



Learner Guide

CHC33021: Certificate III in Individual Support

CHCCCS031 Provide Individualised Support

Skilled Care.

RTO Code: 31942

CHCCCS031

Provide Individualised Support



This unit describes the performance outcomes, skills and knowledge required to organise, provide, and monitor personal support services for a person within the limits established by an individualised plan. The individualised plan refers to the support or service provision plan developed for the person accessing the service and may have different names in different organisations.

In this unit, we will look at the following topics:

- Determine support needs.
- Provide support services.
- Monitor support services.
- Complete reporting and documentation

Chapter 1

The Care Sector



Ageing

The population is growing and ageing, meaning there are more elderly people alive today than ever before. As we grow older, our needs change. You probably need different products, medication, and services than you did, say 10 or 20 years ago.

Australia's aged care system offers a variety of services to support people as their care needs change. Some of our aged who require lower-level needs or require extra assistance at home may be able to live in the community (their home) others who have higher level needs may live permanently in residential care. Either way how we meet these needs requires planning, so we need to create a plan to deliver services for the aged to maintain a lifestyle.

Care Plans

Care plans are often referred to by various names including:

- Care Plan
- Service Delivery Plan
- Individualised Care Plan
- Personal Care Plan

Whatever terminology is used the aim of these plans is to identify the needs of the aged. The care plan is a written document that details the person's needs on a personal or social level. The plan is developed with the help of the person and information given by the person's carer, family and any other person/s involved with the person. Care plans should be updated regularly as the needs of the persons may change and may need extra services.

What is a Service Delivery Plan?

A Service Delivery Plan is:

- A personalised plan that sets out how the service will be delivered to the person.
- The main document that contains all required service needs
- Detailed in the way in which funding is used to meet the person's needs.
- Designed with the participation of the person, their family, service provider and any representatives from allied health professionals involved in the person's life.
- Essential that the service delivery plan is designed to comprehensively meet the person's needs.

Details which are included in the service plan are:

- The type of support the staff need to focus on
- The goals, needs and wishes of the person.
- Other networked services that will be included in the service delivery.
- Details about the living situation, including the status of the residence – whether it is a housing commission house, or is owned or rented by the person.
- The spiritual needs of the person and how they are to be met with service delivery.
- Any allied health professional involved in service delivery.
- The health and nutritional needs of the person
- The social and recreational needs of the person

Community Affiliations

Do they or did they belong to any clubs, choirs, or folk-dance groups in the past? Would they like to continue to do so?

Sexuality

As many older transgender people will have felt the need to conceal part of their identity all their lives, they should be provided with the opportunity to express and live as their chosen gender during their ageing years.



Activity

Select your preferences from the list below:

I prefer or			
Black		White	
Shower		Bath	
Chinese Food		Thai Food	
Walking		Running	
Apples		Oranges	
Television		Music	
Summer		Winter	
Cat		Dog	
Swimming in the ocean		Swimming in a river	
Beef		Lamb	
To sleep in		To get up early	

Unmet Needs

While working with persons, their circumstances and care needs can suddenly change. Any significant change in your person's physical or mental condition and change in their attitude or medical situation should be conveyed to your supervisor immediately in accordance with the policies and procedures of your organisation.

There can be different forms of change that we can observe in persons. Some of the more common ones include:

Physical	Spiritual	Environmental	Cultural
Emotional	Sexual	Financial	Medical
Cognitive	Skills/Education	Safety	Emotional

Observing persons is a vital part of the aged care and health support worker's role. To be able to report changes in a person's condition or needs, the individual support worker must be a good observer.

To observe people in your care, you must use ALL your senses. Observing is much more than just looking at the person. Anything unusual or out of the ordinary should be noted and reported to the supervisor.

The following protocols should be followed:

- Record your observations in written form.
- Verbally report what you have observed to your supervisor and fellow workers.
- Date and sign your information.

Accurate, objective reporting is a skill that needs practice. The reports made by a worker often affect the type and level of support the person in care will receive. Reports which are inaccurate and coloured with personal interpretation and perceptions may result in inappropriate support and assistance to the person.

The Charter of Aged Care Rights (The Charter)

(Previously known as the Charter of Residents Rights and Responsibilities)

On 1 July 2019, a single Charter of Aged Care Rights (the Charter) came into effect. It replaced previous charters of care recipients' rights and responsibilities.

Consumers receiving Australian government-funded aged care services have the right to be properly looked after, treated well and given high-quality care and services. A Charter of Aged Care Rights protects the rights of consumers.

Charter of Aged Care Rights

I have the right to:

1. Safe and high-quality care and services.
2. Be treated with dignity and respect.
3. Have my identity, culture and diversity valued and supported.
4. Live without abuse and neglect.
5. Be informed about my care and services in a way I understand.
6. Access all information about myself, including information about my rights, care and services.
7. Have control over and make choices about my care and personal and social life, including where the choices involve personal risk.
8. Have control over, and make decisions about, the personal aspects of my daily life, financial affairs and possessions.
9. My independence.
10. Be listened to and understood.
11. Have a person of my choice, including an aged care advocate, support me or speak on my behalf.
12. Complain free from reprisal, and to have my complaints dealt with fairly and promptly.
13. Personal privacy and to have my personal information protected.
14. Exercise my rights without it adversely affecting the way I am treated.

Everybody involved in the delivery of your care must respect your rights.

These rights apply in residential care, home care and other aged care services provided in the community. All Australian government-provided aged care providers must comply with the Charter.

This includes providers of residential care, home care, flexible care, and services provided under the Commonwealth Home Support Programme and the National Aboriginal and Torres Strait Islander Flexible Aged Care Program.

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