AO3: Design a person-centred health and wellbeing improvement plan.

This revision pack contains information on how to design a person-centred health and wellbeing improvement plan (AO3) and exam questions relating to this assessment objective.
Essential content in this revision pack

C: Person-centred health and wellbeing improvement plans

Health and wellbeing improvement plans

Learners will explore the features of health and wellbeing improvement plans. It links to, and consolidates, knowledge and understanding from Component 2, in particular support services and also care values in terms of the need for a person-centred approach.

- The importance of a person-centred approach that takes into account an individual’s needs, wishes and circumstances.

Information to be included in plan:

- recommended actions to improve health and wellbeing
- short-term (less than 6 months) and long-term targets
- appropriate sources of support (formal and/or informal).

Exam Questions related to this content.
The importance of a person-centred approach

We are all individuals. So when you help other people to improve their health and wellbeing, it is important to consider their particular needs, wishes and circumstances.

A history of the person-centred approach:
Until quite recently, care was done ‘to’ a person rather than ‘with’ the person. People receiving care were expected to fit in with the practices that already existed, regardless of their needs. Then, in the early 1960’s, the American Psychologist, Carl Rogers developed a person-centred approach. He believed that users were capable of, and should be trusted with, making decisions about their own care.

This approach continues to develop in the UK. The NHS plan (2000), a document about reform, suggested a need for personalisation and coordination. In 2009, a document called The NHS Constitution in England said that:
- ‘The NHS services must reflect the needs and preferences of patients, their families and carers’
- ‘Patients… will be involved and consulted on all decisions about their care and treatment’.

Today person-centred care is central to the policies of all four UK countries. But there is still work to be done. Services still need to be more flexible; they need to work with people and their families to find the best way to provide their care and support.

Understanding the approach:
A person-centred approach means that:
- The service user is at the centre of their care and support
- The service user is included in any planning and decision-making about their care and support
- Service providers work collaboratively with service user
- Service providers require empathy and a willingness to see thing from the service user’s perspective.

Collaboratively involves working well together.

Empathy is being able to understand and share the feelings and views of another person,

Benefits of a person-centred approach:
It is hoped that adopting a person-centred approach will improve a number of things, as the diagram shows:
In the UK, people are living longer, and the population is growing. This means there is a growing demand on healthy and social care services, but there are still limited resources. When a person is at the centre of their own care, they are more likely to stick correctly to their treatment plan - including what medication they take, which services they need to access and what surgery they might need. Not only will this improve their health and wellbeing, it may also reduce pressure on the services.

**Care Processes**

![Diagram showing the processes of care]

**The Health Foundation:**
The Health Foundation ([www.health.org.uk/](http://www.health.org.uk/)) is an independent charity. It works to improve the quality of healthcare in the U.K. It does this by, for example, carrying out research and analysis of policy and funding improvement programmes to put ideas into practice in the NHS. It has identified four principles of person-centred care, which are:
- treating people with dignity, compassion and respect
- offering care, support or treatment that is coordinated
- offering care, support or treatment that is personalised
- helping people to recognise and develop their own strengths and abilities, which can help them to live an independent and fulfilling life.
Recommended actions to improve health and wellbeing

A health and wellbeing improvement plan is exactly what the name suggest: a plan to help an individual improve some aspects of their health and wellbeing.

**Start a health and wellbeing improvement plan**

A good health and wellbeing improvement plan will start with a statement of the problem to be dealt with. There should be an overall goal or aim. This will be based on the assessment of a person’s present health status through:

- The use of physical measures of health
- The factors that affect this.

The plan should have certain feature, one of which is set of recommended actions designed to improve health and wellbeing.

**Recommended actions based on a person’s physiological indicators**

If you look at a person’s health indicators and compare them with what is considered normal, you can tell if that person needs to improve one or more aspects of their health and wellbeing. The aim for that person is to improve their health to match the ‘norms’. Now take a look at these health indicators.

- A 22-year old adult has a pulse rate during, or just after, exercise of 165 bpm. For their age, this should be between 119 bpm and 158 bpm. The bpm could indicate: a sedentary lifestyle, with little activity: an active lifestyle but overweight; or a sedentary lifestyle and overweight. Actions for this adult might reduce their pulse rate during or just after exercise to below 158 bpm; they could do this by becoming more active-for example, by going for a brisk walk every day, building up to running, or joining a gym/exercise class.
- A person with a reading of 160/93 mmHg has high blood pressure. This could be because they are overweight or stressed, they smoke and/or drink alcohol; they are inactive; or they do not get enough sleep. An assessment of their health would identify the key factors. Recommendations could then be made such as to stop smoking, to reduce alcohol consumption and go on a diet to lose weight.
- A 40-year-old women is 1.45 m tall. Her peak flow is 350 L/min. Her ‘norm’ should be 450 L/min. If she is not asthmatic, this could be because she smokes. A recommended action would be to stop smoking.
- A person with a BMI of 37 is classed a severely obese. A recommended action might be go on a diet and do more exercise to reduce their BMI until it falls below 24.9, which is in the healthy weight category.

**Recommended actions based on a person’s lifestyle indicators**

Some people may need to improve their lifestyle to achieve good health and wellbeing. Recommended actions will help to bring improvements in lifestyle. Think about these examples.

- A recommended action for a person who smokes would be to stop smoking. The person could get some nicotine replacement patches or gum, or swap to e-cigarettes to start with.
- A recommended action for a person who consumes too much too much alcohol would be to reduce their consumption to the safe level of 14 units a week, spread out over a few days. They could perhaps have a soft drink between alcoholic drinks when at a party.
- A recommended action for an inactive 40-year old adult would be weekly target; of at least 150 minutes(2.5 hours) of moderate activity(such as cycling or fast walking);or 75 minutes vigorous aerobic activity(such as running);or mix of moderate and vigorous aerobic activity each week. Strength exercise working all the major muscles should additionally be done 2 days or more each week.
Short- and long-term targets

Targets can motivate people. They can also be monitored. A mix of short- and long-term targets is a key feature of a good health and wellbeing improvement plan. Targets are challenges to help you reach your goal.

Creating targets
A plan needs both long- and short-term targets.
- A long-term target is generally 6 months or more. An example might be to lose 10kg in that space of time. But that can seem a long time away and you might be tempted to put off actually getting started.
- A short-term target can be anything less than 6 months. An example might be to lose 1kg in a week. This might seem achievable because it is not a major challenge.

Breaking down your final long-term goal into smaller steps seems less daunting and removes excuses for not getting started.

SMART targets
SMART is short for Specific, Measurable, Achievable, Realistic and Time-related. These five targets can be very useful in your health and wellbeing plans for others. If a target is not SMART it can give you an opportunity to make an excuse not to start the plan.

SMART targets and what they mean:

<table>
<thead>
<tr>
<th>‘SMART’ word</th>
<th>The target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specific</td>
<td>The target must be clearly stated. It should say exactly what you mean, such as to ‘lose 2kg in weight in a week’. The target should be clear and not open to any misunderstanding.</td>
</tr>
<tr>
<td>Measurable</td>
<td>A target of to ‘lose weight’ is too vague. A specific amount must be stated so you can prove you have met your target.</td>
</tr>
<tr>
<td>Achievable/attainable</td>
<td>If you are following a health and wellbeing improvement plan you must feel it is possible to achieve the target set. If you do not, you will probably give up before you have started. An achievable (reasonable) target is to ‘lose 1kg this week’; an unachievable target would be to ‘lose 20kg this week’.</td>
</tr>
<tr>
<td>Realistic</td>
<td>The target set must be realistic in that you must be able to physically do it. It is not realistic to expect a person who is older and not very fit to run for 30 minutes a day to help weight loss but it is realistic to ask the same of a fitter, younger person.</td>
</tr>
<tr>
<td>Time-related</td>
<td>The target must have a deadline, so that you know when you need to achieve the target by and progress can be assessed.</td>
</tr>
</tbody>
</table>
Monitoring targets
Targets need monitored. You can do this yourself by, for example, checking your weight at home each week if you are on a diet. Remember to keep a note of the date and your weight and add to this information each week. Alternatively, you could join a slimming club. Generally, someone else will weigh you each week and keep the details for you.

Reviewing targets
By setting SMART targets you can monitor progress regularly and amend your plan if necessary. For example, if you aim to lose 1kg a week, but in fat you manage to lose more, your longer-term targets need adjusting.

Alternatively, if you are not successful straight away for any reason, it may be necessary to review and change your longer-term targets to reflect this. Someone who is overweight may start and stop many diets before they manage to make the necessary lifestyle changes to help them reach and stay at their goal weight.

Review involves assessing or inspecting something with the intention of making change if necessary.
Sources of support
We all need help and support sometimes. A very important feature of health and wellbeing improvement plans is listing the forms of support that are available.

**Formal support**
Formal support is provided by health and social care professionals. These are people who are trained and paid to give support. Take a look at the table below to see what formal support can include.

What formal support includes:

<table>
<thead>
<tr>
<th>Practical support, such as a GP or community nurse monitoring your blood pressure, peak flow or weight.</th>
<th>Advice, such as strategies to help with reducing units of alcohol drunk.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional support, such as encouragement at a slimming club</td>
<td>Information in the form of health promotion materials, such as leaflets</td>
</tr>
</tbody>
</table>
| Aids, such as medicines and equipment:  
  - NHS prescriptions for 'stop smoking' medicines.  
  - Nicotine replacement therapy such as patches, gum, lozenges, micro tabs, inhalators and nasal sprays  
  - Free podcasts for exercising | |

Formal support is given by a trained health and social care professional who is paid to provide support.

**Informal support**
Informal support is often provided by family and friends. They are not paid to help, but they do anyway.

What informal support includes:

<table>
<thead>
<tr>
<th>Aids, such as lending you scales or exercise equipment</th>
<th>Advice, such as how to tackle a particular exercise or where to find some fat-free recipes</th>
</tr>
</thead>
</table>
| Emotional support, such as:  
  - Family encouragement if you have to go out for a run in the cold.  
  - A friend watching a film at home with you instead of going to a party with lots of food and alcohol.  
  - Your family going on a diet at the same time as you. | Practical support, such as cooking you non-fattening food or giving you a lift to an exercise class. |

Informal support often comes from friends and family who want to encourage you and are not paid.
Support in the voluntary sector
Voluntary organisations often run events which help you meet a target such as weight loss or improved activity levels, and some of them also raise money for the charity through events. For example, the charity cancer research UK runs sponsored ‘race for life’ events throughout the UK. These provide:
- A good opportunity for exercising
- A feel-good factor, because you are raising money for charity at the same time.

Another example is walking for health, a voluntary group that supports others to improve activity rates and wellbeing through walking. Its volunteers lead groups of walkers (some of whom may be very inactive), helping them along the way.

There are also many self-help groups. One example might be a weight loss group where people can discuss aspects of weight loss such as nutrition, emotions and exercise, and also take part in exercise sessions.

Exam questions

1: What is a person-centred approach to health and wellbeing?
2: What is a health improvement plan?
3: What is a recommended action for a person who has a fast pulse rate?
4: What is a recommended action for a person who has high blood pressure?
5: What is a recommended action for a person who has a high BMI?
6: What is a recommended action for a person who has a low peak flow?
7: What is a recommended action for a person who smokes?
8: What is a recommended action for a person who drinks too much alcohol?
9: What is a recommended action for a person who has an inactive lifestyle?
10: What is a short-term target?
11: What is a long-term target?
12: What is the difference between a short-term and long-term target?
13: What does SMART stand for in target setting/What is a SMART target?
14: Why are SMART targets easier to achieve?
15: Why should you monitor and review your SMART targets?
16: What is a short-term SMART target for a person who has a fast pulse?
17: What is a long-term SMART target for a person who has a fast pulse?
18: What is a short-term SMART target for a person who has high blood pressure?
19: What is a long-term SMART target for a person who has high blood pressure?
20: What is a short-term SMART target for a person who has a high BMI?
21: What is a long-term SMART target for a person who has a high BMI?
22: What is a short-term SMART target for a person who has a low peak flow?
23: What is a long-term SMART target for a person who has a low peak flow?
24: What is a short-term SMART target for a person who smokes?
25: What is a long-term SMART target for a person who smokes?
26: What is a short-term SMART target for a person who drinks too much alcohol?
27: What is a long-term SMART target for a person who drinks too much alcohol?
28: What is a short-term SMART target for a person who has an inactive lifestyle?
29: What is a long-term SMART target for a person who has an inactive lifestyle?
30: What are the different sources of support that can help a person trying to meet their target?
31: What is the importance of having support?
32: How can a source of support help a person achieve their target?