

# [Care skills essay sample](https://assignbuster.com/care-skills-essay-sample/)

[Health & Medicine](https://assignbuster.com/essay-subjects/health-n-medicine/), [Disease](https://assignbuster.com/essay-subjects/health-n-medicine/disease/)

My assignment is to write about a comprehensive discussion on a chosen client with a specific illness. I have chosen to write about Mary whom suffers with dementia and is cared for in her home. I will describe the range of needs of the older person and my understanding and application of concept associated with caring for an older person with Dementia. Dementia is the umbrella term used to describe various conditions which cause brain cells to die, leading to the progressive deterioration in memory and the ability to carry out everyday activities such as washing, dressing, eating, and completing complex tasks. Dementia may also affect a person’s mood and personality. There are many different types of dementia but Alzheimer’s disease and Vascular dementia are the most common forms. A person with dementia displays a variety of negative behaviours such as incontinence, loss of communication skills, aggression, wandering, shouting and yelling. The problem is more severe in older patients.

They often fall and sustain injuries. Their families often do not want them at home and believe that these patients need the supervised care provided in a nursing home. But, to a patient with dementia in the early stage, a caring relative may be all that is needed to reassure the patient from time to time. It is important to note that these patients live in the moment and will cope best with familiar people, routines and surroundings Mary is an 80yr old client whom suffers from Vascular Dementia which leaves her in a confused state. She may forget where she is or she looks to go home and her at home but she means her home as a child growing up. She looks for her mother or at times thinks I am her daughter. She is very unstable on her feet so for her health and safety she has a chair with a beeper cushion which alarms when she tries to get out of it, so we are aware of her movements. Mary is supported and cared for by her family with the help of a care assistant. Mary’s needs; for daily living

Physical
The Signs and Symptoms of vascular Dementia. Vascular dementia affects people in different ways and the speed of the progression varies from person to person. Some symptoms may be similar to those of other types of dementia and usually reflect increasing difficulty to perform everyday activities like eating, dressing, or shopping. Common physical signs and symptoms that Mary has shown are:

•Dizziness
•Leg or arm weakness
•Tremors
•Moving with rapid, shuffling steps
•Balance problems
•Loss of bladder or bowel control

Social

Social Interaction
Someone with dementia like Mary may lose the ability to think critically about what they say or do in social situations, which may cause them to say things that are uncharacteristic for their personality, or things that offend people

Short-Term Memory Loss
People with dementia may have a shortened attention span and be easily distracted, which can make it difficult to carry on a long and thoughtful conversation for example Mary thinking I am her daughter, I remind her who I am and my purpose.

Another common effect of dementia is the loss of the ability to take care of yourself. Dementia can result in forgetfulness and a lack of foresight, which can make it difficult to perform routine tasks like making food, or even planning a trip to the bathroom Emotional

‘’The most devastating loss of all for the person with dementia can be ‘ the loss of self’’. Source: Davis 1993. Although not all people with dementia show changes in emotion, many do feel depressed, anxious, frustrated, fearful, helpless, angry, or suspicious. These feelings may be subtle and short-term. Or, they may be widespread and hard to manage. All of this may change as the illness changes Dementia can lead to a change in disposition, and potentially depression. People who have dementia will often be aware that they cannot think as well as they used to, and may observe that other people treat them differently as a result of their condition. This can cause irritability and decreased desire to interact in social situations. The loss of the ability to take part in or enjoy hobbies and other activities can also contribute to feelings of depression.

Environmental
If you are caring for someone with dementia, you will need to find the right balance between protecting them for the sake of safety and encouraging independence. You will need to be alert for changes in the capabilities of someone with dementia. In the early stages they may be able to take baths and cook on their own. Later they will need reminders and as times goes on, they will need help. Of course, each person with dementia is different and every home situation varies. However, carers need to be aware that accidents are more likely to happen because: dementia will affect the person’s memory and judgment, our sense of balance and speed of reaction tends to decline as we get older, physical disabilities make it harder to carry out some activities, carers may feel pressurised and accidents tend to occur when people are stressed.

Avoiding accidents
There are a number of ways to make the home safer. An occupational therapist can advise on this and on aids for the person with dementia. Lighting Make sure the lighting is bright. Aids such as handrails in the hall, stairs, bath or toilet will assist the person if they are unsteady on their feet. Falls are particularly common among elderly people and can be dangerous If you are looking after someone with dementia, you will want to take particular care to ensure that they do not develop pressure sores. Older people who are not very mobile are particularly vulnerable

‘ Rehabilitation and Recreational
Recreational and rehabilitation activities play an important role when it comes to defining our own Quality of Life. We tend to do things that are relaxing, bring pleasure, stimulate our curiosity, or expand our knowledge about something significant to us. “ Activity” can refer to almost everything we do throughout the day. Even sleeping is an activity. Here an activity will be something that is participated in actively. Activities for dementia patients need not come in a box and be bought at a store. Gardening, dishwashing and other housework, sorting old photos; all of these can be therapeutic activities. As always, make choices based on the patient’s interests.

Mary loves reading soap Magazines although she may not remember the characters she can associate with the show for example Coronation Street as it is 50yrs old. Encourage the elderly to participate in recreational and rehabilitation activities such as bingo, card games Card games are not only fun but may help stimulate the brain cells that can become lazy from not being used regularly. Drawing, painting and cutting out various shapes, sizes and colours may help the elderly feel like they are actually accomplishing something, especially when the end result is displayed. Psychological or Intellectual needs

Does a person with dementia lose his or her old personality, sometimes does it seem like a different person inside the same familiar body, At times, it can. The family members sometimes mourn the loss of a parent or brother even though the person is still clearly with them. Dementia can lead to symptoms and behaviours that can seem worse than cancer, heart disease. The person inside that familiar body is still the person we love. That person and, in fact, all of us have common psychological needs. Tom Kitwood, the late Alzheimer’s researcher, suggests that people with dementia, like all people, have six psychological needs and that as we care for people with dementia, we should strive to fulfil those needs every day. As you care for someone with dementia whether it’s caused by Alzheimer’s or another disease or condition, consider finding ways to fulfil these six psychological needs every day: Attachment – Love –Comfort –Identity –Inclusion- Occupation.

Spiritual
For people with dementia, helping to maintain a link or reconnect with their religion as part of their provision of care has the potential to increase their sense of well-being. This has been recognised in the National Service Framework for Older People (DOH 2001) and by NICE/SCIE (2006). Both
documents stress the necessity of providing person-centred care that responds to the individual’s needs including those relating to spirituality and religion. However, for people who spend the majority of their lives engaged in spiritual activities, it is also important to help them find a way to stay spiritually connected. As a caregiver, there are several things you can do to nurture your elderly loved one’s spiritual needs 1. Take them to worship. the parish priest calls into see Mary once a week. This always improves her awareness and boosts her morale. 2. Bring worship to them. Another option may be to bring religious studies to your loved one. This is a particularly beneficial option when several seniors can meet at the same home or facility. 3. Give them books to read. It is probably a good idea to look for large print editions. 4. Have a spiritual conversation. Talking with like-minded people about spiritual questions, ideas, and convictions is another way that the elderly can have their spiritual needs met. How you and your loved one choose to meet the spiritual challenges of caregiving will depend largely on your loved one’s overall health, specific faith, and general worship practices

Level of assistance required, Activities of daily living with Dementia

Routine activities that people tend do every day without needing assistance, are six basic ADLs: eating, bathing, dressing, toileting, transferring (walking) and continence. An individual’s ability to perform these practical ADLs is important for determining what type of long-term care they may need. If you are caring for someone with dementia, you will need to find the right balance between protecting them for the sake of safety and encouraging independence. Communication between Mary, family and care team assist in establishing what level of assistance Mary may need and what in the future. Rather than wrapping the person in cotton wool and completely curtailing their freedom, you may need to accept that some minor accidents may occur. But there are some sensible precautions you can take. You will need to be alert for changes in the capabilities of someone with dementia, for e. g., deteriation in mobility so mechanical aids may be needed depending on level of assistance required, Some independent living aids can assist the client in activities of daily living for e. g. Transferring aids may be required, a walking stick, a walker, chair, hoist etc.

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Role of the healthcare assistant
The role of the healthcare assistant is to support the delivery of client care under the supervision and direction of qualified nursing personal We must assist the nurses in the implementation of nursing care and in the management of the care environment. My role involves being aware of and understanding the following concepts, confidentiality, courtesy, accountability, communication, dignity and privacy and health and safety. I am accountable and responsible for my own actions. I must work within the perimeters of the role according to recognised training, report to and work under the supervision and direction of a registered nurse, carry out assigned and delegated tasks involving direct care, conduct myself in a manner that conveys respect for individuals and ensure safe practise and health and safety at all times. My role is to support the individual wants and needs of Mary and her family. I must report any concerns, tasks completed, change in condition of Mary, concerns expressed by Mary, any broken or faulty equipment and any dangers that may leave Mary’s safety at risk. Conclusion and Evaluation

“ For any man of good will, there is work to be done here, effective, virtuous, satisfying work which can give rich meaning to one’s own life and to others’’ Abraham Maslow. I found this project very interesting and very informative as I was quiet naïve to what dementia was and how it affects someone’s life and that of their families. I now feel very equipped to care for a person like Mary with dementia and able to facilitate her and her family needs. It’s very important that people with dementia are treated with respect. It is important to remember that a person with dementia is still a unique and valuable human being, despite their illness. We can always look for ways that you can help the person to feel valued and good about themselves. When a person with dementia finds that their mental abilities are declining, they often feel vulnerable and in need of reassurance and support.

The people closest to them including their carers, health and social care professionals, friends and family need to do everything they can to help the person to retain their sense of identity and feelings of self-worth. Make sure that anyone involved in caring for the person has as much background information as possible, as well as information about their present situation. Be as informed as possible, the more you know about the disease the more you can help and there are many local and national societies and support services available. This will help them see the person they’re caring for as a whole person rather than simply ‘ someone with dementia’. It may also help them to feel more confident about finding conversation topics or suggesting activities that the person may enjoy. Always try to remember:

Each person with dementia is a unique individual with their own individual experiences of life, their own needs and feelings, and their own likes and dislikes. Although some symptoms of dementia are common to everyone, dementia affects each person in different ways. We all need to feel valued and respected and it is important for a person with dementia to feel that they still have an important part to play in life. Give encouragement and reassurance and support other family members to understand the person’s needs and concerns.

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