



## **CARE AND SUPPORT PLANNING**

### **POLICY AND PROCEDURE**

# **ASPECTS CARE CARE AND SUPPORT PLANNING POLICY**

## **Introduction**

The support/care plan is central to the quality of support/care for an individual. It must reflect individual needs and clearly outline support / care requirements in both general and specific terms. It is very important that this document is understood and actively implemented. It is also vital that the support / care plan is constantly updated and carers at all levels will be contributing to this by recording and reporting information on a daily basis. Good communication skills are important to gathering information for the support / care plan and to maintaining these records.

Care Workers at Aspects Care use a variety of documents that require concise information to be written when completing.

The care workers will work with someone from the local authority (LA) to write the care and support plan. The reason that care plans are completed is to ensure that:

- the service users' needs are identified,
- an explanation how these needs will be met is set out,
- they detail how the plan meets their needs and wishes,
- they detail how the support will help them do the things they want to do,
- the plan contains details of their personal budget or funding route,
- there is information and advice about how they can reduce their needs if applicable, and
- if they are using direct payments for their support, what they will use them on and how much this will cost.

The LA will generally be involved in developing the care plan. The service user will be asked how they want to achieve their goals, what they wishes are and what is important to them. They will be involved as much or as little as they want.

The service user needs may change during the year, these are called fluctuating needs. The care plan will be subject to regular review either on a time specific criteria or as needs change.

## **Risk Assessment**

As part of the care planning process Aspects Care staff will complete a risk assessment with the service user.

The identification and management of risks affecting Aspects Care ability to achieve its objectives are key responsibilities of all employees and partners involved in the work of Aspects Care.

The effective management of risk is an important means by which Aspects Care achieves its goals. The reason why risk assessments are put in place are to:

- a. manage risk actively across the full breadth of Aspects Care work

- b. devolve responsibility for risk ownership and risk management to the most appropriate local level within Aspects Care, but complementing this with whole-Aspects Care ownership, oversight, and monitoring mechanisms
- c. integrate local risk management with local planning and local budgeting to ensure that risk is taken fully into account in planning and budgeting
- d. develop understanding of a risk-aware approach to working
- e. provide and maintain guidance on the techniques of risk assessment and risk management
- f. monitor and report regularly and frequently on the management of risk; and
- g. keep policy and practice under review.

The purpose of the assessment is to identify action necessary to comply with legal requirements, making suitable and sufficient assessments of risks, arrangements for the effective planning, organisation, control, monitoring and review of the preventive and protective measures.

Although the phrase "risk assessment" may conjure up images of a complex process of judgement, based upon skilled technical knowledge, the assessment is in fact nothing more than a careful examination of what is likely, in the workplace, in the clinical area or across the organisation, to cause harm to clients, staff, visitors or anyone else who could be affected by Aspects Care's activities.

In addition, risk assessment will identify risks to the organisation in being able to meet its operational and financial objectives whilst maintaining a quality service. From this information Aspects Care staff can then weigh up whether there are sufficient precautions in place or not, or more needs to be done to prevent that harm/threat materialising.

The primary aims are to make sure that Aspects Care remains a viable organisation fit for its purpose, that no person suffers harm due to conditions either in the workplace, or as part of their clinical treatment due to poor working practice or errors in community care.

### **Initial Meeting**

When an initial referral is made, the Care Manager would arrange a visit to carry out a Care Assessment, in line with the Mental Capacity Act 2005. This assessment would be carried out to establish the needs and wishes of the service user and to gain some background information (see attached sheet Admittance Assessment Sheet).

The Care Manager would also ask the service user questions relating to the following:

- What Makes You Happy
- What Are Your Dislikes
- What Makes You Angry
- What Are Your Dreams
- Who Is Important To You
- What Are Your Important Possessions

By carrying out an assessment and addressing the above, a clearer picture of the service users' needs and wishes becomes available, to complete the individuals support plans.

The assessment will be completed by two suitably trained and qualified staff members.

This information would be the basis of the support and care offered to the service user.

### **Once Allocated to Aspects Care**

The staff members who would form the basis of support and care for the service user would on a daily basis record any communications, activities and occurrences for that day in a Communication Book, staff to communicate between each other and a service user book that would detail the service user daily details. This information should be written in an accurate, clear and useful manner, as the purpose of writing a record is for the service user and next staff member to have an up-to-date picture of the day's events.

Staff might also be required to complete:

- Incident reporting sheet – as and when incidents occur
- Medication administration sheet – time and date medication is administered / given and signed
- Appointment sheet (everyone is aware when appointments are booked)

Staff would then complete and work through a set of contact assessment sheets, this would allow for progress reports to be made.

### **Principle Elements of Support and Support Planning**

#### **Introduction**

Aspects Care aims to assist staff, families, and self-advocates to understand and use person centred approaches to improve each person's quality of life, for those supported to be contributing members of their communities and to have fulfilling lives.

For successful implementation of PCP Aspects Care needs:

- to inform people
- to build capacity to help people make plans
- to promote person centred change more widely throughout the organisation and create a favourable context to help peoples plans become a reality
- to learn from plans and blocks to influence organisational change
- to build a network of practitioners to support and develop learning about planning and implementing plans
- to support new developments to help services to change

For this to happen we require leadership, and influential.

Leadership, powerful leadership can come from families and self advocates, as well as paid staff. Key senior staff are essential to achieve good outcomes for disabled people. It is important to be in touch with the organisational culture, strengths, and weaknesses. Knowing these factors can help us to have an impact with the training initiatives.

Aspects Care has some very committed managers / directors whose enthusiasm and partnership can make a significant contribution. We recognise that first line managers have a significant role to play in ensuring that plans are implemented. Where first line managers show leadership, we may see rotas written to reflect what is important to people as described in their person-centred plans, managers can use team meetings and supervision to reflect with staff on what is working and not working about implementing the plans. Without this leadership, PCP can be seen as something 'extra' to the real work, and not the real work itself.

## **Help People Make Plans**

Aspects Care uses core material and awareness training including:

- the key principles of person-centred working
- the policy framework for person centred working (Valuing People )
- communication styles and communication support for people with nonverbal communication

## **Key elements of training**

1. Begin with awareness training for everyone involved
2. Encourage self advocates where possible to choose their facilitator
3. Support people to work out what is important to and important for the person
4. Ensure that families and facilitators keep the person central to the whole process
5. Explore ways of people leading their own plans: listen to the requests of participants (staff and clients): for example, Direct Payments, Understanding Learning Disabilities.
6. Problem solving. Provide ongoing support through individual coaching.
7. Develop relationships, community connections and community inclusion
8. Continue to support facilitators and managers through active individual sessions
9. Stay focussed on outcomes.

To promote person centred change more widely throughout Aspects Care and to create a favourable context to help peoples plans become a reality person centred working is a fundamental driver in all of Aspects Care's long-term goals. *Valuing People* asks that all organisations use PCP to help improve the lives of individuals and in turn improve the way organisations work, which in turn is what we aspire towards.