Progress for Providers

Checking your progress in using person-centred practices

Managers

Acknowledgements

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Progress for Providers

Checking your progress in using person-centred practices (managers)

Ui mai ki ahau,
'He aha te mea nui o te Ao?'
Māku e kī atu,
'He tangata, he tangata, he tangata.'
If you were to ask me,
'What is the most important thing in the world?'
I would reply,
'It is people, it is people, it is people.'

Tena ra koutou katoa,
Tenei te mihi atu ki a koutou katoa I runga I te kaupapa o te wa nei.
Tenei te reo karanga o Tautoko Service.
Haere mai ra ki te kaupapa matua o tea o nei
Ara, he tangata, he tangata he tangata

Ko te Manu e kai ana te miro, nona te ngahere,
Ko te Manu e kai ana te matauranga nona te ao,

Foreword

Dr Garth Bennie Chief Executive NZDSN

Progress for Providers offers a practical resource for organisations to bring to life what being person-centred really is – at an organisational and practice level. It offers a framework to firmly imbed the notion of choice and control for disabled people who are using or interacting with support services. Implicit is the shift in power – from those who provide to those who are using support services and the prospect of services that are far more person-directed. The disability sector has a history of offering up tools and resources that are announced as "the next big thing" in relation to activities like individualised assessment, personal planning and support. There is some inevitability about how the documents associated with these activities become bureaucratised as evidence in themselves that quality services and outcomes are being achieved.

The aspect of Progress for Providers that is a significant departure is the requirement to imbed the tools and resources in the operation of the provider as a prerequisite for using them with those being supported. The idea that staff, management and those in governance roles engage with and use the tools as a way of working with each other and as a way of building a person-centred organisation provides a degree of fidelity that is rarely observed. Thus while the tools are ultimately designed to facilitate person-centred decision making and support they are also organisational tools that foster reflective practice, support recruitment and matching of staff with people being supported and encourage a team culture that is consistent with the values that need to be underpinning the support of disabled people. Progress for Providers will also be a welcome resource for those involved with level 3, 4 and 5 qualifications to draw from as learning material.

I would encourage agencies to consider embracing Progress for Providers as a practical tool to support organisational transformation aimed at more personalised and person-directed approaches where disabled people will have real choice and control about where, with whom and how they live, work and engage with their communities. If your organisation is serious about imbedding Enabling Good Lives principles in practice, then Progress for Providers will be a valuable addition to your tool kit.

Progress for Providers (NZ version)

Checking your progress in using person-centred approaches (Managers)

Introduction

Progress for Providers – Checking your progress in using person–centred approaches (Managers) is a self–assessment tool for managers to use individually and with their teams.

The new models and frameworks in New Zealand, in demonstration or design stage – including Living My Life (ACC DSS); Let's get real: Disability (Te Pou); New Model for Supporting Disabled People: Choices in Community Living, Local Area Coordination, Enhanced Individualised Funding, and Supported Self–Assessment; the Putting People First Quality Review (MoH DSS); and Enabling Good Lives – heralds a significant shift in the provision of disability support. People with disabilities will have increased power to exercise choice and control in the pursuit of their goals and in the planning and delivery of supports. Progress for Providers assists in this process of change. Progress for Providers accommodates Maori concepts of health and wellbeing.

The concept of control and choice in everyday life is consistent with the United Nations Convention on the Rights of Persons with Disabilities (2006). Upholding the human rights of people with disabilities is at the core of the change, and embedding a rights–based approach for all practices within the sector is critical.

Using person–centred approaches helps people with disabilities to have more choice and control in their lives, and helps staff to provide the best support they can in ways that reflect what is important to the person in question. Working in this way is not necessarily about doing more, but doing things differently.

Here in New Zealand, we have some powerful key documents that underpin the way we strive to interact with each other in our country, Aotearoa.

The first is The Treaty of Waitangi. Te tiriti is a fundamental document to guide the unique way in which we operate in New Zealand society to honour the partnership between tangata whenua and tauiwi. In the resource section, you will find information about three key Maori models of health – Te Whare Tapa Wha, Te Pae Mahutonga, and Te Wheke – as well as Faiva Ora, the National Pasifika Disability Plan.

Progress for Providers – Checking your progress in using person–centred approaches (Managers) reflects the 'Enabling Good Lives' principles. Using person–centred practices with individuals and teams directly contributes to the 'Let's get real' disability framework and the goals of the New Zealand Disability Strategy. In the resource section at the back, you will find more details about how this document links to other initiatives and resources available in New Zealand.

There are many different tools and approaches that are used by organisations in their efforts to work with people in a person–centred way. Many of these have been developed and refined over a number of years in consultation with interested parties around the world. Others have been adapted from original person–centred planning efforts. Some, while called person–centred, don't actually embody either the values or the practices that those steeped in person–centred approaches would consider essential.

In *Progress for Providers (Managers)*, the tools and approaches referred to primarily come from person–centred thinking skills. Person–centred thinking skills are a set of skills that are values–based, yet highly practical in nature. They come from the work of The Learning Community for Person Centered Practices (http://www.learningcommunity.us/), an international organisation with the primary focus of helping people to have positive control in their lives.

Person–centred thinking skills provide a way for organisations to demonstrate how they are working with people in a person–centred way, which is why they are the primary approach referred to throughout Progress for Providers (Managers). This is not to suggest that this is the only way; however, organisations are urged to ensure that their own approach is both values–based and practical in nature, as otherwise measuring genuine progress will be difficult.

Person–centred thinking tools have been included in *Progress for Providers (Managers)* to assist managers in tracking their progress by providing concrete examples. An Explanation of Terms has been developed to clarify the meaning and/or context of the terms used throughout this resource. This includes an explanation of the tools referred to in the examples. If the tools and/or approaches in the examples differ from those practiced by the organisation, the Explanation of Terms may assist managers in making comparisons and identifying progress.

For this resource to be implemented effectively, there must be connections between it and the organisation's broader strategic directions and approaches. This is to say that the application of the practices suggested in *Progress for Providers (Managers)* at a frontline level needs to be supported throughout the organisation. This resource will be effective in organisations that have a clear understanding of person–centred practices, and have a quality management system in place that supports this. With the different emphases in different sections, there may appear to be some duplication. This is deliberate to ensure that different elements of person–centred approaches are implemented in a multitude of ways, at all levels and functions of the organisation.

This tool is relevant for providers supporting people who use disabilities, as well as those working in health, education, employment and social services. *Progress for Providers (Managers)* recognises the importance of seeing and understanding the support network around a person, including whanau/family/hapu and iwi. This tool can be applied by organisations working with people with any kind of disability.

How to use Progress for Providers – Checking your progress in using person-centred approaches (Managers)

Progress for Providers – Checking your progress in using person–centred approaches (Managers) can be used:

- By yourself, for individual self–reflection.
- With your manager, to agree individual goals.
- With your team, to agree team and individual goals.
- With other managers; for example, as a practice group, or as part of an organisational development program.

Progress for Providers (Managers) is divided into four sections looking at:

- Person–centred thinking skills and approaches.
- Supporting people to have choice and control.
- Creating a person–centred culture within teams.
- Action planning tools.

This document also has an Explanation of Terms included at the back.

If you are a frontline manager, all the sections will be relevant to you.

If you are a middle or senior manager, the first and third sections will be the most relevant.

You choose the statement in each section that best corresponds with your progress to date (statement 1, 2, 3, 4 or 5).

For example:

- If you are Getting started, you are likely to tick the first one or two statements.
- If you are making Some progress, then perhaps the third statement.
- Good progress is likely to mean that you would tick the fourth box.
- Excellent progress would mean that you are ticking the fifth statement.

This resource is a self–assessment tool that should help you identify what you are doing well and what requires improvement. While you can use it to promote the merits of your services, this is not the intended purpose, and may limit your capacity to use it for genuine improvement. As an example, if not all elements of a statement are true for your organisation or team, it is likely to be more beneficial to consider how improvements can be made on these specific elements, rather than ticking the statement as complete.

Action and resources

Once you have assessed your progress as a manager and/or as a team, you can use this information to develop an action plan.

The action plan should describe how you are going to develop and change to move towards statement five (excellent progress). There is a blank action summary as part of this book. You may want to focus on a few actions in more depth. There are detailed action planning pages for this from page 28 – 31.

A list containing further information has been provided in Section 4 to assist frontline managers and organisations, providing links to a range of resources that could help inform your action plan. These resources include publications, examples from providers and funding bodies, podcasts and web resources, courses and free downloads.

Section 1
Person-centred thinking skills and approaches
Knowledge, skills and understanding

Tick one box ✓

1	No one in my team has any understanding or experience of person-centred thinking tools or approaches.	
2	I know that we need to develop our skills, knowledge and understanding of person-centred thinking tools or approaches. I have not developed any plans to do this and am not sure how to begin.	
3	I have a plan to develop our understanding and some of the team have begun to use person-centred thinking tools or approaches. We have started to look at some of the information available on person-centred thinking (for example, Michael Smull's podcasts).	
4	I am using person-centred thinking tools and approaches myself, and all the team know and are successfully using several of these skills. I have a one-page profile and so do each of the team, and we are using these in our work together. Staff understand that it is not just about the tools they use, but the listening and thinking that go with it.	
5	We all have our own one-page profiles, and we use these to inform our practice. We are all confident and capable in using person-centred thinking tools or approaches. Staff can describe specific, practical person-centred practices that they use (why and how you can use them, and the benefits to the person), and talk about their experience and the outcomes achieved. As a manager, I model enabling the people we support to have as much choice and control as possible in their lives. I proactively use person-centred approaches in all areas of my work.	
	How I came up with this score and ideas for what to do next	

Supporting individual development in person-centred thinking tools and approaches

1	Our organisation has no process in place to reflect on how we work and how to support staff to develop their skills.	
2	I recognise that all staff need ongoing support and opportunities to build their skills and knowledge, and a way for their progress to be monitored. I am not sure how to go about this.	
3	I have started to talk to each team member about how they are doing in using person-centred thinking tools and approaches in their work. This is on an ad hoc basis.	

Tick one box ✓

4	I talk to each team member about how they are developing their skills in using person-centred thinking and approaches, and how I can support them in this. This is planned and occurs on a regular basis. I have a record of the progress that team members are making (for example, using the person-centred thinking rating scale).	
5	Each staff member has a regularly reviewed personal development plan that includes how they are developing their competence in using the person-centred thinking tools and approaches. This includes celebrating successes and problem-solving difficulties. I ensure that each team member reflects on their practice and is accountable for this. We use a range of ways to ensure each team member has individual support in using person-centred thinking tools and approaches (for example, peer support, coaching, and person-centred thinking as a standing agenda item for supervision). There are mechanisms for recording and sharing best practice across the organisation.	
	How I came up with this score and ideas for what to do next	

Supporting team development in person-centred thinking tools and approaches

1	We don't give time during our meetings to how we're doing in using person-centred approaches. When we do meet, we solely focus on processes and procedures.	
2	I recognise that it is important that we meet and reflect about how the team are doing in using person-centred approaches, but we struggle to prioritise this or find the resources to allow this to happen.	
3	I make sure that we meet regularly and set aside time during team meetings to reflect on person-centred practice. Sometimes, this includes how we are using person-centred thinking tools and approaches in our work.	
4	I use person-centred thinking tools and approaches in our team meetings. We work together to develop our understanding of person-centred thinking tools and approaches, and reflect on successes and challenges.	
5	We have a strong culture of reflective practice around our experience of using person-centred thinking tools and approaches. We have a variety of ways to support team members to develop their skills in using person-centred practices (for example, as a standing agenda item in team meetings, sharing best practices and problem solving, practice groups, or a regular 'person-centred thinking tool of the month'). The information is collated to inform organisational training and development planning.	
	How I came up with this score and ideas for what to do next	

Section 2
Supporting people to have choice and control

Seeing the person as an individual, and appreciating culture, strengths and qualities

Tick one box ✓

1	We have information about the person's support needs, which is usually provided by whoever has requested or funded the service. This information is focused primarily on needs. Staff struggle to describe the person in a positive way, and feel uncomfortable doing this.	
2	We recognise the importance of seeing the person as a whole person, including their culture, strengths and qualities, but we don't usually record or share this.	
3	We have a commitment to see the person as a whole person, and to develop ways of gathering a range of information about them in their support plan. This includes recognising their culture, strengths and qualities.	
4	We collect person-centred information about each person we support. This includes recording the person's culture, strengths and qualities (for example, in a one-page profile). We do more than just record this information; we also try to use it through ongoing conversations with the person and in the way we provide support.	
5	We know and have a record of each individual's culture, strengths and qualities. We have found a variety of ways to communicate these to them and people important to them (for example, appreciation books or one-page profiles). We actively use this information to support people to develop relationships and become contributing citizens. We describe people positively, and individually, as a matter of course. We encourage others to do the same. We see this information as belonging to the person, travelling with them across settings and services.	
	How I came up with this score and ideas for what to do next	

Understanding the person's history/identity

1	All we know about the person comes from the individual's support plan, funding body or our recent experience of supporting them. If we know anything about their history, it is more likely to be in the context of negative experiences of behaviour.	
2	We understand the value of knowing the person's history and background in a balanced way, so that we can support them better. We do not have any way to do this at the moment. Beyond essential information, any history that we do know is shared verbally if at all, and is not recorded.	

		Tick one box ✓
3	We have a commitment to finding out about a person's history, and have started to work with a few people to talk about their histories and record them.	
4	We have recorded histories for most of the people we support. We have different ways to share this information, and are working towards recording histories for everyone we support.	
5	We know and have a record of each individual's personal history, in the amount of detail that works for them. This is the person's history and not a history of services. This is recorded in a way that works for the person (for example, on a history map, whakapapa, life story book, timeline, scrapbook, memory box or DVD). We always use this information as the foundation for current and future approaches to support.	
	How I came up with this score and ideas for what to do next	

What matters to the person now

1	We know and focus on how to keep the person healthy and safe. We do not know or record what is important to each individual beyond basic information about their schedules, likes and preferred activities. This information is not reviewed as the person changes.	
2	We understand that we need to recognise what is important to the person. We are looking at how to support the person to express what is important to them, and to ensure that these things are consistently present in everyday life. We are looking at how to record this information.	
3	We have started to use some person-centred thinking tools and approaches to gather information about what is important to the person (for example, 'good day and bad day', relationship maps, and learning about the person's preferred routines). This information is starting to change how we support people.	
4	We have information about what matters to most of the people we support. This is recorded and regularly updated (for example, through a one-page profile or detailed information about what is important to the person). Team members actively use this information to support people.	

Tick one box ✓

5	We know what is important to each individual we support. This is clearly recorded and contains specific, detailed information, including relationships, routines and interests. (For example, everybody we support has a one-page profile or a person-centred description that is used as a living document that changes with the person. For Maori, this may be recognised through their pepeha or mihi). Staff intentionally work to make sure that what is important to the person is happening in their day-to-day life, and identify where there are obstacles to achieving this (including where it is the organisation's own procedures and practices that cause these obstacles). We have a process for addressing obstacles within the team and more broadly within the organisation (for example, through team meetings, supervision, individual planning or strategic planning).	
	How I came up with this score and ideas for what to do next	

Working towards outcomes that the person wants for their future

1	We provide support based on the person's individual support plan and funding. We are unsure what people want for the future.	
2	We realise that in order to support people effectively, we should understand their aspirations for the future. However, we are not sure how to do this, or whether it is really our role.	
3	We are trying different person-centred approaches to enable the person to think about their future, and we have recorded goals for some people. We are working on our role in supporting the person to achieve their goals.	
4	We have made good progress in ensuring that everyone we support has an opportunity to think about their future by using person-centred thinking and planning. There are clear outcomes that each person is working towards.	
5	We have an understanding of what each person wants for their future – including dreams, hopes and aspirations. We gather this information from the person and from those who know and care about them (using person-centred thinking, planning or person-centred reviews). There are specific, measurable and achievable outcomes that we are working towards with the person to achieve. We are clear about our role, and we review progress with the person. This information is used to develop a plan and to hold the team and organisation to account.	
	How I came up with this score and ideas for what to do next	

Tick one box ✓

How the person wants to be supported

1	We have established policies and procedures for how we provide support. As a result, we support everyone in the same way.	
2	We know that to support people effectively, we need to find out how they would like to be supported. We are not clear on how we can do this or how to record the information. Currently, our approach is not flexible enough to allow this to happen. We are task-orientated rather than people-orientated, but we want to change this.	
3	We acknowledge the importance of finding out from the person what good support looks like for them individually. We have begun to explore how to do this, and have developed a plan to gather this information for each person, using person-centred thinking tools and approaches.	
4	Everyone in the team is clear about what good support looks like for each person. We have started to record this (for example, in one-page profiles or an individual support plan). Staff understand what this means for their practice on a day-to-day basis, and are using this information to inform how they support people.	
5	Each person has told us how they want to be supported, and we act on this. This is recorded in a way that is clear, detailed and specific to the person, and this information is used by staff to deliver individual support. The information includes the support that people want in their routines, in their relationships and interests, and in helping them to be healthy and safe. We review staff performance based on their ability to provide support in the way that the person wants. We receive acknowledgment from the person that we are providing support in the right way for them.	
	How I came up with this score and ideas for what to do next	

How the person communicates

1	We support the person by following our policies and procedures. We do not specifically record how the person communicates.	
2	We realise that we need to understand more about how each person communicates. We are unsure of how we can achieve this.	
3	We have started to capture information about how the person communicates (for example, communication charts and communication profiles). Staff are beginning to understand that all behaviour is communication, and that communication is a basic human right. Staff are developing their skills in observing, recording and communicating with people.	

Tick one box ✓

4	We have clear information captured about how the person communicates and how best to communicate with them. This applies to the majority of the people we support. Staff have a growing understanding of their own role in effective listening and communication.	
5	We know and respond to how the person communicates and how best to communicate with them, particularly if they don't use words to communicate. This may be in Te Reo or New Zealand Sign Language. This is clearly recorded (for example, on communication charts or profiles). Staff know what the person means when they behave in certain ways, and how they should respond to this. All staff consistently use this information on a day-to-day basis and update it regularly.	
	How I came up with this score and ideas for what to do next	

How the person makes decisions

1	The person is not involved or empowered to make significant decisions about their life.	
2	We realise that the person has a right to be involved and included in any decisions about their life. We also recognise that this could help people feel more in control. We do not know how to support this yet.	
3	We assist the person to become more involved in decision making, both on a day-to-day basis and with more significant decisions. We have introduced different approaches to help the person make decisions if they need additional support (for example, decision making agreements, or providing information in accessible formats). We involve those who are important in the person's life to support this.	
4	The support we provide centres around the right of the person to make decisions about their life. The use of tools to assist this, such as decision-making agreements, is common, and we have many written examples of people making decisions about what is important to them. We are struggling to ensure that this is for all people, regardless of their abilities. Staff support people to record their decisions.	

		Tick one box ✓
5	Staff know the decisions that are important to the person, how to support the person with these decisions, how the final decision is made and who else to involve, including whanau/family. This is recorded, for example, in a decision-making agreement. Where needed, we make sure the person gets representation or assistance (for example, advocacy, interpreters, supported decision-making processes, accessible information, etc). We assist the person to develop and maintain circles of support. We have supported some people to make decisions that challenged us. We have developed an understanding of how to manage this. The decision-making information we capture links in with our approach to risk.	
	How I came up with this score and ideas for what to do next	

Acting on what the person is telling us

1	We do not know what is working or not working for the people we support. We only hear about this when a grievance is raised or a formal complaint is made. Complaints are viewed negatively within the team.	
2	We want to learn about what the person thinks is working and not working in their life. We are not sure how to do this and are fearful that we will not be able to respond and make the changes they want. Staff struggle to think about how we will gather this information from people who have complex communication needs.	
3	We have started to routinely ask people what is working and not working from their perspective. This is about their life and the service they receive, and forms part of our planning process (for example, as part of a person-centred review). We see complaints as a mechanism for learning about what is not working for the person, and act on them accordingly.	
4	Staff are confident in supporting people to tell us what is working and not working, regardless of how they communicate. This happens for everyone at least once a year, and there is an action plan developed from this. We organise a meeting or review when the person lets us know that changes need to be made. We have created a system that will gather this information so that we can plan improvements in the way we provide support.	

Tick one box ✓

5	We have a process for discovering and recording the things that need to stay the same and what needs to be different from the person's perspective. We have clear actions (with a date and a named person responsible) to change what is not working. The action plan is regularly reviewed, and this information helps to inform change in the organisation. We know that the person has the right to raise grievances or make complaints, and staff actively support the person to do this when required.	
	How I came up with this score and ideas for what to do next	

Supporting the person in their friendships and relationships

1	The only relationships the person has outside of whanau/family are paid staff and people who use our service at the same time as them. We don't see it as our responsibility to support the person with relationships, nor do we think we are funded to do this.	
2	We realise that the person might want to meet and make more friends. We are fearful that this could expose them to harm and risk, and we are not prepared to accept responsibility for this. We are not sure how we would begin to find out which relationships are important in the person's life.	
3	We have started to work with the person to consider how we can support them to build and maintain relationships. We are still worried about risk and how to manage this. We have started to understand that we have a role in helping the person to develop circles of support. Staff are putting a greater focus on the person's interests and friendships, and how this may link in with their local community.	
4	We have tried a number of approaches to support people with their friendships and relationships. We know who is already important in the person's life (for example, by using a relationship map). The person now has opportunities to meet new people who are not paid to be with them. We are focused on learning how to assist the person to develop and maintain circles of support based on the new friendships they form.	
5	We support the person to form new relationships and friendships in their community (outside of staff and any other people who live with the person). We know who is important to the person, and support them to develop and maintain these relationships. This includes maintaining, reconnecting and discovering their cultural identity. This is recorded, for example, on a relationship circle. We have a strategic approach to friendships and relationships. Staff members see this as a key part of their role.	
	How I came up with this score and ideas for what to do next	

Tick one box ✓

Supporting the person to be part of their community

1	It is not our job to connect the person with their community.	
2	We think it would be good if the person was out and about in their community more, but we can't see how to do this within our current resources.	
3	We are committed to exploring how the person would like to be part of their community, and we have started thinking about how to do this with a few people. We have tried some tools to help us do this (for example, community maps, recording strengths and qualities, and 'Presence to Contribution').	
4	We support the person to go out and be part of their community where possible. We use person–centred thinking tools and approaches to help the person to think about their opportunities and choices, and to support staff to think about their role in the process.	
5	We know the places in the community that are important to the person, and other places they may like to be part of. This is recorded (for example, on a community map). We have a specific, measurable plan to enable the person to be fully part of their community, including places of cultural importance, and to make a contribution (for example, through using the Presence to Contribution tool). This is regularly reviewed, and there is evidence that people are becoming part of their community in a way that makes sense to them.	
	How I came up with this score and ideas for what to do next	

Section 3
Creating a person-centred culture within teams

Clear purpose

Tick one box ✓

1	We have an organisational mission statement created by the senior manager/management team/director. We have not considered how the mission statement should be reflected in the way we work.	
2	We think it would be helpful to think about our purpose as a team, but I am not sure how to go about this. Our team mainly functions in isolation.	
3	We have begun to talk with staff about our purpose as a team, and to think about how we can record and share this.	
4	We are clear about our team's purpose and how this fits with the organisation's mission statement. The team has developed this together with people supported and their families.	
5	The organisation's mission statement informs the team's purpose. Everyone understands the connection between the mission and their individual purpose and role. All team members know their purpose in relation to the people they support, their team and the rest of the organisation. This is recorded in a way that the team has decided upon and is shared with others. The team's purpose informs the work of the team, and there is evidence of this in practice.	
	How I came up with this score and ideas for what to do next	

An agreed way of working that reflects values

1	We don't really think about values, we just get on with the job.	
2	We realise that we need to explore our values and beliefs as a team. We know how this can inform our practice.	
3	We have started to think together about our team values and how we work together. We have identified what is working and what needs to change.	
4	We have agreed our team values, and developed an action plan that addresses what needs to change. This has been done in partnership with the people we support.	

Tick one box ✓

5	The team has a shared set of values and beliefs that underpin an agreed way of working. Our values include working in ways that ensure the people we support have maximum choice and control in their lives. This is clearly documented (for example, through ground rules, a team charter, a person–centred team plan, a team procedure file, etc). The team regularly evaluates how they are performing against these agreed ways of working by getting information from different perspectives, including from the people we support.	
	How I came up with this score and ideas for what to do next	

Staff know what is important to each other and how to support each other

1	My team do not know each other very well and often feel isolated from one another.	
2	I know my staff, but do not necessarily know what is important to them. I have started to work on ways that I can help the team to know more about each other. This includes what matters to them as people, and how we can support each other at work (for example, starting with one–page profiles for everyone).	
3	I am learning what is important to my team and how best to support them by using person–centred thinking skills and approaches with one another. We are all aware of what is important to each team member and how we can support one another, and we are working at putting this into practice.	
4	My team and I have all recorded how best to support each other and what is important to each of us. We have an agreed way to make decisions as a team, and know the best ways to communicate effectively with each other. We are starting to explore the different strengths and qualities of each team member, and how we might use them to improve the support we provide.	
5	We know and act on what 'good support' means to each person in the team. This information is recorded (for example, in a person–centred team plan). We regularly reflect on what is working and not working for staff as a team, and what they can do about this. We have a culture where we appreciate each other's strengths and qualities, and use these to support our work wherever we can. We find ways to ensure that staff who work remotely feel connected to one another, as well as to the rest of the team and organisation. We actively celebrate cultural diversity within the team, and work to understand and honour specific cultural needs and preferences.	
	How I came up with this score and ideas for what to do next	

Tick one box ✓

Staff know what is expected of them

1	I think that each team member has a general sense of what is expected of them.	
2	All staff have a generic job description, and work within organisational policies and procedures.	
3	I know that staff need to have a better understanding about what their set responsibilities are, and where they can try out ideas and use their own judgement. We have started to have discussions in the team about this.	
4	Most staff are clear about what is expected of them and where they can make decisions themselves. There are still some grey areas that we need to explore more. We are using person-centred thinking tools and approaches (for example, the donut) in clarifying expectations and decision making.	
5	Staff know what is expected of them. They understand their core responsibilities and where they can try new ideas in their day-to-day work. Staff are clear about their roles in the lives of the people we support. Staff know what they must do in their work with the people they support, with their colleagues, and with any administrative or financial responsibilities. Staff know how to use person-centred thinking tools and approaches to deliver their core responsibilities. They know where they can use their own judgement and try new ideas or approaches, and record what they are learning about what works and does not work when this occurs. Roles and responsibilities are clearly recorded (for example, in a donut) and this is reflected in job descriptions.	
	How I came up with this score and ideas for what to do next	

Staff feel their opinions matter

1	I make all decisions without involving the team. I chair team meetings and set the agenda. I set the agenda for supervision and personal development planning.	
2	I recognise the need to find a way to listen to my staff team, value their opinions and engage them in decision making. I am trying to improve how I do this.	
3	Staff are able to have some involvement in setting team meeting agendas and contributing their views. I still make most of the decisions.	

		Tick one box ✓
4	I regularly meet with my team and discuss issues that they raise (in team meetings and other day-to-day opportunities). They contribute to team meeting agendas and make suggestions for supervision discussions. Some staff make suggestions for new ideas or changes. We are starting to use person-centred thinking tools and approaches to listen to each other (for example, one-page profiles, important to/for, what's working/not working, good day/bad day exercise, 4 plus 1 questions).	
5	Staff feel that their opinions are listened to. Team members are asked for their opinions and consulted on any issues that affect them. Team members feel confident in suggesting new ideas or changes to me. We regularly use person-centred thinking tools and approaches to listen to each other's views and experiences.	
	How I came up with this score and ideas for what to do next	

Rosters/schedules – staff are thoughtfully matched to people and schedules are personalised to people who are supported

1	I write staff rosters based upon staff availability. The roster meets the requirements of the organisation. There is a system for staff and people being supported to make requests.	
2	I have identified the preferences of some people supported and the staff (for example, using the matching tool and one-page profile). I write the rosters and take these preferences into consideration where possible.	
3	I have a record of the preferences of all people who receive services, as well as all staff members. Some people who are supported are matched to staff with similar interests, but the organisation's needs still take priority.	
4	My team and I know what people's preferences are, how they like to be supported and what is important to them. These preferences are acknowledged in the way that the roster is developed, so that we get a good match between the person and the staff who support them. Roster structure and shift times reflect how people want to be supported.	

Tick one box ✓

5	Decisions about rosters are based on who the person wants to support them. If I need to make this decision, it is based on which staff are best matched to the person, taking into account common interests as well as personality characteristics, necessary skills and experience. Rosters/ schedules are developed around the support the person wants, the activities they want to do, and who they want to support them. Attention is given to the specific cultural needs of both the person and individual staff members when looking at rosters/schedules and planning leave throughout the year.	
	How I came up with this score and ideas for what to do next	

Recruitment and selection

1	Staff are recruited based on formal job descriptions that have been developed by the organisation.	
2	I know I should involve the people who receive services in recruitment, but I am not sure how to go about this.	
3	I have started to look at 'good practice' examples of ways to involve people in recruiting their own support staff. We have started to explore how we can develop job descriptions that reflect what is important to the people we support.	
4	We have worked with people being supported, and identified ways for them and their families to be involved in the recruitment and selection of their staff. This happens some of the time. We have developed personalised job descriptions and advertisements. These are based on what is important to the person and how they want to be supported. We use person–centred tools and approaches (for example, the matching tool) in our recruitment processes.	
5	Our recruitment and selection process demonstrates a person–centred approach. We recruit people who can deliver our purpose, and are well matched to the people they support. We select people based on their values, beliefs and characteristics; not just their experience and knowledge. Job descriptions and advertisements are individualised to the person being supported wherever possible. It is standard practice for people to be involved in recruiting their own support staff, in a way that works for them.	
	How I came up with this score and ideas for what to do next	

Tick one box ✓

Enabling risk

1	I encourage my team to make sure people are safe and do not take risks. We adhere to all required legislation. We don't talk about rights-based approaches to risk.	
2	I am aware that I need to encourage my team to understand and practice rights-based approaches to risk, and become less risk-averse. I am not sure how to do this.	
3	I am working with the team to help them to take a responsive and person-centred approach to risk. We are starting to use this in some situations.	
4	We use a person-centred approach to risk most of the time. Staff have a clear understanding of this approach through training and support. We involve the person, their family and others in thinking through risks, and we link this in with decision-making information. I ensure that everything is documented and adheres to the relevant legislation.	
5	We recognise that people have the right to make decisions and choices, and that some choices involve risks. We support a person's right to choice, by taking steps to ensure that risks are thought through in a person-centred way that reflects what is important to the person. The person and their whanau/family are centrally involved in the way that we do this. Decisions are clearly recorded.	
	How I came up with this score and ideas for what to do next	

Training and professional development

1	All training is based on legislative requirements. I make sure that we meet the minimum legal and funding requirements.	
2	I recognise that I need to find training and professional development opportunities for my team that reflect the needs and rights of the people supported, and will motivate the staff. All staff are required to complete induction training. This is centred around compliance and safe working practices.	
3	I have started to think about how I can introduce learning and professional development opportunities to staff that will reflect the needs and wishes of people supported, as well as engaging and developing the team members. I have begun to look at what is working and what is not working for staff. I am also researching what is available.	

		Tick one box ✓
4	We have prioritised training needs and identified professional development opportunities. These are aligned with each team member's personal development plan. Training and professional development reflects the needs and wishes of people who receive services, and has been agreed with team members. Person-centred thinking and approaches are central to our approaches to training. We comply with all legal and funding requirements.	
5	We provide professional development and training opportunities to all staff, which reflect the goals identified through their personal development plan. Opportunities focus on increasing choice and control for people being supported, and on delivering person-centred support. Within a few months of starting with the organisation, new staff have completed induction training that includes using person-centred thinking and approaches to deliver our purpose. Training content and materials are reviewed so as to be up-to-date and consistent with best practice.	
	How I came up with this score and ideas for what to do next	

Supervision

1	We struggle to find time for regular supervision, and it is seen negatively by some staff. We do not have ways to conduct supervision with staff who work remotely. I set the agenda and make the arrangements for staff supervision if and when it does occur.	
2	Supervision is conducted in an ad hoc manner, and has no connection to the personal development plan. I am aware that staff support and supervision practices need to be reviewed. I am not sure how I can change the current arrangements.	
3	I have started to think about involving people who receive services and their families in staff supervision. I have talked to service users and staff about how we might go about this. Most members of staff have supervision meetings.	
4	All staff have regular supervision, and people supported and/or families usually contribute through sharing their views with me before a supervision session. Supervision results in actions that are documented. I have started to use person-centred thinking tools and approaches in supervision sessions. Supervision is seen as a positive experience, and is not just about things that need improving.	

Tick one box ✓

5	Each team member, including remote staff, has regular, planned, individual supervision. Supervision includes giving staff specific feedback on what they do well, as well as what they can improve on (for example, coaching staff to develop their skills in working in a person–centred way). There is a clear link between training and supervision and what people do when they are at work (for example, when staff attend training, I expect to see a difference in their work and this is discussed in their individual supervision). The views of people being supported and their whanau/ families are very important in the supervision process, and people are asked to provide feedback before supervision. Supervision is clearly linked to and builds on personal development plans.	
	How I came up with this score and ideas for what to do next	

Performance planning, support and development

1	None or very few of my staff have a personal development plan. I set the agenda and assign objectives if and when it does occur.	
2	Organisational policies specify that all staff have a personal development plan, but in practice this is not occurring consistently. Staff who do have a personal development plan generally do not contribute to the agenda or development of goals. There is minimal reference to the personal development plan from the previous year. I understand that people who receive a service should be given the opportunity to give feedback on the support they receive from staff. I am not sure how I should go about this.	
3	I have a strategy in place to ensure that each member of staff has a personal development plan. These plans are sometimes reviewed through supervision throughout the year, but not consistently. I have started to talk to each team member about human rights and how they are using person–centred thinking tools and approaches in their work. Where possible, I seek the views of people being supported and their families to inform progress.	
4	Each staff member has a personal development plan. Staff are asked to reflect on what they have tried, what they have learnt, what they are pleased about and whether they have any concerns. We then agree what actions need to be taken from all the information gathered. We have a variety of ways for people who receive services and their families to contribute their views to staff performance planning and support discussions.	

Tick one box ✓

5	Each staff member has a personal development plan. Personal development plans include feedback from people being supported and their whanau/families about what is working and not working. Personal development plans outline clear goals and actions that build on strengths, focus on working in a person–centred way, and further develop skills. Positive feedback is seen as an essential aspect of this process. Actions and goals are reviewed at regular supervision meetings throughout the year.	
	How I came up with this score and ideas for what to do next	

Meetings

1	We have occasional team meetings, but not everyone attends or contributes.	
2	There are frequent team meetings. I set the agenda and chair the meeting. There is little structure to the meeting, and they are not as well–attended as they could be.	
3	I schedule regular team meetings. The meeting tends to focus on the provision of information, and does not often include problem solving or celebrating successes.	
4	We have regular structured team meetings which are documented. Actions are decided on as a group, recorded and followed up on. They are well–attended and most people contribute.	
5	Our team has regular, productive team meetings that everyone can contribute to. Team meetings include sharing what is going well and problem–solving difficulties (for example, practicing using person–centred thinking tools like working/not working and 4 plus 1 questions to solve problems).	
	How I came up with this score and ideas for what to do next	

Section 4
Actions and resources

Section	What do we want to work towards? (the next statement in the section)	What are we going to do? (action)	When will this be achieved? (date)	How will we know that this has been achieved?
1 Person-centred thinking skills and approaches				
Knowledge, skills and understanding				
Supporting individual development in person–centred thinking tools and approaches				
Supporting team development in person–centred thinking tools and approaches				
2 Supporting people to have choice and control				
Seeing the person as an individual, and appreciating culture, strengths and qualities				
Understanding the person's history/ identity				
What matters to the person now				
Working towards outcomes that the person wants for their future				
How the person wants to be supported				
How the person communicates				
How the person makes decisions				
Acting on what the person is telling us				
Supporting the person in their friendships and relationships				
Supporting the person to be part of their community				
3 Creating a person-centred culture within teams				
Clear purpose				
An agreed way of working that reflects values				
Staff know what is important to each other and how to support each other				
Staff know what is expected of them				
Staff feel their opinions matter				
Rosters/schedules – staff are thoughtfully matched to people and schedules are personalised to people who are supported				
Recruitment and selection				
Enabling risk				
Training and professional development				
Supervision				
Performance planning, support and development				
Meetings				

Detailed action plan

Top priority

Why is this your top priority?

First steps

Who

By when

Who else needs to know/help this to happen?

How will I get their help?

What support will I/we need?

From inside the organisation

From outside the organisation

How will I know I have been successful?

What will have changed? What will you see? What will you feel? What will you hear?

Detailed action plan

Top priority

Why is this your top priority?

First steps

Who

By when

Who else needs to know/help this to happen?

How will I get their help?

What support will I/we need?

From inside the organisation

From outside the organisation

How will I know I have been successful?

What will have changed? What will you see? What will you feel? What will you hear?

Explanation of terms

Action Plan

The action plan section of an individual or team plan clearly states what people are going to do to "make things happen". Action plans often contain a breakdown of who is responsible for what in relation to an individual's goal or, in the case of team planning, the goals of the team. In some cases, actions may simply be related to things that need to happen in order to change what is not working for someone.

'Good practice' action plans should:

- State what needs to be done in a clear enough manner that someone not involved in the planning could read it and know what is happening/what needs to be done.
- Ensure that large goals (for example, overseas travel or moving house) are broken down into smaller components.
- Have a clear completion date and avoid vague statements such as 'ongoing'.
- Specifically state the named person responsible (both their name and role), or who is taking the lead. Statements such as 'all staff' can result in situations where in fact, rather than all staff taking responsibility, no one does.

Appreciation Books

Books dedicated to recording what people appreciate or like and admire about someone. These can be for people receiving support, for their families, or for staff members. An appreciation book can be as simple as a blank notebook or journal with a heading and photo of the person. They can be made using a variety of creative mediums; for example, scrapbooking, patchwork, DVD, or collage. There are no set rules for how to develop appreciation books or what they should look like. They are simply a way to record and celebrate great things about the person.

Coaching

Coaching uses a process of inquiry and discovery to build an individual's awareness and responsibility, and provides them with structure, support and feedback to further develop skills.

Communication Chart

The communication chart is a simple, but effective way to capture how someone communicates through his or her behaviour. Capturing how someone communicates, and using this information, can help to relieve some of the frustration felt by the person due to being misunderstood. It also makes it easier for new people in the person's life to get to know and understand them. Communication charts usually capture information about what the person says or does, what we think it means and how people should respond to the communication. They also let people know if what the person is communicating means something different depending on the environment or time of day.

Communication Profile

A one– or two–page snapshot that covers important information about preferred communication methods, the best way to communicate with the person, and any other key information for successful communication. This is a simple, easy–to–read document that allows new people (staff or members of the community) to make a positive start to communicating with the person without having to read detailed files or speech pathology reports. Communication profiles are helpful when the person does not use words to communicate, when speech is unclear, or when the person's communication can be ambiguous. Rather than using standardised headings, communication profiles should only capture information relevant to the person, and should be free of jargon or technical language.

Circles of Support

A group of people who come together with the intention of providing support to an individual or family to work towards their goals. Members of an individual's circle of support are usually involved in a volunteer capacity and may offer input in a particular area or expertise, take on actions or simply provide another perspective. Recent work on Community Circles has begun to explore the notions of paid versus voluntary involvement in an attempt to make circles available to more people.

www.communitycircles.gomocentral.com

HSA NZ will be developing Community Circles within New Zealand in the near future.

Community Map

Supports people to capture what is happening in the person's local community – places, people and things to do. When thinking about community connecting and supporting people with opportunities, it is often helpful for people to first gain a thorough understanding of what is actually available in their area.

Complaint

A complaint (also known as grievance) is when someone you support lets you know that they are not happy about something that has or hasn't been done. It could be about something a staff member has personally done or not done, or something about your service. Complaints can be made in words, writing or using alternative communication.

Decision-Making Agreement/Profile

Decision–making agreements and decision–making profiles look at what support someone needs to make decisions in their life, and ensures that they have as much power and control as possible in how these decisions are made. These tools are not about discerning whether or not someone has the capacity to make decisions. Rather, the focus is on how the person must be involved in decision making, who makes the final decision, and what conditions are needed to ensure that the person is in the best position to make decisions.

Donut (Doughnut)

The donut was originally developed by Charles Handy in The Empty Raincoat (1994).

The donut is a tool that helps staff to get clear about their roles and responsibilities. This tool helps people to see what they must do, where they can try new things or use their own creativity and judgement, and what is not their responsibility. Developing a donut is often useful when staff members are unclear about their responsibilities when supporting someone in a particular situation, or when people are concerned about a risky situation. The donut tool should encourage staff to use their initiative and 'think outside the box' without being worried that they will get into trouble if they get it wrong. The donut should help to get a better balance of what's important to and important for the person, even if the tool is being used to gain clarity about a situation regarding health and safety.

Good Day/Bad Day

A person–centred thinking tool that uses simple information about the things that make either a good day or bad day for a person. This information helps others to learn more about what is important to someone and how they want to be supported. Using this tool can also help the person and those around them to think differently about how they may want to spend their time in the future. It can also be used as a starting point for action planning by asking the question, 'What will it take to have more good days and less bad days?'

This exercise is often used with teams as part of developing staff one–page profiles or a person–centred team plan.

Human Rights

Human rights are universal legal guarantees protecting individuals and groups against actions that interfere with fundamental freedoms and human dignity.

Human Rights Principles

There are four important general principles of human rights. They can be remembered by the acronym FRED.

- Freedom – We all have the right to be free. Like all of us, people with disabilities have the right to own their own things (home, clothes, etc), the right to freedom, the right to choice of work and the right to be safe.
- Respect – We all have the right to be treated with respect. Like all of us, people with disability have the right to be respected. People have the right to have their choices respected and to have their family, culture and religious beliefs respected.
- Equality – We all have the right to be treated equally. Like all of us, people with disabilities have the right not to be discriminated against, including on the basis of their disability, or treated unfairly. People with disability have the right to the same opportunities to make choices that we would all ordinarily expect. They have the right to participate in their community, and access the same facilities and services as others.

- Dignity – We all have the right to be treated with dignity. A person must not be physically or mentally abused or neglected, or subjected to cruel, inhuman or degrading treatment. It is important that people with disabilities are treated with dignity when provided with personal care and other disability services.

History Map

A tool that provides a simple way to record and share information about an individual's past. This tool can be used to record as much or as little of the person's past as they want to share, and can help others to get to know and understand the person better. Exploring things that someone has done in the past can also help to generate new ideas about what the person might want to do again, or things that they want to avoid.

See also: Recording Histories

Important To/Important For

The first and most fundamental person–centred thinking skill is to be able to learn what is important to someone, what is important for them, and how to achieve a balance between the two. This is a principle that underpins the achievement of person–centred change.

What is important to a person is what they say through their own words and behaviours about what really matters to them. What is important for people are the things that help people to become or stay healthy and safe, or to be valued members of their community.

The balance between the two is the compromise that all of us experience in life: the balance between wanting to eat chocolate and wanting to maintain our weight, or between wanting lazy evenings and wanting to get fitter at the gym. We all need to find a balance so that our lives are not just about staying healthy and safe and doing things for others, nor simply doing whatever we want without regard for the consequences.

Induction Training

Training (also known as orientation or on–boarding) provided to new employees to induct them into the organisation. Induction training usually covers basic information that staff need to perform their roles, as well as key information about the culture and values of the organisation.

Matching Tool

If we are to improve the quality of people's lives, one of the most powerful things we can do is to get a good match between staff and the people they support.

This tool helps us to think about the activities/interests in the person's life and to look at matching staff according to personality, shared interests and skills, so that people enjoy the time they spend together. The matching tool makes a distinction between skills that can be taught versus characteristics that are inherent to the person and cannot be developed through training.

One-page Profile

One-page profiles capture what people like and admire about a person, what is important to them, and what others need to know and do to support them. They are a great way of giving new people crucial information, enabling them to understand what they need to know without having to take a long time. They are especially helpful when there are new or temporary staff that may never have met the person before and may not meet them again. One-page profiles are also a way of ensuring that important information is captured and shared, so that we don't just rely on what is passed on verbally.

Person-centred Approaches

Ways of working where the central focus and the subsequent work is on the person as an individual. This could be a strategy or method of working, but the key aspect is that the individual and not the organisation or system is at the centre.

Person-centred Thinking

A set of practical, yet values-based tools and skills that have been developed over time that:

- Help to find ways to support the person rather seeing the person as broken and needing to be 'fixed';
- Work for humans;
- Work at every level of the organisation;
- Help to build organisational cultures of learning and accountability.

Person-centred thinking skills were developed by The Learning Community for Person Centred Practices, and are used in several countries around world within the areas of disability, old age, mental health, and chronic health conditions.

www.learningcommunity.us

Person-centred Thinking Rating Scale

A scale developed to support staff to reflect on their use of person-centred thinking skills. It names some of the main skills and tools that staff might use alongside individuals, and asks them to score themselves on their use, sense of confidence and competence. The purpose of the rating scale is to encourage staff to reflect on their skills so that they can set actions to work on areas that they are not confident in, or to seek help from others. The rating scale can help to take the use of person-centred thinking skills and approaches from occasional use to habit.

Person-centred Review

A way of facilitating planning meetings and reviewing plans, using some of the person-centred thinking skills. The information gathered in a person-centred review leads to actions, and can be used to develop a living description and a one-page profile. The person-centred review process is a way of making sure that there is a person-centred approach to planning with individuals, even when there are time constraints or when the planning is only happening because the service requires it.

Person-centred Risk

A person–centred approach focuses on a person's right to have the lifestyle that they choose, including the right to make 'bad' decisions. The approach described here uses person–centred thinking tools to help the person and those who care about them to think in a positive and productive way about how to support them to achieve the changes they want to see, while keeping the issue of risk in its place.

This, in essence, is a process to gather – in partnership with the person – the fullest information and evidence to demonstrate that those involved have thought deeply about all relevant issues. Decisions are then guided by what is important to the person, what is needed to keep them healthy and safe, and what is required by law.

Person-centred Supervision

A process that creates a respectful and supportive environment so that supervision is positive and productive for those involved.

The process includes practical strategies and tools that promote listening and creative thinking, building on people's strengths so that individuals come away from supervision feeling understood, supported and motivated, with a clear direction for action.

See also: Supervision

Person-centred Team Plan

Person–centred team plans utilise person–centred thinking skills with staff to explore and answer the following;

- Why are we here?
- Who are you and how can we work together?
- What are we here to do?
- Who is going to do what, when and where?
- How well are we doing?
- What else can we try?
- How can we record and share what we are learning?

Personal Development Plan

A personal development plan (also known as an appraisal or performance appraisal), is a plan developed with individual staff members that may include the following elements:

- New skills they want to learn to help them do their jobs better
- Areas of work where they need further learning
- Larger aspirations for their career
- An action plan and goal setting

Personal development plans are often conducted annually, and may form the basis for an individual's supervision and/or professional development.

Presence to Contribution

A tool that is helpful when thinking with people about what they do on a day–to–day basis, and the opportunities that these activities present for getting involved, meeting new people, making connections and contributing to the community.

Progress for providers – Checking your progress in delivering personalised services

A self–assessment checklist developed for senior managers and leaders of any service to check their organisation's progress in responding to personalisation.

Recording Histories

When we talk about recording an individual's history using a person–centred approach, it means having some information about the person's past that is captured in a way that makes sense to them. For some people, it may be a history map; for others, it may be a box of important objects related to their past that they like to share, or a photo board of important people and places. When histories have been recorded in a person–centred way, they will have a storytelling feel to them, rather than feeling like a list of services, incidents and reports. Recording histories should be led by the person without censorship, so there may be sad or negative elements included.

Recorded histories can act as a safeguard against the person losing contact with those who are or have been important to them, and should generally ensure that crucial information is not lost. This is particularly important if the person does not use words to communicate, or has difficulty communicating.

See also: Whakapapa

Relationship Map/Circle

The relationship map records who is in a person's life. It can be used to help services discover who is important in someone's life, and support the person to reflect on who they might want to involve in planning meetings. A relationship map can also be used to help people to identify where existing relationships may be strengthened, maintained or renewed, especially where they are reliant on others to make contact with people.

See also: Whanau

Representation/Representative

A representative is someone who speaks for or acts on behalf of someone else, typically with an advocacy role.

Rights-based Approach

A human rights–based approach involves a consideration both of what you are going to do based on the principles of human rights, and of how you are going to do your work in ways that promote these rights. The human rights of the person should always be taken into account and be part of any process or decision–making.

See also: Human Rights Principles

Supervision

Supervision (also known as one–to–one time, job consultation, reflective practice, or giving effective feedback) provides staff members a period of planned, structured one–to–one time with their managers – or, in some instances, with an external supervisor. Supervision is an opportunity to provide feedback and support, as well as ensuring that the staff member is carrying out the responsibilities that are part of their job. While supervision is most commonly carried out face–to–face, if staff work in remote locations, phone meetings or video conferencing may also be used. Importantly, ad hoc 'catch–ups' are not an effective substitute for planned, structured supervision. Supervision may form part of an individual's professional development.

Support Plan

A plan that describes what is important to an individual now and in the future, and the support they need from others in order to achieve these things. Support plans also have clear actions attached that clearly state what the person, service providers and others will do. Support plans can help individuals to think about how to spend hours/funding, and can have a budget allocation attached to them.

Supported Decision Making

A process of supporting someone to make decisions, particularly when they possess severe/profound intellectual disabilities or other significant cognitive impairments.

Team Charter

A document developed collaboratively that clarifies team direction and purpose, and helps to create focus within the team. Team charters often include information on the goals and expectations of team members.

Whakapapa

A genealogical table of cultural identity.

Whanau/Whanaungatanga

'Whanaungatanga' refers to relationship, kinship, the sense of family connection – a relationship through shared experiences and working together, which provides people with a sense of belonging.

What's Working/What's Not Working

A person–centred thinking skill that supports action planning based on the current reality, and captures information from different perspectives. Using this particular tool can help people to reflect on the current reality and also ensure that people feel listened to.

'What's working / what's not working' is a person–centred thinking skill that can be used at all levels of an organisation, particularly in situations where action planning is intended and different perspectives/points of view need to be captured and taken into account.

4 plus 1 questions

1. What have we tried?

2. What have we learned?

3. What are we pleased about?

4. What are we concerned about?

+ 1: Given what we know now, what next?

These questions help people to pause and reflect before moving to action, and provide a structured way to ensure that previous efforts and learning are not lost. The structure also helps people to keep focused on moving forward, rather than becoming stuck on the 'issue'. This tool can help with developing plans or tracking the implementation of plans, in either an individual or team context.

Progress for Providers contributes to:

- Enabling Good Lives (EGL) Principles
- Let's Get Real
- Careerforce Qualifications
- Maori Models of Health and Wellbeing
- Commissioning framework for mental health and addiction
- Faiva Ora National Pasifika Disability Plan

The Enabling Good Lives principles are:

Self-determination

Disabled people are in control of their lives.

Beginning early

Invest early in families and whānau to support them; to be aspirational for their disabled child; to build community and natural supports; and to support disabled children to become independent, rather than waiting for a crisis before support is available.

Person-centred

Disabled people have supports that are tailored to their individual needs and goals, and that take a whole life approach rather than being split across programmes.

Ordinary life outcomes

Disabled people are supported to live an everyday life in everyday places; and are regarded as citizens with opportunities for learning, employment, having a home and family, and social participation – like others at similar stages of life.

Mainstream first

Disabled people are supported to access mainstream services before specialist disability services.

Mana enhancing

The abilities and contributions of disabled people and their families are recognised and respected.

Easy to use

Disabled people have supports that are simple to use and flexible.

Relationship building

Supports build and strengthen relationships between disabled people, their whanau and community.

www.enablinggoodlives.co.nz

How Progress for Providers relates to the 'Let's get real' framework

'Let's get real: Disability' and *Progress for Providers NZ (Managers)* have a strong alignment, and complement each other in implementation. Both are based around principles of person–driven practice, and both recognise the necessity for organisational values, systems and processes to model, support and reinforce desired practice. To this end, both initiatives include self–assessments to measure current practice and tools to assist development.

The 'Let's get real: Disability' framework of values, attitudes skills knowledge maps closely to the first two sections of *Progress for Providers NZ (Managers)*:

- Section 1: Person-centred Thinking Skills and Approaches.
- Section 2: Supporting People to have Choice and Control.

A sample of performance indicators from each of the seven 'Real Skills' is outlined in more detail in the table below. Reflecting the manager focus of this Progress for Providers resource, the table below concentrates on the Leader level of the 'Let's get real: Disability' performance indicators.

Two further 'Let's get real: Disability' tools – the Guide for Leaders and Managers, and the Human Resources Tool – support the processes outlined in Section 3: Creating Person–centred Culture with Teams.

Real Skill 1 – Working with Disabled People

Every person working in disability uses strategies to engage meaningfully, works in a disabled-person-driven manner and focuses on disabled people's aspirations and strengths.

Leader

Develops resources, protocols and systems that:

- Are responsive to the aspirations, choices and needs of disabled people, and their families and whānau.
- Ensure active participation and decision-making by disabled people (and, where appropriate, their families and whānau) in all matters that affect them.
- Promote respectful and effective communication.
- Promote the rights, dignity and citizenship of disabled people at a systemic level.
- Are age appropriate, developmentally appropriate, life-stage appropriate, and culturally appropriate.
- Support the social, cultural, psychological, spiritual and physical context of disabled people's lives.
- Reflect a disabled-person-driven philosophy, with the goal of leading a good life.

Progress for Providers

Section 1

Person-centred Thinking Skills and Approaches

- Knowledge, skills and understanding.

Section 2

Supporting people to have choice and control

- Seeing the person as an individual and appreciating culture, strengths and qualities.
- Understanding the person's history/identity.
- What matters to the person now.
- Working toward outcomes that the person wants for their future.
- How the person wants to be supported, make decisions and communicate.

Real Skill 2 – Working with Māori

Every person working in disability contributes to whānau ora for Māori. This involves working in an holistic way and ensuring whānau leadership. Central to whānau ora is the importance of enhancing whānau capacity and enabling whānau to achieve their self–determined goals and aspirations.

Leader

Ensures the availability of funding and resources for and actively supports systems, processes, policies and practice that:

- Reflect appropriate kaupapa for Māori.
- Supports whakawhanaunga processes.

Meet cultural requirements, such as:

- Use of whānau ora principles and philosophy.
- Use of Māori models of hauora.
- Facilitate knowledge about whenua, moana and ngahere in the support of whānau.

Promotes and supports:

- Understanding of manaaki and its significance when working with disabled people and their whānau.
- The manaaki of the community being engaged with.
- Staff learning and professional development about applying manaaki in practice.

Progress for Providers

Section 2

Supporting people to have choice and control

- Seeing the person as an individual and appreciating culture, strengths and qualities.
- Understanding the person's history/identity.
- Supporting the person to be part of their community.
- Supporting the person in their friendships and relationships.
- How the person communicates.

Real Skill 3 – Working with families and whānau

Every person working in disability encourages and supports families and whānau to participate in enabling disabled people to live full lives and ensures that families and whānau, including the children of disabled people, have access to information, education and appropriate support

Leader

Develops robust service systems, based on current best practice, and feedback mechanisms, that:

- Ensure the participation and support of family and whānau.
- Actively support whānau ora and enhance whānau capacity.
- Recognise and respond to the strengths and needs of families and whānau.
- Ensure specific provisions to identify and develop relationships with Māori diverse options and the latest interventions are available.

Progress for Providers

Section 2

Supporting people to have choice and control

- Supporting the person in their friendships and relationships.

Real Skill 4 – Working within communities

Every person working in disability recognises that disabled people, and their families and whānau, are part of wider communities and seeks to promote social inclusion.

Leader

- Actively promotes, supports and involves communities to understand a social model of disability.
- Actively networks and collaborates across sectors, including for example, with disability, education, whānau ora, health and social service providers, community agencies, local bodies and national organisations to ensure services are meeting the needs of disabled people.

Progress for Providers

Section 2

Supporting people to have choice and control

- Supporting the person in their friendships and relationships.
- Supporting the person to be part of their community.

Real Skill 5 – Challenging stigma and discrimination and promoting value

Every person working in disability uses strategies to challenge stigma and discrimination, and promotes disabled people's value and contribution to society.

Leader	Progress for Providers
• Ensures adequate and ongoing resources are available for staff education and training relating to non–discriminatory practice. • Ensures that the organisational culture, including one's own attitudes and behaviour, are non–discriminatory in all aspects of work, internally and externally. • Promotes understanding of disabled people's dignity and inherent value to society, and promotes leadership by disabled people. Uses strategies to raise awareness, and educates and supports services, families, whānau, and communities to eliminate stigma and discrimination.	Section 2 Supporting People to have choice and control • Supporting the person to be part of their community.

Real Skill 6 – Upholding law, policy and practice

Every person working in disability upholds the Treaty of Waitangi, the United Nations Convention on the Rights of Persons with Disabilities, the United Nations Declaration on the Rights of Indigenous Peoples, the New Zealand Human Rights Act 1993, the Health and Disability Commissioner's Code of Rights, and other legislation, regulations, standards, codes and policies applicable to working in disability that are relevant to their role.

Leader	Progress for Providers
• Creates organisational systems and a culture that reflects respect for the human rights and inherent dignity of disabled people. • Creates organisational systems and processes that ensure quick, safe and effective feedback and complaints processes.	Section 2 Supporting people to have choice and control • Acting on what the person is telling us.

Real Skill 7 – Maintaining professional and personal development

Every person working in disability actively reflects on their work and practice, and works in ways that enable others to enhance the capacity of disabled people, and families and whānau.

Leader

Leads, resources and nurtures an organisational and/ or team environment that:

- Articulates a clear, disabled–person focused vision for the service and a social model of disability.
- Provides role clarity (both individual and team).
- Encourages synergy with others working in disability.
- Encourages cross–sector collaboration.
- Uses information to assist planning and quality improvement with a focus on improved quality outcomes for disabled people at a systemic level.
- Encourages and supports the professional development of individuals and teams, as well as personal development.
- Ensures coaching, support and constructive feedback are given to staff at all levels, in order to enhance workforce quality, capacity and capability.
- Reflects on own practice to identify strengths and needs.
- Engages in supervision.

Progress for Providers

Section 1

Person–centred thinking skills and approaches

- Supporting individual and team development in person–centred thinking tools and approaches.

Section 3

Creating a person–centred culture within teams

- Clear purpose.
- An agreed way of working that reflects value.
- Staff know what is expected of them.
- Training and professional development.
- Supervision.
- Performance planning support and development.

How Progress for Providers relates to the Careerforce Qualifications

How workplace training with Careerforce develops a person–centred thinking workforce

Careerforce is the Industry Training Organisation for the health and wellbeing sectors. They develop the New Zealand Qualifications in Health and Wellbeing from levels 2 to 6 for the New Zealand Qualifications Authority (NZQA).

The philosophy underpinning all qualifications developed by Careerforce is to build a person–centred thinking workforce. This means we can be confident that a qualified workforce is a person–centred workforce.

In sections one to three above, you've identified your progress towards being a person–centred organisation. If you've identified that you're making good or excellent progress, then getting your staff qualified may be as simple as matching the work you're already doing to a qualification and then training to fill the gaps. Careerforce works with you to develop a workplace training plan that meets the goals and needs of you, your team, your clients and your organisation.

Qualification pathway

Careerforce programmes offer your team the opportunity to develop their skills, knowledge and understanding through a suite of qualifications applicable to their roles and the current and future needs of your clients and workplace.

At each level, graduates are required to understand, describe and demonstrate increasingly broad and deep understanding of their sector, their work, and the needs of those people they support.

Person-centred competencies

A qualification at level 2 is an introduction to the role of disability, health or community support work. At level 2, it is expected that your organisation would highlight your person–centred approach and models of support as part of its induction, values, policies and procedures.

A qualification at level 3 builds the skills and knowledge of your staff, allowing them to make the journey from a newcomer to the role to an experienced and thinking staff member. While a person–centred approach is built into the learning and assessment at level 3, it is also the focus of a number of units; for example, 'Describe and apply a person–centred approach in a health and wellbeing setting' or 'Describe a person's holistic needs and the impact on a person's health and wellbeing.'

At level 4 and above, there are specific modules that help your staff to understand the context within which people live their lives and explore how to support them. In the New Zealand Apprenticeship in Social and Community Services, one module, 'It's about people', explores a person–centred approach in more detail. This includes examining the influence of the following on a person's health and wellbeing, and how these should be considered when providing support:

Qualification Pathways

Level 2	Level 3	Level 4	Level 5	Level 6	Level 7
NZ Certificate in Health and Wellbeing	NZ Certificate in Health and Wellbeing *Support Work* *Health Assistance* *Orderly Services* *Whanau, Kin and Foster Care*	NZ Certificate in Health and Wellbeing (Advanced Support)	NZ Diploma in Health and Wellbeing *Navigation* *Advocacy*	NZ Diploma in Hearing Therapy	NZ Diploma in Vision Habilitation / Rehabilitation *Daily Living* *Technology and Communication* *Low Vision Therapy* *Orientation and Mobility*
		NZ Certificate in Health and Wellbeing (Social and Community Services) *Community Facilitation* *Community Health Work* *Mental Health and Addiction Support* *Social Services*			
		NZ Certificate in Health and Wellbeing (Primary Care Practice Assistant)			
		NZ Certificate in Health and Wellbeing (Rehabilitation Support) *Brain Injury*			

Key

- Accepting enrolments
- Careerforce programme in development

Careerforce
te toi pūkenga

- A person's holistic needs.
- People's own perspectives and contexts influencing their experience of disability, impairment, conditions and situations.
- Experiencing stigma, discrimination and/or a disabling society.

The level 4 programmes are aimed at more advanced roles such as information provision, disability support, mental health and addiction, social services and community health workers.

The qualification content and assessment is backed up by finding out the difference it is making to clients and employers. Employers are strongly encouraged to ask the 'effectiveness questions' as part of their training programme. These are:

- What are you going to do differently?
- What did you do?
- How did it go?

This approach encourages the development of a thinking workforce.

Contacting Careerforce

If you want Careerforce's support to develop your person–centred team, contact them by telephone at 0800 277 486, or by email at: info@careerforce.org.nz

Maori Models of Health and Wellbeing

Te Whare Tapa Wha is a holistic model of health comprised of four walls of health:

- Physical – Tinana
- Psychological or emotional – Hinengaro
- Social – Whanau
- Spiritual – Wairua

Te Pae Mahutonga (Southern Cross Star Constellation) brings together elements of modern health promotion.

The four central stars of the Southern Cross represent four key tasks of health promotion:

- Mauriora (cultural identity)
- Waiora (physical environment)
- Toiora (healthy lifestyles)
- Te Oranga (participation in society)

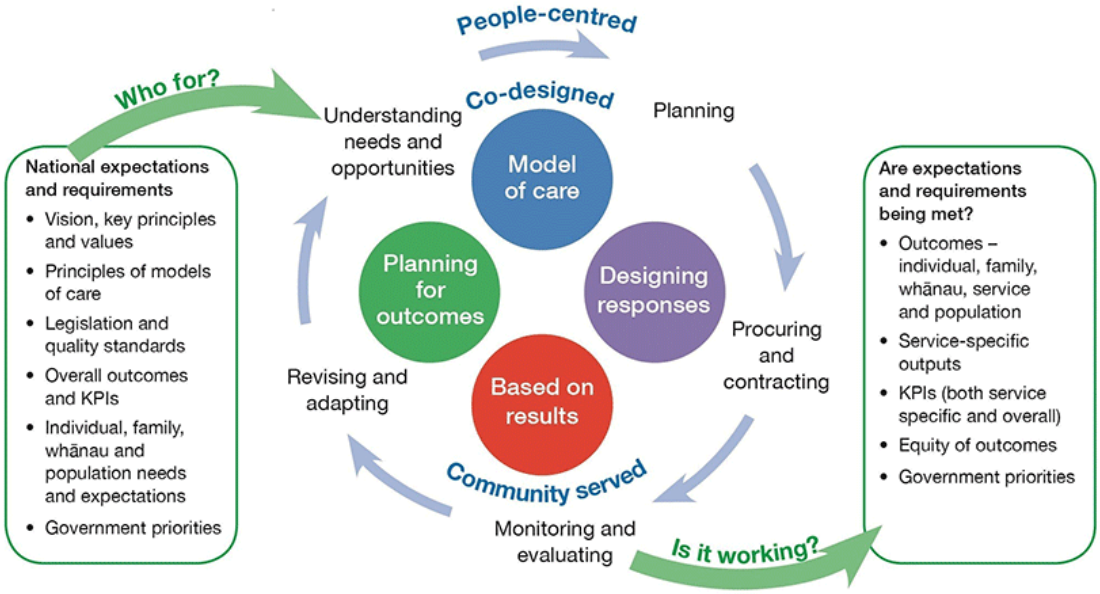
Te Wheke

The concept of Te Wheke, the octopus, is to define family health. The head of the octopus represents te whānau, the eyes of the octopus as waiora (total wellbeing for the individual and family) and each of the eight tentacles representing a specific dimension of health. The dimensions are interwoven and this represents the close relationship of the tentacles.

Te whānau – the family
Waiora – total wellbeing for the individual and family
Wairuatanga – spirituality
Hinengaro – the mind
Taha tinana – physical wellbeing
Whanaungatanga – extended family
Mauri – life force in people and objects
Mana ake – unique identity of individuals and family
Hā a koro ma, a kui ma – breath of life from forbearers
Whatumanawa – the open and healthy expression of emotion

www.health.govt.nz/ourwork/populations/maori–health/maori–health–models

Commissioning framework for mental health and addiction



Note: KPIs = key performance indicators

Faiva Ora National Pasifika Disability Plan

Vision

Pacific disabled peoples and their families can live in their home and take part in their community in the same way other New Zealanders do.

Values and Principles

To achieve the vision of Faiva Ora, Pacific disabled peoples and their families are to be valued, included and respected, have influence and control over how and where they live, are connected to their Pacific communities, and have disability support services that are useful and culturally appropriate.

The following values and principles guide the implementation of *Faiva Ora*.

Understanding Pacific disability need

Pacific disabled peoples are understood in the context of their disability, family, community and cultural preferences and are the centre of service planning and delivery.

Improving disability outcomes

Pacific disabled people receive quality supports that are culturally appropriate, useful and effective, and which enable them to fully participate in their lives.

Respecting Pacific culture

Pacific peoples' connectedness to their family and communities is enabled, and Pacific ways of doing things respected.

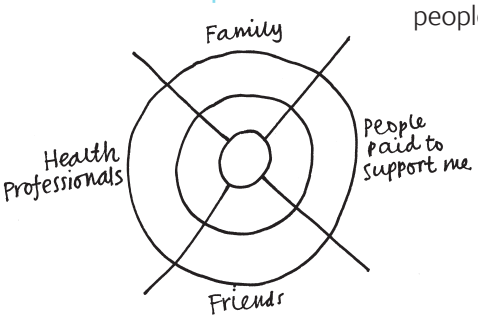
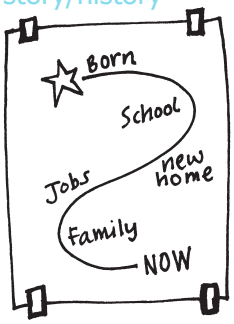
Valuing family

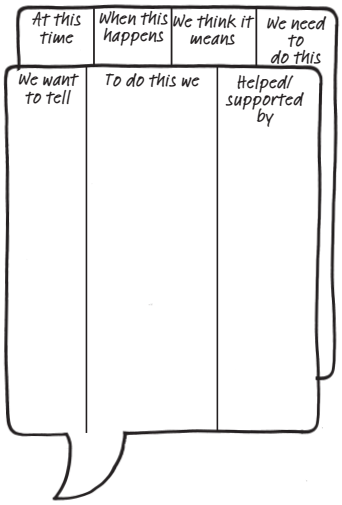
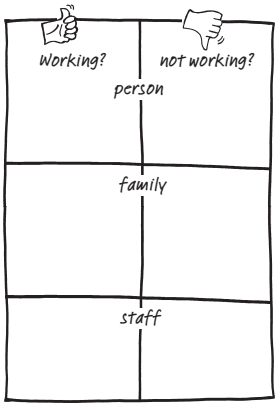
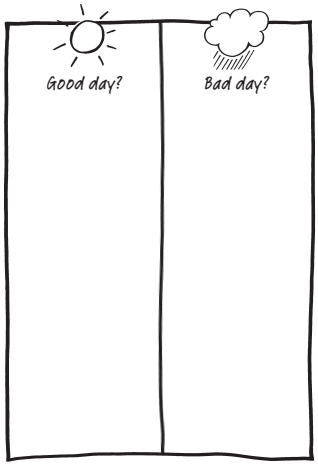
Pacific families and their special role in Pacific culture and community are respected, valued and supported.

Working together

Pacific peoples are supported through a holistic approach which includes Pacific communities working together with the shared vision of government sectors and non–government sectors.

www.leva.co.nz

Person-centred thinking tool	What it does	How this person-centred thinking tool helps
One page profile (sorting important to/for) 	Separates what is important TO someone (what makes the person happy, content and increases well being), from what is important FOR them (the help or support they need to stay healthy, safe and well) while working towards a balance between the two.	• Identifies what must be present, or absent, in the person's life to ensure they are supported in ways that make sense to them, whilst staying healthy and safe. • A quick summary of who the person is and how to support them for all staff and others. • The basis for making changes using a one page profile with working/not working.
Appreciations 	Identifies the qualities that people value and admire about the person. Helps supporters to see what makes the person unique.	• Acknowledges and appreciates a person's gifts and qualities. • Ensures we see people for who they are and counters the frequent focus on what is wrong. • Identifies those who have a personal connection with the person and those who really know what is important to them. • Part of a one page profile.
Relationship circle  	Identifies who the important people are in a person's life.	• Learn who is most important to the person. • Sees if there are any important issues around relationships. • Helps identify who to talk to when gathering information. • Identifies relationships that can be strengthened or supported.
Life story/history  	Our histories make us who we are – with history comes regard. Gives people the opportunity to understand and appreciate the person in the context of their own story.	• Shows us how best to support the person in the context of their past life which may represent current reality. • Can be used to frame meaningful conversation. • Helps supporters empathise with the person and see their role as ensuring a good quality of life for them.

Person-centred thinking tool	What it does	How this person-centred thinking tool helps
Communication chart 	A quick snapshot of how someone communicates. Important whenever what the person does communicates more clearly than what they say.	• Helps us focus on people's communication whether they use words to speak or not. • Provides clear information about how to respond to the way the person communicates.
Working/not working 	Analyses an issue or situation across different perspectives. Provides a picture of how things are right now, and how this compares with the way people want to live and be supported. Enables us to reflect on what is actually happening in someone's life and to change what needs to be changed.	• Clarifies what to build on (maintain or enhance) and what to change. • Helps in looking at how – any part of a person's life is working, people providing paid support are doing in their work, any effort, activity or project is working. • Helps with mediation where there are disagreements. • Use to create actions from a one page profile.
Good days and bad days 	Explores what makes a good day and what makes a bad day. Enables the person and their supporters to make changes which will result in more good days. Helps us explore what the information we capture reflects about what is important to someone and how best to support them from their perspective.	• We see what needs to be present and what needs to be absent in someone's life. • Provides information to someone who may not know the person well. • Gives us ideas for ensuring lots of good moments and experiences that lift a person's spirit are present on a daily basis. • Provides information for a one page profile.

Person-centred thinking tool	What it does	How this person-centred thinking tool helps
Learning log	Directs people to look for ongoing learning through recording specific activities and experiences.	• Provides a way for people to record ongoing learning (focused on what worked well and what didn't work well) for any event or activity. • Tells us what is important to and for individuals and families. • Can replace traditional notes or records to help us see the importance of moving away from focusing on getting tasks done, to truly supporting people to have a good life based on our continual listening and learning. • Can be used to focus on someone's whole life or specific areas of their life, e.g. someone's health, how people like to spend their time.
Matching staff	Provides a structure to look at what skills, supports, people characteristics and shared interests make for good matches.	• Encourages the person, and those around them, to think about what kind of paid support they want and need when recruiting team members. • Ensures the person likes the people who are supporting them, making it more likely they will have a good quality of life.
4 plus 1 questions	Helps people focus on what they are learning from their efforts. Given this learning, what needs to happen next?	• Gives a structured way for everyone to be listened to and describe what they have learned. • Useful in; review meetings and individual work with families. • To review actions from plans and plan further actions.

Date	What did the person do?	Who was there?	What did you learn about what worked well?	What did you learn about what didn't work?

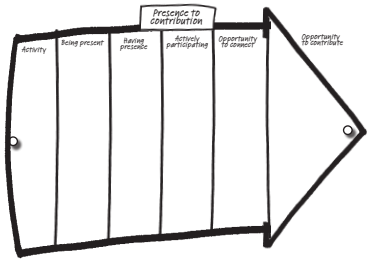
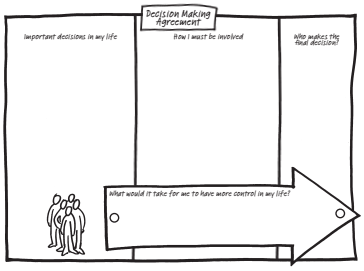
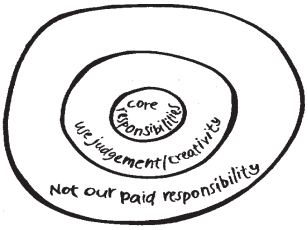
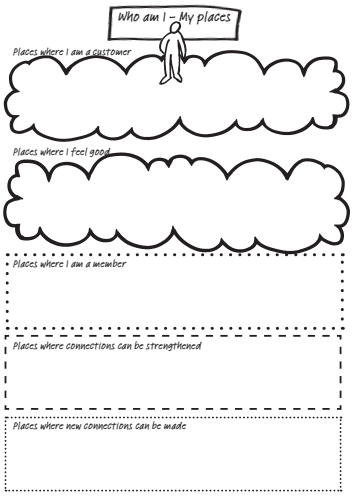
Skills needed

Support needed and wanted

Personality characteristics needed

Shared common interests

1. What have we tried?
2. What have we learned?
3. What are we pleased about?
4. What are we concerned about?
5. Given what we know now, what next?

Person-centred thinking tool	What it does	How this person-centred thinking tool helps
Presence to contribution 	Encourages creative thinking about activities and how we can use them as opportunities for participation and contribution. Identifies activities that the person is already, or wishes to be, involved in.	• Promotes being included, leading life to the full, doing interesting things and making a contribution as a full member of the community.
Decision making agreement 	Helps us to think about decision making and increasing the number and significance of decisions people make.	• Enables people to be in control and to make decisions. • Can inform best interest decision making and advanced decision making.
Doughnut sort 	Clarifies the roles and responsibilities of the different professionals and agencies supporting people and their families.	• Helps staff to be clear about what they must do and where they can be creative when supporting people to live at home.
My places 	Helps us to identify the places that matter in a person's life. Clarifies the role that the person has in each place.	• Increases understanding and helps identify the places where the person wishes to spend time. • Identifies the places to strengthen and build community connections.

Section	Publication	Web resources	Courses/consultancy
Section 1 **The knowledge, skills and understanding about person-centred thinking tools and practices**	Habits for highly effective staff – making person-centred thinking a habit www.helensandersonassociates.co.uk Practicalities and possibilities –using person-centred thinking with older people www.helensandersonassociates.co.uk Let's get real: Real skills for people working in disability. A framework www.tepou.co.nz	Michael Smull. A series of films on each person-centred thinking tool www.youtube.com/user/helensandersonHSA Think and Plan – a free website for people to use person-centred thinking online www.thinkandplan.com Mary Beth Lepkowsky. A series of films on person-centred coaching www.youtube.com/user/helensandersonHSA Person-centred thinking minibook www.helensandersonassociates.co.uk Habits pack for managers and staff (this includes the Achievement Tool and the Person-centred thinking rating scale) www.helensandersonassociates.co.uk	Person-centred thinking www.helensandersonassociates.co.uk Managers – making person-centred thinking a habit www.helensandersonassociates.co.uk Coaching for managers www.helensandersonassociates.co.uk
Section 2 **Using person-centred thinking tools and approaches to support individuals to have choice and control in their lives**		Think and Plan – a free website for people to use person-centred thinking online www.thinkandplan.com Michael Smull. A series of films on each person-centred thinking tool www.youtube.com/user/helensandersonHSA 100 one-page profiles – a free website which explains how to develop one-page profiles and shares 100 examples with stories of the difference made by having one http://onepageprofiles.wordpress.com/ Person-centred thinking minibook www.helensandersonassociates.co.uk Community connecting minibook www.helensandersonassociates.co.uk E-learning – an e-learning package that enables you to learn about and use 12 of the person-centred thinking tools Email andy@hsapress.co.uk for information	Person-centred thinking Person-centred reviews www.helensandersonassociates.co.uk
Section 3 **Using person-centred thinking tools and approaches to create a person-centred culture within the teams**	Person-centred organisations–what are we learning? www.helensandersonassociates.co.uk Making it Personal for everyone www.dimensions.org.uk Let's get real: Disability Guide for leaders and managers Let's get real: Disability Human Resources tool and templates www.tepou.co.nz	Michael Smull films for managers. 'A Rock in a Pond' and 'Person-centred plans that make a difference' www.youtube.com/user/helensandersonHS	Transforming teams Person-centred teams Positive and productive meetings Person-centred supervision Person-centred risk Person-centred recruitment www.helensandersonassociates.co.uk