

Worksheet 1: Promoting dignity – what does it mean?

According to the Social Care Institute for Excellence (SCIE, 2006), research with older people, their carers and care workers has identified dignity with four overlapping ideas:

- ▶ respect
- ▶ privacy
- ▶ self-esteem, self-worth and a sense of oneself
- ▶ autonomy

In terms of the one aspect your group has been allocated, identify a situation in which someone in the group feels that the dignity of a vulnerable adult (not necessarily an older adult) was compromised in this way. Consider the following questions:

1. Does everyone in your group agree that this was an issue about dignity?

2. Did the person in question present it in those terms?

3. Do you think that other people involved in the scenario saw it as a loss of dignity?

4. Do you think that dignity can be compromised in ways other than those highlighted in the above list?

Worksheet 2: Promoting dignity, promoting change

1. Within your organisation, is the promotion of dignity a policy issue or is it down to individuals to work as they see fit?

2. In what ways can you promote change in your organisation?

3. Are there barriers to change within your organisation? If so, what can you do about them?

4. Who would you want to talk to during your visit?

Worksheet 5: Law-informed practice – the law as an ally?

Case study A

Sunita had already completed the first term of a performing arts course at her local college. Her tutors were aware that she had a mild learning disability and she had told them from the outset that she had impaired vision and epilepsy. Nothing had prevented her from engaging in all aspects of the course thus far and she had made excellent progress. However, when she returned from her Christmas break, she was told that she would not be allowed to complete the second term because it involved a circus skills component. They told her that they had responsibilities to fulfil in terms of health and safety legislation and, because they could not guarantee her safety, were having to prohibit her from taking part. Sunita was devastated because she would not be able to graduate without achieving a pass mark in all of the course modules, and angry that she had not been told about this from the outset. She now felt that she would have to rethink her future and, feeling very despondent, went to tell Siwan from the advocacy project that she was having to give up her dream. Siwan, who had helped her to develop her skills and confidence enough to apply in the first place, had other ideas.

In what ways, if any, could the law be helpful here in terms of Sunita's future?

What does this tell us about the importance of having an awareness, and at least a basic understanding, of the legal context of our work and the policies which arise from it?

Case study B

Karen from the care agency had just left Arthur's house after her usual afternoon visit to help him prepare something for his tea and, because he had a degree of dementia, make sure he had remembered to take the medication he needed for his heart complaint. While she was there she noticed that there was very little food in the house and when she offered to get some for him, he told her that he had no money. Karen reminded him that she had only collected his pension for him the day before and so he should have had plenty of money for food. At this point, Arthur told her that he had given all his pension money to his grandson who had told him he needed money for petrol. Karen told her manager, who looked into this further, and they found out that the grandson and his friends were calling on Arthur every few days, pleading poverty and taking what money he had in his wallet. Karen and her manager were convinced that Arthur was the victim of financial abuse, and as such in need of protection. However, Arthur didn't see it that way – he said he was happy to help out the only family member who ever took the time to visit him. They could see that he had rights but worried that his judgement was impaired because of his dementia. Could he be forced to stop giving his money away if it was against his own interests?

In what way(s), if any, could the law be helpful here in terms of Arthur's future?

What does this tell us about the importance of having an awareness, and at least a basic understanding, of the legal context of our work and the policies which arise from it?

Case study C

Irene had borne the brunt of Jack's temper and frustration for most of their 44 years of married life. He had often been violent towards her but Irene had chosen to stay in the relationship because she loved him, and, in her opinion, the times when he wasn't under the influence of drugs or alcohol and either threatening to harm her, or actually harming her, were good times and made up for the bad. However, over the past few years, Jack had become chronically ill because of kidney and liver problems and used emotional pressure to dissuade Irene from leaving him. Irene had her own problems struggling to manage her life with bipolar disorder. She reached a particularly low point when he destroyed treasured photographs and, having had enough, she moved out of their house and went to stay with a friend. With her friend's emotional support, she sought the advice of someone at a Women's Aid centre in a nearby town. When Jack found out he was furious and began making threatening phone calls and sending friends of his to the place where she was staying, to tell Irene that he would harm her and her family and friends if she didn't return to do her 'duty' as the carer of a sick husband.

In what way(s), if any, could the law be helpful here in terms of Irene's future?

What does this tell us about the importance of having an awareness, and at least a basic understanding, of the legal context of our work and the policies which arise from it?

Worksheet 6: Facing dilemmas

Case study A

For three years Cassie had been helping Jackie to have a say in matters that affected her day-to-day life. Jackie has a learning disability and severe communication difficulties, and Cassie got to know her when she became involved in an advocacy scheme which links those who have difficulty making their voice heard with others who have the confidence and skills to facilitate this. When Cassie attended a workshop at the beginning of the relationship, it had been made clear that her role was merely to act as a mouthpiece for Jackie – someone to say what Jackie would say if she had the ability to do so. Cassie had always tried to respect that and had not made decisions for her or even tried to influence Jackie when she had not agreed with her. She respected Jackie's right to make her own decisions but was concerned when it became clear that she was intending to sign over to her brother her share of a house they had inherited from their parents. Cassie felt that the brother was being unscrupulous, but Jackie was happy with his explanation that he was 'saving her from having to worry about stuff'. Things came to a head when Jackie asked her to help her sort matters out with a solicitor.

What was the nature of Cassie's dilemma (or dilemmas)?

What might you have done in her position?

Who could you have discussed the dilemma(s) with or turned to for support?

Case study B

Elsa had been in poor health for many years but had become increasingly reliant on Joe, her husband, after suffering from a severe bout of pneumonia on top of everything else. Although Joe was himself unwell, suffering from heart disease and chronic breathing problems, he insisted that he could look after Elsa's needs without any outside help, even though that entailed lifting her in and out of bed and on and off the toilet several times a day. Alan, a care manager, had spent many visits trying to persuade Joe that their quality of life would improve if he allowed himself to be relieved of at least some of the care tasks he took on alone. But Joe would have none of it – his argument was that they had managed their own affairs for all 68 years of their time together and they weren't about to change that now. Much as Alan worried about the consequences of this decision for both Joe and Elsa, he had no reason to suspect that their reasoning was compromised in any way and so chose to respect their right to live in the manner of their own choosing, even though he suspected that the likelihood of both of them dying soon as a consequence were high. Alan was aware that Elsa and Joe's son, Mike, who lived several hundred miles away, was putting pressure on them to get help or move into a home, as was their GP. Alan himself had also received several calls from Mike, who insisted that Alan act on his duty to protect such vulnerable people by not letting things continue as they had been.

What was the nature of Alan's dilemma (or dilemmas)?

What might you have done in his position?

Who could you have discussed the dilemma(s) with or turned to for support?

Case study C

Jimmy's work at a homeless people's project brought rewards as well as disappointments. He had worked hard to establish a good working relationship with the local housing department, health centre and tenants' associations and always felt proud of the part he had played when someone who wanted a secure home managed to achieve that aim. He had felt that way when Darren had been offered the tenancy of a new flat and felt confident that Darren's new-found sense of security and optimism would have a positive impact on his long-standing mental health problems. For the first few months Darren took pride in his new property and his outlook on life was very positive – he signed up for a course at his local college and began eating well and generally looking after himself. However, after this initial period, Jimmy noticed a sharp decline in Darren's appearance and demeanour, and began receiving calls from the police who were regularly being called to the premises by neighbours who were fed up with the loud music and abusive language coming from Darren's flat at all hours of the day and night. Jimmy suspected that Darren's brother and his friends were taking advantage of Darren's low self-esteem and unassertiveness by treating his accommodation as their own. This was confirmed when he visited and found several people in the flat taking drugs. He offered to get help to evict Darren's uninvited 'house guests' but Darren begged him not to as he feared the consequences.

What was the nature of Jimmy's dilemma (or dilemmas)?

What might you have done in his position?

Who could you have discussed the dilemma(s) with or turned to for support?

Worksheet 7: A question of values

Have a look at the following statements and make brief notes about whether you agree or disagree with the values that underpin them.

When someone becomes dependent, care by the family is always the best option.

I agree /disagree because

.....

.....

Although the views of service users and carers do matter, the breadth of experience that professionals can bring makes their input more important.

I agree /disagree because

.....

.....

Vulnerable adults must be protected, even if it isn't what they want.

I agree /disagree because

.....

.....

Communities are where we feel safe and valued, so community care is bound to be a good policy.

I agree /disagree because

.....

.....

Once you become old you should not expect to live as full and varied a life as you have done previously.

I agree /disagree because

.....

.....

We're all the same under our skin, so there shouldn't be separate initiatives for people from different ethnic groups.

I agree /disagree because

.....

.....

Worksheet 8: Active listening exercise

Service user

You are a service user who is very upset about something which has happened to you. You want to tell your support worker all about it but need a lot of encouragement as you find it difficult to talk about it.

Support worker 1 (not good at listening)

You are the support worker to the service user in this exercise. The service user wants to tell you about something that has happened to them, but you have the following characteristics:

- ▶ you interrupt
- ▶ you don't acknowledge how the service user is feeling
- ▶ you jump to conclusions about what the service user is saying
- ▶ you misunderstand what they are saying.

Support worker 2 (an active listener)

You are the support worker for the service user in this exercise. The service user wants to tell you about something that has happened to them. Listen to them, making sure that you:

- ▶ acknowledge how they are feeling
- ▶ don't interrupt them
- ▶ pay attention to what the service user says.
- ▶ Mirror what the service user says to you, to check that your understanding is correct.

Worksheet 9: Risk scenarios

Scenario 1

Josey is a young adult with a learning disability. She wants to go clubbing with her friends in the city centre.

Scenario 2

Adnan is an adult who is a wheelchair user. He wants to take part in wheelchair basketball. Adnan has always been excluded from sports but is a very keen basketball fan.

Scenario 3

Joe is an older person who has dementia and has just moved to live in a residential home. He has asked if he can go to the newsagent by himself, as this has always been an important part of his daily routine.

Scenario 4

Betty is an older person who has had a stroke. She has made a partial recovery but now needs assistance to help her walk and has only partial use of one hand. Betty lives in the warden-aided flat where she lived before the stroke. Betty is very independent and particularly enjoys visiting her friend in a nearby town. Betty used to drive herself there and wants to continue to do so.

Worksheet 10: New learning

1. Who initiated the process of learning or acquiring the new knowledge?

2. How useful could it potentially be for the work that you do?

3. How will you incorporate this learning into your practice?

4. Will you share this learning with others? If so, how?

Worksheet 11: Lifelong learning

Strengths

What have you learned to date that has helped you to do your job well?

1.

2.

3.

Weaknesses

What might hold you back from learning, or act as a brake on your learning?

1.

2.

3.

Opportunities

How can continuing to learn contribute to making your practice as effective as possible?

1.

2.

3.

Threats

What can go wrong or fail to happen if learning doesn't take place throughout your career?

1.

2.

3.

Worksheet 11 (Trainer's copy): Lifelong learning

Strengths

You could expect to see examples here of a range of knowledge, skills and values.

Weaknesses

Examples might include a lack of confidence, overwork, an anti-learning culture, a tendency to separate theory and practice.

Opportunities

Examples might include that it raises awareness of differing perspectives; being research-minded helps to add a critical edge to one's thinking; keeping up to date with new strategies and approaches can enhance opportunities for change; it can win the respect of colleagues within and outside of one's own discipline or profession.

Threats

Threats could include the possibility of being taken off a professional register, that practice could become ineffective or even dangerous, loss of respect from colleagues and/or service users.

Worksheet 12: Receiving support

Part 1

Think back over the last few months or so and tell me about an experience you found enriching or rewarding, or a piece of work you were proud of.

Explain whether that success was validated or recognised in any way – were you congratulated, for example?

How did you feel about that response (or lack of it)?

Part 2

Think back over the last few months or so and tell me about an experience that was difficult or frustrating – perhaps involving a dilemma.

Explain whether those difficulties were recognised and whether your experience was taken seriously – did you have the opportunity to discuss them with anyone, for example?

How did you feel about this response (or lack of it)?

Worksheet 13: Some more powerful than others?

In the context of your own workplace, consider what level of control over, or input into, decisions about lifestyle choices the residents you work with have.

Level 1 – Explanation of decisions already taken

Level 2 – Consultation prior to decision making you do on their behalf

Level 3 – Partnership in decision-making processes

Level 4 – User control in decision-making processes

	getting up and going to bed	how to spend leisure time	where to receive visitors	whether to own a pet	when and whether to eat	treatment regimes	risk taking
explanation of decisions already taken							
consultation prior to decision making on people's behalves							
partnership in decision-making processes							
user control in decision-making processes.							

When you have done so, think about what your answers say about the power balance between givers and receivers of care, and about the valuing or otherwise of partnership and rights.

Worksheet 14: Institutional discrimination

Case study A

One afternoon at work, Jim, the assistant manager of a nursing home for older people, was taken ill with stomach pains and admitted to hospital. There he was admitted to a ward and seen by a doctor who specialised in gastrointestinal problems. Ken, one of the residents, had also had stomach pains a few weeks earlier and he too had been admitted to hospital, but under the care of a geriatrician.

What does this tell us about how older people are conceptualised in society?

Can discrimination at this level be easily addressed?

What does this tell us about institutional discrimination?

Case study B

Andy had been a volunteer for over a year at a drop-in centre for people with drug-related problems and was keen to enrol on a social care course so that he could embark on a career in this field. However, because of his particular disability, there were no facilities at the college that would allow him to communicate and submit written work within a timescale he could manage, and he knew that he would not be able to work fast enough to keep to the programme's schedule for assignment submissions.

What does this tell us about how disabled people are conceptualised in society?

Can discrimination at this level be easily addressed?

What does this tell us about institutional discrimination?

Case study C

Samantha had launched her private care agency almost a year ago. She had underestimated how much it would cost to get her business up and running and so, in order to save on advertising costs, she had asked her core group of six full-time staff to let people in their own families and social networks know that she wanted to recruit carers. This had worked in terms of numbers, as she now had more than 30 carers on her books. All were white and female, but she didn't see this as a problem because, as she often said to her staff, 'caring is the same the world over'.

What does this tell us about how people from ethnic minorities are conceptualised in society?

Can discrimination at this level be easily addressed?

What does this tell us about institutional discrimination?

Case study D

Hal and John had come to the conclusion that they could no longer manage to live together in the home that they had shared for 25 years and decided to move together to a residential home where they could receive the support they wanted. They wanted to ensure that the home's ethos matched with their own outlook on life but, even though money was no object to them, they were unable to find anywhere within travelling distance of their friends and family that offered provision for same-sex couples.

What does this tell us about how gay people are conceptualised in society?

Can discrimination at this level be easily addressed?

What does this tell us about institutional discrimination?

Worksheet 15: The power of language

Part A: Underlying messages

What assumptions are the following sentences conveying?

1. She was quite intelligent for a woman.

.....
.....

2. All of the men responded so sensitively – it was amazing!

.....
.....

3. The instructions were written clearly and simply so that even old people would be able to follow them.

.....
.....

4. The invitation was extended to include the wives and dependants of senior managers.

.....
.....

5. We cater for all residents here. When there's a shopping trip on we always make sure that there's an alternative arranged for the men.

.....
.....

6. We don't have discos because we might get people with autism coming along and they don't like that sort of thing.

.....
.....

7. Those presenting papers at the disability conference please report to the organisers in room 303. Delegates please note that assistance is available for registering and accessing the main assembly hall if required.

.....
.....

8. There is no automatic door but there is a voice-activated entry system located next to the keypad, so disabled people will still have easy access. At the risk of sounding obvious, you just press the button and someone will answer and tell you what to do next.

.....
.....

Part B: The negative power of words

Why should the following terms be avoided? It is not sufficient to answer 'because we've been told not to use them'. The purpose of this exercise is to help you to think about how language has a great deal of power to affect how we think about things. It can play a part in constructing the world in which we operate, as well as describing it.

Geriatric (when used as a noun – that is, a geriatric)

The elderly

A quadriplegic

Wheelchair-bound

Ethnic (in relation to a person or community)

Career woman

Cases where a person's disability is highlighted when it doesn't need to be – as in the example, 'The Steering Committee meeting was chaired by blind keyworker, Maggie Evans'.

Worksheet 15 (trainer's copy)

Part A: Underlying messages

What assumptions are the following sentences conveying?

1. She was quite intelligent for a woman

Women are not intelligent as a rule.

2. All of the men responded so sensitively – it was amazing!

Men are not sensitive as a rule, so this was something out of the ordinary.

3. The instructions were written clearly and simply so that even old people would be able to follow them.

People lose their intellectual abilities as they age, or only stupid people grow old.

4. The invitation was extended to include the wives and dependents of senior managers.

You have to be male to be a senior manager.

5. We cater for all residents here. When there's a shopping trip on we always make sure that there's an alternative arranged for the men.

No men like shopping. All women like shopping.

6. We don't have discos because we might get people with autism coming along and they don't like that sort of thing.

All people with autism are the same and autism affects them all in the same way.

7. Those presenting papers at the disability conference please report to the organisers in room 303. Delegates please note that assistance is available for registering and accessing the main assembly hall if required.

The delegates are likely to include disabled people who might need assistance, but the presenters are presumed not to be disabled.

8. There is no automatic door but there is a voice-activated entry system located by the keypad, so disabled people will still have easy access. At the risk of sounding obvious, you just press the button and someone will answer and tell you what to do next.

There is an assumption that everyone can speak, hear, read and comprehend.

Part B: The negative power of words

Why should the following terms be avoided? It is not sufficient to answer 'because we've been told not to use them'. The purpose of this exercise is to help you to think about how language has a great deal of power to affect how we think about things. It can play a part in constructing the world in which we operate, as well as describing it.

Geriatric (when used as a noun – that is, a geriatric)

Geriatric is an adjective – that is, it describes someone who needs medical care as old. If someone is referred to purely in terms of their designation as old, then the sense of that person as an individual is lost. The term is depersonalising and therefore demeaning.

The elderly

Again, this depersonalises – it denotes a mass group identity under which individual histories, unique personalities and so on are lost. It reinforces the view that all older people are the same – referring to the stereotype and not the individual.

A quadriplegic

This describes someone as a condition, rather than a person. As such, it defines them by that condition rather than portraying that person as an individual who has quadriplegia but is more than the quadriplegia.

Wheelchair-bound

This term is unduly negative. Many disabled people would say that their wheelchairs enable rather than bind them. This term reinforces the assumption that it is acceptable to describe a disabled person in terms of what they can't do or what is conceptualised as 'normal'.

Ethnic (in reference to a person or a community)

'Ethnic' is often used to distinguish a person or community from one that is 'non-ethnic', as if ethnicity only refers to what a dominant culture sees as 'foreign'. In reality, we all have an ethnic dimension, because the word refers to what unites us as communities – for example, a common language, religion, style of dress, set of customs and so on. To describe someone as 'ethnic' is therefore meaningless in one sense but derogatory in another, because it gives out the message 'you are not like us'.

Career woman

This term helps to perpetuate the myth that a woman's place is in the home and rearing children. The term 'career man' is not used, because having a career is seen as being 'the norm' for a man, whereas for women it ought not to be assumed, according to the messages we receive as we are socialised into our culture.

Cases where a person's disability is highlighted when it doesn't need to be – as in the example, 'The Steering Committee meeting was chaired by blind keyworker Maggie Evans'.

There are some instances where a person's disability needs to be highlighted, but in examples like this one, it only serves to mark out a person as different from what is considered to be the norm. If the person chairing the committee were not blind, would we see the report expressed as '... by sighted keyworker Maggie Evans'?