**Overview** 

Prepare for habilitation/ rehabilitation work, contact and involvement

Elements of Competence



### Collate and review case notes and other relevant literature to inform a 1 planned response for habilitation/ rehabilitation work, contact and involvement Liaise with others to access any additional information that can inform 2 preparation for initial contact and involvement Correlate and evaluate all information to identify the best form of initial 3 contact and involvement Negotiate and agree the plan and review process with the individual. 4 About this standard This standard is about undertaking habilitation/ rehabilitation practices and the provision of habilitation/ rehabilitation activities including preparation for first contact with and the ongoing involvement of individuals. For this standard you will be expected to work in partnership with others to identify, assess, plan, take action and evaluate the interventions. The standard can be relevant for all levels. Sections of the standard can be used for induction purposes, professional development and for training. The terms habilitation/ rehabilitation are used in their broadest sense in this standard and anyone who works across the spectrum of sensory impairment will at some point do some work with individuals that will be of a habilitation/ rehabilitation nature. Although the primary responsibility for your professional development rests with you, the standard also requires management support to facilitate the continuing professional development of the workforce. Evidencing your performance, knowledge and understanding The performance criteria sections and the knowledge and understanding section indicate areas that you should be able to evidence in relation to your performance or knowledge and understanding.

### Key principle

Communication underpins the entire standard and all the standards in this suite. It is vital that those working in the field of sensory impairment with children, young people and adults have the necessary and appropriate language/ communication skills to communicate effectively with people who may use a range of communication tools/ techniques or methods. This

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standard relates to those working with people who need sensory support services and all communication must be appropriate to the needs of people with sensory support needs. It is also important that workers recognise the need for specialist communication skills and the risk of miscommunication.

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# PerformanceCollate and review case notes and other relevant literature to inform a<br/>planned response for habilitation/ rehabilitation work, contact and<br/>involvement

You must be able to:

- P1 identify and access case notes, literature and other relevant informationP2 read and review information to identify:
  - P2.1 sources and the nature of referrals
  - P2.2 areas of consistency
  - P2.3 areas where there are differences in perspective
  - P2.4 areas where differences in evidence or professional judgements exist
  - P2.5 any legal requirements and duties and their implications for contact and involvement
- P3 identify and establish how to access sources that can fill:
  - P3.1 information gaps
  - P3.2 gaps in your own knowledge
- P4 where information does not exist, seek support to help decide on a strategy to deal with:
  - P4.1 information gaps
  - P4.2 gaps in your own knowledge
- P5 seek permission to approach sources that can assist with any information gaps
- P6 record information in accordance with policy with the agreement of individuals

# Liaise with others to access any additional information that can inform preparation for initial contact and involvement

You must be able to:

P7 identify, contact and liaise with individuals, families, carers, groups, communities and organisations that could provide information which is relevant to the initial and subsequent contact

- P8 work within your own, professional and ethical anti-discriminatory boundaries and practices when contacting individuals and organisations
- P9 follow legal and organisational procedures and practices for:
  - P9.1 seeking approval to contact people and organisations
  - P9.2 confidentiality and sharing of information when you contact and liaise with individuals and organisations that are providing
  - P9.3 recording contact information
- P10 make the necessary contact with the relevant organisations and individuals identified and record the outcome
- P11 prepare plans for initial contact and involvement with individuals
- P12 seek guidance when you are unsure how to plan for initial contact and involvement

		elate and evaluate all information to identify the best form of initial act and involvement
You must be able to:	P13	reflect on your own background, experiences and practice that may have an impact on your relationship with the individual
	P14	review the likely impact of your own, and your organisation's, role and responsibilities in the relationship with the individual
	P15	seek supervision and or appropriate support in areas that might cause conflict or hinder the relationship with the individual
	P16	·
	P17	analyse and evaluate all the information and its appropriateness
		develop a preparation strategy to:
		P18.1 enable effective communication and understanding
		P18.2 ensure that the first involvement will be in a setting and
		environment that is conducive to an effective assessment of the individual's needs
	P19	identify and prepare for any legal and organisational requirements and
		duties relating to the initial contact and visit
	Nego	otiate and agree the plan and review process with the individual
You must be able to:	P20	work with individuals and other key people to explain how the process of initial contact and involvement will be undertaken
	P21	work with individuals at a level and pace that they are comfortable with
	P22	
		P22.1 child to adult
		P22.2 into later adult life
		P22.3 within life stages
		P22.4 through loss and changing circumstances
	P23	support individuals to identify any potential difficulties and work with them and other key people to explore ways to overcome these
	P24	agree the information that will be recorded about each individual with them
	P25	agree the care plan for each individual with them
		explain the review process and the stages for within this process

Knowledge and understanding		e Values - Use and develop methods and systems to communicate, ord and report
You need to know and understand:	K1	legal and organisational requirements on equality, diversity, discrimination, rights, confidentiality and sharing of information when communicating, recording and reporting with individuals, key people and others
	К2	<ul> <li>knowledge and practice that underpin the holistic person-centred approach which enables you to work in ways that:</li> <li>K2.1 place the individual's preferences and best interests at the centre of everything you do</li> <li>K2.2 provide active support for the individuals</li> <li>K2.3 recognise the uniqueness of individuals and their circumstances</li> <li>K2.4 empower individuals to take responsibility (as far as they are able and within any restrictions placed upon them) and make and communicate their own decisions about their lives, actions and risks</li> </ul>
	КЗ	<ul> <li>methods and ways of communicating that:</li> <li>K3.1 support equality and diversity</li> <li>K3.2 support the rights of people to communicate in their preferred way, media and language</li> <li>K3.3 are ethical and adhere to any codes of practice relevant to your work</li> <li>K3.4 respect other people's ideas, values and principles</li> <li>K3.5 ensure people's dignity and rights when identifying and overcoming barriers to communication</li> </ul>
	K4 K5	how to manage ethical dilemmas and conflicts for individuals, those who use services and staff/colleagues, about communication, recording and reporting how to challenge information, documents, systems, structures, procedures and practices that are discriminatory, especially in relation to individuals' communication and information needs
		e Values - Contribute to the development and maintenance of healthy safe practices in the working environment
You need to know and understand:	K6 K7	<ul> <li>legal and organisational requirements on equality, diversity,</li> <li>discrimination, rights, confidentiality and sharing of information when</li> <li>contributing to the development and maintenance of healthy and safe</li> <li>practices in the working environment</li> <li>methods and ways of working that:</li> <li>K7.1 support equality and diversity when contributing to the</li> <li>development and maintenance of healthy and safe practices in</li> </ul>

		K7.2	are effective when dealing with, and challenging information, documents, systems, structures, procedures and practices that are discriminatory
		K7.3	are ethical and adhere to any codes of practice relevant to your work
		K7.4	respect other people's ideas, values and principles when contributing to the development and maintenance of healthy and safe practices in the working environment
			s - Take responsibility for the continuing professional nt of self and others
You need to know and understand:	K8	require and sh	date knowledge and practice of legal and organisational ements for equality, diversity, discrimination, rights, confidentiality naring of information and how to update and develop your own, and actice of other staff on these
	K9		access training and development to enable you to manage ethical nas and conflicts for individuals, those who use services and staff.
	Legis	slation	and Organisational Policy and Procedures
You need to know and understand:	K10	rehabi K10.1	gal, social, economic and ecological context of habilitation and litation practice in relation to: country, UK, EU legislation, statutory codes, standards, frameworks and guidance relevant to habilitation and rehabilitation practice and related fields including multi- disciplinary and multi-organisational practice, data protection and confidentiality of information
	K11	K10.3 policie autono	international law and social policy, including policy on social care, education, health, housing and welfare rights demographic and social trends s on diversity, discrimination and promoting independence and omy of children, young people, adults, families, groups and
		comm	unities and research on their effectiveness
	Theo	ory and	Good Practice - In relation to information
You need to know and understand:	K12	-	s, procedures and legal requirements for the security and entiality of information
	K13		access and use information and communications technology and other electronic systems that may help in the collection of ation
		lesson	standing of social care, social work, social services and structures is learned from both serious service and practice failures and from ssful programmes
	K16		ns for monitoring quality

	Theo	ory and Good Practice - In relation to communication
You need to know and understand:	K17	methods of consulting with different groups including children and young people and adults, their organisations or groups and actively listening to their feedback
	K18	methods for collecting, analysing and interpreting feedback to enable decisions to be made about your support
	K19	
	K20	-
	K21	be aware that individuals may prefer to express themselves using a different mode of communication compared with how they prefer to receive information and adapt how you communicate accordingly
	K22	be resourceful when overcoming barriers to communication and barriers restricting the independence of the people you support
	K23	<ul> <li>people, e.g.</li> <li>K23.1 all relevant methods and an understanding of the specialist communication skills needed</li> <li>K23.2 in relation to the specific needs of children and young people with sensory impairment and the different communication techniques available</li> <li>K23.3 know how to interpret signs from the individual as to their wishes, although they may not make these explicit</li> <li>K23.4 know how to encourage individuals and their significant others to describe their own needs and wishes</li> </ul>
		K23.5 recognising and facilitating each person's choice and use of the language and/ or form of communication
		maintaining the trust and confidence of individuals and key people by communicating in an open, accurate and understandable way
	K25	know how to encourage significant others and key people to support the individual
	K26	know how the nature of the relationship between the significant other(s) (or key people) and the individual may alter the extent to which you ask them to be involved, or the individual would wish for them to be involved
	Theo	ory and Good Practice - In relation to rehabilitation
You need to know and understand:	K27 K28 K29	the context for rehabilitation and professional practice historical perspectives of rehabilitation and social welfare contemporary issues and trends in rehabilitation

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	K30	psychological and sociological explanations of:
		K30.1 human growth and development and the factors that impact on it
		including full lifespan, i.e. child development to gerontology
		concept development
		K30.2 mental health and well-being
		K30.3 social interactions and relationships
		K30.4 discrimination and oppression
		K30.5 human behaviour
		K30.6 self-determination and motivation
		K30.7 the social, emotional and psychological impact of sight and/or
		hearing loss, on the individual and the family
	K31	medical aspects of sensory needs including medical advances and the
		associated functional implications
	K32	the demarcation between rehabilitation and optical practice
	K33	optics and the visual system
	K34	interpretation of reports of the clinical examination
		deafblindness
		physical and learning disabilities
		sensory motor functioning
		systems of orientation and mobility
		personal management for individuals who need sensory support services
		home management for individuals who need sensory support services
	K41	recreation, leisure, employment, education and housing for individuals who need sensory support services
	K42	functional low vision assessment and the skills required to carry this out
	K43	low vision devices and therapies
	K44	range and application of specialist equipment including assistive
		technology and know those which are a substitute for vision or to
		enhance hearing
	K45	theories about the impact of authority and power in the habilitation/
		rehabilitation role
	Theo	ory and Good Practice - In relation to partnerships and collaboration
	with	others
You need to know and	K46	methods of multi-disciplinary and partnership working
understand:	K47	theories of organisations, group behaviour and organisational change
	K48	organisational structures, policies and procedures for referral
	K49	knowledge of the range of local and appropriate national habilitation/
		rehabilitation and other resources and services
	K50	knowledge of an appropriate range of assistive technology options and
		how to integrate them
	K51	know how to compare the benefits of different habilitation/ rehabilitation
		options

K52 methods for recognising, assessing and managing risk

- K53 models and methods of dealing with loss and bereavement
- K54 theories of poverty, unemployment, health needs and other sources of discrimination and disadvantage and their impact on social exclusion
- K55 theories about the impact of discrimination and oppression and the methods of working with diversity
- K56 understanding of social care, social work, social services and structures
- K57 understanding of why people use habilitation/ rehabilitation, social care and health services
- K58 awareness of power issues in various work settings and the impact these have on service outcomes, e.g. domiciliary settings, sheltered housing settings, etc.

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### **Additional Information**

### Values

The values underpinning this standard have been derived from the key purpose statement\*. You must work within the principles and values of the relevant service standards, guidance and codes of practice/ conduct for health and social care in the four countries to achieve this standard.

(\*The key purpose of the sensory services workforce is to empower people who use these services to maximise their independence, opportunities, strengths and skills.)

### Glossary

This section provides explanations of the key words and concepts used quite common to find words or phrases used that you will be familiar with, but which, in the detail of the standards, may be used in a very particular way. Therefore, we would encourage you to read this section carefully before you begin working with the standard and to refer back to this section as required.

### Active support

Support that encourages the individual to maximise their independence and promotes lifestyle choices. In the case of children and young people this would also be relevant to the role of parent/ carer or the children themselves as a part of their own care planning process.

### Communication

This standard makes it explicit that you:

- 1 Must have the skills to be able to effectively communicate with the individual you are supporting, or in a case where specialist communicators are needed arrange for these to be put in place
- 2 Should use the individual's preferred means of communication both receptively and expressively in the most appropriate format and should listen actively
- 3 Need to be constantly aware that communicating will be complex and that the risk of misunderstanding is significant

### Complex needs and sensory impairment

Complex needs refers to cases of multiple disability. Multiple disability is "where one impairment has a knock on effect on one or more disabilities. This means that they are compounded. Multiple disability requires a radically different approach from that employed by workers whose training has traditionally focused on the medical aspects of each separate impairment. A knowledge of the possible consequences of the individual impairments is required, and the skill to know which technique to use, adapt or combine and when new approaches need to be adopted to cope with the multiplicity of problems and prejudices". (Source: CCETSW 1993)

### **Constructive feedback**

Feedback that is a two-way process that is communicated in the most appropriate way to the person giving and receiving it to inform their personal development and growth. The standard requires you to seek constructive feedback to inform your own development. In the case of those working with children and young people, there will be opportunities for feedback directly to or from children and young people and their representatives.

### Disadvantage, discrimination and social exclusion

This relates to race, gender, religion, sectarianism, language, age, class, disability (including sensory disability), poverty, culture, belief and sexual orientation. In practice you must take account of the relevant policies and procedures within your organisation or agency.

### Empowerment

Empowerment is a process of enabling individuals (children, young people and adults) who are at a disadvantage at both personal and organisational levels to gain more autonomy and control over their lives.

### **Functional Assessment**

A functional assessment measures how well an individual uses their senses to perform routine tasks in different places and with different materials throughout a day.

### Guidance

Guidance can be national, local or organisational.

**Individuals** In the standard "individual" refers to children, young people and adults who may require health and/or social care and children's, educational or training services. It also refers to advocates and interpreters or people who work with them to express their views, wishes or feelings and to speak on their behalf.

### Issues

Issues means, what impacts on the individual or is relevant to their experience. The use of the word "issue" does not imply a difficulty, but simply an aspect of the person's life that is the focus of the current work.

### Key people

Key people include: family, communicator guides, intervenors, Deafblind workers, friends, carers, social workers, support worker, role model, befriender, advocates, habilitation/ rehabilitation workers and others with whom the individual has a supportive relationship.

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### Literature

Literature can be paper-based or electronic books, journals and reports.

### Partnership working

The process of working collaboratively with other professionals or organisations, e.g. Optometrists, Eye Clinic Liaison Officers, Hospital Departments, those in education or training, Local Societies and Voluntary and Community Services (Third Sector Organisations) to raise the profile of sensory support issues and to offer appropriate support.

### **Professional judgements**

Includes decisions based on your professional experience and skills.

### **Rehabilitation/ habilitation**

Rehabilitation involves a wide range of support that aims to maximise independence, skills and confidence. Rehabilitation can involve helping people to regain abilities or functions lost due to illness or injuries.

Habilitation defines the coordinated use of medical, social, educational, and vocational measures to help people develop their functional ability. This contrasts with helping people to regain abilities lost due to illness or injuries rather than people who have been born with impairments.

### **Relevant national bodies**

Includes voluntary and independent organisations of national importance.

### **Response to poor practice**

Your response to poor practice may involve: offering constructive feedback, offering information and advice to enable the individual(s) concerned to access appropriate guidance and support and/ or reporting incidents of bad or dangerous practice to the appropriate authority.

### Rights

The rights that individuals have to:

- 1 Be respected
- 2 Be treated equally and not be discriminated against
- 3 Be treated as an individual
- 4 Be treated in a dignified way
- 5 Have privacy
- 6 Be protected from danger and harm
- 7 Be cared for in a way they choose
- 8 Have access to information about themselves
- 9 Communicate using their preferred methods of communication and language

In the case of children and young people, they have the right to be actively

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involved in the decisions that affect them.

### Risks

Risk is the inevitable consequence of people taking decisions about their lives. But it means different things to different people. There is no one definition. In social care, as in the rest of life, risk can be viewed negatively. Because of perceptions of risk which may or may not be real, a person might be prevented from doing things which most people take for granted. So perceived risk must be tested and assessed against the likely benefits of taking an active part in the community, learning new skills and gaining confidence. What needs to be considered is the consequence of an action and the likelihood of any harm from it. By taking account of the benefits in terms of independence, well-being and choice, it should be possible for a person to have a support plan which enables them to manage identified risks.

A decision about the perceived or actual risk needs to be taken in conjunction with the person using services themselves, as well as the professionals involved. Just as taking a risk is a personal choice, levels of risk are perceptions, and a judgement about an acceptable level of risk should be a joint decision.

### Services

Refers to services provided by your own organisation or other agencies.

### Social Model of disability

The Social Model of disability says that disability is caused **by the way society is organised**, rather than by a person's impairment or difference.

The Social Model of disability looks at ways of **removing barriers which restrict life choices** for people with impairments\* or differences.

When barriers are removed, disabled people can be independent and equal in society, with choice and control over their own lives.

Disabled people developed the Social Model of disability because the traditional medical model did not explain their personal experience of disability or help to develop more inclusive ways of living.

(\* Impairment is defined as the limitation of a person's physical, mental or sensory function on a long-term basis.) Extract from children in the picture <u>www.childreninthepicture.org.uk/au\_socialmodel</u>

### Sources of information

Will include a wide variety of current information. For example from:Professional organisations, e.g. professional bodies, trade associations

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and trade unions

- 2 Professional contacts, e.g. colleagues, mentor, supervisor, tutors/ lecturers and researchers
- 3 Written sources, e.g. professional journals, research reports and policy documents
- 4 Networks such as black and minority ethnic groups to consider cultural issues, e.g. fasting, festivals and priorities

### Supervision

Supervision involves a process of supportively reviewing a person's work decisions to develop their practice. It can be formal, informal, provided from within your organisation, provided from outside your organisation, (Note, it is recognised that supervision in relation to work with children and young people is different to the supervision of work with adults).

### Support

Refers to the support you provide. It includes: verbal explanation, written information, accompanying the individual or arranging for this to happen.

### Transitions

Transitions are daily and intermittent changes in a person's life that may affect their well-being, the way they behave and develop and their ability to continue to learn and cope with other changes.

There are two major types of transitions: the first includes transitions within daily life, for example with adults moving from and to home/the provision to a day centre, and for children going from and to home/the provision to school. They also involve changing activities and routines within the day where there are differing expectations and requirements from the child, young person or adult.

The second is intermittent and involves a significant change for the person. These transitions can be divided into three categories. First, those that are common to most people; for example, when people move from one form of accommodation and living environment to another. Second, those that are shared by a significant number of peers, such as families separating. Third, those that are personal and may not be shared or understood by others.

For children and young people, the first will include transferring between years in the same school, or college or transferring from one school to another. It could also include transitional experiences such as physical changes, e.g. the onset of puberty. The second may be their parents divorcing. The third being in foster or residential care, having a parent or carer who abuses drugs or alcohol, or being a young carer. (Source: Leadership and management NOS Ref: LMC B3)

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### Values and principles

Are those specified by: professional bodies, government, your employer, service users and their carers and by relevant national bodies.

# **External Links** The knowledge and understanding for this standard will relate to country The knowledge and understanding for this standard will relate to country specific regulatory requirements and codes of practice applicable to the scope of your work and those of colleagues. It will also relate to your role and the level of responsibility you have within your organisation to undertake activities to achieve a high quality service.

Competent practice is a combination of the application of skills and knowledge informed by values and ethics. This specification details the knowledge and understanding required to carry out competent practice for the performance described in this standard.

When using this specification it is important to read the knowledge requirements in relation to the expectations and requirements of your job role.

You need to show that you know, understand and can apply in practice according to your level of experience and seniority.

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