

# **Procedure Name**

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Owner:	Colin Phillips	Job Title:	Assistant Director –	
			Care & Support	
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		ARK Management		
		Care & Support Staff		
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### **Version Control**

Date	Owner	Version	Reason for Change
Sept 2020	Nikki Fildes	1.1	Addition of Good Life templates as appendices
July 2020	Nikki Fildes	1.0	New procedure



# Good Life Documentation Procedure

## **Contents**

1.0 Introduction	3
1.1 Good Life documentation	
2.0 Timescales	
3.0 Training and learning	
4.0 Implementation and Review	
4.1 Implementation	
4.2 Review	
Appendix 1 - Service Agreement template	
Appendix 2- Good Life Support Plan template	
Appendix 3 - Good Life Outcomes Plan template	
Appendix 4 - Good Life Review template	
Appendix 5 - Good Life Review easy read feedback template	
Appendix 6 - Guidance (support plans)	
Appendix 7 - Guidance (outcomes plans)	
Appendix 8 - Guidance (reviews)	
Appendix 9 – Guidance (easy read reviews)	

#### 1.0 Introduction

The ARK personal planning process is based on the personal outcomes approach and is referred to as 'Good Life' planning. Good Life documentation comprises:

- Service Agreement (see **Appendix 1** for template)
- Good Life Support Plan (see **Appendix 2** for guidance)
- Good Life Outcomes Plan (see Appendix 3 for guidance)
- Good Life Review (see **Appendix 4** for guidance)
- Risk & Vulnerability Assessment (see CS04 Risk & Vulnerability)

Care & Support services using the ARK Information Management System (AIMS) should note that the Good Life Outcomes Plan and the Risk & Vulnerability Assessment are merged on the system. These are separate documents in services still using paper copies.

Note that when updating any Good Life documentation, previous versions must be kept as per **G17 Retention of Documents** 

#### 1.1 Good Life documentation

**Service Agreement**: this is the agreement between ARK and the supported person that details the expectations of using/providing the service. At a minimum, this includes:

- Care & Support Manager (CSM)/Registered Operations Manager (ROM) details
- Office address
- Costs
- Complaints and compliments process
- Cancelling support
- Emergency plans
- Cancelling the service

Individuals accessing Self-directed Support Options 1 and 2 may also need confirmation of their budget and what this can be used for detailed in the service agreement.

**Good Life Support Plan**: This details the individual's skills, gifts and support needs. It includes medical information, sensory needs and important contacts.

**Good Life Outcomes Plan**: details the outcomes the individual wishes to achieve with support.

**Good Life Review**: measures the progress the individual has made towards meeting their outcomes with support.

#### 2.0 Timescales

The completion of documentation is the responsibility of the Care & Support Manager (CSM). The CSM may delegate tasks to any Care & Support worker, but remains responsible for accuracy and must audit as per CS23a Quality Assurance (Care & Support).

**Service Agreement**: This is based on the contract with the local authority and should therefore be ready when the individual's service starts.

ARK may not have a contract with the local authority for people accessing Self-directed Support Options 1 or 2. The terms of the service agreement must be clear to the individual and anyone who helps them make choices prior to the service starting.

**Good Life Support Plan**: Prior to an individual receiving a service from ARK, use should be made of any transition meetings or similar to start this.

It can be left with the individual or their family for them to add to in their own time. It must be completed within 6 weeks of the service starting.

**Good Life Outcomes Plan**: This should also be completed within 6 weeks of the service starting. It is a 'live' document, which means it should evolve and change throughout the course of the service provision.

**Good Life Review**: Reviews should take place at least every 6 months. There must be evidence of the individual's Good Life Plan changing as a result of the review.

The individual's care manager should be invited to every review, and must attend at least 1 per year. If the individual does not have a care manager, duty social work or the team leader for the social work team responsible for agreeing funding should be invited instead.

All other plans and records, for example; PBS plan, Risk Management Plan, and Restraint Reduction Log, are subject to the same review schedule. The CSM retains responsibility for the accurate completing and audit even when they have delegated these tasks to Care & Support workers, see: CS04 Risk & Vulnerability, CS06 Reducing Restrictive Practice and CS17 Behaviour of Concern.

Timescales remain the same for services using AIMS. Non-compliance with timescales is automatically flagged to CSMs/ROMs.

## 3.0 Training and learning

Care & Support staff will complete an induction at the start of their employment, which will introduce the personal outcomes approach. A service-level induction must also take place and will include learning about relevant supported people's Good Life documentation. Further training and learning as required is at the discretion of the CSM/ROM.

## 4.0 Implementation and Review

### 4.1 Implementation

Care & Support Managers/Registered Operations Managers are responsible for the implementation of these procedures by their Care & Support staff.

#### 4.2 Review

ARK Area Managers' group is responsible for the review of these procedures, at least every 3 years. Any changes to the associated policy as a result must be submitted to the Board of Management for approval.