

# elaine mullane essay sample

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BUSTER**

1. 1 The key legislations are:

1. 2 Having a code of practice is very important when working with people with dementia. People with dementia are considered one of the most vulnerable groups of people in the society. They have rights and they expect a certain standard of work, moral and ethic standard from people who look after them.

In my workplace there are policies and procedures to ensure that the rights of the people we look after are protected, and that we are working according to the relevant legislation. Every care staff has the duty of care, which is the legal obligation to make sure the people we look after are free from harm. 1.

3 The general rule is that all information about an individual should not be disclosed or given to agencies, bodies or family without the consent of the person. Confidentiality is essential in health care to improve trust and working relationships between the service users and their carers. However, confidentiality can be broken if it is found to be in the interest of the person and the public. 2. 3 One of the difficulties for individual with dementia is that as their dementia progresses they may lack capacity to make decisions for themselves. However, the fact that they cannot make decisions in some areas does not mean they cannot make decisions in other areas. A dementia sufferer may be able to choose their dietary requirements but might not be able to make a decision about what to wear. So it is very important not to assume incapacity unless proven that the person actually lacks capacity. 2. 4 Dementia is not a constant condition.

An individual can lack capacity for some temporary reasons; either because they are unwell, in pain or tired, depressed at that particular moment. Such a person who was able to discuss some aspect of a decision when they were well may not even remember the question the following day. Physical factors can affect individual state of mind which in turn can affect their decision ability at that particular moment.

3. 2 Whilst care support staff always strives to ensure people with dementia receive the best standard of care, there are times when there may be conflicts of interest between company policies, staff code of conduct and the individual. However, it is important to ensure all parties interests are taken care of and most importantly the rights and wishes of the individual. For example, a service user refused to take the medication prescribed by the doctor. I will try to encourage the service user to take the medication by explaining the positive health implications it will have on him/her if they take it, and also the possible consequences if they refused to have the medication. I could also ask a more experienced staff member to explain to them. Finally I will record refusal/acceptance on the person's support plan.

Finally, if I experience a dilemma that may cause harm to the service user, although I still need to respect the service user's rights, I will weigh up the pros and cons which might mean carrying out a risk assessment to try make the situation as safe as possible, whilst still allowing the service user to do what they choose.

3. 3 Being able to complain of a service or system is part of an individual human right. People with dementia and their family might want to complain of the services or decision made for them, such as the support plan, medication, accommodation and activities. However, they may

not want to complain for fear of retribution. People with dementia and their family should be given clear guidance on how to make complaints, how complaints are handled, the length of time for complaints to be dealt with, and the appeal processes. They should be given all information that are needed to lodge any complaints should they have one. These should be part of the care planning process and reviews. People with dementia, their carer, and family should be made aware that organisations welcome complaints, and that it helps them improve the standard of care they offer.

4. 1 Everyone including people with dementia is entitled to be treated with dignity and respect in all aspects of life. In my organisation, whilst supporting people with personal care, we make sure the Individuals dignity and privacy is observed and preserved. These policies are based on the National Minimum Standards for Older People act 2000. My responsibilities and duties include supporting the individual with every aspect of their personal care, whilst upholding the Individuals wishes, dignity and privacy and working within the guidelines and policies of my organisation. My own personal hygiene preferences include a bath or shower daily and a wash in the morning and/or bedtime depending on the time of the bath/shower. I wash my hair every other day and consider myself fastidious with regards to hand washing which I tend to do before and after almost every activity. A practicing Hindu would usually only wash in running water and would shower or bath daily. Many eat with their fingers and therefore must ensure that their hands are kept scrupulously clean. A Hindu would use a bidet if one was made available and a jug of water, when no bidet is available. Personal hygiene has many ritual practices and is observed by both men and women.

My own personal preferences and beliefs would have no bearing with regards to the personal hygiene of the Individual service user. The wishes of the Individual are to be respected and carried out, providing that they are deemed appropriate and observe current policies and procedures.