

# Case Study



Mrs H is a 92-year-old lady who lives with her husband. She was admitted to hospital following a fall downstairs (6/9/14) at home. Her medical history includes: Cataracts, depression, short-term memory loss, osteoporosis, osteoarthritis and left hip hemiarthroplasty. She also has a history of multiple admissions due to falls. Prior to admission she had support from her son and daughter-in-law, who live nearby.

A referral was received by MCMH on 19/09/14 - Friday late afternoon. A Section 5 (Delayed Discharge) had already been issued at the point MCMH received the referral. It was therefore, essential to assess as soon as possible and set up the required services to minimise the impact of the delayed discharge. MCMH social worker was able to arrange an assessment with Mrs H and her family for the following Tuesday 23/09/14.

Care needs: Mrs H is able to stand and mobilise with support from one other. She is disorientated to time and place and lacks insight regarding her abilities, requiring assistance to maintain a good understanding

of her surroundings, abilities and times of the day with related tasks. Assistance from one other is required for personal care and hygiene maintenance. She also requires support with meal and fluid provision. NOK reported non-compliance to care provision in the past. At the assessment, Mrs H agreed that support would be essential to enable her to return home safely.

Carer's needs: The main carer's needs were considered during the assessment. Prior to Mrs H's hospital admission, her daughter-in-law supported her with most of her activities of daily living. DIL also supported Mr H, who has short-term memory loss and among other needs requires support with personal care, hygiene maintenance and meals. DIL felt she was unable to continue with the current level of support as it was affecting her quality of life. She requested that although Mr H was not in hospital, his needs be considered and the care package be set up to cover both Mr and Mrs H.

Risks: Without support Mrs H is at high risk of falls, not meeting her nutritional needs, dehydration, infection, physical health deterioration, inability to meet many of her

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activities of daily living, disorientation and hospital re-admission. There is also a high risk of carer breakdown.

**Recommendation:** Working with the multi-disciplinary team, MCMH Social Worker recommended a care package of four daily calls to enhance Mrs H's quality of life. In this would be included two daily calls for Mr H for personal care and meals.

A care package was identified immediately after the assessment (23/09/14). The care agency was supported to assess on the same day with the view of the care package starting within a maximum of two days. The discharge date was set for 25/09/14. However, family requested that discharge is postponed by a day as they were away on that day. Discharge was facilitated on 26/09/14.

It was important to be mindful that previously Mr H cancelled the care package on the day it started, leading to Mrs H falling on the same day whilst trying to meet her needs independently. MCMH maintained close monitoring of the case.

**Review:** Follow up call made to NOK the following day and a week following discharge. Mrs H has settled back happily in her home.

Feedback from family: "The care has been excellent," said the son. "My father has been very rude and abusive to the carers because of his mental health but they have patiently continued and they are very supportive. Thank you for finding this agency. My wife is getting the much needed break in her caring role - and so am I".

**Desired Outcomes:** Mrs H's desired outcome is to continue living at home with her husband.

**Concerns:** There are still issues of non-compliance on some days and Mr H attempting to stop the care package as he did in the past.

**Conclusion:** The care package continues at the same level. MCMH continues to support Mr and Mrs H, the family and the care agency to ensure that support is stabilised, which it is anticipated will, when the clients get used to the carers.