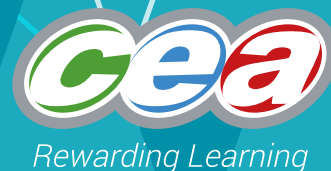


FACTFILE:

GCSE

HEALTH AND SOCIAL CARE

UNIT 2: WORKING IN THE HEALTH,
SOCIAL CARE AND EARLY YEARS SECTORS



Meeting the needs of service users with chronic illnesses

Learning Outcomes

Students should be able to:

- Identify the main service user groups in the health, social care and early years sectors:
 - children and families;
 - older people;
 - people with mental health difficulties;
 - people with learning disabilities;
 - people with physical disabilities;
 - people with chronic illnesses; and
 - people with dementia; and
- demonstrate knowledge and understanding of each service user groups' particular needs:
 - physical;
 - intellectual;
 - emotional; and
 - social.
- analyse how integrated health, social care and early years services meet service user groups' needs:
 - statutory sector
 - GP services;
 - hospitals;
 - social services;
 - day centres; and
 - nursery schools.
 - independent sector
 - care homes;
 - private day centres;
 - private practitioners;
 - crèches; and
 - voluntary organisations, for example, Action on Hearing Loss, Age NI, Marie Curie, Barnardo's, Mencap, Praxis, or RNIB; and
 - informal sector
 - partner;
 - family;
 - friends; and
 - neighbours; and
- evaluate the effectiveness of services in meeting the needs of service users.

Needs

All individuals have needs or essential requirements for their health and well-being. These can be classified as physical, intellectual, emotional and social needs.

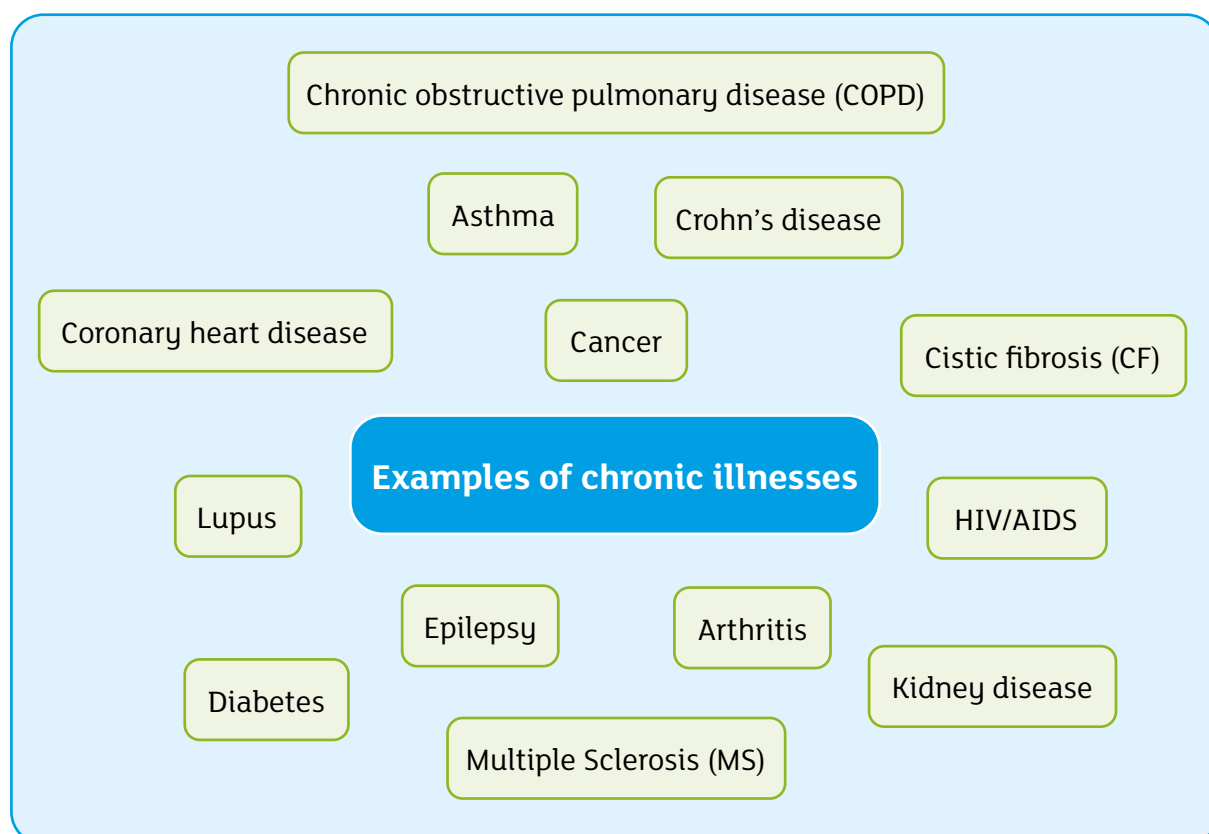
Physical needs	Intellectual needs	Emotional needs	Social needs
Nutrition	Stimulation	Sense of belonging	Contact with other people
Hygiene	Knowledge	Sense of control over one's life/sense of autonomy	Social interaction outside the family
Exercise/movement/mobility	Opportunities to learn	Feeling valued and cared for	Relationships with family and friends
Shelter/warmth/housing		Positive self-concept/need for self confidence	

Some of these needs are common to all individuals but as they pass through the life stages and experience life changes these needs may change. Most adults are able to meet some of their needs but other individuals have more specific needs and may require support from health, social care and early years services to meet these needs.

This Fact File focuses on the particular needs of service users with chronic illnesses.

Identifying and meeting the needs of service users with chronic illnesses

A chronic illness is an illness or condition which cannot be cured. The illness is usually lifelong, affecting the quality of life of the service user. A range of treatments may be used to manage the illness (Health in Wales 2015).



People with a chronic illness may have more specific needs and they may require support to meet these needs. This varies amongst individuals as having a chronic illness affects each individual differently. The main influencing factors are the type and severity of the illness. Consider an individual who has multiple sclerosis (MS). Some individuals may experience mild symptoms which are well controlled by treatment, whereas others may experience severe symptoms and the treatment given may not be effective. For example one individual may have relapsing remitting MS which means they experience distinct attacks of symptoms associated with the illness which then fade and may not recur for a period of time, enabling them to continue with their normal everyday life. Another individual may have secondary progressive MS which results in a sustained build-up of disability and the symptoms do not fade away and as a result they are unable to continue with their normal everyday life (MS Society 2014).

The needs of people with chronic illnesses

The tables below outline examples of the needs of people with chronic illnesses and why it may be difficult to meet these needs.

Physical needs

Nutrition	Individuals' ability to cook for themselves and to feed themselves may be affected; they may be unable to eat a normal diet as they may have difficulty swallowing or they may have to follow specific dietary advice to help manage their condition.
Mobility	The ability to walk and have the range of movements necessary to carry out everyday activities may be limited, for example to dress or to get in and out of bed.
Medical care	A range of medication and treatments may be necessary to ease and control the symptoms, reduce pain and slow the progression of the illness.
Personal hygiene	The ability to wash, bath or shower may be limited due to, for example, poor mobility, weakness or fatigue.
Exercise	Due to limited mobility or pain walking, taking part in leisure activities such as cycling or golf may not be possible.
Safety	The effects of the illness, perhaps limited mobility, may make individuals more prone to slips, trips and other hazards within their home and local environment.

Intellectual needs

Stimulation	Due to limited mobility, pain, side effects of treatment or fatigue, individuals may be unable to work, travel, continue with hobbies or take up new interests.
Knowledge of illness	Information about the illness, such as the short and long term effects, the treatment options available and the effects of the treatment, enable an individual to feel informed and more in control.
Opportunity to learn new activities	The effects of the illness may mean an individual may have to give up work or hobbies they enjoyed. This may mean the opportunity to learn new skills, which will keep the mind active and help prevent boredom, may be limited.

Emotional needs

Sense of autonomy	Whilst the illness may mean an individual is unable to carry out many everyday tasks without assistance, it is important individuals remain as independent as possible to retain their dignity and feel they still have control over their lives.
Sense of belonging	As a result of the illness, individuals may lose their sense of belonging especially if unable to continue in their job, go out with friends/family or attend social activities.
Feeling cared for	Someone to listen to worries and concerns about the illness is essential as the individual may feel frightened, anxious and uncertain about what the future holds.

Social needs

Communication	The illness may affect an individual's ability to communicate in their normal way, for example the ability to speak. If unable to communicate with others, individuals may feel frustrated, isolated, angry and unable to voice their opinions.
Social interaction outside the family	Due to the effects of the illness, an individual may miss out on opportunities to interact with others, for example at work, or may be unable to continue hobbies and leisure activities or take part in social activities.
Relationships with family and friends	It may be difficult to maintain existing or form new friendships as opportunities to meet others may be limited due to poor mobility, weakness, pain or sickness.

Activity

Watch the You Tube clips below on 'Living with MS' and make notes on the particular needs of Robert Walker who has the illness. You may complete the work in a table form using some of the needs identified above.

<https://www.youtube.com/watch?v=k4kXGGrK6bk>

https://www.youtube.com/watch?v=DgyIsLH_hvE

<https://www.youtube.com/watch?v=h19muxVqiOs>

Provision of integrated health, social care and of early years services

A wide range of services are available to help meet the needs of service users with a chronic illness. These services are provided by three main sectors.

Provision of integrated health and social care services for service users with chronic illness		
Statutory sector	Informal sector	Independent sector
<ul style="list-style-type: none"> • GP services • hospitals • social services • day centres 	<ul style="list-style-type: none"> • partner • family • friends • neighbours 	<p>Private</p> <ul style="list-style-type: none"> • care homes • day centres • practitioners <p>Voluntary organisations such as:</p> <ul style="list-style-type: none"> • Marie Curie • Cystic Fibrosis Trust • Diabetes UK • MS Society • Asthma Society • Northern Ireland Chest Heart and Stroke

- **The statutory sector** – these are services offered by the Health and Social Care Trusts and include both health and social services. They are provided through the government and are mainly free at the point of delivery but paid for indirectly through taxes and national insurance contributions. There are five main health and social care trusts in Northern Ireland which offer a range of services.

Activity

Find out which trust area you live in, select the relevant website from the list below, click on 'Our services' and 'our hospitals' and read about the wide range of services offered.

<http://www.belfasttrust.hscni.net/>

<http://www.northerntrust.hscni.net/>

<http://www.setrust.hscni.net/>

<http://www.southerntrust.hscni.net/>

<http://www.westerntrust.hscni.net/>

- **The independent sector** includes both private and voluntary services.

Private services are usually run by as a business by an individual or an organisation. They charge for their services and aim to make a profit. Examples of such services include private care homes, private day centres and private health care practitioners, for example physiotherapists, podiatrists, dentists and doctors who work in private practices and charge for their services. Other examples include private practitioners who offer complementary therapies such as reflexology, acupuncture or aromatherapy.

Activity

- Find out what services are offered for service users with chronic illnesses by the private sector in your local area.
- Access the website of a private care home and list the services they offer to service users with chronic illnesses. Try and find out the weekly cost for residents to live there.

Voluntary organisations are run on a non-profit making basis and many depend on donations and other fund raising events to cover their costs. Whilst they usually have some paid staff many depend on volunteers to deliver their services. Voluntary organisations usually focus on providing services and support for one particular illness or condition, for example, cancer or diabetes.

Activity

Divide into groups, access one of the websites below and make notes on how the organisation supports service users. Share your findings with the class group.

<https://www.cysticfibrosis.org.uk/>

<https://www.mssociety.org.uk/about-us/what-we-do>

https://www.diabetes.org.uk/How_we_help/

<https://www.asthma.org.uk/advice/>

<https://www.mariecurie.org.uk/who/what-we-do>

<https://nichs.org.uk/how-we-can-support-you/>

- **The informal sector** is support and care given by family members, partners, friends and neighbours. They provide care and support in a range of ways, for example, cooking meals, doing household chores, helping with washing and dressing, taking individuals to appointments or social activities, keeping them company if they are lonely or listening to their worries.

- Do you know anyone who provides care and support to a family member or neighbour who has a chronic illness? What do they do?

How integrated health and social care services meet the needs of service users with chronic illnesses

A wide range of support and care is provided to help meet the needs of this service user group. Some examples are outlined in the tables below and you can add other examples.

Physical needs

Nutrition	<ul style="list-style-type: none"> • provision of meals in care homes and day centres • provision of home care workers provided by social services or the private sector who prepare simple meals or heat pre-prepared meals • assistance with feeding provided in care homes and by home care workers • provision of aids to enable service users to prepare and eat meals by the occupational therapists (OTs) in hospitals and the community • assistance from the informal sector-friends, family members and neighbours who may shop for food or prepare meals
Mobility	<ul style="list-style-type: none"> • provision of adaptations such as handrails or grab rails by OTs in hospitals and in the community • provision of aids such as walking sticks or rollator frames by OTs in hospitals and in the community • provision of exercise programmes to improve mobility by physiotherapists in hospitals, the community, and in private practices
Medical care	<ul style="list-style-type: none"> • provision of a range of medication to treat and manage the condition mainly by GPs and hospitals but also by some private practitioners • provision of treatments such as surgery, dialysis and chemotherapy mainly provided by hospitals • provision of palliative care by hospitals and voluntary organisations such as Marie Curie and MacMillan Cancer
Personal hygiene	<ul style="list-style-type: none"> • assistance with washing, bathing or showering provided by home care workers through social services or by the private sector • provision of adaptations such as replacing a bath with a walk-in shower, and shower seat by OTs in hospitals and in the community • assistance with washing, bathing or showering provided in care homes and by family members
Exercise	<ul style="list-style-type: none"> • provision of a range of alternative exercises, for example armchair aerobics, yoga, and gentle walking provided by care homes, day centres and some voluntary organisations
Safety	<ul style="list-style-type: none"> • provision of 24 hour care in care homes • provision of aids and adaptations in service users' homes by OTs to reduce the risk of accidents • assistance from family members who may check that the living environment is safe or stay overnight

Intellectual needs

Stimulation	<ul style="list-style-type: none"> • provision of a range of suitable reading materials and daily newspapers in care homes, day centres and hospitals • provision of daily newspapers by family and friends • access to television and radio in hospitals and day centres to keep up to date with current affairs • provision of board games etc. in day centres, care homes and service user's own home
Knowledge of illness	<ul style="list-style-type: none"> • provision of information about the illness by voluntary organisations in leaflet form or on the organisation's website • provision of information in leaflets and booklets available in GPs and hospitals • discussion with the practitioners involved in caring for the service user focusing on the condition, treatments etc.
Opportunity to learn new skills	<ul style="list-style-type: none"> • provision of a range of activities in day centres and care homes, for example, flower arranging, cookery sessions and talks by local historians • provision of activities by voluntary sector organisations • family, friends and neighbours providing transport or accompanying service users to night classes, for example in art or ICT

Emotional needs

Sense of autonomy	<ul style="list-style-type: none"> • provision of home care workers by social services to provide support to enable service users to remain in their own home • support from family, friends and neighbours to enable service users to undertake everyday activities in their own home • provision of aids and adaptations by OTs to enable service users to undertake everyday activities and retain independence • carers and practitioners listening and taking into account the service users' wishes and involving them in decisions about their care
Sense of belonging	<ul style="list-style-type: none"> • provision of support groups mainly by the voluntary sector • encouraging service users to take part in activities organised in care homes and day centres • family members making the service user feel valued and involving them in family celebrations, for example birthdays and weddings
Feeling cared for	<ul style="list-style-type: none"> • provision of support groups, helplines and counselling mainly by voluntary organisations • provision of specialist medical practitioners in hospitals • support from family, friends and neighbours who may have more time to listen to a service user's worries and concerns

Social needs

Communication	<ul style="list-style-type: none"> • provision of communication aids by the speech and language department in hospitals • through the use of advocates who will speak on behalf of the service user. An advocate may be a family member, a health or social care practitioner or a representative from a voluntary organisation
Social interaction outside the family	<ul style="list-style-type: none"> • provision of support groups by voluntary organisations • provision of a range of activities in day centres • by family, friends and neighbours accompanying or providing transport to community events
Relationships with family and friends	<ul style="list-style-type: none"> • provision of a range of group activities in care homes and day centres • through open visiting in care homes and hospices and visiting hours in hospitals • provision of support groups and activities, for example lunch clubs by voluntary organisations • by family, friends and partners encouraging service users to keep in touch with friends by providing transport accompanying them on visits, or to social activities and using, for example, Skype or Facetime

Activity

Watch the following You Tube clips 'A Day in the Life of a Cystic Fibrosis Patient' on <https://www.youtube.com/watch?v=qmzvCnt5cHA> and Living with Cancer –Michelle's Story on <https://www.youtube.com/watch?v=GbRsl3S6aAs>

Identify the needs of each service user and describe how they could be met by health and social services.

Evaluate the effectiveness of services in meeting the needs of service users

Activity

- (a) Choose any service from the statutory or independent sector that helps meet the needs of service users with chronic illnesses.

Complete the table below to identify the needs this service helps to meet and explain how it does this. Note: the service may not meet all four types of need.

Name of service

Type of need	Needs	How this service helps to meet this need
Physical		
Intellectual		
Emotional		
Social		

Your table shows you how the service helps to meet needs, but you now need to evaluate how effective the service is in doing so. To evaluate means to weigh up how well the service meets the needs.

Things you may consider:

- Which needs do you think this service meets particularly well and why?
- Are there any needs the service could do more to meet or that it does not meet at all?
- What are the barriers to the service meeting needs effectively? You could consider some of the barriers to accessing services listed in the next part of the unit specification, for example, lack of resources.

(b) Evaluate the effectiveness of the informal sector by considering the following case study:

John, aged 64, has arthritis and finds it difficult to move around his home and carry out everyday living activities. He lives alone and often feels lonely. Willie and Jane live next door to John and call in every day to offer help and support.

- Which of John's needs can Willie and Jane contribute to meeting?
- Evaluate how effective Willie and Jane might be in meeting John's needs.

References

Health in Wales (2015) Chronic Conditions available on
<http://www.wales.nhs.uk/healthtopics/conditions/chronicconditions>

MS Society: Types of MS available at
<https://www.mssociety.org.uk/what-is-ms/types-of-ms>

<http://www.belfasttrust.hscni.net/>

<http://www.northerntrust.hscni.net/>

<http://www.setrust.hscni.net/>

<http://www.southerntrust.hscni.net/>

<http://www.westerntrust.hscni.net/>

<https://www.cysticfibrosis.org.uk>

https://www.diabetes.org.uk/How_we_help/

<https://www.mssociety.org.uk/about-us/what-we-do>

<https://www.asthma.org.uk/advice/>

<https://www.mariecurie.org.uk/who/what-we-do>

<https://nichs.org.uk/how-we-can-support-you/>

