NHS Personalised Care



Personalised care and support planning

What is personalised care?

Personalised care will benefit up to 2.5 million people by 2023/24, giving them the same choice and control over their mental and physical health that they have come to expect in every other aspect of their life. A one size fits all health and care system simply cannot meet the increasing complexity of people's needs and expectations. Personalised care and support planning is a key programme within personalised care

Personalised care is based on 'what matters' to people and their individual strengths and needs working alongside clinicians and other health professionals. The NHS Long Term Plan says personalised care will become business as usual across the health and care system and Universal Personalised Care confirms how we will do it.

What is personalised care and support planning?

Personalised care and support plans involve a series of facilitated conversations and shared decision making, in which the person, or those who know them well, explore the management of their health and wellbeing within the context of their whole life and family situation.

This process recognises the person's skills and strengths, as well as their experiences and the things that matter the most to them.

Personalised care and support planning is key for people receiving health and social care services. It is an essential tool to integrate the person's experience of all the services they access so they have one joined-up plan that covers their health and wellbeing needs.

Our aim is for 750,000 people, including pregnant women, people with long-term conditions and those at the end of life to have a personalised care and support plan in place by 2023/24.

What counts as a personalised care and support plan?

All five of these criteria need to be in place:

- 1. People are central in developing and agreeing their personalised care and support plan including deciding who is involved in the process
- 2. People have proactive, personalised conversations which focus on what matters to them, paying attention to their needs and wider health wellbeing
- 3. People agree the health and wellbeing outcomes they want to achieve, in partnership with the relevant professionals
- 4. Each person has a shareable personalised care and support plan which records what matters to them, their outcomes and how they will be achieved
- 5. People have the opportunity to formally and informally review their care plan.

NHS England and NHS Improvement



We have been supporting and enabling the development of personalised care and support plans for:

- End of life and palliative care
- Maternity
- Cancer
- Dementia
- Stroke

Personalised care demonstrator sites have focused on cohorts including learning disability, mental health, long term conditions and frail older people. We will be supporting cardiovascular disease, respiratory and long-term conditions next.

The initial outcomes agreed in his personalised care and support plan were to:

- Have more flexibility and choice over the care package
- Access suitable groups and activities within the community
- Increase independence and confidence, with less reliance on his mum
- Be well presented and have a good skin care routine
- Reduce and prevent hospital admissions
- Travel and enjoy holidays

Practical support and more information 💥



NHS England website www.england.nhs.uk/ourwork/patientparticipation/patient-centred-planning provides information and resources to support the implementation of personalised care and support planning.

Personalised Care Collaborative Network links partners across the health and care system to share learnings, experiences and templates, as well as hosting discussion boards.

Contact england.personalisedcaredemonstrator@nhs.net if you would like to join this network.

Declan's story

Declan needed two carers for his moving and handling needs. He felt they didn't know him well or understand his needs. He relied heavily on his mum for support, transport and care at night, meaning neither had much independence. Declan had little opportunity to mix with his peers, as restrictions on carer shift times restricted both when he went to bed and when he got up.

As he approached his 18th birthday, they reviewed his care package to improve their choice and control. After a referral to the children's continuing care team, a visit to the family was arranged.

Through a personal health budget, Declan was able to employ carers closer to his own age. As they built their relationship, they took him to new social activities. Along with transport to and from college, the first three outcomes were achieved.

The fourth came through improvements to Declan's self-care and hygiene regime, with carers giving more help in repositioning him at night; he also had fewer admissions.

Declan began to go to and from college independently, growing in confidence and in his aspirations for achievement, including learning to drive.

His mum was able to reduce her role of carer, which improved her health and wellbeing, even being able to enter into a relationship with her increased independence.

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