

This short story shows how personalised care using a whole family approach can help support individuals and their carers; maintaining strong family relationships and promoting the wellbeing of all involved.

Personalised care is based on 'what matters' to people and builds on their individual strengths, needs and preferences. This means understanding the context in which each person lives, their important relationships, family and carers.

Meet Dad Adi, Mum Daxa and their son Dipu.



Meet **Adi**, he lives with his wife Daxa and son at number 7. Adi is a taxi driver and very important in helping the family get out and about, particularly his elderly parents and his son Dipu.





Meet **Dipu**, He loves football and computer games. Since leaving school at 19 years old he attends college twice a week to develop his computer skills. He has a learning disability and uses a wheelchair to get about.



Meet **Daxa**, proud mum of four and a talented artist. She's the main carer for her son Dipu who needs a lot of help with personal care and day to day activities.

Meet more of the family.



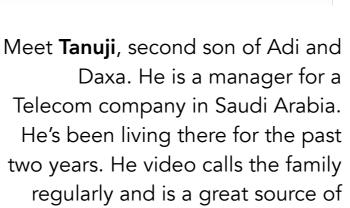


Meet Wahd, he's the oldest son of Adi and Daxa and lives at number 11 with his wife and children. He's the sportsman in the family and loves watching football with his younger brother Dipu as well as going to matches with him.



Meet Farhana, daughter of Adi and Daxa and a young carer. She's very close to her brother Dipu and has always helped a lot with his care. She is 20 years old and recently moved away to university but has regular video calls with Dipu. She is also regularly in touch with her mum and they have a great relationship.





technical advice to them all.



wife Salu. They live at number 5. Aaya struggles with her memory and Salu with his mobility. They are 'mutual carers' since they support one another but also need help from the rest of the family. They get a lot of help from their son Adi next door who helps them get out and about and helps with shopping. Daxa also supports them a lot with housework and cooking.



The family have been managing well and supporting one another without outside help until Adi dies unexpectedly of a heart attack.



Daxa no longer has Adi's support in the care of Dipu. She finds it hard to do some of the physical lifting and pushing him in his wheelchair so he can get out. She feels exhausted.





Their daughter **Farhana** is very upset and comes back from university to help. She needs to return as she is getting behind with her studies but is feeling very worried about how her mother and Dipu will manage without her.





Adi's mother Salu
becomes more confused
and his father Aaya
struggles to cope.
Without Adi's help he
cannot get to the mosque
as often as he would like.



Dipu misses his dad and worries about how upset his mum is. He feels stuck indoors without his dad to take him places. He's feeling lonely and misses meeting people.





Wahd feels torn
between supporting his
own young family and
giving time to other
family members. Tanuji
is stressed about being
so far away from home
and it's affecting his
work as a manager.

The family needs some help.

Farhana sees that everyone is struggling and is particularly concerned about her mother, Daxa who is not sleeping, is losing weight and is depressed.

Farhana persuades her mum to make an appointment to see the GP. Through a virtual appointment they explain to the GP what is happening and how it is impacting on all the family.



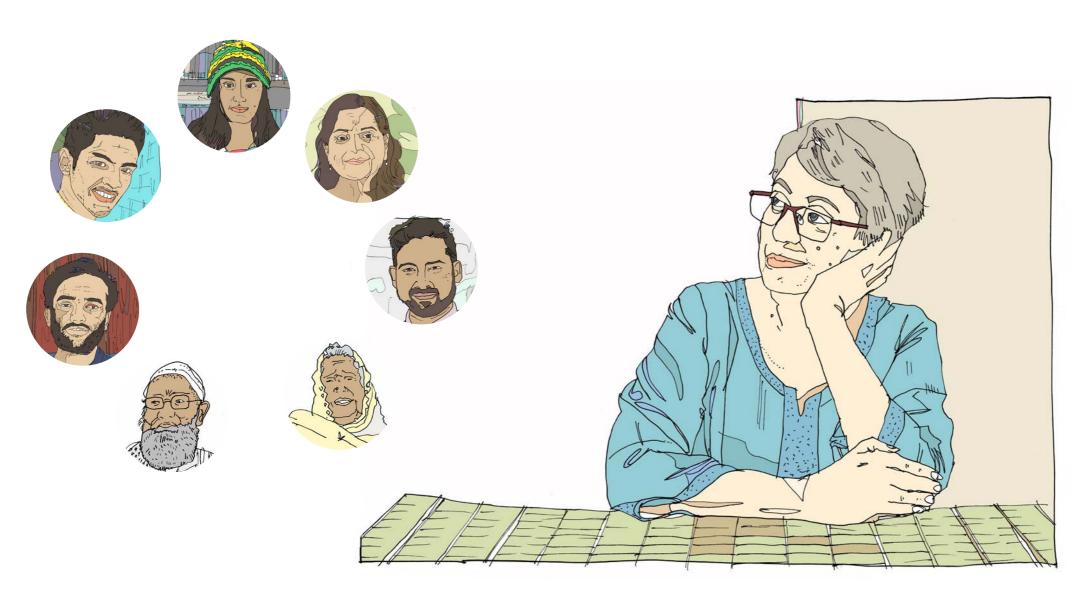
Meet Jane the surgery's Care Coordinator.

Jane has had a conversation with the GP who recognised that the family are dealing with a complex situation that is impacting on their health and wellbeing.

As a Care Coordinator Jane:



Jane meets the family.



Jane meets with the whole family (some of them join by video link). She listens to the family and explores different options with them. She wants to help the family to develop a plan that works for everyone.

Making a difference to the whole family.



Daxa gets in touch with the local NHS team and they provide a personal health budget for Dipu to have a personal assistant support him for a few hours each week. This gives Daxa more time for herself and she rejoins the Art class she loves. She has a carers assessment and has a carer's budget to pay for her art equipment. She also joins a local carers support group.





Aaya and Salu connect with a local Bengali voluntary group who provide a befriending / sitting service. Salu has someone who speaks Bengali to keep her company when Aaya goes out to the mosque and his groups a couple of times a week.



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Jane supports **Dipu** to find a local college computer course which he loves. He gets a lift from another student to get there and back independently from his family. Through his personal health budget he purchases a computer and he is able to video call his sister every weekend.

Farhana feels able to get back to university and get on with her studies knowing that her mother and Dipu have support. She has a video call with them every weekend and still helps out in holidays.



Wahd has Dipu to his house every Saturday and they watch football together or sometimes go out to a match, which they both enjoy. This also helps Daxa have a little more time to herself.



Tanuji uses his skills to help teach Daxa how to do online shopping for herself and Adi's parents, Aaya and Salu.

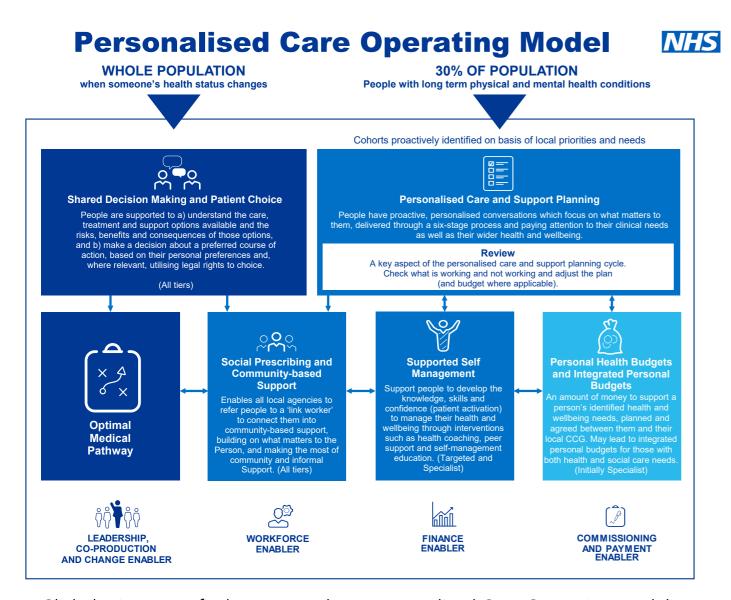
By planning together and thinking about their strengths and needs, the family are once again able to get on with their individual lives as well as maintaining a strong supportive family unit.



Personalised care that about thinks whole family can improve health and wellbeing outcomes for all.

While no one can bring Adi back, a whole family personalised approach to supporting them has helped Daxa, Dipu, Farhana, Aaya, Salu and Wahd improve the quality of their lives and meet their individual needs, whilst sustaining their caring roles.

The Chowdhury family story demonstrates how the taking a whole family approach makes use of the many of interlinked components of personalised care.



Click the image to find out more about personalised Care Operating model.

Click on the link below to find out more.

https://www.england.nhs.uk/personalisedcare/upc/comprehensive-model/



In this story you can see how Jane uses **shared decision making** and **personalised care** and **support planning** to work in partnership with all the family members and help them work out what is important to them and what would make a difference to their lives.

Using a **self management** approach, Jane supports them to make choices and to better manage their own and one another's health and wellbeing.

Personal health budgets enable Daxa to get the right equipment to return to her art class and Dipu's computer equipment provides access to a whole online community. The computer is used to keep in contact with Farhana while she is away at university.

Much of the support they need and the activities they want to access are in their local community. Through the use of **social prescribing** and **community based support** Jane is able to help them reconnect with things that are important to them, like the art class and the mosque. She also helps them connect to new things such as the Bengali Association Befriending scheme, the Carers Centre and Art Class.