

Eliminating the crisis of confidence in care planning

5 essential questions and answers that enable adult social care providers to achieve care planning with confidence



Introduction: Care planning and the crisis of confidence

It is an accepted part of the nursing profession that care planning is an essential clinical skill. However, carers in residential homes and domiciliary care services are also expected to attain proficiency and competence in care planning.

There are a number of issues raised by this; placing responsibility for writing care plans in the hands of those without clinical backgrounds raises issues of ethics, and waters down the value of trained nurses by de-professionalising a central competence.

Wherever we sit in the debate over such issues, effective care planning is an immovable object; it is a legal requirement under all registration legislation, and for all UK regulatory authorities. The over-riding consideration must be to ensure that service users receive the most appropriate care; within the context of today's adult social care system, it is inescapable that delivering high quality care is dependent on helping carers to become proficient care planners.

From the perspective of carers the expectation to become proficient in care planning often precipitates a crisis of confidence. This stems from the fear of the consequences of poor care planning and record keeping. At best, non-compliance may attract a fine from the CQC. However, in worst case scenarios of care planning failures, service users may suffer or die. The ensuing fallout of such tragedies has the potential to attract litigation, damage the reputations of organisations and destroy the careers of individuals.

Some may describe it as a science, while others allude to it as an art; however if we want to remove the fear of care planning for those that have not trained as nurses such descriptions are unhelpful, because they disguise a simple fact: Effective and compliant care planning is a product of logic and process.

In this paper we address 5 essential questions that are central to understanding how a well designed and logical approach are central to the mission of effective care planning. This approach provides the best outcomes for service users, enables service providers to meet CQC compliance requirements and helps to avert the crisis of confidence that results from the responsibility of care planning.

Five Essential Questions

Q.1. What is the best approach to care planning?

A.1. Use a systematic approach to provide the assessment and planning framework

Care Planning is the key 'technology' of adult social care. CQC policies and procedures underpin compliance regulations and are intended to minimise the risks of care planning for service users, service providers and care workers. However, de-risking using such a methodology creates a complex framework.

The best way to navigate this framework is to adopt a systematic approach. Whether from a clinical background or not, all care planners benefit from a systematic approach, because it prevents factors that are vital to good care planning from being omitted.

Q.2. How can you ensure that care plans are developed consistently and that no steps are missed out?

A.2. Understand the care planning cycle

The stages of the care planning cycle are broadly summarised as:

- Assess the needs of the service user
- Document those needs
- Develop support and treatment strategies
- Discuss options with the service user
- Choose the support and treatment strategy
- Plan the program by writing the care plan
- Record the activity of any worker contributing to a care plan aim
- Review Assessment forms a continuous loop back to the 'Document' stage

The planning cycle provides a step-by-step approach. This makes care planning a systematic process and allows plans to be developed to cover the normal range of risks. Care planners follow the cycle using preformatted tools at each stage. This ensures care planning activity is consistent and repeatable which enables high quality care to be delivered to every service user.

- Q.3. How can you ensure that care plans meet the individual needs of each service user?**
A.3. *A well designed care plan format encourages care planners to use a personalised approach*

To create care plans that accurately record the wishes and needs of the service user it is essential to observe the principle of individualisation. An effective planning format encourages the care planner to take an individualised approach, and avoid the use of generic approaches such as the use of core care plans. Good care plans avoid standardisation and stereotyping, such as all older people have poor memory or are in danger of falling. Care plan formats help avoid pitfalls that result from such assumptions.

- Q.4. How can you ensure that the needs of each individual are correctly assessed?**
A.4. *Use a set of predefined assessment tools*

Using a competently designed assessment process guides care planners through the full range of different risk assessments. Amongst others these include social, social history, medical, mental health, mental capacity, movement and falls, skin integrity, nutrition and food preferences, room risk, financial vulnerability, medications, and so forth. To avoid the inadvertent omission of a particular risk assessment, good operational practice dictates that a 'pack' approach is used. This ensures a full set of assessments is considered for every service user.

- Q.5. How does a management system help with the development of care plans?**
A.5. *It provides standardised step-by-step formats*

A good management system provides assessment packs. This enables the first stage of the care planning cycle to be carried out competently. As such, these care plan packs contain assessment sets. These provide a solid platform to evaluate the needs of all service users.

The care plan pack provides the structured approach that is required successfully navigate the care planning framework, enabling care planners to develop the appropriate options for meeting the needs of each individual.

Summary

It is important to recognise that the systematic approach described here enables a competent care planning process. From this flow all of the management processes required to deliver a legally compliant care service that observes best practice.

Individual care plans specify the management processes which shape the experience and perceptions of each individual service user. In order for any approach to care planning to be described as 'comprehensive', it needs to include the ancillary services with which service users come into contact.

The net result of all care plan elements is a specification for designing the management processes to deliver all services. This includes those not always seen as directly impinging on the service user, the ancillary services such as housekeeping, laundry, catering, maintenance and administration.

This enables a holistic approach to care planning management practice within the health and social care sector. Testing each process by asking the question: "Does this process contribute to service user care plan delivery?" enables the identification and removal of unnecessary processes and the elimination of costs. This maximises the resources that are available for successfully delivering care plans.

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A range of articles that build on this paper can be accessed on the QCS website by clicking the following links:

<http://www.ukqcs.co.uk/news/21/73/The-Care-Planning-Cycle/>

<http://www.ukqcs.co.uk/news/76/73/Care-Planning-How-often-should-I-review-my-care-plans/>

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