

Appendix 1

Pen picture - JW

Gofynion y Client / Client Needs

Darlun y Client / Pen Picture

- Client known to Social Services OT for several years
- Admitted to hospital
- Social services OT worked with hospital OT to solve problems with client moving and handling and arranged adaptations in the home.
- Social services OT aided the discharge by meeting the ambulance to help with access and helped the Carers for their first two visits.
- On going work to improve moving and handling and work on her other goals.

Amgylchiadau blaenorol cyn ymlygiad / Circumstances prior to involvement

before hospital admission

J lived alone in a bungalow. She had had mobility difficulties for a long time due to her obesity and other health problems. She had always tried to be as independent as possible. She was able to go to the toilet independently and walk around her bungalow. J only needed a carer once a week to help her to shower. J had a good support network; a niece who lives nearby. She enjoyed doing different crafts and spending time with her niece's children. Cyngor Gwynedd OT, knew her well, having worked with her previously to adapt her bathroom, her raiser-recliner chair and provide her with aids for bed transfers.

The critical incident

J fell and broke her thumb and ribs in April 2020. She was in Hospital until the end of May when she was transferred to a community hospital. Physios worked hard to give her rehab but progress was limited due to low oxygen levels in her blood and her poor general health. J did not manage to return to weight bearing, she could only tolerate sitting in a chair for a couple of hours.

J was proving challenging to care for on the ward due to her size. Often four members of staff were used to roll her on the bed. The ward sister was keen that her discharge from hospital was not delayed; she was taking up an entire 4 bed bay.

Beth sydd yn bwysig iddynt / What they said mattered

Primarily, what mattered to J was that she could go home from hospital as soon as possible. It was also important that she remained in control of her discharge plans. She needed to be involved in making all the decisions and be kept fully informed as to what was going on. J wanted to ensure she could have the same care agency she had before

going to hospital as she considered them to be her friends. She wanted to be treated with dignity and not have to see her carers struggling to manage her weight.

Canlyniad / Outcome

Be wnaeth nhw/ni / What they did/We did

Joint working with the hospital OT and other multi agency working

Community OT offered to help the hospital OT. The hospital OT, was grateful for the assistance, particularly as she was new in the role, having been seconded to work in the hospital during the first Covid19 wave. The community OT felt that her knowledge of J's personality and home environment would help J meet her goal of getting home safely as soon as possible.

Adaptations

June 2020 Community OT did a joint visit with hospital OT to J's bungalow to see what adaptations would be needed. It was concluded that J would need H track hoist ceiling track hoist, with four point spreader bar, in the lounge, to allow her to be hoisted to her chair. After discussion with J, it was agreed it would be better for her to have a bariatric bed in the lounge rather than adapting her bed room. J was expected to spend a lot of time in bed and she thought she would prefer to be at the front of the house and able to watch her TV.

In the following weeks, community OT organised joint visits to arrange the details of the adaptation, which was to be paid for with a Physical Adaptation Grant. Joint visits included the OT from the local disability company and the officer from Canllaw who was working for the housing agency. In addition to the ceiling track hoist, the bedroom door was changed to a double door and the built in cupboard was removed to make the room bigger. New hard flooring was laid to make moving the bed easier and safer for the carers. J was kept fully updated, as the community OT spoke to her on her mobile.

One of the major issues was getting J in through the front door. It was realised that J's wheelchair was too wide to fit through the door. The only way to get it through was to take the door off its hinges. The door could not be widened unfortunately due to the structure of the building. J has a right to be able to access her home safely. The living room window could have been changed to French doors to give her full wheelchair access. This could have been organised in a timely manner as all the agencies involved were very keen to help. J however, was insistent that she did not want this. It was more important to her to keep her window as it was. She likes to sit next to the window, with all her things arranged on the sill, and pass the key through the window to visitors. Having all her things in arms reach of her chair has always been really important to J. J had capacity to make this decision even though professionals felt that this may be unwise. J was adamant that this was her decision. The fire service and the ambulance service were informed of the situation.

Moving and Handling

Community OT went to the hospital to help the hospital OT to select and assess for a suitable sling. (This was because the hospital OT was low in confidence due to being new in post and her colleagues were extremely busy). J's large size meant that a standard slings were not suitable.

Moving J on the bed was very difficult due to her size. In order to get her a care package, the number of carers required for each call needed to be reduced to two. Community OT arranged an assessment with the Vendlet; this assessment involved the rep from an equipment service, community OT, the hospital OT, the ward staff. The Vendlet consists of rollers which are attached on each side of the bed which raise and lower. They allow a person to be rolled as the sheet is wound on to the roller. It takes the physical strain from the carers. J loved the Vendlet, she said that it was '*bloody brilliant*'. It turned her in a safe dignified way. It was far more comfortable than being turned by carers.

The care package was arranged with the council 'in house' carers; the carers that J knows and was so keen to have. These cares are very experienced at using the Vendlet so this was a great help.

The discharge – 28th July 2020

On the day of discharge the community OT met J as she arrived Home. She was very happy to be home.

On going work.

Community OT has continued to work with J since discharge to help keep her safe and comfortable and to help her achieve her goals. Making sure J remains at the centre of all interventions is as important as ever. All work has been done in conjunction with J and the carers. The community OT is in regular contact with the DNs and the care supervisor. The sling and chair has been changed her so that she is more comfortable and can tolerate sitting out longer. This would give J more opportunity to engage in crafting and other activities that are meaningful to her.

Potensial y canlyniad yn yr hen drefn / Potential outcomes in the old system

Reflection:

Positives about the way of working

Council OTs rarely go in to hospitals to help with discharges as this is the hospital OTs responsibility. The Council OTs would however usually be involved where more major adaptations are required. The joint working in this case resulted in many positives

- Good continuity of care and client centred.

My knowledge of J's character and what has been important to her over the last few years helped me better understand her situation. I knew that the only way to progress on the case was to ensure she was in the driving seat. J has always been reluctant to take advice but when she is able to be part of a decision, she can take ownership of it and can be very determined to get things to work out.

- Shared work load.

The hospital OT was dealing with many pressing cases and needed to be out on the ward. Being office based (well working at home), I was well placed to do the vast amount of research needed through web searches, phone calls and emails in order to problem solve issues around the case.

- Close multiagency working.

As I am experienced in working in the community and organising adaptations I was able to quickly make contact with the relevant people to enable the work to be completed in a timely manner. Everyone involved went above and beyond to help J. They all made her a high priority and cut red tape where necessary to get the job done quicker.

- Good team working with Stores.

It was frustrating to have to complete lengthy forms to request each piece of equipment from stores however, with the great cost of some items, I can see why they wanted full justification. The stores E-panel was effective in cutting time before panel made a decision. The arrangement between Stores and Byw Bywyd to deliver equipment, and to fit and service the Vendlet, helped me organise everything to be ready at the same time.

These positives in the way of working, resulted in a positive outcome for J: she achieved her goal of getting home without excessive delays. J has the carers she wanted, who are providing excellent care. The Vendlet and ceiling track hoist have considerably reduced the strain on carers and, as a result, J can look forward to their visits without worrying she is going to hurt them.

There has been a positive in terms of a cost saving. Care costs £23 / hour for one carer. Without the Vendlet 4 carers would be needed for each call. She would need about 2hrs 30mins a day. Over a week her care bill would be £1,610. With the Vendlet the care can be reduced to £805 / week. The Vendlet paid for its self in less than 14 weeks.

There is still more work to be done and I expect to continue to work with J for a long time, supporting her as her needs change.

Things that could have been done better

If the hospital had taken up the OT offer sooner then we may have managed to get J home a week or two earlier. This may however have been unrealistic as, she was still doing rehab, it may have been too early to see if when J's functional; ability would be on discharge.