

CHCDIS011

Contribute to
ongoing skills
development
using a
strengths-based
approach



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strengths-based
approach**

Release 1

Learner Guide

Aspire Version 1.1

CHCDIS011 Contribute to ongoing skills development using a strengths-based approach, Release 1

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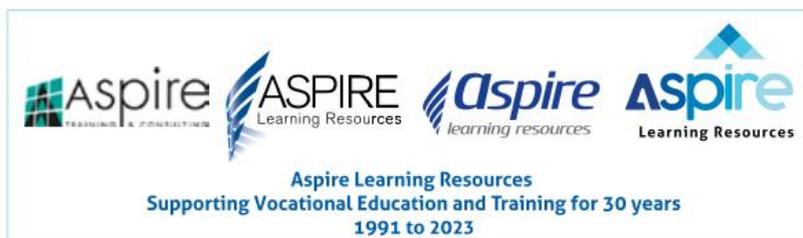
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Aspire acknowledges the homelands of all Aboriginal and Torres Strait Islander peoples and pays our respect to Country

Before you begin

This Learner Guide is based on the unit of competency *CHCDIS011 Contribute to ongoing skills development using a strengths-based approach*, Release 1.

Your trainer or training organisation must give you information about this unit of competency as part of your training program.

How to work through this Learner Guide

This Learner Guide contains a number of features that will assist you in your learning. Your trainer will advise which parts of the Learner Guide you need to read, and which Practice Tasks and Learning Checkpoints you need to complete.

Feature of the Learner Guide	How you can use each feature
Learning content	Read each topic in this Learner Guide. If you come across content that is confusing, make a note and discuss it with your trainer. Your trainer is in the best position to offer assistance. It is very important that you take on some of the responsibility for the learning you will undertake.
Examples	These highlight learning points and provide realistic examples of workplace situations.
Practice Tasks	Practice Tasks give you the opportunity to put your skills and knowledge into action. Your trainer will tell you which Practice Tasks to complete.
Callouts	Callouts reiterate key learning points to help students revise for their assessments.
Weblinks	Weblinks provide learners with additional content to contextualise their learning and develop their understanding.
Videos	Videos provide a visual reference of key concepts to aid comprehension and guide learner exploration. Each video is accessed by a QR code in the Learner Guide (or a button in the eBook version) for ease of access.
Glossary/margin definitions	Key terms are defined where they first appear to help consolidate understanding. A glossary of terms is provided at the end of the Learner Guide to assist learner revision of key concepts.
Summaries	Key learning points are provided at the end of each topic.
Learning Checkpoints	There are Learning Checkpoints at the end of each topic. Your trainer will tell you which activities to complete. These activities give you an opportunity to check your progress and apply the skills and knowledge you have learnt.
Case studies	Case studies are interspersed throughout the learning content to provide a workplace setting that contextualises key concepts.





Foundation skills

As you complete learning using this guide, you will be developing the foundation skills relevant for this unit. Foundation skills are the language, literacy and numeracy (LLN) skills and the employability skills required for participation in modern workplaces and contemporary life.

These skills are listed below:

Foundation skill area	Foundation skill description
Reading	<ul style="list-style-type: none"> • Understanding how documents are presented and being able to navigate through documents • Understanding industry and job-specific terminology • Interpreting key information in relevant documents • Understanding routine workplace checklists and documentation
Writing	<ul style="list-style-type: none"> • Planning, drafting and writing reports and documents • Communicating through written letters, email and online • Recording progress; reporting incidents
Oral communication	<ul style="list-style-type: none"> • Clarifying instructions • Providing information • Supporting others through encouragement, negotiation and conflict resolution • Using body language to model desired behaviour and responding to others' body language
Numeracy	<ul style="list-style-type: none"> • Calculating costs, weights, measurements of height and distance • Interpreting measurements
Learning	<ul style="list-style-type: none"> • Understanding your job role, organisational procedures and legal responsibilities • Managing your work and seeing how well you are going • Making goals for yourself at work • Seeking professional development opportunities for continuous improvement
Problem-solving	<ul style="list-style-type: none"> • Identifying problems • Working out how to fix a problem using problem-solving processes • Reviewing the outcome
Initiative and enterprise	<ul style="list-style-type: none"> • Recognising opportunities to develop and apply new ideas • Generating ideas by thinking of new ways to do something • Making suggestions to improve work
Teamwork	<ul style="list-style-type: none"> • Working well with other people by cooperating, collaborating, encouraging and building rapport
Planning and organising	<ul style="list-style-type: none"> • Planning your workload and commitments • Implementing tasks • Completing work on time • Knowing how to deal with hazards and risks



Foundation skill area	Foundation skill description
Self-management	<ul style="list-style-type: none"> Understanding and applying decision-making processes Reviewing your behaviour and the impact of your decisions
Technology	<ul style="list-style-type: none"> Efficiently using digitally based technologies and systems correctly and safely Accessing, organising and presenting information Using equipment correctly and safely

Note: Not every unit of competency will contain all foundation skills.

What do you already know?

Use the following table to identify what you may already know. This may assist you to work out what to focus on in your learning.

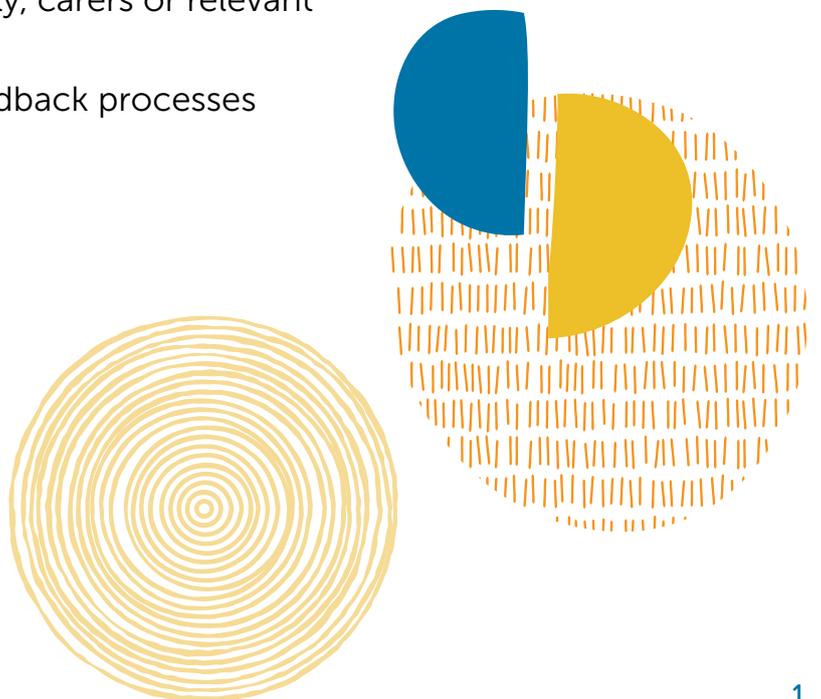
Topic	Key outcome	Rate your confidence in each section
Topic 1 Contribute to skills assessment	1A Observe the person’s abilities in a manner that demonstrates respect	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1B Support engagement of family, carers or relevant others in skill assessments	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1C Recording, reporting and providing feedback	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
Topic 2 Assist with skills development according to the individualised plan	2A Prepare for skill development	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2B Support and assist the person for skill development	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2C Provide constructive feedback and monitor levels of engagement	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
Topic 3 Support incidental learning opportunities to enhance skills development	3A Use positive approaches and strategies to promote enjoyment	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3B Adapt support in consultation with others	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident





Topic 1: Contribute to skills assessment

- 1A Observe the person's abilities in a manner that demonstrates respect
- 1B Support engagement of family, carers or relevant others in skill assessments
- 1C Recording, reporting and feedback processes



1A

Observe the person's abilities in a manner that demonstrates respect

To demonstrate respect is to understand and protect the rights of a person.

Identifying personal strengths and using these to develop new or existing skills can be a new and sometimes challenging concept to grasp. As a support worker your role is to build confidence and independence with clients and provide them with information about their rights and responsibilities. You must represent their interests using a person-centred approach that respects the rights and upholds the dignity of the person you are supporting.

Skills development is essential for improved quality of life and independence and occurs at a community education and individual level. Skill development improves quality of life by encouraging independence and positive community participation. Disability service providers can provide resources and programs that support **capacity building** in the people who participate.

Capacity building

Helping people to develop and strengthen skills that enable them to maintain independence.

Programs can be tailored to individual needs, such as literacy and numeracy education, vocational education, life skill development, employment, social support, and sporting and recreational activities.

Community education is a feature of skills development programs.

Here are some features of community education:

- provides opportunities for informal learning through practical and experiential activities
- is responsive to community and individual participant needs
- increases participation and engagement between community members
- can offer some education opportunities out in the community
- can offer formal education opportunities such as accredited vocational education and training
- provides informal learning experiences in specific learning groups.

Communication and collaboration

The people you support need to be actively involved in developing and implementing a plan for their skills development. A support worker must use effective communication so that the person is encouraged to share their ideas and points of view. When communicating with the person, use active listening skills and be patient and take the time to understand what they are saying.



Here are some communication skills that help build a relationship of respect:

- address the person directly and do not speak to others as if the person does not understand or as if they are not present
- make eye contact if culturally appropriate
- allow the person time to speak even if speech is difficult
- do not assume you know what they want or that you know better than they do regarding what is right for them
- avoid using unnecessary jargon or medical terminology
- ask for permission from the person before you take any notes
- involve them in problem-solving and decision-making
- listen to their concerns, not tell them about your problems.

Current practices and philosophies

Best practice within disability services requires workers to focus upon the individual with disability, their preferences, needs and goals, as well as a recognition of their strengths. Support workers work *with* people with disabilities rather than *for* people who have disabilities.

Practices used by staff in their work in disability support must focus on respect for the person and their right to be at the centre of making decisions that affect their life.

Here is a description of some important principles and practices that guide best practice service delivery in the disability sector:

<p>Person-centred practice</p>	<p>Person-centred practice involves getting to know individuals, seeing people as experts on their own lives and taking the time to learn about people's individual preferences, needs and goals.</p> <p>Person-centred practice means that each person has an individual service plan aligned with the goals and objectives that they have identified as important.</p> <p>Attention is on what the person can do, encouraging the person to make decisions, steer the direction of their care and support, and embrace collaboration with other supports such as family and caregivers.</p> <p>The person is placed at the centre of the design of services rather than being slotted into existing services and programs. This recognises that what might be a suitable program or grouping of services for one person may not meet another person's needs.</p> <p>Your job is to assist the person in reaching their goals, not to impose your ideas, values and assumptions onto the person. Encouraging the person to generate ideas and make their own choices is the key to successful person-centred planning for skill development. The input of people close to them must also be sought and valued.</p>
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Active support
A person-centred model of support that empowers people with a disability to participate fully in all aspects of their lives.

Positive behaviour support (PBS)
A person-centred approach using positive strategies to support a person to manage behaviours of concern.

<p>Strength-based practice</p>	<p>Strength-based practice involves focusing on what a person can do (rather than what they cannot do) and acknowledging their aspirations and goals.</p> <p>When using strength-based practice, workers focus on the strengths, knowledge and capacities of people, rather than their problems and limitations.</p> <p>When using strength-based practice, service providers work with clients as partners, rather than experts.</p>
<p>Active support</p>	<p>Active support involves supporting people to do things, participate, make decisions and choices, and spend time with others.</p> <p>Active support:</p> <ul style="list-style-type: none"> • happens every day, whenever there is an opportunity • occurs consistently so that people feel comfortable about being engaged • is meaningful to the person who is being supported; it focuses on their needs, preferences and goals. <p>American Association for Intellectual Disabilities (2021). www.aidd.org</p> <p>The benefits of active support include:</p> <ul style="list-style-type: none"> • to feel connected to the community • to have positive and lasting relationships with friends, family members and others • to have the opportunity to develop new skills and gain experience • to have choice and control in one’s own life • to be valued and treated as an individual.
<p>Positive behaviour support</p>	<p>Behaviours of concern are often challenging and confronting. Examples may include self-harm, aggression and violence, and inappropriate sexualised behaviours.</p> <p>As such, to be effective PBS requires the support worker, the person and their support network to work together to understand what causes the behaviours of concern and what can be done to manage these behaviours.</p> <p>Positive Behaviour Support professionals can include allied health professionals. They can be psychologists, social workers, mental health nurses and psychiatrists who have had training in managing behaviours of concern. They conduct assessments including observations of the behaviours to learn what is reinforcing behaviours and then plan the appropriate interventions.</p> <p>The family or carer work with the health specialist to develop a plan to remove or minimise behavioural triggers.</p> <p>Support workers can support plan implementation as well as:</p> <ul style="list-style-type: none"> • observe and monitor the person to evaluate the effectiveness of the plan • document observations • raise any concerns to the supervisor so these can be addressed. <p>Actions like managing triggers, using reward systems and teaching new behaviours are common strategies.</p>



<p>Advocacy</p>	<p>An important aspect of the relationship between the support worker and their client is that the worker will uphold their rights and help them to achieve their goals. A support worker can represent the client when a client's rights have been breached or they want assistance to promote their goals and needs to participate. Advocates can also be sourced from disability advocacy services.</p> <p>Some people with disability find it difficult to speak on their own behalf. This might be due to their disability or that they lack confidence speaking about their goals and needs.</p> <p>There are several ways the support worker can advocate for the person with disability, such as:</p> <ul style="list-style-type: none"> • support them to be independent and develop the confidence to speak for themselves (if appropriate) • provide opportunities for the person with disabilities to showcase their skills • support them to be independent • assist them in social situations to 'break the ice' and begin conversations and participate in activities • support the person to make a complaint or raise an issue • clarify the person's goals, needs and preferences.
<p>Social and emotional wellbeing (SEWB) framework</p>	<ul style="list-style-type: none"> • Many Aboriginal and Torres Strait Islander peoples use the term social and emotional wellbeing (SEWB) to describe the social, emotional, spiritual and cultural wellbeing of a person. The term recognises their connection to land, sea, culture, spirituality, family and community; these are often incredibly important to people, who believe that taking the time to recognise the significance of each might have a positive impact on their wellbeing. It also recognises that a person's SEWB is influenced by policies and past events. • Programs that use this framework often support culturally appropriate, community-led, primary mental health services for Aboriginal and Torres Strait Islander peoples.

Advocate
An individual who speaks up for a person to defend their rights.

For more information about a strengths-based approach, see this research report produced by a UK disability provider: aspirelr.link/iriss-working-with-individuals

Video: Provide active support

Watch the following video that shows how a support worker can provide active support to a range of people with intellectual disability: aspirelr.link/yt-active-support

Pay attention to the level of support that workers provide. What actions do they take to facilitate community participation for their clients?





Legal and ethical considerations for working in disability support

Here are some of the legal and ethical requirements that support workers must follow and apply in their work:

Human rights

Fundamental rights and freedoms that apply to all people, setting norms for standards of human behaviour.

Human rights

- These rights are about being treated fairly, treating others fairly, and having the ability to make genuine choices in our daily lives. They allow every person to contribute to society and feel included.
- Australia is a signatory to the United Nations Universal Declaration of Human Rights and ratified the UN Convention on the Rights of People with Disabilities in 2007.
- The Australian Government has also passed legislation to support and promote the rights of people with disabilities. This includes the *Disability Services Act 1986* (Cth) and the *Disability Discrimination Act 1992* (Cth).
- The United Nations Convention has developed and implemented a formal convention named the Conventions on Rights of Persons with Disabilities (UNCRPD). It recognises that disability is a natural part of human life. This differs from the social model, which states that society plays a vital role in access to community resources but fails to acknowledge that people with disabilities are experts in their own lives. The UNCRPD addresses this gap.
- The UNCRPD sets out that all people are equal and that all people have the same rights, such as the right to equality, safety, privacy, and the freedom from interference with home and family. In practice, this convention informs all of your workplace procedures and activities. It is also a good starting point for educating people with support needs about their rights.

Human rights framework for services

- Human rights principles are a key foundation for disability services' service delivery frameworks.
- Service delivery frameworks should reflect people's rights to dignity, privacy, security and safety. Policies that inform practice should ensure that all individuals are treated equally and fairly.
- Here are some of the rights of people with disabilities when engaged in support services and other forms of care. The right:
 - to request assistance from services
 - to be provided with information that explains the person's rights at the commencement of service – this must be explained and provided in writing
 - to direct their care plans and to have support customised to suit their individual needs; they also have to right to have other support people in the person's life recognised, such as family and other carers



<p>Human rights framework for services (cont.)</p>	<ul style="list-style-type: none"> - to have reasonable adjustments made for the person in order to do their job and access goods and services - to privacy - to be treated with dignity and respect - to complain.
<p>Discrimination</p>	<ul style="list-style-type: none"> • The Disability Discrimination Act protects people with a disability from direct and indirect discrimination, abuse and neglect. Complaint procedures and appeals processes are set out in state law and federal standards for disability service providers and other sector areas. • Most states have disability and equal opportunity laws that offer similar protections to the Disability Discrimination Act. For example, NDIS disability service providers must report all the complaints they have received and their actions in response to these complaints to regulatory bodies annually. • The person acting unfairly is motivated because of their personal beliefs and attitudes towards disability. Here are some examples: <ul style="list-style-type: none"> - being refused entry into a local café because the person has a seeing-eye dog - an employer failing to make adjustments to accommodate a person with a disability - being called names or making jokes. • Societal attitudes towards people with disabilities mean that they are not highly valued. This leads to stigma, marginalisation and discrimination and this can lead to social barriers. <p>Examples of unfair treatment of people with disabilities in workplaces and society include:</p> <ul style="list-style-type: none"> - a company excluding people with disabilities from gaining promotions - favouritism of some staff or groups of people over others - not having accessible workplaces or spaces. For example, lack of wheelchair accessible spaces; policies and procedures which make it difficult for people with disabilities to work.

Discrimination
The act of excluding or treating a person differently based solely on an attribute such as disability, age, gender, race or sexual orientation.



<p>Privacy, confidentiality and disclosure</p>	<ul style="list-style-type: none">• The <i>Privacy Act 1988</i> (Cth) states that services, agencies and other businesses must acknowledge that all people have the right to protect their private information. This legislation acknowledges that all people can control how others, including organisations, manage their personal information.• A breach of a person’s privacy is a very serious offence and can occur when information is given to unauthorised people or not stored securely. Organisations use policies and procedures directing you when gathering, storing, maintaining, and sharing information. In the event a breach occurs, you are at risk of disciplinary action and criminal charges. <p>Consent</p> <ul style="list-style-type: none">• The client must give their permission to have their information collected. Before giving consent, the client must be fully informed and understand the conditions they agree to and is most often done during the client intake process.• Consent also includes photographic images, such as uploading an image to the organisation’s social media page. This permission should be collected before any event where the client will be photographed. <p>Confidentiality</p> <ul style="list-style-type: none">• When working with other service workers, you must be mindful of the information you share. Conversations are best carried out in private, and any paperwork must be stored securely. Support teams use virtual meeting applications on smartphones, this lets the team members communicate with each other and write daily reports for the team to read, so you must keep your phone safe, and password protected.• If a client makes a disclosure to you which may sound like they are being abused or neglected, an appropriate response is to speak to your supervisor about it. You must keep disclosures private and confidential.
<p>Clients right to access information</p>	<ul style="list-style-type: none">• A person should be able to access the personal information that the organisation collects about them. Personal information must be collected and sometimes shared to ensure that the person receives the best possible care.• All clients must be given copies of their support plans and any agreements they sign at the commencement of service. However, clients are not always given access to assessment results and other medical documentation, so the person can be asked if they want access to this information.• Organisations will have policies and procedures instructing how a person can access personal details. For example, an organisation may use a template to print off and give to clients who request access to their records. A person who wants access to government-provided health-related services, must apply through the Freedom of Information agency and be explicit about the information they are trying to access.



<p>Access and equity principles</p>	<ul style="list-style-type: none"> • Organisations can make their services accessible and equitable by: <ul style="list-style-type: none"> - having physically accessible spaces for people with a wide range of physical disabilities - having staff who are trained with a range of communication tools and devices to assist people with communication - having policies and procedures which respect the dignity of a person with a disability - having organisational processes which are easy for people to access (too many bureaucratic systems can hinder the way people access and engage in services) - having resources for CALD clients to use within the service. For example, translators, cultural support workers, advocates, resources printed in a range of languages. • Access is about how well a client can engage and participate in the services and programs which your organisation offers. Equality is a principle which means people are equal and must be treated equally in your workplace. • You can promote access and equity in your support work by: <ul style="list-style-type: none"> - assisting and supporting clients to physically access your service safely - assisting with communication aids so that a person may communicate with you - following human rights frameworks and legislations which guide your role - treating every client the same - including translators, advocates and the person's family to have a say in the services a person receives.
<p>Dignity of risk</p>	<ul style="list-style-type: none"> • It ensures that duty of care or safety is not used as a reason to limit a person's freedom of personal choice. Therefore, a support worker's adherence to duty of care is with the concept of dignity of risk, which means that a person has the right to make their own choices and participate in activities that have some risk. However, it does not ignore your duty of care; you must evaluate the level of risk to the person. Be mindful that what may be high risk for one person may not be for another, so you need to take a case-by-case approach here.
<p>Duty of care</p>	<ul style="list-style-type: none"> • Duty of care is a legal obligation that underpins the responsibilities of all service workers. • Foreseeable harm is any predictable risk. Failure to do so results in negligence to the service user, and you could face discipline for your inaction.

Dignity of risk
 A person's right to dignity and choice, upheld in legislation and service standards, to ensure that duty of support or safety is not used as a reason to limit a person's freedom of personal choice.

Duty of care
 A moral or legal obligation to ensure the safety and wellbeing of other persons.

For more information about disability rights in Australia, see: aspirelr.link/human-rights-disability-rights



Video: Dignity of risk

Watch this video that discusses dignity of risk in terms of the rights of people with disabilities to travel: aspirelr.link/yt-dignity-of-risk



Social devaluation

Social devaluation

The tendency of people to look down on those who look, dress, speak or behave differently from them and are deemed of less value and significance to society.

Social devaluation is a term used to describe the process of having one’s social identity reduced in value or significance. This can affect people with physical or intellectual disability but also affects other people in the community such as older Australians, people from different races and genders.

The impact of social devaluation on people with disabilities can be intense and personal – often acting as a barrier to them realising their full potential. Devaluation comes in the form of stigma, isolation, marginalisation and discrimination. Each of these negatively affect a person’s quality of life. For example, mainstream society’s default attitude towards people with disability has in the past been based on attitudes, e.g. they are a burden on family or society, they are the object of pity. These attitudes reflect a low or negative value on people.

In many cases, society makes it harder for people with disabilities to access the same opportunities as others. Barriers disadvantage people with a disability and they are less likely to benefit from what the community offers because they do not have access to the necessary supports and resources for community participation.

These are explained in the following table.

Stigma	Stigma is when someone sees you in a negative way because of your disability. It is a mark of disgrace that sets a person apart from others. The effects from stigma include: <ul style="list-style-type: none"> • feelings of shame • reluctance to ask for support • few opportunities, e.g. employment • bullying and harassment • self-doubt.
Isolation	Isolation is different from loneliness as it is involuntary, i.e. it is not by a person’s choice. Examples include: <ul style="list-style-type: none"> • avoiding contact with others • no communication with family or friends • lack of access to opportunities and resources.



Marginalisation	<p>Marginalisation occurs when a person or group of people are treated as insignificant and placed in a position of less importance compared to other groups of people in society. The consequences of marginalisation are quite serious and can include:</p> <ul style="list-style-type: none">• higher rates of abuse• higher rates of poverty• living in insecure housing• having lower levels of education.
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Disability services and their staff can enhance the skills, knowledge and social image of people with disability to increase the value the community places on them. This can be done in many ways.

Image enhancement:

- treating people with disabilities like everyone else
- allowing people with disabilities to express themselves in any way they wish
- allowing people with disabilities to have their voice heard through every part of service delivery.

Competency enhancement:

- allowing people with disabilities to gain competency through learning the skills they want to learn
- having an attitude of high expectation for a person with a disability
- allowing a person to define what competency means to them.

For more information, visit this link: aspirelr.link/afdo-smod

Practice Task 1

Question 1

Which of the following can lead to social devaluation? Tick all that apply.

- Marginalisation
- Strength
- Discrimination
- Stigma
- Isolation



Question 2

Which of the following can be used to address devaluation? Tick all that apply.

- Using positive images of achievements to change attitudes about the value of people with disabilities and their contributions to society.
- Providing individuals with disabilities with equal access to resources that enable them to contribute to society as much as anyone else.
- Encouraging people with disabilities to live without any support in order to be seen as more independent.
- Providing learning opportunities for skill development to individuals with disabilities.
- Providing people with disabilities employment opportunities.

Question 3

Match each of the following attributes to the correct term.

Impairment is seen as a natural part of human diversity
The right to participate in cultural life on an equal basis with others
Never have disability questioned or doubted
Direct their care plans and to have support customised to suit their individual needs
The right to live independently in the community
Have the right to request assistance from services

Human rights framework of service
Human rights framework of service
Human rights framework of service
United Nations convention on the rights of persons with disabilities (UNCRPD)
United Nations convention on the rights of persons with disabilities (UNCRPD)
United Nations convention on the rights of persons with disabilities (UNCRPD)

**Question 4**

List three ways an organisation can promote the principles of access and equity.

Question 5

Which of the following statements are correct? Select yes or no for each one.

a. A person with a disability being refused access into a late-night venue is individual discrimination.	Yes / No
b. Inadequate provision of disability services is structural discrimination.	Yes / No
c. A transport officer denying a vision impaired person access to the public bus because they have a seeing-eye dog is structural discrimination.	Yes / No
d. An employer not willing to improve room design for an employee who has mobility issues is structural discrimination.	Yes / No
e. The housing department taking longer to find accommodation for people with disabilities is individual discrimination.	Yes / No



Question 6

Briefly outline some examples of how a worker can support a person through advocating on their behalf.

Question 7

Match each type of service delivery principle to its description.

The right not to have personal or sensitive information disclosed or made public	Person-centred practice
Managing access to private data or information (both verbal and written)	Strength-based approach
A person has the right to make their own choices and to take risks	Duty of care
The service meets the person’s needs by acknowledging a person’s choices and their right to make their own decisions	Privacy
All individuals are experts in their lives, have talents, and can progress in a way that enhances their quality of life	Social and emotional wellbeing (SEWB)
An obligation a worker has to act in a way that would not cause harm to others	Confidentiality
Used by many Aboriginal and Torres Strait Islander people to describe the social, spiritual, emotional and cultural wellbeing of a person	Dignity of risk



Question 8

Provide a brief description of each of the following types of person-centred support provided to people with disabilities.

- Active support
- Positive behavioural support
- Capacity building

Assessing skills and competencies

Skill development requires initial assessment, goal setting, implementation and evaluation of the person's progress.

Here are some details on each of the stages of the assessment process:

Initial assessment	To assess a person's eligibility for service and determine their level of support, assessments will be carried out by the relevant health expert to make these evaluations.
Goal setting	Individualised plans are developed using a combination of person-centred and strength-based approaches to support the person in identifying their needs, wants, strengths and goals. Activities and tasks are then selected and will align to the person's overall objective. This process is conducted in collaboration with the person, their support people, service workers, health professionals and other stakeholders.
Risk assessment	Before accessing the service or program, risk assessments are carried out to ensure that the person's safety and wellbeing are protected from any foreseeable harm. This is to ensure the facility provides the resources and support that can accommodate the person's needs.



<p>Strategy implementation</p>	<p>Once the individualised plan is implemented, support workers and other relevant people will document the person’s progress and highlight any challenges that may affect the person’s ability to reach their goals.</p> <p>Reporting processes and documents used will depend upon the funding and services provided by the organisation.</p>
<p>Progress reports</p>	<p>Information on progress towards achieving goals should come from all relevant sources, i.e. all the people working towards those goals. The person should be encouraged to self-assess and compare their perspective to support workers, carers and family. As achievements are made, plans will need to be reviewed and updated.</p>
<p>Review</p>	<p>Reviewing what has been achieved in the skills development process is important. What needs to be reviewed are:</p> <ul style="list-style-type: none"> • the skills development strategies which have been used • the progress of skills development and anything that is not working for the person. <p>The review process may reveal that a person’s needs, goals and preferences have changed. New strategies and goals and other changes need to be updated on their individual support plan.</p> <p>A review process may be in the form of a meeting with relevant staff, supervisors, allied health professionals and family.</p> <p>A review process can also be done independently and informally by a support worker to determine what strategies are working and are not working.</p>

Observe skills and competencies

Competency

The ability of a person to demonstrate that they can do something independently.

The purpose of any skill assessment is to develop a clear picture of a person’s capabilities and **competencies** to determine existing and new skills that they may want to work towards.

Support workers are on the frontline and can observe the person in their everyday environment. Observations made in this way are invaluable to the assessment process and workers can be asked to observe a person’s skills and competency. The organisation you work for will have processes and protocols for conducting a skills assessment. Support workers will need to ensure the person is provided with information about an assessment of their skills and how the information will be gathered and used.

To assess the person, a collection of evidence on their ability is gathered through observation. This needs to be done in a way that is accurate, fair, safe and respectful of the person’s rights and dignity. The protocols guide how evidence is observed, checked, recorded, stored and utilised.

Consider the following assessment protocols for a skills development assessment.



Validity	<p>Validity refers to the accuracy of an assessment, meaning that the assessment will measure the skill being assessed and may include a standard structure or checklist to avoid missed or forgotten steps.</p> <p>Assessments for practical tasks require a collection of evidence relative to the task assessed. For example, if you are assessing someone's ability to bake a cake, you would observe their ability to measure ingredients, set the oven at the correct temperature, set the timer, and then check to see how the final product looks and tastes.</p>
Fairness and flexibility	<p>Flexibility and fairness allow for consideration of the person needs. Therefore, adjustments made must support the person's individual needs during the assessment process.</p> <p>Examples of adjustments you may need to make for a person include: writing responses for them, giving them more time to read, altering materials to support vision impairments, frequent rest breaks, substituting long drawn out questions for tick and flick or multiple-choice responses.</p>
Respect	<p>Any assessment has the potential to be confronting and cause performance anxiety. Recognition of this will often mean a process that incorporates steps to ensure that confidentiality and privacy are protected and that the person is fully informed from the beginning and throughout.</p> <p>Guidelines detailing the storage and safeguarding of personal information will often be part of an assessment protocol or process.</p>

Example

Review competence

Rick is a support worker who assists Marita. She lives in supported accommodation and attends a day centre. She tells everyone at the house she wants to go out to buy her lunch. Rick is unsure whether Marita has the skills to buy her lunch, so he asks Marita to talk him through the process to be sure she understands what is involved. He asks Marita to break it down into steps and tell him what she will do. He then asks her to show him what money she has and tell him what it is worth. Marita outlines each step and Rick agrees to find a staff member who can assist her with going to buy her lunch. Support worker Jayden supports Marita to go and buy her lunch.



Practice Task 2

Question 1

Number each step from 1 to 5 in the order a skills assessment process would follow.

	Strategy implementation
	Progress reports
	Review
	Initial assessment
	Goal setting
	Risk assessment

Question 2

Identify four principles of assessment that will help ensure an assessment is respectful of the person's rights and dignity.

1B

Support engagement of family, carers or relevant others in skill assessments

To be a support worker, you must recognise your responsibilities and limitations of your job role.

Your role in the assessment process may be to observe changes in the skill levels or status of the person you are supporting and to report progression. When you need to review a client's progress, or in an initial assessment, ensure the person is included in the discussion.

Carers and others who know the person well can also provide valuable information on the person's strengths and challenges from their first-hand observations. However, carers and support workers need to be careful not to provide more support than is necessary.

Depending on the person's disability and needs, **self-assessment** may be used or be part of the assessment process.

Supervisors are responsible for leading, giving guidance and monitoring reports, and following up with allied health professionals.

Health professionals provide an essential role in skills development assessment. They can give input into the strategies that would work best for the person and answer any questions.

Below is a table of allied health professionals that may be involved in a skills assessment.

Type of Professional	Role Description
Psychologist/ psychiatrist	A psychiatrist or psychologist has information regarding the person's mental health and ability to participate in the planning session and plan implementation.
Social worker	Social workers perform psychosocial assessments. This assessment assesses every domain of a person's life and identifies strengths and weaknesses. This assessment also identifies areas where the person needs additional support and assistance.
Occupational therapist	Occupational therapists conduct various cognitive and physical assessments and also deliver various therapeutic interventions. They also assess physical skills capacities and prescribe home modifications such as handrails, ramps and types of wheelchairs. They also prescribe different assistive technologies such as keyboards, speech programs, switches and communication devices.

Self-assessment
Allowing the person with a disability to report their strengths and weaknesses directly to a supervisor, allied health professional or you as their support worker.



Type of Professional	Role Description
Behavioural analyst – also known as an ABA therapist. (ABA stands for Applied Behavioural Analysis).	Performs functional behavioural assessments. This assessment measures how negative behaviours affect the person and the environment around them. A plan is used with behavioural psychology techniques to encourage positive behaviours and reduce negative behaviours.
GP/Doctor	A doctor may have a long-term relationship with the person. They will have access to medical records with information on health issues and chronic illnesses and will know about all medical treatments the person is receiving.
Case manager	The case manager will work with the client supporting the coordination of care and assisting in solving complex problems. The case manager must also document interactions when meeting with clients, their progress and difficulties.
Speech therapist	Conducts a range of speech and cognitive assessments designed to see whether there are issues with parts of the brain that impact speech. Provides specific treatment to people who have experienced speech delays, speech impediments, strokes or acquired brain injuries (ABIs).

Example

Health professionals in the assessment process

Julie has a mild intellectual disability and lives on her own in public housing. She has been having some health issues and her doctor has suggested she adopts healthier eating habits to help with her health. Her doctor refers her to a dietician to help her and Julie decides that she would like to make healthy home cooked meals with the help of the dietician. She discusses her new goal with her support worker Narelle. Narelle asks Julie if she would like her to attend the appointment with the dietician for support. Julie says she would. They both attend the appointment and get some tips on healthy cooking for the new eating plan. Narelle supports Julie to make some new goals about cooking and healthy eating in a skills development process.



The concept of interdependence

People with disabilities will have **interdependent** relationships with their close family, friends and romantic partners. Interdependent relationships are those in which there is mutual support given between each person. Mutual support could mean financial support, friendship and emotional support.

Your clients do not have an interdependent relationship with you as a support worker, because it is a professional relationship. As a support worker, you should develop a healthy professional relationship with ethical boundaries with the people you support. If you work professionally and ethically, it puts you in the best place to help the person with a disability. You can however encourage and promote healthy relationships and communication with a client's family, friends and romantic partners.

Your role is not to do everything for your client but to support and encourage them in the tasks they can attempt to do; you need to be supporting, which is simply assisting. If a support worker is too protective of a person, this is referred to as caretaking. They may over-assist and do for another what the person could be doing for themselves.

Interdependence

Dependence of two (or more) people in a mutually beneficial way (financially or emotionally).

Independence

Developing **independence** is a necessary part of human development and essential to maintaining the quality of life.

Using a person-centred approach involves the person being the expert in what they can achieve independently and the support they need. Those around them should balance their point of view to correct for over or underestimating their current ability.

Independence

Characterised by choosing and controlling one's own life and surroundings.

The following table outlines strategies that encourage a relationship of independence and interdependence.

Family	<ul style="list-style-type: none"> • To provide emotional support and love and care for the person • To assist in daily living tasks for the person and give encouragement • To support the person in decision making, but not to make decisions for them • Be aware of the disability and any health conditions to assist with decision making • To decide when they are beyond their capacity and to accept assistance from professionals
Carer/ support worker	<ul style="list-style-type: none"> • Maintain ethical boundaries, never accept gifts or rewards if it will influence how you treat someone • Build respectful and positive working relationships with clients and their families • Encourage good decision making • Avoid seeing the role as a position of power and control and not take control • Never insist on the client doing things your way



<p>Supervisor</p>	<ul style="list-style-type: none"> • To supervise the teams they lead, giving guidance and monitoring • To ensure their teams are adequately trained and have a strong understanding of ethical practices • To build respectful and positive working relationships with clients and their families • To provide support, so workers feel supported in their roles • To oversee any financial responsibilities ethically allocated to them, this includes a reporting requirement • To assist in the development of individualised plans working collaboratively with others • To ensure support teams are documenting the assistance given to clients accurately
<p>Allied health professional</p>	<ul style="list-style-type: none"> • Must maintain ethical boundaries • To educate and oversee any medical treatments that support workers need to assist with • To conduct medical treatments responsibly • To avoid becoming too involved with the client on a personal level; the client can be referred to another medical expert if the situation is unmanageable • To avoid treating family members as objectivity may be clouded • When prescribing medications that are addictive, practitioners must follow strict guidelines, which will include registering the patient with a pain clinic and notifying government agencies when patients are using a particular substance as part of their medical treatment, and taking care not to overprescribe • To refer to other health experts when the condition is beyond the scope of their qualifications

For more information, visit this link: aspirelr.link/acwa-ethics-standards

Concept of vulnerability

Vulnerable people can be seen to have a weakness that can put them at risk of physical and psychological harm.

The term *vulnerability* has negative connotations in a society that values strength, power and decisiveness. Many aspects of vulnerability, such as letting your guard down, feeling uncertain, or showing frailty, are only a problem when someone in a position of relative power takes advantage of this. People with disabilities are often more vulnerable than others in society and at greater risk of exploitation. Vulnerability can also increase the chance of financial abuse, physical abuse, sexual abuse and neglect.

Not all people with a disability experience or feel vulnerability in the same way.

Skill development is about building on strengths and being less vulnerable. You can assist the person with a disability who may be feeling vulnerable by spending time with them and their families and building trusting relationships, so that they feel more comfortable with you and the person doing the assessment.



Concept of power

The more **power** a person has to control the decisions and choices that affect them, the more self-empowered they become. In this way the empowerment of people with a disability is the way of overcoming devaluation. The support worker, together with the significant people in a person's life can support them to master new skills and take on new responsibilities.

The National Disability Insurance Scheme (NDIS) provides a range of funding for people with disability, depending on strict eligibility criteria. People with disabilities can choose from a wide range of supports which suit their goals and lifestyle.

Power

A person's capacity to exert control and influence in a relationship.

Read more about the aims of the NDIS here: aspirelr.link/ndis-overview

Example

Power, control and interdependent relationships

People with disabilities often rely on others to help them live as independently as they can. For example, a person who uses a wheelchair may require a support worker to assist them in getting ready for the day. The support worker relies on that work to feed their family. The supervisor of the support worker also depends on the job to feed their family. However, the supervisor exercises power and control over the support worker. The support worker exercises power and control over the person in the wheelchair. However, the person in the wheelchair relies on physical support and a healthy amount of emotional support from the support worker and supervisor to live independently.



Practice Task 3

Question 1

Match each of the following terms to its correct description.

Power
Vulnerability
Interdependence
Independence

A relationship with another that is mutually supportive
Having the freedom to make choices and decisions
Having a weakness that can be exploited
A person's capacity to exert control and influence in a relationship

Question 2

List four people who may be involved in supporting a person with a skill assessment and provide an example of their role in the process.

1C

Recording, reporting and providing feedback

A support worker's job role includes administrative duties such as record-keeping and reporting client information.

Collecting information and maintaining client records is an essential responsibility for all support workers. Documentation is important for an organisation to keep a record of the client's progression. In addition, records are used as evidence and assist in forming judgements about a person's competency. Documents used for recording evidence of the person's ability and competence are legal records and need to be kept up to date and current. Older or out of date information is not reliable as situations can change and the needs of the person will vary over time. Reporting of information needs to be completed in a specified timeframe. This ensures that the information is likely to be the most recent and that information is not forgotten and can be relied upon to be accurate. For example, a decision to update a client's file several days after an observation can mean that important information may get forgotten and not be recorded as an accurate account of what was observed.

All record keeping must meet legal requirements. Organisations have a range of procedures and policy requirements and industry standards for the use of documentation as discussed in an earlier section on privacy and disclosure.

Information must also be stored in a secure way so that the person's confidentiality is maintained.

Storage of information

- All private information must be stored securely.
- Lockable filing cabinets in a room that is secure should be used to store client files.
- For electronic information, the organisation will have a secured computer server.
- All devices must be password protected, and any documents downloaded must be saved in the appropriate location and deleted from the downloads file daily.



Keep records accurate and objective

Information must be recorded accurately and objectively.

The primary record used to monitor and record competency is the individualised support plan. Other documents used can be case notes, logbook or progress chart or incident report.

Here are some guidelines for collecting and recording evidence about a person's level of skill:

- use dates and times to provide an accurate record of change over time
- observation documents must be factual and objective; do not use personal opinions or describe your feelings in observations
- avoid using complex terminology – use plain language
- check spelling is correct to avoid any misunderstandings.

Example Objective records

In this example, you can see that the progress notes don't include emotive language or opinions. Instead, the notes record information accurately and clearly.

Progress Notes
Client's Name Simon Jones
Carer's Name Lillian McBride
Date: 10/08/2021 Time: 11.15 am
Description of support received Mr Jones is receiving assistance with personal care and grooming.
Today Mr Jones tried to wash his underarms and groin area without physical support. Prompts were provided when it was observed that he was unable to recall the process. Today he was reminded to rinse his shower sponge. No physical side effects are observed with the change of medication. Mr Jones has requested to help with meal preparation. He would like to learn how to prepare his lunch.



Example

Record observations

Leslie has rheumatoid arthritis in her hands, knees and feet. She has always been an independent person and a passionate cook. However, she does not want to become reliant on delivered meals, so her support worker, Jane, has suggested she would benefit from assessing her skills and needs in her kitchen. Leslie has been planning to renovate the kitchen for years and finally has the money she needs to do it. She wants to make some changes that will make cooking easier. Jane organises for an occupational therapist, Fiona, to come and assist with the assessment.

Shortly after the assessment, Fiona writes up her observations and checks her spelling before using her work email to send her report to her supervisor. She saves the report in the client's file that is secured and password protected for staff use only.

Provide feedback to your supervisor

When you observe a change in skill development, provide this information to your supervisor.

The information you provide your supervisor will allow changes in the person's status to be managed and strategies to be developed to accommodate changes in the person's skills. The feedback you provide can lead to a plan review and the person being able to set new goals.

Feedback can be reported verbally or in writing. You must follow your organisational guidelines on reporting concerns or changes in the person's condition. While feedback may initially be given verbally, it is always best practice to document it with a permanent, dated record.

You may make observations about the following changes in skills:

- the skill level of an activity is not at the appropriate level for the person
- the person may be having difficulty with a physical or cognitive component of a task
- the appropriate resources or equipment are not provided or need to be changed or modified
- there is an improvement or decline in the person's ability level or a change in health status
- the person is motivated or becomes tired while completing a task



- the person explains that they are not interested in the task or activity
- certain tasks or situations require further assistance from health professionals.

Here are some specific examples of information that needs to be reported to a supervisor:

Communication	<ul style="list-style-type: none"> • Deterioration: Loss of ability to express themselves • Improvement: Improved ability to communicate using signing
Personal hygiene	<ul style="list-style-type: none"> • Deterioration: Increased body odour • Improvement: Fully showered and bathed on your arrival
Meal preparation	<ul style="list-style-type: none"> • Deterioration: Unable to cut up food for themselves • Improvement: A fridge well-stocked with food and cooked meals
Transport	<ul style="list-style-type: none"> • Deterioration: Loss of driver’s licence • Improvement: Acquired a motorised scooter
Money handling	<ul style="list-style-type: none"> • Deterioration: Confusion about bills and money • Improvement: Paying bills on time
Dressing	<ul style="list-style-type: none"> • Deterioration: No longer getting dressed for the day • Improvement: Dressed in clean, fresh clothing
Grooming	<ul style="list-style-type: none"> • Deterioration: Hair unbrushed and messy • Improvement: Wearing makeup and perfume
Eating	<ul style="list-style-type: none"> • Deterioration: Uninterested in food and can no longer swallow • Improvement: Improved appetite and is regaining weight lost during illness
Working	<ul style="list-style-type: none"> • Deterioration: Absent from work • Improvement: Actively seeking part-time employment
Household tasks	<ul style="list-style-type: none"> • Deterioration: No longer able to use the vacuum cleaner • Improvement: Offered to help with dusting and housework
Physical conditions & disabilities	<ul style="list-style-type: none"> • Deterioration: Condition/disability is impacting skill development • Improvement: We have found a different strategy to use to improve skill development
Mental health	<ul style="list-style-type: none"> • Deterioration: Mood has been impacted by recent conflict in family • Improvement: Mood has improved, leading to more engagement in skill development



Example

Monitor a change in a person's status

Deborah has cerebral palsy and uses a walker to assist with mobility. She sees a psychologist to help her manage depression. She attends a disability day-service two days a week, participating in leisure activities with a small group of clients and her support worker, Donna. Donna has noticed since Deborah had a break-up with her partner that she is less keen to participate in the activities with the group.

Donna is becoming increasingly concerned that Deborah's depression is getting worse. Donna speaks to her supervisor about her concerns and the supervisor advises her to document what has happened on Deborah's file. The supervisor will speak to Deborah and arrange for additional support and make contact with the psychologist as required.

Practice Task 4

Question 1

Identify at least two examples of situations where a support worker would need to provide feedback to their supervisor on a client's skills development or assessment.



Question 2

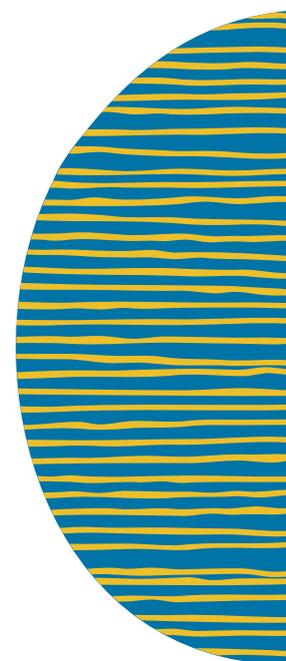
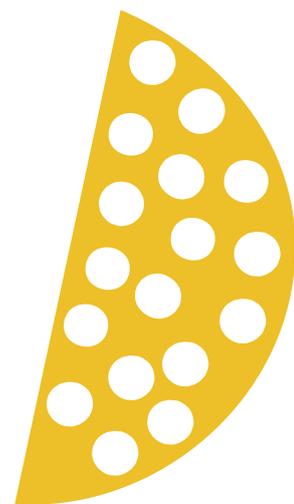
Which of the following statements are correct? Select yes or no for each one.

a. Procedures for the storage of personal information means it is secure and can't be accessed by unauthorised people.	Yes / No
b. Updating records soon after an event means that information is not forgotten and is more likely to be an accurate record.	Yes / No
c. Objective language needs to be used carefully as it can hurt the client's feelings.	Yes / No
d. Records are important legal documents that can be used as evidence.	Yes / No
e. The use of clear language means only doctors and other health professionals can understand.	Yes / No



Summary

- Social devaluation can be tackled by supporting people with disabilities to fulfil valued societal roles and by challenging community attitudes to disability.
- A person-centred approach to skills assessment should be collaborative, respectful and directed by the person and their goals.
- Support workers use principles and philosophies as a part of their work by emphasising the person's rights to equal access, respect, dignity, privacy and confidentiality etc.
- International conventions underpin the rights of people with a disability, which have also been set out in legislation and standards that prohibit direct and indirect discrimination.
- A skills assessment is based on the gathering of objective, observable evidence or performance.
- Skills assessments benefit from incorporating a range of views and perspectives, including experts, carers and family who may have valuable knowledge and experience to share as part of any assessment process.
- Assessment processes include steps to ensure validity, fairness, safety and respect throughout the assessment.
- A support worker may be called upon to assist with a formal review of the person's skills and competencies.
- Documentation of any assessment or review must follow organisational policy and be timely, accurate and objective.





Learning Checkpoint 1

Contribute to skills assessment

Part A

1. Which of the following statements are correct? Select yes or no for each one.

a. According to the UNCRPD, disability is part of human diversity.	Yes / No
b. The UNCRPD states that individuals have a right to direct their care/support plans.	Yes / No
c. It is acceptable to question or doubt an individual's disability if the support worker has doubts to the person's honesty.	Yes / No
d. The UNCRPD believes that individuals with disabilities should be allowed to live independently in their communities.	Yes / No
e. Human rights are about being treated fairly, treating others fairly and having the ability to make genuine choices in our daily lives. They allow every person to contribute to society and feel included.	Yes / No
f. Programs that use social and emotional wellbeing frameworks support the wellbeing of refugees in Australia.	Yes / No

2. Briefly explain how social devaluation can affect a disabled person's quality of life.



- 3.** Provide an example of how competency and image enhancement can be used to address social devaluation.

- 4.** Briefly outline the following support principles used in disability support:

- Active support
- Positive behaviour support

- 5.** Which of the following practices support community education and capacity building? Tick all that apply.

- Programs are tailored to individual needs and preferences
- Focusing on literacy and numeracy skills
- Increasing participation and engagement between community members
- Providing informal learning opportunities through practical activities and experiences
- Focusing on fixed programs and schedules



6. Briefly describe the difference between individual and structural discrimination.

7. Which of the following statements are correct? Select yes or no for each one.

a. A support worker needs to observe and report on any changes in the skill level or status of the person with a disability.	Yes / No
b. Carers and family members can help document the assistance given to the person with a disability.	Yes / No
c. Supervisors work with others to develop individualised plans that meet the needs of each client.	Yes / No
d. Health professionals can identify the most appropriate skills development strategies for the person and answer any questions the person may have.	Yes / No

8. Identify at least three things to consider when advocating on behalf of a person with disability.



9. Provide at least two examples of how the principles of access and equity can be used in disability support work.

10. Which of the following statements are correct? Select yes or no for each one.

a. To be empowered means to be in control of the decisions in your life.	Yes / No
b. Vulnerability is a negative personal trait.	Yes / No
c. People with disabilities rely on someone else for emotional, physical or financial support.	Yes / No
d. Interdependency means understanding that we can interact with others in a mutually beneficial way.	Yes / No
e. Independence is characterised by choosing and controlling one's own life and surroundings.	Yes / No

11. Which of the following are responsibilities a support worker has for completing and maintaining documentation for their organisation? Tick all that apply.

- Observations should be documented as soon as possible after a skills assessment takes place.
- All clients must be given copies of their support plans and any agreements they sign at the commencement of service.
- Changes in a person's status should be video recorded when reporting to a supervisor.
- Personal information must be stored securely to protect the privacy of the person.
- Subjective reporting is used to explain a support worker's emotions and feelings.
- Accuracy in report writing is vital for legal and ethical reasons.



12. Match each assessment protocol term to its description.

Safety	The assessment is accurate and measures what it is designed to measure
Respect	The assessment makes allowances for the person's individual needs
Validity	Duty of care is considered to ensure the person is not at risk of harm when participating in any assessment process
Fairness and flexibility	Ensuring the person understands the assessment process and all steps taken to protect their information

13. Briefly outline how a person-centred approach benefits a client.

14. Provide an example that shows how a support worker can respect a person's dignity of risk at the same time as applying duty of care responsibilities.



- 15.** Briefly outline the legal and ethical responsibilities of an organisation for maintaining a person's privacy, confidentiality and disclosure.

Part B

Read the case study, then answer the questions that follow.

Case study

Alison is a new client who has been allocated to you. She has a vision impairment and her older sister Melinda is her carer. Alison wants casual employment but has no work experience. She appears to be quite shy and refers to her sister when answering questions.

- 1.** Identify how Alison's sister can be included in a skills assessment?



- 2.** Alison tells you she would like to work in an office in customer service. She has been doing some training to help her improve her keyboard and phone skills and you are going to observe her at the training centre to check on her progress.

List three strategies you can use to ensure that Alison is treated respectfully.

- 3.** Alison has been offered work experience at a small business. At Alison’s trial visit, it is apparent that the office design is not suitable for Alison and she will need some augmentative technology to communicate with customers. Suggest the legal and ethical responsibilities the employer has to provide a safe and welcoming workplace for Alison.



4. Today, you will observe Alison in the workplace using a telephone. This will be done three times. These are your observations:

- answers the phone stating the name of the business, her name and a warm welcome
- knows the layout of the number pad
- forwards the call to the correct person
- uses a text to speech application to locate extension numbers correctly.

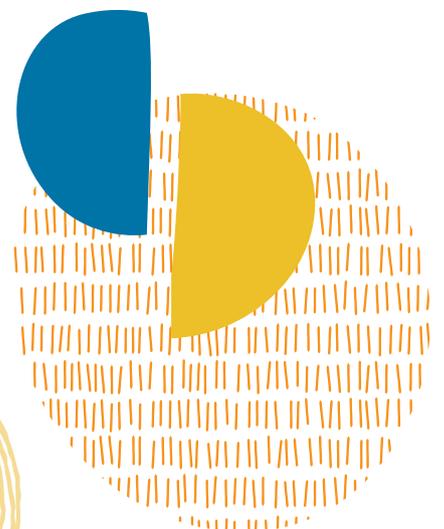
Identify the protocols that should be used to assess Alison's competence using a phone?

5. Briefly outline how Alison would benefit from the support worker using a strengths-based approach when assessing Alison's skills.



Topic 2: Assist with skills development according to the individualised plan

- 2A Prepare for skill development
- 2B Support and assist the person for skill development
- 2C Provide constructive feedback and monitor levels of engagement



2A

Prepare for skill development

It is widely understood that people with a disability are experts on their needs.

One of the first things you discover when you work in the community and health services sector is that you do not have to be an expert in everything in the field. People with a disability are experts in their conditions.

Your clients will know from direct experience what it is like to live with a disability and the best way of achieving independence for themselves. Your role is to support them and to draw on their expertise to do so. Many of the people you work with will have acquired a wealth of medical information and understanding about their condition. As a support worker, you can validate their knowledge by listening to them and treating what they say as valuable.

Today, health professionals work with people to support them to achieve their desired quality of life. In addition, peer support groups and disability advocacy groups empower people to be recognised for their expertise.

People and their families have expertise in:

- the progression of their condition
- what is holistically best for the person
- how to manage their symptoms
- the level of pain management versus quality of life
- what matters in terms of lifestyle
- the dignity of risk.

Example

Recognising the person as an expert

Piper has cerebral palsy which effects the way her hands function. She also has a vision impairment. Piper works at a supported workplace and is being trained in an office administration role. Piper identified to her support worker, Nat, that she needed some assistance and support in learning the workplace programs on the laptop computer. She tried learning the programs on the laptop, however she was struggling to see things on the screen. With Nat's support and by using the assistive technologies she was used to, i.e. the screen magnifier, Piper learned how to use the programs on the desktop screen and then could use them on the laptop.



Plan for skills development

The client must be involved in the planning and consulted on how the skills assessment will be conducted.

A person-centred approach places the person at the heart of all decision making. In combination with the strengths-based approach, you can help work with the person using various formulate a plan to support skill development. To encourage engagement, provide the person with details about opportunities and possibilities for personal growth so as their skills develop, the person will continue to be motivated to succeed.

Here are some areas where people may want to build on or develop their skills:

- self-care – dressing, bathing, hygiene, grooming
- domestic duties – laundering clothes, washing dishes, sweeping, cooking
- social interactions – relating to others and initiating interactions
- leisure activities – home activities such as watching videos and completing puzzles
- communication skills – speaking, signing, gesturing, literacy
- time management – organising, planning and estimating the time activities will take to complete
- money skills – understanding the worth of items, being able to calculate totals and change
- decision making – everyday decisions required to manage their life
- vocational areas and preparation for employment – transferrable work skills such as teamwork skills and the ability to follow instructions
- reading – developing basic literacy skills
- numeracy – developing basic numeracy skills
- transport – accessing work and community with public transport

Individual plans

All of these skills and domains are usually collated and embedded into the person's individual support plan. Individual support plans can look slightly different depending on the organisation. They can also focus on slightly different areas and domains of a client's life, needs or goals. Here are some examples of different styles of individual support plans:

Individual support plan from MS Australia: aspirelr.link/ms-support-plan

Care support plan: aspirelr.link/wrapcp-care-plan

Residential support plan: aspirelr.link/res-sup-plan

Completed support plan: aspirelr.link/acia-sup-plan

NDIS individual support plan: aspirelr.link/care-about-ndis-plan

Behaviour support plan from Dementia Support Australia: aspirelr.link/dem-bsp

Reading the person's individualised plan

Individualised plans are developed in consultation with the person and their families where needed.

They include information about the goals, needs and preferences of the person, and how you can provide the best possible support. Each person you provide support to will have been assessed by a range of professionals. An assessor talks to the person and their family about the person's needs and develops an individualised plan. The individualised plan may also be formulated in the inter-disciplinary team process.

The person's plan is a written record of the support and treatment a person will receive based on their individual requirements and preferences.

The plan might include information about:

- the stage of disability or physical condition and how it affects the person
- the person's family and support network
- the person's background, such as past jobs and hobbies and what they enjoy doing
- how you can help them communicate
- how to respond if the person is using particular behaviours
- physical needs the person might have, such as help with personal care and eating
- how you can meet their cultural and religious needs
- personal likes and dislikes relating to their care.

Individualised plans must be reviewed regularly as their condition changes, and the needs and abilities of the person change.



Example

An Individual Support Plan

Community Support Individual Support Plan	
Name: Hans Sheffield	Date of Birth: 2.2.1945 (76 years old)
Address: 99 Park Grove, Richmond	
Phone number: 0435 768 796 Email: NA	
Carer's details: Carissa Taylor (niece) Phone: 0456 123 4590	
Accommodation details: Lives with his niece Carissa	
<p>About me: I am 76 and I have an intellectual disability. I can only speak in single words and understand very short questions. I mainly answer questions by nodding or shaking my head. I attend the Community Centre 5 days per week from Monday–Friday. My niece, Carissa, takes care of me every weeknight and on weekends. I take an anti-depressant every morning at home. When I get upset, frightened, angry or frustrated I hide under things. Sometimes in the shops or in public I will run away to hide underneath something. I have been known to hide in the garden shed and get lost in the shops due to hiding. I can be lured out of hiding places with a few of my Coles miniature collection, which I must carry with me at all times. Each day I decide which ones I will take with me for the day.</p>	
<p>My goals and important things to know:</p> <ul style="list-style-type: none"> • I love the Coles supermarket. I enjoy spending as much money as I can in the Coles supermarket. • I would like support to use my ATM card to shop at Coles. • I find it too overwhelming to be in groups of more than 3 people. • I have an extensive collection of Coles miniatures which I must sort and arrange each day. • I enjoy watching TV and will watch anything but scary shows with monsters or aliens. • I also love watching the AFL and NRL. 	
My support routine:	
Task	Time
Morning tasks – Supported by his niece	
Community Centre Monday to Friday – support ratio 1:2. Usually support worker Max with Hans and one other client.	9 am – 3:30 pm



Using an individual support plan and supporting documents

Different organisations use individual support plans, maintenance plans, skill development plans and learning plans in slightly different ways. They may be separate documents or be collated within a person's file. Individual support plans will focus mainly on the level of development that the skills assessment has identified to achieve greater independence that is practical for the person. If the plan focuses on helping a person maintain their skills, then occasionally a maintenance plan will be used. If the focus is on skill development, then occasionally a skills development plan or learning plan may be established. Skill development combines planned or formal activities and creates informal or incidental learning opportunities which complement the client's daily routine.

Maintenance plan	Used when: <ul style="list-style-type: none">• a person is in the later stages of life and is experiencing a reduction in independence due to ageing, disease or disability• a series of skills assessments have identified diminishing capacity or an increased level of dependence• a person of any age has a degenerative condition where it can be expected that existing skills may be lost without active work to practise and preserve these skills• the plan takes the person's current level of skills development as the goal and directs strategies and activities detailed in the plan.
Skills development plan	Used with people: <ul style="list-style-type: none">• in earlier stages of life seeking greater independence and self-determination• recovering or rehabilitating from an injury or acquired disability. The plan takes the person's current level of skill development as a benchmark to build on. Their goals in a range of living areas are used to direct the strategies and activities that the plan will employ.



Example

A learning plan

Here is an example of a learning plan.

Individual Learning Plan			
Participant details			
First Name	Melanie	Surname	Williams
Date of Birth	18 May 1968	Gender	Female
Language	English	Interpreter required	no
Residential address			
Address	45 Sunhill Rd	Suburb	Mount Waverly
State	Victoria	Postcode	3149
Phone	0400 566 244	Email	m.williams68@gmail.com
Emergency Contact	Lillian Williams 0401 887 546		
About me			
I am 53 years of age and live in my family home. I have depression and social anxiety. My family have moved outside my local area, and I find it hard to do things on some days and to talk to people.			
My strengths			
I am attending counselling sessions and I do enjoy arts and crafts.			
Stakeholders involved in plan development			
Name	Agency/Service	Position	Contact



My learning goals			
My goals	To develop a personal budget on my computer so I can afford to do enjoyable activities on my good days. To have the confidence to attend a local arts group without assistance.		Timeframe 1 month 2 months
Learning goal action plan			
Task/ Service	Day	Equipment	Comments
Learn to budget	Monday and Wednesday	Computer	Support worker to help me create a table and plan my fortnightly budget. I need to save \$20 a fortnight for public transport.
Attend the local ladies arts and crafts group	Fridays	Transport	The support worker will attend a few sessions with me until I feel confident to find my way there and have made friends with the other members.
Last review			Next review

Learning opportunities

Here are some examples of different types of skill sets and examples of opportunities for engagement and for developing independence:

Skill	Examples	Opportunities for engagement
Life skills	<ul style="list-style-type: none"> developing independence with personal hygiene and self-care learning to cook handling money and budgeting using time management skills learning to drive using social media or research using the internet 	<ul style="list-style-type: none"> social clubs formal training community service workshops social programs



Skill	Examples	Opportunities for engagement
Vocational skills	<ul style="list-style-type: none"> developing literacy and numeracy skills developing professional or occupational work skills developing computer literacy practising job-seeking skills 	<ul style="list-style-type: none"> formal training volunteer work buddying or mentoring work experience career counselling
Community participation skills	<ul style="list-style-type: none"> public transport use learning about the community interpersonal skills awareness of community resource 	<ul style="list-style-type: none"> joining any club or association formal training volunteering support groups
Social skills	<ul style="list-style-type: none"> meeting people establishing trust and intimacy building a rapport settling differences and resolving conflict practising social skills 	<ul style="list-style-type: none"> family get-togethers clubs or social activities formal relationship training counselling social support groups and programs
Physical health and wellbeing skills	<ul style="list-style-type: none"> keeping fit learning to relax developing healthy eating habits 	<ul style="list-style-type: none"> gym/fitness centre yoga classes swimming and hydrotherapy counselling support programs rehabilitation classes cooking classes
Safety skills	<ul style="list-style-type: none"> identifying risk working to reduce risk learning to keep safe 	<ul style="list-style-type: none"> formal safety training fire drills self-defence classes support groups

For examples of life skills training, visit the link to a disability service provider who offers this type of training: aspirelr.link/life-skills-training



Identify skills ready for planning

The choice of planning tools will be determined by the organisation or service provider and the instructions set out by a health professional or supervisor and written in the person’s individual plan. They will choose a planning tool that will be age-appropriate and relevant to a person’s stage of development and the person’s needs and goals. Many organisations will use individual support plans or behaviour support plan templates to incorporate goals, needs and preferences of the person to identify a person’s skillset.

Skills inventory

Skills inventory

A formal list of skills used to identify a person’s level of ability in daily activities.

Included in the **skills inventory** is a rating scale for evaluating the person’s level of support required to complete a task. A skills inventory is not used to determine if a person can or cannot perform a skill, it is used to identify performance in terms of the level of support required to demonstrate skill ability.

Here is an example of a specific skills inventory with a rating scale:

Life skills	Independent	Little support	Some support	Significant support	Full support	Comments
Using cleaning equipment						
Following a recipe						
Using a microwave						
Making a shopping list						
Paying for shopping						

Simple checklists prepared in advance are useful because the skills you are looking for are listed and the observation involves a tick or cross and a comment.



Learning styles inventory

A learning styles inventory is a tool used to identify a person's preferred way of learning.

A commonly used learning inventory identifies if a person prefers visual, auditory or kinesthetic learning. Once a person's learning style is identified, you draw on this strength to ensure that the style is used to provide information. Note that many people prefer one or more methods, but they can still learn using a range of learning styles. This is called a multimodal method of learning.

Here is an explanation of the different types of learning styles:

Visual	People with a visual learning style like to view or observe things, including posters, pictures, photographs, diagrams, displays and films as a way of learning. These people will say, 'Show me' and 'Let's have a look at that'. They are best able to perform a new task after looking at a video or watching someone else do it first.
Auditory	People with an auditory learning style like to hear information, spoken words, music or rhymes. These people will use phrases such as 'Tell me' and 'Let's talk it over'. They are best able to perform a new task after listening to instructions from an expert. These are the people who are happy to be given verbal instructions over the telephone and can remember all the words to songs they hear. This method works well for people who are not good readers.
Kinesthetic	People with a kinesthetic learning style like to learn through the physical experience of doing. They learn through touching, feeling, holding, doing – practical, hands-on experiences. These people will use phrases such as 'Let me have a go' and 'How do you feel?' and will be best able to perform a new task by going ahead and trying it out, learning as they go. They will like to experiment, do hands-on activities, and never look at the instructions first! These people can enjoy a boot camp or adventure learning approach.
Reading/ writing	People with a reading and writing learning style learn best with words. Therefore, they will like to take notes, use dictionaries, and use handouts. If you need to give a person directions or instructions, provide them in writing using dot points. They will also enjoy activities such as word sleuths and quizzes.
Multimodal	This learning style and method means that people use strategies from all of the visual, reading/writing, kinesthetic and auditory ways of learning. This could look like: <ul style="list-style-type: none"> • preferring to use apps and technology for some learning and work tasks • needing to hear certain kinds of information in the same way • needing to move and rock while they are listening to instructions • sometimes preferring to write some instructions down, and other times needing a verbal explanation.



To learn about your preferred learning style, visit this link and complete the VARK questionnaire: aspirelr.link/vark-questionnaire

Teaching and learning strategies

The established theory holds that adults learn differently from children.

People have different reasons and motivations to learn, so one of the keys to successfully working with people is to tap into these motivators as they learn new skills. Adults prefer active learning that is relevant and meaningful to them and uses a problem-solving approach. Inappropriate teaching strategies can create barriers and demotivate learners.

Optimal adult learning environments

- The context is relevant and applicable to their lives.
- When it is understood what they are learning and why.
- The experience is satisfying and encourages a better self-image.
- The language is clear, easy to understand and direct learning takes place in a climate of trust and understanding.
- Cooperative interactions.
- Given opportunities to try out ideas or skills, followed by constructive feedback.
- Theory and practice are linked.
- The information, skills and ideas build on prior knowledge
- They can accomplish a task or a skill easily.

Formal teaching and learning strategies

Formal learning is structured and delivered intentionally.

This style of learning is planned and guided by a facilitator, and the person will be required to attend a workshop or community program designed to teach a particular skill or set of skills. Resources needed in a formal learning environment can include:

- facilities: accessible classrooms, computer labs, breakout rooms, toilets, lunchrooms
- equipment: workbooks, computers, storage device, whiteboards, projectors
- facilitators and teachers: staff with specialist knowledge, skills and training to manage learning and group dynamics in the classroom
- assistive technology equipment: text-to-speech software, magnifiers, automatic page-turners, closed captions, adapted pencil grips, book holders.



Informal teaching and learning strategies

Informal learning is a less structured and more casual way of learning, such as having a conversation or helping a person perform a task that they will then be able to do themselves. The benefit of informal learning is that real-life situations are used to teach a skill that makes the learning meaningful to the person. Informal learning can be used in many situations, such as when a client has difficulty in doing something or does not understand why something works in a particular way.

These are some examples of informal learning supporting skill development.

Informal learning opportunities

- Cooking a shared meal together using a recipe book – understanding metric measurements
- Grocery shopping – numeracy skills, reading labels and nutritional guides
- Planning a trip to the movies – budgeting
- Performing household duties and talking about safe work practices
- A casual conversation reflecting on an experience
- Researching topics of interest on the internet

Example

Formal learning

Issac is in his twenties and has clear goals that include employment and starting a family. He has a hearing impairment but is a skilful lip reader. He has a skills assessment to evaluate his readiness for work.

Issac has decided to do a course with a local community centre. He attends classes regularly for four weeks, where he learns about researching potential jobs that interest him, writing a resume and cover letter, applying for jobs online, and improving his interviewing skills.

To support learning, the facilitator uses video and role play to show Issac and the group about job interviews and what employers want in their employees. Knowing that Issac is hearing impaired, the facilitator uses closed captions while the video is playing.

Example

Informal learning

Bailey has an intellectual disability and works at a supported workplace three days per week. Bailey has just moved to a new house, which means that he must understand the public transport system to get to his job. Bailey has set himself a new goal of learning to catch the correct bus to go to work. Bailey has previously struggled to understand and read the public transport app. Jed is Bailey's support worker and works with Bailey to maintain his independence. Together, Jed and Bailey sit down and play around with using the public transport app, so that Bailey can get a sense of how to use it, how to understand the symbols on the app and what the words mean. They also watch a few clips online of people catching the bus so Bailey knows what to expect. The next day, Jed and Bailey do a few practise runs of catching the correct bus to work. It takes Bailey three times to learn how to catch the correct bus to his workplace.

Incidental learning strategies

Incidental learning

Unstructured, unplanned learning that happens in real-life situations.

Support workers need to understand how to use **incidental learning** opportunities as they arise.

Incidental learning will occur as you support and assist a client to go about their routine and meet their goals. The person may or may not realise they are learning something new as you both go about their day. It is important to highlight to the person what they have learned or done well, regardless. This is a form of positive reinforcement. The skill development strategies used to foster incidental learning include:

- role modelling
- allowing the person to attempt different parts of a task or skill without instructions or prompting.



Example

Incidental learning

Aria wanted to attend a special fundraising event at the disability service she attends two days per week. She wanted to do her own make-up for the event because doing make-up was one of her new hobbies. She had watched many tutorials online about applying make-up. Her support worker Imogen encouraged her to apply it herself without any help from her. Aria was able to do most of it by herself. Imogen praised her for doing it herself and asked her what she had learned. Aria said that she had learned to apply eye make-up much better than she had before.

Other teaching and learning strategies

Here are some examples of other learning strategies that can be used with clients:

Strategy	Description
Practical demonstrations	<p>Demonstrating new skills is essential as this will make learning easier for the person. It is appropriate for everybody but especially kinesthetic learners.</p> <ul style="list-style-type: none"> • Explain the process or skills over a few sessions and ensure they are broken into steps. • Use plain English to give clear instructions and explain the process as you demonstrate the activity. • Encourage questions, encourage clients to have a go, and reassure them that making mistakes is okay because this is learning. • Ensure the person has plenty of opportunities to master the skill before moving on to the next step.
Using drama and role plays	<p>Finding creative ways of learning enhances motivation, engagement and interest. For example, simulating an environment such as a mock job interview for developing employability skills.</p> <p>Role play is excellent for developing communication skills and self-confidence. Using this strategy allows clients to rehearse skills before taking them out into the real world.</p>
Group activities	<p>Group activities are ideal for building new friendships and feeling connected to the community. Many activities such as sports and hobby groups are suitable for this. If a person is reluctant, encourage a meet and greet session or visit the venue to observe how others are engaging without the pressure to participate. If the person is keen but social anxiety is an issue, you may want to do this a couple of times as the person will be able to get to know those who participate, giving them the confidence to join in.</p>



Mentoring
The sharing of knowledge and skills by an experienced person with a less-experienced person.

Strategy	Description
Buddy system	When your client starts a new activity, having a buddy can help with confidence and increase participation. It enables the person to feel welcome, have any questions answered, be introduced to others, feel like they are a part of the group, and help alleviate anxiety.
Mentoring	Tutoring programs are one example and are a form of cooperative learning. It gives the person the added benefit of having extra time to develop skills, particularly for groups with several high need participants.
Role-modelling	The support worker asks the shop assistant for the items the person wants, looks at the goods carefully, decides whether they are right for the person, commits to purchasing the goods and checks that the correct amount is paid and a receipt is received. The person will observe the process and learn from what they have seen the support worker do.

Example

Engage in living activities by engaging with learning strategies

Tracey and Molly both attend a disability day service. They have both said they would like to learn how to use their ATM cards to go shopping. Support worker Dale says that he can support them in their goal. They go to the local shopping centre and Dale gives both Tracey and Molly a chance to use the ATM machine. Tracey is slightly better at reading than Molly is, so Dale encourages Tracey to show Molly what the words are to help her to withdraw cash. Tracey and Molly work together to figure out how to withdraw their money so that they can do their shopping.

Practice Task 5

Question 1

Which of the following statements relate to documents used in planning skills assessments? Tick all that apply.

- Maintenance plans
- Skill development plans
- Risk assessment plans
- Learning plans



Question 2

List four skills and examples of learning strategies that could be used in an informal learning activity.

Question 3

Identify four characteristics of formal learning.

Question 4

Which of the following statements relate to incidental learning? Tick all that apply.

- It occurs around us in real-life situations
- The person needs to attempt a task or skill with prompting
- The person may be unaware they are learning
- Positive reinforcement is used to stop bad behaviours from continuing
- Role modelling can be used as a learning strategy



Question 5

List three types of resources such as equipment or tools used in the learning process.

2B

Support and assist the person for skill development

Identifying resources is an essential step in building on the existing skills a person has.

It is the person's right to be fully informed about their options before making any decisions. Here are some examples of the type of information a person with disability may want to know about a possible skill development activity:

Type of activity	Some activities may be very comprehensive such as a yearlong training course, while similar activities may only offer basic elements, such as a short course. Both options should be discussed with the person.
Cost	The activity may have a cost involved. If the cost is too high for the person, they may prefer a different or more basic activity.
Location	There may be an activity in the local community hall, or the person may have to travel to another suburb. If transport does not need to be considered, then the person may choose the one for which they have to travel because the activity itself is more comprehensive or suitable.
Participation level	Many activities can be undertaken at different levels of participation, such as attending weekly meetings or sports training twice a week or with optional attendance.
Timing	The timing of an activity needs to fit with other lifestyle and work or study commitments such as during office hours, working remotely or on weekends.

Information can be sourced from many places and most information is available online. A client may prefer to visit a community education centre or service or library to see a program or workshop 'in action'.



Sources of information

- Local network meetings
- Online research
- Disability employment services
- Local community directories and community boards
- Citizens advice bureau and advocacy services
- Local government office
- Local community and family centres
- Recreation and arts centres
- Local library and training centres
- Email newsletter subscriptions
- Health hubs

Meet communication needs

Communication
Verbal or written exchange of information, news or ideas.

For those who have **communication** barriers, the information must be presented in a way that suits their needs. All service and support information must be explained to them in a manner that they can understand so they can give informed consent.

Not only is verbal and non-verbal communication needed, but each person may have additional needs regarding their communication abilities.

Assistive technology
Technology that enables a person to maintain or improve their capability of performing a task.

Assistive technologies can be physical supports that enable a person to undertake tasks that would otherwise not be possible. Some technologies assist a person to communicate if they have a speech or hearing impairment. These may also be referred to as augmentative communication technologies or tools.

Here are some more examples of different types of assistive technology aids that may assist in the communication process:

<p>Augmentative communication: Speech</p>	<p>Devices to assist with speech or hearing. These can include:</p> <ul style="list-style-type: none"> • communication boards • speech synthesisers • modified typewriters • head pointers • text-to-voice software.
<p>Augmentative Communication: Writing</p>	<p>Devices to assist the person to write. These include:</p> <ul style="list-style-type: none"> • headsticks • light pointers • modified or alternate keyboards • switches activated by pressure, sound or voice • touch screens • special software • voice-to-text software.



<p>Augmentative communication: Reading</p>	<p>Devices to assist the person to read. These include:</p> <ul style="list-style-type: none"> • glasses • page turners • magnifiers • braille • large print screens • visual alerting systems • telecommunication devices.
<p>Augmentative communication: Hearing</p>	<p>Devices to assist the person to hear. These include:</p> <ul style="list-style-type: none"> • hearing aids • ClearaSound portable loop system • Sennheiser infra-red systems • Uniphone.

You can find more assistive technology devices to aid communication at: aspirelr.link/assist-tech

For **CALD** (culturally and linguistically diverse) clients, you may need to make arrangements for a translator or present documentation in the person’s first language.

Identifying goals

SMART is an acronym that can be used to guide goal setting. It stands for Specific, Measurable, Achievable, Relevant and Time-Bound.

Each of these criteria help define a goal and help to ensure that the objectives are attainable within a certain timeframe. This approach makes it easier to track progress and identify if goals are on track or need to be adjusted or changed.

An example of a SMART goal statement might be:

My goal is to (objective) by (timeframe). I will work towards this goal by (steps that need to be taken). Accomplishing this goal will (outline what it means for the person).

Culturally and linguistically diverse (CALD)
The preferred term for describing different ethnic communities.



SMART acronym	What each step means	An example of each step
Specific	<p>Specific here means that it is relevant for the person and where their abilities are at.</p> <p>In order to determine a specific goal with a person these questions can help to define and shape them:</p> <ul style="list-style-type: none">• What needs to be accomplished?• Who's responsible for it?• What steps need to be taken to achieve it? <p>Thinking through these questions helps get to the heart of what you're aiming for.</p>	<p>Scott is supporting Keiko for the first time. Keiko has social anxiety disorder and depression. Keiko would like assistance to access a support group. After they discuss Keiko's goal and Scott asks a few questions about what Keiko can and cannot do independently, they both form the specific goal that Keiko would like to eventually attend the support group independently without any support.</p>
Measurable	<p>Make sure goals are measurable because it is easier to track progress and know when the person has achieved their goal.</p>	<p>Scott and Keiko form a support plan which tracks the progress of Keiko's skills to access the support group.</p>
Achievable	<p>Work with the person to identify that the goal is realistic and can be reasonably accomplished.</p>	<p>Scott and Keiko ensure that the goal is achievable through the support strategies.</p>
Relevant	<p>This step means ensuring that the goal is important to the person and that it aligns with any other relevant goals.</p>	<p>Scott and Keiko both decide that this is a relevant goal for Keiko to develop in order for him to develop independent social skills.</p>
Time-bound	<p>To properly measure success, the person needs to want the goal to be completed by a certain time frame and to know that it has been reached.</p>	<p>Scott and Keiko discuss how each phase of the strategies can support Keiko each step of the way.</p>



Example

Supporting engagement using SMART goals

Aarush had a very stressful time over the last couple of years. He broke his back from a work accident and broke up with his long-term partner. Aarush had also been diagnosed with serious depression. When all of Aarush's savings had gone, he decided he needed to get help to change careers. He has a job coach who specialises in people with disabilities and he is also retraining in business administration. His job coach suggests that he gets additional support to create a better morning routine so that he does not end up staying in bed all day. Aarush's new support worker Darby spends the morning they first meet getting to know one another. Darby hears all about Aarush's situation, strengths, issues, limitations and weaknesses. Darby suggests a goal of forming a new meaningful morning routine to assist Aarush with starting the day well and engaging in healthy practises in order to get him out of bed. They both agree that reaching this goal will take around 6 months. They both agree that this is an important and relevant goal for Aarush to achieve in both managing his depression and enabling him to return to the workforce. They discuss the types of things Aarush would like to do in the morning, how they are going to measure success, issues which may arise and what support strategies Darby can do to assist and support Aarush. After their meeting, Aarush feels more confident that he can meet this goal with Darby's help.

Identify resources to complement strengths

Resources are needed to achieve goals.

In the development of a person's individualised plan, the types of support available to them will be discussed. Then decisions can be made about what resources the person needs to achieve their goals.

The range and type of government and community resources available is enormous. Information may be available from disability or community networks, local or state libraries, community centres, local government offices or directories online.

Disability Gateway is one place to start. This site is developed by the Australian government to provide access to relevant information and services: aspirelr.link/dis-gateway



Here are a small number of examples of community resources that can provide information related to particular areas of interest:

- Sporting clubs with membership to join a team or to use facilities, e.g. a swimming pool, basketball court, horse riding
- Day activity groups to provide activities and develop independent living skills, e.g. food preparation and gardening
- Education and training programs to learn new skills and obtain qualifications
- Cultural or religious groups that arrange cultural celebrations or events
- Special interest groups for hobbies, e.g. music appreciation, dancing, computer games
- Transport services to provide access to community events or activities, e.g. taxis, Uber, public transport

This table describes some of the types of services available and what they offer to users.

Home care	Can include bathing and grooming, gardening, maintenance, housework and meals.
Residential	Care and support for daily activities and attend to spiritual and personal care needs and medical management. Additional services include social interactions and some interaction in their community.
Respite	Respite services provide carers with a much-needed break to support their health and wellbeing. It includes having a respite service come to the home or offer the carers access to adult day centres, overnight retreats, and short-stay getaways.
Recreation	Recreational activities or equipment, tools or materials to complete projects. Other relevant information required may be about transport and transport services. Many disability day services provide many leisure and recreation options for people to choose from.
Employment	Support with employment information such as job vacancy information, job search skills, interview techniques, clothing, transport, and modified equipment and office space.
Social	Churches, community groups and sporting groups can all provide a wide range of social opportunities for people. This can include support groups, interest groups, recovery groups and special hobby groups.



Example

Leisure resources

Lina has an intellectual disability. She attends a recreational centre and enjoys taking part in craft activities. Lina decides she wants to take up weaving and make a big wall-hanging. Lina asks her support worker to help her. Together they contact the local weaving guild, which has a second-hand loom for sale at a reasonable price. The support worker helps Lina purchase and collect her new loom. Lina joins the weaving guild and ends up expanding her social circle as well as her craft skills.

Make contact

Once appropriate services, personnel, agencies or resources have been identified, assist the person to access them as needed and obtain permission from the person before completing any paperwork or documentation on their behalf. In some cases, the person will be able to complete an application on their own, but sometimes they may require assistance to access supports.

Application form	Some services and resources require an application form to be completed. These will include service guidelines and eligibility criteria.
Phone call	Sometimes a phone call may be all that is needed to seek supports or resources.
Informal networks	You may know of resources or supports available in the local community.
Waiting list	In some cases, a waiting list might apply if a program, service or resource is already fully subscribed.
Direct purchasing	Some people may be able to purchase supports or resources directly using individual funding packages.

Support engagement in activities

Using a person's strengths to develop new skills and observing progression will promote independence.

The mobilisation of a person's strengths requires encouragement to actively use their strengths when working towards independence. A person's strengths must be recognised, praised, and encouraged so that they can see the value in what they can do and how they can contribute to their communities.

Here are some ways to identify a person's strengths and encourage them to engage in activities according to their needs and preferences:

- Give positive feedback to encourage the person to use their skills and praise them for skills demonstrated
- Help the person to identify what it is they can do and prioritise and manage accordingly
- Help the person to focus on their end goal, and to focus on the good things they have to look forward to in the future
- Provide choice and options
- Encourage the person to interact with others
- Provide support without control
- Be positive and celebrate progress
- Ensure the person has access to tools that allow them to do things for themselves
- Give verbal prompts to assist with memory
- Make learning and skill development fun
- Build trust through being genuine and respectful in your interactions with the person
- Write information down to help people remember the different steps of doing a skill

When you use a strength-based approach, you are constantly reinforcing the idea that the person is achieving and improving their skills. This is called positive reinforcement – where rewarding a person for doing something well, such as giving praise and encouragement, makes a person feel good and this motivates them to do it again.

Example

Supporting engagement

Samuel is a disability support worker and visits his client Chris twice a week. Chris has been participating in a life skill program that teaches him how to take care of his home, prepare meals, and manage his finances. During the time Chris has been attending this program, he has shown he can plan and prepare meals then clean up the kitchen on his own. To support his independence, Samuel ensures he gives encouragement and praise for his achievements and only gives support if Chris asks for help. Today Chris has prepared lunch for them both and was able to do this without any support from Samuel. After lunch, Samuel congratulates Chris on his success. Chris is feeling quite proud of himself.



Practice Task 6

Case study

Mary is a client who has some difficulties learning as a result of an acquired brain injury (ABI). It takes more time for her to process and understand information and she finds it difficult to read small print. Darlene is working with Mary to help her identify areas for skill development and to plan out how she will do this.

Question 1

List two ways Darlene can ensure she uses a strength-based approach with Mary.

Mary has expressed an interest in gardening, mainly growing vegetables, but because she lives in a small unit, she does not have the space to do this at home. To support the decision-making process, you must provide her with information relating to support services she may want to access.

Question 2

Recommend a service or community program that may be of interest to Mary and list three examples of information Darlene should present to her to help her make a decision.



Question 3

Suggest two communication needs that Darlene may need to accommodate when providing information to Mary.

2C

Provide constructive feedback and monitor levels of engagement

Feedback is a necessary process in skill development but must be given to the person respectfully.

Everyone likes to receive positive feedback. It makes us feel good about ourselves and acknowledges our achievements. Constructive feedback needs to be meaningful and solution focused. It focuses on improvements, not failures.

The aim of constructive feedback is to achieve a positive outcome by respectfully providing advice and improvement suggestions. For feedback to be effective, you must focus on the skill, not the person, and be respectful to avoid the person taking it as a personal criticism. Negative feedback can lead to people feeling hopeless and useless. It can also decrease motivation to do the task or skill.

Here are some other things to consider when providing constructive and positive feedback to others:

- Feedback can be verbal and nonverbal; body language and facial expressions also provide feedback. There must be an alignment between what you say and what your body language communicates or your message will be confused.
- Provide feedback as soon as possible. The closer to the event the person receives feedback, the more meaningful it will be. It can take the form of standing back and offering supportive words of encouragement as the person is undertaking the task, or giving detailed feedback immediately upon completion of the task. Give praise first on what the person is doing well, then follow by offering suggestions for improvement and encouragement.
- Respect the person's unique way of doing things and support them. There is no one 'right way' to complete the typical tasks of daily living. While another person's method of doing things may be different to ours, a person should not have to justify why they do things a certain way. Part of respecting a person's valued status is appreciating their expertise and uniqueness, so account for this when giving your feedback.
- Focus on what they did well. Even if they have only slightly improved at completing the skill or task, all small wins need to be celebrated.
- Choose battles carefully. What matters is that the person is improving their skills for completing a task. It does not matter if it is done in a way that you do not like or approve of.



Feedback techniques

- Keep feedback to one thought or instruction at a time
- Avoid using phrases that contain the word *need* as they imply the person did not do well
- Use simple, clear English
- Be sincere and express appreciation
- Never give feedback using technology; it must always be face-to-face
- State what you have observed, not your interpretations of, e.g. I noticed that you ...
- If possible, have the person explain back to you what they have to change to make sure they understand.

Video: Constructive feedback

For more advice on how to give constructive feedback, visit this link: aspirelr.link/yt-constructive-feedback

Pay attention to the different types of feedback that can be given and why some of them may not be helpful. Identify which type would be best to use as a support worker.



Example Constructive feedback

Kyle is learning to cook some of his favourite dishes to move out of supported accommodation. Sarah, his support worker, helps Kyle to measure the ingredients and remember the steps involved, as he does not read and has short-term memory problems.

Kyle regularly goes ahead and puts in ingredients without referring to Sarah or the recipe. Sarah tells Kyle that she loves his enthusiasm and that he should measure all the ingredients he needs and assemble them on the bench which will be quicker for him to add the right amounts as required.

Kyle tells Sarah that he knows the quantities needed after cooking each recipe a few times and now prefers to cook 'by feel' rather than accurately measuring and weighing everything.

Sarah accepts that Kyle's approach to cooking is different to hers and does not worry too much about the quantities, concentrating instead on making sure he remembers all of the ingredients.



Monitor skills progression

Monitoring a person's progression is important as the support provided needs to be adapted to meet the person's changing needs. Other people in the person's support network, may have some insights to offer. You can use some simple strategies to guide you and support or confirm the observations you make.

A change in the level of participation must be recorded and reported.

Support workers should monitor the following by observing, discussing and asking questions and gathering feedback from the person and others. However, there needs to be a careful balance between these skills or it can become too much for people to process. Many people with disabilities can find constant talking and questions intimidating and confusing. As you get to know clients, you will get a sense of where their limits and boundaries to communication will be.

Here are some examples of common skill areas and the changes you may observe concerning those skills:

Communication	<ul style="list-style-type: none"> • Changes in a person's ability to tell you what they need • Speech difficulty in either finding the necessary word or controlling the muscles to pronounce words • Changes in written communication or ability to read
Meal preparation	<ul style="list-style-type: none"> • Changes in the ability to plan or prepare a meal • Reduced variety in meals they are preparing • Heavy reliance on takeaway or fast foods
Transport	<ul style="list-style-type: none"> • Changes in ability to drive • Damage to car or driveway area • Changes in ability to catch public transport, read timetables and plan trips
Financial	<ul style="list-style-type: none"> • Changes in recognition of the different notes and coins • Changes in their ability to pay bills on time and the amount of money they require each week
Personal care	<ul style="list-style-type: none"> • Changes in their ability to dress, including the ability to use buttons and zips • Changes in standards of grooming; for example, remaining in pyjamas or tracksuit all day • Changes in ability to undertake general grooming • Changes in interest level for grooming • Changes in the ability to bathe or shower themselves • Incontinence
Eating	<ul style="list-style-type: none"> • Changes in the ability to chew and swallow food • Loss of interest in food • Overeating • Changes in the nutritional value of the food they are eating



Working	<ul style="list-style-type: none"> • Changes in their ability to hold down a job • Increased frustration or boredom at work • Absenteeism
Household duties	<ul style="list-style-type: none"> • Changes in the state of tidiness and cleanliness of the house • Changes in strength and capacity to use equipment • Loss of interest by people who were once houseproud • Changes in ability to care for pets

Example

Monitor changes in skill levels

Janice is building up the skills and confidence to get her driver’s licence back after a car accident that has not seen her drive for over five years. Her support worker initially takes Janice for a drive as a passenger and gets her to watch for hazards as they drive around locally. Then, when she feels comfortable, Janice asks if she can practise driving her car around the car park of a local business on a Sunday when there are no other cars around.

The support worker can see that Janice can drive and control the vehicle and park between the lines, so he talks with Janice about getting professional driving lessons. Janice and the support worker contact a few local driving schools to find out the cost for driving lessons. Janice then decides on the driving school she wanted to use.

Managing difficulties to progression

Skills development activities may vary in success from week to week.

Gains may be evident and significant one week but may not always be maintained. Just as results may vary, so too can level of engagement, cooperation, enthusiasm and responsiveness. When a challenge has been identified, you must respectfully discuss the issue with the person. Not only does the person have the right to be included in all discussions, but they will be able to share their views about the difficulties faced and offer their preferences to manage the problem. Discussing challenges can be challenging but must occur so the issue can be addressed. Once the problem is identified, amendments are made to either the client plan, such as changes to goals, changes to strategies, or new assessments arranged.



Record and report changes to a supervisor

Every organisation will have its system for recording and reporting changes.

You must always respect the person's privacy and follow organisational procedures when collecting, storing and sharing personal information.

Your duty of care does not stop once you have monitored and evaluated the success of the strategies being used and recorded these in the case notes or plan of the person.

If you are concerned for the person's wellbeing or believe action is necessary, you should consult with your supervisor as soon as possible and bring the issue to their attention directly.

As a support worker, you may have the most contact with the person of anyone in their support network. Discuss with your supervisor any unusual or uncharacteristic behaviour you have noticed.

It is also important to raise any issues you may be experiencing with any support or learning strategies whilst supporting a person. Support and skills strategies need to be changed if:

- a person is not responding to them
- they are not encouraging growth in skills development
- they are causing behaviours of concern or challenging behaviours.

Some organisations may have specific spaces to discuss these types of difficulties with supporting clients. It could be in a staff meeting, in a client review progress meeting or case management meeting.



Example

Observe and report changes

Teegan has Down syndrome and her goal is to learn to be able to use her smart phone so she can use apps to stay in contact with friends and family. Her support worker Cho had been supporting and assisting Teegan with her goal a couple of times per week for many months. However during this time, Teegan's skills with the smart phone had not increased which left both Teegan and Cho disappointed. Cho spoke to his supervisor about it, and they agreed they would bring it up at the next staff meeting. Cho brought the issues he was experiencing with Teegan to the team at the staff meeting. Some other support workers who also worked with Teegan offered some suggestions about how to help her learn the skills she needed. They also offered to sit with Teegan and Cho to show them the strategies they used. Cho was grateful for this and was open to seeing how the strategies would work for both him and Teegan.

Practice Task 7

Question 1

Which of the following techniques should you use when providing constructive feedback? Tick all that apply.

- Be respectful
- Focus feedback on the person, not their behaviour
- Check for understanding
- Use 'need' phrases
- State what you have observed

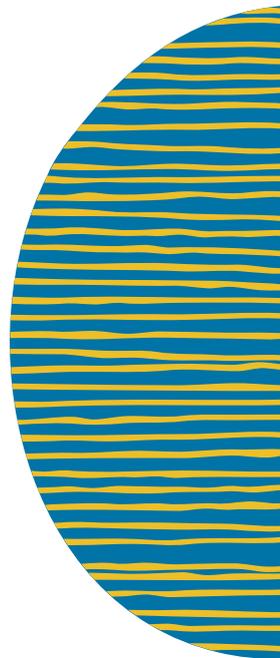
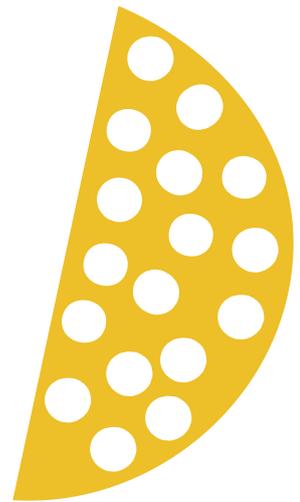
Question 2

When a support worker observes a person having difficulty performing skills competently, what three actions should they take to ensure this is addressed?



Summary

- Choosing relevant skills to be developed is dependent upon the person being given the opportunity to describe what is important to them, what they have done in the past and what they enjoy doing.
- To encourage participation and engagement, provide the person with details about opportunities and possibilities for personal growth. As their skills develop, the person will continue to be motivated to succeed.
- Each person has individual and unique strengths in a range of skills areas, including self-care, communication, leisure and vocational.
- An action planning tool can help identify appropriate skill development strategies and necessary resources.
- A learning styles inventory can individualise a skill development approach and match learning methods to the person's strengths.
- Strategies to mobilise a person's strengths include assistance to prioritise, focus their energies and clarify the outcomes that they want.
- Observation, discussion and third party feedback all provide useful evidence of how skill development strategies are working.
- Constructive feedback is important to maintain engagement and motivation. Feedback should be immediate and focussed on improvement.
- Monitoring the effectiveness of the strategies in the plan should be ongoing and take place in a range of contexts that the person operates in.





Learning Checkpoint 2

Assist with skills development according to the individualised plan

Part A

1. Match each teaching and learning strategy to its correct description.

Practical demonstrations	An experienced person assists in the skill development of the learner through co-operative learning
Buddy system	Allows clients to rehearse skills before performing them in the real world
Mentoring	Someone who guides the person by answering questions, making introductions and helping them to feel that they are part of the group
Group activities	Showing how a skill is performed and explaining the process as you go
Role plays	Used to build new friendships and provides a feeling of being connected to the community

2. Identify two skills a person may need to develop to carry out everyday living activities and briefly outline an informal learning situation that could be used to maximise the person's learning in this skill area.



3. Match each term about learning opportunities to its description.

Incidental learning	A casual way to learn a task or skill using real-life situations that makes the learning meaningful to the person
Informal learning	Structured and delivered intentionally by a facilitator who has planned activities
Formal learning	Occurs while support and assistance is being provided to a client as part of their routine and working to meet their goals. The person may not realise that they are learning something new

4. Identify at least three verbal and non-verbal communication strategies that can be used to meet the different communication needs of clients.

5. Match the term to the learning resources appropriate for the person's learning style.

Reading/writing	Diagrams, displays and films
Kinesthetic	Music, rhyme, spoken words
Visual	Hands-on experiences, feeling, doing
Auditory	Notes, dictionaries, quizzes



6. Which of the following statements relate to information about a person's skill development needs in their individualised plan? Tick all that apply.

- Information includes the person's goals, needs and preferences.
- Information includes the support and treatment a person will receive based on their individual requirements and preferences.
- Information may have been provided from health professionals, the carer or family and the person.
- The plan may include information about the person's sexual preferences.
- The plan may include information about how you can help them communicate.

7. List four sources of information on community resources for a person.

8. Provide two suggestions on how a worker can mobilise a client's strengths and encourage ongoing development and application of their skills.



Part B

Case study

Alex has just turned 15 years of age and has a disability that affects his speech. Now he is old enough, he is looking forward to getting a casual job to earn some money. Alex is good at listening, is a fast keyboard typist and fast at data entry. When Alex is in a new social situation he can be shy and reserved, mainly because people get embarrassed when they can't understand his speaking when they first meet him. Gillian is his disability support worker.

1. Identify three tools Gillian can use to work with Alex to generate ideas about employment that aligns with his strengths and goals.

2. Since Alex is eager to go into paid work, Gillian needs to direct Alex towards community resources that can assist him in achieving his goal. Identify two community resources Gillian and Alex can investigate and obtain some information.



3. Alex has decided he would like to attend a career development workshop. Gillian will need to provide Alex with information and support so that he can engage in this activity. List three types of information Gillian will need to communicate to Alex.

4. Suggest two ways Gillian can ensure her actions promote independence using a person-centred approach.

5. Today Gillian is observing Alex while he uses a computer and the internet to find a job. She is watching him log on to a social media platform, distracting him from the task. Suggest how Gillian can address this issue.



- 6.** Gillian wants Alex to be successful and find part time work and has decided she does not want to discuss the difficulties he may have getting a job due to his speech. She feels this will make him shy and affect his self-confidence. Justify if Gillian is making the right decision.

Alex has been attending the career development program twice a week for four weeks. Today Gillian observed Alex performing a practical task in a simulated environment where he is doing a mock job interview. Gillian has observed and documented his performance in the interview. She has noted his neat appearance, friendliness, proper use of manners and questioning techniques. Gillian feels Alex has demonstrated competency and is ready to start looking for work.

- 7.** Suggest the next steps for Alex and how Gillian can support him to reach his goals.

- 8.** List some examples of equipment or other resources Alex may require when attending the career development program.



Topic 3: Support incidental learning opportunities to enhance skills development

- 3A Use positive approaches and strategies to promote enjoyment
- 3B Adapt support in consultation with others



3A

Use positive approaches and strategies to promote enjoyment

Make learning an enjoyable experience as this is the secret to maximum engagement.

The support worker's communication style and learning and support strategies should match the person you are supporting and accommodate their preferred learning style wherever possible. For example, for an individual whose learning style is visual, you would ensure most learning experiences accommodate the delivery of information in an observable manner.

Offering the right amount of support and reinforcement will help to maintain motivation. However, you need to be mindful of the level of support and reinforcement you provide to your clients. Offering too much will take away the challenge and their sense of achievement. On the other hand, insufficient support and reinforcement will increase the task's difficulty and inhibit motivation.

Always ensure incidental learning occurs naturally in situations that have not been designed or planned to achieve a certain outcome. Otherwise, the experience will become inauthentic and probably lose the enjoyment that it might have held for them in the first place. To enhance the enjoyment of an experience, you may incorporate the following:

Exploration	Learning through exploration helps a person to understand concepts and how they connect to real-world experiences. For some people, this can be energising and invigorating because it meets their interests and curiosity. However, it may also be too confronting for people who have lowered their expectations of themselves and what they can get out of life. People who have had restrictions and barriers to their participation removed may naturally want to explore and test their boundaries.
Flexibility	Flexibility is personalising learning experiences to meet individual needs in a given moment. Some people find comfort in a routine and structure, while others appreciate the flexibility and go with the flow. If circumstances change and make it impossible or difficult to participate in or complete an activity, some re-organisation may be necessary. The ability to make subtle shifts to a planned program may lead to discovering a better way to do things. For example, you may have to give a person more time or space, or adapt resources to accommodate their individual needs.



Self-expression	Any activity that people engage in has the potential to be a vehicle for their self-expression. This is true in areas we would consider creative pursuits, but also in common areas of support, such as personal care and grooming. These activities could be hobbies that the person is interested in.
Checking in	An individualised plan outlines the strategies to be implemented to support skills development. The plan may take on a life of its own. It may or may not be working for the person in the way they had hoped at the outset. Checking in with the person involves asking them what is important to them, what is working well, and where they feel the plan needs to improve if it is not meeting their individual needs effectively.

Positive reinforcement

Positive reinforcement involves choosing carefully selected rewards which mean something to the person doing the task. For example, if a person completes a housework task, they get a reward for completing the task. Positive reinforcement works best when a reward is given immediately after a task has been done. Research has demonstrated that behaviour is more likely to be repeated or continued if positive consequences reward it. The opposite also occurs in that behaviour that is not rewarded by encouragement is more likely to cease. Delaying rewards, even for a few minutes after it is completed, can demotivate the person from doing the task again.

Many clients will say they enjoy food as a reward; however using food as positive reinforcement strategy sends the wrong message about how food should be used. If you start using food as a positive reinforcement, the person can potentially expect this all the time which can lead to eating, oral health and other health issues. Rewards such as time on tablets, computers, phones, social media, or incorporating enjoyable activities and hobbies are better quality positive reinforcers to use with clients. If you find yourself working with a new client who has been using food as a positive reinforcement for some time, it is ideal to find a different reward for them to use. You may need the help of a behaviour support professional, such as a psychologist or applied behaviour analysis therapist, to support the transition from food to a more realistic reinforcer.

Positive reinforcement
The process of rewarding a person when a desired behaviour is exhibited.



Positive reinforcement is far more effective if it is specific and provided when real achievements have been made. The table below explains the three categories of positive reinforcement.

Positive reinforcement strategy	Description
Tangible	Reward charts encourage people, particularly young people, to demonstrate positive behaviours. Each time the person presents a wanted behaviour they receive a sticker, which continues until they reach their end goal, e.g. 20 stickers. Once the goal is reached, the person is rewarded as a congratulation for their success.
Activity-based	Activity-based reinforcers allow the person to participate in an activity of their choice that is enjoyable. This can be time on a computer or other device, or playing a board game.
Social reinforcers	A social reinforcer is encouragement and praise given to the person by others and other expressions such as a pat on the back, a high five, or smiling.

Example

Positive reinforcement

Rhea has an intellectual disability. She lives with her mother and attends a supported workplace each day of the week. Rhea's mother had been taking her to work every morning, however she got a new job in a different direction to Rhea's workplace. Rhea's mother hired Matthias to support Rhea to catch the train to work in the morning. As Matthias got to know Rhea, he listened out for things and activities that Rhea enjoyed and reinforced herself with. Matthias came up with a plan to break down the task of catching the train to work for Rhea. Every time Rhea did one step of the task, she was rewarded with two minutes of watching her favourite show online using her smart phone. Rhea quickly learned each step of getting to work, and she also began reinforcing her trip to work using clips on the internet that Matthias had shown her.



Chaining

Many daily activities require the sequential teaching of task skills we may perceive as simple, using several complex steps. Using positive reinforcement with the chaining strategies allows for each step mastered to be celebrated. **Chaining** uses task analysis to help break down the steps of performing a task.

Chaining forward and chaining backward are the two techniques used in this approach to teach skills. Chaining forward is the process of moving a person through the steps of how to do a task, from beginning to end. For example, breaking down each step of how to put on a shoe and then practising each step.

Chaining backwards is a technique where you go through the steps of a task with a person but allow them to do the final step of the task by themselves, before giving them positive reinforcement. You would also use this strategy if the person can complete the last few steps of a task. For this reason, you work backwards through the actions of a task. The person would have to master the last step before moving on to the next.

Chaining
Breaking down a task into separate steps from beginning to end and the process of practising each step.

Video: Chaining

Here is a video about backward chaining with a child who has autism. Pay attention to how the support worker uses backward chaining to reinforce the last few behaviours: aspirelr.link/yt-chaining



Note that food is used as a positive reinforcer in the video, however when you watch it, think of another positive reinforcer for behaviours:

Provided for you is a comparison for doing the laundry.

Forward Chaining	Backward chaining
<ul style="list-style-type: none"> • Separate clothes into darks and lights • Pick out the pile of clothes you want to wash • Add the correct amount of soap • Place clothes in the washing machine • Turn on the machine, select water level and cycle setting • Wait for the washing cycle to finish • Place clothes into the dryer • Check the clothes are dry • Remove clothes • Fold clothes • Put clothes away 	<ul style="list-style-type: none"> • Put clothes away • Fold clothes • Remove clothes • Check the clothes are dry • Place clothes into the dryer • Wait for the washing cycle to finish • Turn on the machine, select water level and cycle setting • Place clothes in the washing machine • Add the correct amount of soap • Pick out the pile of clothes you want to wash • Separate clothes into darks and lights

Example

Backwards chaining

Anthony is Darryl's support worker. Darryl decided in his planning session that he wants to be able to dress himself in the morning. Anthony has observed that Darryl gets quite frustrated when he puts a jumper on inside out. Anthony has decided to try the backward chain strategy to help Darryl develop his dressing skills. Anthony has demonstrated how to do the first and most challenging step for Darryl (turning it from inside out) and Anthony then helped Darryl to locate the front of the jumper by pointing to the tag inside the collar and instructing him to make sure that it was at the back. The final step, pulling the jumper over his head, was the first step that Darryl mastered, and he managed that quickly with limited initial support. Achieving this last step encouraged Darryl to keep on trying. Anthony is confident that Darryl will soon be able to manage the middle step independently. The confidence that comes from becoming independent in two steps will help him persevere in the most challenging part of the task.

Shaping

Shaping

A method of conditioning, where desired behaviour is reinforced, while undesired behaviour is not.

All of us constantly monitor and **shape** our behaviour throughout the day without even realising most of the time. For example, if we do a better workout at the gym with our trainer, we reward ourselves. As our fitness levels increase, we give ourselves different rewards.

For example, consider the following situation. Ashley is colour blind and has a slight vision impairment. Ashley's goal is to learn the difference between the social media app and the public transport app on her phone because she has been struggling to see the difference. When she presses the social media app, her support worker Will gives her a high five.

With clients who are struggling to learn new things, the principle of shaping can help to mould a person to perform a behaviour gradually. As the learner gradually improves, you can increase the difficulty level until the objective has been met. You do need to use positive reinforcement with each small achievement. For example, if someone is trying to improve their concentration, they are congratulated and encouraged each time they persist longer at a task than they did before. Shaping behaviour and learning new tasks is also about when you remove a prompt to do something.

The following example demonstrates how shaping is used to teach a person how to exit a vehicle.



How to exit a vehicle

- Press the seatbelt button and make sure the seatbelt retracts out of the way.
- Twist body around slowly by using the seat and the dashboard for leverage and support and place feet on the ground.
- Place left hand on the backrest of the seat and hold walking aid with the right hand.
- Push on the backrest of the seat and shift weight forward onto the walking aid.

For more information about shaping and chaining, visit: aspirelr.link/shaping-chaining

Video: Chaining and shaping

This video shows the differences between chaining and shaping. It also gives you tips on how to do both: aspirelr.link/yt-chaining-shaping



Example

Chaining and shaping

Theo has an acquired brain injury after falling from his motor bike in a road accident. He spent many months in the hospital and had to relearn how to talk and dress himself. Theo also now has issues with remembering and planning tasks and activities. After he got home, he received some additional funding for disability support services in his home. Theo decides he would like support to access the pool to do his rehab exercises. His new support worker, Quinn, spends some time to get to know Theo at home. She takes careful note of what he can and cannot do, and documents everything in her notes. Quinn breaks down the task of going to the pool for Theo and discusses each step with him, using the concept of task analysis. Theo agrees with her plan. Initially, Theo requires support to get his swimming bag ready and to get dressed. Using forwards and backwards chaining, Theo slowly learns what he needs to do to go to the pool. Over time, Theo initiates the task himself, and Quinn provides a reinforcer for completing each step he initiates independently.

Motivators

Motivation

A person's desire to act to achieve a goal.

Motivators may be behavioural changes to learn new knowledge or to develop a skill. Motivators can be intrinsic and extrinsic. Intrinsic **motivation** comes from within a person, it is their desire to achieve something. Personality traits and previous learning experiences usually determine our level of intrinsic motivation and how driven or passionate we are to learn that new skill or do something new. Extrinsic motivation refers to the range of rewards or positive reinforcers a person has access to, that keep motivation high.

Extrinsic motivators

- Using a reward system
- Incentives such as a lunch outing or an enjoyable activity
- Praise and compliments
- Activities align with personal interests, strengths and goals
- Activities are not too challenging
- The location is warm, supportive and enjoyable to be in

Support workers have a responsibility to empower people by encouraging them to become as independent as possible. For example, when a person takes the initiative to experiment in a learning situation, it is sometimes not necessary to give them instructions, information or advice. They may be coping perfectly well without assistance. In this situation, a support worker can encourage the person to continue in their initiative, as without encouragement, a person can feel their effort is not valued or appreciated. Therefore, if we do not encourage initiative, it may not be repeated.

To keep a person's motivation level high, a well-designed skill development plan will break a task into very manageable chunks that ensure success, achievement and engagement. If a person is unwilling to try, or does not give their best, they will not achieve the first success that will kickstart them to keep going. If there is a mismatch between the person's skill level, the level of task that needs to be achieved and the strategies to support skills development, people can become demotivated.

Demotivators

Demotivator

A factor that reduces the person's interest to participate in an activity.

Previous negative experiences of learning may inhibit a person from wanting to engage in learning. Previous failures may have encouraged people to think of themselves negatively and to have low expectations of what they can achieve. A person may react to previous shortcomings by deciding that it is easier to not try in the first place rather than risk failure and can act as a **demotivator**.



Examples of demotivators
<ul style="list-style-type: none"> • Mental health state • Support worker's inability to connect with the person • Activities that have no relevance to personal goals • Lack of rewards for positive behaviour • Low self esteem • Low self confidence • Boredom • Not having a good relationship with a support worker

If demotivators are left unchecked and unaddressed, it can create a learning block or a barrier to learning.

Blocks and barriers to learning

A **learning block** is a self-limiting belief that people have created over time – about themselves, life, and the world around them – and can often arise from a fear of failure. It is a person's negative perception of the world. For example, the person may believe they are not good enough, they do not belong, do not fit in, are not smart enough, and this can debilitate personal progress. These persistent ongoing thoughts and feelings can mean the person slips into learned helplessness, which is a considerable barrier to learning.

As a support worker, you need to help the person overcome these powerful thoughts and become their cheerleader by giving them the confidence to try.

In the following table are examples of behaviours displayed when a person has self-limiting beliefs

How self-limiting beliefs occur
<ul style="list-style-type: none"> • Making excuses, putting things off • Complaining about things • Indulging in negative thoughts and unhelpful habits • Jumping to conclusions • Worrying about failure

Learning blocks
Barriers to learning that stop a person from taking action, making decisions, achieving their goals and learning effectively.



Practice Task 8

Question 1

Match each reinforcement strategy to its correct description.

Shaping	Using a reward chart to encourage someone to demonstrate positive behaviours
Blockers	Breaking down steps to making a cup of tea from beginning to end and then practising each step
Motivators	A person's skill in mowing the lawn is improving and they are being encouraged each time they get better
Reinforcement	A person is not keen to go into a shop based on a past experience of not being understood
Chaining	A person is keen to learn to pay for items using their bank card now that they have money in an account

Question 2

Provide three examples of how positive reinforcement can provide encouragement.

Case study

Joey is 22 years of age and has Down syndrome. Marcus, his support worker, is helping Joey to improve his social skills. Joey is a happy and easy-going man and would like to work in hospitality. Marcus has been helping Joey to develop his presentation skills and is helping him learn to put on a tie and style his hair for a formal presentation. Learning to put on a tie has not been an easy task, but Joey is determined to learn how to do this.



Question 3

List three potential demotivators that might discourage Joey from continuing to learn new skills.

Joey is completing work experience at a local café performing front of house duties. Marcus takes him and picks him up for each shift. Joey would like to wear his tie while he is working.

Question 4

Suggest a time that would be appropriate for Marcus to use an informal or incidental learning opportunity.

3 B

Adapting support in consultation with others

People with a disability often have to adapt practices to match their capabilities.

Learning by experience and experimenting is experiential learning.

As a support worker, you are responsible for encouraging people you assist to use their preferred learning style to develop new knowledge and skills. Many people will learn best kinesthetically or 'by doing'.

The type of assistance you choose to apply must align with their preferred learning style when possible. Support must be communicated clearly and start at the minimum level needed for the person to complete the activity. Support should then be progressively reduced to assist the person in progressing towards total independence, gradually taking responsibility as they advance through the task.

Experiential learning

People build on their skills by doing things for themselves but not necessarily by themselves and can develop deeper understanding because it comes from a direct experience. Support may be provided via hand-to-hand, role modelling prompting or demonstration. Initially, the person may experience difficulty in the execution of a skill or process that is new and unfamiliar. Over time, with repetition and self-reflection on their performance, the learner can perform the task with greater ease. This cyclical process continues until the person has mastered the skill.

Experiential learning
Learning by doing.

Therefore, **experiential learning** is an individual, self-paced process that allows people to develop a capability directly relevant to their needs. Experiential learning starts in a structured way, using a task analysis approach and thorough demonstration of the process. If you feel confident or impatient with this process, adapt your strategy to allow more trial and error. When supporting the person to engage in experiential learning, be sure to follow organisational policies, particularly in relation to duty of care and dignity of risk.

For more information on experiential learning, visit this link: aspirelr.link/experiential-learning



Prompting and fading assistance

Prompting is a method used to help a person learn a particular behaviour or skill.

Prompting can occur where a support worker uses a verbal or visual prompt to help a person remember what they need to do when learning a new skill or desired behaviour. For example, a support worker points to a word a person is trying to remember and says it out loud. A support worker puts their finger to their lips to indicate to a client to use their inside voice.

Prompts may need to be used repeatedly, perhaps in combination, until the person can carry out the skill satisfactorily.

To prompt, you use physical directions or verbal instructions to let the person, in effect, teach themselves. As they progress through the task, you remove support so that you no longer impose your way of doing the task; instead, you encourage the person to find their way. Here are a few examples of how to apply prompts:

Gesture	Pointing, motioning, nodding, e.g. touch a person's hand to initiate an action
Visual	Using images, e.g. a photograph, drawing or diagram
Model	Demonstrating the action
Partial physical	Touching the wrist, hand, elbow or shoulder
Full physical	Hand over hand and guiding through the action
Verbal	Asking or reminding a person to do something

Fading assistance can include the gradual removal of a prompt or support and learning strategies. For example, you might start with a physical prompt of guiding a person's hands, then touching their hand, then using a verbal prompt and so on until the person can eventually do the task independently. You give the person a chance to complete a task by themselves.

Withdraw support

Before you decide it is time to withdraw support, you must first have established that the person is at no risk of harm.

If you are concerned that the person needs further help and is at risk, discuss this first with significant others, including your supervisor or the person's case manager. You also need to document your concern through an incident report and possibly through the communication book.

Prompting

An action of saying or doing something to persuade, encourage or remind someone to do something.

Fading assistance

Decreasing the level of assistance needed to complete a task, behaviour or activity.

As part of withdrawing support, you need to make sure the person has developed their skills sufficiently or has access to appropriate resources to complete the task independently. As you have a duty of care to support the person and maximise their safety without jeopardising their dignity of risk, it is necessary to discuss with your supervisor when you want to withdraw support and provide reasons as to why you feel the person is ready.

You must also prepare the person for this strategy. With clearance from your supervisor, you must inform the person and their caregivers that you feel they are ready to go it alone. This will allow for any concerns to be raised, and most importantly, the person will be able to express confidently if they feel ready.

Example

Prompt, fade and withdraw support

Jordan is learning to cross a road safely at pedestrian lights. Tracey, his support worker, is teaching him how to use the buttons on the traffic light post. The first time they do this task together, Tracey places her hand over Jordan's hand and they push the button together. The second time they cross the road, Tracey uses the same physical assistance as last time but now prompts Jordan with a verbal cue to press the button, which he does. Jordan is starting to feel confident that he will eventually begin to do this himself. The next few times they cross the road, Tracey reduces the amount of physical support she initially gave to Jordan by holding his wrist and using a verbal prompt to instruct him to push the button. The next time she has his elbow but still uses a verbal prompt.

Tracey meets with her supervisor to discuss Jordan's progress. Both are pleased with the results. For this reason, it has been decided that it is a good time to withdraw support. At her next scheduled appointment with Jordan, Tracey shares with him and his family the conversation she had with her supervisor. They feel confident Jordan will be able to perform this skill independently. Jordan is very pleased to hear the news and confidently agrees that he is ready to go it alone when the time arises. On their next journey to the local supermarket, Tracey withdraws all physical support from Jordan; in effect upholding Jordan's right to dignity of risk. Without prompts and other support, Jordan pushes the button at the traffic lights, waits for the green walking man icon to flash, and they cross the road together.



Consulting with others

The consultation process is a collaborative discussion to generate ideas, share information, and plan support for the person.

Disability is an individual experience, so it is critical to involve the person and other significant people. During the consultation process, communication will be held with:

- the person
- the support people in their lives, such as family members and friends
- the support worker
- the supervisor
- other allied health professionals involved in the support of the person.

Consultations will typically involve discussing the best methods by which support can be provided.

For the consultation process to work effectively the person, carers, family members, support worker, allied health professionals and supervisor must all actively participate in the discussion. Occasionally you may have to involve health service providers, particularly if the skill development strategies are a part of prescribed medical treatments, therapies or rehabilitation programs. In addition, families and carers play a critical role – if the person has complex communication needs, they can act as the facilitator and assist with communication.

Consultation strategies

The consultation process allows for brainstorming ideas relating to skill development, such as what needs to be learned, identifying learning opportunities, and how appropriate adaptations can be made to ensure success, ensuring that the person is fully involved in making decisions.

During the consultation process, conversation will occur around the person's learning needs. Your supervisor will be able to identify some strategies that will best work for the person. Each will be clearly explained to the person, family and yourself on how they can aid the person to achieve their goals. Being fully informed will support the person to make decisions and express their preferences.



The following guidelines should be followed to ensure an effective consultation session.

Procedure for organising a consultation session

- Set a clear purpose for the meeting
- Decide who is required to attend
- Prepare any written materials before the meeting, ensuring you have enough copies for each person
- Find a time and date that works for everyone attending the meeting and ensure that everyone is informed and reminded at least two days before
- Booking an appropriate venue like a meeting room at your organisation or meeting in the person’s home if it is more comfortable for them – ensure that the venue is accessible by everyone attending and that the venue is accessible to the person
- Make sure that you and the person you are supporting have access to transport to the meeting

Practice Task 9

Question 1

Which of the following are a way of adapting support? Tick all that apply.

- Fading
- Chaining
- Prompting
- Shaping
- Withdrawing

Question 2

Identify three benefits for hosting a consultation meeting.



Question 3

List three guidelines for consultations with the person, their support people and your supervisor.



Case study

William is 28 years of age and lives in shared housing. Due to the COVID-19 health pandemic, William and his housemates need to learn about basic hand hygiene to ensure they can take the necessary steps to protect themselves from the risk of infection. Marilyn, the disability support officer, will be teaching the group individually how to perform the task.

Question 4

Explain how Marilyn will initially support William using the prompting technique.

Question 5

Over time, William become quite confident in using soap and washing his hands while he sings the happy birthday song. List four steps Marilyn will take when using fading to encourage William to perform the task independently.



Question 6

Today Marilyn is visiting William for his regular support session. William has been practising his hand-washing skills and is very keen to show Marilyn that he can do this on his own. As she is observing him, she notes that he has not required any support from her and has mastered these skills. What does this indicate to her?



Summary

- The person supported should be regarded as the expert in their condition.
- Incidental learning happens outside of a formal learning setting and does not follow a set structure or curriculum. It can occur in almost any community setting, including the workplace and recreational activities.
- Types of incidental learning include support worker role-modelling, interactions, demonstrations, roleplay and contextualisation.
- Understanding learning styles helps to identify opportunities for incidental learning most appropriate to the person.
- Opportunities for incidental learning occur in all manner of daily living activities, including when socialising.
- Positive reinforcement, shaping, chaining, prompting and fading all work together to mould behaviours.
- People find different motivations for learning and may be motivated by rewards, recognition, discovery, attention or competition.
- Failure and fear of failure are the major blockers to learning. A support worker must encourage people to look for successes rather than failures to maintain their motivation.
- Incidental learning is often experiential; it is learning that comes from doing.
- Consultations with the person and others is important to determine how adaptations should be made.
- Gaining independence in a skill area requires experimenting and experiencing and contains a degree of risk. It also requires the staged withdrawal of support over time.
- Prompting encourages experiential learning, and prompts may be physical, visual, gestural or verbal.
- When withdrawing support, your responsibility to provide a duty of care to the person you are supporting and others must be carefully considered. A person is entitled to take necessary risks when mastering skills; supporting this is a very important part of the support worker's role.



Learning Checkpoint 3

Support incidental learning opportunities to enhance skills development

Part A

1. Which of the following statements are correct? Select yes or no for each one.

a. Incidental learning is an unplanned learning opportunity.	Yes / No
b. Experiential learning is a form of learning that occurs when engaged in a practical task.	Yes / No
c. Positive reinforcement means delaying a reward for positive behaviour so that it is more likely to be repeated.	Yes / No
d. Learning blocks develop as a result of constant criticism and negativity from a person's support network.	Yes / No
e. Praise and compliments are examples of extrinsic motivation.	Yes / No

2. Identify and briefly describe three teaching and learning strategies that can enhance the enjoyment of an experience.

3. Briefly outline the difference between prompting and fading.

4. Which of the following statements relate to consultation discussions to maximise independence and experiential learning? Tick all that apply.
- The meeting should begin with an opportunity for everyone to discuss their concerns and issues.
 - A facilitator or assistive technologies may need to be organised so that everyone has the opportunity to fully participate.
 - The person's friendship group are important guests at a consultation meeting.
 - Set a clear purpose for the meeting, such as how strategies can support the person to achieve their goals.
 - Ensure the person has the information they need beforehand so that they are fully informed and can make decisions and express their preferences.

Part B

Read the case study, then answer the questions that follow.

Case study

Damon is 27 years of age and has a developmental disability. Damon is participating in a literacy and numeracy program as part of his mutual obligations for income support. He attends class four times a week at the local community centre and is enjoying himself. He has made a few friends and in class, he is learning how to communicate with technology, general mathematics, reading and writing. His goal is to complete a course in general education for adults which will lead him to enrol in a retail course which is where his passion lies. You are his support worker and have been assisting Damon for the past few months. You take Damon to class and pick him up at the end of the day. Sometimes you help Damon with any homework he may have, and on Thursdays, straight after class, you take him to his tennis lesson.



- 1.** In the last few weeks, Damon has not appeared to be as excited about going to class. Instead, Damon says they are learning maths and he finds it boring. Today he refuses to go. Identify what might be happening with Damon and suggest two positive reinforcement actions that could motivate him to complete the maths work.

- 2.** Damon enjoys taking the bus to go shopping so you have decided to use incidental learning in this experience to help develop his math skills. Suggest two activities at a shopping outing that you can apply incidental learning to.



Glossary

Active support

A person-centred model of care that empowers people with a disability to participate fully in all aspects of their lives.

Advocate

An individual who speaks up for a person to defend their rights.

Assistive technology

Technology that enables a person to maintain or improve their capability of performing a task.

Capacity building

Helping people to develop and strengthen skills that enable them to maintain independence.

Chaining

Breaking down a task into separate steps from beginning to end and the process of practising each step.

Communication

Verbal or written exchange of information, news or ideas.

Competency

The ability of a person to demonstrate that they can do something independently.

Culturally and linguistically diverse (CALD)

The preferred term for describing different ethnic communities.

Demotivator

A factor that reduces the person's interest to participate in an activity.

Experiential learning

Learning by doing.

Fading assistance

Decreasing the level of assistance needed to complete a task, behaviour or activity.

Incidental learning

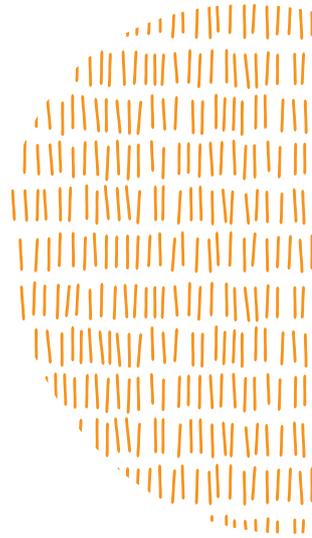
Unstructured, unplanned learning that happens in real-life situations.

Independence

Characterised by choosing and controlling one's own life and surroundings.

Interdependence

Dependence of two (or more) people in a mutually beneficial way (financially or emotionally).



Learning blocks

Barriers to learning that stop a person from taking action, making decisions, achieving their goals and learning effectively.

Mentoring

The sharing of knowledge and skills by an experienced person with a less-experienced person.

Motivation

A person's desire to act to achieve a goal.

Positive behaviour support (PBS)

A person-centred approach using positive strategies to support a person to manage behaviours of concern.

Positive reinforcement

The process of rewarding a person when a desired behaviour is exhibited.

Power

A person's capacity to exert control and influence in a relationship.

Prompting

An action of saying or doing something to persuade, encourage or remind someone to do something.

Self-assessment

Allowing the person with a disability to report their strengths and weaknesses directly to a supervisor, allied health professional or you as their support worker.

Shaping

A method of conditioning, where desired behaviour is reinforced, while undesired behaviour is not.

Skills inventory

A formal list of skills used to identify a person's level of ability in daily activities.

Social devaluation

The tendency of people to look down on those who look, dress, speak or behave differently from them and are deemed of less value and significance to society.