

SELF DIRECTED SUPPORT

Choice & Control

Support
Plan



Support Plan (Self-directed Support)

This Support Plan can be used to help you and your care manager work out how your Individual Budget can best be used to meet your agreed outcomes and provide the support you need.

This Plan has a sequence of questions that will help you work out what support will work best for you.

Once your Support Plan is completed it needs to be agreed by Social Work. Once it is agreed you can start to use your Individual Budget.

Some key questions to work out what you want to achieve through the Individual Budget and how you will do this:

Name:	
Date of birth: (dd/mm/yyyy)	
Address:	
Postcode:	
Estimated Individual Budget Amount:	£

Question 1

Tell us a bit about yourself and your life.

Who in your life is important to you?
What in your life is important to you?
What would you like to change?
(If this is a revised Support Plan following Review please indicate what has changed in your life)

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Question 2

What outcomes do you want to achieve?

Outcomes are things that you want to achieve in order to meet your assessed needs.

Examples of possible outcomes that could make things better for you and your carer, if you have one, are given below.

For you:

Outcomes can be about the quality of your life such as: to feel safe; have things to do; to see people; to stay as well as you can; to live where you want and as you want; to deal with stigma/discrimination

Outcomes can be about the way in which you want support provided: To feel listened to; to have a say; to be treated with respect; to be responded to; it is reliable

Outcomes can also be improvements you want in how you feel emotionally and physically: To feel more confident; to improve skills; to improve in mobility; to reduce symptoms/be more independent.

For your carer:

Outcomes may be things like: Having a say in services; maintaining their health and well-being; having a choice in caring including limiting their caring role; a life of their own; a positive relationship with you.

Your outcomes are personal to you and should be realistic and achievable. If they are long term changes you could break them down into achievable steps.



Question 3

How will your Individual Budget be managed?

Please tick the box/boxes that apply. You can choose to have a mix of ways to manage your Individual Budget.

The alternatives are:

- A Direct Payment. Please state which option applies:
 - Paid to your bank account and you will manage, with support if you want
 - Paid to an independent organisation. You will retain responsibility OR a financial and welfare attorney or guardian will be responsible (*delete as appropriate*)
 - Paid to a legally constituted Trust
 - Paid to an Attorney or Guardian who has been appointed to do this

- OR/AND Individual Service Fund paid directly to your provider of choice

- OR/AND your Care Manager makes the arrangements on your behalf

Question 4

Will you be managing your own support or will you be asking someone to assist you with this?

If someone is assisting you how will you stay in control of your life? What support do you need to maintain your independence?

Question 5

How will you meet your outcomes?

This section needs to show how you are going to meet the outcomes which you have **identified in Section 2 of this form**, and how you will spend your Individual Budget. This must take into account any employment responsibilities. It should also include employers liability insurance, employee 'on costs', employment support and payroll costs where required, and contingency for future unknown employment costs eg maternity leave, redundancy.

This section is in two parts.

Part A should describe how you will use your Individual Budget.

Part B should describe other ways in which you will meet your outcomes.

A) Identify how you will spend your Individual Budget

My Individual Budget is:		£	per week
Outcomes my Individual Budget will help me to achieve (transfer from Section 2 as appropriate)	The support/services you will use to achieve this.	Weekly Cost	Annual Cost
One-off costs e.g. equipment/ forward planning			
Total			

B) Identify any other supports and services that you will use in addition to your Individual Budget.

Outcomes I plan to achieve	What support will you use?

Do you receive DLA / AA? Yes No | Low Mid High rate

Question 6

Is there anything that could stop this plan working or lead to risks?

For example, in the way you have chosen to manage your support; because you are doing things for the first time.

Possible problem	How would like affect me or another person?	How would I deal with the problem and manage risks?*

*The care manager / support planner should make a note in the row below if the person wants to accept a degree of risk and any advice that was given by the care manager/support planner.
N.B If there are complex risks it may be appropriate to do a separate Risk Assessment

Forward planning. If things do not work out as planned with my support arrangements, or in the event of an emergency, such as my paid carer is ill or I am not well or my main carer is absent/unwell – this states what I will do.

I agree to this Support Plan (Self-directed Support)

Individual:	
Care Manager:	
Team Leader:	
Date:	
This plan will be reviewed on:	

If your circumstances changes, or if you want to make any changes to your plan please contact your care manager.