

A Hard Day's Night

The carer strain experienced by the friends and family of older people with mental health problems.

Photos provided by Hannah Fox

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Summary

- Explain the purpose, methods and findings of the Medical Crisis in Older People – Better Mental Health Cohort Study.
- Discuss the health problems of patient participants.
- Describe the carer well-being in terms of strain, and psychological health during the patient participant's hospital admission.

The Medical Crisis in Older People – Better Mental Health Cohort Study

Aims:

To investigate the current prevalence of mental health problems of inpatients aged 70 and over admitted to general hospital and their psychiatric symptoms, behaviour and functional abilities.

To describe the carers of the patients and to establish their levels of strain, psychological health, and quality of life.

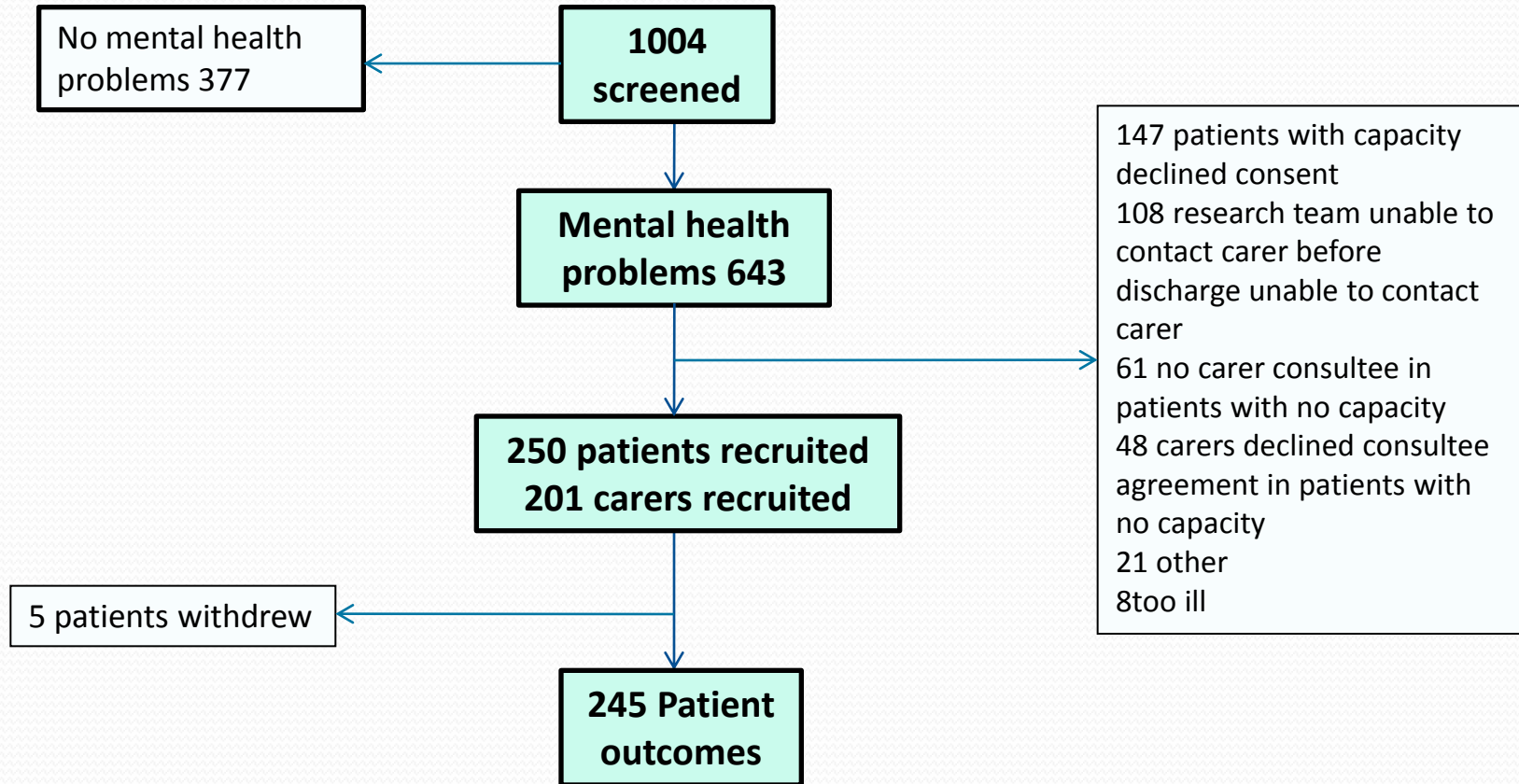
To provide information for the development of a specialist medical and mental health unit.



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Recruitment



Mental Health Problems of Patients

Mental Health Problems	Total n=250	Estimated prevalence for over 70
Cognitive Impairment	79%	50%
Depression	52%	32%
Delirium	43%	27%
Diagnosed dementia	43%	27%

Functional Problems of the Patient

	Cognitive Impairment	No Cognitive Impairment	Total n=250
Incontinence	53%	23%	47%
Help with Feeding	58%	13%	49%
Supervised walking	38%	25%	35%
Risk of Malnutrition	85%	63%	80%

Behavioural and Psychiatric Problems of Patients

	Cognitive Impairment	No Cognitive Impairment	Total n=250
Delusions	14%	6%	12%
Hallucinations	10%	8%	10%
Agitation/ Aggression	17%	2%	14%
Apathy	38%	15%	33%
Motor Behaviour	21%	4%	17%

What is a carer?

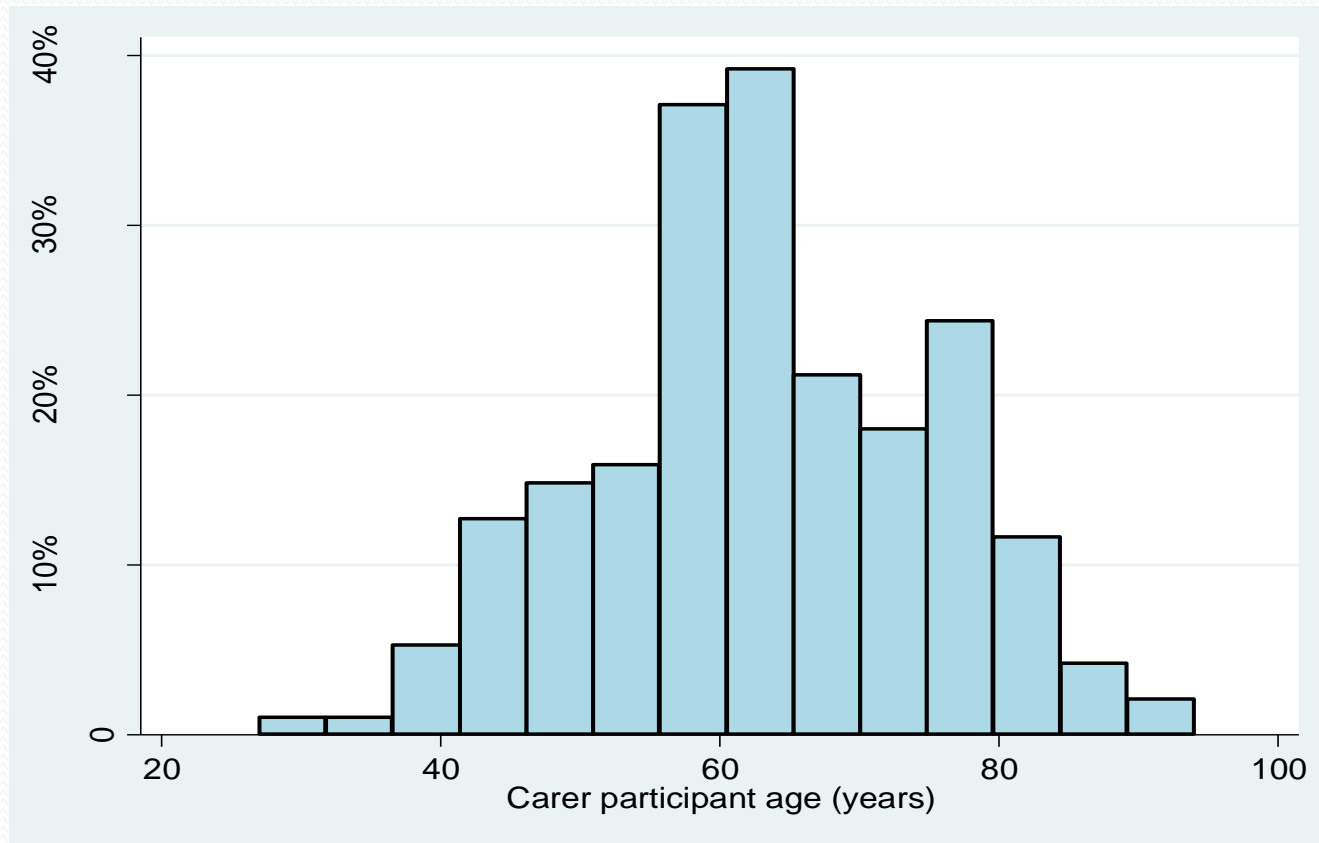
- A carer is a friend or family member who provides regular help and support to another adult who has a long-term physical or mental health problem or problems related to old age.



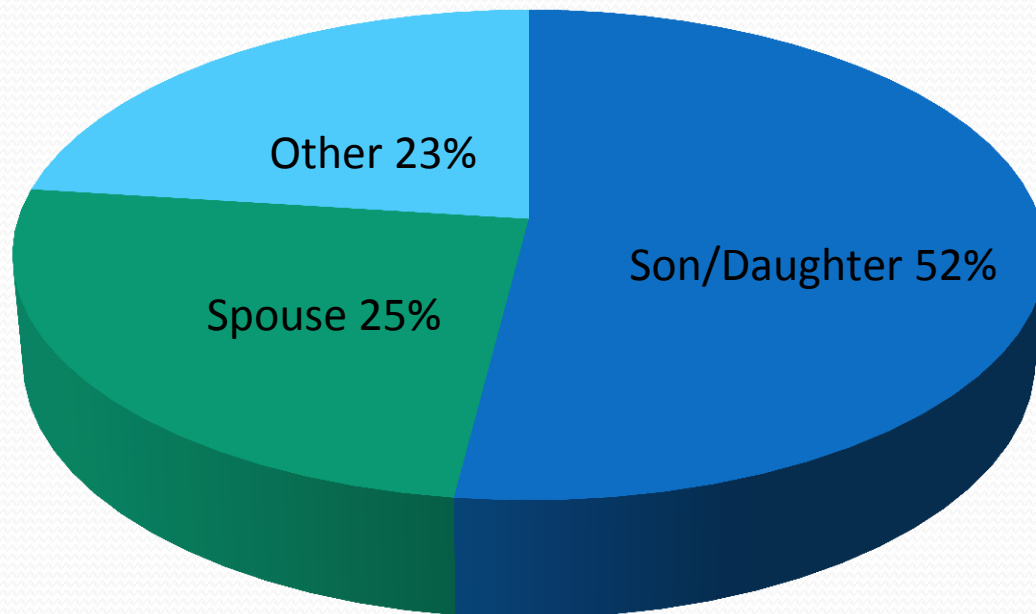
Baseline Measurements of Carers

- Age
- Relationship to the patient
- Hours of company given per day
- Hours of physical care per day
- Carer's strain
- Carer's general health

Ages of Carers



Relationship of Carer to Patient



Hours of Company Per Day

	Carer lives elsewhere to patient	Carer lives with patient	Patient lives in care home
Hours: median (range)	2 (0.3 - 4)	24 (14 - 24)	0 (0 - 0.6)



Hours of Physical Care Per Day

	Carer lives elsewhere to patient	Carer lives with patient	Patient lives in care home
Hours: median (range)	2 (0.3 - 4)	18 (4 - 24)	0 (0 - 0)



Carer Strain Index

	Carer lives elsewhere to patient	Carer lives with patient	Patient lives in care home	Total
Experiencing high levels of carer strain	37 (50%)	30 (49%)	11 (23%)	78 (42%)



Issues of Caring

	Total n=201
Caring is confining	56%
It is a physical strain	38%
Family adjustments	44%
Change in person is upsetting	67%
Feel overwhelmed	56%

Carer strain in an acute hospital setting

- Medical issues
- Uncertainty about the patient's prognosis
- Emotion disruption
- Routines disrupted
- Difficulty getting information from staff
- Staff not understanding dementia

What is being done?


Medical and Mental Health Unit (MMHU) – a specialist ward for older people with confusion.

- Additional specialist staff
- Additional training
- Involvement of mental health trust
- Person centred care
- Ward environment
- Provision of activities

Support for carers

- Inclusive, person centred care
- ‘About me’ and ‘Caring together’
- Proactive communication
- Relaxed approach to visiting times
- Sitting, mealtimes
- Respecting legal rights of carers in decision making

Name:
DOB:
S Number:

Nottingham University Hospitals 
NHS Trust
Caring Together

This form is for you, the relative/friend of a patient on our ward. We recognise that we need to work together with the people who know our patients best, to provide the best possible care for them. We also know that hospital admission can be a very stressful and difficult time for those who are carers. Filling in this form will help us understand how best to partner with you to provide the best care possible. Feel free to give as much information as you are able. It will be kept at the end of your relative/friend's bed.

Who is the person who knows your relative/friend the best?
Is this you?

How are you usually involved in caring for your relative/friend?

Are there any legal issues we should know about? (e.g. enduring power of attorney)

How would you like to be involved in you relative/friend's care whilst they are in hospital? (e.g. assisting with meals, helping them to wash and dress, night times)


Would you be happy for hospital staff to call you to provide support if necessary? (e.g. if your relative/friend became distressed, they asked for you)

During the day:

During the night:

Caring Together. B47 Draft 2011.

Name:
DOB:
S Number:

Nottingham University Hospitals 
NHS Trust
Caring Together

What is the best way to consult you about decisions regarding your relative/friend's care?

We have memory boxes above patient beds, so that bed areas look familiar to our patients, and to prompt conversation. Would you be able to bring in some personal items (e.g. photographs or mementos) for your relative/friend's memory box?

Would you be happy to bring in some day clothes for your relative/friend (labelled with their name)?

Would you be interested in accessing carers support or sharing your experiences and knowledge whilst your relative/friend is in hospital? (e.g. Alzheimer's Society support, Carers Federation coffee afternoon)

Please do complete the 'About Me' form, which provides us with more information about your relative/friend. Is there anything else you would like us to know?

This form has been completed by:

Relationship to patient:

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Name:

DOB:

Hospital / NHS Number:

About Me

There may be important things you want to tell ward staff about your relative/friend. Filling in this form will help staff to understand your loved one as a person, communicate with them better and help them to feel safe and secure while staying on the ward. Feel free to give as much information as you are able; the more we have the better. This information will be kept at the end of your relative/friend's bed for all members of the team to use.

I like to be called:

Significant people in my life are:

Family: Friends:

Husband/wife/partner: Pets:

Carers:

My life so far:

My childhood:

My work:

Holidays:

Significant places:

My interests / hobbies:

Things I like/dislike: (e.g. food and drink, music, activities)

Special requirements at meal times:

Draft about me April 2011

NameNHS number

Important aspects of my daily routine: (e.g. sleep patterns, how I take my medication)

Day:

Night:

How will I respond to stress: (e.g. become quiet, pace around, shout out)

How will I respond to pain:

What helps me relax: (e.g. spend time alone, go for a walk, talk to someone)

About my relatives/friend(s)

This form was completed by:

Relationship to me:

During my stay in hospital my relative/friend(s) would like to be involved in my care by: (e.g. assisting with meals, out of hour visiting if required)

You can ring my relative/friend(s) if you need help with my care when: (e.g. not at night, or at anytime)

Draft about me April 2011

Any questions?



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