

## Support Needs and Risk Assessment Policy

<b>Status</b>	<b>Approved</b>
<b>Document reference</b>	<b>SOPOP267PO</b>
<b>Date document written/amended</b>	<b>September 2009</b>

<b>STATUS</b> (Draft/Approved/Updated/Archived)	<b>REFERENCE</b>
<b>Approved</b>	<b>SOPOP267PO</b>

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Version Number	Date Amended	Comments	Date Approved	Author	Approved by
2		Replaces Application, Assessment and Support Plan Policy (267 version 1)	8.9.09 14.9.09	P Watts	C. Sledge (SHA) A Murphy (SCP)

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# 1. Purpose

This policy applies to the support planning and risk assessments which will be undertaken for those wishing to access, or for those receiving a support service from Signpost Care Partnerships. This policy applies to Signpost Housing Association and Signpost Care Partnerships' (the Associations) customers including:

- residents living in the Associations' supported, independent living, and general needs rented accommodation
- residents living in accommodation directly managed by the Associations
- clients who are not resident in one of the Associations' properties but who are in receipt of the support service
- clients who have applied for, but are not yet in receipt of the support service.

This policy has been developed to ensure the Associations comply with current legislation, Tenant Services Authority Standards, Quality Assessment Framework, Housing Corporation guidance and good practice and includes:

- undertaking comprehensive assessment of support needs and associated risks prior to, or very shortly afterwards, the support service is offered
- ensuring support plans and risk management plans are tailored to individual needs and take account of risks that are identified in the assessment process
- undertaking regular reviews of support needs and risk management plans and involving the resident/client in these reviews
- promoting independence
- ensuring staff who undertake support planning, risk assessment and management are appropriately trained.

The Associations strive to achieve the Spectrum Group mission:

'To be recognised and respected for providing quality homes and services. Empowering people, supporting active communities and building better futures'.

This policy supports the Associations' overarching plans and strategies to deliver quality services and ensure accessibility to these services for all the

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Association's customers.

## 2. Definitions

### 2.1 Support planning

Support Planning is a method of helping a resident/client to identify personal goals and identifies the support that is needed to help them to achieve these goals. The support plan is agreed following a comprehensive assessment of the individual's needs. Participation of the resident/client is a key element in the assessment and support planning process. A support plan is tailored to the individual but will commonly include:

- an agreed set of actions which reflect the overarching aims of the specific housing support service
- specific steps and goals that the resident/client will take to reach their overall aims
- the level of support which will be provided to assist the resident/client in the achievement of these goals.

### 2.2 Risk Assessments

Risk assessments will be undertaken as an integral part of the support planning process. Risk may include:

- self risk
- risk to others
- risk from others.

The Communities and Local Government, Quality Assessment Framework states 'Risk needs to be addressed constructively and should not exclude applicants inappropriately. Appropriate risk taking should be encouraged and risk avoidance should be discouraged'.

## 3. Legislation, Regulatory and Good Practice Requirements

- Data Protection Act 1998
- Chartered Institute of Housing, Good Practice Brief : Equality, Diversity

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and Good Relations in Housing (April 09)

- Department of Health, 'No Secrets' guidance
- Housing Act 1996 (as amended by the Homeless Act 2002)
- Housing and Regeneration Bill 2008
- Housing Corporation Good Practice Note 8 Equality & Diversity
- Housing Corporation Regulatory Code Human Rights Act 1998
- Protection from Harassment Act 1997
- Supporting People Quality Assessment Framework
- Protection from Abuse Protocols.

### **3.1 Relationship with other Strategies, Polices and Procedures**

- Anti-social Behaviour Policy ( SHA/SCP)
- Allocation and Lettings Policy (SHA/SCP)
- Community Involvement Strategy (SHA/SCP)
- Confidentiality, Privacy and Data Protection Policy (SHG)
- CRB Handling Information Policy (SHG)
- CRB Recruitment Policy (SHG)
- Equality, Diversity and Inclusion Policy (SHG)
- Financial Inclusion Strategy (SHA/SCP)
- Handling Disclosure Information Procedure (SHG)
- Health and Safety Policy (SHG)
- Health and Safety Procedures (SCP)
- Homelessness Policy (SHA/SCP)
- Housing Support Services Policy (SHA/SCP)
- Lone Worker Policy (SHA/SCP)
- Mental Capacity Guidance (SCP)
- Openness and Accountability Policy (SHG)

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- Policy Statement: Secure storage, handling, use, retention and disposal of disclosures and disclosure information (SHG)
- Recruitment and Selection, Code of Practice (SHG)
- Resident Involvement Strategy (SHA/SCP)
- Safeguarding and Protection from Abuse, Vulnerable Adults and Children Policy (SHA/SCP)
- Statement of Professional Conduct and Boundaries (SHA/SCP)
- Support Needs and Risk Assessment Procedure (SHA/SCP)
- Value for Money Strategy (SHA/SCP).

## 4. Support Needs and Risk Assessment Policy

The Associations are committed to ensuring that the support needs and risk assessment process does not exclude any potential resident/client from accessing the service and recognise that each resident/client will have individual needs.

The Associations fully embrace a resident/client centered approach during both the initial support needs and risk assessment process and throughout the period of the service provision.

The Associations aim to encourage the involvement of the resident/client to make use of their strengths, values, aspirations, and preferences.

The Associations will use information from residents/clients and the outcomes of the service delivery to inform future strategic direction.

A comprehensive support needs and risk assessment will be undertaken for all residents/clients who wish to access the support service.

### 4.1 Communication and information

The Associations will use a variety of methods to ensure residents/clients are fully aware of the support service, what can be expected from individual support and risk management plans and that will include:

- verbal explanation prior to, or on entry into the support service
- the provision of an information leaflet either prior to, or on entry to the

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service

- information in the residents handbook
- the resident's/client's right to initiate a review
- details of arrangements that will enable residents/clients to access help in a crisis or emergency.

Individual communication requirements will be identified and agreed and all documentation, including the support plan, will be made available in an appropriate format.

#### **4.2 Responsibility for undertaking support planning and risk assessments**

Due to the level of expertise required to undertake support planning and risk assessments Signpost Care Partnership's staff will have primary responsibility for undertaking the assessments.

Where a potential support need is identified by other staff, this will be referred to Signpost Care Partnerships for assessment.

#### **4.3 Support planning**

Support planning will be closely linked with risk assessment and management and will be undertaken in accordance with the Support Planning and Risk Assessment Procedure. The Associations will take a consistent resident/client centered approach to support planning which will include:

- recognising that needs may change and that support plans need to be responsive, adaptable and flexible
- using standard documents for all support and needs assessments
- encouraging and assisting residents/clients to participate in the development of their individual support plan
- involving other relevant agencies in the support and needs assessment process and in the development of the support plan
- taking account of the wider needs of the resident/client and how this may impact on their need for support
- ensuring the support plan takes into account and reflects the views, aspirations and targets of the resident/client, respecting the residents/clients right to choice and control
- where required, identifying a representative who is able to act on behalf

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of the resident/client

- ensuring that the support plan is clearly understood by the resident/client
- ensuring the actions within the plan are specific, measured, agreed and realistic and that the outcomes have been developed in negotiation with the resident/client
- ensuring appropriate arrangements are in place to enable residents/clients to access help in a crisis or emergency
- monitoring and reviewing support plans at regular intervals.

#### **4.4 Risk assessments and risk management**

Risk assessments will be closely linked with support needs assessments and support plans and will be undertaken in accordance with the Support Planning and Risk Assessment Procedure. The Associations will take a consistent resident/client centered approach to risk assessment and management that will include:

- recognising that needs may change and that risk assessments need to be responsive, adaptable and flexible
- using standard documents for all risk assessments
- involving other relevant agencies in the risk assessment and in the development of the risk management plan
- identifying control methods to eliminate, minimise or respond to risks that have been identified
- undertaking effective risk management which will be balanced with the promotion of independence
- monitoring and reviewing risk management plans at regular intervals.

#### **4.5 Involving others**

The Associations will, where appropriate, work with the resident's/client's support networks to develop appropriate support and risk management plans. These networks may be both formal and informal, examples include.

Informal support networks:

- relatives
- carers

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- advocates
- friends

Formal support networks:

- Social Services
- Health Authority
- Probation Service
- other support agencies

#### **4.6 Working in partnership**

The Associations will seek to take a joined-up approach in the delivery and assessment of support needs and risk management and will include:

- seeking to ensure that all support needs and risk arrangement plans take into account, and compliment, statutory care plans or care plans which may be provided by other agencies
- seeking specialist advice when required
- taking a case conference approach where appropriate
- being part of formal information sharing protocols and formal agreements to ensure that, where appropriate, information can be shared with other agencies.

#### **4.7 Support plan and risk assessment reviews**

The Associations are committed to undertaking regular reviews of the resident's/client's support plan and risk assessment. The frequency of the reviews will be assessed in accordance with the resident's/client's individual circumstances, but not less than annually. The reviews will consider the type, level and the aim of the support being provided and will reflect the needs and risks identified in the assessment process.

The resident/client may, at any time, initiate a review of their support plan and risk assessment

#### **4.8 Refusal/withdrawal to provide a support service**

The Associations will endeavour to support the resident/client and where appropriate will link to other support providers and other agencies in order to

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provide the appropriate support and effectively manage risk. However there may be occasions when the Associations, having exhausted all risk management tools and having taken appropriate steps to re-engage with the client, have no option but to refuse to provide support or decide to withdraw the support service. This may include refusal to provide support or to withdraw a support service and may include:

- where a risk has been identified and the risk is such that a risk management plan is not sufficient to positively manage the behaviour and risk identified
- where the level of risk is increased during the period of support and the risk becomes such that it cannot be managed effectively
- the resident/client disengages with the support
- the level of support is such that the Associations are unable to meet the needs identified in the support plan and that the unmet needs could be extremely detrimental to the health/wellbeing of either the resident/client, staff or others
- the resident/client refuses to accept at least the minimum level of support available/applicable

Allocation of accommodation is dealt with in accordance with the Allocations and Lettings Policy.

## **4.9 Data protection, communication and information sharing**

### **4.9.1 Disclosure of information**

The Associations will not disclose information to other agencies without the prior consent of the resident/client, except where a person is considered to be at risk, or if there is a risk of serious harm to anyone involved in the situation, or when required to do so by law or by an order of a court.

The Associations will be party to relevant protocols and formal agreements to ensure that, where appropriate, information can be shared with other agencies. Any disclosure of information will be undertaken in accordance with the relevant policy, procedure, protocol or formal agreement.

### **4.9.2 Storage of information**

All data and resident/client files will be managed and stored in accordance with the relevant policies and procedures.

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#### **4.10 Health and safety**

The Associations are committed to the security and health and safety of all staff, residents, clients as well as the wider community and will take a co-ordinated approach to the management of health and safety.

Actions in relation to health and safety are detailed in the following policies and procedures:

- Lone Worker Policy (SHA/SCP)
- Support Needs and Risk Assessment Procedure (SHA/SCP)
- Health and Safety Policy (SHG)
- Health and Safety Procedures (SCP)
- Statement of Professional Conduct and Boundaries (SHA/SCP).

#### **4.11 Training and recruitment**

The Associations will ensure staff are appropriately trained and have the professional knowledge and skills required to meet the needs of the resident/client accessing the service, this will include:

- detailed training of the current Support Planning and Risk Assessment Policy and related procedures is undertaken as part of a planned induction programme for new staff
- ensuring best practice, new legislation and case law is disseminated to relevant staff and is communicated effectively by either service area team meetings, Operational Management Team briefings, legal briefings or the internal intranet
- identifying on-going training needs and arranging appropriate training, as required, for staff, residents and Board members
- recruiting staff with the appropriate skills to meet the needs of the resident/client.

#### **4.12 The Right to Appeal**

Any appeal against the decision to take action, or otherwise, in relation to the support and needs assessment, support plan, risk assessment or risk management plan will be dealt with in accordance with the Associations' Appeals Procedure.

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#### **4.13 Monitoring and Control**

The Housing Support Services Managers will monitor the support planning and risk assessment process on a regular basis. This will include:

- formal reviews on a case by case basis
- individual reviews with staff
- sample quality testing of individual support and risk management assessments and plans

#### **4.14 Equality, Diversity and Inclusion**

This policy has been developed to ensure the Associations provide equality of access and service delivery and includes:

- ensuring that no resident/client is disadvantaged irrespective of their race, gender (including gender reassignment), religion or belief, colour, ethnic or national origin, sexual orientation, marital status, age, disability, or social position in accordance with Spectrum Housing Group Equality, Diversity and Inclusion Policy
- ensuring specific communication requirements are identified and are met.

#### **4.15 Equality Impact Assessment**

This policy has had an equality impact assessment that has concluded that this policy does not discriminate either directly or indirectly and does not disadvantage any individual or group.

#### **4.16 Responsible Officers**

The Divisional Director, Housing Services, Signpost Housing Association, and the Divisional Director, Support Services, Signpost Care Partnerships will be responsible for monitoring and implementing this policy.

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