**Unit 4 M2 - Case study Theories of Ageing**

Beatrice is 90 years old, she is a widow and lives on her own in a three bedroomed house. Her married daughter sees her every Saturday but lives over one hour away by car. Beatrice enjoys reading, but listening to the radio and watching TV are becoming more difficult as she is quite deaf. Many of her friends have died and she has no contact with her neighbours, as many of her original neighbours over the past 60 years have either moved away or died.

Beatrice has high blood pressure and diabetes, she sees the doctor once a month to check her Blood Pressure and her diabetes. Her General Practitioner prescribes medication for her disorders and the local pharmacy deliver her medication to her when she orders a repeat prescription from the surgery.

Beatrice’s diabetes has caused problems with her sight and also with ulcers on her legs, the district nurse comes to check her blood sugar levels and her insulin ( Beatrice can inject herself each day but needs the amount checking to ensure is she giving herself the correct amount). The district nurse also cleans and dresses the leg ulcers on alternate days.

Beatrice is still very independent and although she has trouble walking because of arthritis she goes to go to the local post office every Tuesday to collect her pension, she does this by phoning the local dial a ride service to take her for a small charge.

On Thursday’s the home help organised by the social services comes to give the place a clean and every fortnight a volunteer from the local Age Concern comes to do her shopping.

Every six weeks Beatrice attends the day centre, where the chiropodist attends to her feet and she also has her hair done by the visiting hairdresser. Beatrice also has lunch there but finds it difficult to talk to people due to her hearing and most people go more often and appear to have their own friendship groups.

Last year Beatrice was in hospital for two weeks after a fall the discharge team discussed a package of care for Beatrice and before she left hospital the occupational therapist checked her home and recommended that some rails should be fitted on the entrance doors and a stair lift should be installed. The home help was organised and she started having meals on wheels when she came home, but she never knew when her lunch was going to arrive so now she uses a company who delivers a range of frozen meals for the month, that she can keep in the freezer and chose what she wants to eat that day.

Beatrice wears an alarm round her neck, so if she has a fall she can summon help.