**Unit 7: Principles of Safe Practice in Health and Social Care**

**Case study 1: Beeches Drop-in Centre**

The drop in centre caters for adults of all ages many of whom, are homeless. All of the users of the service have social and often health issues. They live chaotic lives and do not always get on with each other. There have been incidents of violence resulting in individuals being injured. No records of incidents and accidents are kept as the book got lost and has not been replaced.

Although they are not supposed to, users of the service are often drunk when they attend. The staff ask them to leave but the offenders tend to sit outside harassing any late comers.

Several of the users of the service have mental health problems including depression and anxiety. Other users of the service tend to isolate these individuals, often refusing to speak to them.

Two of the individuals have a phobia to certain foods which can make mealtimes difficult. Several of the users of the service have suffered abuse.

The centre is staffed by two full time workers, one of whom is a Social Worker and the other a Registered Nurse. There are also several volunteers, some of whom come five days a week and others one or two.

There is a signing in and out book at the centre however, some of the users of the service cannot read and write and others are too concerned with their own issues to bother signing the book.

This means that no record is kept of who attends. The full-time staff do occasionally take a register but this is only when they remember.

The building is old and belongs to the local council. There is no step-free access. The kitchen is old and difficult to clean and the fridge doesn’t always seem to work. The fire doors are kept locked to prevent users of services going into the yard at the back to use drugs.

**Case study 2: Wellings NHS Trust, Ward 3B**

Ward 3B is a female surgical ward with 32 beds in bays and two side wards for more serious cases. Amina Patel is the ward manager and she is supported by a team of registered nurses, nursing associates and healthcare assistants.

The keypad used to gain entrance to the ward is broken and so the doors are propped open to save the staff having to leave their duties to let people in.

The service users come into the ward for surgical procedures, some of which are planned and others are emergency procedures

Lizzy D. was admitted to the ward for a routine procedure on her left hand. The surgery went smoothly and there were no complications. Following a visit from her husband, Lizzy complained of pain in her hand and on examination, the nurse on duty, noticed that it was swollen and discoloured.

Lizzy stated that this had ‘suddenly happened’ and that she could not explain it. She was given medication to reduce the swelling and the pain. Because the nurse was busy, she did not record either the issue or the medication given to Lizzy. This particular nurse often forgets to record medication, and Amina has spoken to her about this on several occasions.

The following day, Lizzy’s husband again visited and following this, Lizzy complained of the same swelling and pain in her hand. The husband had insisted on drawing the curtains around the bed at the visit, stating that he had important mattes to discuss with his wife. Visiting is never supervised on the ward, and staff leave people to chat.

Amina administered pain relief but didn’t record this. She did question Lizzy about her hand, but Lizzy turned her face away and refused to answer.

**Case study 3: Firs Residence**

The Firs Residence is a 10 bedded facility for older people who have dementia. Each resident has their own room on the ground floor. There is also a day room, a dining room and a garden. The garden gate is broken and so occasionally the residents wander out and two have been brought back by a concerned police officer, who found them wandering in the local park.

Elise J. has recently been admitted to the residence, following the death of her husband who was her fulltime carer. Elise has bouts of confusing and can become angry if she does not receive a satisfactory answer to her questions. Elise is a retired university lecturer and insists on being called Doctor, rather than by her first name.

 Elise has complained that she has lost items from her room since she arrived. These included a hairbrush and a gold bangle. Both were found, hidden under a pile of clothes on the chair next to the bed. Later that afternoon, Elise complained that money had gone from her purse, after her room was cleaned.

Because of the previous incident, where it was assumed that Elise had hidden the items herself, no one took any notice. A member of staff was heard telling Elise, that it would turn up and not to make a fuss.

Elise became distressed and then angry, stating that no one cared now that she was old and ill. Because of her dementia, Elise finds it hard to express herself and feels that she is being taken advantage of.

The day manager recorded in the diary, that Elise had misplaced the money but that it had now been found in a drawer, which it had not.

**Case study 4: ‘Going Forward’ Training Centre for Young Adults with Learning Disabilities.**

‘Going forward’ is a training centre which works with young adults who have learning disabilities. The aim of the centre is to support the development of independence and life skills.

The centre is staffed by learning disability registered nurses and other staff who have an NVQ at levels 2 and 3.

Sally D. is a regular attender at the centre and has recently formed a relationship with Theo C. who also attends. Both of the users of the service would like to work in the catering industry and are attending a course at the centre.

Sally and Theo both have epilepsy and take regular medication which should be given out by a member of the team, who is authorised to deliver this.

Not all of the staff are registered to deliver the medication but do sometimes give it out, if the centre is busy and the correct person is not available. On Wednesday, the team forgot to administer Sally’s medication on time resulting in her having a seizure. This distressed a number of the users of the service whose parents complained to the manager.

The parents demanded that Sally should be excluded from the centre, stating that her condition was a risk to others. Sally’s mother also wanted to complain about the delayed medication, but was told to find the form on-line. As she also has learning disabilities, Mrs. D. could not do this without support, which was not offered.