



Active Support

Learning Pack



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Active Support Learning Pack

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Introduction - Learning outcomes

As a learner working through this learning pack you will:

- Understand how Active Support translates values into person-centred practical action with an individual.
- Be able to interact positively with individuals to promote participation.
- Be able to develop and implement person-centred daily plans to promote participation.
- Be able to use person-centred records to evaluate an individual's participation in activities.

Additional guidance/glossary of terms:

'Active Support' is a person-centred model of how to interact with individuals combined with a daily planning system that promotes participation and enhances quality of life.

'Person-centred' reflects what is important to individuals and helps them to live the life they choose.

'Individual' is someone requiring care or support.

'Hotel model' refers to institutional style settings organised mainly around staffing needs. They are not person-centred and offer a poor quality of life to individuals. For example, where carers undertake all the domestic tasks and do not provide opportunities for individuals to participate in constructive activities.

'Levels of help' refers to graduated levels of assistance, from simple verbal reminders providing the lowest level of support to actual physical guidance providing the highest level. Assistance should be given flexibly according to the individual's need for help, and should be focused on encouraging as much independence as possible.

'Task analysis' refers to breaking down tasks into small, manageable steps as in recipes or DIY guides. The size of each step or number of steps for a specific task should vary according to the individual's ability or need for support.

'Positively reinforcing' refers to what an individual gains from undertaking a specific task. These can include naturally occurring rewards (e.g. drinking a cup of tea the individual has just made) or things that the individual particularly likes (e.g. praise and attention or a preferred activity) as an encouragement or reward for participating in a specified activity.

‘Positive interaction’ refers to supportive interaction using the levels of assistance, task analysis and positive reinforcement that helps an individual to participate in constructive activity.

‘Others’ may include: the individual, colleagues, families or carers, friends, other professionals, members of the public and advocates.

‘Valued range of activities’ refers to the balance of activities that contribute to a good quality of life for individuals, incorporating vocational, domestic, personal, leisure, educational and social activities.

‘Disengagement’ means doing no constructive or meaningful activity, and can include aimlessly wandering about, pacing, staring, sitting, lying down, purposelessly fiddling with items and so on, with no social contact.

‘Valued lifestyle’ refers to the balance of activities that contribute to a good quality of life for individuals, incorporating vocational, domestic, personal, leisure, educational and social activities.

Models of support

We are going to start this training with an introduction to models of support.

The Hotel Model

Traditional provision of care was often based around the 'hotel model', which was evident in many hospitals and institutions. This model has also transferred to some smaller residential and nursing homes.

The 'hotel model' is based around the smooth running of the organisation and staffing, which led to set routines and decisions taken by managers rather than those using the service, who were often passive recipients. In this model, staff tend to do most things for the individuals they are supporting.

The Active Support Model

Active Support is a way of supporting someone that is person-centred. It provides structures and routines that increase opportunities for people with learning disabilities to engage in age-appropriate activities that make up an 'ordinary life'.

Active Support provides people with support that corresponds with their abilities. It is applicable to all support settings, not just for people with learning disabilities.

Active Support changes the mindset of support staff. Staff begin to see everything in life as an activity on an opportunity for a person to take part. They begin to look at activities as having steps and each step is as important as the other. Just being able to do one step is an achievement.

Let's move on to an exercise considering different settings and support styles.



exercise 1

Think about being in a hospital or having to live in an institution and compare that to how you live at home. Complete the following tables by comparing the different aspects involved in living in each of these places. At the start of each table we have listed things for you to consider.

We have completed the first table for you as an example.

Eating and Drinking

Things to consider:

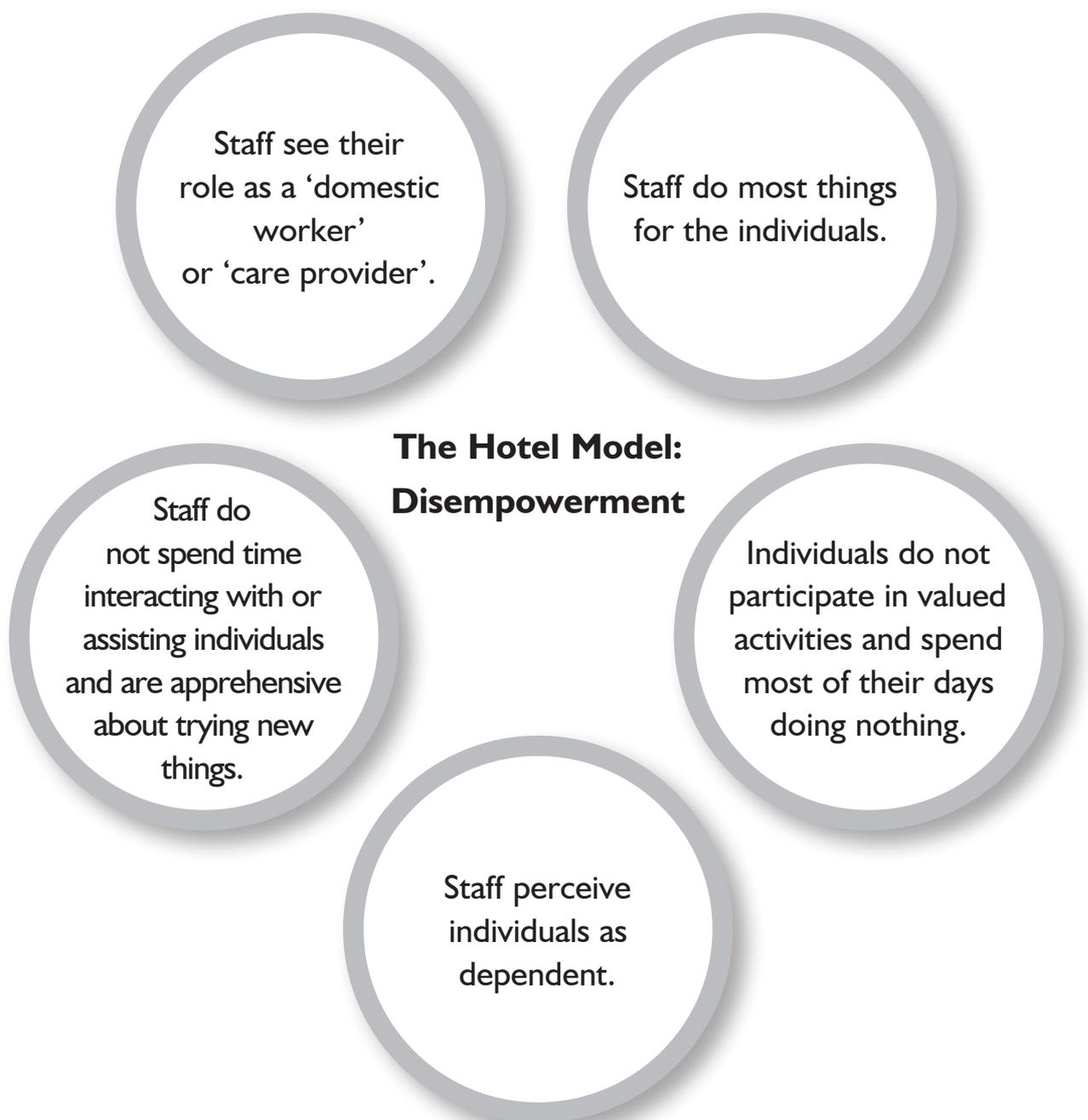
- Times
- Choices
- Obtaining food and drink
- Snacks
- Support
- Eating out and takeaways

Hospital	Institution	Home
Menu - 4 choices.	Two choices.	Free choice, but may depend on budget.
Set mealtimes.	Set mealtimes.	Flexible mealtimes according to choice and circumstances.
May have snacks brought in by family and friends. May be able to purchase from hospital shop or cafe.	Snacks may be available, but might have to ask staff.	Snacks of choice available when you want them.
Probably no kitchen. Drinks rounds. Water and juice on locker.	Probably not allowed in kitchen for health & safety reasons. Drink rounds.	Free access to kitchen. Drinks anytime.
Food prepared and delivered to ward, then served by housekeeping staff.	Food prepared and delivered to ward, then served by care staff.	Food usually prepared by self and family.
Food eaten in or beside bed, or at dining room table with people you don't know.	Food served in large communal dining room. Others may be taking food from your plate.	Food generally eaten at the family table, or on trays on knees.
Little support given. Meals sometimes left on bed tables, uneaten.	Staff may be standing beside you and 'feeding you' from your plate.	Support provided as required.
Eating out is probably in the hospital restaurant or cafe.	Eating out with 30 other people perhaps twice a year, with staff attending to you.	Eating out when and where you choose, according to your budget!
Takeaways may not be allowed.	Takeaways are something the staff occasionally have!	Free choice.

You may have noticed a pattern emerging as you completed the tables in the exercise. In hospitals and institutions choices are limited with little input from you. The quality is variable and there is not much you can do to change this. It is clear the hotel model is one of 'care and support'.

The diagram below shows you the circle of disempowerment which is linked to the 'hotel model' of support:

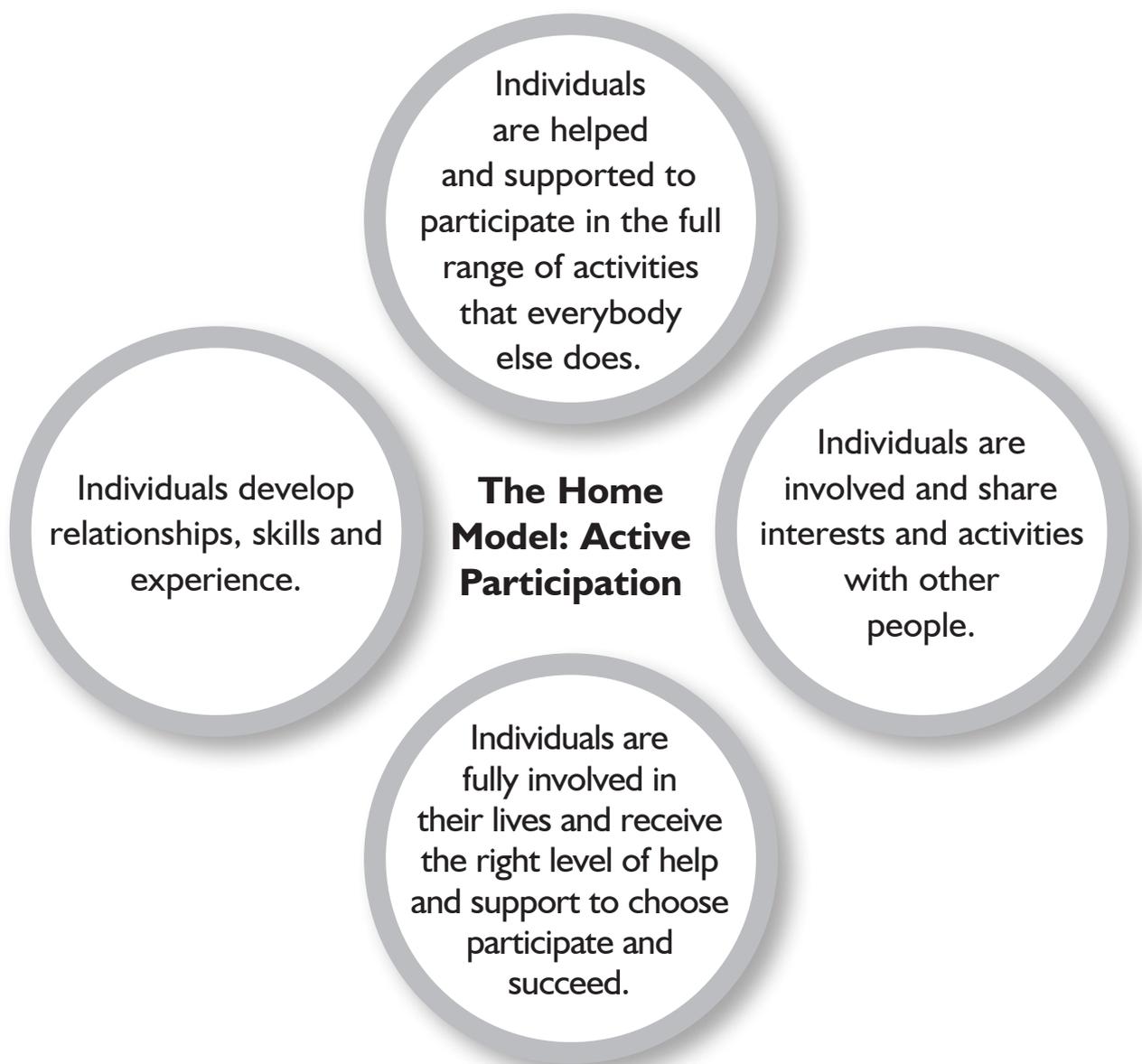
Characteristics of the Hotel Model



Active Support

Active Support is based more on the 'home' model identified in the last exercise, where individuals actively participate in activities that constitute a **valued lifestyle**. Individuals are helped and supported to participate by friends, families, paid staff and others.

Characteristics of the Active Support Model



Newer ways of delivering independent living support go some way to increasing the level of individual choice and involvement, with services planned and delivered in a more person-centred way. However, some support staff still provide 'care and support' rather than 'support and enablement' and there is a difference!

Following the 'care and support' model, individuals can remain passive recipients, by this we mean they allow all the things to be done for them and to them.

Whilst in the 'support and enablement' model, individuals are supported to be independent, maintain and develop skills and play an active part in the community.

If you look carefully at the last column in the tables, back in exercise 1, which is all about how you do things at home, you would probably want to keep this level of choice and independence, even if you were in need of support. You would expect to have this support delivered in a way that enabled you to continue to do all those activities in a similar way to how you do them now. This model of support is known as 'Personalisation', where health and social care services start with the individual rather than the service.

Personalisation

'Personalisation' means starting with the individual as a person with strengths and preferences who may have a network of support and resources, which can include family and friends. They may have their own funding sources or be eligible for state funding.

Personalisation reinforces the idea that the individual is the best person to know what they need and how their needs can best be met. It means that people can be responsible for themselves and can make their own decisions about what they require, they should also have information and support to enable them to do so.

In this way, services should respond to the individual instead of the individual having to fit in with the service. The traditional service-led approach has often meant that people have not received the right support for their circumstances, or have not been able to help shape the kind of support that they need.

We all make choices on a daily basis - what to wear, where to eat, etc. We also make some choices that are bigger and more life-changing, such as where we decide to live.

Some individuals experience difficulty in making choices, which may be due to a lack of capacity to make a particular choice. Alternatively, it may be due to a lack of confidence or opportunity, communication difficulties or a lack of understandable information at their disposal.

To help individuals make **informed choices**, we must ensure that they have access to the right information in a format they can understand. Individuals may need help to explore the options available and to understand the consequences or effects of the decisions they make.

We should always start with the assumption that the individual has the capacity to make a decision or choice. The challenge for the people supporting the individual is to enable that to happen, if at all possible, which might mean involving others such as families or friends, other professionals or advocates. It may also involve providing opportunities for the individual to try out different options before choosing which is preferred.

Sometimes poor choices are made, however, we all have a right to make our choices and often we learn more from the poor decisions and choices we make, than from the good ones!

Personalisation is about giving people much more choice and control over their lives.

(Taken from 'Personalisation: a rough guide', 2008)

A personalised adult social care system was first proposed in 'Putting People First'. Department of Health (2007), some of the key elements include:

- Agreed and shared outcomes, which should ensure that people, irrespective of illness or disability, are supported to:
 - Live independently
 - Stay healthy and recover from illness
 - Exercise maximum control over their own life and where appropriate, the lives of their family members
 - Sustain a family unit which avoids children being required to take on inappropriate caring roles
 - Participate as active and equal citizens, both economically and socially
 - Have the best quality of life, irrespective of illness or disability
 - Retain maximum dignity and respect.

These principles support the vision of enabling individuals to maintain and improve their quality of life.

For people with learning disabilities, similar principles were outlined in the white paper 'Valuing People', Department of Health (2001), which stated:

People with learning disabilities are entitled to lives, which are as full as anyone else's. There were four key principles at the heart of Valuing People, aimed at improving the lives of people with learning disabilities.

A summary of these principles are:

- Rights
People with learning disabilities have the right to:
 - not be discriminated against
 - a decent education
 - to grow up to vote
 - to marry and have a family
 - to express their opinions
 - help and support to do so where necessary

- **Independence**

While peoples' individual needs will differ, the starting presumption should be one of independence, rather than dependence, with public services providing the support needed to maximize this. Independence in this context does not mean doing everything unaided.

- **Choice**

Like other people, people with learning disabilities want a real say in:

- where they live
- what work they should do
- who looks after them
- and make choices and express preferences about their day to day lives.

- **Inclusion**

Being part of the 'mainstream' is something we all take for granted. We go to work, look after our families, visit our GP, use transport, go to the swimming pool or cinema. Inclusion means enabling individuals with learning disabilities to do those ordinary things, make use of mainstream services and be fully included in the local community.



exercise 2

Think about your own work setting and identify any practical changes that could be made to make the following three things happen in your service.

	Explain below what practical changes you can make for each to happen in your service
<p>Promote an individual's independence. i.e. Individuals are helped and supported to participate in a full range of activities to develop relationships, skills and experiences.</p>	
<p>Support informed choices. i.e. the right information in an understandable format; the right people supporting; options and consequences are understood; opportunities to make choices.</p>	
<p>Improve quality of life. i.e. Valued lifestyle - a balance of activities that contribute to a good quality of life; incorporating vocational, domestic, personal, leisure, educational and social activities.</p>	

Active Support

Active Support is designed to ensure that individuals receive the right level of support to enable them to be fully involved in, and improve the quality of, their lives.

Some of the benefits for the individual of person-centred active support are:

- the physical benefits of a more active lifestyle
- being involved and taking part
- more independence and autonomy in what they do
- individuals having a say in what they do and how they do it
- more opportunities for learning and development
- more skills and knowledge
- maybe greater employability
- being able to do more for themselves however small that may be
- a greater sense of wellbeing, self-confidence, self-esteem and self-belief.

Active Support is enabling individuals to participate in carrying out activities of daily living in order to promote independence and develop skills.

This approach is supported in a document produced by Skills for Care entitled 'Common Core Principles to Support Self Care', which promotes new ways of working.

This can be found at: www.skillsforcare.org.uk/Learning-development/ongoing-learning-and-development/self-care/Self-Care.aspx

Let's now look at why Active Support is important.

Why is Active Support important?

Participation and contribution are important to self-esteem

Everybody spends most of their time participating in activities. No-one likes having nothing to do for very long. We look after ourselves, we do chores, we have hobbies, we help others, we have a good time, we see our friends, we enjoy a well-earned rest with a favourite pastime. Some activities are chores that have to be done. Others we choose. But we rarely do absolutely nothing.

Such participation, or engagement, in activity is a big part of what we think of as our quality of life. It:

- helps keep us fit and mentally alert
- allows us to express who we are
- establishes common interests with other people
- provides the basis for friendships and for living together
- develops our talents and allows us to show what we can do... and...
- is the means by which we look after ourselves and our daily needs.

Skills for Care explore the importance of meaningful activity, if you would like to find out more about their work, visit their website: www.skillsforcare.org.uk/activity

People with learning disabilities need support to participate

Having a learning disability often results in a lack of independence. People with a learning disability cannot arrange all they might want or need to do for themselves. The greater the severity of disability, the larger the knowledge or skills gap becomes. Good support can help to fill this gap. This means planning for the best use of time and giving people as much support as they need to get things done for themselves.

With sufficient planning and support, everybody can:

- participate in activities and have a full day regardless of their disability
- contribute even if they haven't got all the skills needed for a particular activity
- take on their share of responsibility... and
- be involved in things they like to do and make informed choices.

Positive Interaction

There are three key elements to how we support people to take part in everyday activities:

- levels of support or ways of giving support
- task analysis
- positive reinforcement

Levels of help or ways of giving support

The starting point is to assess the type and level of help an individual would need to participate in a range of activities. The ways of giving support are:

ASK INSTRUCT PROMPT SHOW GUIDE

In addition to this, there may be appropriate aids and adaptations available to make the task easier or more accessible for individuals to carry them out.

Imagine that you are unfamiliar with using a TV remote control and need to be able to switch to channel 3 to watch your favourite programme. To become competent, you may require one or more levels of support, depending on your needs.

ASK is a verbal prompt to let someone know it's time to do something:

“Would you turn the TV to channel 3?”

“It's time for your programme on channel 3.”

INSTRUCT is a number of verbal prompts breaking down the task into easy steps:

“Pick up the remote control.”

“Find number 3.”

“Point the remote at the TV”

“Press button 3.”

PROMPT can be a gesture or sign to tell the individual what to do or using signs to mimic the act. This can be used with INSTRUCT:

Point to the TV and the remote control and say, “channel 3.”
Pick up the remote control and hold it out to the individual, pointing to the TV and button 3.
Gently nudge the individual’s arm towards the remote control.

SHOW is a demonstration of what needs to be done. This gives more information about the task and is visual. Show can be combined with PROMPT and INSTRUCT:

Passing the remote control saying, “time to change to channel 3.”
Handing it to the individual and pointing to button 3, then the TV.
Completing the act whilst explaining each step.
Putting the channel back then asking them to carry out the task using prompt and instruct.

GUIDE is providing physical help to do something, depending upon the need of the individual. Hand-over-hand support is the most effective and can be used for all or part of the task:

Guiding the individual’s hand to pick up the remote control. Picking up the remote control.
Locating button 3.
Pointing the remote control at the TV.
Pressing button 3.

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All the different levels could be required during one whole task and part of the assessment will include identifying, with the individual, the right type of support needed at each stage of the task.

- **Aids and Adaptations**

For example, a larger remote control with a bigger number 3 on the button. Colour coded buttons for those who know colours, but not numbers may help in the case of the previous example of changing the TV channel.

- **Graded Assistance**

Sometimes it can be hard to know how much assistance someone needs. Developing a system of Active Support can help you assess the right level of support for each individual. Too much support can lead to staff taking over. Too little support could lead to individuals failing the task.

Graded assistance means changing the amount of support until you reach the most appropriate level and always starting with the least amount of support.

Ref: Taken from 'Person-centred active support'. Avenues Group Active Support Brochure.

- **Task Analysis**

Breaking down a task into smaller, more manageable steps is sometimes called 'task analysis'. The steps to a task usually occur in sequence like in a recipe book. Every step can then be supported at the level the individual needs, using ASK - INSTRUCT - PROMPT - SHOW - GUIDE.

At first, the steps should be small and manageable to help the individual to achieve success and maintain motivation. A lack of achievement can lead to the individual becoming frustrated and giving up on the task.

Think about making an 'Airfix' model of a plane. If you didn't have detailed instructions of the order in which you put the pieces together, you would find the task a lot more difficult, it would take much longer and maybe even impossible.

Look at the table on the next page, here we have broken the task of brushing your teeth in to small steps.

Fewer larger steps	More, smaller steps for individuals who need more support
Get toothbrush	Get toothbrush Put toothbrush down on flat surface
Get toothpaste	Get toothpaste
Take off lid and squeeze toothpaste onto toothbrush	Take lid off toothpaste and put down Hold toothpaste over toothbrush Squeeze toothpaste on to toothbrush Put lid back on toothpaste
Return toothpaste	Return toothpaste
Turn on cold water tap	Locate cold water tap Turn on cold water tap
Brush teeth	Put brush to teeth Move brush up and down over front teeth Move brush to side and move up and down Move brush to other side and move up and down Move brush to inside of teeth and move up and down
Rinse brush and return	Rinse brush and return
Turn off tap	Locate tap Turn off tap

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Once the task is broken down into steps or components appropriate for the individual, the support can start from either the beginning or the end of the task. This is known as 'forward' or 'backward' chaining respectively and provides a consistent approach.

In 'backward chaining', the support worker would complete most of the steps in the task, leaving the final step for the individual to carry out, using an appropriate and agreed level of support. Once the individual completes the step, positive reinforcement occurs. When the step has been mastered, the next step above can be included in the plan, though it may still be necessary to ask or prompt to maintain the last step. This process will show real outcomes for the individual.

'Forward chaining' follows the same principle, but starts with the first step of the task.

The most appropriate choice may depend upon the level of difficulty of the steps involved, but if the reward is naturally occurring, such as making a sandwich or a drink, then using backward chaining leads to the reward being more quickly available.

- **Positive Reinforcement**

When positively reinforcing an individual's participation in a task or activity, it is important to give recognition when that individual is doing the right thing, especially when they are doing it well. Giving recognition in this way is sometimes called positive reinforcement and we all respond to that!

Sometimes the positive reinforcement is the natural end product of the task, e.g. in our changing channel example, it could be watching your favourite programme. The individual is rewarded directly from the task they have participated in, or simply working together.

It is important to consider what the individual responds positively to and how support is given, e.g. making it fun or using positive language. Positive reinforcement will be different for each individual.

The individual is not participating

If the individual doesn't appear to want to actively participate, it may be due to the planning, approach, levels of support, inconsistency or environment.

For example: If I am a music lover and you turned off my music and asked me to come and do something I liked less, I would be less likely to want to participate and less likely to succeed.

Therefore 'timing' needs to be taken into consideration. If at first the individual doesn't appear to want to participate, try again later and you might find that it was just not the right time for them.

It may be that the task is too hard or unrewarding, which may lead you to either re-look at the steps involved in the task analysis, or the level of positive reinforcement.

Everyone is different and some individuals may find it harder to concentrate than others. When supporting individuals to carry out tasks, give clear relevant instructions, use visual aids if this helps and don't distract from the task by talking about other things.

Longer tasks can be split into smaller chunks, with breaks in between. If the individual loses interest and doesn't appear to want to carry on until completion, don't make a fuss. Maybe next time, they will see the task through.

If the individual shows signs of disruptive behaviour such as shouting or hitting out, you may need to re-assess the task and approach. Instead of giving up, leaving them disengaged from activities, you might try an approach which involves the steps:

IGNORE > > REDIRECT > > REWARD

Ignore - doesn't mean ignore the individual! It means don't give any response to the behaviour, rather re-direct to a task where a reward can occur in a calm, warm manner.

Redirect - in redirecting, use minimal cues (e.g. non-verbal), thus avoiding the possibility of reinforcing the inappropriate behaviour. This may need a few attempts,

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but once the redirected activity has begun, the reward should quickly follow. If redirection fails to lead to a response, other prompts can be tried, but the whole process should be as quick as possible to prevent the individual being rewarded for inattentiveness.

Reward - is about using sincere praise, verbal and non-verbal, but don't keep the activity going for long. You should then suggest a short break and return to the original task.

Taken from The Active Support Handbook, ARC Cymru 2009

Your service may have its own positive behavioural support model, which you should follow.

It may be too early to evaluate and the individual may just need more time to become used to being involved in more activities. Consider the exercise on the following page.



exercise 3

Think about the following scenario, and look at how the Support Worker has used different strategies to 'Actively Support' Jean. Using a coloured pen or pencil underline all the key words that you have learned about working in an 'Active Support' manner.

Jean was being supported to make a cup of tea, using a variety of levels of support.

She was asked if she wanted to make a cup of tea, which she did and this prompted her to come to the kitchen. The Support Worker, Anne, then used 'instruct', as Jean followed by filling the kettle and switching it on, taking down two cups, tea bags and placing one in each cup. Anne used 'prompt' and 'show' to remind Jean where to get the milk from (fridge), etc.

When the time came to pour the milk into the cups Jean was reluctant. Anne guided her to take the lid off the milk and pick up the container. Anne noticed that Jean, was struggling to lift the milk container and pour the milk into the cups. She had never noticed this before, but today the container was full and Jean spilt a little. She appeared to be upset about this and walked out of the kitchen, losing interest in her tea.

Anne took both teas to the living room and told Jean that she had done very well, but that she had noticed that the milk carton was too big for Jean to lift and smaller ones were available.

Now there are always smaller cartons in the fridge and Jean manages really well with these and now needs minimal levels of support throughout the whole activity.

Remember for this way of working to be successful, all the staff need to work in the same way, using the same type of prompts and processes. It would be no use to Jean, if every time Anne worked with her, she followed the routine written above, but when other support workers worked with Jean they supported Jean by telling her every step of the way through making a drink, "get the cups", "get the tea bags", etc. If that was done by many of the remaining staff Jean may struggle and not have the confidence to do the task with Anne in the same way.

Consistency

It is important that all staff use the same agreed approach in the same manner to avoid confusion for the individual. Consistency is essential for each individual as this not only avoids confusion but also helps to establish patterns of working and doing things. In turn, this repetition will support the individuals in their learning.

The active support plan is part of the wider person-centred support plan and should be followed by those supporting the individual.

Person-centred daily plans

Person-centred daily plans are sometimes called other things such as daily support plans, weekly planners, PCP plans, etc. No matter what the plan is called the 'daily plans' are necessary to ensure that the individual is supported to carry out all the important agreed activities and in a consistent way. However, they can be flexible if needed.

We all have plans and routines. This may be how often we vacuum and dust, or change our beds, or the times that we eat breakfast, lunch and dinner.

There are some tasks that we have to complete, such as cooking and cleaning, then there are other activities which have a different function, such as social, educational, vocational, etc. We constantly juggle our time, but still retain a mental plan of what we need to do, which we change and adapt as we go along, according to circumstances.

think about



Milly planned to cook the dinner for 6pm. She began her preparations, but was interrupted by a phone call from her Mum, which lasted for almost an hour. Milly checked the time when she went back into the kitchen and told the family that dinner would now be ready at 7pm.

We must always remember: part of promoting independence is being flexible and adapting to the individual's needs and preferences.



remember box

There may be a number of support workers following an individual's plan, so it needs to be:

- clear
- communicated
- co-ordinated.

It is important that

- All staff and others involved should follow the plan and complete the agreed records.
- The plan must be person-centred, which means the individual should be the focus of the plan.
- The plan should always be agreed with the individual.
- It should include the daily/weekly household tasks, along with the social, leisure and other activities. Some household tasks take place more regularly than others, such as washing up, and some activities are routinely done at certain times of the day, such as getting dressed. Other tasks can be fitted in, but must be identified on the plan.

It may be helpful to work on a weekly plan first, then split activities across the days, but remember that the plan is not 'set in stone' and changes can be made.

The aim of having a plan like this is to ensure that there is sufficient meaningful activity identified and that the individual is not disengaged for long periods of time.

Disengagement

Disengagement means not being involved in constructive or meaningful activity, and can include aimlessly wandering about, pacing, staring, sitting, lying down, purposelessly fiddling with items and so on, with no social contact.

The Activity Support Plan

The support plan has to contain the activities that have been identified by the individual on their person-centred plan. It needs to cover:

- the activities the individual will be participating in each day
- who will be supporting the individual
- how the individual will be supported in each activity
- a daily record for monitoring and evaluation.

Reviewing or monitoring and evaluating the daily plan

Activity Support Plans should be reviewed regularly by all those involved, especially the individual. The review should include:

- What went well and what went wrong, from the individual's perspective, the family and carers and health and social care workers' perspectives.
- What has changed, e.g. strengths, abilities, support needs, likes and dislikes and aspirations.

Consistency in planning

We have already said how important consistency is in Active Support in general, but it is also important to have consistency in planning.

Sometimes, the way a task is broken down and agreed in the plan does not conform to the way in which you and other staff members would carry out the task or activity. You must remember that you are supporting each individual in their chosen manner and it is important that all the support staff maintain this approach, as an inconsistent approach could confuse and impede learning and development.

Your workplace may have its own version of an active support plan. There is an extract from an example plan, on the next page.

Activity Support Daily Plan

Daily Support Plan for	Derek
Day of week	Tuesday
Staff on duty	Hours Working
Jamie	06.30 to 13.00
Jennifer	07.00 to 14.00
Connie	12.00 to 18.00
David	12.00 to 19.00
Sandra	17.00 to 21.00
Jasmine	20.00 to 06.30

Time of day	Activity	Staff	Additional Information
07.30 - 08.30	Get up Shower and wash hair Shave Get dressed Make bed	Jamie	Reminder for washing hair and rinsing properly Support for shaving Prompt bed making
08.30 - 09.30	Feed cat Breakfast incl. preparation, making toast, clearing away after, wiping surfaces Washing up and drying up Clearing pots away	Jennifer	Prompts and guidance Prompt hand washing before food prep and after petting cat Show keeping surface clean
09.30 - 11.00	Collect washing Put washing machine on Hang washing to dry or put in dryer	Jamie	Support instruct and show with sorting colours, etc.
11.00 - 12.00	Think about lunch, prepare lunch Water plants	Jennifer	Support and guidance in instruct and show food preparation
12.00 - 13.00	Lunch Washing and drying up	Connie	Prompts needed
13.00 - 13.30	Get ready for volunteering at charity	Connie	Checking bus fare, mobile phone, etc.
13.30 - 16.00	Volunteer at charity shop	David	Support in place in shop
16.30 - 18.30	Prepare, cook and eat tea Washing and drying up	David	Support and guidance in instruct and show food preparation
18.30 - 21.00	Weekly shop at supermarket Make shopping list Complete shopping Put shopping away	Sandra	Support with list and shopping for things only on list Budgeting
21.00 - 23.00	Watching TV, getting ready for bed	Jasmine	Prompts cleaning teeth, washing

important information



Important aspects of activity support plans are:

- the plan needs to be flexible
- you need to consider what is involved in the daily running of the house
- consider each individual's current routine
- identifying the core activity and support plan for the house for the week
- using plans on a daily basis
- monitoring regularly
- writing plans in performance terms
- identifying opportunities to target specific skills
- teamwork and consistency across the staff team is essential
- with regular reviews.

Ref: Adapted from 'Implementation and Evaluation of Active Support' (2004), Jill Bradshaw et al.

remember box



Collation of daily active support plans/reports can provide evidence of the extent of an individual's participation in the activities and tasks associated with a valued lifestyle. This can be useful for organisations/services when talking to Service Commissioners and Inspectors, etc.



Active Support

Workbook



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The Association for Real Change produced this Active Support Workbook as part of the Skills for Care Workforce Development Innovation Fund project 2018/19.

Active Support

This workbook belongs to

Name:

Address:

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Organisation:

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Line Manager:

Signature:

Date:

Active Support

Learning outcomes of this workbook

There are four learning outcomes in this workbook. The learner will:

1. Understand how Active Support translates values into person-centred practical action with an individual.
2. Be able to interact positively with individuals to promote participation.
3. Be able to implement person-centred daily plans to promote participation.
4. Be able to maintain person-centred records of participation.

question 1

Compare the characteristics associated with Active Support and the Hotel Model in relation to an individual's support.

Active Support	Hotel Model

question 2

Define the terms:

Promoting independence

Informed choice

Valued life

question 3

Identify practical changes that could be made within a service setting to:

Principle	Practical changes	Changes needed
<p>Promote an individual's independence</p>	<p>e.g. Support X to make a cup of tea by following an Active Support plan which includes the task broken down into steps (task analysis) with levels of support identified for each aspect of the task.</p>	<p>e.g. All person centred plans to include Active Support plans, which describe levels of support, task analysis and positive reinforcement strategy.</p>

question 3 cont...

Identify practical changes that could be made within a service setting to:

Principle	Practical changes	Changes needed
Support informed choices	e.g. Ensure that all those important to Y are involved in his person centred planning and reviews, including his Mum and brother.	e.g. None needed, as PCP reviews (6 monthly) already include Y's Mum, brother, key worker, college support worker and care manager.

question 3 cont...

Identify practical changes that could be made within a service setting to:

Principle	Practical changes	Changes needed
<p>Improve quality of life – a valued life</p>	<p>e.g. Monitor all Active Support plans to ensure individuals are participating sufficiently in meaningful activities.</p>	<p>e.g. Active Support plans must contain a daily record for staff to complete. These records should be monitored monthly by the manager and the individual, then information collated and analysed for the six monthly review.</p>

question 4

Describe and explain the three elements of **positive interaction** that promote an individual's participation in an activity

Levels of help or ways of giving support	
Task analysis	
Positive reinforcement	



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