



the **skills** network

**Part A**

**Level 2 Certificate in  
Caring for the Elderly**

**Featuring interactive content**



## Instructions for using the EQUAL App

At The Skills Network, we are enabling you to access additional video content through Augmented Reality (AR) technology. By simply scanning areas of this book, you will have access to a range of interactive bonus content, from a Virtual Tutor to case study videos.

### Instructions for use



#### STEP 1:

To get started, you will need to download the EQUAL App from the AppStore or PlayStore and follow the simple tutorial instructions on how to activate your course.



#### STEP 2:

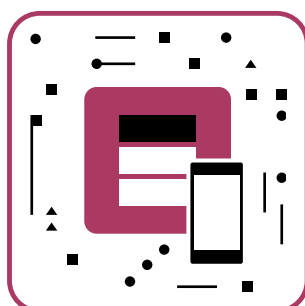
Look out for this icon in your learning materials.



#### STEP 3:

Whenever you see the icon, click on the 'lens' in the bottom bar of the app, scan the icon or the image the icon is placed on, and bring your bonus content to life.

Utilising the app to access additional content is not mandatory to successful completion of the course, but allows for an alternative way to access content from within the workbook.



*Don't forget to point your lens at this icon!*

#### Scan for your Virtual Tutor

Scan this icon to meet your Virtual Tutor.

### Disclaimer:

This resource uses real life case studies where specifically stated and referenced. All other references to individuals, groups and companies contained within these resources are fictitious.

## Caring for the Elderly

### Welcome to this Caring for the Elderly course.

We hope you find all of the information contained in this resource pack interesting and informative. This learning resource and the assessment questions have been approved by TQUK as a great way to meet the learning outcomes for this qualification. (A complete list of the learning outcomes can be found at the back of this workbook.)

This course is made up of **four** parts (A, B, C and D). This is **Part A**, which contains **two** units:

**Unit 1: Principles of elderly care in the UK**

**Unit 2: Maintaining health and well-being in elderly care.**



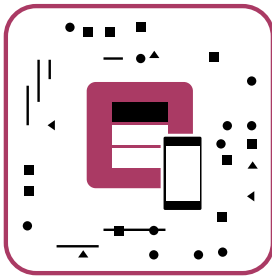
As you start to read through each page, you will be able to make notes and comments on things you have learnt or may want to revisit at a later stage. At the end of each section, you will be asked to answer the relevant assessment questions.

Once you have answered the questions, go to the next section and continue studying until all of the assessment questions have been completed.

Please make sure that you set aside enough time to read each section carefully, making notes and completing all of the activities. This will allow you to gain a better understanding of the subject content, and will help you to answer all of the assessment questions accurately.

**Good luck with your study. Now let's begin!**





Scan for your Virtual Tutor.

## Key Skill Activities

Throughout this unit, you will be asked to complete activities to help with your English and maths skills and to allow you to stretch and challenge yourself in relation to the principles of elderly care in the UK. These activities are designed to encourage your development throughout the course and to allow you to extend your key knowledge as you progress through the course.



### Key Skill: English

Whenever you see this icon, there will be an activity which encourages you to demonstrate your English skills. Completing these activities will allow you to practice literacy components and may stretch you beyond your existing skills which will then improve your general abilities.



### Key Skill: Maths

Whenever you see this icon, there will be an activity which encourages you to demonstrate your maths skills. These activities will help you with your personal and professional development. Completing these activities will allow you to practice mathematical components and may stretch you beyond your existing skills which will then improve your general abilities.



### Key Skill: Stretch and challenge yourself

Whenever you see this icon, there will be an activity which encourages you to stretch and challenge yourself in relation to the principles of elderly care in the UK. These activities will help you with your personal and professional development and allow you to think about certain situations and scenarios in more detail.



### Key Skill: Behaviour and attitudes

Whenever you see this icon, there will be an activity which encourages you to consider your own behaviours and attitudes in relation to the principles of elderly care in the UK. These activities will help you with your personal and professional development and will help you to evaluate the skills you already have, and think about how you approach various situations in the workplace.



### Key Fact: British Values

You will also come across this British Values icon throughout the course. Whenever you see this, it represents an area of learning that emphasises British Values. Your understanding of these values is crucial as you look to grow and develop as an employee and member of your wider community.

## Unit 1: Principles of elderly care in the UK

### Welcome to Unit 1.

This unit has **three** sections. These are:

**Section 1: The context of elderly care in the UK**

**Section 2: The range of care available**

**Section 3: Regulation by the Care Quality Commission (CQC)**

### Section 1: The context of elderly care in the UK

This section will explore the following:

- The term 'elderly person'
- The term 'ageing population'
- The effects of an ageing population on society, the economy, the NHS and social care
- Identify the different types of care that the elderly may need to access.

*Here's your first video. Point your lens at the whole image to unlock the video content!*





## What do you know?

Before you start this unit, it is important that you take some time to think about what you already know in relation to the principles of elderly care in the UK. Please take some time to answer the questions below and rate your confidence in each topic area.

Use the following key to complete your answers to questions 1 to 3. You can then write out your answer in full for question 4.

At the end of the unit, you will be asked to take another look at these questions so that you can rate your confidence again and identify how you have progressed throughout the unit and how your knowledge and awareness in each area has developed.

**1 – Not confident at all    2 – A little confident    3 – Confident**  
**4 – Very confident        5 – Confident enough to share my knowledge with others**

<b>1.</b>	How confident do you feel in your understanding of the context of elderly care in the UK?	
<b>2.</b>	How confident are you in your understanding of the range of care that is available?	
<b>3.</b>	How confident do you feel in understanding regulation by the Care Quality Commission (CQC)?	
<b>4.</b>	What are you hoping to learn in this unit?	

## The term 'elderly person'

People in the UK are living longer than ever before, and this is of course a major achievement of modern science and improved healthcare. However, not everyone remains healthy throughout their longer lives. This is something we will look at in more detail during this course when looking at what types of care are needed both now and in the future. As people age, they may become more vulnerable for a variety of reasons, such as physical and mental ill health. We will look at these vulnerabilities in more detail in later units.



Scan the image

**A**

### Activity 1: Old age

Have a look at the questions below. Then, using the space below, make notes on the ages that you think best apply.

**When does old age begin?**

**At what age does a person stop getting older and actually become old?**

**At what age does a person become elderly in your view?**



### Are you using the Equal App?

**Using the 'x' in the corner of your lens will exit camera mode and take you back into the app.**

Fragility is often associated with elderly people and is in fact related to the ageing process. The human body gradually loses its reserves of strength and ability to fight infections, leaving people vulnerable to sudden changes in health. Frail elderly people are at the highest risk of events, such as falls and admission to hospital, and often need long term care. These elderly people are very likely to be known to professionals in the services that are able to offer health and social care.



### A

#### Activity 2: Defining elderly

**Use the link below to watch a short video on how others view old age. What are the people interviewed here saying about old age? Is it simply a matter of what age a person is? Or, are there other important factors?**

***<https://youtu.be/dZ-2Tk-R80g>***

**Make notes in the space below.**



Traditionally, medical professionals regarded 65 as the age at which somebody becomes elderly. This was based on the expectation that they would probably only have a few years left to live. This is no longer the case and there have been studies suggesting that **middle age** now, in fact, begins at 60.

**Source:** <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0121922>

Younger people might consider those over 50 to be old whereas people now continue to work into their late 60s and beyond and do not consider themselves old. These fit and active people might feel that old for them implies around 80 years of age!

Here are some dictionary definitions of old age:

**'The later part of normal life.'**  
*The Oxford Dictionary*

**'The time of life when a person is old.'**  
*Merriam Webster Dictionary*

**'The last period of human life now often considered to be the years after 65.'**  
*The Free Dictionary*

Perhaps, considering what we've learned so far, none of these definitions are particularly helpful. The first two, as you can see, are quite vague and general.

If there are so many different opinions, attitudes and approaches to 'old age' it follows that there will perhaps need to be an equally wide range of types of care and support available to meet the many varied needs of an older population.



### **Key Fact**

**The term old age is hard to define in today's society.**

**Old age can no longer be said to begin when a person reaches 65.**

**This is in part due to advances in medical care and partly to healthier lifestyles.**

## The term 'ageing population'

The average age of the UK population is expected to increase significantly over the coming decades. This change will bring both challenges and opportunities for central and local government, with impacts on a wide range of public services.

Like many countries across Europe, the United Kingdom's population is ageing. Although the number of elderly people is not rising as quickly as some countries, such as Italy or Japan, the UK's 2001 census showed that for the first time, there were more people aged 65 and older than under 16.

When a country has a high percentage of older people, it is referred to as an ageing population problem.

Ageing populations occur because of a reduction or decline in the number of births and because of older people surviving to enjoy longer lives.



### Key Skill: Maths

**In 2016, there were 11.8 million UK residents aged 65 years and over, representing 18% of the total population.**

**25 years before that, in 1991, there were 9.1 million, accounting for 15.8% of the population.**

**Between 1991 and 2016, by how much of a percentage did the number of residents in the UK aged 65 and over rise?**

**Write your answer, showing your workings out, in the space below.**

Check your answers at the end of this workbook.



### Key Fact

**By 2066, there will be a further 8.6 million projected UK residents aged 65 years and over, taking the total number in this group to 20.4 million and making up 26% of the total population.**

**Source: ONS**



Scan the image



There is a north-south divide when it comes to life expectancy in England and Wales. Men are now living to an average age of 78.8 years, but this figure rises to as high as 83 in East Dorset and as low as 73.8 in Blackpool, Lancashire.



### STOP AND THINK!

**Do you have any ideas as to why there is this gap in life expectancy in different areas across the UK?**

Inequalities in health and well-being in different parts of the UK are largely responsible for these differences. In these areas, people are disadvantaged by things like high unemployment, poverty, poor housing, higher crime rates, lack of recreational facilities, lack of education and training opportunities and poor health.

People living in the most deprived areas of the UK have the lowest life expectancy. Men living in the most deprived areas of the country can expect to live nine years fewer than those in the least deprived areas. Women in the most deprived areas can expect to live 7.4 fewer years of a healthy life than those living in more affluent areas.

Much of this inequality is caused by death from heart disease, respiratory disease and lung cancer.

### **R** Further Research: Life expectancy

**You can find out more about life expectancy in your own area by following the link below and reading the data summary table.**

***<https://www.theguardian.com/news/datablog/2011/jun/08/life-expectancy-uk-data-health>***





## The effects of an ageing population on society, the economy, the NHS and social care

The ageing population and changing structure of the population will bring both opportunities and challenges to society, the economy, the NHS and social care at both national and local levels.

### Society

There are both positive and potentially negative impacts on society.

#### Positive Impacts

Healthy retired people can take an active part in community life, undertake a wide range of voluntary roles and help with the care of grandchildren. More children will be born having four grandparents alive and well for a longer part of their lives.

Communities are likely to become safer as older people are statistically less likely to commit crimes.

Older people are more inclined to support the arts by attending concerts, theatres, museums and galleries. Some studies show that as we get older, our satisfaction with life increases.

#### Negative impacts

As our population ages, there will be an increased need for **informal care**.

**Unpaid informal care** provided by friends and family is essential to our society and the economy.

In 2016, informal adult care was valued at £59.5 billion per year, with around two million adults in the UK receiving informal care. This is the equivalent of just over four million adult social care workers working every week of the year at their median weekly hours.

**Source:** <https://www.ons.gov.uk/economy/nationalaccounts/satelliteaccounts/articles/householdsatelliteaccounts/2015and2016estimates#focus-on-adult-care>

People aged in their 50s and 60s are most likely to provide this kind of informal care.

Unless there are significant improvements in health and the management of chronic conditions, there are likely to be many older people with multiple health problems; and families may face increasing pressures in terms of caring for their older relatives alongside other family responsibilities and the demand of work.

Women are more often care givers than men, although the number of men involved in care giving is increasing. This has implications for the health, ability to work and earn money, and stress levels of those giving the care.

Successfully meeting the demand for unpaid carers will mean that the government will need to adapt health and care systems to enable more support for these individuals and families.

### **R** Further Research: Ageing population

**You can learn much more about the impact of an ageing population in the report produced by the Government Office for Science. Follow the link below to read the Executive Summary and Key Findings of this interesting and thought-provoking report. You will need to look at pages 6 to 15 of the report. Make notes in the space provided. This will help you to answer your assessment questions.**

**Future of an Ageing Population: Government Office for Science; 2016**

***[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/816458/future-of-an-ageing-population.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/816458/future-of-an-ageing-population.pdf)***

## **The economy**

A major concern for the government is that the rising numbers of elderly people in our population will place increasing pressure on public finances.

There will be fewer people of working age paying taxes to support the pensions and care for the growing number of older people.

### **i** Key Fact

**In 2008, there were 3.2 people of working age for every pensioner, and this is projected to fall to 2.8 by 2030.**

**Source: *[https://www.economicsonline.co.uk/Global\\_economics/The\\_ageing\\_population.html](https://www.economicsonline.co.uk/Global_economics/The_ageing_population.html)***

The Office for Budget Responsibility has projected that total public spending will increase from 33.6% in 2019/20 to 37.8% in 2064/65.

This is the equivalent to £79 billion in today's terms and is mainly due to the ageing population. The Office for Budget Responsibility points out that there will need to be significant changes to the amount of tax we pay and the amount of money we spend as a country to avoid unsustainable levels of debt in the future. In recent years, there have been increases to the age at which people can receive their state pension. This is gradually increasing and will reach 67 years of age by 2028.

**Source:** <https://www.parliament.uk/business/publications/research/key-issues-parliament-2015/social-change/ageing-population/>



If people are living longer, it follows that they will need to ensure they have adequate funds to support their longer lives. There is already a need for people to remain at work for longer and the government is driving a policy to increase employment among older people, providing guidance for employers on how this can be achieved so that they become more age friendly.

**R**

### **Further Research: Pension fund**

**You can find out more about this by following the link below.**

**<https://www.bitc.org.uk/age-and-multigeneration-teams/>**

**Make notes in the space below.**

The longer people live, the more likely they are to need health care. This places an additional burden of cost on the NHS as well as social care.



### Key Skill: Maths

**Dementia costs the UK economy over £26 billion per year, this is more than cancer, heart disease and strokes. How many billions of pounds will dementia cost the UK economy over five years?**

**Write your answer, and show your working out, in the space below.**

**Source: <https://www.alzheimers.org.uk/about-us/policy-and-influencing/dementia-uk-report>**

Check your answers at the end of this workbook.



### Key Fact

**The workforce in the UK is changing – working lives in the UK are getting longer. By 2020, one in three workers will be over 50, and by 2030, half of all adults in the UK will be over 50.**

**Source: <https://age.bitc.org.uk/news-opinion/news/get-ready-age-experience>**

Continuing to work later in life has benefits for the employer, the individual and the country in general.

For the individuals, there can be many benefits of remaining in work and supporting the economy. As, not only does this provide additional financial support, but those working for longer are often more resilient and mentally more active. Studies have shown that working can have health benefits, particularly for people with mental health problems.



**A**

**Activity 3: Working longer**

Follow the link below to read this short report about the potential benefits of working longer. This will help you to answer your assessment questions later on. Make notes in the space below.

<https://www.telegraph.co.uk/news/politics/10964631/Working-longer-will-make-you-live-longer-and-be-happier.html>

Blank space for taking notes.



**The NHS**

The growing numbers of older people will also have an impact on the services provided by the NHS.

An ageing population is likely to have more chronic and long-term conditions and probably more disabilities, increasing the amount of ill health and disability in the population generally.



### Key Fact

**The Department of Health estimates that the average cost of providing hospital and community health services for a person aged 85 years or more is around three times greater than for a person aged 65 to 74 years.**

**<https://www.parliament.uk/business/publications/research/key-issues-parliament-2015/social-change/ageing-population/>**

An increasing number of people with long-term disability, chronic conditions and multiple health conditions will increase the need for care and change the nature of the demand for care. This will put pressure on health and care systems that will need to adapt to meet these changing demands.



Faced with an ever-increasing ageing population, we need to rethink old age, and move from a reactive approach to managing frailty, to a proactive approach.

NHS England has been working in partnership with Age UK to explore different ways of meeting the challenges that will be presented by an ageing population. There will be a greater emphasis on prevention and healthy lifestyles, for example. If the public can be made aware of the risk factors which can lead to poor health, they can be educated about ways to reduce the chances of developing chronic conditions and remain healthy for longer.

### Social care

The impact of the ageing population on health and social care services is hard to predict.

Social care services, like health care will see an increased demand resulting from greater numbers of older people with ill health. It has been suggested that there will need to be over 600,000 jobs in caring and personal services by 2022.

**Source: Government Office for Science: Future of an Ageing Population report**



### Key Fact

**Encouraging older people to remain in work will help society to support growing numbers of dependents, while providing individuals with the financial and mental resources needed for longer periods of retirement.**

Social care covers a range of services to help people maintain their health and independence in the community including home and personal care, day services, respite care and residential and/or nursing care.

Better integrated health and social care is likely to be needed to maximise the benefits for an ageing population.

Technology is likely to play an increasingly important role in providing health and care support, and in connecting people. This may include technology that enables people to be monitored at home rather than needing to be in residential care.

## The different types of care that the elderly may need to access

There are several different types of care that may be suitable for elderly individuals, depending on their circumstances and state of health.

### Residential care homes

Residential care homes provide people with personal care, such as washing, dressing, taking medication and toileting. They may also offer social activities such as day trips or outings. Some care homes are specialised to provide care for people with dementia and employ staff who are trained to make people with dementia feel comfortable and safe.



### Key Fact

**The demand for people to provide care for older relatives and friends will increase. Supporting these unpaid carers will be critical in ensuring that this demand can continue to be met.**

## Nursing homes

Nursing homes offer personal care as well as assistance from qualified nurses. These are sometimes called care homes with nursing services. Some homes offer both personal and nursing care and can therefore accept residents who need both. This means that someone who initially just needs personal care, but later needs nursing care won't have to change homes.

## Domiciliary care

Care can also be provided in the person's own home and this is known as domiciliary care. This is a good option for those who don't want to leave their home. But, consideration needs to be given as to whether someone's home is suitable for their changing needs. It also allows people to maintain some independence and perhaps a better quality of life. Care plans are individually designed with carers visiting the person's home one or more times each day for varying lengths of time.

The carers will help with a wide range of everyday tasks, including:

- Personal and continence care
- Managing medication
- Helping the person to move around in their home
- Household tasks and meal preparation.

There are lots of care agencies in the UK providing this type of care and the reliability of these can be checked by visiting the website of the Care Quality Commission (CQC) to see what quality rating the service has obtained. You will learn more about the CQC in Section 3 of this unit.





## Sheltered housing

Sheltered housing is a type of accommodation that is provided specifically for elderly people. It is usually only available to those aged over 55 years.

Sheltered housing units usually have a warden and a 24-hour alarm system so that a resident can get help in an emergency. It suits people who want to live independently but feel that they need some support or reassurance. The living accommodation is also usually smaller and easier to take care of. There may be communal areas for residents' use, such as lounges or gardens, and social activities may be organised by the wardens and support staff.

The level of support in sheltered housing varies with some offering more than others.

Most sheltered housing is provided for rental by local authorities and housing associations and waiting lists can apply. Sheltered housing is not inspected by the CQC or given the same ratings like care homes are, following inspections.



## Hospice care

Hospice care aims to improve the lives of people who are reaching the end of their lives and have an incurable condition or illness.

This kind of care can be provided in the person's own home, in a care home or in a specialised hospital setting called a hospice. Hospice teams include doctors, nurses, social workers, counsellors and trained volunteers.

In all these settings, palliative care nurses and doctors can provide specialist care including managing physical symptoms such as pain.

Palliative care can include the following components:

- Emotional, spiritual and psychological support
- Social care, including help with things like washing, dressing or eating
- Support for your family and friends.

In the community setting these professionals work closely with GPs and other community nurses to plan and deliver care.

Hospice care is a style of care rather than care provided in a specific building, although there are hospices where people can stay for varying lengths of time or go for day care. People may stay in a hospice for a while to allow some respite for their carers at home or to stabilise their pain or condition.

Being in a hospice is not like being in hospital. Hospices are places where people can go to for specialist care and all kinds of support, and where families and friends are always welcome. They are designed to be pleasant places where people can spend quality time with their friends and families.

**A**

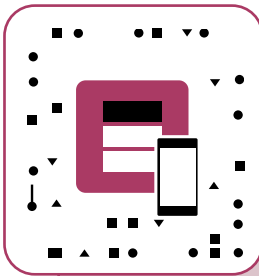
#### **Activity 4: Hospice Care UK**

**Watch this short video showing how hospice care works in the community. The video was produced by Hospice Care UK, a national charity for hospice and palliative care. This will help you to answer your assessment questions. Make notes in the space below.**

**[https://youtu.be/c\\_4KEE-e9yY](https://youtu.be/c_4KEE-e9yY)**



Don't forget to point your lens at this icon, to listen to some handy tips from your Virtual Tutor.



### Let's Summarise!

Take a few moments to answer the following questions to help you summarise what you have learnt in this section. This will help you answer the upcoming assessment questions.

1. An elderly person means someone over the age of 60.

True

False

2. Where you live has an impact on how long a person might live.

True

False

3. State one positive and one negative impact of the ageing population on society.

Positive impact:

Negative impact:

4. Name five types of care settings for the elderly.

1.

2.

3.

4.

5.

Check your answers by looking back over this section.



**Congratulations, you have now completed Section 1.**  
Please now go to your assessment and answer Q1 to Q4.