

Ethical dimensions in the delivery of quality care by direct care workers: human rights and safeguarding aspects

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The research

- Draws on qualitative interviews collected from 300 employers, frontline care workers and service users
- Part of the Longitudinal Care Workforce Study, conducted with colleagues from the Social Care Workforce Research Unit, King's College London
- Funded by the English Department of Health



Interviews:

1) Frontline Care Workers

	T1	T2	Total	Female	Male
Site A	12	18	30	25	5
Site B	14	19	33	27	6
Site C	11	16	27	21	6
Site D	16	13	29	25	4
Total	53	66	119	98	21

Interviews:

2) Employers

	T1	T2	Total	Female	Male
Site A	20	11	31	19	12
Site B	14	13	27	21	6
Site C	18	11	29	25	4
Site D	19	15	34	33	1
Total	71	50	121	95	26

Interviews:

3) Service Users and Carers

	Users	Carers	Total	Female	Male
Site A	15	3	18	9	9
Site B	11	0	11	7	4
Site C	5	10	15	12	3
Site D	13	3	16	12	4
Total	44	16	60	40	20

Moral distress

The pain or anguish affecting the mind, body, or relationships in response to a situation in which the person is aware of a moral problem, acknowledges moral responsibility, and makes a moral judgement about the correct action

(Nathaniel, 2004)



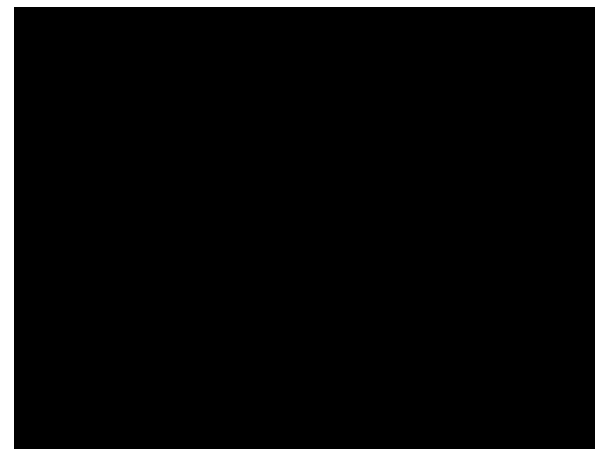
When does moral distress occur?

- Tension between rights and protection
- Challenging behaviour
- Conflicting expectations and perspectives
- Responsibility and decision authority
- Inability to speak up
- Lack of training and support
- Communication, time and 'tasks'



Human rights, protection and care

- ‘Preserved dignity’
 - Personalised care
 - Cultural aspects
 - Respect
 - Sensitive listening
 - Advocacy
- Safety measures:
 - Restraints; Physical, chemical and environmental
- Emerging issues: electronic surveillance, tele-care and rights
 - Being constantly monitored and watched



Risk



Priorities, risk and responsibility

There is so much paperwork. If a resident falls or trips over a pair of steps, it's not because oh he's tripped up. They don't do that any more. Look where you are going. You can't say that. You have to write a risk assessment out. ... I don't know whether you've got any children or not, but if you had a child with you and you might say, pick your feet up boy. Pick your feet up. You can't tell them that. It does, [she points to her heart] that's exactly how it makes you feel. They can't go out in the snow, because they might fall over and hurt themselves. The joy that I had when I was a kid of running in the snow and rolling in the snow and that sort of thing is lost for them.

(Home care worker, 2105008)

Challenging behaviour



When things can get out of hand

- Alzheimer's patients when they go against you, they have the strength of ten people. You will not get anywhere with them. They will be the winner. They can't help it. When their brains tells them to do something they do it. It doesn't matter what you do you can forget about it.
- We are trained just to leave them to calm down and then go back again and you might have to go back ten times before they will let you do something.

(Care home worker, 1033011)

Aggression and Restraints

We have to go [training to deal with conflicts]—I think it's a two day course.

We don't restrain any more. It's all de-escalation techniques.

We've had to change our practices, because it used to be they are kicking off in there, showing violent tendencies or anything like that. We used to just take them to the floor. There was no de-escalation. It was you just take them to the floor for their own safety. It took a long time for people to get out of that mindset. But now with de-escalation techniques and they are marvellous.

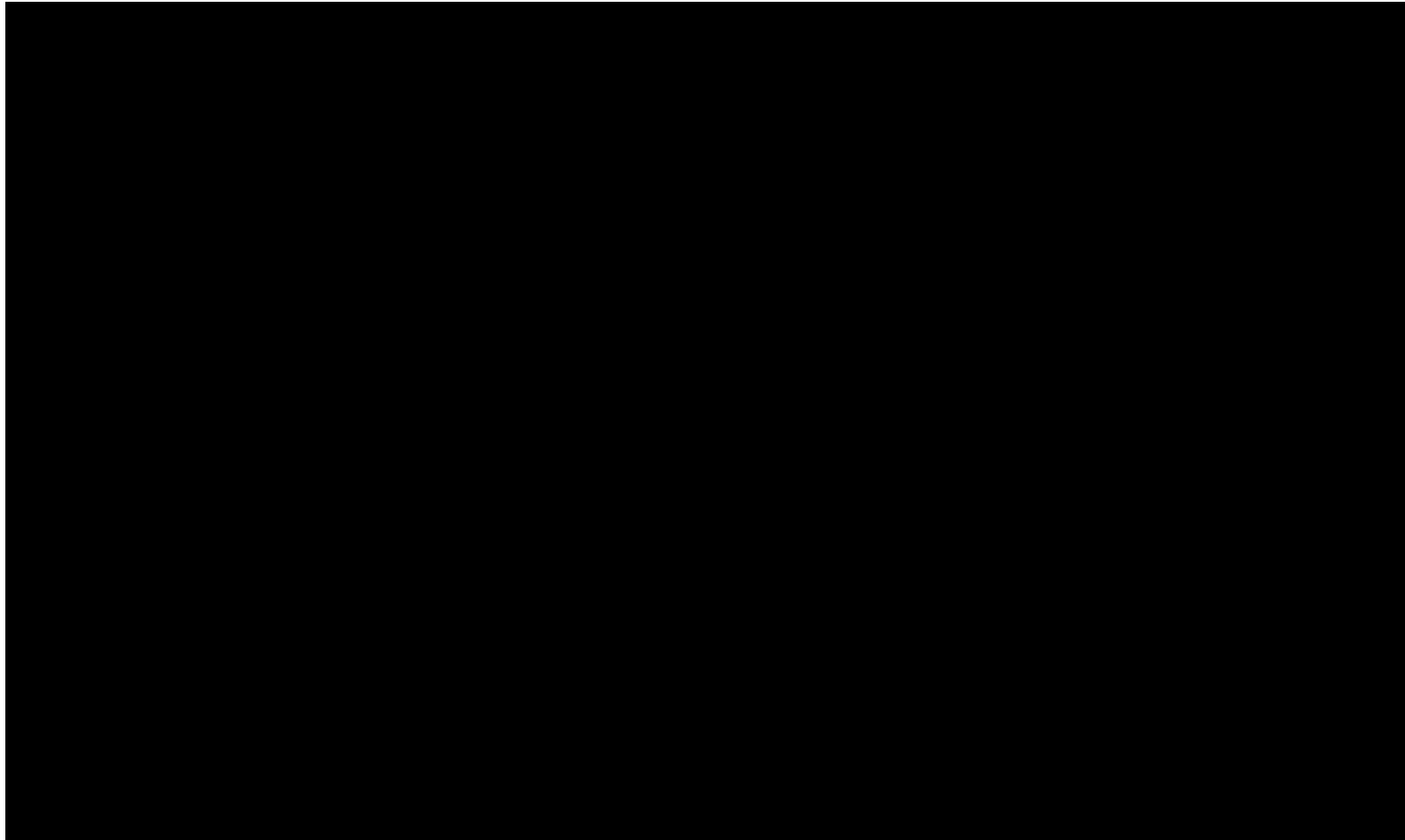
(Care home worker, 2105010)

Interpreting challenging behaviour

I've worked in mental institutes and there are high risks and it used to be called, danger money, because you could expect to either spend your whole day restraining somebody or going through this intensive training programme that teaches you how to be abusive to save your own life having worked with learning disabilities and autism, I disregard challenging behaviour completely. I think it's a form of communication. I think when we experience behaviours from individuals it's because we haven't communicated appropriately.

(day centre worker, 2277005)

Conflicting views, how do we establish the 'truth'?



Care staff can easily get accused

We took Paul to the doctors and again because of the autism in that communication obstacles, he couldn't translate the actual problem to the doctor very well and Paul had—with [specific] Syndrome they bruise easily. They can just accidentally walk into a table and they get a massive bruise or something like that. The doctor decided making an investigative questions and enquiries about abuse. Paul only went there for like a cold or something. It's a whole thing that doctors and nurses just assume they know better.

(Residential care worker, 2105012)

When it is difficult to establish the accuracy of a story

When the care workers came on duty she [a dementia sufferer] was fast asleep. When she woke up in the morning, holding her hand in her other hand and pulling herself from the bed. I thought it was broken. It was swollen. She kept telling I fell out of the bed. We checked on her every single hour [in the night]. If she fell from the bed, she would not be able to get up herself and get herself back into the bed. I was just asking her, who put you back? Who helped you back into the bed? She couldn't remember. Sometimes you just have to be very careful not to accuse somebody. She has dementia and she is confused.

(Nursing home supervisor, 210056)

Responsibility and decision authority

it is **not only** for
what we do that
we are held
responsible, but
also for what
we do not do.

Moliere

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Feeling unable to take action

There has been recently a situation where I thought a client that I support was actually in danger. But, the services out there that I can contact thought differently. Then I have to accept it. And then I know that the responsibility is no longer mine, because I have handed it over and I've given somebody all of the information. So, in that situation I have no alternative but to accept what they say, because they are more senior than me.

(Frontline care worker, T2)

Going on that extra mile .. When it's felt the right decision was not taken

Somebody from social services came, she was very young and I don't think she grasped the situation at all.

She just said, do you want to go into a home or do you want to stay in your own home and of course the lady said, I want to stay here, nothing we can do—we have to somebody in to say they are mentally incapacitated to make that decision.

How long will that take? Three weeks. I said, she might be dead by then.

Can we have a hoist then, please to get her in and out of bed. That will take a few weeks as well. She will be dead by then.

It ended up with the three of us having to go to care for her, because for fear of hurting her and just to get her bathed and into bed comfortably at night. We just didn't get any support at all in that one.

- (home care manager, 2277003, T1)

Whistle-blowing



The ability to ‘whistle-blow’

There is one lady, she’s on [medications] she is so prone to bruising. It means she shouldn't be done by one—even if she’s very tiny, little. You can’t do her alone.... There was one particular carer just moved her to like little scratches of skin peel and I would feel is an incident and I just took to my senior and I said, I keep telling her not to do her by herself. She keep doing her by herself. That is not abuse, but it’s carelessness.

(Frontline care worker, 1777002, T2)

Outcomes

- On the workforce
 - Emotional strain and burnout
 - General health and well-being
 - Work-life spill over
 - Self-value and appreciation
- On the system
 - Job performance
 - Turnover
 - Quality of care



Emotional strain

[What is bad about the job] Constant rushing. Racing from one house to the next. You've got a deadline to be there and panic, usually. Breaking the rules of the road, because you want to get there very quick.

(home care worker, 2288001)

People just resign ... at times, after a year, even huge turnover in management, it's affected in that house as well, because of the workload, staff conflict. Staff not feeling they are supported enough.

(Employer, 1072001)

Conclusion

- Conflict is an inherent part of care work
- There are usually many 'right' but 'different' perspectives
- Training, support and personality are key factors in the ability of workers to deal effectively with conflicts
- Interventions are needed on both individual and system levels
- Inability to make decision and feel supported increases the risk of moral distress

Thank you for listening

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