

Patient story donated by: Assistant Divisional Nurse Director/Governance Lead for Integrated Community Services Division, Bolton FT

Background - For the purpose of this story I will refer to the patient as Bill who is a 75 years old, retired teacher. He had a traumatic head injury approx. 30 years ago resulting in epilepsy. Bill does find it difficult at times to process information and he struggles with word finding. He has lived a reclusive lifestyle for in excess of 35 years. Bill will admit himself he has done very little in the house since he bought it 41 years ago and he admits his house is cluttered and very untidy. Bill has had no means of washing his clothes and had been struggling to wash himself also. Bill was unkempt with long hair, beard, overgrown finger/toe nails and three layers of clothes on that looked like that had been on for a considerable amount of time. Bill had awareness into his living condition and he reported that he would only go out late at night as he was embarrassed about how he looked.

Bill had fallen in the snow, returning a plate to his neighbours and he went into A&E. He saw the Home first team, who referred Bill to the Admissions Avoidance Team to assess for a package of care; due to his decreased mobility and pain. The Admissions Avoidance Team referred to the Intermediate Care at Home Team.

Bill was assessed on initial assessment by a Physiotherapist, an Occupational Therapist (OT) and OT student. Pain and decreased mobility, was Bill's main concerns however Bill did have an awareness of lack of personal care and his living condition. This saying he had declined further therapy support but did accept equipment - perching stool and toilet frame. During the initial assessment, therapy staff was very concerned about Bills living conditions and lack of support and they contacted the Admissions Avoidance Team who reported he had refused support. Bill reported a sore/itchy back, on examination bill had an extensive red rash over his back.

As Bill accepted equipment, a second visit was arranged and the nurse was asked to visit with the OT in the hope Bill consented to letting the nurse examine his back. The OT and Nurse discussed with Bill in depth that personal hygiene and clean clothes would help with his rash. They had a long discussion with Bill about possible different services that could help in lots of different areas. Bill seemed to be surprised at the possible help he could get and he agreed to assistance with personal hygiene needs and some decluttering by the OT and Nurse

This was arranged and a visit prior to that was made to try to identify some clean clothes and equipment. Some equipment, that was needed, was donated by staff in the team and Bill was eager to have a haircut and a shave arranged. The OT and nurse assisted with a wash, change of clothes and application of cream.

Sadly, Bill developed a bleed which did not stop and he was admitted to hospital for a few days. This meant that the Reablement Team became involved and after discussing with Bill what help was available, he agreed to the Meals on Wheels service three times per week. As Bill built up a relationship/confidence with the multi-disciplinary staff giving him support, he became keen to make changes so the Reablement staff worked with Bill and began decluttering and cleaning. Bill was very open to this and was happy with the results, even giving them money to buy a Hoover and talking about purchasing, microwave, fridge and washing machine. His neighbours also helped him with washing, filling a skip and providing hot meals.

Bill agreed to therapy to improve his mobility and has received regular visits to complete exercises to work on his strength and balance and is now steadier walking indoors and outdoors.

He received treatment for the rash to his back and redness to lower legs and the nurse discussed with Bill, Bolton Council helping with adjustments to the house. She met with the Care and Repair Team, at Bill's home, and they are supporting Bill to get central heating and a possible wet room downstairs.

Bill is now in a happier place, he has an infectious smile and a great sense of humour. When we first met Bill he was a virtual recluse, who was apprehensive and didn't want any intervention. He reported he didn't like visitors and was happy to be on his own. He now says 'you're not going are you?' His environment has been decluttered and cleaned. He is steadier, mobilised and the falls hazards around the house have been reduced. The Care and Repair Team will support Bill with central heating installation and a wet room will enable Bill to live on one level with better facilities that meet his needs.

He no longer requires the daily support from the Reablement Team however a social Worker has been allocated to support longer term needs and provision of benefits. This intervention has set Bill on a different path to how he was living. He has opened up to professionals and making a change to his life. It is hoped Bill will continue to look after himself better and make more changes for further improved outcomes.

Bill was so thankful with the help he was receiving from everyone.