

COPD

FactSheet

What is COPD

COPD (Chronic Obstructive Pulmonary Disease) is an umbrella term which includes the conditions emphysema & chronic bronchitis.

COPD is a slow progressive condition which affects people mainly in their 40s and above.

Affects of COPD

COPD affects people's airways and lungs by narrowing the airway making it difficult for people to breathe.

This is due to the inflammation of the airways and the production of mucus. This results in a persistent chest cough, continual breathlessness, wheezing & frequent chest infections.

Multi-Disciplinary Team

The person's G.P can prescribe medication to help manage the condition. A respiratory nurse can help provide oxygen or a CPAP machine and breathing techniques to support the person.

Special Points

You must be trained prior to supporting someone to use a CPAP (Continuous Positive Airway Pressure) machine or oxygen therapy. Not everyone will need a CPAP machine overnight.



QR Codes

<-- British Lung Foundation
HSE COPD -->



Person Experience

If someone develops COPD it can interact with their ability to maintain many aspect of daily self care.

Due to breathlessness, people can often become frustrated and anxious, this can lead them to display irritation or behaviour that challenges us while we provide care.

People who experience COPD can feel helpless and can become frightened and sometimes depressed. This is mainly due to the breathlessness and difficulty managing aspects of daily life.

People who have COPD are still able to use their brain effectively and understand their condition.

Statistics

Around 1% of COPD patients have the condition through their genes.

Over 90% of people develop COPD from smoking.

Some people develop COPD due to long-term exposure to dust and harmful fumes.

References



Person Centered Care

People who have COPD often require support with:

- Personal Care, such as putting underwear & trousers on as well as, socks & shoes or slippers,
- Mobility - getting around, getting to the toilet, getting in and out of bed or a chair,
- Making food and drink, for example cooking or even standing waiting for the kettle to boil,
- Managing oxygen or medication including inhalers and tables.

We should treat everyone individually. Some people maybe more breathless than others and require more time to get washed and dressed.

Some people may want you to prepare their environment and get their clothes out ready for them. Some may want you to do everything for them instead.

Often people like to sleep in a chair overnight, have a window open and have a fan gently blowing in their face.

Diabetes

FactSheet

What is Diabetes

Type 1 diabetes is an autoimmune disease where the body is attacking the pancreas. This results in insulin not being produced.

Type 2 diabetes is when the body no longer recognises insulin or not enough insulin is being produced.

Affects of Diabetes

When the body no longer reacts or doesn't produce insulin, the sugar in our bloodstream can't be absorbed by our cells.

If our cells can't absorb sugar, then they can no longer receive the energy they need to survive so they start to die resulting in many side effects.

Multi-Disciplinary Team

The diabetic nurse is able to support you in ensuring the person is on enough medication & insulin. People may also need extra support from a chiropodist, ophthalmologist (eye specialist), as well as from their G.P for their heart and kidneys

Special Points

People who have diabetes need to have their blood sugar monitored. This can be once every three months via a blood test or multiple times a day; depending on how stable their blood sugar is.



QR Codes
<-- Diabetes UK
Diabetes.co.uk -->



Person Experience

If someone has type 1 diabetes they will require insulin to be injected into them for the rest of their life. Their blood sugar level will need to be continually monitored to ensure they are giving themselves enough insulin. This can be a very burdensome task for many people and often leads people to try and deny and fight their condition. This usually leads to poorly controlled diabetes resulting in many different medical conditions.

People can experience deterioration in their eye sight from conditions like glaucoma or cataracts. They may also lose sensation and feeling in their feet and hands due to neuropathy (damaged nerves). Some people also experience heart and kidney failure too.

Statistics

Approximately 8% of people with diabetes in the UK have type 1 diabetes

The most common type is type 2 diabetes with around 90% of adults having this type of diabetes

About 2% of people have other types of diabetes which can be caused by taking steroids, having cancer or having other disorders or illnesses.

References

DIABETES UK



Person Centered Care

People who experience diabetes will often have different needs. Some people may require support with fastening buttons on a shirt or putting their shoes on as they no longer have any feelings in their hands or feet.

Some people will need support with all aspects of care as they have lost their eye sight due to glaucoma, cataracts or retinopathy.

Some people who have diabetes may have heart & kidney failure and need to have their fluids restricted. For example, they may only be able to drink 1.5 liters of fluid a day. You may need to monitor this as well as how much fluid they urinate to ensure their body isn't starting to hold on to excess fluid.

Many people experiencing diabetes struggle to manage their diet. This can become a challenge to you, educating and trying to persuade them from eating high sugary foods. Often a diabetic option can be offered to them instead to minimise the harm.



Stroke

FactSheet

What is a Stroke

There are two types of stroke, one from a blood clot (ischemic) or one from a bleed (hemorrhage).

Both of these cause damage to a person's brain by cutting off the blood supply to their brain cells.

Affects of a Stroke

When the blood stops flowing to the brain cells, they are no longer able to receive the oxygen or nutrition they need and so start to die.

This can cause difficulties in swallowing, speaking, moving their arms and less, concentrating, remembering and remaining continent.

Multi-Disciplinary Team

There are many professional who can support you with someone who has experienced a stroke, these include: SALT (Speech & Language Therapists), physiotherapists, occupational therapists, continence nurse and a psychiatrist.

Special Points

People who experienced a stroke may alter their behaviour and have altered inhibitions. This can lead to challenging behaviour and sexual behaviours.



QR Codes

<-- Stroke Association
British Heart Foundation -->



Person Experience

People who have a stroke will have very different experiences. Some people will fully recover, some partially, some may live with the affects and unfortunately for some people it will be fatal.

The affect of a stroke can cause people to feel helpless, frustrated, angry and depressed. This is expected as their life has been massively changed, even if it is only temporary.

Due to the affects on the ability to swallow food and drink, some people will not be able to experience the joy of eating or tasting food again. This can have a devastating affect on their happiness.

Statistics

The most common type of a stroke is an ischemic stroke accounting for around 85% of all strokes in the UK.

100,000 people have strokes each year and it is estimated that there are 1.2 million stroke survivors in the UK



References



Person Centered Care

Due to the many different experiences people can have when they have a stroke, it is important to ensure we treat people as individuals.

Some people maybe able to use a spoon to maintain their ability to eat. Some may now require a beaker with a lid and a straw to drink. Often people who have experienced a stroke will require altered textured meals and fluids. There fluids could be given in four different levels and their food altered in texture from pureed to regular solid food.

With regards to mobility, some people may require a hoist for all transfers and specialised wheelchairs, measured to their height. For others, they may have only one side of their body affected (hemiplegia) and are able to fully move their other arm and leg.

The person's stroke may have altered their ability to communicate and we may need to use other methods, such as pictures, word cards, blinking and other non-verbal cues.

Dementia

FactSheet

What is dementia

There are over two hundred different subtypes of dementia

Dementia is syndrome (an umbrella term for lots of different types of illnesses) and is defined as an ongoing decline of cognitive functioning. This is due to the nerves in the brain ceasing to work.

Affects of dementia

Dementia can affect people very differently, some of the most common affects are: memory difficulties, hallucinations, confusion or delusions, altered behaviour such as challenging and sexually inappropriate behaviour, difficulties in speaking and remembering what items are for. Often people struggle with making judgements about risk.

Multi-Disciplinary Team

There are many professional who can support you with someone who has dementia, these include: SALT (Speech & Language Therapists), physiotherapists, occupational therapists, continence nurse, a psychiatrist and the DoLS team.

Special Points

People who have dementia often lose their ability to make judgements about risk. This can cause people to make decisions which can lead them into danger. This can vary from leaving a safe environment to drinking chemicals or boiling hot tea.



QR Codes

<-- Dementia UK
Alzheimer's Society -->



Person Experience

A lot of people who have the early onset of dementia may not recognise that they have it. This is very similar to people who have advanced dementia. It is normally the person's friends and family who begin to notice the person forgetting, becoming confused and their behaviour altering.

Often people experiencing dementia can become upset, anxious, angry and frustrated. This is usually because their thoughts & beliefs no longer match reality. They may feel they are in danger, or that they need to leave to help their children. When we stop them from leaving the care home, this tends to only increase their anxiety and frustrations as they no longer recognise where they are and that their thoughts are not based in reality

Statistics

More than 850,000 people in the UK have dementia.

Alzheimer's Disease around 60% of people

Vascular dementia - around 17% of people

Dementia with Lewy bodies around 10-15% of people

Mixed dementia, around 10% of people

References



Person Centered Care

One of the main aspects of person centered care with regards to supporting someone who is experiencing dementia is understanding their thoughts and behaviours. By using a behaviour record you can start to build a picture of their behaviours. If we know their thoughts and behaviour, we can start to work with that person. For example, a person tries to leave the care home to "collect their children" around 15:00 everyday and becomes upset and angry when staff prevent them from leaving the home. We can use this information and try distraction techniques to focus their attention to something else. We could also take the person into the garden or another part of the building to try and simulate collecting their children. We could learn their partner's name and children's name to try and reassure them their children are safe. We can keep trying different techniques to see which ones work the best for them.

Sometimes as someone's dementia progresses, their thoughts and abilities will change and often deteriorate. This means the techniques we use and the care we currently offer will need to change with the person.



Parkinson's

FactSheet

What is Parkinson's Disease

Parkinson's Disease is a neurological disorder that affects dopamine levels in the brain. The cells that produce dopamine have started to die which has led to this imbalance.

The three main categories of Parkinson's Disease are , Idiopathic, Vascular, Drug induced Parkinson's

Affects of Parkinson's Disease

- Limb rigidity
- Walking and balance problems
- Tremors, pain & fatigue, restless legs
- Slowness of movement
- Mild memory and thinking problems
- Depression
- Sleeping problems
- Hallucinations and delusions
- Low blood pressure
- Incontinence

Multi-Disciplinary Team

There are many professional who can support someone with Parkinson's Disease, these include: SALT (Speech & Language Therapists), physiotherapists, occupational therapists, continence nurse, a psychiatrist and the DoLS team.

Special Points

People who have Parkinson's Disease often experience difficulties communicating. This could be due to difficulties speaking, making facial expressions, using non-verbal body language, gestures, writing and reading.



QR Codes

<-- Parkinson's UK
Parkinson's Foundation -->



Person Experience

A lot of people who experience Parkinson's disease experience a feeling of sadness or depression. This isn't necessarily because of what is happening to their body, but due to the changing dopamine levels in their brain.

Dopamine is required to have a feeling of happiness and joy in our lives. As this is not produced enough in their brain, it causes a feeling of depression.

Dopamine is also required to manage our movements. For someone who is experiencing Parkinson's disease they will also feel a reduction in the speed at which they can move. They can also experience tremors which can be painful and tiring. Their ability to mobilise effectively also decreases.

Statistics

Around 145,000 people in the UK have Parkinson's Disease.

Most people with Parkinson's start to develop symptoms when they're over 50

Around 1 in 20 people with the condition first experience symptoms when they're under 40.

References



Person Centered Care

When supporting someone experiencing Parkinson's Disease, we should monitor the person's mood. This is very important as we know they will have a reduction in the joy in their lives which can be managed with medication and activities which provide them with happiness. If we know what their hobbies and interests are we can help them continue their passions.

To ensure we maintain the person's independence, we can use equipment such as a beaker with a lid and a straw. This can be placed on a table (if their hands have strong tremors) and they can use their body to lean forward and drink from the straw. If their tremors are not as strong, they can hold the cup to drink out of. Using equipment in this way still maximises their independence and overcomes their difficulties.

We can also use equipment or encourage certain leg and hand exercises to maintain the person's ability to coordinate their movements. This is increasingly important if we want to ensure they are safe when walking. We can ask staff to support people while walking, use a rotunda or a stand aid if necessary.

Cardio Vascular Disease

FactSheet

What is Cardio Vascular Disease

Cardio vascular disease is something that affects our heart (cardio) and the blood vessels (vascular). Cardio vascular disease is an umbrella term and includes the following conditions: Coronary heart disease, Heart failure, Heart arrhythmias, Peripheral vascular disease and Strokes.

Affects of Cardio Vascular Disease

Affects vary based on what condition the person has and can include:

- chest pain
- pain, weakness or numb legs & arms
- very fast or slow heartbeat, or palpitations
- feeling dizzy, lightheaded or faint
- fatigue
- swollen limbs
- breathlessness

Multi-Disciplinary Team

There are many professional who can support you with someone who has cardio vascular disease, these include: physiotherapists, occupational therapists, heart failure nurses & their G.P.

Special Points

We should take note to monitor people's fluid input and output in order to avoid overloading their heart with extra fluid. If we over hydrate someone with heart failure we are placing their heart and kidneys at risk of failing.



QR Codes

<-- Chest Heart & Stroke
British Heart Foundation -->



Person Experience

A person who is experiencing cardio vascular disease can experience many completely different symptoms, depending on what condition they have.

If someone has coronary heart disease they may feel chest pain and pain or numbness in their arms. People with peripheral vascular disease can also feel pain and numbness in their arms too.

Some symptoms will be felt across the different conditions, for example breathlessness can be experienced by people who have heart failure and coronary heart disease.

Statistics

There are around 7.4 million people living with heart and circulatory disease in the UK; 3.9 million men and 3.5 million women.

Heart and circulatory diseases cause more than a quarter of all deaths in the UK, that's nearly 170,000 deaths each year – an average of 460 deaths each day or one every three minutes in the UK.

References



Person Centered Care

When we support people experiencing certain conditions such as heart failure and coronary heart disease we should be careful not to overexert them. People can become breathless quickly. Sometimes it is better to prepare their environment and allow them to spend time assisting themselves.

People who are experiencing the swelling of limbs, most likely people with heart failure and peripheral vascular disease, will be at an increased risk of falling due to this swelling. We should encourage people with swollen feet to keep them elevated to try and reduce the swelling. Often people will be on diuretic medication which will cause them to urinate more frequently. This is also something we need to manage; the sudden and frequent urges to use the bathroom. We may need to support the person to walk or use a wheelchair if they are becoming breathless or are at an increase risk of falling.

We should monitor people's fluid intakes and some people may need a low sodium diet. This would be to prevent further damage to their heart and kidneys.

Asthma

FactSheet

What is Asthma

Asthma is a long-term condition which affects your airways when you breathe in and exhale air. Asthma is caused by an allergic reaction to stimulus such as dust, animal fur/hair, tree pollen or even an allergic reaction to food can increase the likelihood that people will experience an asthma attack.

Affects of Asthma

Asthma causes three things to occur in the airway:

1. Production of sticky mucus
2. Inflammation of the airways
3. Muscles tightening around the airway.

This causes people to struggle to breathe which can become fatal.

Multi-Disciplinary Team

Someone who has asthma can access support from their G.P or respiratory nurse. This support can help prevent an asthma attack from happening.

Special Points

We should ensure we can gain quick access to people's reliever inhaler.

If we have a special place where the emergency inhalers are kept, we can be quick to respond in an emergency.



QR Codes

<-- British Lung Foundation

Asthma UK -->



Person Experience

Most of the time, someone with asthma doesn't experience any symptoms if it is well controlled.

If their asthma is not fully controlled they can wake themselves up at night due to coughing, feeling a tight chest throughout their day, feel short of breath, they can also hear the wheezing when they are trying to breathe.

During an asthma attack, the person can feel panic, a tight chest, extreme breathlessness, a fast heart rate and dizziness.

If the person does not receive their reliever inhaler they could faint and stop breathing.

Statistics

In the UK, around 5.4 million people are currently receiving treatment for asthma.

Asthma affects more boys than girls. Asthma in adults is more common in women than men.

Asthma tends to run in families, especially when there's also a history of allergies and/or smoking.



References



Person Centered Care

In order to support someone with asthma, in a person centered way, we should develop an Asthma Prevention & Action Plan. This will detail triggers to their asthma, what preventative medication they take, when they have an asthma attack and the details prior to the attack, where their reliever inhaler is stored and the abilities of the person to alert staff and use their medication.

By completing an Asthma Prevention & Action Plan, we can start to understand the individual triggers the person has and what we need to do to remove these triggers.

For some people, we may need to store their inhaler away from them and monitor them throughout the day for signs of an asthma attack. For other people, they will be able to inform us as to whether they are feeling the symptoms of asthma, if they feel they need an asthma review or if they need their inhaler.

The use of equipment, such as a spacer, can make a huge difference, with the ability for someone to fully administer their inhaler or comply with support.