Care Planning - HANDOUT

- **Assessing the clients needs**
- **Setting goals**
- **Listing the necessary actions to meet the goals set**
- **Justifying the actions set**

WHO MAKES CARE PLANS?

- **A single professional e.g. a social worker or nurse**
- **A team of professionals (multi professionals)**
- **The client**
- **Sometimes, the clients relatives or friends who act as informal carers**

PHASE 1
INITIAL ASSESSMENT OF NEED

Needs of the client can be identified as:

- Social
- Physical
- Emotional
- Communication
- Identity
- Cultural
- Intellectual

Methods used to assess a client can be:

- Observation
- Questioning
- Use of secondary sources e.g. medical records, relatives

Care Planning - HANDOUT

Always keep in mind the clients rights.

- **The right to independence**
- **Identity maintenance**
- **Choice and control**
- **Confidentiality**

THE CARE PLANNING CYCLE

PROVIDE INFORMATION

REFER FOR ASSESSMENT

ASSESS NEED

IDENTIFY EXISTINGSERVICE

PLAN CARE

IMPLEMENT CARE

MODIFY CARE

REVIEW AND EVALUATE

MONITOR CARE

Care Planning – HANDOUT

PHASE 2
THE DEVELOPMENT OF THE CARE PLAN

- **Identify any needs that are not being met and reasons why**
- **Identify goals (desired outcome) to be met**
- **Identify actions to be taken**
- **Set a review date**

Need Assessment

Suggested questions:

1. Environment and housing
Any problems with the heating or the person's ability to control it? Any problems with access when providing services? Can the client use the telephone, answer the door? What about handles, taps, switches, plug sockets? Is there a microwave? Are there stairs or is it a bungalow? Where are the toilet/bathroom facilities? Does the client live alone? Is it warden controlled? Is the cooker gas or electric? Is the house owned, privately rented, council? Does the client have access to transport? Is the house secure?

2. Communication
Does the client have any problems communicating? Do they need an interpreter? What about the client's sight, hearing, speech?

3. Personal Care
Dressing/undressing, washing, continence, mobility, transfers to chair/bed/toilet? Any equipment needed?

Care Planning – HANDOUT

4. **Housework**
Prepare meals? Feed themselves? Shopping, laundry, cleaning? Equipment needed?

5. Physical and emotional health
Any concerns about the person's health? Any disability, relevant doctors diagnosis? Name of doctor? Any recent life changes? Bereavement, moving home etc? Mental ability? Confusion? Sleep pattern? Can the client manage their own medication?

6. **Abilities and Hobbies**
What does the person like/dislike? Where do they go – clubs? Is there anything that they would like to do but are unable to at the moment? Any equipment needed?

7. Educational or Employment Needs
Applicable to relevant social groups.

8. **Financial Information**
What benefits is the client receiving? Are there any other benefits that the client is entitled to? Do they own their own house; do they have money in the bank?

9. Client concerns?
Worried about caring for animals, not getting to their club, heating bills, loneliness etc

Care Planning – HANDOUT

Checklist: Writing Information about Clients

- Know WHY you are writing down the information
- Be clear WHO will have access to it
- Know WHERE the information will be recorded
- Know exactly WHAT you are going to write about
- Always write records in INK
- If you summarise someone else's opinion about the client's needs, state CLEARLY whose opinion it is
- Use LANGUAGE that is suitable for others in the care team and for your client
- Try to report in an OBJECTIVE way
- Sign and date the information you record
- Ensure that the right people have the information at the right time
- Check with your client that the information is correct

CONFIDENTIALITY AND RECORD KEEPING

Key Point

You need a working knowledge of confidentiality policies and the laws that may affect your role in obtaining information about clients. These include laws such as the Children Act, the Data Protection Act and the Disabled Persons Act.

What do you know about the laws affecting clients you work with?

How much do you know about the laws that affect your clients? Try to find out the main effects of the Acts mentioned in the Key Point above or any others that are relevant to your area of work.

Look in particular at:

Care Planning – HANDOUT

* Understanding the client's right to assessment
* The types of information you are allowed to collect, store or access
* Your role in obtaining information.

You may find that your local library has summaries of relevant Acts.

The organisation you work for may well have prepared its own summaries for the benefit of staff.

Make sure you take a copy of any information you find. Refer to it on a regular basis. You must ensure that you are not making or storing notes about clients who break the Data Protection Act. You must also make sure you are aware of your clients' rights and your responsibilities towards them. Collecting information from others is a delicate task. On one hand you don't want to give third parties too much information about your client. But on the other hand you need to give them enough so that they understand why you are asking them for information. Information given by another person about a client's care needs and problems should not be passed on without the consent of the person who provided you with the information, or the consent of the client.

Records – summarising the client's needs

Most people find that they obtain a lot of information when they try to learn about an individual's or family's problems and needs.

Some of the information is *factual,* e.g. names, addresses, age, and so on. This is called *objective* information.

Other pieces of information might be based on people's opinion, e.g. 'The answer to my mum's problem is day care. She just gets lonely and depressed on her own.' This sort of information is *subjective.*

Information about people's problems and needs can be obtained through observation, too. If the information you receive gives out mixed messages about the client, think why this might be so – could it have something to do with where the information came from?

Some people may find it hard to be entirely objective about a client's needs. The son or daughter quoted above may be finding it hard to accept the extent of their mother's needs. They may be denying how ill the parent is, because it is too painful to accept. You need

to check their opinion against that of someone less involved – like a health professional.