

Status: Guidelines: Offers direction and guidance on good practice, need not necessarily be strictly adhered to.	Guideline No: BPH 02 Version No; 2 Date Approved: 01/08/12 Date Revised: 01/12/14 Review Date: 23/06/18
Title: Guidelines for developing & implementing Best Possible Health Assessments and Care Plans	
Written by: Clinical Governance & Service Quality Teams	
Approved by: CEO	
Cross Reference Policy on Best Possible Health Clinical Procedures and Guidelines CLGO4; CLSPO5; ADLGO1-9; HIQA National Quality Standards: Residential Services for People with Disabilities Guidelines on Person Centred Approach to Risk Management	

1.0 Purpose

The purpose of these guidelines is to provide guidance and direction to staff when undertaking the assessment and care planning process with a person receiving a Cheshire service around their health.

2.0 Scope

These guidelines apply to all staff involved in the development, assessment and implementation of the Best Possible Health planning process.

3.0 Responsibility

3.1 It is the responsibility of all staff involved in supporting people around their health to adhere to these guidelines.

3.2 It is the responsibility of all service managers to ensure staff are familiar with the guidelines and to monitor compliance.

3.3 It is the responsibility of the clinical governance and service quality teams to monitor compliance with these guidelines.

4.0 Definitions

Health

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. (World Health Organisation, 1998)

Best Possible Health

Best Possible Health may be defined as physical, mental, emotional and social well being, with an emphasis on seeking best possible health rather than avoiding ill health (DHS, 2000). Best Possible Health is individually defined by each person receiving a service given his/her unique characteristics, life experiences and preferences (CQL, 2005).

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Cheshire Ireland Document Name: Guidelines for developing & implementing Best Possible Health Assessments and Care Plans Document Number: BPH 02, Version Number: 2, Version Date: 01/12/2014.

Best Possible Health Assessment

A Best Possible Health assessment is a tool used by the Cheshire Ireland staff and the Service User to identify activities of daily living where support is required.

Best Possible Health Care Plan

A Best Possible Health care plan assists people to discuss their own health needs and puts actions in place where needed. It is usually a written document directing the care of the service user.

5.0 Background Information

Supporting people receiving a Cheshire service to achieve and maintain good health is an essential part of staff support. Health is basic to people's lives and should be the first concern of the service. Feeling (being) healthy allows people to think about other areas of their life that are important to them such as relationships, employment, home, recreation and leisure.

No service can absolutely guarantee that a person will be healthy or that nothing bad will ever happen to him or her. The service can have practices in place to support good health to the greatest extent possible.

It can be safely assumed that **most** people want to live as healthy a life as possible. However the supports needed for each individual to live a healthy life are different and unique to each person. That is why conversations with the person (and in some cases with others who know the person well) on how they feel about their health are crucial.

6.0 Guidelines

6.1 Developing a Best Possible Health Plan

- The *Best Possible Health Assessment* tool should be used to begin the conversation with a person around their health.
- The assessment should be conducted by the Key Worker and the Cheshire Ireland Nurse or Head of Care.
- The assessment will identify activities where the service user requires support.
- Each of these activities requiring support, requires a corresponding care plan written by the key worker, Cheshire Nurse/Head of Care with continual involvement from the service user.
- Templates of care plans are available in the Cheshire Ireland Care Plan Library. These templates should be accustomed to the individual to suit their individual care needs.
- There are a number of steps in the process:
- **explain** to the person what it is about using the **information sheet**;

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- **discuss** with the person the appropriate people they may wish to assist them in the Best Possible Health process (e.g. Family member, advocate, others).
- **ask** the person (and those closest to them where appropriate) what support they require around their health; **get to know** the person's own definition of their health and their priorities by going through the assessment
- every activity requiring support must have a corresponding best possible health care plan.
- The service user must **sign** both the assessment and the care plan document(s).
- Consider if you need to talk to other people for input about the person's health (with their permission) or for guidance about how best to support the person when developing their individual best possible health care plan.
- Be mindful that when undertaking the assessment, it is not a tick box exercise. The important thing is to build a relationship with the person, get to know their health needs, document this in the person's individual care plan and support the person to maintain their health over time.
- Consider the person's emotional and physical wellbeing, as well as physical health.
- There is a requirement under the HIQA standards that health needs are documented. People should be in control of and consulted about how they wish their health information to be gathered and recorded. The information should be stored in a way that protects the person's confidentiality.
- At the end of the process, the person should have a completed best possible health **assessment**, and a best possible health **care plan**.

6.2 Health Promotion and Supporting People to Maintain their Health

- Ensure that you are familiar with Cheshire Ireland's clinical policies, procedures and guidelines so you can support the person on a daily basis around their health needs.
- Support the person to have regular examinations by health professionals (physical, dental, vision, hearing).
- Assist the person to manage their medication in line with the medication management policy. Assure medication administration practices provide the person with information about his or her medication and medical condition.
- Support the person to understand and manage their own medical condition (eg. Multiple Sclerosis, Muscular Dystrophy, Acquired Brain Injury) and ensure they are accessing up to date practices.
- Support the person to access relevant therapies (occupational, physiotherapy, speech therapy etc.) and to access specialized medical services (eg. neurology, psychiatry, oncology, nutrition, etc.) that support the person to maintain their health.
- Support the person to access information and services on healthy lifestyle options (exercise, good nutrition, external support groups and services) that will support the person to maintain their health.
- Assist the person to research and learn about healthy lifestyle choices.

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- Look to the community to assist people in learning about and accessing health care options. There are many health-related community organizations, groups, and resources, including alternative medicine that may be helpful to specific individuals or at certain times.
- Engage in community building with others in your community who are concerned about the lack of affordable, accessible health care options for community members.

6.3 Accompanying a person to a medical appointment

- Ask the person who they would like to accompany them to a medical appointment and assure a plan is in place for this to happen. Ensure that this is a person that knows them well, and respects the person's privacy. You could consider a family member or friend if a Cheshire Ireland staff member cannot accompany the person.
- Consider with the person if there is a need for the support of an independent advocate. Advocates can be contacted via the local Citizen's Information Centre (www.citizensinformation.ie)
- Support the person to prepare for the medical appointment (e.g. Voicing concerns, preparing questions, asking for specific information).
- Ensure that the necessary information is brought to the health appointment (e.g. health records, referral letters).
- Staff must remember that their role at all times is to provide support to the person so they can have as much control as possible and a say in their medical treatment.
- Staff should ensure that information that is given to the health service is accurate and complete.
- Staff must ensure that all instructions, recommendations provided by the health service are transferred to the person's best possible health care plan and records when they return to the service.

6.4 Managing Risk

- When completing the Best Possible Health Assessment and Care Plan, it is important that you recognise that every person has an individual definition of Best Possible Health. Avoid making judgments that restrict people from engaging in behaviour that is legal, even if it may be considered unhealthy.
- Respect the right of each person to make decisions with regard to their health.
- If you are aware of a person making a decision or engaging in activities or behaviour that puts themselves or others in danger or can cause harm (e.g. not taking their medication, taking excessive amounts of alcohol, eating when they have a PEG), you have a duty to intervene.
- In the immediate term, you must take steps to ensure the person's safety and then bring this issue to the attention of a senior member of staff (e.g. Service Manager, Service Coordinator, Senior Care Worker).
- The process for addressing risk, danger and harm to an individual or others, is for the manager of that service

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to undertake a risk assessment with the person and their supporters using the Policy and Guidelines on A Person Centred Approach to Risk Management.

6.5 Informed Consent

- The HIQA National Quality Standards for Residential Services for People with Disabilities, state that informed consent should be obtained from a person prior to any medical treatment or intervention.
- The HIQA standards also state that where there is any doubt as to the individual's capacity to decide on any matter of fundamental importance to him/her, his/her capacity to make the decision in question, is assessed.
- Impending mental capacity legislation presumes that a person is capable of making informed decisions unless an assessment of the person's capacity finds otherwise.
- Cheshire Ireland will be developing a process to carry out with people where concerns have been raised about capacity and/or informed consent.
- Until such a time as the capacity legislation and Cheshire Ireland's assessment process for capacity is in place, in circumstances where a person may need support to make a health care decision, the person should be supported by those closest to them to make an informed decision (this could be a family member, friend, advocate).
- We should ensure that people have knowledge about and support to make health care decisions before a medical crisis occurs.
- Staff cannot give consent on the person's behalf to any medical procedure.

7.0 References

- Cheshire Ireland (2008) Supporting Advocacy in Cheshire Services: A Handbook for Staff
- Council for Quality and Leadership (2005) Quality Measures
- Department of Human Services, Victoria (2000) Disability Services Health Care Policy
- HIQA (2009) National Quality Standards: Residential Services for People with Disabilities
- Kendrick, Michael (2002) Some Significant Ethical Issues In Residential Services
- Smull, Michael (unknown) Helping Staff Support Choice