

Case Studies

Case 1

Mrs. T. was discharged from hospital with four visits a day. She had a history of falling and had been in hospital for several weeks prior to our service commencing following yet another fall. Mrs. T. lives with her two granddaughters, but they have little input in her care routine. She had lost confidence but was very determined to stay as independent as possible.

Our staff worked together with the reablement OT to increase Mrs. T's confidence when walking. In particular they reminded her not to walk too fast with her frame and not to cross her feet over each other (a legacy of a previous stroke).

At first the staff were assisting with personal care, then they observed Mrs. T doing this for herself and finally they would wait in another room whilst she did this independently. They also encouraged her to make a sandwich for her lunch. Once again they initially had to assist quite a bit, but eventually she could do this for herself.

At the end of six weeks Mrs. T was discharged from the scheme with no ongoing care.

Case 2

My name is Jack. I'm 84 years and since I lost my wife six months ago I've been living on my own in a static caravan up here in North Norfolk. It's been very lonely here and I've been feeling very isolated and getting more and more depressed. I originally got in touch with the Council to ask about going to a day centre so I could meet people and get a bit of my social life back. Talking to the Development Worker reminded my how many interests I had, so rather than just go to the day centre a couple of times a week, we had a think about what I could instead that I might enjoy more. The Development worker suggested I think about volunteering at the local Broads Museum or being a befriender at a nearby care home. I still drive so I can get about. I liked the sound of helping out at the home so the Development Worker got in touch with the manager and came with me to meet her. I got on really well and I've since become an official befriender and I go two or three times a week to meet the residents, especially the ones who don't get many visitors. It was still a bit lonely back at home so the worker put me in touch with a cat-rehoming scheme and I'm now the proud owner of an elderly cat, who has been great and a real inspiration to get me up and going in the mornings. I'm feeling much better now and doing a lot more for myself than I was before.

Case 3

My name is Michael, I am 78 years old. I've lived on my own for 15 years following the death of my wife. I used to have meals on wheels delivered Monday to Friday each week (with additional meals on a Friday to cover the weekends) but as the meals arrived before 12 noon I often didn't feel hungry enough to eat them. Sometimes I felt isolated as I waited in all morning for the meals be delivered. When the meals on wheels service changed, I chose to have chilled meals delivered as this meant that I could reheat my meals at a time to suit me. As my meals are delivered early I can now plan to go out during the day. I also decided to join a local lunch club, rather than have meal deliveries every day. I've made new friends and a group of us now plan days out together, often at weekends. I feel much happy with the decisions I made and the new friends I've made through joining the lunch club mean I feel much less isolated.

Case 4

Emily (not her real name) is 19 years old. She has a mild learning disability, autism spectrum disorder and mental health needs. She was at college studying catering with additional support, but was struggling with the course and wanted to leave. She also had a small personal budget which provided some one-to-one support with accessing the community. Emily was keen to do some work experience in a kitchen, but the college had not been able to find her a placement.

The assistant practitioner who was undertaking her social care review approached the manager of the kitchen at a community hub who agreed that Emily could do some work experience there. Emily used her one-to-one support to assist her at first –but once she no longer needed this, Emily carried on working as a volunteer on her own. She enjoyed it so much, she started going on extra days during her college holiday. At this point the assistant practitioner suggested to the kitchen manager that they could take Emily on as an apprentice, and she agreed. The assistant practitioner arranged for the college to complete the paperwork for the apprenticeship. Emily will now have a paid apprenticeship for a year, which will give her the opportunity to build on her catering skills, with placements in other kitchens owned by the same company. If she does well, it is hoped that she will be taken on as a paid employee, or will be in a good position to apply for other jobs. This has also reduced her need for funded social care support.