

Case Studies – May 2016

Hamelin Trust

I am writing regarding the help and support that I get as a carer from Umatter2 (Hamelin). I care for both my husband of 55 and mum of 83 whom both have Alzheimer's, I still work 25 hours per week, Mondays can be a little tricky after the weekend as they both do not understand why I have to work Umatter2 support me on a Monday afternoon, what is wonderful for me is that the support workers really understand the problems I face as with the dementia so many people do not understand, having Sue allows me to continue to work as she supports us with lunch, I am able to book appointments on a Monday so I have assistance to take one or the other knowing that one or the other will be supported and I can concentrate on dealing with one person at a time. Sue sometimes takes them both out for walks which allows me also to work or have an hour on my own.

I am supported with any household chores or shopping that I need, I do not have any real time to myself once a month they go to singing with the brain which gives me a whole afternoon. I am able to access the wellbeing events.

We all look forward to Sue coming and without this support it would be incredibly hard like it was before this help. I also get someone to talk to not just about how I am feeling but about everyday things.

All the support works that I have come in contact with at umatter2 are understanding and extremely help full, if they can offer help they do ,If they say they will support they will and they actually go out of their way to make things happen. As I said before if not for this service life would be more difficult.

It is great to know that I have someone at last there to listen and support me.

Headway

Mrs B is the main support and carer for her husband who over recent years has had a stroke and cerebral vasculitis. She has been supporting her husband at home following a lengthy spell in rehabilitation, which has been difficult and placed a strain on her and their relationship. He requires constant care and attention due to how he interprets his environment and also the communication and actions of others. The situation has affected Mrs B's own life, pursuit of hobbies, maintaining her work role and also a financial strain now that her husband is unable to work.

Mrs B has received support from Headway Essex Community Support Worker including one to one Support both prior and also since her husband has returned home. Mrs B has received support from Headway through confidence building and access to groups and workshops.

Mrs B is now far more confident in dealing with other agencies and professionals, which has resulted in her securing more hours of formal support which has enabled her to remain at work and to be financially secure. Through attendance at groups, Mrs B has developed a network of friends who she can call on.

SNAP Parent Counselling Case Study (name has been changed)

Context:

Jane has been in contact with SNAP since her son was born with a lifelong disability. She was totally unprepared for this and it has affected all aspects of her family life. She has recently returned to work following maternity leave but is experiencing stress and low mood, constantly worrying about her son's health and development. Jane experiences feelings of isolation and exclusion in social groups such as church and school.

The counselling sessions started out with a 6 week model focussing on using some CBT strategies for understanding triggers and coping with stress and stressful situations. This progressed somewhat with a thought diary put in place. However everyday crises and the child's health concerns overtook the sessions and they became mainly supportive for a while – a space for Jane to process the sadness and worry.

Jane is supported with practical solutions and strategies to manage the reality of the ongoing concerns for her child and managing family life whilst exploring past issues and the underlying guilt of her son's disability which has resulted in constant exhaustion low mood and worry.

Outcome (to date)

This is a very complex situation. Jane knows there are no quick fixes for her situation and that no one can give her a clear answer on which direction she should go in. The ability to talk has enabled her to feel slightly less stressed and now has a better understanding that she needs to develop her own resilience and wellbeing to manage life and her family.

Support for Sight Case Study: Mrs. B

Mrs B. contacted Support 4 Sight in September 2015 on behalf of her mother who is visually impaired and struggling with her sight. Her mother's eyesight was failing and Mrs B as the main carer was worried for her mother's safety and mental health. Mrs B was very anxious herself and unsure how to help her mother, while also trying to hold down a job and looking after her own family and house. The conversation with our Support Worker allowed Mrs B to say how she felt and to talk about the situation.

Mrs B joined the carers group. At first she was not sure it would help, but after the chat she was happy to be added and information was sent out to her. Mrs B was also happy to join the Facebook group, although she felt she may not be able to attend a support group meeting regularly. Mrs B has become a regular on our carers Facebook page and had posted a note on the forum asking for information about a chiropodist and immediately had a response from other carers in the group.

During a follow up visit from our Support Worker to Mrs B's mother, our Support Worker felt that Mrs B's mother was clinically depressed and before Support 4 Sight could help with visual aids, a visit from the GP was advised. A little while later, Mrs B was contacted again to see how everything was going with her and her mother. The GP had been seen and agreed that her mother was in need of psychiatric help. They were waiting for the next step.

During our last call to Mrs B. she explained she is now coping much better with managing care for her mother, while also continuing to work and manage her life at home. She no longer feels under pressure from all the anxiety she was experiencing before and is better

able to live her own life alongside her role as a carer. She will continue to use our support when she needs it and has remained a contributor to the Facebook group

Supporting Carers in Essex Partnership

An example of the impact of the Adult Carer Support in the Community

Following a diagnosis of Vascular Dementia and Parkinson's disease, Mrs A called for respite services. Following a detailed conversation at a home visit Mr A began attending one of our outreach sessions. Regular contact was maintained with Mrs A at the monthly Carers drop in service, and support was given through attending the home of the Carer and completing a Carers Assessment, as well as a Financial and Benefits Assessment.

As Mr A's condition deteriorated, Mrs A's own health also began to be affected. Through early intervention we were able to help place Mr A into residential care for 3 weeks respite. During the break Mrs A was able to recuperate and since returning home Mr A's interests and behaviour have improved and family life is much calmer. Mrs A has also decided to bring in domiciliary care support as she now understands her own limitations and realises the benefit of regular breaks and asking for extra support

An example of the impact of Carer Support in Acute Hospitals

Mrs H was the primary Carer for her Father Mr D, who was an inpatient at Broomfield Hospital. Mr D was aged 85 years and of Eastern European origin, he had Parkinson's disease and was admitted with an exacerbation of this progressive condition, resulting in swallowing difficulties. Mr D did not speak English and lived with his wife (Mrs D), daughter (Mrs H), son in law and grandson, aged 10 years. Mrs H also cared for her mother and worked part time. Once deemed medically fit, the hospital sought a translator to facilitate an assessment for continuing health care funding. The Hospital Liaison Worker acted as an advocate for the Carer. Mr D was adjudged not to have mental capacity to consent to an assessment or make any decision relating to his care.

The Carers Hospital Liaison Worker supported the Carer through this process, advocating on her behalf, providing emotional support and informed her of her rights as a Carer. Mrs H wanted to Care for her father at home, and the Carers Hospital Liaison Worker also helped her source specialist equipment to enable her to do so. A best interest decision was made that Mr D should remain in the community. The family were then passed onto the Adult Carers support in the community team and the Young Carers support service.

Mr D was discharged and remained there until his death several months later. There were no further admissions to hospital and the family felt able to continue in their extensive caring role whilst still maintaining their own physical, mental and emotional wellbeing as well as employment status.

Mrs D still lives with her daughter who continues as a working-age employed family carer and Mrs H feels confident to contact Supporting Carers in Essex should she need to in the future.

An example of the impact of the Macmillan service

Carer A was visiting the hospital with a friend. The Carer visited the Macmillan Information Centre in one of the Acute Hospitals, concerned about how she would cope with her home

situation. Her husband had very recently been given a terminal diagnosis of Liver cancer and had a prognosis of approximately 12 months.

Carer A felt that she would like to give up work to be there more but is concerned how they will cope financially. She has a daughter that has also been diagnosed with cancer and would like to continue looking after her grandchildren.

The Macmillan Information Centre volunteer referred her to the Macmillan End of Life Carer Support service. She arranged to visit the carer at home and discussed the financial options available including carer support and fast tracking benefits due to the terminal diagnosis. She met with the carer several times, once taking her out for coffee so she could speak in private about her concerns regarding her husband dying at home.

Emergency planning was arranged, alongside a couple of respite days so the carer could visit her daughter. The cared for had spoken about his preferred place of death and the doctor was made aware of this.

As a result of our support the carer felt better able to cope, felt more resilient when stress increased, felt more positive that she would be able to manage and give up work, understood financially what she was entitled to, had increased knowledge of other support resources and felt less likely to hit crisis point. The cared for achieved their preferred place of death and contact remained in place with the carer for the time after the loss of her husband.

An example of the impact of the Rapid Response Home Support

A couple referred to Rapid Response have been married for more than 50 years. Wife was diagnosed with Alzheimer's two years ago. As her illness has advanced, she has needed progressively more care, her husband has given up work to care for his wife and is now her full time Carer.

The Husband is extremely exhausted as he is not getting much sleep as wife likes to roam at night. The husband provided all of his wife personal care needs this included during the night. The husband did not access any other services and was at breaking point, feeling that he could not cope.

Rapid Response was provided for 4 hours per week, whilst the statutory assessment was being completed.

The husband stated that the service had helped so much and he had been able to go out and get things done without having to worry about his wife, as he knew she was being cared for. The husband had also been able to catch up on sleep, if he had a particularly bad night with his wife, whilst Rapid Response staff were there. The husband has felt more able to cope with caring for his wife and feels more positive about the future. They have been awarded direct payments and continue to use our service directly.

Quotes from carers:

I can't thank you enough for all the practical and moral support that you've been to C and me over the past 6 months. My life would be so much more of a slog dealing with things by myself.

I certainly have found much relief and enjoyment of having time out to myself for a while. I have personally gained much benefit from the sessions I have been to and look forward to them with grateful appreciation. They have certainly help me look forward again.

Being a carer for two people i would not have done all the above on my own as i am so busy, but this gives me "me" time and i feel it "re-charges my batteries" and gives me more energy for my demanding role.

"I will take away a sense that I have a great network of support available to me and my family and that I should never be afraid to ask for help"

'Thanks goodness you are there. I don't what I do without you. I feel I have someone there to support and guide me'.