

### **CASE STUDY –Mrs B**

Mrs B originally contacted the Single Point of Access with a request for help from an Occupational Therapist to assess and provide advice on adapting her bathroom.

#### **Functional Difficulties:**

Mrs B is 46years old and has secondary progressive Multiple Sclerosis, originally diagnosed around fourteen years ago.

Her mobility varies from day to day - some days she is able to walk indoors around the flat, holding onto furniture and walls for support, but on a bad day she has severe muscular spasms and is so limited she has to crawl or simply remains in bed.

Mrs B is also prone to falls and her balance is very unpredictable. Mrs B has a wheelchair and a glide about chair but space was so restricted and cramped that she chooses not to use the items, compounding the risk of falls.

Mrs B struggles with all daily living tasks but she strives to be as independent as she can be and always tries to manage self-care activities on her own. Mrs B has felt a spiral of decline because of her situation and she has been unable to maintain her wellbeing outcomes and what is important to her

#### **Social Situation:**

At the beginning of the assessment, Mrs B was living with her husband in a general needs flat, rented from a local housing association. They have no children or close family. Mrs B was previously employed within a Local Authority, but she had finished due to ill health. Mr B is a Carer for his wife, but works full time for a Local Authority. Mrs B had been able to care for herself with support from her husband, but this was becoming more difficult, particularly as Mr B has to work away for six separate days in every month, including overnight stays.

During these periods of absence, Mrs B is totally alone and has no support from family or friends. Mrs B's Parents and Mr B's Father have all passed away and Mr B's Mother is unsupportive.

#### **Environmental Difficulties:**

At the beginning of the assessment, Mrs B was struggling to manage the six steps up to the front entrance door of the building and the narrow ginnel at the rear. None of the entrances were wheelchair accessible and she was virtually housebound.

Internally, Mrs B's Flat was small and had very limited space in all the rooms, so space for storage of any necessary equipment was severely restricted and cramped. The turning areas were very restricted and all rooms limited in space for circulation and storage of essential disability equipment.

There was a small garden terrace just outside Mrs B's window. In the past, this had been a source of immense pleasure, purpose and relaxation for Mrs B, but sadly, in recent years she had found it increasingly difficult to access the steps that led up to this.

What Matters:

On assessment, Mrs B originally advised that being able to safely access her bath was her main outcome, however on further assessment and discussion, it was very clear that Mrs B was struggling to cope in her existing accommodation and she wanted to be able to enjoy the outdoor air and a small section of garden. Wheelchair access was very limited and significant adaptations were required in the home, including level entry, wider doorways and bathroom adaptations.

After exploring the feasibility of altering the existing accommodation it was felt that the accommodation was unsuitable with the likely progression of her disability and Mrs B was in agreement that she would be unable to remain in her existing accommodation in the longer term. Mrs B was keen to remain in the same town she lived and we discussed a referral to the Denbighshire Specialist Housing Group for a more suitable property. We discussed what was important and Mrs B was clear that she would like to move to a ground floor flat where she could have access to a small section of garden and some raised planters.

After a few unsuitable offers of accommodation, Mr and Mrs B were eventually considered for a newly built complex of six flats in the town she lived. The suggested property was part built and in the process of going up. It hadn't been built to a wheelchair standard, but it was on the ground floor and had a level entry. We looked at the property to determine suitability and we were able to influence a programme of small adaptations, including further widening to some doors, creating an additional opening between bedroom and lounge, bathroom adaptations and specialist toilet. Most importantly though, we were able to request a paved access to a small section of private garden with raised borders and a dropped kerb to the car park. This was an essential outcome for Mrs B's continued good health and wellbeing.

Final Outcome

Prior to moving, Mrs B was really struggling both physically and mentally with her condition. We were at the stage of considering care options and the possibility of a direct payment to fund support, particularly during the day and overnight when her husband is away with his work.

Since moving however, Mrs. B has found a newfound energy. She is able to access all areas of her new flat, internally and externally, using a small powered scooter (purchased privately).

She even hangs the washing out on a lowered washing line and most importantly she is able to do some gardening in the raised planters, whilst sat on her scooter

There is ample space to get around and do the things that matter most. At the present time she no longer needs to consider care support as she has more energy to manage independently.

Mrs B. states that "Help comes when you need it most!" and says that "we have changed her life in ways that she had given up on" .....