

# **Case study 'Elaine' – Outcomes-focused conversations**

This case study can be used as individuals or in teams to support practice development in relation to outcomes-focused conversations. It incorporates reflective questions and suggestions for tools designed to support continuous professional development relevant to practitioners with varying levels of experience.

# Part one – Preparing for conversations about outcomes

Elaine is a well-educated lady aged 87 years old; she is very sociable and has a bright lively personality. She was born in 1930 and married her husband, a farmer, in 1943. They had two daughters, Francis and Harriet. Elaine separated from her husband when she was in her 40's but stayed in their farmhouse running it as a small holding with, amongst other things, some sheep. The farmhouse is over a hundred years old and has never been modernised. Elaine is close to her youngest daughter, Harriet, who still lives near to her, but says she feels quite intimidated by her eldest daughter, Francis, who has only recently moved back into the area after 20 years. Elaine stopped farming her sheep two years ago, but remained active walking her dogs every day. Elaine had always been very independent, bringing up her daughters and managing the smallholding on her own. However, arthritis in her back and hips began to badly affect her mobility. She now has severe rheumatoid arthritis throughout her body, and has had several falls resulting in hospital admissions over the last 12 months. Elaine had reablement on her last discharge from hospital, but was re-admitted to hospital after two weeks due to another fall. Her daughters do not get on with each other, and are in conflict over what support would be best for Elaine as her support needs increase.

Elaine has a social worker named Chesney, whom she first met just before her first hospital admission and who has visited her at home and in hospital several times since. Chesney prepares to visit Elaine on the Rehabilitation ward. Elaine has been assessed as medically fit for discharge and the Ward Manager is keen to for her to be discharged as soon as possible.

## **Reflective questions**

- Q: What might Chesney need to do to prepare for her visit to Elaine?
- Q: How might she plan for the conversation?
- Q: What information might she take with her?

# Tools to support good practice and professional development

Preparing for the conversation Ecogram Core skills: Universal questions Core skills: Maintaining an assets-based conversation

# Section of the website to support this stage in a conversation

Preparing for conversations about outcomes



#### Part two – Having conversations about outcomes

Elaine says she 'doesn't suffer fools easily' and does not like it when she feels people are telling her what to do, not taking her views in to account and making decisions about her without consulting her. She is quick to pick up on what 'people are up to', is very practical in her approach to life and says what she thinks. She likes Chesney as she finds her respectful and easy to have a conversation with. Elaine finds that Chesney listens, 'no really listens', and has taken the time to get a good understanding of what is important to Elaine. She feels that Chesney shows empathy, 'not sympathy mind' about how she feels about losing her independence. Chesney doesn't rush her to make decisions about her support needs nor does she try to tell Elaine what she should do about the difficulties she is experiencing. Chesney is more genuinely interested 'almost curious' to find out how Elaine feels. This makes Elaine feel listened to, valued and empowered her in the decisions she makes.

#### **Reflective questions**

Q: What verbal and non-verbal communication skills might have Chesney used to build her relationship with Elaine?

Q: How can Chesney keep the assessment in a conversational style and support Elaine to identify her desired outcomes?

Q: What approaches might Chesney take to ensure she understands what Elaine's strengths and assets are?

Q: How might Chesney keep a record of the conversation but still assure Elaine she is still really listening to her?

#### Tools to support good practice and professional development

Working with outcomes tool Outcomes wheel Core skills: Active listening Core skills: Powerful questions Core skills: Universal questions Core skills: Keeping a conversational style Core skills: Maintaining an assets-based conversation Tips for recording

#### Section of the site to support this stage in a conversation

Having conversations about outcomes Recording conversations about outcomes



#### Part three – Recording the conversation

Chesney visits Elaine on the ward, her eldest daughter Francis is there when Chesney arrives. She is polite when she greets Chesney but remains seated in her chair which is angled slightly behind her Mum not in her direct line of vision. Francis has her arms folded and her legs crossed and faces slightly away from Chesney. Chesney notices a change in Elaine who is sitting in a chair by her bed. The usual spark in her eye has gone, her face looks drawn and her body is tense, her hands are clasped together on her lap. Chesney uses a conversational style and chats to Elaine about how she initially felt to be back home and how she found the period of reablement. She faces Elaine and slightly leans forward using reassuring language – she frames her questions carefully asking how Elaine felt when she was at home, asking what she thought was good as well as what was not so good. Elaine sounds tired and her voice is flat at first, however she sounds frustrated when she talks about the carers who came to support her reablement. Elaine seems conscious of Francis' presence, glancing around now and again as she speaks, however explains that she was pleased to be out of hospital and back in her own home.

As Chesney observes Elaine and listens to what she is saying she feels perhaps Elaine is hesitating and not telling her exactly what she thinks as she normally would. She also notices Francis is rolling her eyes as her Mum speaks, Chesney shifts her position slightly, sitting up straighter and makes direct eye contact with the daughter making sure she is aware she has seen her reaction. Chesney focuses her attention back on Elaine picking up on the frustration she can hear in her voice. She says 'I think I can sense a but in what you are saying'. She tilts her head slightly and leans forward toward Elaine to indicate she is listening. Elaine shakes her head as she tells Chesney how she feels, 'the carers just sit there pushing me to do more than I feel able to, and refuse to help me they speak down to me as if am a naughty child'. At this point Francis interrupts saying 'that is because you are behaving like one Mum'. Elaine shakes her head at this comment, her shoulder drop and her hands tighten. Chesney also shakes her head mirroring Elaine's body language, she looks directly at Francis to acknowledge she has heard her comment, she returns her attention to Elaine continuing to encourage her to talk about how this is making her feel. Francis interrupts again saying that her mother clearly cannot manage at home. Chesney feels her attitude is intimidating Elaine so acknowledges that she is sensing some frustration to from the daughter and invites her to come and sit from behind Elaine and listen to what Elaine wants to say.

#### **Reflective questions**

Q: What might Elaine's non-verbal communication be telling Chesney?

Q: What non-verbal messages might Chesney be giving Francis, consciously and unconsciously?

Q: How is Chesney using her observations of Elaine's body language to communicate effectively with her?

Q: What might Chesney look for in Francis' use of non-verbal communication find out how she might be feeling about her Mum's situation?

#### Tools to support good practice and professional development

Core skills: Non-verbal communication

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Core skills: Active listening Practitioner audit - good assessment Learning needs analysis - good assessment Audio – Shirley and Martha (reflective section)

# Section of the site to support this stage in a conversation

Having conversations about outcomes Further conversations about outcomes Reflecting on conversations about outcomes

# Part four – Further conversations

Elaine says she is struggling with her pain control as she can only take paracetamol, and the doctor in hospital reduced her dosage as she was concerned about liver damage. She tells Chesney 'At my age I would rather be pain free than worry about my liver'. She feels that the problem might be because the hospital setting is so warm whereas at home her farmhouse is much colder and has some damp. This impacts on her arthritis and this, in turn, affects her mobility. She feels the carers expect her to do as well at home as she can in hospital but the environment is very different. The physiotherapist has told Elaine that she needs to 'cooperate with the carers as she can't keep returning to hospital'. At this point Elaine looks to her daughter and says 'And you are in agreement with the physiotherapist, you think I should be in 24hr care too don't you? Maybe that is what I should do'. As she says this Elaine's head drops towards her chest and her voice becomes more quiet, she sighs and twists a hankie in her hands.

This is not a response that Chesney would have expected to hear from Elaine, as she has always maintained that she wished to stay at home and not go into residential care. Chesney is concerned that the experience with the carers, coupled with what Francis and the physiotherapist have said to Elaine, is impacting on Elaine's confidence. She seems to have lost her sense of independence, doesn't feel good about her ability to cope at home and feels pressured into agreeing to residential care. Rather than assume this is the case, Chesney seeks clarification from Elaine. 'From what you have told me Elaine it sounds as if the input from the reablement team this time has had a more negative rather than positive effect on how you are managing at home – is that right?'. Elaine looks up at Chesney and responds 'yes, that's exactly it'. Chesney continues by asking Elaine how the views of the physiotherapist and Francis are affecting her confidence, at this point Francis shifts her position again moving as if to stand up. Chesney makes eye contact with Francis and calmly asks her to listen to how her mother is feeling.

# **Reflective questions**

Q: What other questions might Chesney ask Francis to try and clarify what her feelings are about her Mum's support needs?

Q: What questions might she ask Francis and Elaine to start to try and rebuild their relationship?



Q: How might Chesney use feedback and reflection in the conversation with Elaine and Francis?

Q: What level of active listening might Chesney be using? What sort of cues might she be looking for at that level?

## Tools to support good practice and professional development

Factsheet: Non-verbal communication Active listening Powerful questions Audio – Shirley and Martha

## Section of the site to support this stage in a conversation

Having conversations about outcomes Further conversations about outcomes Reflecting on conversations about outcomes

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## Part five -

Chesney asks Elaine 'what do you need to do to feel more in control of the situation?'. Elaine just shrugs her shoulders and her eyes being to fill slightly with tears. Chesney is aware that Elaine is getting upset but is also aware that this is because being in control is very important to Elaine and it is likely the question has prompted her to reflect on this. Chesney decides to give Elaine some time to compose herself and reflects to Elaine and Francis about the lady she met 12 months ago, who 'didn't suffer fools gladly', and determined that the only way she would 'leave her home would be in a box'. She asks the question again.

Elaine is of the mind that she needs to speak to the doctor about increasing her medication to help with her pain relief as she is 'sure she will be dead long before her liver packs up'. She also explains she feels unsafe when back at home and needs some support with her personal care and meals. Her youngest daughter, Harriet, already calls every morning and has said she is happy to help her get up and dressed every day as well as supporting her with meals at a weekend. Elaine pays for a private cleaner who she feels she could ask about support with meals through the week. However, Elaine doesn't want to feel a burden on her daughter and is concerned she would have enough income to pay her cleaner to do more. Whilst Elaine is talking this through Chesney is aware that she is occasionally glancing at Francis, especially when talking about the support provided by Harriet.

Chesney informs Elaine about Carers Allowance and explains that [subject to financial assessment] she would be able to have a direct payment, which would mean she would have some additional income to use to pay for extra support from the cleaner.

At this point, Chesney focuses her attention on Francis asking her how she feels about what her mother has said, to which she shrugs her shoulders and says 'on her and your head be it if something goes wrong'. Chesney is quietly direct and responds to both Elaine and Francis, confirming that it is Elaine's right to choose where and how she wants to live her life. She asks Francis why she feels unable to support her mother's decision. Francis responds by saying she feels her Mum is making an unwise decision and putting herself at risk. Chesney asks Francis if there is anything she would feel able to do, or to suggest in terms of support, to reduce the risks and support Elaine in her decision to stay at home. Francis is silent for a short time. Chesney does her best to hold eye contact with Francis, despite Francis trying to avoid this by straightening some of the things on her Mum's bedside table, and gives her time to reflect and think. Francis decides that



she would be able to help her Mum by doing her shopping but is too busy to do anything else.

Chesney suggests that Elaine talks to Harriet and her cleaner about providing some additional support. She then asks Elaine how she would feel about having a review of her current situation with the Rehabilitation ward staff, with both Francis and Harriet present, to plan for discharge back home. She explains this would allow Elaine the opportunity to tell everyone how she has been feeling and what is important to her in terms of what she wants to happen to be supported to feel safe back in her own home – Chesney would be there to support her at the review. Chesney also suggests that that they speak to the consultant about how Elaine feels about the reduction in her pain relief medication and the impact it is having when she is at home. They will also see if there was anything else that the Reablement team could offer in terms of assistive technology or equipment that would support Elaine to feel safe and more independent in her own home. Elaine feels Chesney's support with this would help make her feel more back in control and able to say what she wants to happen.

#### **Reflective questions**

Q: What techniques has Chesney used to support Elaine to find solutions to her current situation and the way she is feeling?

Q: How else might Chesney use an assets-based approach to supporting Elaine, Francis and Harriet to be able to reach agreement over Elaine's support needs and rebuild their relationship?

Q: How has Chesney supported Elaine to feel more in control of her own life and promoted her health and wellbeing?

Q: What might have the outcomes been for Elaine without Chesney's intervention approach?

#### Tools to support good practice and professional development

Example conversations Case study – having the conversation Audio – Shirley and Martha (reflective section)

### Section of the site to support this stage in a conversation

Having conversations about outcomes Further conversations about outcomes Reflecting on conversations about outcomes

People needing support of the social care system particularly value the fact that social workers can offer both practical and emotional support. They bring the qualities of a counsellor alongside the practical skills of a hands-on worker and don't treat psychological and emotional difficulties in isolation from people's real worlds.

This was the case with Elaine as she felt the physiotherapist had been very condescending in her attitude to her, and was finding her eldest daughters behaviour intimidating which was staring to impact on her.

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