

# Personalised Care and Support Plan



*"I can plan my care with people who work together to understand me and my carer(s), allow me control, and bring together services to achieve the outcomes important to me."*

## **What is a Personalised Care and Support Plan?**

A Personalised Care and Support plan (shortened here to 'Support Plan') identifies what is important to you, sets out your goals and what support you need to enable you to meet those goals. It takes into account your physical and mental health as well as personal, family, social, economic, spiritual and cultural considerations.

## **Do I need a Support Plan?**

Not everyone needs one but if you are living with a long term condition, the creation of a Support Plan means that you and your carers can be more involved in decisions about your care.

## **Is a Support Plan a legal document?**

A Support Plan is not a legal document but if you are being supported by a variety of health or social care professionals, volunteers and/or others it will be helpful for them to better understand your situation and what matters to you.

## **Who can help me with this?**

Support Plans tend to be produced with you by one or more people involved in your care; if you have not been offered one but think it would be helpful, contact your GP. You can help them by using the planner on the next page to think about what you may want to be taken into account.

## **Can I change my Support Plan?**

Definitely. Your goals and the support you need are likely to change over time. If they do not contact you, do get in touch with the person who first created it with you, or your GP.

## **What should I do with it?**

Share your Support Plan with the people supporting you, review it regularly to ensure it is meaningful for your current situation. Ask for the latest version to be added to your GP notes.

## **Other names used**

Personalised Wellbeing Plan; Care Plan, Health Plan, Self-management Plan.

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# Personalised Care and Support Plan Planner

**My name:** \_\_\_\_\_

**My date of birth:** \_\_\_\_\_

**My address:** \_\_\_\_\_

**Details of my long term condition(s) and general state of health:**

**The medications I am on:**

**My goals (eg weight loss, stop smoking, exercise more, maintain independence). These might be split into short and long term goals:**

**Other treatment / management plans I already have in place for specific conditions (your Support Plan does not replace these but takes them into account):**

**Information I would like to be taken into account (eg family, economic, spiritual, cultural):**

**People involved in my care (professionals, family, volunteers etc.):**