunately not enough funds are available in each area to provide support. Systems should be improved to allow an early diagnosis to avoid the worst, Mr. and Mrs. T deserve a happy life and they should get all the support they need in the comfort of their own home, the care service is the best for them to be independent and live with dignity. I believe Mr. and Mrs. T are capable to live independently provided with the correct support, for now, however, they are getting older and normal chores will get more difficult, they may want to plan.

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