



CASE SCENARIOS

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on behalf of LGA and ADASS 2019.

A whistleblower reports that on the ward for older people with dementia there are staff working there who have had no specialist dementia care training. Staff rarely receive professional supervision and they are often understaffed.

The whistleblower said they had reported their concerns to management but there has been no change. She has continued to work there as a health care assistant.

Yesterday she heard a nurse advise another nurse to give a patient an extra dose of medication, which was not written up, to keep him quiet for the night and that she would sign it off. Even the consultant on the ward had been overheard saying how awful this ward is.

Mohammed is 65 years old and homeless. He has been homeless for 2 years and sleeps rough. He has recently had 3 separate admissions to hospital by ambulance, due to his heart condition and leg ulcers. He has an alcohol addiction and seems unaware of his health problems.

He has been the repeat victim of bullying and harassment in the community and he is often targeted by young people.

Nadya has had a fall at home. She is a carer for her husband who has dementia. Her GP is concerned that she is not coping at home, due to her arthritis and she is finding it difficult to care for her husband on her own. She has no family who can help her with the caring responsibilities.

She has sustained some minor bruising to her legs following the fall, but the GP has advised that she should try and rest up for a couple of days.

Mr Allen is 23 years old, and has a diagnosis of severe depression and suicidal tendencies. This is managed through medication and the support of his community mental health nurse. Mr Allen has been sectioned twice in the last three years when he has attempted to kill himself.

He is a gifted artist and attends a community service for marginalised artists twice a week to paint and socialise. Mr Allen has informed his worker at the arts centre, that he was recently assaulted by a man called Kevin, who Mr Allen apparently owes money to. Mr Allen said an argument broke out between the two men and he was hit on the side of the head.

Frank is a patient in an acute hospital ward and is being treated following a stroke. The speech therapist advises nil by mouth as she is worried about his swallowing and risk of choking. She is called to a patient on another ward and only has time to give a verbal handover to the nurse in charge before leaving. She would normally write in the notes and put a caution on the computer system. Frank drinks some water from a beaker and aspirates.

Mary is a 81 year old resident in a care home. She was found on the floor by her chair at approximately 22:40 hours by care staff and examined by the nurse in charge. No injuries were apparent, no pain or discomfort was voiced, no evidence of nonverbal signs of discomfort or pain observed. Mary did not present as being distressed by the incident. She was able to move her limbs independently and she denied hitting her head. There was no evidence of this found on examination. She is known to be at high risk of falls and has had 4 falls in the last 2 months. The care plan says that all staff are to be aware of Mary's whereabouts at all times and to monitor closely.

Julie is 35. She lives with her husband of 10 years. They have no children. She goes to see her GP and tells the GP she is depressed and anxious and would like some medication to help. She confides in the GP that her husband refuses to give her any money and won't allow her friends to visit or for her to leave the house. Julie appears to be suffering with low moods and speaks of an increased dependence on alcohol.

The GP prescribes anti-depressants and a referral to talking therapies. Julie agrees for the referral to be made. The psychological therapist is also concerned about Julie's welfare.