

## Care experience journey

## The views of person receiving care








Janet is a 79 year old lady who lives on her own in a rural part of Scotland. She is a retired social worker and has been receiving care for the past four years because of a leg ulcer.


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	I got home then. The district nurses came that afternoon just to see that I was ok.			
	I was looking forward to coming home, a wee bit in repitadion for being away for a while, but I felt it was the right time.	I've got a very good friend, he lives over the road and he cuts my grass now, I used to cut it myself until I went to hospital. He lifts the pots for me too and I plant them, I like to do things my own way .{laughs}	The other advantage of living in a small place like this is I knew the girls that were coming in, so it became more a social thing. It was nice to seem them, and they were pleased to see me to.	
	The nurse in charge was the one that said "we'll put in place a package before you go home" to see if I was going to manage everything in the house. She did most of the arranging, well in consultation with occupational therapist and physiotherapist and such like. She [nurse in charge] said I wasn't going home until she was satisfied that these things were in place for me.	It was a mutual thing, they saw that I was ok and the district nurse agreed and I was quite happy about that. I said to the girls 'you've got more to do than to come here' and they knew themselves.. cos my niece came up and did like the housework and my washin' an' that.	Health support workers in the hospital and one girl in particular she was as good as any nurse, she was very efficient. She remembered things. She never forgot when she came on duty to ask if I'd got my energy drinks... she new what nurse 'A' had done on Monday and told this to nurse 'B' on a Wednesday.. small things that made up big things... she was a born nurse...if she had five minutes, she'd come for a wee blether...she just....cared.	I think the nurses are wonderful. It's the nurses that are keeping up the health service...and the students... I had a wonderful young girl, she was an absolute gem, I feel that there's an awful lot taken out on student nurses. Onus is put on them when they're not even earning a wage. She was working half past eight in the morning till half past eight at night and she wasn't getting paid for it. She was coming in to see me on her own an' that. She was a wonderful example of what the national health service needs.
	The hospital in [a town] is wonderful, it really is. It's bright, it's clean its got a very cheery atmosphere and the nurses were very good, everyone of them was caring.	I've got a wonderful neighbour over there that came over with soup the first day or so and has come with soup ever since, we try recipes now, and she's been wonderful she really is.	I can honestly say I have had excellent care from the nurses, I have never seen a doctor. They've all been so good and a pleasure to come into the house and I could never say anything other than that	I look forward to seeing them when they come, because as I say they're all pleasant. But again maybe it's different here because we are a small community.
The moment I got into the hospital I felt completely at ease and I had complete faith in all that they were doing.	As I said the consultant in [place name] (he was a Welshman) was the most lovely man you could ever meet. He was really so kind and attentive. He even came to see me in [hospital name] just to see that I was there.	It's nice to know that they look at you as person in your own right, not just as a bit of patient sitting there, you know...it's a mutual thing	In a place like this we're lucky cos it's the same folk that's delivering the service and it's the same with the district nurses an' that, ye know. It's somebodies granny or it's somebodies grandpa' that they're going to see	If I needed any additional help I'd probably contact one of the district nurses cos' they're my contact out' or the carer girls (and boys) , they always say, ye know, 'now any worries you have, phone us up, we're here'
A nurse came with me from the hospital when I came home in the ambulance which was very good we had a cup of tea then the district nurse came in the afternoon to tell me what they would be doing in the future.	Kate and another girl that I knew, cos she was local, came in and said to me what they were going to be doing... What the routine was going to be and at that time it was more intense, you know.	They always treated you with great respect. They would always say we're going to try this or try that, they would always consult you.	I think here we are lucky in that there is a consistency of who comes to folk	Even the Doctors, once you talk to them you can find out they've got a sense of humour. {laughs}
First referred to the service Discharge from hospital	Initial assessment of care Returning home	Planning of continued care Care providers find out what is important to deliver in first visits	Delivery of Care Regular visits to persons home	Present Day Reviewing care
If you have to speak to someone over a telephone and you know nothing medically, and you're nervous... you can't give a proper explanation of what's wrong with you. A lot of people worry very much about that, and I 'm not someone who can't speak for myself!	I think what worries people in this area more than anything else, especially elderly people is the Drs don't come out ...and the phoning consultation... and the job they have seeing a doctor nowadays. I don't know what they'd do without nurses, they do so much.	They came in the morning to give me my breakfast [carers] but I'd already had it, cos I was able to do that even with a zimmer.	I had a neighbour over there, of 95 and when he came out of hospital he asked the girl her name she said 'there's no point me telling you my name, I might never see you again'. Now that must be disconcerting for old folk, but it was shattering to him because he thought he was making a {stops}... now that was a while ago but I always remember his daughter telling me that and he had been a carer for twenty years with his wife for dementia, but it's the system an' that and our cities now are quite different.	What I find so very sad is they've closed so many residential homes for people. Now if you've lived all your life here and you're eighty eight and your family are here, and they've got to travel a hundred miles tae see ye, I find that terrible sad.
The social worker came to see me in the hospital and said 'do you want someone to come in, in the middle of the night to see if you're all right?' I said... ' I cannot think of anything more frightening or disturbing, I said when I go to my bed I go to sleep! but he probably didn't appreciate that I was quite as capable'.	I love my garden, that was my biggest thing when I couldn't get out to my garden, and I was beginning to get...well...{stopped}	Sometimes I would leave my bed just not made, just to leave them something to do.	There was quite a lot of turn over of different ones doing shifts as well as the permanent ones, but I can honestly say there wasn't one I dreaded coming in.	Some day I fear there'll be a mis-diagnosis over a telephone that'll be tragic. You can't diagnose something over a phone.
They're frightened they don't get the right diagnosis and it ends up they don't get in touch with the doctor cos they think "well, we'll not see a doctor anyhow!" ... I know a lot of people worry about that.	They just observed what I did, ye know.		I can't remember what you call them.. Health workers? The ones that aren't trained nurses [HCSWs] they were coming more, as my legs got better.	They don't get much time [carers] only quarter of an hour, what can you do in that time? They're only limited in what they can do.
Well they called it a 'package' (I kept hearing about this package) but it's just the carers coming in for you three or four times a day.			That was the one thing, you didn't really know when they'd be coming again, sometimes half past twelve, sometimes half past one [carers] but they can't be at everyone at eight in the morning.	There's nothing worse than sitting in silence. It's like sitting your driving test. I remember when I sat mine and he started to talk to me and that's when my nerves got awright ...and I was fine.
I was getting less well and I didn't know I was getting unwell and probably a little feared of the unknown.			It depends who's on duty if they're short staffed and the like.	

**There are five principles of Neighbourhood Care in Scotland and these are:**

-  Putting the person at the centre of integrated holistic care and own care promoting wellbeing and independence.
-  Building relationships with people to make informed decisions about their own care.
-  Enabling person-centred care at the point of delivery.
-  Small self-organising, geographical-based teams.
-  Professional autonomy.

Discuss where the diamonds  are placed on the patient journey, on the other side of this paper.

- a) What principle does each diamond represent?
- b) What other examples do you have in working to these principles?
- c) How can we align our work more to these principles?

Notes:

## Ideas for quick discussion points

Well they called it a 'package' (I kept hearing about this package) but it's just the carers coming in for you three or four times a day.



Q: How best can we communicate a 'package of care to people?

Q: Who should discuss this with the person?/When?

I love my garden, that was my biggest thing when I couldn't get out to my garden, and I was beginning to get...well...{stopped}



Q: How can we find out what REALLY matters to the people we care for?

Q: In what ways can we support them?

They came in the morning to give me my breakfast [carers] but I'd already had it, cos I was able to do that even with a zimmer.



Q: What would be the ideal solution to this issue?

There was quite a lot of turnover of different ones doing shifts as well as the permanent ones, but I can honestly say there wasn't one I dreaded coming in.



Q: How can continuity of care be improved?

What I find so very sad is they've closed so many residential homes for people. Now if you've lived all your life here and you're eighty eight and your family are here, and they've got to travel a hundred miles tae see ye, I find that terrible sad.



Q: How can technology help?

Q: How can different models of care help?

Health support workers in the hospital and one girl in particular she was as good as any nurse, she was very efficient. She remembered things. She never forgot when she came on duty to ask if I'd got my energy drinks... she new what nurse 'A' had done on Monday and told this to nurse 'B' on a Wednesday.. small things that made up big things... she was a born nurse...if she had five minutes, she'd come for a wee blether...she just....cared.



Q: This person has left a lasting impression. What do you think she means by "just cared"?