4

Case study four: Carers Assessment

About me

Name Anne Woolsey

Address 12, Oak Tree Close, Hawton ZZ2 Z22

Telephone 01654 654321

Email N/A

Gender Female

Date of birth 28.06.23 **Age** 92

Ethnicity White British

First language English

Religion Baptised C of E

GP Dr Philps, Oak Tree Surgery

How would you like us to contact you?

By telephone or letter

Do you need any support with communication?

I need written information to be in large print

About the person/ people I care for

My relationship to this person Wife

Name Arthur Woolsey

Address 12, Oak Tree Close, Hawton ZZ2 Z22

Telephone 01654 654321

Email N/A

Gender Male

Date of birth 18.11.21 **Age** 94

Ethnicity White British

First language English

Religion Baptised C of E

GP Dr Philps, Oak Tree Surgery

Please tell us about any existing support the person you care for already has in place. This could be home care, visits or support from a community, district or community psychiatric nurse, attending any community groups or day centres, attending any training or adult learning courses, or support from friends and neighbours.

Our two daughters help out when they can - Carol is nearest, 40 miles away. She visits a couple of times a month and our other daughter, Jean, tries to come as often but it's more like every 2 months or so. Jean and Carol each phone every week to see how we are.

Our neighbour, Betty – she pops in nearly every day now to see if we need anything. We've been friends for many years and she's not young herself.

The GP and nurse at the surgery are very good though we don't like to bother them, they are very busy.

The COPD Nurse stops by every few weeks to check on Arthur and bring his medication.

Vicar – we don't get to church much now a days but the vicar comes round now and then.

We used to go up to a lunch club at the church but we've stopped going lately.

Carol does the heavy shopping and helps with the housework when she comes. Jean and Carol both look things up for their parents and advise them as best they can. Both take Anne and Arthur out for short drives when they visit.

The things I do as a carer to give support

Please use the space below to tell us about the things you do as a carer (including the emotional and practical support you provide such as personal care, preparing meals, supporting the person you care for to stay safe, motivating and re-assuring them, dealing with their medication and / or their finances).

Arthur has Chronic Obstructive Pulmonary Disease (COPD) - Arthur did give up smoking about ten years ago. He was in the building trade all his life which the hospital said may have been a contributory factor, along with his smoking. We've been told he probably won't make it to next Christmas, but that is what we hope for all being well.

This is what I do for Arthur and me:

- > Get my husband out of bed and get him washed and dressed.
- > The bed clothes are usually soiled so I get the bed stripped and into the wash.
- > Make him breakfast and help him eat it.
- > Give him his tablets.
- > Do the housework I try to do a few jobs each day, rather than doing one big clean looking after Arthur takes up so much of my time.
- > Deal with the visitors to the house social worker, COPD nurse, GP I try to have them come in the morning.
- > Pop out to get some shopping- just to the local shops, little and often as I can't carry a heavy shop any more.
- > Do us a bit of dinner, though Arthur doesn't eat so much these days
- In the afternoon, I might look at trying to pay some bills. I'm trying to find out about power of attorney.
- > Make our tea
- > Tidy up and get us ready for bed
- > Make Arthur a drink and give him his tablets
- > Sort out the oxygen
- > Lock up for the night.

How my caring role impacts on my life

Please use the space below to tell us about the impact your caring role has on your life.

Arthur and I have been married for over 70 years – he's my world. He's always sorted out the finances, paid our bills and made sure we have enough to go round. I'm trying to do the paperwork now but I'm very worried about how I'll cope, I've never had to do this before. I've never written a cheque and I'm worried I'll get it wrong.

I wake up in the morning still tired, it's usually a disturbed night's sleep, but I have to get on with it as Arthur needs washing and dressing. He's often in a mess poor thing.

I make sure we have time to sit together and relax, I try to do things little and often - I'm very lucky to still have my health.

When Arthur nods off I try to do the bills but I end up nodding off too then I get very worried that things will fall behind. I don't know how I will manage when Arthur is gone.

The girls are very good and the grandchildren ring now and then. I try not to make a fuss, they're all so busy. The girls know I'm very worried about losing Arthur. I can't bear to talk about it, I just want to make the most of the time we have left.

This year I've not been able to do my planting and keep the bungalow up as I'm used to. I am feeling more tired and I suppose the main fear I have is that I won't be able to keep caring for Arthur to the end. I know I need to look after myself but I'm sometimes too tired to eat and I'm not sleeping well.

I have lost touch with the church and the people we used to see. Sometimes I feel quite alone.

What supports me as a carer?

Please use the space below to tell us about what helps you in your caring role.

Betty next door is such a good friend, she does her best but she is not young herself.

The doctor is understanding but there's not much he can do now.

The nurse up at the surgery has known us a long time and I can ring her if I'm worried.

The Community COPD nurse comes once a month and checks how Arthur is.

Carol and Jean help with the shopping and try to help me with the bills and letters but Arthur and I have always managed these things ourselves, I don't want to let him down.

Carol does the heavy shopping for me once a month.

We see the Vicar now and then. The church has always been a comfort to me.

My feelings and choices about caring

Please use the space below to tell us about how you are feeling and if you would like to change anything about your caring role and your life.

I am determined to look after Arthur until the very end. I need to stay well enough to do that.

Arthur and I both want me to help him with personal care, not a stranger.

I want to be able to manage and do my best for him.

I would like to have more sleep so I don't nod off when I should be sorting things out.

I wish the girls were closer so that they could come more often.

When the time comes I would like Arthur to die at home with me and his girls. This is what he wants too though he doesn't like to talk about it.

I need to make sure that I can take care of the bungalow and the garden, and that the bills are sorted out.

Information, advice and support

Let us know what advice or information you feel would help you and what sort of support you think would be beneficial to you in your caring role.

Some help with sorting out the bills and keeping on top of the paperwork like Arthur would want me to.

I would like the garden to look better so Arthur could sit outside sometimes.

Some back up in the mornings with changing the bed and getting the laundry done.

Someone to talk to about how to manage all of this. I don't like to talk about it in front of Arthur. He finds it very difficult to talk about leaving me and he doesn't want to talk about what he would like to happen at the end or after he's gone. I don't want to think about it. We have always said we would stay together till the very end. That is all I want, to be together in our own home. We never made our wills and I don't have power of attorney or anything like that.

Conclusion

To be used by social care assessors to consider and record measures which can be taken to assist the carer with their caring role to reduce the significant impact of any needs. This should include networks of support, community services and the persons own strengths. To be eligible the carer must have significant difficulty achieving 1 or more outcomes without support; it is the assessors' professional judgement that unless this need is met there will be a significant impact on the carer's wellbeing. Social care funding will only be made available to meet eligible outcomes that cannot be met in any other way, i.e. social care funding is only available to meet unmet eligible needs

Date assessment completed 15 February 2016

Social care assessor conclusion

Anne is providing significant daily support to her husband aged 94 who has COPD and is reaching the end of his life. At 92 years of age herself, Anne's health is generally good though she is increasingly frail and says she tires more easily these days. The couple live together in the matrimonial home. Her husband has monthly visits from the COPD nurse. Their nearest daughter visits once a month and does the heavy shopping. They have one other daughter who visits when she can, about every other month, and phones regularly. Their neighbour, Betty, a pensioner herself, pops in most days to check they are ok. Anne is very organised and has supported Arthur for many years while looking after the home. However, Anne's caring role is starting to impact on her health. She says that she is starting to feel increasingly tired and has disturbed nights. Anne does not feel confident in managing the family finances and is beginning to find it difficult to manage the home and garden. Anne would like to continue looking after Arthur at home "until the end". Both want to be together and for Arthur to die at home with his family. Anne would benefit from support to enable her to manage the demands on her, and to have some more time to relax and just be with Arthur. They each find it hard to talk about Arthur's death in front of the other. Arthur finds it difficult to say what he would like to happen at the end and to plan for this. Anne has previously found comfort in the church but has become more isolated recently. Anne would benefit from some emotional support for herself and for her family, as well as practical help, advice, and support to manage finances. This will enable her to continue as Arthur's main carer, which is what both of them want, and to maintain her own health and wellbeing.

Eligible for support

| What's happening next | Create support plan |
|-----------------------|--|
| | Parallel assessment for Arthur Woolsey |
| | |
| Completed by | |
| Name | |
| Role | |
| Organisation | |

Eligibility decision

Signing this form (for carer)

Please ensure you read the statement below in bold, then sign and date the form.

I understand that completing this form will lead to a computer record being made which will be treated confidentially. The council will hold this information for the purpose of providing information, advice and support to meet my needs. To be able to do this the information may be shared with relevant NHS Agencies and providers of carers' services. This will also help reduce the number of times I am asked for the same information.

If I have given details about someone else, I will make sure that they know about this.

I understand that the information I provide on this form will only be shared as allowed by the Data Protection Act.

| me | |
|--------|--|
| | |
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| | |
| nature | |