

Person-centred care planning in mental health and learning disability services - NHS Tayside

We heard from Jenny MacDonald, Clinical Nurse Educator and Donna Robertson, Senior Nurse Practice Development at NHS Tayside Mental Health and Learning Disabilities Service about their work improving care planning and observation practice to make it more person-centred.

Improving observation practice

The team wanted to improve their observation practice to ensure that it is person centred, rights based and trauma informed. It was agreed that care plans should be at the core of this.

A snapshot audit of care plan showed current care plans to be centred around risk management rather than what was important to people. This did not encourage meaningful conversations around care.



National Guidance – [a proactive, responsive and person centred framework for acutely unwell people in mental health](#)



Person Centred care planning is 1 of the 9 strands of the Guidance



New Observation Protocol which has the person centred care plan at the centre of it.

Key messages:

- Systems need to support practice
- Conversations and understanding what people need will improve care and safety
- Supporting staff with training will help sustain good practice

Starting care plans with conversations

Previously close observation was prescribed, however, this was changed to be included in the care plan. This meant that observation can only take place after a conversation and agreement with the person.

This change reduced the number of hours of observation and also reduced the levels of harm across the ward.

What they did was establish:

- A **Care Planning Collaborative** – embedding person-centred standards
- **Care Planning Champions** – worked with colleague to promote the standards
- **Links with local Universities** – to teach students the importance of person-centred care and the new approach
- A **CPD Programme** – that supports ongoing training and learning

Following this the team saw an increase in the number of person-centred care plans in place along which were of higher quality.

To find out more contact: jenny.macdonald2@nhs.scot Donna.Robertson2@nhs.scot



Personal planning test of change in a care home - Glasgow City HSCP

We heard from Janice Young, Service Manager and Linda Benedetti, Service Manager at Glasgow City HSCP and Victoria Gardens Care Home about the test of change underway to make their personal planning more person-centred.

Moving on from protection and outbreak management

It was important for the team to re-centre thinking after the COVID-19 pandemic that the care home is people's home.

There was a redesign of the personal planning model. The previous document was very large and had a focus on risk assessment and management.

The new model has core features of:

- One page profiles for people
- Key starting questions for staff to ask such as, 'What does a good day look like? What does a bad day look like?'

This means a care plan can't be done without real conversations with people.

Improving observation practice

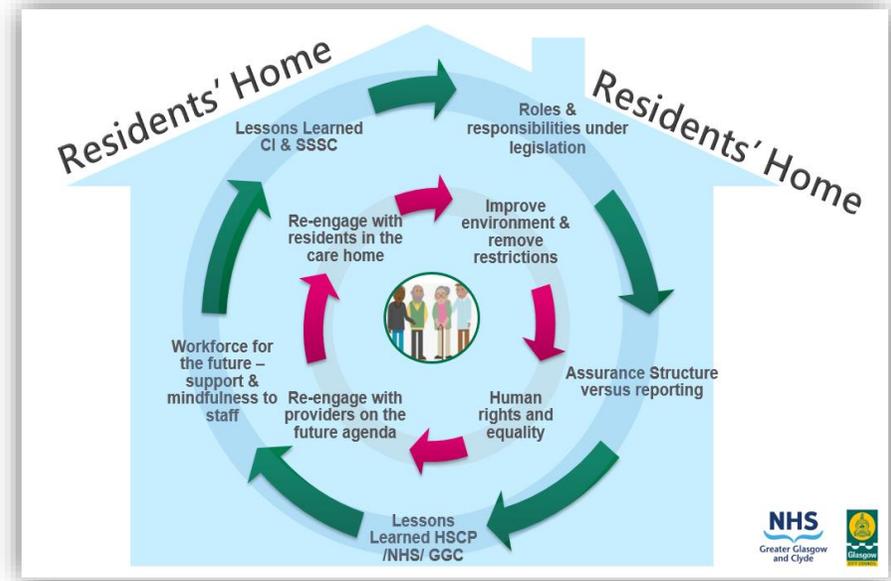
The team wanted to improve their observation practice to ensure that it is person centred, rights based and trauma informed.

Previously close observation was prescribed, however, this was changed to be included in the care plan. This meant that observation can only take place after a conversation and agreement with the person.

This change reduced the number of hours of observation and also reduced the levels of harm across the ward.

Key messages:

- This process has created space to listen and focus on what matters to the resident rather than the governance need of the care home.
- Risk assessment is important. However, we need to listen to people and what they want, then risk assess and wrap governance around those things.



To find out more contact: Janice.Young@sw.glasgow.gov.uk

Building the network

Delegates were asked 'What is your 2040 newspaper headline about person-centred care? What would be needed for us to achieve the headlines...'



Key themes from our newspaper headlines

Business as Usual

Key themes coming through in our headlines included a desire that person-centred care would be part and parcel of the delivery of health and care in Scotland – that it would be business as usual!

Innovation and Technology

Innovative use of technology was also a key theme – where the human-centred aspects can be maintained.

What do we need to get there?

Authentic culture and empowered workforce - Developing a person-centred, compassionate organisational culture, where we are kinder to ourselves, our colleagues as well as the people we serve was key. A desire for authenticity and an empowered workforce keen and confident to have 'What Matters To You?' conversations. *"Staff must treat each other in a person-centred way. Across all professionals, levels, sites...get rid of them & us."*

Leadership and recognition - Ensuring we have skilled, person-centred, compassionate leadership focused on removing barriers for staff to deliver better care and recognises the value of a person-centred workforce. *"Help staff feel more like people not numbers. Valued staff work better all round."*

Effective processes and systems - There was a clear request for less bureaucracy, less red tape, less paperwork – and more opportunities to spend time focusing on the people who are being supported. *"More streamlined documentation freeing up staff time." "Stop focusing on tasks - remove tick charts."*

Training, resources, advice and guidance - Relevant training was identified as a vital to support progression and integration of person-centred care across the system – and many felt that it should be delivered earlier (college/university), be continuous (CPD) and also mandatory for non-clinical roles and leaders. Having easy access to resources, advice and guidance would also help people to incorporate person-centred practices into their work. *"Teaching of person centred practice early in careers and continued evidence of learning and practice throughout."*

Teamwork, peer-support and collaboration - Given we all face many common issues, the importance of peer-support was highlighted, that it was important to learn from one another and work together to build on best practice from across the workforce. *"Options for mentoring for staff across orgs/sectors."*

Knowledge exchange and reflective practice - Finding space and time for collective reflection and to share learning in a safe space was something that people were keen to have – especially amongst their colleagues. *"More opportunity to share our learning & challenges with each other - the more we communicate with each other the better we get at what we are doing because we're supporting each other and modelling open honest learning"*

Next Steps

Developing the future work of the Person-centred Care Network is underway. Network members are invited to get in touch with the [Person-centred Design and Improvement support team](#) to share your experiences of person-centred care or how practice has been improved. Up next in our calendar of events are:

- **Would you like to get to know the network members?** Join our Randomised Coffee Trial (RCT) before the 1 September 21. [Find out more](#) about the RCT and [sign-up here](#).
- Share your examples of person-centred practice by [sharing your improvement story](#) with the network.

What do you want from this network?

We asked how this network could support us in achieving our 2040 newspaper ambitions. We've summarised the responses under the themed headings below:

- *Authentic culture and empowered workforce:* Help to maintain the motivation!
- *Leadership and recognition:* Linking in and leveraging positive change at both local and national level, shouting loud about positive stories.
- *Effective processes and systems:* Strong and bold advocacy with regional and national government around person-centred practice in policy and practice.
- *Training, resources, advice and guidance:* Sharing, advising and updating on relevant training and resources around person-centred care.
- *Teamwork, peer-support and collaboration:* Provide a safe space for peers to come together, share challenges, support and mentor each other.
- *Knowledge exchange and reflective practice:* Provide opportunities to reflect on current/best practice and sharing learning with each other.

We will use these suggestions to co-design the Person-centred Care Network. We would love to continue to hear any further thoughts you have for how we can build this network together so feel free to get in touch!

Person-centred Care Network

What is it?

The Person-centred Care Network is a community of practice that supports health and social care staff to put people at the centre of care and support. It does this by offering:

- regular learning and reflection opportunities
- spaces for networking, collaboration and exploration of practical challenges in delivering or leading person-centred care
- access to current evidence and learning from local practice in Scotland
- opportunities for skills and knowledge development

Who is it for?

The Person-centred Care Network is free and is open to anyone who works in health or social care in Scotland interested in Person-centred practice. You can find out more about the network on the [Network webpage](#).

Follow this link if you would like to [join the Person-centred Care Network](#).

