

• Introduction • The history of the method and its place in long-term care o An overview of the method in the context of social work with older people • The characteristics of the implementation of the method of a personal plan and implementation of services in the institutional care of older people in Slovenia Conclusion

Introduction

- The increase in the share of older population affects social work in a way as to increase the attention paid to the phenomenon associated with age, ageing and older people.
- At the turn of the twentieth century, the main 'social issue' in industrial countries had been the situation of the working class.
- At the turn of the twenty-first century, the working class issue ceased to be the main political and social topic. The focus shifted to demographic changes (Payne, 2005; Lymbery, 2005; McDonald, 2010)



Introduction

- In order to function properly, social work with older people needs to make use of generic knowledge from the area of social work as well as from other disciplines that develop knowledge and help us understand the later period of one's life.
- It is the very intensified inclusion of the older population in social work and our response to the needs of older people that may trigger the emergence of new methods and skills to act in social work

- The boundaries between theory and method in social work are fluid.
- Social work involves theories on how to act in a particular situation, and not substantial theories on the nature of a particular subject (in the case of social work a human and a society) to be "acted" upon and treated (Flaker, 2003; Mali 2012).

LTC and method of personal planning

- In the last decade, the notion of long-term care is gradually getting more and more relevant in social work with older people.
- Long-term care is a new form of state policy, an integrated system of health care, social protection and a new paradigm of care on the level of professional management (Flaker et al., 2008; Rodrigues et al., 2012; Leichsenring et al., 2013; Mali, 2013).

 Social work brings knowledge and methods to long-term care in order to achieve changes in the paradigm care that puts people and their needs into focus, but help is only effective when it responds to people's needs according to their expectations and necessities.

LTC and method of personal planning

• The key change involved in this is the need for professional experts to adapt to users and involve them in help in terms of active co-creators of solutions. Instead of the experts changing users, they need to learn to live with them and provide more support and not just take over their work (e.g. household chores) (Flaker et al. 2008.: 428).



• The classical methods of social work in this case is thus no longer useful as it is directed towards problematizing people as individuals and pushes them into a position where they are dependent on professionals who are perceived as experts who can fix all their problems.



The history of the method

- Globally, the method began to develop in the middle of the 1980s: in Canada, it was known as case management, in Great Britain, care management was also used alongside the mentioned term
- The method emerged due to deinstitutionalisation as a response to a need for coordinated activity of various services and management of community services in terms of case management, care planning and management, but above all, it stems from independent service brokerage.

- A review of the literature shows that the method was updated and changed according to the development of social work and its postmodern concepts.
- In Slovenia, the foundations of this method were established by Brandon (Brandon and Brandon, 1992; 1994).
- Its particularity resides in the fact that it has biographical features, as it is based on the users' narration of their life stories in which they define their goals, wishes and needs, all on their own.

The history of the method

- In Great Britain, the method was highly criticised in the system of care management, because it fell under management demands that put forward saving money instead of people's needs.
- The demands to establish long-term care, putting deinstitutionalisation into practice and introducing new profiles in social protection (especially the profile of care-coordinator in compliance with the Mental Health Act) also dictated changes of the method in Slovenia in the last decade.

- Personal planning and implementation of services (the name of the method in Sloveni)
- The previously used term "individual planning" was replaced by "personal planning", since the word "individuum" in Latin means "indivisible.
- A tendency to highlight the difference between individualisation and personalisation was also stressed (individualism is some sort of standardisation, while "personal", admits human uniqueness as such).

The charactersitcs of the method

- Its central component is still a human story, the story of its owners who define who they are and what they want
- The plan itself consists of three components: stories with goals, the goal implementation plan and a detailed statement of costs and evaluation.
- The central principle of the method is tailored personal care.
- Instead of placing organisations, institutions, services and professionals in the centre of care, the central position is taken by users (Needham, 2013)
- The roles assumed by professionals have changed, therefore professionals now aim to find sources of empowerment for users, they help and support them in identifying their personal potentials and reinforce their ability to gain more autonomy in their lives.

The method as a pre-condition of innovative practice in the institutional care of older people

- the method is still seen as innovative
- the characteristics of personalised care
- residents select a way of life in older people's home that suits them best
- the staff strive to make institutional life similar to the residents' previous life in their home environment
- o arrangement of spaces, furnishings, maintaining the same habits, flexibility of rules, and above all the methods of work, such as personal planning, which enables the staff to get to know the residents, their life goals and wishes

The method as a pre-condition of innovative practice in the institutional care of older people







The method as a pre-condition of innovative practice in the institutional care of older people

- To ensure, throughout the process of planning, that the residents have an impact on the design of help and support for them.
- The users maintain control over the whole process of drawing up the written record and planning of services for them (Brandon and Brandon, 1994
- If the residents have difficulties in communicating due to health issues (e.g. dementia), the planning needs to be adequately adapted.

The method as a pre-condition of innovative practice in the institutional care of older people

- Providing the users' impact in the process of planning in an institution is also relevant because it enables the development of new services that stem from residents' needs.
- Videmšek and Mali (2018) found that the responses to the residents' needs often remained centred around services that were already available at the institution.
- The objectives are often defined as the objectives of professional services (social worker, occupational therapist and physiotherapist, health care service) and not as the life goals of an individual.

Residents' empowerment and their active role in the helping process

- Empowerment enables older people in the process of planning to assume responsibility for their own lives, helps them gain self-respect and get to know the value of their own experiences.
- In planning (and implementation of the plan),
 the power is a means to realise the plan, therefore it is necessary for it to contain the ways of empowerment or sources of power, in order for us to put it into action.

Residents' empowerment and their active role in the helping process

 In the course of planning, the staff discovers residents' skills and competences, which enables the residents to easily and quickly adapt to a new living environment (i.e. good knitting skills to make a jumper for the baby of one of the staff employed)

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The obstacles in implementing the method in older people's homes

- The questionnaires, their pre-determined sections and questions that may only be completed by planners on the basis of social, healthcare and other documentation
- Most often, we find the following sections: general data (sex, date of birth, marital status, education, profession), data on the family (number of children, contacts with family members and other people), financial situation, data on life in an older people's home (type of room, care, activities)

The obstacles in implementing the method in older people's homes

- The written data does not tell us much about the person involved. It does not enable us to get to know the resident, their life story, their strong and weak aspects.
- The plans created in older people's homes are gaining the image of *bureaucratic forms*, determined by rules and are seen as a response to a formal demand for the use of the method of a personal plan.
- The rules also determine that older people's homes need to draw up an "individual plan of user-based treatment"

The obstacles in implementing the method in older people's homes

- The language used in written records is therefore also subject to it and as such, it is often very professional and not understood by users.
- The person who signs the plan is not always the resident; therefore this person does not own it.

The obstacles in implementing the method in older people's homes

- In institutions for older people, the problems of putting goals into practice arise when the plan consists of the actual life goals of residents that surpass the institutional service framework.
- The prevailing medical doctrine of providing care, for which the residents' needs and wishes were not relevant.

Conclusion

- In some environments, the method is still perceived as innovative or is labelled as such, because it produces innovative practice.
- For example, in older people's homes in Slovenia, the method is the central principle of innovations that change the features of traditional institutional care and in some cases also encourage the development of new services.
- In this context, the method has a great potential for changes in older people's care, because it may encourage the formation of new forms of community care in environments that have already developed community care for older people.

Conclusion

• What are your experiences with the method od personal planning and implementation of services?

