Case study

CR referral received from A&E for 93 year old

Background – the context, e.g. who?/where?/when?
CR Referral received from A&E for 93 year old female following fall and soft tissue injury to left knee. Nursing staff struggling to mobilise. Long term OD package of care (morning), no family support, supportive neighbours.
What it was like before
Patient managing independently prior to admission with once per day privately funded care call. Patient was independently washing and dressing prior to carer visiting, carer was helping with breakfast and making the bed. Patient had near miss fall in kitchenwith soft tissue injury to left knee, which is known to be arthritic. Patient visited A&E following this fall and was referred to MAST. Patient was reviewed by therapists twice in same day and deemed to be near baseline for mobility. Patient agreeing to let morning carers help with washing and dressing, and to have a dinner time call to assist with evening meal. Carers to make sandwiches for lunchtime during morning visit.
What it is like now
Patient now remains in own home, mobilising well with WZF and managing with a BD package of care. She no longer has therapies input as is at baseline. CaHT no longer involved as private carers have picked up care calls
What happened to make the changes come about?
Liaised with patient daughters, who are happy to increase private package of care. CaHT were able to bridge the gap for this to allow patient to discharge Physiotherapists reviewed mobility and bed transfers in A&E. They also visited next day to review mobility. Patient had been struggling at home overnight (first night home from hospital), needing assistance for toileting and bed transfers from neighbours. Commode

provided for lounge to aid independent toileting during the day. Liaised with carers to empty Next day occupational therapist review with physiotherapists to review bed transfers however patient had improved greatly and did not require further equipment or continued therapy input.
What could be changed if done again?
Improved liaison with care agency with regards to care provided for patient, and increasing the support they currently provided for patient, especially around meals for the patient