



M

REPORT

2024-2025

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# INTRODUCTION

**This document reports the observations, insights, and recommendations based on Myfolks' support for M over the past year.**

We have categorised the findings into key areas of impact: emotional well-being, nutrition, physical condition, cognitive health, safety, and support during significant events. For each category, we will provide an overview of observations, insights, and practical recommendations for M's continued well-being. Additionally, we include comparative cost savings for Myfolks visits versus alternative care options. Finally, we will address potential risks to M over the next 3, 6, and 12 months and offer proactive recommendations for mitigating these risks.

# M'S STORY: COMPASSION IN ACTION

## BACKGROUND

## OUR PURPOSE

M loves to chat. We usually take a sweet treat to share. We share a cup of coffee and the sweet treat together. Visits include listening to music, doing M's nails, reading the newspapers - M likes to read them out loud to the Myfolkser. We have often prepared food, thrown away out-of-date food, checked bedding and washed and replaced it where necessary. We regularly cleaned the kitchen and bathroom. We help M to eat her lunch, that often would otherwise go uneaten, as the carers don't have time to sit with M.

Across the whole year, M has had only 3 different Myfolksters. One was consistent throughout the year, except when she was away due to sickness. One was a replacement for the Myfolkser on sick and the third became a consistent visitor when visits were increased to two per week in autumn.

We celebrated M's birthday with her by taking a birthday cake, singing "Happy Birthday" and some small gifts. She often says we "spoil" her.

# EMOTIONAL WELL-BEING & SOCIAL INTERACTION

M thrives on familiar interactions, visibly lighting up during visits and engaging in activities like crosswords, music, and reminiscing. She expresses concerns about loneliness, highlighting the need for regular companionship. Consistent routines, memory-prompting activities, and meaningful conversations help reduce isolation and foster engagement, reinforcing her sense of comfort and connection.

## OBSERVATIONS

- M shows visible happiness during visits, her face lighting up when she sees familiar visitors.
- She enjoys activities such as crosswords, music, chatting, and reminiscing about her past.
- M has expressed worry about being lonely and asks if visitors will return.

## INSIGHTS

Creating a good impact report means being transparent with your audience. Back up your claims with relevant data. Keep your sentences concise when necessary, but dive into detail when it comes to qualitative and quantitative evidence. Remember: an impact report is a combination of understanding your mission, your work, and your audience, and communicating that clearly with the rest of the world.

## RECOMMENDATIONS

- Continue using memory-prompting activities (old music, photo albums).
- Encourage visitors to maintain routines and familiar conversations to reinforce M's sense of comfort.

# NUTRITIONAL CHALLENGES & APPETITE

## Observations:

- M often refuses meals prepared by carers but will eat if spoon-fed or encouraged.
- She tends to prefer sweet treats like cream cakes, biscuits, and chocolate over savoury meals. depending on the results of the report
- Untouched breakfast bowls and uneaten lunches are common.

## Insights:

- M may experience appetite fluctuations due to dementia progression.
- Sensory engagement (conversation and familiar foods) increases her likelihood of eating.

## Recommendations:

- Offer soft, finger-friendly foods and small portions of M's favourite treats.
- Continue using hydration aids like Fortisip to maintain calorie intake.
- Liaise with M's family and carers to adjust meal plans and monitor hydration closely.

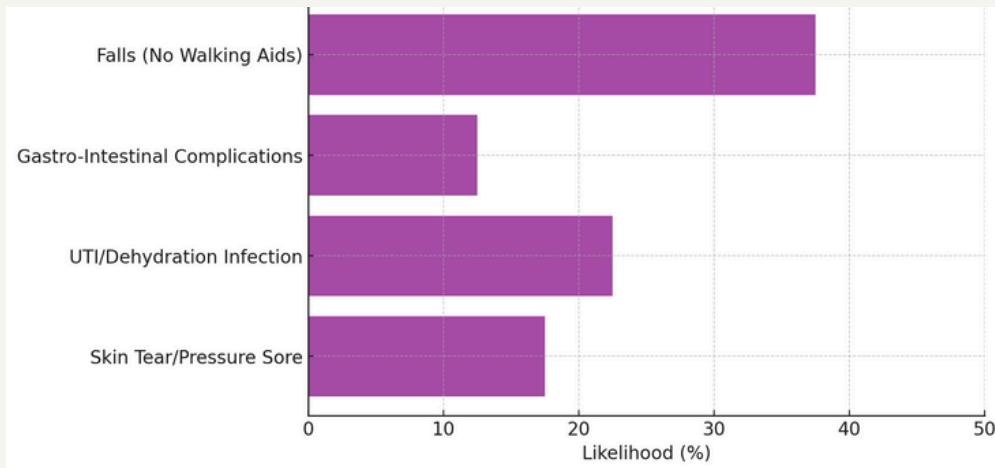
# COGNITIVE HEALTH & MEMORY

OBSERVATIONS	INSIGHTS	RECOMMENDATIONS
M shows confusion about certain details (e.g., looking for her false teeth, mentioning her twin as if still alive).	M's cognitive decline is progressing, but she continues to find joy in familiar routines and shared memories.	<ul style="list-style-type: none"> <li>• Continue using life story conversations and familiar stimuli (e.g., old photos, favourite music).</li> </ul>
Despite confusion, she retains long-term memories and enjoys reminiscing about her past.	Structured conversations and familiar prompts help ground her during visits	<ul style="list-style-type: none"> <li>• Support from Myfolks or a similar organisation is important for M's continued well being.</li> </ul>
Deterioration in M's cognition and wellness was evident during the period of absence of M's regular Myfolkser and it recovered when the Myfolkser returned.		<ul style="list-style-type: none"> <li>• Gently redirect M when confusion arises to avoid distress.</li> </ul>

M faces hygiene challenges, with recurring reports of soiled bedding, missed carer visits, and signs of neglect. Myfolks visitors have played a crucial role in maintaining hygiene, reducing infection risks, and preventing hospital visits in 2024. Ongoing monitoring, improved care coordination, and consistent hygiene routines are essential to prevent infections, falls, and related complications.

# PHYSICAL CONDITION & HYGIENE

## Potential Hospitalisation Triggers:



20%

Skin tear or pressure sore

25%

UTI or dehydration-related infection

45%

Movement without walking aids leading to falls

## Observations:

- Recurring reports of soiled bedding, clothing, and strong odours.
- Some visits note missed carer visits and signs of hygiene neglect (e.g., soiled pull-up pants in the bath).
- There have been instances of bruises and possible tummy bugs.

## Insights:

- M is at risk of developing skin conditions or infections due to hygiene challenges.
- Myfolks visitors have played a key role in maintaining hygiene, changing bedding, and cleaning the bathroom, door handles etc
- It is noteworthy that M did not require any hospital visits at all during 2024, which is unusual for someone in her position.

## Recommendations:

- Regularly communicate with M's care team to ensure consistent hygiene routines.
- Proactively monitor for any signs of infections (e.g., UTIs or rashes).
- Advocate for improved scheduling consistency to ensure carers are not late or absent.

# SAFETY & PRACTICAL SUPPORT

M faces safety risks at home due to unlocked doors, spills, and missed carer visits affecting meal prep and safety checks. Limited mobility and memory lapses increase vulnerability. Myfolks helps reduce risks by addressing hazards and ensuring a safer environment. Regular safety reviews, improved equipment checks, and additional safety measures like motion sensors are recommended.

## OBSERVATIONS

- Reports of unlocked doors, spills, and hazards (e.g., food left out).
- Missed carer visits have resulted in gaps in meal preparation and safety checks.
- Issues with equipment (e.g., missing ignition wand) have been noted.

## INSIGHTS

- M's safety at home could be at risk due to her limited mobility and memory lapses.
- Myfolks visits help mitigate risks by addressing hazards and ensuring the home environment is safe.

## RECOMMENDATIONS

- Address safety concerns with her family and care team to ensure equipment is functioning and that M's living space is hazard-free.
- Consider adding simple safety measures, such as automatic lights or motion sensors.
- Conduct a periodic review of home safety to check for new risks.



# PROJECTED RISKS & RECOMMENDATIONS

- **Next 3 Months:**

- **M may experience increased confusion and dehydration during winter. To mitigate this, hydration reminders and easily accessible warm fluids should be prioritised.**

- **Next 6 Months:**

- **Hygiene-related infections (e.g., UTIs) pose a risk, requiring close monitoring and early intervention with her GP. Additionally, the risk of falls or hospital admission increases, making consistent use of walking aids and a fall prevention review essential.**

**Next 3 months:**

- Risk: Increased confusion and potential for dehydration during winter.
- Mitigation: Increase hydration reminders and ensure M has warm, accessible fluids.

**Next 6 months:**

- Risk: Potential for infections (e.g., UTIs) due to reduced hygiene.
- Mitigation: Monitor for early signs of infection and liaise with her GP when concerns arise.
- Risk: Increased risk of a fall or hospital admission.
- Mitigation: Ensure regular use of walking aids and consider reviewing M's fall prevention plan.

**Medium Risk Factors:**

- **Dehydration & Confusion (Winter Months):** While concerning, this can be mitigated with hydration reminders and warm fluids, making it a medium risk with proper management.
- **UTI/Infection Risk (Next 6 Months):** Regular monitoring can help prevent serious complications, but untreated infections could escalate, making this a medium risk with vigilance.

**High Risk Factors:**

- **Increased Fall & Hospital Admission Risk:** Falls are a major concern in elderly individuals with mobility issues. Given that falls can lead to severe injuries and hospitalisation, this is a high-risk factor that requires proactive prevention (walking aids, fall prevention plan review).

**Overall Risk Rating: Medium to High**

While dehydration and infection risks can be managed with timely interventions, the fall risk is more serious, making proactive safety measures essential.

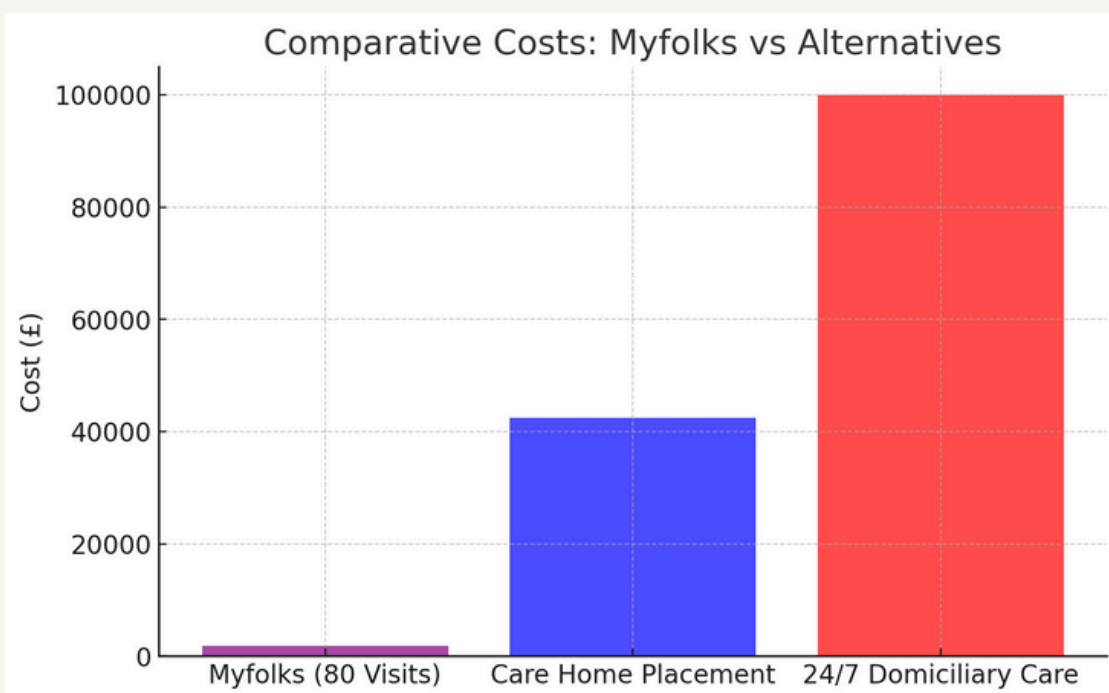
# COMPARATIVE COSTS:

## MYFOLKS VS

## ALTERNATIVES

- **Myfolks Support:**
  - 80 visits in 2024: £1,750 (with block booking discount).
- **Care Home Placement:**
  - Average annual cost: £35,000–£50,000.
- **24/7 Domiciliary Care:**
  - Average annual cost: £90,000–£110,000.

Although Myfolks visits were initially once per week, then moving to twice per week during the course of the year, it can be seen that the visits provide significant benefit and value for money when compared to other options. Myfolks plays a significant part in delaying the need for more intense care provision. It seemed likely that M would need to go into a care home in August when her usual Myfolks returned from sickness absence, M rallied and it was not necessary to place her in a care home, thus avoiding a distressing change for her and significant additional costs, that may have resulted in the sale of her home.



# CONCLUSION

Myfolks' visits have made a tangible positive impact on M's emotional, physical, and cognitive well-being. By providing social stimulation, practical support and assistance, Myfolks has played a key role in preventing hospital admissions and maintaining M's independence at home, and enabled M's family to manage family life, including working full time, bereavement and a child with a fracture and holidays etc without as much pressure to also look after M.

**Note: We have permission to compile this data. It will not be sold for any commercial purpose. Together with anonymised reports into others will be used to better understand the effects of worsening health in ageing to help to identify and monitor trends and to lead to improvements in support.**