

# Case Study – 3

For further information or advice please call 01733 454492

# Overview

Mr B had recently been diagnosed with dementia and moved into Extra Care housing. Mr B did not recognise he had memory problems and lacked insight into his condition. He was fiercely independent and became very defensive when his son showed concern about him becoming muddled with his medication. Tension was building between Mr B and his son, causing arguments when his son visited him.

Consequently a care package was introduced to prompt Mr B to take his medication twice daily. Mr B had no other care needs and made it quite clear to all concerned that he disliked having these calls.

## Intervention

Introduction of a **Pivotell medication dispenser** that enabled Mr B to independently take the right medication, at the right time. Staff agreed to initially monitor how he was managing the dispenser and it soon proved to be successful. His son was more than willing to be responsible for filling the dispenser every 2 weeks and the support from care staff was withdrawn.



#### **Outcome**

- Mr B was more settled in his new surroundings as he felt more in control of his life now there was less intrusion. This improved his self-esteem, self-worth and confidence.
- Son had peace of mind and his anxiety levels were reduced. Visits became less confrontational to the benefit of both.

## **Comments from carer**

"I call it my magic machine. I don't have to fiddle around sorting my tablets out anymore, they just appear like magic!"

## **Cost Savings**

Approx. £50 p/w or £2600 p/a
The medication dispenser paid for itself within 2 weeks.













# Case Study – 4

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## **Overview**

Ms M, a service user in her 30's has a mild Learning Disability and lived on her own with some support from a care agency, and her mother. She attended hospital for a brain operation and upon discharge, was rehoused to a 2 bedroom flat to allow her to have 24/7 care for a temporary period.

The 24/7 care resulted in Ms M becoming reliant on having a night carer and felt she still needed their support. Ms M's mother was very protective and felt that round the clock support was needed for potential 'what if' scenarios. The night staff indicated they didn't have any concerns regarding Ms M, as their assistance wasn't needed and no risks were identified. Ms M's social care worker found it difficult to justify withdrawing night care without objective evidence that it was no longer needed.

#### Intervention

A 'just checking' monitoring device was installed in Ms M's flat for 3 weeks to establish her night time routine. This was to gather objective information and evidence so an informed decision could be made regarding her future care needs.

## **Outcome**

- Charts showed that Ms M was very settled at night and occasionally went out to the bathroom, but no evidence of any carer involvement.
- Sleep-in carer withdrawn following confirmation that Ms M could call the care agency during the night should she need re-assurance or assistance.
- Ms M became more self-confident. This was a factor in her gradually regaining her independence, leading to a reduction of her care package.
- Ms M's mother reassured and accepted withdrawal of night support.

### **Cost Savings**

From the withdrawal of sleep-in carers this saved between £33.60 and £48 per night.













# Case Study – 6

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## **Overview**

Mrs C is a lady in her 80's with dementia. She was discharged from hospital following a UTI and returned home. She needed to have a bed downstairs due to poor mobility. Mrs C's husband is frail and has health problems of his own, needing oxygen at night. Mr C was concerned he wouldn't be able to cope looking after his wife. He was also worried that she may fall when trying to get out of bed and that he wouldn't know what she was doing during the night whilst he was sleeping upstairs.

### Intervention

A **movement sensor** was provided and placed on the floor beside Mrs C's bed downstairs, including a **vibrating alarm pager**. Both of these provisions would alert Mr C as soon as his wife was sitting on the edge of the bed. Mr C kept the pager in his pocket during the day and on his bedside cabinet at night.

Provision of a **mini CCTV camera** was set up unobtrusively and angled so it could focus on Mrs C when she was in bed. Mr C had a small handheld **night vision monitor** that enabled him to see his wife from his bed upstairs. It also had a microphone that could be switched on to hear any sound. This helped Mr C decide whether he needed to go down to attend to his wife or not.

### **Key benefits**

- Risk of falls greatly reduced
- Peace of mind, re-assurance and feeling of relief for carer
- Mr C was able to conserve his energy, reducing the impact on his own health condition.

### **Cost savings**

- Potential hospital admission and consequential social care costs avoided due to these preventative measures
- Necessity for respite care reduced as carer supported to avoid a crisis developing.













# Case Study - 11

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## **Overview**

Mrs D lives alone in a sheltered housing bungalow and has a diagnosis of dementia.

Mrs D was forgetting to take her medication and her family were visiting daily to support her with taking her medication. Mrs D had no orientation of day and night and was ringing her family during the night.

## <u>Intervention</u>

Provision of:

- •a **Pivotell medication dispenser** which enables Mrs D to take her medication independently
- •a calendar clock to help her with her orientation of day, date and time
- •a day/night clock, which was placed in her bedroom to help her recognise whether it was day or night before she telephoned her family.

#### **Outcome**

- Pivotell medication dispenser Mrs D's family are filling the dispenser once a week and are confident she is taking her prescribed medication. Mrs D is happy that she is independent with her medication.
- Day/night clock Mrs D's family have reported that she is no longer telephoning them during the night.
- Calendar clock Mrs D now has orientation of day, date and time.

## **Savings**

Over £70 per week, which is equivalent to more than £3,600 per year through preventing a care package of 3 calls per day x 7 days a week.













# Case Study – 15

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## **Overview**

Miss T has a learning disability and epilepsy. She may experience severe tonic-clonic seizures during the night. She has just moved to a supported living home and receives 24 hour care, with an awake-night carer in the adjacent room.

## **Intervention**

Provision of an **epilepsy sensor** placed under Miss T's bed mattress that alerts the carer through a **carer's pager**, if she has a tonic-clonic seizure.

### **Outcome**

 Carer is notified via the pager when Miss T is starting to have a seizure so the carer can respond quickly and appropriately to administer medication if necessary, preventing the need to call the emergency services.

### Savings

- Prevention of hospital admission.
- Potential reduction of care package through changing from an awake-night carer, to a sleep-in carer.













# Case Study – 16

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## **Overview**

Mrs S has dementia and has recently been discharged from hospital following a fall. Her husband is concerned that she may fall again without him knowing. She goes to bed early but has a tendency to get up again and forgets to use her walking aid. Mr S also worries that his wife may try to leave the property during the day without him being aware.

#### Intervention

- Movement sensor placed by the skirting board at the side of the bed. This senses when Mrs S' legs come over the side of the bed and sends an alert to the carer's pager. Consequently, Mr S can go immediately to the bedroom to supervise.
- Door contacts placed at front door to alert Mr S through carer's pager if the door has been opened by his wife.

#### **Outcome**

- Reduced risk of falls
- Reassurance and peace of mind for Mrs S' husband as the provisions are helping him to better cope with the ever increasing demands of his caring role
- Prevented the risk of Mrs S leaving property and getting lost.

## **Savings**

- Reducing the need for respite care
- Related costs following hospital admission avoided.

### **Comments from carer**

"It's made my life so much easier, I couldn't be without it."









