

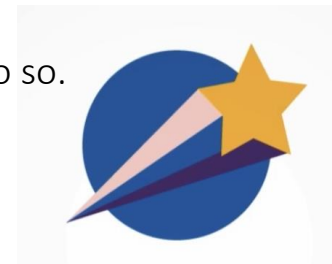
Enhanced Care for Older People
Learning Session Number 19
How Old is too Old ? : A Case Study in Shared Decision Making
Vicky Johnston
First Contact Physiotherapist (Frailty)
Copeland PCN, North Cumbria

EnCOP
Enhanced Care for Older People

EnCOP Lead: Lynne Shaw Date: Tuesday 13th June 2023 1.30pm – 3pm

Housekeeping

- Please ensure microphones are muted and during presentation cameras are turned off.
- The event will be recorded and shared.
- The webinar recording and presentation will be circulated and uploaded on to the website following the event.
- If you have any questions during the session then please use the chat facility. We will attempt to address questions, if we can't then we will follow up after the event.
- Please also use the chat facility to inform us of any technical issues as this will be monitored closely throughout by one of the EnCOP team.
- Occasionally you may have difficulty seeing or hearing video clips that are played, this will usually be due to your own device or software settings and not something we can influence during the webinar session. Please be assured all content will be shared following the event so you will have an opportunity to view afterwards.
- If you need to take a break at any time throughout the session please feel free to do so.



Session Aim & Linked Competencies

Aim: To highlight ageing , perceptions of ageing and promote shared decision-making approaches to assessment and care and support which enhance care for ALL older people

Domain A: Values, Attitudes and Ethical Practice

Domain B: Evidence Based Care : Supporting learning, leadership and improving care for older people

Domain C1: Partnership working and communication with older people, families and others

Domain C2: Interprofessional and interorganisational working , communication and collaboration

Domain D1: Ageing Well: Understanding Frailty : Prevention , recognition and identification

Domain D2: Ageing Well: Assessing , planning, implementing and evaluating care and support with older people

Domain D3: Ageing Well: Promoting and supporting independence, autonomy & community connectivity for older people

Domain D4: Ageing Well: Promoting and supporting holistic physical health and wellbeing with older people

Domain D5: Ageing Well: Promoting and supporting holistic psychological health and wellbeing with older people

Domain D6: Ageing Well: Promoting and supporting older people with medicines optimisation

Linked EnCOP Domains:



How old is too old?

How shared decision making will enhance care even with the oldest old

Vicky Johnston, Physiotherapist, Copeland PCN

Where I work, and the role I do



- Physiotherapist specialising in frailty
- Copeland PCN
- Rural!
- Social isolation, affluent and areas of deprivation
- Pop approx. 61K
- 22% aged > 65
- > 6000 aged 75+
- > 2000 people living with moderate or severe frailty

Aims of today:



- Discuss frailty and ageism in our society and healthcare
- Highlight how shared decision making can enhance the care for older people
- Illustrate this with a case study
- Show how a single/evolving case study can contribute to many domains in your EnCOP toolkit and competency achievement





<https://www.bbc.co.uk/news/entertainment-arts-36802484>



Credit: © Steve Meddle / Rex Features



<https://olympics.com/en/news/who-is-fauja-singh-oldest-indian-origin-british-marathon-runner>



Doddery but dear?

Centre for ageing better report, March 2020

- “Ageism is a combination of how we think about age (stereotypes), how we feel about age (prejudice) and how we behave in relation to age (discrimination). Not only can it affect how we think and feel about others we perceive as ‘old’ or ‘young’, it can also affect how we feel about our own ageing process”
- “Ageism has broad and far reaching negative consequences. It can have a negative impact on physical and mental health and it can influence whether older patients receive treatment, as well as the duration, frequency and appropriateness of that treatment”

Final word on ageism

- “Sharing stories and personal experiences that challenge common stereotypes can be an effective way of changing people’s perception of later life and showing that the ageing process is different for everyone”
- Centre for Ageing Better, (2021), Challenging Ageism
- [Challenging ageism: A guide to talking about ageing and older age | Centre for Ageing Better \(ageing-better.org.uk\)](#)

Shared decision making is

- Key component of universal personalised care
- Joint process in which a healthcare professional works together with a person to reach a decision about care.
- Involves choosing tests and treatments based both on evidence and on the person's individual preferences, beliefs and values.
- By paying attention to individuals' informed preferences we can support people to achieve outcomes that matter to them
- NICE guideline [NG197] Published: 17 June 2021
- FREE e-learning package of shared decision making [Your learning options \(personalisedcareinstitute.org.uk\)](https://personalisedcareinstitute.org.uk)

Case study: meet Mr Hodgson



Background

- Born in 1919
- Severe frailty – CFS 7
- PMH includes:
 - CKD 3
 - Heart failure 2008
 - Pulmonary fibrosis 2020
 - Bronchiectasis 2020
 - Aortic stenosis
 - IHD
 - Type 2 diabetes, on insulin
 - Vitamin D deficiency
 - Anaemia
 - Ileostomy 2016
 - Right knee replacement 1990's
 - PMR
 - Left Dupuytren's release
 - SCC ear and surgery 2021
 - Bilateral hip replacements
 - Cervical spondylosis 1987
 - Right hand contracture
 - Dizziness

Mr Hodgson as a person

- Lived through a lot of changes
- Stoker on railways
- Farming
- Parachute regiment
- War memories
- Lives alone in sheltered accommodation
- Son in care home
- Granddaughter and great granddaughter support

- Drives a car – proud to have his licence
- Cooking
- Likes privacy
- Values independence
- Vulnerable in some respects
- Walk short distances with rollator



When I first met Mr Hodgson

- Late 2021
- “Sky diving pensioner”
- Aiming to be oldest male sky diver
- A bit unsteady in his kitchen – housing scheme had replaced flooring
- Falls
- MSK physio and hand surgeon right hand 2020
- Dizziness since 2020
- Loss of hearing, blocked right ear
- Breathless, referral rejected community respiratory team
- Referral rejected by community heart failure team
- Painful left knee

- Exercises – Otago
- Right shoulder (to manage the rig)
- ENT – dizziness and unblock right ear
- Linked in with 3rd Sector – housing, equipment
- OT – wellbeing, apartment door
- Further falls – left knee giving way, stepping back from the door
- Housebound
- No progress with hand surgery - struggling with cooking
- **March 2022 – discussed knee replacement**



The knee situation

- Causing falls, limiting confidence and function
- Still keen to sky dive, but lots of limitations
- Orthopaedic triage
- Leg brace, caused blister
- **Reviewed by surgeon and offered TKR!** Urgent list – no sky dive
- Left knee replacement July 2022, aged 103 “I even peeped around the screen to have a look!”
- Shared decision making – Mr Hodgson, anaesthetist, surgeon, triage, family

Post op

- Rocky journey
- Home with 3 times a day reablement, rapidly reduced to 3 times a week
- OT and physio input – regained ability to walk to car, visit the farm and friends, drive, cooking, all clear from surgeon for sky dive, maybe a zip wire!
- Inhaler, right hand, managing insulin
- Hand surgeon review and surgery – walking aids, cooking

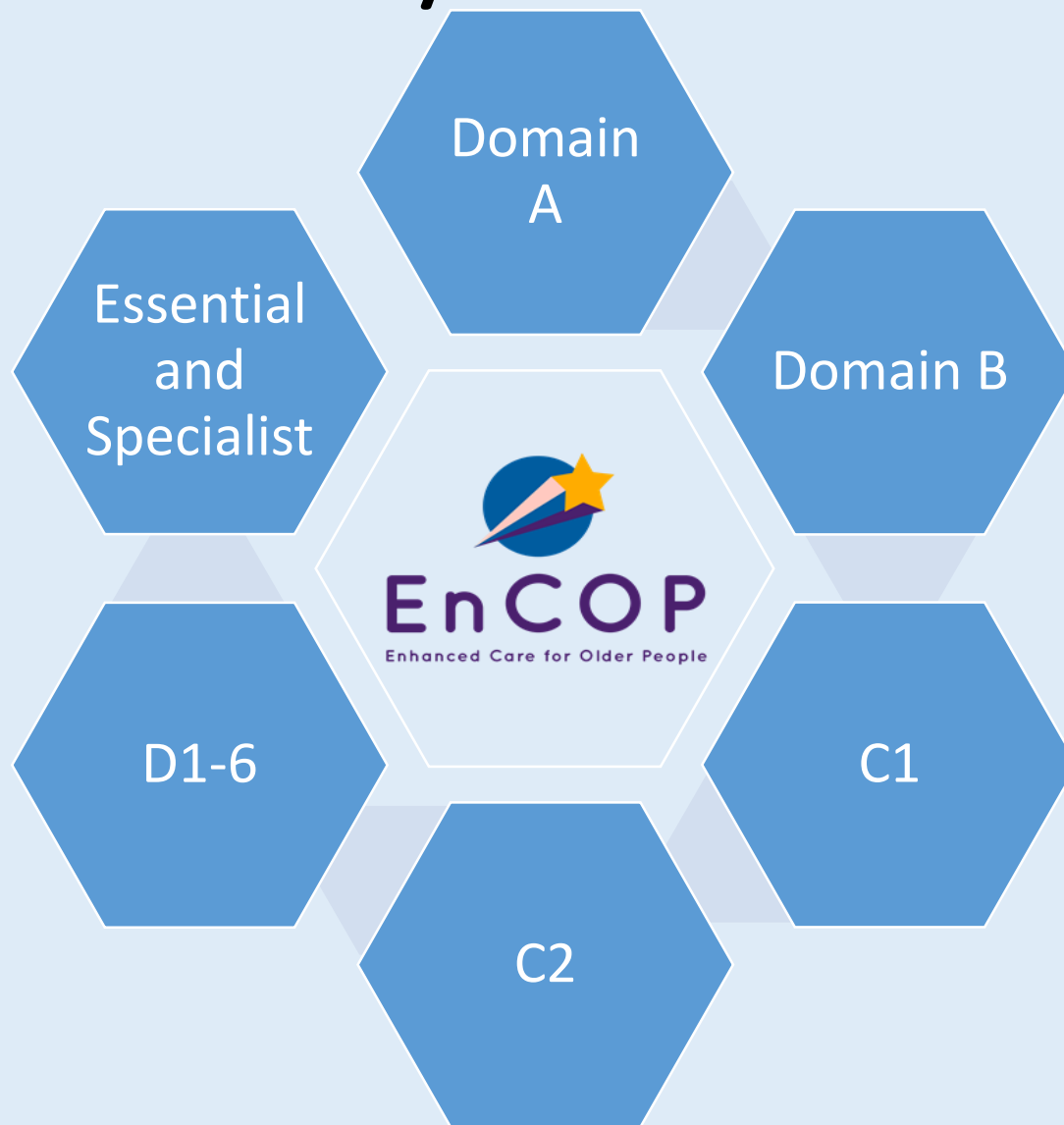
Was it worth it?

**You've no idea what it is to
be without pain, I can
move my legs**

Where is Mr Hodgson now?

- Finally lost his driving licence – eyesight.
- “I’ve only been done for speeding once since 1936!”
- Fractured right femur, currently recovering from surgery

EnCOP: 1 case study and 1 skilled CDF =



Thank you for listening

- Thank you to Mr Thomas Hodgson for allowing us to discuss his journey. He readily gave his permission if it helps others to learn and improve care for others. He is sorry he couldn't be with you today, but he's demonstrating his exercises to the physios in hospital with the aim of returning home!



Thanks





Ideas for Learning Consolidation & Competency Conclusion

Consolidating Learning:

Reflection on the session & considering application to practice & what this means 'your people'

- Think about this session in relation to your own role
- How much of this was revision?
- What have you learned today ?
- How will this help you in your role ?
- Think about your EnCOP self–assessment; consider which performance indicators this session may relate to and how this can be used as part of your own development / competency achievement.

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Enhanced Care for Older People Learning Session Number 20

A Story of Predatory Marriage



EnCOP

Enhanced Care for Older People



Tuesday 18th July 2023 1.30pm – 3pm

Feedback about today's session and any future sessions you may like to see included in our webinar series....

All feedback welcomed; You may want to consider the following –

Was it easy to book onto the session?

Did you find the session went well in this online format ?

Was the content of the session relevant to your area of practice / job role?

Did you enjoy the session?

Thinking about future webinar's, which topics linked to older person's care would you be most interested in?

Please put any suggestions in the chat.

Please comment in the chat today or feel free to email us: ghnt.encop@nhs.net





**More information can be found within
the Frailty icare website**

www.frailtyicare.org

Our EnCOP pages are located in the
workforce section

**EnCOP Library of Learning &
Development Resources can be found
at:**

<http://frailtyicare.org.uk/making-it-happen/workforce/enhanced-care-of-older-people-with-complex-needs-encop-competency-framework/encop-learning-resources/learning-resources/>

