

Care in the Community

Does it work?

By a member of the community care team.

As someone who works in the community and has the responsibility of ensuring care is put in place for the vulnerable and elderly, I feel that at this moment in time it has not proved to be a workable system, especially in the case of elderly men and women.

The present senior citizens are of a generation of people who have been brought up to accept 'their lot' and not ask for help. Many of us would call this stubborn pride.

Unfortunately, our society has become ignorant to the needs of others. The community spirit that existed 30-40 years ago is now gone and people live in an isolated state most of the time too frightened to ask for help from others.

When care is needed by the elderly it is usually the immediate family who take on the responsibility of the shopping, cleaning, laundry, personal care and sometimes feeding. This can be 24hrs a day 7 days a week putting more strain on an already stressful situation. The situation eventually becomes too much for the family and they are unable to continue, help and advice is sought. This is usually in the form of a request from the family doctor or a family member asking for an assessment of the needs of the elderly person. Whether there is physical illness or mental illness this assessment is made by a lay person with no medical background. The assessment normally takes place in the elderly person's home and consists of a 20-30 min visit, by a complete stranger, asking a series of questions.

As someone who has been present at many of these so called assessments and case conferences, I often wonder if the decision is made without taking into account the input from all who are involved. 'We need to take into account what Mrs/Mr A has to say' seems to be a standard line. This is obviously of great importance provided that he/she is capable of making a reasoned decision, and all the options have been explained. How can this be done however when Mrs/Mr A cannot tell you what he /she had to eat _ an hour ago let alone remember who did their cleaning, washing or who helped them to dress that morning?

A typical scenario took place recently. An elderly member of my community had a bad fall which resulted in a nasty head wound and eventual admission to hospital. On admittance to hospital she was asked how she had sustained the injury. Her short term memory was so bad that she told the nurse she had fallen in her previous home, which she left 7 years ago, and that I was her next door neighbour. (Was this lady capable of making a decision about her future care?) During her stay in hospital she was assessed by a professional person, who had spoken to her for no more than 20 minutes. The person then took their findings to a panel, which consisted of hospital nurses, the daily carers, members of the lady's family and other agencies involved with the case. Prior to this meeting it had been strongly suggested that the lady involved was able to return home. It was only when much concern was expressed and statements given by the other agencies especially her daily carers as to the lady's mental state, her inability to make a meal or keep herself clean or even know what day it was that the decision was reversed. This lady's situation had been causing concern for over 12 months and the many requests for residential care had been ignored. It was only when she sustained a serious injury that notice was taken of the problem. I wonder, if all who cared for this lady had been listened to whether she would have been spared the injury and the family much stress and worry.

It is instances like this that care in the community fails the very people it is meant to help.