

KATH`S ESSENTIAL LIFESTYLE PLAN

The following information is from Kath's plan, but it has been edited to illustrate the components of an essential lifestyle plan and is not her complete plan. It is written in the third person as Kath has significant support needs and does not use words to speak. What is recorded here represents our 'best guesses' and ongoing learning.

Kath's plan was developed by:

Note that the question refers to who contributed to the development of Kath's plan, not who attended her meeting. It is helpful to not only list the name of the person who contributed but also their relationship.

Kath

Karen – the team leader

Dean – team member

Andy – team member

Lucy – team member

Joan – team member

Sue – day centre officer

Lynne – aromatherapist

Judy - who used to be a team member

Kate – Kath's Aunty

Father Rivers – Priest from St. Josephs

Facilitated by Helen Sanderson

Plan was last reviewed: 12th November 2000

WHAT PEOPLE LIKE AND ADMIRE ABOUT KATH

Kath is...

Warm
Gentle
Caring

Loving
Calming
Peaceful

Assertive
Feminine

Sensitive
Sociable

PEOPLE IN KATH'S LIFE

see relationship circle

MOST IMPORTANT TO KATH

The next sections of the plan describe what is important to the person. It is critical that they reflect only what is important to the person whose plan this is and not what others think should be important or what is important to the service. It is also helpful or organise the information into themes, with different headings (whilst remembering that not all information will fit neatly into themes)

About her relationships

- To visit her Aunt every 2 months
- To be supported by people who know her well, and knows how she communicates

About places to go

- At least once a month to go to a noisy, bustling place with music and a lot going on, for example, live music, discos

- To go to mass on Sunday. Kath goes to St. Josephs at 11am

About things to do

- To have a long bath with bubbles in the morning for about 20 minutes, about an hour after she has woken up. She enjoys bursting the bubbles with her tongue
- To be tickled by people she knows well - she will grab your hand to let you know that she wants to be tickled

About food and drink

- To have chocolate (usually a bar of Galaxy) every day

And...

- To wear her glasses all the time

KATH MUST NOT

- be around loud, sudden noises as these frighten her
- have long periods (more than 45 minutes) where there is nothing happening, she must have a structured day and go out and about.
- have strangers supporting her
- go for very long walks (more than twenty minutes is a long walk to Kath). She will sit down when she has had enough.
- Be cold
- Be rushed

SECOND IN IMPORTANCE TO KATH

*What is important to a person is usually divided up into three categories so that we can know **how** important something, as well as **what** is important.*

About food and drink

- Kath`s tipples are: Martini and lemonade, advocaat and fruit juice (orange or pineapple juice), snowballs and baileys, although she does like to try different drinks as well. If she is not going out on a Friday or Saturday night then she has a drink at home.
- A full English breakfast once at the weekend (scrambled egg, bacon and fried bread with tomatoes)

About ‘pampering’

- Aromatherapy and Massage
Kath goes to Lynne for aromatherapy every 2 weeks on a Wednesday. It is important that staff to massage her hands and feet at least once a week.
- Manicure, pedicures and facials
Kath likes to have a manicure, pedicure and facial with skin care masks every month. When she has enough money she goes to the Fabfit leisure centre, if not, one of the team does it. Kath particularly enjoys the `fruity` masks.
- Footspa
Kath uses the footspa once a week with relaxing essential oils (Lynne makes these up for her)

And...

- Listening to music at home in the morning (usually the radio on Galaxy 102)
- a lie-in in the morning at weekends (until 10am)

THIRD IN IMPORTANCE TO KATH

Things to do

- Sunbathing in the garden whenever the weather is warm enough
- A two week holiday each year, preferably somewhere hot
- Eating out once a month and trying different foods. Her favourites are the Saleem curry house (for a Korma strength curry) and Est Est Est Italian restaurant (for any pasta dish) and Pizza Land (Kath likes all pizza except those with anchovies)
- spa baths and swimming about every month
- being involved in cooking and baking - smelling and touching the ingredients, and eating the finished product when it is still warm
- having relaxing essential oils burning in the evening and invigorating ones in her bubble bath in the morning (made up by Lynne)
- playing her keyboard, when she feels like it, for about a minute at a time, usually with Anne

About relationships

- See Judy about once every couple of months

TO BE SUCCESSFUL IN SUPPORTING KATH.

This section describes the general rules for support so that Kath gets what is important to her and stays healthy and safe. This is the section where something that is important to those who support the person (but not to the person) would be described. For example, we know that Kath needs to have medication to prevent her from having seizures, however, taking medication is not something that is important to Kath and therefore does not appear on the first three sections, but we know that it is important for Kath to keep her healthy and safe and therefore it goes in this section. As Kath has significant support needs, her routines are described in detail. This section of Kath's plan is long, and the following are extracts from it.

TO KEEP KATH HEALTHY AND SAFE

Support Kath to take her medication three times a day with her meals. Remind Kath that it is time to take her tablet and make sure that she sees you crush the tablet between two spoons and put it in a small glass or orange juice. Kath will only drink it if she has seen you crush it and put it in her the orange juice.

(Kath's actual plan specifies exactly what the medication is)

Kath must see her optician every six months to have her glasses checked. When Kath gets to the opticians she becomes anxious if she has to wait, so arrive only a couple of minutes before the appointment.

KATH'S MORNING ROUTINE

During the week Kath gets up about 8.30 am unless she wakes earlier.

1. Staff turn Kath's radio on (Galaxy 102) and run her bath whilst Kath wakes up properly. (Staff must ensure that the blue bath mat is securely placed in the bath).
2. Staff support Kath to sit on the edge of the bed. Holding both hands staff assist Kath to stand up. If unsuccessful, leave Kath for a couple of minutes and then try again.
3. Kath is then prompted (by gently touching her elbow, and guiding her towards the bathroom) to walk into the bathroom.
4. Staff enable Kath to undress, for example asking her to hold her arms up to remove her nightwear
5. Kath is then prompted into the bath. Kath holds onto the bar grab rail with her right hand and with her left hand she holds the left rail on the bath or bath side. Kath then lifts her right leg into the bath and then her left with staff ensuring that she does not slip.
6. Kath enjoys a soak in the bath for about 20 minutes. Kath can be left in the bath, however, staff must stay upstairs, because of the danger if Kath had a seizure in your absence.

7. Kath is then supported to wash and has her hair washed using both shampoo and conditioner.

Kath then has

- i. Pineapple facial wash
- ii. Cucumber cleanser and toner and moisturiser applied.

8. Kath needs to be physically helped out of the bath. Staff offer both hands to Kath to encourage Kath to stand up and step out of the bath.

9. Kath is then supported while getting dressed. Kath, when asked will move her arms or legs whilst you put her clothes on for her. Kath wears a pad in the morning.

10. Kath is then prompted to come downstairs. Kath's right hand is placed on the banister. Her left hand is held by staff until she gets round the first corner. She then holds both banisters and is prompted to walk downstairs herself. If Kath stops on the stairs, put her hand back on the banister and she will begin walking down again.

11. Once downstairs, Kath goes into the dining room and is supported whilst eating breakfast. Usually a high fibre cereal and a cup of tea. 1 glass of fruit juice.

12. Kath then has her hair dried, comes into the living room, and has her glasses put on.

IN A TAXI

If Kath is getting into a black cab, she will need help getting in and out. Staff get in taxi first, hold both of Kath's hands and Kath will lift her right foot into the taxi. Kath is then physically supported to get into taxi. If getting in a private hire, Kath prefers to sit in the front seat.

MEALTIMES

1. Kath uses a raised plate for her main meals. Her food needs to be cut up, not (not chopped pureed etc.)

3. Staff sit on Kath's right side to enable Kath to eat her meals.
4. Kath uses a fork in her right hand.
5. Towards the end of the meal, Kath will need some help to pick up food.
 1. When using a spoon, Kath does not need any help.

PEOPLE WHO ARE PAID OF VOLUNTEER TO WORK WITH KATH SHOULD...

- Be close to her age
- Be prepared to do everything at Kath's pace and be willing to learn how she communicates, and how to communicate with her
- Like sharing personal space, to support Kath in her 'pampering' activities

Insert the communication sections here

This completes the first three section of the plan, the administrative section, the person's section and the support section. What follows are the unresolved issues and what is working and not working in Kath's life, which are then developed into the action plan.

Other sections of the plan are done as required, for example, where the plan is being implemented within a service, an implementation plan is included. The implementation plan from Kath's team is included later in this plan.

UNRESOLVED ISSUES/QUESTIONS TO ASK

One of the traps in planning is thinking that we need to answer all of the questions and resolve all of the challenges. This section provides a place to list those questions and issues that are left at the end of the information collection. They then become part of the actions plan.

- Kath has not seen her parents for three years. Is there anything we can do to enable them to be part of Kath's life again?
- Kath does not get any exercise other than swimming once a month. How could we enable Kath to get fitter?
- When was the last time that Kath had her teeth checked?
- Could Kath get more involved in the Church?
- Could Kath benefit from 'Intensive Interaction'?

The two sections labelled 'what makes sense...' and 'what does not make sense' are ways to take people from planning to implementation.

What makes sense?...What works? What needs to be maintained from Kath's perspective?	What does not make sense?... What is not working? What needs to change from Kath's perspective?
About relationships <ul style="list-style-type: none"> • Her relationship with her Aunt • The team working at her pace 	About relationships <ul style="list-style-type: none"> • She sometimes has agency staff supporting her who do not know her
About places to go, things to do <ul style="list-style-type: none"> • Being pampered • Having regular aromatherapy 	About places to go, things to do <ul style="list-style-type: none"> • Sometimes Kath seems bored • Sometimes Kath cannot have 20 minutes in the bath because Derekl needs to get ready • Kath has not been out for a meal last month because

	<p>money was tight</p> <ul style="list-style-type: none"> • Kath did not have a holiday last year
<p>What makes sense?...What works? What needs to be maintained from other's perspective?</p>	<p>What does not make sense?... What is not working? What needs to change from other's perspective?</p>
<p>About relationships</p> <ul style="list-style-type: none"> • Kath is seeing her Aunty regularly • The team working at her pace 	<p>About relationships</p> <ul style="list-style-type: none"> • Most of the people in Kath's life are paid to be with her • She sometimes has agency staff supporting her who do not know her • Different people support Kath to go to Mass which might make it difficult to get to know people there
<p>About places to go, things to do</p> <ul style="list-style-type: none"> • Kath really seems to be enjoying cooking • The aromatherapy is going well 	<p>About places to go, things to do</p> <ul style="list-style-type: none"> • The keyboard has broken • Sometimes Kath seems bored • Kath attending the day service three days a week, and not doing much there
<p>Generally</p> <ul style="list-style-type: none"> • The team are all consistently using the communication sections of the plan 	<p>Generally</p> <ul style="list-style-type: none"> • Kath does not always wear her glasses • Kath having to go to bed before the second member of staff leaves at 10pm

Action Plan

The action plan is developed from:

- *unresolved issues/questions to ask*
- *anything that is working that requires actions to maintain it*
- *and the what is not working sections.*

What?	Who?	By When?
Actions addressing the 'questions to ask'		
To send Kath's parents: <ul style="list-style-type: none"> • photographs of Kath involved in different activities • cards for birthdays and Christmas • a copy of the plan for information (so that we can invite them to contribute at the review) 	Karen	Within 6 weeks (by January 24th)
To increase the amount that Kath goes swimming to once a week, to help her get fitter	Andy	From next week
To enable Kath to have her teeth checked at the dentist.	Dean	Within 2 weeks (by Xmas)
To talk to Father Waters to see if Kath can become more involved in the Church	Karen	Within 2 weeks (by Xmas)
To investigate 'Intensive Iteration'	Karen	Within 2 weeks (by Xmas)
Actions addressing 'what makes sense' that needs to be maintained		
Book appointments with Lynne, the aromatherapist for the next three months so that Kath can keep this appointment time	Joan	Within 2 weeks (by Xmas)
Actions addressing 'what does not make sense' that needs to change		
To see whether Judy, (who used to be part of Kath's team), could	Karen	Next week (by 17 th December)

cover the extra shifts that we have been using agency staff for		
To 'blue sky' different activities that Kath may like to try and develop a plan to enable her to try them	Karen	At the team day on January 24th
To 'blue sky' how we could enable Kath to develop more relationships	Karen	At the team day on January 24th
To see whether Derek would be happy to have his breakfast before her bath to enable Kath to have her 20mins in the bath (on her day centre days).	Lucy	Next week (by 17 th December)
To explore whether we are maximising Kath's benefits	Karen	Within 6 weeks (by January 24th)
To try to alter the rota to enable Kath to go to Church supported by either Andy or Joan	Karen	Within 2 weeks (by Xmas)
To talk through Kath's ELP with the day centred manager to do an action plan within the day service in the short term.	Karen	Within 6 weeks (by January 24th)
For Kath not to attend a day centre, and explore what is possible – work? Community connections? To develop an action plan to explore possibilities and then see what can be done locally.	Karen	At the team day on January 24th

IMPLEMENTATION PLAN FOR KATH'S ELP

1) How can we ensure that the plan happens?

- All the activities from Kath's essential lifestyle plan, and other domestic activities (eg collecting benefits) are put into a monthly plan. This plan tells everyone what needs to happen on each shift, or within that week or within that month.
- After each activity there is a space to initial that you supported Kath in that activity

2) How will we know how well we are doing?

- At the end of each month Kath's keyworker, Lucy, goes through the monthly plan and compares this with Kath's essential lifestyle plan to see how we are doing.
- We devote one of our monthly team meetings to looking at how well we are doing. Firstly, we hear from Lucy about the monthly plan, then we hear from each team member about what they think is working well or not working. We set actions from this.
- We also have Kath's essential lifestyle plan as the first item on the agenda for our supervision sessions.

3) How will we share, and record what we are learning about the person?

- We have the essential lifestyle plan in landscape with space for everyone to write what we are learning, and amend the plan and what we do from this (either in a team meeting or at the six monthly review)
- We use the 'learning log' to record activities and amend the plan and what we do from this
- We have a review every six months that involves everyone involved in developing the first plan. At this we ask: What have we learned? What have we tried? What else might we try? What do we need to do next?

4) How can we share the successes and barriers of implementation essential lifestyle plans with others in the service?

- Karen takes the successes and the issues that are blocking us to Helen for the implementation group
- Andy and Lucy give feedback to the rest of the network at the network meetings during the feedback session

5) What can we do to keep learning/supporting the person to have new opportunities?

- Every three months we devote a team meeting to looking at new opportunities we could be enabling Kath to have
- At one of our annual team days we will start to look at some of the maps from Personal Futures Planning to increase what we know about Kath and her community

KATH'S TEAM ESSENTIAL TEAM PLAN

About our relationships with each other

We will: -

- Be honest at team meetings – if we do not agree with decisions, we will say at the meeting (and not afterwards just to each other)
- If we have issues or problems with each other, wherever possible we will talk to the person concerned directly. If we can't, we will either discuss it with Karen, or put it on the agenda for the team meeting.
- Be punctual and start shifts and meetings on time. We will phone if we are going to be more than 10 minutes late.
- Complete our actions on time – and if we cannot, let other members of the team and Karen know.

About domestic issues

We will: -

- Strip the bed in the sleep-in room when we have finished a sleep-in.
- Ensure that the dishes are always washed when finishing a shift. They should only be left in an emergency and a note left for the next staff explaining why.
- Leave the car clean and free of rubbish.
- Leave the car with at least one-quarter of a tank of petrol in it – never empty.

About recording information

We will :-

- Always double check entries on cash sheets. If we find mistakes and correct them, leave a message for other staff
- Write up logs and record information on the chart on every shift unless there is an emergency (and then leave a message to explain why)

Kath's communication chart - How Kath communicates with us

At this time	When Kath does this	We think it means	And we should
In the morning	Kath sits up in bed, blowing	Kath wants to get up.	Enable Kath to have a bath (see support section for details)
In the morning	Despite noise around her Kath lies in bed	Kath does not want to get up	Depending on time:- <ul style="list-style-type: none"> • If Kath does not need to get up - attempt to decrease noise and enable Kath lie in. • If Kath needs to get up - gently encourage Kath to wake up, give her time to stretch and come round, then give Kath a drink with her medication and then usual bathroom routine (see support section for details)
Anytime of day/night	Kath appears quite agitated, lots of blowing, flapping things in front of her eyes and shaking her head from side to side.	Kath may have had or is going to have a seizure.	<ul style="list-style-type: none"> • Ensure Kath is comfortable and safe, especially if in bed during the night. • Reassure her and talk calmly to her

Kath's communication chart
How Kath communicates with us

At this time	When Kath does this	We think it means	And we should
Any time of day	Kath looks to the left or right with a fixed expression for anything up to a couple of minutes.	Kath is having an absence	Reassure her and talk calmly to her Stay with Kath till she has recovered.
Any time of day	Kath makes loud "shouting" noises.	Kath is unhappy with demands being made on her.	If you can stop the activity, do so. If it is something that Kath needs to continue with, eg crossing the road, continue, but explain why I a calm, reassuring voice.
In the Jacuzzi	Kath reaches out towards staff	Kath is feeling unsafe	Make Kath more safe, if she is sitting on the edge of the seat, help Kath to sit back and if Kath wishes carry on holding her hand.
Any time of day	Kath holds hand of staff	Kath wants physical contact	Tick and or, stroke Kath's hand.

Kath's communication chart
How we communicate with Kath

At this time	When want to let Kath know...	We do/say this	And encourage Kath to
At mealtimes	It is time for lunch/dinner/supper	Say 'Kath, it is lunchtime' and give her her fork.	Come into the kitchen for lunch/dinner or supper
When you are about to go swimming	It is time to go swimming	Say 'Kath, let's go swimming' and hand her her swimming costume	Walk with you towards the door

KATH'S ELP

THIRD IN IMPORTANCE

- Sunbathing in the garden whenever the weather is warm enough
- A two week holiday each year, preferably somewhere hot
- Eating out once a month and trying different foods. Her favourites are the Saleem curry house (for a Korma strength curry) and Est Est Est Italian restaurant (for any pasta dish) and Pizza Land (Kath likes all pizza except those with anchovies)
- spa baths and swimming about every month
- being involved in cooking and baking - smelling and touching the ingredients, and eating the finished product when it is still warm
- having relaxing essential oils burning in the evening and

WHAT ELSE ARE WE LEARNING?

invigorating ones in her bubble bath in the morning
(made up by Lynne)

- playing her keyboard – for about a minute at a time,
usually with Anne