|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Item number | Area | Yes | No | Not sure |
|  | Information |  |  |  |
| 1 | We know each persons’ diagnoses and symptoms |  |  |  |
| 2 | We use information positively to ensure day to day support |  |  |  |
| 3 | We have a record of each persons’ medication and key side affects |  |  |  |
| 4 | The information we keep helps staff to deliver personalised support |  |  |  |
|  | Approach to person centred support |  |  |  |
| 5 | We consider the wishes and beliefs of the person we are looking after in respect of medication.  |  |  |  |
| 6 | People are described and treated respectfully and positively as individuals by staff |  |  |  |
| 7 | The care plans we produce will take into account the individual’s wishes and beliefs about medication.  |  |  |  |
| 8 | We use those records to inform our day to day support of the individual |  |  |  |
| 9 | We only give medication in the person’s best interests if they lack capacity to make decisions themselves.  |  |  |  |
| 10 | We do not give medication without the individual’s knowledge, unless this has been fully discussed with relevant professionals and the family. |  |  |  |
| 11 | When giving medication we ensure that they have been prescribed for the individual and that they are the right ones for the person’s condition.  |  |  |  |
| 13 | We know how each individual prefers to take their medication |  |  |  |
| 14 | We know how the person communicates and how to respond |  |  |  |
| 15 | We administer medication in a form and route appropriate for the individuals needs/abilities, and this is assessed regularly.  |  |  |  |
| 16 | We do not hide medication in people’s food and drink. |  |  |  |
| 17 | Where we use assistive technology this is to support the individual in maintaining their independence |  |  |  |
| 18 | Individuals are as active in their own care as possible |  |  |  |
| 19 | We promote the individual’s human rights, and administer medicine in line with national and local medication policies, and legal guidance.  |  |  |  |
| 20 | We regularly review people’s physical and mental health and involve them [and those who are important to them], in that review |  |  |  |
| 21 | We provide a range of opportunities for people to eat healthily |  |  |  |
| Item number | Area | Yes | No | Not sure |
| 22 | We ensure that each individual has an oral healthcare plan.  |  |  |  |
|  | Purpose |  |  |  |
| 23 | We are clear about our roles and actions in enabling the person to achieve appropriate medication regimes.  |  |  |  |
| 24 | We are clear that our role is about supporting the person to achieve their desired outcomes |  |  |  |
| 25 | We have person centred advance decision making in place for end of life care |  |  |  |
| 26 | Where the individual has difficulty taking their medication we refer them to an appropriate professional for support.  |  |  |  |
| 27 | We support people to make decisions that are important to them, even where we don’t agree with the decision |  |  |  |
| 28 | We positively manage the risks associated with the decision making process. |  |  |  |
|  | Review  |  |  |  |
| 29 | We have a clear process for reviewing what works and does not work for each person |  |  |  |
| 30 | We take steps to change what is not working and that actively involves the individual  |  |  |  |
| 31 | Progress towards achieving outcomes is reviewed with the person and where they agree those who are important to them |  |  |  |
| 32 | Individuals have as much control over their immediate environment as possible. |  |  |  |
| 33 | We know and record the best ways to support individuals to maintain their physical health and personal comfort. |  |  |  |
| 34 | We work to reduce the amount of medication that people take |  |  |  |
| 35 | We are aware of the signs that the individual is in pain, and take action to address that. |  |  |  |
| 36 | People are supported to be physically active as part of their daily routine |  |  |  |
| 37 | Individuals are supported to access regular medical checks, [sight, hearing, dental and chiropody for example] |  |  |  |
|  | Staff responsibilities |  |  |  |
| 38 | Staff are clear that their role is one which is based on the values of supporting with respect, warmth and dignity. |  |  |  |
| 39 | We work in partnership with individuals and their family and friends to ensure good physical and mental health.  |  |  |  |
| 40 | We work in collaboration with other professionals to ensure the individuals good physical and mental health. |  |  |  |
| 41 | Staff have an agreed set of values that underpin what they do. |  |  |  |
| Item number | Area | Yes | No | Not sure |
| 42 | Recruitment and selection of staff has a person centred approach. |  |  |  |
| 43 | Staff supervision processes are seen as important and are based on positive and constructive feedback and development |  |  |  |
| 44 | Staff understand how individuals express their emotions and are able to respond to those expressions of feeling positively and with respect. |  |  |  |
| 45 | Staff understand the impact of the environment on individuals |  |  |  |
| 46 | We ensure that staff have the relevant knowledge and skills to support the individuals medicine care plan.  |  |  |  |
|  | Risk management |  |  |  |
| 47 | Risks are approached in a person centred way, that reflects the desired outcomes of the individual, and the decisions are recorded.  |  |  |  |
| 48 | Roles are seen as relationship not task centred.  |  |  |  |