

Care Management and Person Centred Planning



Examples from somewhere near you...

There are sometimes tensions between Person Centred Planning and the systems we call care management - not least around resources and risk. But there are many times when Person Centred Planning and Social Work/ Care Management complement each other and help the person you are working with.

Most of these examples show how person-centred planning can fit with all the stages of care management - information/ advice; assessment; care planning & review.

These examples are all from in and around Hampshire.

- Review meetings - while doing a review on duty, the CM found that the client had just been to a conference & had the beginnings of her own person-centred plan. The client's communication was hard to understand if you had never met her before. She brought the start of her plan along and this helped the CM do a much more effective review. The day services outreach staff then got involved to help her look at some of her ideas about activities to try.
- A client using Direct Payments for the first time had help from her family to make her new staff really listen to her person-centred plan. They wrote about the person-centred plan in the contract - new staff had to make sure they knew what it said and then they could talk about what that meant for their work in supporting her. Her care manager felt more confident that she would be able to direct the support to meet her needs and wishes, and that she really would be the boss.
- The plan for a young man was to move from emergency respite to an out-of-area large residential home, his choice was restricted because of age registration categories. The people supporting him slowed the process down and took some time to start person centred planning with him. He became much more confident in these meetings and said what was important to him - staying closer to his family & college. By this time he

was 18 and eventually a placement was found locally. The funding panel were happy that it cost a lot less than the residential home!

- A day service user told staff through her behaviour that she was very unhappy at home, they became concerned about her relationship with her family carer. Adult Protection procedures were instigated by her social worker. She decided to come to her own case conference and the team spent time with her before planning how her meeting should be, so she would be comfortable in her meeting. She joined in well and her unhappy behaviour lessened. Existing laws, policies and procedures dictated what had to happen but it was done in a more person-centred way.
- Sometimes there is potential risk from the people that are close to the person. The family of a woman were known to abuse her and the risk assessment ensured they were always supported during contacts. Yet she wanted them in her circle of support, to help with her person-centred plan. Her CM worked hard to make sure his concerns were listened to by the client and another trusted person in the circle, so that the family came as she wished but she was not put at any unnecessary risk by being alone with them.
- To help the resource panel really understand why a particular package was important for someone, his care manager put some sections of his person centred plan into the funding request details along with a photo. This helped the resource panel see the real person and their needs and aspirations.
- One man was mostly settled in his residential home, although his family often phoned the duty care manager about the different things that were important to him. He did not want to make big changes or move house but there were lots of ideas about how to improve his quality of life and how he spent his time. The duty worker could not prioritise this or get really involved as there were many people needing more urgent help. His family helped him start a person-centred plan and everyone helped him to get the important things happening. At his review it was much easier for the duty care manager to see what remaining jobs her team still needed to help with - and he was happier with his day to day life.
- A young man's family had heard about person-centred planning from a friend and requested more information so they could start a plan for their son. The care manager reminded them it was important to remember to think about asking the son if he actually wanted this or if he knew about it himself; and she told them about introductory training sessions and website.

- Supporting the actions from a person-centred plan is often how care managers can help. One couple's person-centred plan was all about them living together and getting married. Their care manager supported this by making sure they had the right support in their new accommodation and helping them claim the right benefits.

Another man's plan was to move from a nursing home to his own flat and his care manager helped him get a Health Action Plan started, look for the right place and sort out his funding (including ILF).
- A client kept on telling his care manager that he was unhappy and wanted to move, but found it hard to say what he wanted in a new home. The care manager used some of the tools from person-centred planning during his assessment. They used "Maps" to think about history and other places he had lived in his life and used drawings to record this, which helped him be clearer about what he wanted in his next home, and resulted in a really person-centred assessment.
- A fairly able young woman used to get angry and disruptive in her meetings as they were very formal and she did not feel listened to. The meetings (education transition reviews and LAC reviews) did not address anything important to her or go at her pace. Her person-centred planning meeting was different - she set the agenda, it lasted as long as she wanted and she had help to chair it. Her other meetings still had to happen, but she was then able to bring along her own ideas and plans in a more positive way and people listened to them more.
- A man was moving to a new home after the relationship with his carer had broken down. He already had a circle of support who were able to suggest things in the local area he could make connections with. One person knew the local vicar at the church where he was moving to and offered to introduce him. Another person knew of a local charity shop who were looking for volunteer staff. The circle of support and their own connections had loads of information to help him think about what he wanted to do in his new area. His care manager and new home manager could support this but it is unlikely that they would have known in advance about all the possible ways he could become part of his new community.
- A care manager was helping a woman return from an out-of-county placement to live more locally. The advocacy service where she had lived had started a person-centred plan, but she was not supported to bring it with her by the old placement. The CM knew it existed and chased up people from the out-of-county area and made sure the plan came back to the person so her new support staff could help her to continue her plan.