

## **Rights, Will and Preference case study**

Mary was widowed aged 70, 5yrs later she met Brian, after a short courtship Brian moved into Mary's home. Mary and Brian enjoyed a companionable relationship. Mary was diagnosed with dementia about 5 years ago (when she was 80). Brian did his best to care for Mary at home as long as he could but it became impossible and a few weeks ago Mary was admitted to care. Mary's sons, who heartily disapproved of Brian, have stopped Brian's contact (they have authority under a Power of Attorney)

The care home think it would be better to allow Mary to see Brian, as she keeps asking for him. She is declining food, is clearly miserable, is withdrawn, is not socialising with other residents, she is regularly found crying and her bed wetting seems to be more frequent than even a few weeks ago on admission.

**What are Mary's rights, her will and her preferences?**

## **Rights, Will and Preference case study feedback**

### **What are Mary's rights?**

Short answer - same as anybody else's but, particularly in this case, Mary has a right to a family life, which includes Mary seeing whom she wishes to see. Of course, one's rights can sometimes be in conflict with another – for example, Mary also has a right to safety and freedom from harm – if we had evidence that Brian had been abusing her then this may be a justifiable reason for him being precluded from visiting (although an objective decision still needs to be made, taking account of the full situation). In this case, the information we have suggests Brian as a loving and supportive partner.

### **What can we say about Mary's will ?**

Will is often expressed as a 'doing' thing, a behaviour.

The behaviours that we are told about which may express Mary's will are

- Her declining food
- Her low mood – she is described as 'miserable'
- Her being withdrawn
- Her not socialising with other residents
- Her being found crying
- Her increased bed wetting

Of course, none of these may relate directly to her not seeing Brian, they may relate to being admitted to care, being in a different environment and routine, or a deterioration in her condition (which we may assume has occurred as it has necessitated her admission to care) but unless we reinstate her relationship with Brian we won't know which of these is, or may be, creating the response we now see and so what best we can do to offer the necessary support and comfort to Mary.

### **What can we say about Mary's preferences?**

We know that Mary is asking for Brian (coupled with all of the above behaviours). But if this was habit rather than a specific expression of a preference we are then left, on the information we have, not knowing what her current preferences are.

We can look at best interpretation ie what her past preferences were and if/how these may reflect her likely current preferences. But before this, we must ensure she has been supported to offer her own views. There is no evidence, on the information we have, that she has been supported to express her preferences.

What can we take from past preferences?

- Mary chose to allow Brian to move in with her
- They have enjoyed a companionable relationship
- Mary appears to have been happy for Brian to support and care for her in the earlier stages of her dementia.
- But – she made a PoA offering welfare powers to her sons, why did she not change this to Brian, did she overlook this or was this her choice? Does this say anything about who she sees as principally responsible for decisions about her?