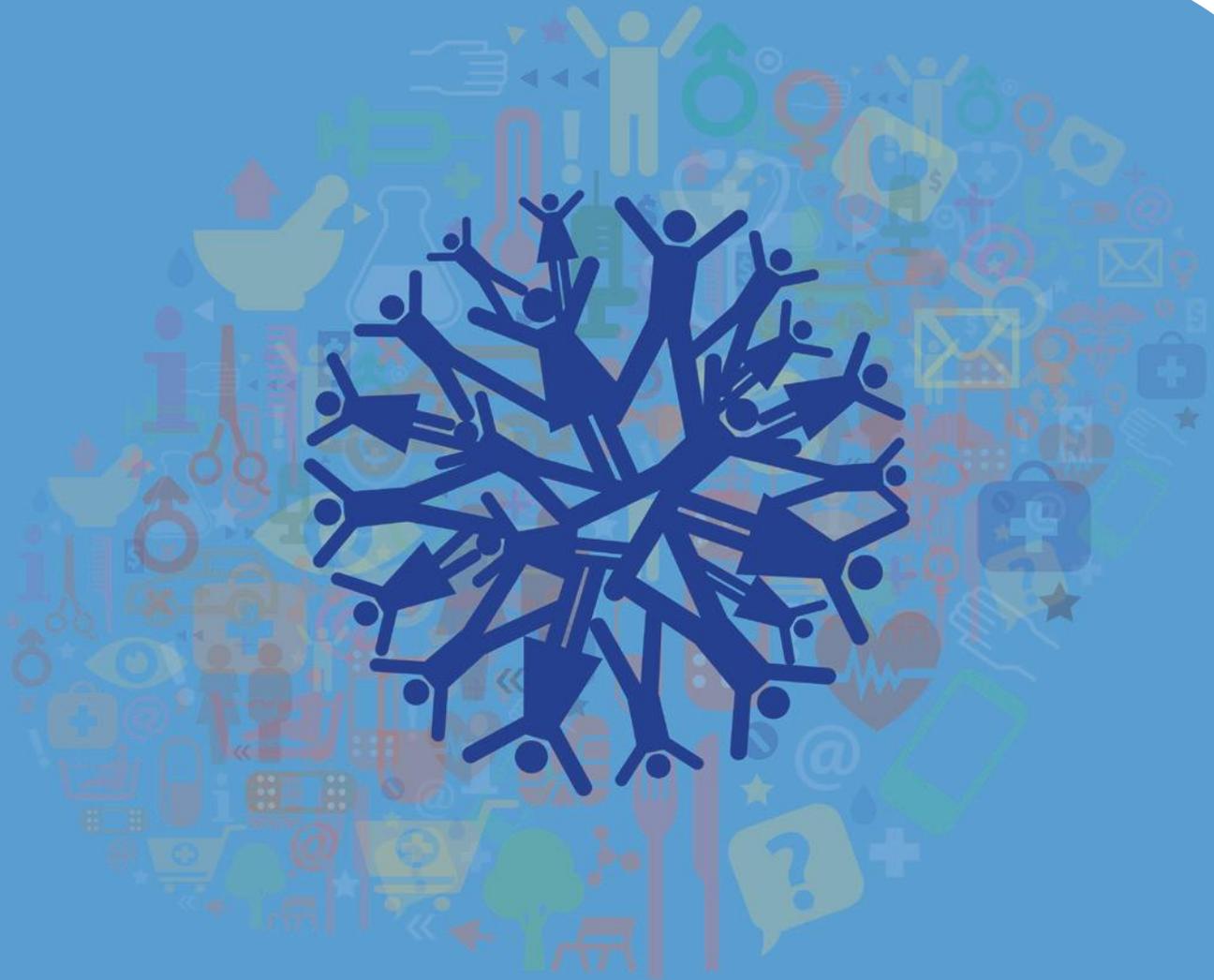


CHCDIS008

Facilitate community participation and social inclusion

Release 1



Learner guide

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Facilitate community participation and social inclusion

Release 1

Learner guide

Aspire Version 1.2



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Version control and modification history

Version	Release date	Modification
Release 1, version 1.1	April 2017	First release
Release 1, version 1.2	January 2019	Minor corrections as part of our continuous improvement program

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Level 1, 464 St Kilda Road
MELBOURNE VIC 3004 AUSTRALIA
Phone (03) 9820 1300

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Contact details

Participant

Name:

Start date:

Phone number:

Email:

Work location

Name:

Address:

Postal address:

Workplace supervisor name:

Phone number:

Fax:

Email:

Registered Training Organisation (RTO)

Name:

Address:

Postal address (if different):

Phone number:

Fax:

RTO contact name:

Mobile:

Email:

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Before you begin

This learner guide is based on the unit of competency *CHCDIS008 Facilitate community participation and social inclusion*, Release 1. Your trainer or training organisation must give you information about this unit of competency as part of your training program. You can access the unit of competency and assessment requirements at: www.training.gov.au.

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. The features of this learner guide are detailed in the following table.

Feature of the learner guide	How you can use each feature
Learning content	<ul style="list-style-type: none"> ▶ 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 and case studies	<ul style="list-style-type: none"> ▶ Examples of completed documents that may be used in a workplace are included in this learner guide. You can use these examples as models to help you complete practice tasks and learning checkpoints. ▶ Case studies highlight learning points and provide realistic examples of workplace situations.
Practice tasks	<ul style="list-style-type: none"> ▶ Practice tasks give you the opportunity to put your skills and knowledge into action. Your trainer will tell you which practice tasks to complete.
Video clips	<ul style="list-style-type: none"> ▶ Where QR codes appear, learners can use smartphones and other devices to access video clips relating to the content. For information about how to download a QR reader app or accessing video on your device, please visit our website: www.aspirelr.com.au/help 
Summary	<ul style="list-style-type: none"> ▶ Key learning points are provided at the end of each topic.
Learning checkpoints	<ul style="list-style-type: none"> ▶ There is a learning checkpoint at the end of each topic. Your trainer will tell you which learning checkpoints to complete. These checkpoints give you an opportunity to check your progress and apply the skills and knowledge you have learnt.

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.

The following table outlines specific foundation skills noted for your learning in this learner guide.

Foundation skill area	Foundation skill description
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 and making goals for yourself at work ▶ Seeking professional development opportunities for continuous improvement
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
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
Making decisions	<ul style="list-style-type: none"> ▶ Understanding and applying decision-making processes ▶ Reviewing the impact of your decisions
Problem-solving	<ul style="list-style-type: none"> ▶ Identifying problems ▶ Working out how to fix a problem using problem-solving processes and reviewing the outcome
Innovation and creation	<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

Foundation skill area	Foundation skill description
Technology and digital literacy	<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

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 outcomes	Rate your confidence in each section
Topic 1 Support person to identify and engage in social networks within the broad community	1A Work with the person to identify their strengths, abilities and support requirements	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1B Research, identify and network with relevant services to explore community inclusion opportunities	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1C Match services and networks to the person's requirements, taking into account their cultural and individual differences	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1D Work with the person to actively engage in a social network and identify any supports they may need	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1E Work with the person to identify barriers to participation and develop strategies to overcome these	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1F Identify and access appropriate resources according to organisation policy and protocols	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1G Provide information about available options	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident

Topic	Key outcomes	Rate your confidence in each section
Topic 2 Assist person and relevant others to develop and implement a community support plan	2A Support the person to develop a person-centred individualised plan	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2B Assist the person to establish their requirements to maximise community participation	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2C Assist the person to identify and access community options	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2D Assist the person to access opportunities to establish community connections	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2E Assist the person to select activities	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2F Support other workers to implement the individualised plan	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident

Topic	Key outcomes	Rate your confidence in each section
Topic 3 Develop strategies to minimise isolation for person with disability	3A Develop strategies to meet requirements for support, devices, aids and environmental modification	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3B Identify support or devices to assist with communication	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3C Determine physical barriers to participation and identify solution	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3D Recognise personal limitations and seek assistance	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3E Identify and assess cognitive deficit-related barriers	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3F Discuss travel and transport issues with the person and identify strategies to deal with these	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3G Evaluate the success of strategies	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
Topic 4 Determine risks associated with supporting participation and inclusion	4A Conduct location or activity risk assessment	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4B Discuss elements of risk	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4C Work with people to identify strategies to remove or reduce risks	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident



Topic 1

In this topic you will learn how to:

- 1A** Work with the person to identify their strengths, interests, abilities and support requirements

- 1B** Research, identify and network with relevant services to explore community inclusion opportunities

- 1C** Match services and networks to person's requirements, taking into account their cultural and individual differences

- 1D** Work with the person to actively engage in a social network and identify any supports they may need

- 1E** Work with the person to identify barriers to participation and develop strategies to overcome these

- 1F** Identify and access appropriate resources according to organisation policy and protocols

- 1G** Provide information about available options

Support person to identify and engage in social networks within the broad community

The concepts of social role valorisation (valuing a person's role in society) and community integration are key principles that underpin the way services are now designed and implemented in the disability sector. Individual person-centred programs are developed to empower people with disabilities to take their rightful place in the community and make contributions to that community.

1A Work with the person to identify their strengths, abilities and support requirements

Workers in the disability sector can be at the forefront of changing the way that people you support are perceived by the community and the level of social inclusion they achieve. For many people, their interactions with you as a support worker are their introduction to social networking. You model social networking through the way you communicate and the positive attitude you display towards community inclusion.

A social network is any group of people who come together from time to time to share interests and take part in shared activities. This may be a formal club structure or informal, for example a neighbourhood barbeque. By participating in these social networks we learn our interpersonal and communication skills, as well as many self-management skills. Much of this learning is through incidental learning and modelling. For example, we all learn our first language through social networking within our family.

Examples of common social networks and groups are shown here.

Social networks and groups
▶ Family groups
▶ Support groups
▶ Direct neighbourhood or local community
▶ Work groups
▶ Sports and other recreation groups
▶ Age-related groups (youth or senior citizens)
▶ Community centres
▶ Clubs
▶ Church groups

Inclusion of people with disabilities

In the past people with disabilities were isolated from many community and social networks. This has a negative impact on their social, physiological and emotional development and devalues the contribution they can make to the community in which they live. This isolation caused many problems including physical and mobility problems, communication difficulties and the stigma still associated with disability.

As a support worker or a supervisor in this sector, you can encourage people you support to reconnect with their community and encourage them to take part in the social activities the community has to offer.

Social integration is equally relevant for people you support regardless of the setting in which they may be living, their age or the severity of their disability. When talking about people with disabilities in this unit, the term will include individuals at any

stage of their life span: individuals living in the community, alone, sharing with others, with a partner or with family or carers; and individuals living in supported community accommodation.

Inclusion and engaging with a social network in the community, provides a person with the same level of choice and opportunity enjoyed by the rest of society. This has positive effects on wellbeing, self-esteem and opportunities in life. It improves skill levels and allows people to achieve higher social status and recognition than if the person was isolated.

Principles of active support

Even with the move towards people with disabilities living in community houses, it is still possible for them to be living amongst the community but still not be part of the community. This situation can affect anyone, but older people and the very young are particularly affected and social isolation can be a major cause of loneliness, depression and social devaluation.

In keeping with the philosophy of person empowerment, it is not your role to organise social integration activities for people you support. Rather, you should act as a catalyst to assist them to draw on the strengths and resources they possess and build on these. Active support from you may include such practical assistance as:

- ▶ transport
- ▶ meals assistance
- ▶ taking notes
- ▶ interpreting communication.



Principles of best practice: strengths-based and person-centred practice

Every organisation that provides services to people with disabilities should strive to be the best in their particular area and provide high quality services. In order to measure this, organisations compare themselves with what is considered to be the best practice, or the best way of doing things, in the industry.

Disability service providers often base their services on the following set of eight principles.

Person-centred planning

In a person-centred process, all people should have an individual service plan developed to meet their own set of goals and objectives. There is recognition that not all people with disabilities have the same, or similar, interests and a range of options must be available. In developing a person-centred plan, you are to promote community inclusion and awareness by incorporating opportunities for social networking within the community in the plan. For example, the person may decide to join a cultural group, sporting group or social club, such as a choir. This will be incorporated into their person-centred plan.

Strength-based practice

A strengths-based approach is one that recognises the importance of people's environments and the many contexts that influence their lives. This perspective recognises the resilience of individuals and focuses on the potentials, strengths, interests, abilities, knowledge and capacities of individuals, rather than their limits. It is in this way that a strengths-based approach is seen to differ from traditional deficit models. This approach invites all community members to view people with disabilities as having the ability to recover from adversity. This approach allows us to see opportunities, hope and solutions, rather than just problems, and avoids labelling. A strengths-based approach also frames service providers as partners rather than as experts or authorities, in any change process.

Building community alliances

All relationships are built over time. While initially you may seek to be part of a social network, over time you build strong bonds with some individuals within that network. Alliances between people or groups are built around shared values, shared goals and often around personal friendship. These alliances can then be used to promote and raise awareness of community inclusion. For example, a person may join an environmental group in their neighbourhood. Through working with this group, they form friendships with people who then support the idea of people with disabilities being active in the community.

Creating understanding

In addition to developing the skill levels of people through community integration, people achieve the level of social recognition and valued status they deserve only if the community understands the needs, rights and aspirations of people with disabilities and the positive contribution they can make to the community. Strategies may include school-based awareness programs, asking people with disabilities to be guest speakers at forums and seminars and encouraging people to self-advocate and take a higher profile in local community issues.

Open choices and opportunities

By encouraging the person to connect with social networking opportunities in the community, you are providing them with the same level of choice and opportunity enjoyed by the rest of society. Models that promote integration, rather than specialised services, are aimed at increasing choice. Models that still assume all people with disabilities have the same interests and that these differ from interests held by the rest of the community should be avoided or challenged.

Raising expectations

Many people with disabilities have been conditioned to have low expectations of themselves and of what the community has to offer. The movement towards disability rights has addressed this through emphasising that people with disabilities have the same basic human rights as the broader community and should not have to settle for less. While it is essential to raise the expectations of the person with the disability it is also essential to improve the perception of the community through community education.

Nurture relationships

Relationships within the community grow over time. Relationships are built by having a presence within the community and by building friendships and relationships of trust. A nurturing relationship is one where people can take risks and grow and where it is acceptable to just be themselves. People with disabilities need to actively work on building these supportive relationships across as broad a spectrum of people and situations as possible.

Work with people you support to identify their strengths, abilities and interests

A key support worker role is to work with the people you support to identify their strengths, interests, abilities and support requirements. This is the critical first step to building a social network, and requires communication skills and patience. It is unlikely to be achieved in one interview and should not be thought of as a one-off process. Where possible, one-to-one interactions with the person produce the best responses but where the person has an advocate or a guardian, they may wish for this person to be included in discussions and decisionmaking. In some cases, family members may also be included in the process.

The following tips may assist and encourage the person to identify their strengths, abilities and interests.

Helping to identify strengths, abilities and interests

Take time to establish rapport (mutual trust) and use appropriate language and communication means for people you support. Listen for more time than you talk; use active listening skills to clarify your understanding.

Ask open questions rather than closed or leading questions and use prompting, if necessary, to help people you support think through their needs. Don't make judgments, but be realistic about the person's aspirations. Build on the person's strengths and what they can already do well.

Consider all ideas and possibilities raised. Don't rule anything out no matter how it may sound to you at first.

Ask the person about their interests, hobbies, passions. Ask them what role/s they would like to play in the community and the experience they have, which may include experience gained before they acquired their disability. Find out what they would like to learn and what they would like to contribute. Help to break their goals down into achievable steps so there are early rewards.

Ask what they can do for themselves and what support they will need from others. What special resources (for example, transport, mobility aids, communication devices or support personnel) do they use or require.

Record your discussion

As you discuss the person's wishes, goals, strengths and abilities, you may choose to document your conversation in a table. This process provides a clear outline of goals and outcomes. Here is an example of the way you may choose to record the discussion you have with a person.

Interests and hobbies

- ▶ Art and craft
- ▶ Painting
- ▶ Knitting
- ▶ Traditional handcrafts
- ▶ Patchwork etc.

Strengths or abilities

- ▶ 30 years of making craft garments
- ▶ Several prizes for embroidery

Possible community role

- ▶ Join craft group
- ▶ Teach embroidery
- ▶ Judge local craft competitions
- ▶ Sell craft items at market

Opportunities

- ▶ Local women's craft group
- ▶ Producers' market once a month

Support requirements

- ▶ Person is deaf and communicates using Auslan, which makes demonstration difficult
- ▶ Will need a support person to interpret at times

Example

Help identify the person's interests

Rashini is a case manager for Wayne, who has an acquired brain injury from an industrial accident. Since the accident, he can no longer work and spends most of his time watching the television on his own. Many of his old friends and workmates have stopped visiting him. His wife tells him he should get out of the house more.

Before his injury Wayne was a train driver. When Rashini asks him about his interests, he says he is interested in trains and going on train trips. This offers several opportunities for social networking, such as joining a model train club and a local historical group that's working on restoring a vintage train.



Practice task 1

Consider a person you work with providing support or someone you know with or without a disability. Fill in this table with information that would be needed to create an individual community inclusion plan.

Name:	Examples/Ideas
Interests and hobbies	
Strengths or abilities	
Community role	
Opportunities	
Support requirements	

[Click to complete Practice task 1](#)

1B Research, identify and network with relevant services to explore community inclusion opportunities

Once you have worked with people to identify their interests and abilities, you may need to research some of the social networking opportunities available to them in their local community.

Encourage the people you support to think broadly about their interests and the roles they might play in their community. There are often many more possibilities to realise these goals than either of you are first aware of. As a facilitator in the process, you should encourage them to think about the valuable contribution they could make to the community. Participation in community groups may include acting in the role of:



- ▶ interpreter
- ▶ club secretary
- ▶ advocate
- ▶ mentor
- ▶ treasurer
- ▶ club member.
- ▶ teacher
- ▶ chairperson

Explore community inclusion opportunities

You can facilitate a person's inclusion in social networks by encouraging them to research, identify and explore the opportunities that exist within their community.

The guiding principles in this process should be self-determination and person choice. Your role is to encourage people you support to play as active a role as possible in the process and to ensure that both the process and the outcome empowers them to take part in community networking.

Exploring community inclusion opportunities:

- ▶ Identify the need.
- ▶ Research your neighbourhood.
- ▶ Identify relevant services.
- ▶ Network.
- ▶ Plan the first contact.

Identify the need

A person-centred approach allows you to target your research to services that are likely to meet the person's interests and individual needs. As we have seen, the starting point of a person-centred approach is a wide-ranging discussion about interests, strengths, goals and ambitions. This approach is preferable to simply preparing a broad list of what is available in your local community and then trying to fit people you support into one of those services. To ensure the services you identify are relevant for the individual person, ask yourself the following questions.

Questions to ask to ensure the services you identify are relevant

- ▶ What strengths and interests does the person have?
- ▶ Where would their talents be able to be used?
- ▶ What contacts do they currently have?
- ▶ With whom would the person enjoy spending time?
- ▶ Where could the person make a difference?
- ▶ Who could add to the knowledge and experience the person has?
- ▶ What roles could the person take?
- ▶ Is there someone who would be able to support the person?
- ▶ What equipment/resources are required?

Research your neighbourhood

With a clear understanding of the person's needs, the next stage is to research what social networking opportunities are available in your local neighbourhood. Do not limit your search to opportunities that are specific to disability. The aim of community integration is to encourage the person to take part in the activities of the broader community.

The aim of researching is to deepen your knowledge of the services available. You may start by looking through local publications like the local newspaper to find articles about groups in the community news sections.

To get further information about these groups, you may choose to look at their website, request brochures and pamphlets, read their publications or newsletter, or ask others about their experiences with the group.

If you have time, it may even be possible to visit their meetings or activities as an observer to see how they operate in practice.

Sources of information that you might explore include:

- ▶ the person's knowledge
- ▶ the local council or community house
- ▶ the local library
- ▶ the internet, local noticeboards and local newspaper
- ▶ church and religious groups
- ▶ peer groups and family members, neighbours and friends
- ▶ political and special interest groups
- ▶ gymnasiums and health clubs and sports groups
- ▶ seniors' clubs.

Identify relevant services

Assess the services that are relevant to the person's community integration needs by comparing what you have found in your research to the answers you gathered about the person's needs.

Consider the person's opportunities for incidental learning and the level of awareness on disability issues. Where people you support also belong to a disability network or peer support group, it may be worth asking other members about their experience of that community group or service.



Appropriateness of the social network

Once you have identified the opportunities, you need to encourage people you support to investigate the suitability of the social networking opportunity. For example, the person should find out where the group meets and any special support needs that may be required to access the activities. It is important to consider whether the community organisation may need some education to achieve full integration of the person with the disability.

Evaluate a social network:

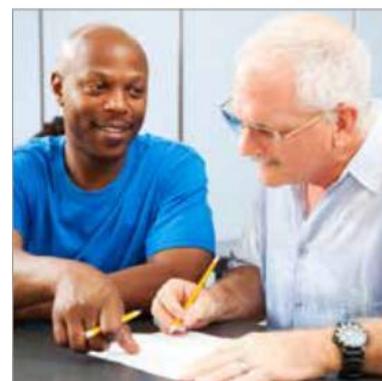
- ▶ Does it match the person's interests?
- ▶ Does it match the person's age and developmental level?
- ▶ Is it accessible? Safe? Affordable?
- ▶ Does it match the beliefs, values and expectations of the person?
- ▶ Is there a policy on inclusion and diversity?
- ▶ Does it offer opportunity for participation?
- ▶ Does it offer opportunities for learning, including incidental learning?
- ▶ Is there information available in a suitable format for the person?

Networking

Your role is to facilitate community inclusion, and when networking with the relevant services, you should encourage self-advocacy and personal choice. A good start to a new association is more likely if the person makes contact with the services rather than you undertaking it on their behalf. Making contact is an essential step in establishing the roles people you support can play in that network.

Your networking should focus on building relationships between your organisations and social or community organisations and understanding their processes, activities and approach to what they do. If you do this, your networking will benefit all the people you support, as you will be able to effectively communicate with them about a range of community options.

If initial contact is made by a support person, rather than the person who is seeking involvement, the implication is that the person is less than capable of independent networking. If the person is able to make contact themselves, it establishes a pattern of social independence and confidence.



Plan the first contact

Given that the first contact sends a message about the person’s readiness to network independently, it is essential that this contact is well thought through. Once you have decided on the relevant services to be contacted, a primary set of questions can help you decide what support the person needs in this process.

Much of your questioning should aim to build a picture of what the person can do for themselves and what assistance they require. This picture will help you plan to take backseat during the initial contact while still exercising your duty of care.

Here is information you need from your discussions with the person you are supporting.

Work with the person to identify their support needs

What service do they wish to contact?

How and when do they wish to make contact?

Who do they want to make the contact?

What information do they need to gather from the contact?

What outcomes are they looking for from the contact?

How will they assess whether the contact was satisfactory?

Example

Identify networking opportunities

Once Rashini identifies that Wayne is interested in trains, she is able to identify two networking opportunities for him in the local area. These are a model train club that meets every Tuesday and open their facility to children on the weekend, and a group of local volunteers who are restoring a vintage train. Together Rashini and Wayne work out whether these social networking opportunities are appropriate for him.

They discuss access to these locations by public transport and whether the clubs have any policies on encouraging diversity. Wayne decides that he would like to visit both groups to determine their suitability. Rashini organises for a support worker to accompany him. Wayne likes the people at the model train club but decides he is not interested in joining the volunteer group that is restoring the vintage train. He feels that the work they are doing seems complicated and confusing and that the train is much older than the ones he used to drive.



Practice task 2

Networking opportunities exist both in the physical and virtual world. Online social networking is a great potential source of opportunities and information.

Conduct some research online to find out about forums, groups and online communities that share information about social activities and events in your local area.

Complete this table with your findings.

Name of site and web address	Type of resource	Area of interest	Method of involvement available

[Click to complete Practice task 2](#)

1C Match services and networks to the person's requirements, taking into account their cultural and individual differences

Once you have researched and identified relevant services that may provide social networking opportunities for people you support, the next step is to ensure the best match between the person's needs and the services available.

While being open to all possibilities in the initial stages will maximise the person's choice, they may make it clear that some options do not fit with their cultural or spiritual beliefs.

Another important factor in getting a good match between person and social networking opportunity is to ensure that the activity or group is age appropriate. This is not always simple because the person may have interests that are quite unusual for a person of their age.



Recognise individual choices and differences

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 a *Disability Services Act 1986 (Cth)* and the *Disability Discrimination Act 1992 (Cth)*.

The main objectives of these conventions and legislation are to:

- ▶ prevent discrimination against people with disabilities
- ▶ ensure people with disabilities have the same rights as others in the community
- ▶ support self-determination and choice in the provision of any services to people with disabilities.



National Standards for Disability Services

From this legislation, the government has developed a set of six standards to define the way services should be delivered to people with disabilities and the philosophies that should underpin those services.

These National Standards include information and guidance about the following topics.

National Standards for Disability Services

1. Rights
2. Participation and inclusion
3. Individual outcomes
4. Feedback and complaints
5. Service access
6. Service management

Compliance with standards

Agencies that provide disability services are measured against these standards for compliance and to show they operate according to these best practice benchmarks. The aim of these standards is to empower the people you support by recognising and valuing their individual differences, and encouraging person-centred decision-making, participation and integration.



Each state government, and many local governments, has set in place an action plan to promote these concepts and your organisation will be working in conjunction with the government to implement these policies.

You can find out more about action plans in various states at the Australian Human Rights Commission website:

<https://aspirelr.link/ahrc-disability-action-plans-and-guides>

Spiritual and cultural differences

Australia is a multicultural society where people of many diverse backgrounds live. Cultural and spiritual differences can affect community networking opportunities in many ways.

Cultural and spiritual traditions can impact on communication, values and beliefs, mixed gender interactions and attitudes to others from other traditions. Refrain from making judgements about these differences and support the person through the matching process to make an informed choice based on the facts and practicalities. Ultimately, the decision on whether to take up a social-networking opportunity or not must be left up to the person.

Factors that can affect networking opportunities along with examples of each are outlined here.

Gender and age

In many cultures, it is not considered appropriate for people to attend gatherings with members of the opposite sex unless they are chaperoned.

Language

Many people from a non-English speaking background prefer to network in their first language.

Values and beliefs

Most people are more comfortable mixing with people who have similar beliefs. These may include political beliefs, moral values or ethical concerns such as global warming and climate change.

Religion

People with strong religious beliefs may wish to network mainly with people who hold similar religious convictions. Conversely some people may not want to be associated with groups that have any religious or spiritual connections.

Sexuality

Sexuality may play a key role in what group your person wishes to join. Where people you support identify as gay, bisexual or transgender, this needs to be taken into account in linking them to social-networking opportunities.

Food

People may have cultural beliefs about the sharing and preparation of food. For example, if a person's diet is kosher or vegan they need to be in an environment where these dietary needs can be met.

Hygiene, dress and grooming

There is a cultural aspect to what is considered appropriate hygiene, dress and grooming. Women from many different cultures are not able to take part in activities where parts of their body are exposed, particularly to members of the opposite sex.

Rites and rituals

Religious beliefs may dictate celebrations and attitudes to activities; for example, Jewish people may want to observe the Sabbath and are not allowed to perform any task considered work on that day.

Historical differences

Long-standing traditional rivalries between different ethnic groups must be taken into account. People you support from some African and Middle Eastern communities may still feel the divisions and hostilities that have affected their communities in the past.

Public holidays

Many public holidays in Australia are based on the Christian religion. It is easy to forget that each religion has its own holy days that need to be preserved and respected.

Prayer time

Some religions dictate set prayer times that must be observed. These may typically be at midday, dawn or sunset. People you support need to be able to observe these times while engaged in social networking.

Family and traditional roles

There are many traditions in family roles that need to be considered. In some Asian cultures it would be inappropriate for the man of the house to enter the kitchen. People you support may also have knowledge of traditional arts and crafts that they are keen to preserve. These can be used positively for social networking.

Principles of lifespan development

As people age, they go through typical stages in their physical, cognitive and psychosocial development. People with disabilities may go through these stages in an atypical way or at a different rate.

As a support worker you do not need to know all the various impacts of different disability types on a person's development. It is useful to be aware of common changes that occur at the typical stages of childhood, adolescence and adulthood.

Different theories of lifespan development have differentiated development into different stages but these categories are quite arbitrary.

Psychosocial needs change across a person's lifetime and so should their social network. The typical impacts of six lifespan stages on a person's psychosocial needs are detailed here.

Typical changes in a person's psychosocial needs



Infancy

Independent behaviours increase with parental encouragement around feeding, dressing and toileting.

Ability to relate to playmates emerges at the end of this period.

Early personality traits begin to develop.



Childhood

Awareness and involvement in outside world increases.

Interpersonal strategies develop to help in understanding other's behaviour.

Peer group becomes more important and dependence shifts to friends for help and sharing of mutual interests.



Adolescence

Sexual orientation emerges.

Strives for autonomy and independence from family.

Conformity to peer pressure increases.



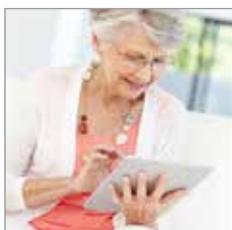
Early adulthood

The need for affiliation is filled by friends and/or a partner
 Friendships very important to people who are single
 Personality traits most likely to change up to the age of thirty



Middle age

Mid-life crisis occurs in a small minority of cases.
 Personality traits tend to stay stable.
 Experience of facing age discrimination is more likely.



Older age

Improvement in ability to cope with stress, reduce negative emotions and manage personal relationships.
 Satisfaction with life largely dependent on family environment.

Identify relevant services

Make a point to learn about a person's individual and cultural differences, take into account their age and stage of development and research services which may meet their needs. Then you can work with the person you are supporting to decide if the inclusion opportunity is a good match for them.

This matching process should be person-led as much as possible. Your role is not to decide which service best matches the person's needs. Your role is to assist the person to evaluate the options that are available and make an informed choice about the opportunities they will decide to pursue.

Match needs to opportunities

To facilitate this matching process, you can make a list of the opportunities you have researched and consider any additional information you have found. You will then need to assist the person to evaluate these against the criteria that are important to them.

The following criteria should be used in this matching process:

- ▶ Does it match their interests?
- ▶ Is the location suitable?
- ▶ Is access suitable?
- ▶ What are the attitudes and awareness about disability and diversity?
- ▶ Is there an opportunity for learning?
- ▶ Is there an opportunity for contribution?
- ▶ Are there opportunities for social engagement?
- ▶ Is it an ongoing opportunity?

Tool for matching needs to opportunities

The person may find it beneficial to document this matching process in a table similar to the one following. Once you have assisted people you support to evaluate the options in this way, you should then discuss which is the preferred option and why. Your aim is to assist people you support to make an informed choice and to impart incidental learning on the decision-making process.

Criteria	Option 1	Option 2	Option 3
Match interests	Good match	Good match	Some match only
Location	Close	Close	More than 10 kms
Access	Ground floor and on public transport	Ground floor 1 km from public transport	Accessible by ramp Opposite train station
Attitudes to diversity	Helpful and interested in new members	Disability friendly Waiting list to join	Unclear
Opportunity for learning	New skills Social activities	Structured learning	Social activities Few new skills
Opportunities for contribution	Open to new members	Waiting list to join	Open to new members
Opportunities for social engagement	Many social activities	Appears limited	Many social activities
Opportunity is ongoing	Yes	Yes	Yes

Who is involved?

The matching process is usually undertaken by the person and a support person.

Where the person is a child or has an intellectual disability or a cognitive impairment, it may be necessary to include a parent, guardian or advocate in the decision-making process. If the person has a case manager, this process would be conducted by, or in conjunction with, their case manager.

In some cases, it may be necessary to ask other health professionals to assist with the matching process. For example, they can advise on mobility, access or social behavioural issues.

Example

Match networks to meet the cultural needs of a person



George wants to join a social network where he can play cards. He is a good card player. George is of Greek origin and is suffering from depression after the death of his wife. While there is a bridge group at his local senior citizens club, he wants to go to a club where only men gather to play cards and where they speak Greek as the preferred language. He explains that in his culture, that is how cards are traditionally played.

Practice task 3

Toby is fifteen years of age and has Down syndrome. He has good coordination and likes to play sport. He decides he wants to join a sports club but is unsure whether he wants to join a tennis club or the local cricket club.

Toby and his support worker visit both clubs. The cricket club meets at an oval near his house. The tennis courts are on a bus route that he has used once. At each club, Toby watches the members playing and then walks over to introduce himself. The coach at the cricket club offers to let him have a bat and tells Toby the coach will focus on his batting or bowling or both skills depending what his goals are. The secretary at the tennis club says they are always looking for new members but says they always start new members playing doubles first so they get to know another member well and learn from them.

The tennis club plays all year round while the cricket club only plays over summer. The cricket team is mainly made up of younger guys and they are encouraged to take turns of captaining the team. The tennis teams all have designated captains and are made up of both men and women of all ages.

Toby is interested in both sports but decides that the cricket club would better meet his needs as he can walk there from his house. It also offers more opportunities for social interaction as he would be playing with a team of other players every week. He also thinks the people there are friendlier towards him.

Use this criteria comparison chart to evaluate Toby’s options against the criteria listed in the first column.

Criteria	Option 1 – Cricket Club	Option 2 – Tennis Club
Match interests		
Location		
Access		
Attitudes to diversity		
Opportunities for self-determination/ expression of rights		
Opportunity for learning		
Opportunities for contribution		
Opportunities for social engagement		
Opportunity is ongoing		
Age appropriateness		

Click to complete Practice task 3

1D Work with the person to actively engage in a social network and identify any supports they may need

A lot of planning goes into matching the person to appropriate opportunities for them. This helps to lay the foundations for successful participation in a group or social activity that may act as a springboard for forming a broader social network.

Successful engagement involves another matching process: that of matching the right level of support to the person's needs.

Once you have completed the following steps, you need to discuss the support the person may need in order to actively engage in that network.

- 1 Work with people you support to identify their interests and abilities.
- 2 Discuss and identify the appropriate social networking opportunities available to them in their local community.
- 3 Go through a process to find an opportunity which best matches their requirements.
- 4 Plan and complete first contact.

A strengths-based approach

Becoming involved is often a first step. If a community opportunity really works for someone, it may lead to a deeper involvement in a position of responsibility or leadership.

While it is sensible to take things slowly when supporting some people, be careful to never close off or disregard a range of possible roles.

As strength-based approach sees you as a partner and facilitator in the process, not an expert on what is and is not possible. You should encourage the person to think about the valuable contribution they could make to the community. The person may take up many roles as part of their community participation.

Some of the roles a person may take up include:

- ▶ interpreter
- ▶ mentor
- ▶ teacher
- ▶ club secretary
- ▶ club treasurer
- ▶ chairperson
- ▶ advocate
- ▶ member.

Support needs

Once you have established the appropriateness of the social network, you need to encourage people you support to assess their support needs in relation to taking an active role in the support network.

It may be necessary to break down activities into the tasks involved. You may need to consider the activities the network offers, the procedures for joining the club, the money required to pay for the membership or activity, and the transport issues to get to and from the social networking opportunity.

In conjunction with the task analysis, you need to encourage the person to look at their support needs in terms of resources. It may also be necessary to undertake an initial visit to the social networking group in order to ascertain its appropriateness and facilities. There are a number of questions you need to consider as part of this task analysis.

In breaking the activities into tasks:

- ▶ Can people you support perform this task independently?
- ▶ Will they be able to perform the task with prompting and faded prompting?
- ▶ Will they require ongoing support to perform aspects of this task?

Example

Actively engage the person in a social network and identify supports they may need

Fifteen-year-old Toby has been involved in his local cricket club for only one season, but as the new season approaches he is very excited to begin training again. Over the off-season he has watched a number of training videos and he has been bowling to his brother in the practice nets at the local park for months.

Toby is usually first to training and always brings his cricket bag and a collection of balls along with him. Although Toby is younger than many of his teammates, his coach is impressed with his enthusiasm and dedication. As Toby has chosen to focus on his bowling, the coach asks Toby whether he would be comfortable helping to organise the bowlers at practice.

The coach is annoyed that everyone seems to sit around waiting for him to arrive at practice and that they are wasting some valuable time for a bit of extra practice. Toby is unsure that the rest of the players will listen to him, but the coach tells him not to worry; 'I'll word them up. If anyone has a problem with you giving a few pointers they can speak to me and explain why.'



Practice task 4

Read the case study, then answer the question that follows.

Case study

Maree is a 59-year-old client who uses a wheelchair. She contracted polio as a child and is partially paralysed as a result. She has good mobility over short distances but she tires over longer distances. This is a problem, as she can suffer from shortness of breath and uses a ventilator at night.

Maree wants to join a disability advisory group at her local council. She lives on her own in a unit very close to a train line that will take her to a stop near the local council office. She has used public transport before. Once she gets to the station near the council chambers, she must cross a busy intersection and go around to the side of the building for ramp access.

You have been asked to support Maree in this venture by assessing the appropriateness of the opportunity. Clearly the opportunity to be on an advisory council offers a valued role in the community. The issue for Maree is how to get there.

What support would you provide to Maree in order to help her take up the role?

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Click to complete Practice task 4

1E Work with the person to identify barriers to participation and develop strategies to overcome these



In order to achieve social inclusion for people you support, you need to work with them to identify any barriers that may prevent them from accessing the community. Some of these barriers are physical, while others are rooted in negative community attitudes.

Identifying these barriers should be a consultative process and your focus should be on the individual person and their particular needs in order to achieve participation and inclusion.

The social model of disability

The current practice of inclusion and integration of people with disabilities into their local communities is based on the social model of disability.

The social model of disability detailed by Wolfensberger and others became widely accepted from the 1980's onwards, slowly replacing other ways of thinking about disability. This model stood in contrast to the medical model that had implicitly regarded disability as an individual deficit that needed to be managed, treated or cured.

The new model regarded disability as something that was socially constructed. While impairment was real, the disadvantage, isolation and marginalisation that people with a disability felt came largely from societal attitudes and stigma.

New government and community policies and practices were the natural results of a shift in the way society was encouraged to see disability. Strength based approaches and capacity thinking replaced the deficit view with a difference view of disability.

Social role valorisation, a key social theory, proposed that only by fulfilling valued and respected roles in society would people with a disability avoid the stigma and discrimination that they had always experienced.

Here are examples of how social devaluation negatively impacts a person's quality of life.

Society highly values certain qualities, characteristics, roles and abilities

- ▶ The prevailing societal values indicate or even dictate what qualities people in that culture must have to become valuable or desirable, for example; beauty, wealth, competence, youthfulness, independence. People who outwardly seem to have these valued characteristics in one area are assumed to also be able in other areas.

Society does not value other qualities, characteristics, roles and abilities

- ▶ The opposite qualities and characteristics are not valued, for example, disfigurement, poverty, incompetence, advanced age, dependence. Society has low expectations of people who show some devalued qualities or characteristics believing that they cannot make worthwhile contributions in any areas of society.

People judge themselves against society's values

- ▶ People do not challenge the commonly held societal values themselves. They become societal norms. Devalued people come to see themselves as society regards them. If society does not see value in them, they come to see themselves as worthless.

People see themselves as devalued

- ▶ When people see themselves as devalued, they may become depressed, withdrawn and have low confidence and self-esteem. They may be discouraged from interacting with others for fear of rejection and so they become isolated and lonely.

Participation and inclusion



There are many advantages to social inclusion for people you support. They include raising the status of the person concerned through skills development and also educating the community about the rights, aspirations and abilities of people with disabilities. State and federal governments have embraced policies of community integration, empowerment and increased independence for people with disabilities. These policies promote independence and help to eliminate the idea that people with disabilities are in some way separate from the broader community; for example, the establishment of community houses where a small number of residents live together and are closely involved in the planning and running of their shared house.

While these houses are mainly situated amongst the general community, this does not guarantee integration into that community. Without affirmative strategies for community integration, residents can become isolated from what is often a largely inaccessible community around them.

Social inclusion can help restore the inequity caused by past negative attitudes to disability. It can give people with disabilities a stronger voice to advocate for themselves. It is a basic principle of self-determination that all aspects of the community should be accessible to people with disabilities. This is supported by equal opportunity legislation and the *Disability Discrimination Act 1992* (Cth).

Barriers to participation and inclusion

Many of the barriers that exist for people with disabilities exist because the broader community is unaware of their needs and the contribution that they can make to society.

Examples of barriers that may affect participation and inclusion in the wider community are outlined here.

Stigma

- ▶ Assuming people with physical disabilities also have intellectual disabilities
- ▶ Assuming people with intellectual disabilities are eternally childlike
- ▶ Assuming people with disabilities do not have relationships, partners, children and are not sexually active
- ▶ Assuming people with disabilities are ill and should be treated as patients
- ▶ Assuming people with psychological disabilities are dangerous and cannot be trusted
- ▶ Concepts of beauty and body image are not inclusive of disability
- ▶ Concerns that disability may be hereditary or contagious

Skills

- ▶ Lack of mobility skills
- ▶ Lack of fine motor skills
- ▶ Incontinence
- ▶ Varied communication skills
- ▶ Impaired cognitive skills
- ▶ Delayed development due to institutionalisation and poor education or life experiences and opportunities
- ▶ Delayed development due to genetic factors

Behaviour

- ▶ Lack of exposure to socially acceptable behaviour
- ▶ Spasms and involuntary reflexes
- ▶ Inability to mix freely with others
- ▶ Need to plan rather than be spontaneous with actions such as staying out later or sleeping in
- ▶ Lack of privacy to develop relationships
- ▶ Reliance on others to get up and start the day

Transport

- ▶ Lack of suitable public transport
- ▶ Lack of private transport
- ▶ Unreliable taxis
- ▶ Reliance on community bus
- ▶ Unable to walk between sources of transport

Accessibility

- ▶ Inaccessible buildings, toilets, change rooms
- ▶ Information in inappropriate forms for people with sensory impairments
- ▶ Signs, footpaths, fences, stairs and other obstacles

Finance

- ▶ Approximately 80% of people with disabilities live below the poverty line
- ▶ Specialised services are more expensive
- ▶ Less able to shop around due to mobility issues

Work with the person to develop strategies to manage barriers

As a support worker with direct involvement in the person's program or as a supervisor responsible for the development of community integration plans, you are in an ideal position to assist people you support to develop strategies to manage potential barriers to their community involvement. These strategies are best divided into short-term strategies to remove immediate barriers and long-term systemic strategies.

In working with the person to develop strategies to reduce potential barriers to social inclusion, you need to be familiar with your organisation's policies and procedures. You must also work within the role boundaries set out in your job description. Where strategies are outside of your job role, people you support may need the assistance of a professional advocate.

Examples of short- and long-term strategies to overcome potential barriers are shown below.

Stigma

Short-term strategies:

- ▶ Provide accurate information to the potential social network about the specific disability of the person and the issues relevant to the particular social network.
- ▶ People you support may explain their disability to the network.
- ▶ Have a physical presence out and about in the community.
- ▶ Encourage self-advocacy

Long-term strategies:

- ▶ Community education programs on the rights of people with disabilities
- ▶ Disability awareness sessions
- ▶ School education programs on disability
- ▶ Person-centred plans
- ▶ Community integration planning
- ▶ Systemic advocacy
- ▶ Affirmative action campaigns
- ▶ Creating positive images of disability in the media

Skills

Short-term strategies:

- ▶ Task breakdown
- ▶ Task mastery
- ▶ Prompting and faded prompting
- ▶ Peer support
- ▶ Mentoring
- ▶ Demonstration
- ▶ Role-play
- ▶ Use of aids and equipment

Long-term strategies:

- ▶ Individual skills development plan
- ▶ Skill development program
- ▶ Monitor and evaluate skill development
- ▶ Formal training program
- ▶ Policies of social integration and inclusion
- ▶ Greater access to learning opportunities
- ▶ Disability education standards

Transport

Short-term strategies:

- ▶ Plan the route
- ▶ Consider using a taxi
- ▶ Practise the route with a companion
- ▶ Car share
- ▶ Community bus

Long-term strategies:

- ▶ Lobby for accessible public transport
- ▶ Modification of stations and platforms
- ▶ Transport concession card
- ▶ Accessibility transport plan

Accessibility

Short-term strategies:

- ▶ People should know their rights and be assertive about them
- ▶ Research accessibility beforehand
- ▶ Support person to accompany to social networking opportunities
- ▶ Advise social network of needs before joining network
- ▶ Ask for information on policies on diversity
- ▶ Ask for reasonable adjustment such as ramp and rails

Long-term strategies:

- ▶ Lobby for legislative reform
- ▶ Approach local councils about local issues
- ▶ Join reference and advisory groups
- ▶ Disability action plans for all levels of government
- ▶ Lobby for information in an accessible form for people with a range of disabilities
- ▶ Lobby for changes to building codes
- ▶ Promote best practice rather than minimum standards

Money

Short-term strategies:

- ▶ Draw-up a budget
- ▶ Shop around for comparative prices
- ▶ Use concession card
- ▶ Share cost of transport if possible
- ▶ Consider free community services

Long-term strategies:

- ▶ Apply for funding and grants
- ▶ Approach philanthropic trusts
- ▶ Seek employment (full-time or part-time)
- ▶ Undertake financial planning

Example

Develop a strategy to manage a potential barrier

Ranmali is vision impaired. She is about to start school and her parents are worried that the other children will not accept her. They want her to attend a mainstream school, so they visit the school before she enrolls there and discuss her needs with the teacher.

The teacher says the school has a strong focus on diversity and inclusion and that they engage in inclusive communication techniques such as signing and reading Braille at every year level.

This works well as the students enjoy these activities and it allows Ranmali to be the expert in this style of communication.



1F Identify and access appropriate resources according to organisation policy and protocols

In order to access their social-networking opportunities, people may need to acquire additional resources. As a support worker or a supervisor in the disability sector, you must work within the protocols and policies of your organisation to identify and access the appropriate additional resources.

If you are unclear about your role in this area, you should read your job description and your duty statement. Read through your organisational policies on resource acquisition as the process and responsibilities will be set out there.

You may also need to speak with your manager; the person’s case manager or the person’s funding body to find out the processes and protocols that are required. This may involve an assessment by another health professional specialising in the areas of mobility, communication or behavioural issues.

Resource needs

Below are the major types of resources that people may need to access so they can participate in community activities.

Special transport	Mobility
<ul style="list-style-type: none"> ▶ Special taxi ▶ Accessible public transport ▶ Accessible platform at station ▶ Driver ▶ Community bus 	<ul style="list-style-type: none"> ▶ Wheelchair (electric or manual) ▶ Walking frame or cane ▶ Guide dog ▶ Motorised scooter
Communication	Personal
<ul style="list-style-type: none"> ▶ Communication devices ▶ Auslan interpreter ▶ Telephone typewriter ▶ Communication board ▶ Electronic form for information ▶ Large print ▶ Braille ▶ Reading material ▶ Audio books 	<ul style="list-style-type: none"> ▶ Recreational officer ▶ Respite support ▶ Personal care ▶ Meals assistance ▶ Mobility assistance ▶ Note-taker or page-turner ▶ Driver

Policies and procedures

In some cases, it may be necessary for the support worker and the person to learn to use new equipment and new resources as they are acquired. Your organisation has a duty of care to ensure you are adequately trained in these changes. The training you receive should be documented and recorded on your individual training plan.

The person's plan and program should also be amended to indicate the inclusion of these resources and the appropriate use of them. Make sure you are familiar with these changes for your protection and the person's protection.

Where funding is not available for the resources required, it may be possible to apply for additional government funding or for a grant through a philanthropic trust. You will need to read your organisation's guidelines in this area.

When identifying and accessing appropriate resources, you need to be familiar with the organisational policies and protocols on acquisition of resources.

Organisational policies and protocols on acquisition of resources:

- ▶ Duty of care
- ▶ Dignity of risk
- ▶ Person choice
- ▶ Transporting person in support worker's vehicle
- ▶ Work health and safety (WHS) and manual-handling policies
- ▶ Professional boundaries

Example

Access resources to meet person's needs

Sophie has an acquired brain injury from a brutal assault. She identifies that she wants to join a police reference group on domestic violence against women. In order to be able to attend the meetings, she needs additional funding for a support worker to accompany her and she negotiates with the police department to install a temporary ramp for access to the building. Her service provider identifies funding for respite that Sophie could use for the support worker. The police department pays for the ramp to be installed.



Practice task 6

Check your organisational guidelines on acquisition of resources for persons you support and write a summary of the key points.

If you are not currently working in the field, contact a local disability agency and interview the manager.

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[Click to complete Practice task 6](#)

1G Provide information about available options

You should always encourage people to research information on options available in their community for themselves. This increases their skill level and provides a sense of empowerment. In addition, people are more likely to commit to projects in which they have invested their own time and energy.

When working with people who do not have the cognitive capacity to conduct research for themselves, or who lack the motivation to do so, you may be required to provide information to them, their advocate or their primary carer.

For example, when you are working with children or people who have had a guardian appointed on their behalf or if a family feels too overwhelmed to know where to start to research opportunities for the person. In these cases you can provide information to the family who can then initiate contact with relevant services.

Information may be provided verbally or in written form, or in a combination of the two. Your aim is to facilitate their engagement with the information provided and use it as a step towards community integration.



Provide information

Information may well cover initial details of the services and opportunities that are available from the local neighbourhood. Your organisation probably maintains a database on disability-specific services and disability accessible opportunities. If you are using such a database, talk to your colleagues about their experiences with the opportunities that appear to match the person's needs.

When providing information about available options to people, or their advocate or primary carer, you must ensure the information you provide is going to be received and understood.

Make sure the information you provide:

- ▶ is accurate
- ▶ is in a form the person can comprehend
- ▶ is concise and does not cause information overload
- ▶ is suitable to their level of development and age
- ▶ is relevant to their goals and needs
- ▶ is presented in a value-free way
- ▶ offers person choice.

Present information

It is important that the information is presented in a form that is accessible to the person. Where persons are unable to communicate verbally, ensure you use their preferred method of communication. This may mean preparing the information in picture form. The communication may take longer so allow plenty of time to ensure the person has understood and can provide feedback to you. The more they understand, the more meaningful the process of choosing an option is to the person.

The literacy skills and cognitive ability of persons vary enormously.

General rules for communicating with persons:

- ▶ Write in plain English.
- ▶ Consider pictorial forms such as storyboards or communication books.
- ▶ Consider a combination of text and illustrations or use audiotapes.
- ▶ Supply large-print versions where applicable.
- ▶ Provide Braille version for persons with vision impairment.
- ▶ Provide the information in the person's preferred language such as Italian, Vietnamese or Auslan.
- ▶ Present a chart comparing the options.
- ▶ Offer to read information aloud and speak clearly.
- ▶ Provide the person with a summary, if necessary, to make sure they have understood.

Advocates, guardians and primary carers

If providing information to an advocate or guardian, ask if they would like the information provided before the meeting, so that they have time to consider it. Remember that a legal guardian can make decisions on the person's behalf and you need to justify how the options you have developed meet the individual needs of the person.

In some cases, you may also need to present information to the person's primary carer. Opportunities for social networking often affect the carer and the person, so it is reasonable to assume they play a part in analysing relevant information.



Example

Provide information about available options

Hector has dementia and is becoming very argumentative. His partner, Lynn, finds it difficult to look after him as she still works part-time.

One of Hector's support workers, Oscar, researches details for a day centre that Hector could attend while Lynn is at work. Oscar knows that the information will be useful for Hector and Lynn so he waits until he can see them both. He gives Lynn a brochure and talks to her about the centre. He shows Hector a photograph of the building that houses the day centre.

Lynne agrees that it is an option worth following up. It will provide some respite for her and give Hector a chance to mix with other people during the day.



Practice task 7

Gather some information on a service that you think may be useful to a client with cerebral palsy, who cannot communicate verbally and who wants opportunities to volunteer within the community. Prepare your information in a suitable form to present to the person.

Consider:

- ▶ how much information to give
- ▶ how the client can respond and give feedback on the information
- ▶ appropriate text-based information
- ▶ appropriate visual information such as photos and brochures
- ▶ the verbal communication style required
- ▶ who else may need to be given the information and in what form.

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Click to complete Practice task 7

Summary

1. Support networks should be matched to the person’s strengths, interests and abilities.
2. You will need to work with persons to identify their support needs.
3. Barriers to social networking opportunities include stigma, skill levels, behaviours, transport and finance. You should work with persons to develop strategies to overcome these barriers.
4. In addition to encouraging persons to participate in social networking, you can encourage community education and awareness about the needs and rights of people with disabilities in order to increase their social status.
5. It is necessary to research and explore social networking opportunities and identify their appropriateness to the person’s individual needs.
6. You may be required to provide information on networking opportunities to persons, their carer or their advocate.
7. Individual differences and cultural and spiritual needs should be considered in the process of identifying social networking opportunities.

Learning checkpoint 1

Support person to identify and engage in social networks within the broad community

This learning checkpoint allows you to review your skills and knowledge in supporting a person to identify and engage in social networks within the broad community.

Part A

The following table shows the principles that underline the move towards encouraging social integration for people with a disability.

1. Complete the table by stating briefly in the second column, your role in supporting the principles. In the third column, give an example of something you would do that demonstrates that principle. The first line has been completed for you as an example.

Principle	Your role	Example
Understanding and reducing stigma	Know that many people still see disability as a 'handicap'.	Ask people to always address the person you are supporting first and not ask you what they would like.
Legislative process and rights of people with disabilities		
Principle of active support		
Relevant policies and protocols		
Strengths-based and person-centred practice		
Support community integration		

1. What strengths, interests and abilities does Thai have that he could share with others in a social network?

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2. What benefits could there be to Thai Lim from connecting with a social network?

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3. What disadvantages would Thai Lim be likely to experience when he leaves school if he does not become more socially connected and why?

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4. What support might he need?

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5. What kind of networking opportunities would you suggest?

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6. How would you research them further?

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7. What barriers do you see and how would you overcome them?

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8. What additional resources would Thai and his family need?

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9. How would you go about providing information to Thai and his parents about the options available?

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10. What cultural or spiritual factors would you consider?

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11. List three communication techniques that would assist you to work with Thai Lim and his family to identify strengths, provide information and support Thai to actively engage in a social network?

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12. How would you apply what you know about principles of lifespan development to supporting Thai to participate in the community? How might his support needs change in ten years time?

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Topic 2

In this topic you will learn how to:

- 2A Support the person to develop a person-centred individualised plan**
- 2B Assist the person to establish their requirements to maximise community participation**
- 2C Assist the person to identify and access community options**
- 2D Assist the person to access opportunities to establish community connections**
- 2E Assist the person to select activities**
- 2F Support other workers to implement the individualised plan**

Assist person and relevant others to develop and implement a community support plan

As a support worker in the disability sector, you can assist the people you work with to develop and implement their individual community support plan.

You will be working with people who have a greatly different experience of the wider community. Some will be familiar with what they want to be involved in and the help they need, while others will need people close to them and people experienced in integration and inclusion to guide them through the decision making process.

2A Support the person to develop a person-centred individualised plan

It is a priority of all Australian state and territory governments that people with disabilities are integrated into the broader community. This comes from a belief in social inclusion as a way of regaining social status as valued members of the community. This strategy requires two parallel lines of approach: increasing the skill level of people with disabilities through social inclusion and educating the broader community in social inclusion.



Support worker's role

Your role is to support the person in the development and implementation of a person-centred individualised plan. You are in a strong position to contribute to this process because you have already established a relationship of trust with the person and have probably come to understand what is important to them and what their interests and abilities are.

These pieces of information assist you in supporting the development of the person-centred plan. Your organisation should have a set protocol for the development of individual plans. You should check your job description and your duty statement to ensure you are working within the parameters of your role. Your role may be to assist with the planning or simply to record evidence of progress against the plan as it is implemented.

In supporting the person, you need to be familiar with your organisation's policies on:

- ▶ duty of care
- ▶ dignity of risk
- ▶ manual handling
- ▶ work health and safety (WHS)
- ▶ transporting people
- ▶ professional boundaries.

Supervisor's role

If you are already a supervisor in the sector, you may find it is your direct responsibility to facilitate the development of the individual person-centred plan. If this is the case, you will have organisational guidelines on the process and the type of documentation you need to keep. It may not be possible to develop a plan in one session with a person, but may take a number of sessions to move through the process.

You need to have good communication skills to undertake this process, as shown here.

Communication skills required to assist people

- ▶ Active listening
- ▶ Asking open and closed questions
- ▶ Checking the reality and practicality of actions
- ▶ Prompting or encouraging the person
- ▶ Recording and documenting information
- ▶ Negotiating outcomes
- ▶ Developing options
- ▶ Analysing tasks

Person-centred individualised plans

The aim of individualised plans is to facilitate the person's networking and integration into the broader community. While the plan may contain some elements of networking in disability-specific areas, such as peer support groups, the aim is to achieve social integration into the broader community.

The process of developing a person-centred individualised plan usually involves working one-on-one with the person, or with the person and a family member or advocate. If the person has an appointed guardian, they need to be involved.

The style of the plan may vary. For people with cognitive impairment, intellectual disability or poor verbal communication, it may consist of the use of pictures combined into a storyboard or notebook. The aim is to record the person's plan in a format accessible to the individual with other information included.

Whether the plan is text- or picture-based, it should include the following information:

- ▶ Relevant stakeholders
- ▶ Community inclusion goals
- ▶ Strategies to achieve goals
- ▶ Finance and budget
- ▶ Opportunities for further inclusion
- ▶ Responsibility for actioning
- ▶ Review dates

Relevant stakeholders

The plan will list or show all the relevant stakeholders who need to support the plan in order for it to be implemented.

Stakeholders who need to support the plan may include:

- ▶ the person
- ▶ partners or significant others
- ▶ advocates

- ▶ support workers
- ▶ mentors or coaches
- ▶ family members or carers
- ▶ guardians
- ▶ case managers
- ▶ other health professionals
- ▶ a buddy or sponsor.

Community inclusion goals

The person is encouraged to develop goals in regard to community inclusion. These may be broad goals such as becoming fully active in the local community as a disability advocate, joining a youth group or meeting people their own age and/or becoming a volunteer at their child's school.

Goals need to be appropriate for the person's age and level of development. If you are working with a person with delayed development, their goals may be more specific as shown here.

Examples of specific goals for persons with delayed development

- ▶ Going to the day centre and making friends
- ▶ Joining the scouting group
- ▶ Playing with other children at the playground

Strategies to achieve goals

Strategies to achieve goals include the actions needed to achieve the goals. Without affirmative strategies for community integration, people with disability can become isolated from what is often a largely inaccessible community around them.

The person's plan should include a description of the level of support the person requires to perform an action or follow a strategy. Support may be differentiated using a three (or more) point scale. For example, levels of support may be independent, minimal support and significant support.

Strategies to achieve goals may include:

- ▶ joining specific existing networks
- ▶ training in skills and behaviours that are expected in the network
- ▶ working out how to get to and from the networking opportunity
- ▶ educating people in the network about the rights of persons with a disability
- ▶ applying for funding for additional equipment or resources.

Finance and budget and opportunities for further inclusion

The plan includes an estimate of the costs of implementing the plan and becoming involved in the social network. It also indicates how these funds will be spent and where the money will come from. Information may include details of additional allowances or grants from a philanthropic trust. Funds may also be required where extra personal support is required.



The plan identifies the additional opportunities that may open up to the person once they have implemented their social integration plan. For example, once they have joined a youth group and attended regularly, there may be an opportunity to attend a summer camp together. Other opportunities may include taking an advocacy role or becoming an office bearer.

Responsibility for actioning and review dates

The plan must stipulate who is responsible for each action in the plan. The plan should have time lines against the actions required and review dates built in.

Review dates would typically be after three, six or twelve months. There are people who will typically be responsible for actioning person-centred individualised plans.

People responsible for actioning plans:

- ▶ Case manager
- ▶ Support workers
- ▶ Family members
- ▶ Mentor, buddy or coach
- ▶ Allied health professionals

Provide encouragement

The person's individualised plan is like a recipe for community inclusion. It lists ingredients like aids, devices and modifications that the person needs and also contains a method in the form of strategies for supporting the person.

Following the recipe is critical, but you also need to add a little extra to maximise the social participation of the person. Like a good chef, you need to show some flair.

Your support of the person should be enthusiastic and positive, as part of your role is to motivate and encourage the client to achieve their goals. Positive feedback and encouragement from you will help the person get the most out of any opportunity.

You can encourage the person by:

- ▶ providing positive role modelling
- ▶ providing constructive feedback
- ▶ celebrating success
- ▶ noticing progress towards their goals
- ▶ identifying opportunities for additional involvement in the community.

Anticipate and overcome barriers

Positive reinforcement will help with internal barriers to participation, such as lack of confidence, but external barriers must also be addressed. As a support worker or supervisor responsible for the development of the client's individual plan, you can assist the client to identify barriers and develop strategies to overcome these. This can be done by following a four-step process.

Steps to overcoming participation barriers

- 1 Identifying barriers**

Work with the person try to brainstorm as many barriers as you can that confront a person with a disability when accessing community activities listed in their plan. In the brainstorming process, don't get bogged down discussing the barriers.
- 2 Prioritising concerns**

Encourage the client to check through the list of barriers and see if any of the barriers are of little or low-level concern to them. Once they have eliminated from the list any barriers they decide are not relevant to their individual plan, the next step is prioritising the rest.
- 3 Creating action planning strategies**

Assist the client to develop a simple action plan of strategies. The action plan should identify: the barrier to be removed, the strategies that will be used, the steps to be taken, who is responsible for each step, a time frame, a desired outcome.
- 4 Documenting strategies in the individualised plan**

The action plan should be incorporated into the individualised plan. Include a review date to evaluate the success of these strategies. By documenting these strategies you are ensuring that resources and finances are identified for the removal of these barriers.

Document the plan

Use your organisation's templates and procedure for documenting the individual's community inclusion plan. The language used in the plan should reflect the language used by the person and be simple and unambiguous.

Do not let the act of documenting the plan stifle discussion about the plan. Take notes to remind you of the main decisions made but don't try to capture every word said. The person may be encouraged to take notes themselves, if they have the skills to, and at the end of the planning meeting you can compare notes.

Alternatively a Dictaphone or small recorder may be used to capture the planning discussion. The main points from this can be typed up later on. Computer and word processing skills are essential to finalising and reviewing the plan.

Some advantages of electronic plans are listed here.



Share with others

Supervisors, other support workers and other allied health professionals can easily access a digital version of a plan via an intranet or shared drive.



Version control

The most current version of a plan can be tracked using versioning conventions. Revisions can also be clearly highlighted using text editing software features.



Incorporating reviews

Evaluation and review of the plan is a regular process and digital files make editing easy.

In digital format, a plan can be readily updated with minor but important adjustments.



Consistency

Just as plans are reviewed, so too are your organisation's templates designed to capture planning information. Continuous improvement policies often mean template layout and design are never fixed.

Example

Support the person to develop a person-centered individualised plan

Jessica, a supervisor at a disability service, makes arrangements for Petra to have her individual community inclusion plan reviewed. Jessica looks at the support workers' roster to identify times where a number of Petra's support workers are available. Jessica talks to Petra a few weeks before the planned review to negotiate a time for the review and to check who Petra would like to attend with her.



Jessica also tells Petra that the review will look at her goals and how well they are being achieved by the strategies in the plan. Jessica asks Petra to think about what she thinks is working well and what could be improved about the way she is supported in the community.

Prior to the meeting Jessica asks Petra's support workers to review the plan and the strategies in it for overcoming her participation barriers.

When the review meeting takes place, one of the support workers takes note as Jessica runs the meeting. Petra brings along her aunty and she helps Petra to express that some of her social inclusion goals have changed and that she would like some changes made to her plan.

Practice task 8

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

Case study

Janine is in her 70s, has a visual impairment and is often anxious outside of her home. She wants to join a local book club that meets once a month to discuss a new book. She enjoys reading and would like the opportunity to discuss books with other people. The book club is run on the first Tuesday evening of the month at the local library at 7.30 pm. Janine talks to her support worker, Lesley, about the book club. Together they work out a list of barriers that could cause a problem. The main barrier they identify is transport to the library at that time of night. Janine can use public transport during daylight hours but is reluctant to do so at night. Janine requires large print books due to her vision impairment and wonders how she will be able to get hold of a copy of the book each month in time to read it. Janine and Lesley work out an action plan to overcome these barriers.

1. List two strategies you could use to support Janine to attend the book club.

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2. What forms of support and funding are required by these two strategies?

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Click to complete Practice task 8

2B Assist the person to establish their requirements to maximise community participation

Once you have assisted the person to develop an individualised plan to participate in the community, you can then work with them to establish their requirements in order to maximise their participation in the community. This may include identifying the resources required or the strategies you need to put in place to maximise participation in community life.

In order to commence the process of identifying person requirements, you should encourage the person to look at their community inclusion goals and the strategies they have developed in order to meet these goals. You need to establish a relationship of trust so that you can work through a series of questions. Good communication skills are essential. Use active listening and summarise what you have heard. You also need to be patient as this process may take some time.

Here are some useful questions to ask.

Useful questions to ask about a person's community support plan

- ▶ What strengths and interests does the person have?
- ▶ Who could add to the knowledge and experience the person has?
- ▶ Is there someone who would be able to support the person?
- ▶ What assistance is required?
- ▶ What equipment or resources are required?

Techniques to assist persons to clarify their requirements

There are several techniques you may choose to use to help the person establish their requirements to maximise involvement in their community. These include visioning, researching and prioritising. As you undertake visioning, researching and prioritising you need to be patient and ask open questions. Use whatever communication method the person finds easiest and, if possible, do this in a one-to-one session with the person.

An explanation of each technique is provided here.

Visioning

Ask the person what it would look like, or be like, if they had maximum involvement in the community. What would they see themselves doing? The person may come up with a wish list of activities but you can then work backwards by asking 'In your ideal vision, what supports are in place to assist you to reach that maximum level of participation? This process helps to identify realistic and practical actions and goals.

Researching

Assist the person in finding out as much as they can about the community they wish to access and the network they plan to become involved with. Help them to research by using the internet, reading the local paper, making contact and asking questions, and speaking to other people who have had some involvement with the network.

Prioritising

Help the person to work out what is most important and what will have the greatest impact on facilitating their involvement in the community.

Identify requirements

While the steps of visioning, researching and prioritising may provide a process to assist the person to identify their requirements, it may also be useful to look at their requirements in a range of categories.

There may be situations where you feel you can identify requirements that the person has not thought of. If this is the case you may try prompting the person by suggesting other options; for example, you may ask 'Have you thought about ...?'

If this prompting does not work, it is best that you bring it to their attention as directly as possible. Remember you have a duty of care to the person. If the person fails to agree with you about these requirements, you can provide information to them to support your concern. Document your concerns and notify your supervisor or the case manager. However, if you have informed the person of the potential risks and they still do not want to put the support requirements you are suggesting in place, it is their choice.

Requirements that you may need to consider and some questions that may assist are outlined here.

Planning requirements

- ▶ Has the community networking and participation activity been accommodated in the person's home care and personal care plans?
- ▶ Are there adjustments that need to be made to these services to maximise the person's ability to participate?
- ▶ Has your person undertaken a task break down of how to get to the networking opportunity and how they may be able to take part in the expected activities?
- ▶ Has the person undertaken a trial run of the mode of transport they will need to utilise?

Underpinning skills

- ▶ What underpinning skills are required to maximise participation in the community activity?
- ▶ Does the person have the necessary communication skills, an understanding of group dynamics and how groups work together, an understanding of formal meetings and how they are run, and an understanding of money and finances?

Health needs

- ▶ What special health needs does the person have that need to be considered to maximise their participation?
- ▶ Does the person need continence support, to be kept hydrated, to take medication at set times, or have sleep requirements?

Support requirements

- ▶ What additional aids and equipment may be required to travel to the community activity and access the venue?
- ▶ What additional aids and equipment may be needed to take a full role in the proceedings?
- ▶ Would it be useful to identify a mentor or buddy to accompany the person?
- ▶ Are the person's family supportive of the activity?
- ▶ What additional support is required from a support worker to maximise participation?

Financial requirements

- ▶ What are the financial implications and how can they be met?
- ▶ Is there a joining fee or set-up cost for equipment?
- ▶ Are there financial implications for other family members?

Community to be disability ready

- ▶ Is the community or network 'disability ready' to allow maximum participation?
- ▶ What could be done to make the community disability ready?
- ▶ What role can the person play in this?

Example

Assist a person to clarify their skill needs

Poppy has an acquired brain injury. Her goal is to be able to participate as a parent in her daughter's school. When asked how she would like to be involved, she says she would like to be on the parent committee and volunteer to help in the classroom with reading. Her support worker, Andrew, asks what skills she needs to do this. Poppy says her reading is good but she may need to work with a speech pathologist to improve her speech patterns. She also says she would like to learn about running a meeting before she attends one.



Practice task 9

1. Develop three questions to help a person with clarifying their requirements for:

▶ Visioning

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▶ Researching

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▶ Prioritising

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2. Describe how a person’s right to self-determination in creating their community inclusion plan may conflict with your responsibility to provide a duty of care.

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Click to complete Practice task 9

2C Assist the person to identify and access community options

The process of assisting the person to develop and implement an individualised community support plan should be as person focused as possible. Your role is to encourage the person to reflect on their needs and then support them to identify and access options that will meet these needs.

To assist the person to identify and access community options rather than just live in a neighbourhood, you need to help them to reflect on their interests, values, concerns and cultures and to identify the aspects that they can share with others.

Your role is to facilitate this process by encouraging reflection, prompting the person, giving constructive feedback and helping the person develop options and ideas.



Assist the person to identify their needs

In order to identify the community options that should be incorporated into the person's individual community support plan, you are required to assist them to identify their needs.

The person may be a person with a disability wanting to access community options for the first time or they may be someone who needs to re-engage with their former community options after acquiring a disability.



People engaging with the community for the first time

As a support worker or supervisor working with someone to engage with the community for the first time, the prospect for them may appear daunting. You need to encourage them to feel at ease with the process and to motivate them to undertake something new.

Let the person talk; the more they talk, the more you discover what is of interest to them. Avoid leading questions and statements. You may be surprised by what you discover about the person. Use active listening and constructive feedback to help them work through the process.

Below are a number of tips which may be useful in helping persons to identify their needs.

Strengths and abilities

Encourage the person to build on their existing strengths and abilities. Ask them to tell you what they are currently good at. What skills do they have and what training have they completed?

Hobbies

Ask what hobbies they have and what hobbies they would like to develop further. Try to establish their values and concerns. Ask what is important to them. Use your prior knowledge of their home and its contents to prompt them if you can.

Interests

Use the local paper to identify the articles that are of interest or concern to them. Look at the community noticeboard section and see what interests them.

Engaging with people

Ask what sort of people they would enjoy spending time with. What age group and gender would they prefer the people to be? What sort of interests or values might they share? Can they name anyone in particular that they would like to network with?

Community contributions

Ask what they would like to contribute to their community and where they think they could make a difference. Emphasise the skills they have and prompt them to explore how they could use these skills within the community.

Potential contacts

Ask who could add to the knowledge and experience they already have. This may be a group of people or individuals within the community.

Community roles

Ask what role the person would like to take in the community. Focus on both the immediate and the long term. Do they have special skills or experiences they can use in certain roles in the community, such as minute taking, organising meetings or coaching people?

Coaching and mentoring

Ask if they have someone who would be able to accompany them to activities. Do they have a partner or family member who shares these interests? Do they know of someone in their peer group who they look on as a mentor? Do they know someone who could coach or buddy them in certain areas?

Community access

Ask what resources and equipment would make access to the community easier. Focus on the particular options that they have identified rather than asking general questions.

People who are re-engaging after an acquired disability or period of absence

As a facilitator of the process for someone who is re-engaging with the community after an acquired disability or a period of absence, you may use the same basic framework of questions. A person who is re-engaging is likely to have lived a full life out in the

community prior to their injury. Community involvement is part of their rehabilitation. People with an Acquired Brain Injury (ABI) may have expectations that they can do things in the community as they did prior to their injury.

In order to commence this process, persons may find it useful to reflect on the aspects outlined below. Once you have established possibilities to reconnect, you can follow the process you would for someone engaging for the first time.

Aspects to discuss with people who have a disability

What community options and networks has the person been a member of before they acquired their disability? Ask if they still share this interest.

Ask what would need to happen for them to re-engage with the community.

Ask about contacts and who would be willing to assist them to re-engage with the community options that they have previously enjoyed.

Research community options

Once you have assisted the person in thinking about their needs, you can help them identify options that exist in their community and that match these needs. Then select the options that warrant further investigation or research.

There are many ways the person can research the options that are available in their community. They may choose to look in the local newspaper, on the internet or through the database that their organisation has collected on community options.

In selecting community options to meet the person's needs, consider:

- ▶ family groups
- ▶ neighbourhood or local community groups
- ▶ sports and recreational groups
- ▶ ethnic specific groups
- ▶ clubs
- ▶ support groups
- ▶ work groups
- ▶ community centres
- ▶ places of worship.

Select suitable options

Once the person has selected the relevant options, you can help them to choose which ones they wish to research. If the person cannot communicate verbally, you should consider collating this material in picture form and perhaps creating a visual chart of the options to be considered.

Assist the person to collect a file of information, including their findings from the information sources listed here.

- Potential sources of information for research**
- ▶ Brochures and pamphlets
 - ▶ Newspapers
 - ▶ The internet
 - ▶ The local library

Example **Assist the person to identify and access community options**

Marie has post-polio syndrome and was formerly very active in her community in a large regional country town. Since moving to a new town, she has asked for assistance in developing a community support plan. Marie is able to articulate very clearly the community activities she used to be involved in and is very clear about what networks she wants to re-establish. She sees herself as a political activist and wants to get involved in advocacy and human rights issues. Her support worker does not need to prompt Marie to identify these needs. Marie does need assistance to research what is available in the new neighbourhood as she does not have the fine motor skills to use the internet.

Practice task 10

1. Explain the differences between the support required by a person accessing the community for the first time and a person with an acquired brain injury.

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2. What strategies for support could be used effectively for both people?

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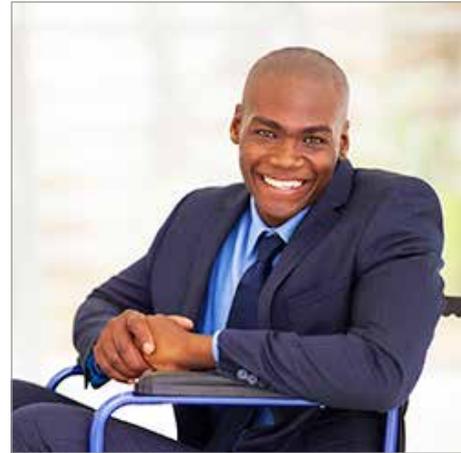
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Click to complete Practice task 10

2D Assist the person to access opportunities to establish community connections

For people with disabilities, it can be difficult to access opportunities that can lead to establishing a connection with other community members. Some persons lack the physical skills required, such as writing or using a telephone, while for others it is a lack of confidence or lack of assertiveness that holds them back.

First impressions are important. The first contact with a community member can set their expectations for all future contact. It is important to empower the person by helping them to create a positive impression.



It is useful to think of this first contact as part of the matching process. It is when the person forms their first impression of whether the community member is welcoming and whether the option will meet their needs. For the community member who has been contacted, it is an opportunity to form an impression of the role the person may wish to assume within the organisation.

Barriers to accessing opportunities

You need to understand the problems that persons may have in establishing connections with other community members and assist them to overcome these obstacles. Persons may have limitations specific to their disability, be it cognitive, intellectual, physical, psychological or sensory. A summary list of barriers that may be encountered by persons is given here.

Barriers to accessing opportunities with other community members

- ▶ Communication difficulties
- ▶ Mobility issues
- ▶ Cognitive impairment
- ▶ Sensory loss
- ▶ Intellectual limitations
- ▶ Lack of social skills
- ▶ Delayed development
- ▶ Poor understanding of relationships
- ▶ Social stigma and attitudes toward disability

Strategies to establish contact

There are many different strategies the person can use to establish contact. Following are the major strategies and ways you may be able to assist as a support worker or supervisor.

Face-to-face meeting

- ▶ Make sure the meeting has been organised and that the community organisation knows the person is coming.
- ▶ Ensure the meeting time is accommodated in the daily personal care regime for the person.
- ▶ Organise transport to and from the meeting.
- ▶ Check access at the agreed venue.
- ▶ Assist the person to work out what questions to ask.
- ▶ Role-play meeting to prepare.
- ▶ Accompany the person to the meeting if required.
- ▶ Assist with any communication or mobility issues.

Contact members via email or website

- ▶ Assist the person to use the internet.
- ▶ Assist the person to compose an email.
- ▶ Check the location and suitability of the community group for person's needs before you send an email to them.

Make a phone call

- ▶ Assist the person to work out what they want to say.
- ▶ Role-model a positive attitude.
- ▶ Role-play conversations to build confidence.
- ▶ Make initial contact via phone if the person has communication difficulties.
- ▶ Use a speaker phone and assist the person to record the information they are given.

Write a letter

- ▶ Assist the person to compose a letter.
- ▶ Provide an example of a letter for them to copy.
- ▶ Assist the person to plan the letter.
- ▶ Edit the letter for the person.
- ▶ Post the letter.

Introduction by peer group, buddy or mentor

- ▶ Assist with setting up a meeting with the buddy or mentor.
- ▶ Assist the person to prepare for the meeting.
- ▶ Ensure the meeting place is accessible.
- ▶ Check transport and plan how to get there and back.
- ▶ Help to script meeting or prepare notes of what to ask.
- ▶ Role-play meeting if necessary.
- ▶ Assist with communication if necessary.

Join a chat room

- ▶ Assist the person to use a computer.
- ▶ Assist the person to find the chat room and log on.
- ▶ Explain the purpose of the chat room.
- ▶ Ensure the chat room is safe.
- ▶ Type messages for the person if necessary.
- ▶ Assist the person to work out questions to ask.
- ▶ Encourage the person to participate in the chat.

Information sessions

- ▶ Provide details about information sessions.
- ▶ Assess accessibility of the venue.
- ▶ Assist with planning transport to the session and back.
- ▶ Assist with booking a place at the session if necessary.
- ▶ Help prepare questions.
- ▶ Check finances and financial obligations of attending the session.
- ▶ Accompany the person to the session.
- ▶ Assist with communication if necessary.
- ▶ Encourage the person to introduce themselves to other members.
- ▶ Encourage the person to network while there.
- ▶ Assist the person to evaluate information against their needs or expectations after the information session.

Watch an activity such as a performance or a club game

- ▶ Provide information on the game, event or performance.
- ▶ Plan the visit or attendance.
- ▶ Plan transport to and from the event.
- ▶ Assist with checking access.
- ▶ Book ticket for the event if necessary.
- ▶ Ask about policy on carers attending event.
- ▶ Accompany the person to the event.
- ▶ Encourage the person to network while there.
- ▶ Encourage the person to introduce themselves to members.
- ▶ Assist the person to evaluate the experience.

Funding for community participation

At the time of writing, each state in Australia operates their own funding system to support people with a disability. State systems have been criticised as being fragmented, confusing and unresponsive to individual needs. The difficulty of understanding eligibility, available supports and funding levels may act as a further barrier to participation and community participation.

In the future there will be a National Disability Insurance Scheme (NDIS) operating using federal funding rolling out across the country.

Movement towards the full scheme is proceeding on different timelines in each state with trial sites providing feedback on the costs of the programs. Once this is completed throughout Australia, a national system will be in place with common eligibility and funding criteria that should provide certainty and consistency for people with disabilities requiring support.

You can read more about the NDIS at the following site:
<http://aspirelr.link/ndis-our-sites>



Funding for community inclusion

The priority of the National Disability Insurance Scheme (NDIS) is to ensure people with disability, along with their families and carers are provided with support. There are access requirements to determine if a participant can be a part of the scheme.

Here is information about the different supports and fees for community inclusion under the NDIS.

Establishment fee for personal care and community access

There will be a one-off fee to establish to establish a participant's plan. This fee will vary according to whether a person is a new participant in the NDIS or if the service provider is maintaining an existing client.

Innovative community participation

This support item is designed to allow mainstream providers to offer services to NDIS participants. Any standards applicable to the industry in which the provider operates need to be met.

Social and community activity costs

This support is included in a participant's plan to enable a participant to pursue recreational activities and engage in broader community participation.

As a core support it may be used for activities such as camps, vacation and outside school hours' care, course or membership fees.

Community participation activities

This item will enable providers to claim for tuition fees, art classes, sports coaching and similar activities that build skills and independence. Camps, classes and vacation activities that have capacity building components can be claimed.

Example

Strategies to establish contact

Dexter is a 19-year-old on the autism spectrum and is generally more comfortable with solitary activities like gaming and reading. Dexter includes a goal in his community inclusion plan to join a local group of gamers. There is a store in his local street where young people hang out and talk about gaming and paint miniature figures. Dexter is not comfortable entering the store so he gets the email address of the store and starts communicating with the staff via email.



He subscribes to their newsletter and receives regular text messages about events that are happening at the shop. He engages with staff and customers via social media. After a few weeks Dexter feels more comfortable about going down the shop for the release of a new version of his favourite game.

Practice task 11

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

Case study

Barry has cerebral palsy and uses a wheelchair for mobility. He has some minor speech difficulties but stutters when he is nervous. He wants to join the local branch of a political party but is reluctant to make first contact, as he is sure they will not understand him. His support worker, Annie, offers to dial the number, get through to the right person and then give Barry the phone. Barry agrees that this would help him make the contact.

1. What other preparation for the phone call could Annie assist Barry with?

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2. What activities would be suitable for Barry to perform to assist the political party?

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[Click to complete Practice task 11](#)

2E Assist the person to select activities

As a support worker or supervisor in the disability sector, your role is to empower the person to gain the level of social recognition they desire for themselves. Each of us is unique with regard to our community participation needs. The person's individual plan must reflect their values and priorities and what is important to them.

Your role is to facilitate this process, but not to impose your views or expectations on the person. It is, and must remain, their plan. The person will not learn and grow if you make decisions for them, or impose your views of what is best for them onto their planning process.



Assuming that you have already worked with the person to establish their interests and hobbies, and undertaken research to find out more about their options, the person then has to decide which activities they should select. You can assist your person with this process but not make decisions for them.

Benefits of inclusion

To help the person select activities that enhance inclusion, it is worth discussing the benefits to the person of social inclusion before you start the selection process. This discussion will provide a context for the person's selection of activities.

The benefits of inclusion include:

- ▶ greater opportunities available
- ▶ greater choice
- ▶ more highly regarded role in community
- ▶ reduced isolation
- ▶ new social groups and new interests
- ▶ opportunities to form friendships and meaningful relationships
- ▶ sense of connectedness to community
- ▶ opportunity to practise and learn relationship skills.

Assist the person to select activities

You can also help the person to think through their needs for social inclusion. Encourage them to develop some criteria to assess whether the activities they have selected will enhance their inclusion. By enabling the person to develop criteria to use in selecting activities, you can use the following principles as a starting point, and see if they are relevant to the person's needs.

Opportunities that offer social activities

- ▶ Any sport that offers team participation such as football, softball or rowing
- ▶ Volunteer work that involves working with a team or group of people
- ▶ Dance classes

Opportunities that are ongoing

- ▶ Being a member of an advisory group to the local council
- ▶ Joining a local history group
- ▶ Joining a religious group

Opportunities with regular times that have the same attendees

- ▶ Choirs that practice regularly
- ▶ Book clubs or bridge clubs
- ▶ Environmental groups
- ▶ Study group such as bible study groups

Opportunities that are accessible and affordable

- ▶ Joining a senior citizens club
- ▶ Volunteering to read to people at an aged-care facility
- ▶ Joining a parent group at local school

Opportunities that build confidence and self esteem

- ▶ Taking part in amateur theatre
- ▶ Joining a debating club
- ▶ Joining an arts and craft club

Opportunities that forge new support or peer groups

- ▶ Joining a parenting group
- ▶ Joining a motorcycle club
- ▶ Joining a church youth group

Opportunities that offer additional opportunities for community involvement

- ▶ Scout groups
- ▶ Rotary or Lions clubs
- ▶ Country Women's Association
- ▶ Performance groups

Opportunities that offer opportunities for incidental learning

- ▶ Volunteer work at a local charity shop
- ▶ Group projects such as neighbourhood farms
- ▶ Social dance classes

Activities that necessitate working with others

- ▶ Sports committees
- ▶ Volunteering for school tuck shop
- ▶ Musical theatre company

Individual needs

Each person must be considered as an individual. Concepts of community participation will be relative to each person.

If you are working with children who have autism, or persons with psychological disabilities, dementia or profound hearing impairments, participation in activities with large groups of people may not be appropriate. In these cases, small groups or even one-on-one participation may initially be more appropriate.

In all cases, encourage the person to talk through their options and discuss which activities best meet the principles of inclusion. Even if the person finally chooses an option that you do not think is suitable, it is their choice and must be respected. It will then be advisable to set in place early review processes and a contingency plan.

Example

Assist the person to select activities

Jarrod has a psychological disability and comes from a family where both his mother and father are doctors. His older brother and sister have both attended university and now work in professional occupations.

Jarrod was unable to complete a law degree at university due to his disability. Investigating volunteer roles at the refugee support centre and community legal centre are included as actions in Jarrod's community inclusion plan. He feels that everyone has a duty to serve the community to the best of their ability and he wants to use his legal training to help others.



2F Support other workers to implement the individualised plan

Every person should have a team of support workers they can rely on and trust. Having one special support worker they favour or come to rely on too closely should be avoided. Where this occurs, it can cause disruption when staff go on leave or are unable to work for other reasons.

It is also beneficial for the person to have a variety of workers as it expands the person's social skills. They learn to communicate with a range of different people who may bring something unique to their role.



As well as the other support workers involved in delivering services to the person, there are various other community service and health professionals involved. They are directly or indirectly involved in the delivery of the person's community support plan. You must all work together and support each other as a team.

A team approach

As a support worker, it may feel that you are working in isolation, but you are actually part of a complex team of people who are all working to put the person's individual person-centred plan in place. You may not all meet together as a team but commitment to the person's plan gives you a common purpose and makes you a team.

It is important that communication is maintained between members of the team and that information is shared with all relevant people. In particular, it is important you share any concerns you have about the person's ability to undertake their community support plan, or any changes in their health or skill level that may affect this.

It is also imperative that all support workers working with a person have a consistent approach. This is particularly important where there are behavioural modification plans in place or the person is being encouraged to learn socially acceptable behaviours, in order to be able to participate in the community. There may be a large number of people working in a person's support team.

Potential members of a person's support team:

- ▶ The person
- ▶ Family members
- ▶ Other health professionals
- ▶ Community recreation officers
- ▶ Behavioural consultants
- ▶ Supervisors
- ▶ Other support workers
- ▶ Case managers
- ▶ Lifestyle and leisure workers
- ▶ Integration aides

Work within your role

One of the most fundamental ways that you can support other workers involved in the delivery of the person's individual plan, is to have a firm understanding of your own role and responsibilities. When implementing the person's plan, always work professionally and within your job role boundaries. In addition to this, it is essential to understand the roles and responsibilities of others involved in the delivery of services that may contribute to the implementation of the person's individual plan. There are aspects of your role that you should know and always observe.

In order to carry out your role in a professional manner, you must always:

- ▶ follow the person's plan
- ▶ know your job description
- ▶ follow policies and procedures, as documented in your policy manual
- ▶ monitor the person's wellbeing
- ▶ report any hazards, risks or concerns you may have to your supervisor
- ▶ attend team meetings and contribute where appropriate
- ▶ maintain documentation as required
- ▶ remember you have a duty of care
- ▶ follow confidentiality protocols.

Share information

To work successfully as a team, you need to share information with all relevant workers in regard to the individual person. Remember that any record you write should be considered a legal document and can be made available to the person on their request. It is therefore important that you record information in an objective manner, record only what you have observed or experienced, do not express personal attitudes or feelings, use short concise sentences, use plain English and sign and date all entries.

You need to follow your organisational guidelines on sharing information.

Most organisations have these systems in place to share information:

- ▶ Skill development plans
- ▶ Task breakdowns
- ▶ File notes
- ▶ Incident reports
- ▶ Staff meeting
- ▶ Case management meetings
- ▶ Referrals
- ▶ A communications book

Consistent approach

As a team of health professionals working to support the person, it is important that services are consistent and reliable. This will give the person a sense of reassurance and security and create a safe environment for them to proceed with their community integration plan. It is everyone’s responsibility to ensure that workers supporting the implementation of the individual’s plan all work together. This is not just the responsibility of your supervisor or manager. You can assist with providing a consistent approach to your person’s care. Some suggestions follow.

Supporting consistency in service delivery

- ▶ Follow the person’s plan.
- ▶ Follow the behavioural management plan, if one has been developed.
- ▶ Share information on the best way to do particular things.
- ▶ Do not discuss other support workers with the person.
- ▶ Document any inconsistencies.
- ▶ Document any changes in the person’s condition.
- ▶ If changes need to be made to the service plan, contact your supervisor.
- ▶ Inform the person of the process to lodge any complaints or requests for changes in the service.

Example

Support other workers to implement the individualised plan

Hazel asks her support worker, Leo, to come in an hour earlier on Saturday morning to make sure she is up and ready to go to a bowls tournament in the neighbouring town, 40 km away. Leo informs Hazel that he is available to come in earlier but that Hazel will have to inform Leo’s supervisor if she wants an early start. The supervisor will then confirm it with Leo. Leo explains that if they just change the roster without telling his supervisor, he will not be covered by insurance or Workcover should anything happen to him while he’s there.



Practice task 13

1. A person you are supporting asks your opinion about another support worker. The person does not speak of them in glowing terms and asks you whether they have much experience in the role. What would you say to the person?

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2. When discussing a person you both support, a co-worker mentions that they usually don't look too closely at a person's plan. They say they prefer to find out about the person first hand. What is the problem with this approach?

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Click to complete Practice task 13

Summary

1. The process of assisting the person to develop and implement an individualised community support plan should be led by the person.
2. Because you know the person well, you are in an ideal position to work with them to develop a plan for their community inclusions.
3. You can support the person to become part of community groups with shared interests and values.
4. You should consult with the person to develop strategies to overcome barriers and ensure that these strategies are documented in their individual plan.
5. The person may require assistance to plan and make their first contact with a community group or member that they want to access.
6. Once the individual plan is in place, your role is to support its implementation to empower the person to be part of the community.
7. It is advisable for the person to select activities that offer maximum opportunities for social interaction.
8. The person will see you as a role model in your attitude to community integration and skills development.
9. You will be working in a team to implement the plan and must support each team member by sharing information and offering a consistent approach.
10. You must contact your supervisor if there are aspects in the person's plan that you do not feel you have the skill, experience or authority to carry out.

Learning checkpoint 2

Assist person and relevant others to develop and implement a community support plan

This learning checkpoint allows you to review your skills and knowledge in assisting a person who has a disability and relevant others to develop and implement a community support plan.

Part A

1. How does the process of developing an individual plan to participate in the community contribute to the independence of a person you are supporting?

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2. What strategies could you use to assist a person to establish their requirements for participation?

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3. What strategies would you use to assist the person to identify and access the community options identified in their plan?

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- 1. Has the meeting lead to the creation of a workable community inclusion plan? Why? Give two reasons.

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- 2. What should Riley do next? List two actions he should take.

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Case study

Part 2

At the next meeting between Jackie and Riley, only her mother attends. Jackie is at the centre of the discussion and a clear picture of her main participation goal emerges. Jackie is strongly motivated to get involved in providing care to animals. In order to start to consider some possibilities, Riley asks about transport and access supports that Jackie might need and Jackie’s mother jumps in, ‘You don’t need to worry about that. We can drive her. We drive her everywhere. You just make sure she has a good time while she’s there’.

- 3. What two points should Riley make to Jackie’s mother about her role?

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- 4. Has Riley got a good idea of the sort of supports that Jackie needs? Briefly explain why or why not?

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- 5. How can Riley help Jackie to imagine her needs in settings she is unfamiliar with? Suggest one strategy.

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- 6. What are three questions Riley could ask Jackie to find out more about what he needs to plan?

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Case study

Part 3

Jackie chooses to volunteer one day a week at an animal shelter a few suburbs away from where she lives. A support worker, Sue, supports her to learn the parts of her role during the induction and orientation to the shelter in the first few weeks. Jackie strikes up a relationship with another volunteer, Donna who also has a young pug. Jackie and Donna discuss attending puppy training classes together and Donna finds a class starting that Saturday with an obedience school that operates in a park nearby. Donna enrolls her dog and Jackie's dog Pugsly in the puppy training class.

- 7. What support should the support worker, Sue provide to Jackie during orientation?
Give three examples of appropriate support strategies.

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- 8. List two good aspects and two issues you can see with the puppy training class?

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- 9. List two steps that Sue and the support organisation should take regarding the puppy school classes.

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10. Estimate what the cost of the class would be if it included 8–10 people and was run for 90 minutes over six weeks. Consider other costs of participation for Jackie such as transport and equipment. Create a list and provide an overall total.

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11. Another support worker is organised to support Jackie to attend puppy training because Sue does not work on the weekend. Explain one thing Sue can do to help the weekend support worker perform her role.

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Part C

Practise the process of developing an individualised plan with three people at different stages of life and with different interests. Where possible, choose people with a disability who are not very active in the local community already.

Follow the process below for each person:

1. If the person you choose does not have a disability, assume one. (When repeating the activity with other people always assume a different disability).
2. Make the practice as real as possible. You may want to create a table to collect the information.
3. Discuss the person's goals. Focus on social and community involvement or things they would like to achieve in their community.
4. Discuss their current involvement, how it came about, what they get (and give) from it.
5. Brainstorm some new activities, organisations or opportunities that may be of interest given their goals and make a list. Don't rule anything out.
6. Consider the type of involvement that would suit the person best (regular, weekly, monthly).

7. Consider the benefits of each idea and prioritise two or three opportunities.
8. Discuss strategies for getting involved in the preferred opportunities.
9. Consider any potential barriers to involvement; travel, cost, attitudes, location, access.
10. Consider any supports the person would need to investigate and fully participate in the opportunity.
11. List the resources they would they need; money, equipment, aids or devices, modifications.
12. Estimate what these supports and resources might cost. Consider possible sources of funding for these resources.
13. Finally, discuss the process with the person. Consider the following questions:
 - a. What did you learn about the person?
 - b. What did the person learn about himself or herself?
 - c. Was the process comfortable or confronting?
 - d. How would you run the process differently next time? Why would you make these changes?



Topic 3

In this topic you will learn how to:

- 3A** Develop strategies to meet requirements for support, devices, aids and environmental modification

- 3B** Identify support or devices to assist with communication

- 3C** Determine physical barriers to participation and identify solution

- 3D** Recognise personal limitations and seek assistance

- 3E** Identify and assess cognitive deficit-related barriers

- 3F** Discuss travel and transport issues with the person and identify strategies to deal with these

- 3G** Evaluate the success of strategies

Develop strategies to minimise isolation for person with disability

For each person, the barriers that limit community inclusion and cause isolation are unique to their personal circumstances. Your role is to work with them to eliminate as many of these barriers as possible. In the development of strategies to minimise isolation, you may be working one-on-one with the person. You may also have to consult with the person's:

- ▶ primary carer
- ▶ significant other
- ▶ guardian
- ▶ advocate.

3A Develop strategies to meet requirements for support, devices, aids and environmental modification

Overcoming barriers to social inclusion often includes the use of particular aids or devices that are suited to the person, for example mobility aids such as a wheelchair or walking frame. The person's community inclusion plan will include strategies for using these aids most effectively. Your role as a support worker is to implement these strategies and assist in the uses of devices and aids.



Changes to the physical environment, such as installing ramps, may be harder to achieve but may be the only way to enable inclusion of the person. Where the person has an advocate or guardian, you will need to work closely with them to achieve changes in the best interests of the person. In some cases, you may have to consult with their primary carer or significant other, as they too may be involved in, or affected by, the individual plan.

Support needs

Initially, the person's support needs are usually assessed by the coordinator of the relevant service, or the person's case manager. This is undertaken as a face-to-face interview, using a checklist of questions for guidance. The supervisor needs to take into account the person's individual goals and their desired activities and then program support services tailored to these needs.

A referral is made where it is necessary for other health professionals, such as a physiotherapist or occupational therapist, to assist. A service agreement is then drawn up. The case manager or supervisor is also able to assist with information on funding options and eligibility for the support that is required. Where you feel the person's needs are not being met, you can request a reassessment of the support required.

Support services could include:

- ▶ home care
- ▶ personal care
- ▶ respite
- ▶ transport
- ▶ recreation
- ▶ skills development.

Human resources

Support workers are the main people involved in providing support services to the person but there is also a team of other people involved. This may include both paid employees and volunteers. Strategies to acquire these resources include formal assessments and referrals and joining support groups or matching the person to a volunteer, mentor or coach.

Human resources used to deliver person support may include:

- ▶ support workers
- ▶ supervisors
- ▶ volunteers
- ▶ coaches
- ▶ other health professionals
- ▶ case manager
- ▶ family members
- ▶ mentors
- ▶ peer support.

Devices, aids and equipment

The person may also need specialised assistance with their assessments to ensure their specific needs for aids and equipment are met. If this is the case, the supervisor, support worker or case manager makes a referral to the relevant health professionals (for example, a speech pathologist or occupational therapist), who undertakes an assessment to determine what aids and equipment best meet the person’s community inclusion plan. As a support worker you may provide information on these services and take part in the referral process.

Consider the following areas where specialist assessment may be required.

Areas for specialist assessment
▶ Hearing
▶ Vision
▶ Mobility
▶ Fine motor skills
▶ Communication
▶ Meals assistance or help with eating and swallowing
▶ Computer-based support

Environmental modifications

Environmental assessments may be required for the person’s own home or for the environment that the person needs to access for their community inclusion plan. Modification may be temporary or permanent and the feasibility, suitability and cost of options need to be assessed.

Where the person’s own home requires a reassessment to ensure it meets the specific need of their community inclusion, this is often carried out by an occupational therapist with help from a support worker or supervisor. They use a checklist, and question-and-answer technique, combined with general observation.

Where the environment to be modified is a venue in the community that the person wishes to visit, there are two possible options as outlined here.

Assessing the venue personally

It may be possible for the support worker, in consultation with the person, to draw up a checklist of the person's needs and either audit the venue themselves or request that it is assessed against the checklist.

Engaging an access specialist

For a more thorough assessment, it is possible to engage an access specialist, who will conduct a complete audit and make recommendations for modification complete with the necessary costing.

Consult with the person

The person is the expert of their own needs and abilities and they are able to tell you what their needs are for support and equipment. They may already have suitable aids, equipment and devices to ensure community inclusion. Aims of social inclusion include promoting independence and self-esteem and, because decision-making is an important part of these aims, you should assist the person to learn to make decisions for themselves.



The person may not be fully aware of the devices and aids available or the modifications that are possible, and this is where you can help. If the person has an advocate or guardian, work with them in the best interests of the person. Where an advocate has been appointed, it is because the person feels they need the assistance of someone to speak on their behalf. The advocate is there to express the person's wishes and assert their rights.

You may also need to consult with a primary carer or significant other. They may be able to contribute insights into what the person needs and have experience accompanying the person to community events. Because of their close relationship with the person, they may have extensive knowledge that can help in planning for inclusion.

Example

Develop strategies to meet need for support, devices, aids and environmental modification

Lisa uses a wheelchair to get around and has recently decided to enrol in a course at her local training institute. The campus has ramps and lifts so that she can access all the classrooms where she is timetabled on the two days she attends.

One of Lisa's classes is located in a building at the bottom of a steep hill. This building is far from the institute's cafeteria and a long way from her taxi drop off and pick up. Lisa really struggles without support to move around, is usually late to class and misses some of the work.

Although funding is available for a support worker to assist, Lisa would rather use that money on the weekend to help her participate in recreation activities.

Lisa discusses the issue with her support worker who suggests she ask for the class to be timetabled in another room. Lisa says she is too embarrassed to ask, but her support worker encourages her. Lisa speaks to the course manager who organises a permanent room swap with another class for the rest of the year.

Practice task 14

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

Case study

Emily is vision impaired and her community inclusion plan includes joining a social dance group. She loves partner dancing and feels that it gives her opportunities to meet lots of people and make friends. The group meets on the first Friday night of the month. The dance class is held on the second floor of an older-style building that has no lift. There is a small entry cost and people often bring food to share for an informal supper.

Emily talks to her support worker, Sia, about her support needs. She decides that her first need is a permanent booking with a cab driver she feels is reliable.

Her second requirement is to ensure the venue is accessible for her. In order to achieve this, her support worker agrees to go with her to the venue on the first visit to help familiarise her with the environment.

1. List three things to check to make sure that the venue is accessible for Emily.

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2. Briefly describe other strategies you can use to make sure Emily can take part in the monthly social dance.

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Click to complete Practice task 14

3B Identify support or devices to assist with communication

Often, the main communication support the person needs is you, their support worker. Support workers are familiar with the person's communication strategies and are able to assist others to also understand them. Assistance with communication may also include helping others to understand the system of communication the person uses. For example, persons who cannot communicate verbally may use gestures, eye blinks and nods, sign language or keyword signs.

In addition to these forms of communication, there are a number of devices that can assist people to communicate if they have speech difficulties as a result of hearing impairment, acquired brain injury or delayed intellectual or communication development.



Identify the most appropriate communication device

It is the responsibility of a relevant allied health professional to identify the communication device most appropriate for the person. This assessment process ought not fall within the scope of your responsibilities, although you may accompany a person to such an assessment. You may require training, along with the person, in the implementation of a new system of communication or communication aid that is recommended.

Key to your role is familiarity with a range of devices or strategies that can assist with communication. Examples of these devices are described here.

Communication boards

A communication board is a device where pictures or words are displayed in a square. A person with limited speech can communicate by pointing to the squares on the board. The board is see-through so it can be held in a variety of ways. For persons who cannot point to the board, you need to sit opposite them and hold the board up between you, and follow their eye movement to see what they are saying.

Spelling boards

Some people use a board with letters on it instead of pictures. They point to the letters to spell out the words that they want to say. This allows for greater flexibility in what they can say, but it can only be used by people with good intellectual and cognitive skills.

Communication cards

Communication cards can be used for persons where there are simple communications that need to be repeated in a number of different situations. For instance, a card may say 'My name is John'. The cards use a combination of images and/or words to ensure community members and the person understand.

Electronic communication devices

Electronic communication devices have software that enables someone to choose images or words that are then produced as speech. There is a variety of different electronic communication devices available, including dynamic display or voice output devices. Remember, these devices allow people without natural speech to be heard and they should not be touched without permission.

Telephone typewriter

People with a hearing impairment may use a telephone typewriter (TTY), which allows users to type instead of talk on the phone. If your organisation does not have a TTY, you can use the National Relay Service (NRS). The NRS relays your spoken telephone conversation to text for a person who uses a TTY.

Sign language

Some people with disabilities use signing to communicate. Signing can take several different forms. It is important to understand how the person communicates. You may need another worker or family member to teach you, as some people make up their own signs and meanings. Some of the different methods of signing include:

- ▶ Signed English: Word-for-word translation from spoken English to signs.
- ▶ Key word signing: Key words only are signed
- ▶ Auslan: Auslan stands for the Australian Sign Language. It is a whole language of signs, facial expressions and body language. It is generally used by people who were born deaf; they will think of it as their first language.
- ▶ Individual sign language: Some families will make up their own system of signing to communicate. This is often true if they have a child with an intellectual disability who is also nonverbal.

Hearing aids and devices

There is a range of hearing aids and devices that can be used by people with an acquired hearing impairment. The cause of the hearing impairment needs to be assessed and a device that is specific to the individual needs recommended. If the person has a hearing impairment due to illness, injury or the ageing process it may be possible to assist them with a hearing aid or device.

Interpreter

Some people may need an interpreter to help them communicate. This may be a foreign language interpreter or an Auslan interpreter who assists with signed communication. Many people from a non-English speaking background may have acquired their English in the workplace and it may not extend to the vocabulary needed in the community setting.

Example

Use an electronic communication device

Troy wants to join a football social club. He uses an electronic communication device to communicate with most people. Because he has to introduce himself to a large number of people the first time he goes to the club, he asks his support worker to help him make a communication card for him that says, 'My name is Troy and I communicate with an electronic voice'.



Practice task 15

Investigate sources of support for creating or learning how to use a variety of communication aids. Use the internet or speak to contacts in the disability field to find this information. Complete this table with information you have found, including:

- ▶ useful websites
- ▶ government services
- ▶ eligibility criteria
- ▶ training available.

Communication device/Aid	What's available/Eligibility
Communication boards/cards	
Electronic communication devices	
Telephone typewriter	

Hearing aids and devices	
Interpreting services	
Communication system/ language	Training/Courses
Auslan	
Key word signing	

Click to complete Practice task 15

3C Determine physical barriers to participation and identify solution

Legislation and building codes vary between states and territories and local councils have control over building permits at the community level. Unfortunately, there are often loopholes and inconsistencies in design regulations and requirements. In particular, older and heritage-listed buildings may be exempt, so not all buildings are accessible to people with disabilities.

Design codes are not in line with disability legislation and landlords can claim unsustainable hardship as a justification for not remodelling or modifying buildings to ensure access. Unlike countries such as the USA, Australia does not have regulations to ensure all buildings must be accessible.

For people with disabilities, many of the barriers that prevent participation in the community are physical barriers that impede entry and exit from both public and private buildings.



Role of a support worker

You may be required to work with the person to identify the barriers that prevent their participation in the community and assist them in finding solutions to these issues as shown here.

Role of a support worker to assist with identification of barriers

- ▶ Assist with an audit for accessibility.
- ▶ Assist the person to make a phone call or write a letter to lobby for accessibility.
- ▶ Advocate on the person's behalf for accessibility.
- ▶ Educate the public about issues of access.
- ▶ Assist the person to use a range of mobility and access devices.

Common physical barriers

The most common physical barriers for people with disabilities are those that make it difficult to enter or exit buildings. These barriers present problems for people with physical, sensory, cognitive and intellectual impairments. They may also be barriers to people with age-related issues such as poor balance or osteoporosis.

Physical barriers may include:

- ▶ kerbs
- ▶ lifts
- ▶ ramps
- ▶ lighting
- ▶ signs
- ▶ steps and stairs.

Neighbourhood development

Local neighbourhoods have evolved over time without significant input from the disability sector. State and local government road and traffic laws impact heavily on the built urban environment.

Many voluntary standards, however, have also been developed which help define requirements for inclusive design of our public spaces. For example, audible pedestrian lights and tactile ground surface indicators (TGSI) which are essential for vision impaired pedestrians to safely navigate the streets, are now almost everywhere in our larger cities.

Unfortunately, many traditional access issues remain, while changes in lifestyle have presented some new barriers along our footpaths and walkways.

Additional areas of concern for people with disabilities include:

- ▶ restaurants with tables and chairs on the footpath
- ▶ signage and merchandise displayed on footpaths
- ▶ uneven paving and cobblestones
- ▶ excessive noise that may negatively affect people with hearing impairments
- ▶ limited disabled parking
- ▶ height of ATMs, benches or counters
- ▶ amenities such as disabled toilets used for storage, or change rooms without handrails or benches.

Procedures for assessing barriers

As part of the process of helping them develop their individual plan, you may be able to assist the person to assess the physical barriers that are present in the venues they need to access.

Barriers may not only affect access, but also the use of facilities, such as tearooms, toilet and common areas.

Procedures to assess barriers include:

- ▶ auditing possible barriers by using a checklist
- ▶ auditing possible barriers by using a checklist
- ▶ supporting the worker or person visiting the venue in advance
- ▶ asking council for information on accessible premises in the local area
- ▶ using access maps, sometimes available from disability support groups
- ▶ using prior knowledge of person or peer group.

Role of the person

Good preparation for participation requires involving the person in identifying their barriers, devising and implementing solutions that will work for them. It is tempting to quickly jump ahead to putting in place a solution to facilitate access, but there are usually a range of options and the person must make the decision on what is best for them.

To help the person identify ways to overcome physical barriers, you may need to guide them through a problem-solving exercise using strategies.

Strategies to overcome barriers:

- ▶ Changing the route of access to avoid barriers
- ▶ Changing the level of support to overcome barriers
- ▶ Changing the environment to remove barriers

Broader solutions

Barriers to community inclusion for a person can be varied and may include establishing temporary access, finding alternative routes for access, improving signage and/or changing the venue. If barriers cannot be overcome by simple strategies, aids or modifications, the person's individual plan will need to be adjusted to include alternative activities.

In addition to these very immediate solutions, the person may also be involved in either individual or systemic advocacy to resolve these issues.

Options to overcome physical barriers:

- ▶ Lobbying for change at all levels of government
- ▶ Complaining to owners or landlords
- ▶ Complaining to the local council
- ▶ Lodging a complaint with the Disability Discrimination Commissioner or Equal Employment Opportunity Commissioner in their state or territory
- ▶ Forming a lobby group
- ▶ Appointing an advocate to speak on the person's behalf to resolve issues with the local council
- ▶ Becoming involved in mediation

Example

Identify physical barriers to participation

As part of their disability action plan, the state museum asks Sam to be a guest speaker at a staff meeting to talk about access issues for people in wheelchairs. Sam, who has paraplegia as a result of a spinal cord injury, agrees.

When he arrives at the venue, he is confronted with a five-step entrance area leading up to the main doors. He rings his contact on his mobile to ask how to access the building.

She apologises profusely and tells him he will have to use the caterer's entrance and come through the kitchen at the rear of the building.



3D Recognise personal limitations and seek assistance

You may be asked to do something outside of your job role or the person's individual plan by the person you are supporting or by someone close to him or her. You must be clear about your own limitations and when you need to ask others for assistance or advice.

You may also require help with a task within your area of responsibility due to it being too physically demanding for one person or due to the circumstances at the time. For example, you may need help with lifting or help assisting a person of the opposite sex to access the toilet.

You may also be unfamiliar with the person and their needs and be unable to discuss these with the person due to communication barriers.

In cases when you are unfamiliar with the person, you should:

- ▶ know your job description
- ▶ recognise your limitations
- ▶ explain the situation to the person
- ▶ ensure the person is in a safe environment
- ▶ contact your supervisor for assistance
- ▶ document the incident as soon as practical.

Areas of limitation

When a person's needs or demands are outside of your role, you still need to handle the issue professionally.

By being familiar with your organisation's policies and procedures, you should be prepared to respond appropriately to both time critical and non-urgent demands. You need to be familiar with your organisation's protocols or procedures for dealing with these situations.

There are some circumstances where demands may be beyond your limitations.

You may find that an issue or task is outside of your limitations because:

- ▶ you lack the necessary skills and knowledge
- ▶ you lack information
- ▶ it is not in your job role
- ▶ it is not in the person's plan
- ▶ you lack the physical ability
- ▶ you lack the resources
- ▶ it may cause danger of injury to you or the person.

Non-immediate situations

Where the situation is not immediate or urgent, clarity about and knowledge of your organisation's policies and procedures will help you stay within your professional boundaries.

It may be tempting to do a task outside of your role 'just once' or 'as a favour' but if you do, it will be harder for you or another worker to establish the boundary later. The person may interpret your refusal as unwillingness to help.

Actions you can take when faced with demands beyond your limitations are shown here.

Skills/knowledge

- ▶ You lack the necessary skills and knowledge.
- ▶ Talk to your supervisor to gain training in the area concerned.
- ▶ Enrol in and complete necessary training to ensure appropriate skill level.

Information

- ▶ You lack information.
- ▶ Seek additional information from relevant sources. This will usually be a case manager, your supervisor or the person themselves.

Job role

- ▶ It is not in your job role.
- ▶ Explain it is not in your job role.
- ▶ Do not allow yourself to be bullied or coerced.
- ▶ Contact your supervisor for further instructions.

Person's plan

- ▶ It is not in the person's plan.
- ▶ Explain the situation.
- ▶ Contact your supervisor.
- ▶ Revise the person's plan if appropriate.
- ▶ Seek additional training if needed.

Physical ability

- ▶ You lack physical ability.
- ▶ Explain the situation.
- ▶ Check policies and guidelines.
- ▶ Contact your supervisor.
- ▶ Ensure appropriate resources are available.

Resources

- ▶ You lack resources.
- ▶ Contact your supervisor to discuss additional resources or equipment.
- ▶ Document or report your concerns.

Danger/injury

- ▶ It may cause danger or injury to you or the person.
- ▶ Advise the person of your duty of care.
- ▶ Advise why you feel there is risk of injury.
- ▶ Contact your supervisor.
- ▶ Document or report your concerns.

Alternative arrangements

When aspects of the plan are outside of your job role, skills or knowledge, it is necessary to inform your supervisor. Your supervisor will organise alternative arrangements. Alternative arrangements vary considerably. Seven examples are shown here.

Alternative arrangements that may be required

Training

Training the support worker in the areas of skill and knowledge they lack.

1

Example:

Support workers may need to be trained in:

- ▶ the continence regime for the client in order to travel with them interstate
- ▶ Auslan, to work with a hearing impaired client.

Changing the activity

Changing the activity the client will undertake.

2

Example:

A client who wants to travel to South Africa is dissuaded from doing so, as the accessibility and hygiene standard in the township she wishes to visit could pose a health risk. The client is persuaded to undertake a video camera link-up with the people she wishes to visit instead.

Guidelines

Writing guidelines for an activity for which there are none.

3

Example:

A client wants to attend the casino and asks for assistance in playing the pokies. Guidelines have to be written regarding the role the support worker can play and what assistance can and cannot be provided.

Support worker skills

Finding a support worker with the skills and knowledge to undertake these aspects of the plan.

4

Example:

A client wishes to attend motorcycle races on Phillip Island. A support worker with knowledge of the racetrack and its accessibility is found to accompany the client.

Other assistance

Identifying who else may be able to assist with these aspects of the plan.

5

Example:

A client wishes to attend bridge club but has no funding for respite. A fellow bridge player who can provide transport to the bridge club is found.

Within or outside support role

Assessing whether these aspects of the plan are outside organisational guidelines and should not be undertaken.

6

Example:

A client wishes to attend a brothel and needs a support worker to accompany him. It is decided that this activity is outside organisational guidelines as there is no work health and safety (WHS) assessment of the environment and no risk assessment of the activities involved. This request is declined.

Duty of care

Assessing whether these aspects of the plan comply with the organisation's duty of care.

3

Example:

A client with cerebral palsy wishes to join a hang-gliding club. It is decided that they need to modify their expectations and should attend only as a spectator.

Emergency procedures

If an emergency situation arises, a clear understanding of critical incident management and duty of care will help you make good decisions quickly.

You must render all assistance you can within your level of training and expertise. For example, if you are first aid trained you should stay within the limits of your training when assisting with any injuries.

Emergency response training will usually be part of any workplace induction. Following is a series of steps you should follow in an emergency.

Steps to be followed in an emergency

- ▶ Stay calm.
- ▶ Ensure your own safety first then that of the person and others.
- ▶ Ring for emergency services such as an ambulance or the fire brigade.
- ▶ Be aware of the time.
- ▶ Wait with the person for assistance to arrive.

- ▶ Reassure the person and help them to stay calm.
- ▶ Accompany the person to hospital if necessary and appropriate.
- ▶ Once the situation is under control, contact your supervisor as soon as practical.

Example

Recognise personal limitations and seek assistance

Edwina is vision impaired and has a guide dog for assistance. One day Edwina tells the support worker Dean, that a taxi driver has refused to let her into the taxi with the guide dog. The driver said the dog would make the taxi smell bad. Dean is not sure what Edwina’s rights are in this situation so he contacts his supervisor, Kate. Kate advises that the taxi driver cannot refuse to take the guide dog and gives Dean contact details for Edwina to lodge a complaint with the Taxi Directorate.



Practice task 17

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

Case study

On her first day working as a support worker, Rita is asked to accompany her client, Gretchen, to the shopping centre. Gretchen has an intellectual disability and uses an electric wheelchair.

While they are at the supermarket, Gretchen has a seizure. Rita thinks it is an epileptic seizure but is not sure, as she is not familiar with Gretchen’s history. She also does not know what procedure to follow because Gretchen is in a wheelchair. Rita feels a moment of panic. She knows this situation is outside her limitations.

1. What should Rita do and in what order? List five steps she should follow.

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2. What assistance should she give to her client?

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3. What documentation should she complete?

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4. Why do you think Rita feels this is outside of her limitations?

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Click to complete Practice task 17

3E Identify and assess cognitive deficit-related barriers

Cognitive impairment may be congenital or have occurred since birth. A person with a congenital cognitive impairment is often said to have an intellectual disability. An acquired cognitive impairment (happening some time during their life) is referred to as an acquired brain injury (ABI).

Intellectual disability may be caused by genetic abnormalities, problems during pregnancy or birth difficulties. Acquired brain injury can result from:

- ▶ trauma such as a blow to the head
- ▶ stroke
- ▶ long-term substance abuse
- ▶ lack of oxygen to the brain in events such as near drowning.



Some of the more challenging support situations may arise when you are working with persons with cognitive impairment.

Signs of cognitive deficits

The impact of an intellectual disability or an ABI on each person will depend on the cause of the disability and the part of the brain affected. People with cognitive impairment may show evidence of the impacts.

Signs of cognitive deficits:

- ▶ Difficulty reasoning or problem solving
- ▶ Problems with planning and sequencing
- ▶ Problems initiating action
- ▶ Inappropriate sexual behaviour
- ▶ Difficulty in managing their emotions
- ▶ Memory loss – short- or long-term
- ▶ Difficulties with speech
- ▶ Lack of motivation
- ▶ Swearing and explicit language
- ▶ Partial paralysis
- ▶ Poor fine motor skills and coordination
- ▶ Poor balance

Barriers caused by brain damage

Where brain damage has occurred, the damage is in most cases, permanent. Although people with an ABI may relearn some skills and learn techniques to compensate, some skills will not return. Unlike people with an intellectual disability, people with an ABI may experience a greater sense of loss and frustration at not being able to manage things the ways they used to.

Support workers providing assistance to a person with an ABI can often find situations or certain behaviours particularly challenging.

In order to deal with these situations, empathy is important. It also helps to separate the person from the behaviour. Tell yourself that it is not so much the person you are finding difficult, but the part of their brain that is not functioning as it typically would.

Many barriers to social participation for people with an ABI come from their own behaviour. Some of these behaviours are listed here.

Behaviours that may be exhibited by those with an ABI

- ▶ Inability to make themselves understood verbally
- ▶ Resorting to physical actions, such as hitting out, when verbal communication fails
- ▶ Bursts of anger and frustration
- ▶ Inappropriate sexual behaviour
- ▶ Inability to understand cause and effect
- ▶ Problems with planning and organising
- ▶ Swearing

Dealing with behaviours of concern

All behaviour has a reason; it may seem unprovoked, but behaviour is not random. It results from some need and the desire to express that need. The needs that people have can be summarised into groups.

People have a range of needs, including:

- ▶ physical needs, such as food and warmth
- ▶ safety needs, such as knowing what is happening around them
- ▶ social needs, such as the need to communicate with others
- ▶ emotional needs, such as feelings of confidence, self-esteem, acceptance by others
- ▶ sexual and relationship needs
- ▶ self-expression needs, such as language and creative outlets.

Behaviours as an expression of need

Change in behaviour is triggered by some stimulus or event. Stimuli may be internal and invisible, such as thoughts and feelings, or external. To prevent the behaviour, it is necessary to identify the trigger that causes the behaviour and, if possible, eliminate that trigger. This will stop the behaviour or at least calm the person down.

Identifying behavioural triggers may not be easy, but a support person experienced with a particular person may have learned from experience. Triggers may also be documented in a person's plan.

If an external trigger, such as a crowd or a noise, cannot be eliminated, the person will need to be removed from the source of distress. Some common triggers to be aware of are outlined here.

Behaviour triggers

Changes in the environment, such as noise, heat, crowds of people, unfamiliar surroundings.

Changes in the people present or lack of them, such as not having their support person present or having someone they don't like enter the room.

Changes in the person's internal condition and health such as medication, hydration or a full bladder.

Change the behaviour

Behaviours that interfere with a person's social participation goals may be addressed with specific strategies. It is worth noting that efforts should only be made to address behaviours that are clearly counter productive to a person's social inclusion. Although behaviour may not typically be socially acceptable, if a person is operating in an environment or with a group where the behaviour is not creating a barrier, it should not be made a focus.

Where strategies are needed they should be discussed, along with the reasons for using them, with the person.

Specific strategies that you can use with the person to change behaviours

- ▶ Introduce a positive stimulus or trigger that you know results in calm behaviour such as a favourite piece of music, toy, object or person.
- ▶ Manage the behaviour by stepping back and withdrawing from the line of abuse or conflict.
- ▶ Make eye contact and using simple communications of no more than five words of five letters each, such as 'Sit down now'.
- ▶ Ask the person in simple language what is wrong.
- ▶ Introduce a positive stimulus or trigger that you know results in calm behaviour such as a favourite piece of music, toy, object or person.

Effective behavioural strategies

Where these behavioural strategies do not work, some persons have a behaviour modification program in place to change their behaviour. This is a slow, long-term option and requires the person's support team to all behave consistently each time the behaviour occurs.

The first step towards developing an effective behavioural strategy is understanding the unwanted behaviour. If we regard all behaviour as the expression of a need, then it makes sense to suggest and encourage an alternative way to express that need, if we want to change or eliminate that behaviour. To focus on eliminating a particular behaviour, rather than replacing a behaviour, is to deny the person the expression of a need.

Below are the steps in the behavioural modification process:

Steps for modifying behaviours of concern

- 1 Collect information about the possible purpose of the behaviour
- 2 Highlight the common challenging situations, environments or activities
- 3 Make a plan to avoid or change those 'high risk' activities or situations whenever possible
- 4 Consider options for more appropriate replacement behaviour. Ensure the replacement behaviour meets the same needs as the challenging behaviour as well or more effectively
- 5 Use prompting and positive reinforcement to consistently encourage the placement behaviour

Communication

While some behaviour may be difficult to manage at times, there are some simple communication tips that help. These are shown below.

Ten communication tips to help manage behaviours

- 1 Address the person by name.
- 2 Make eye contact if appropriate.
- 3 Use simple sentences and simple words.
- 4 Ask one question at a time.
- 5 Give one instruction at a time.
- 6 Ask closed questions to clarify information.
- 7 Talk about emotions, fears and feelings.

8

Discuss why the behaviour occurred and what the person found distressing.

9

Limit the amount of other noise, visual distractions and people present.

10

Speak calmly, slowly and clearly.

Example

Identify and assess cognitive deficit-related barriers

Shana has an acquired brain injury and has difficulty communicating. She asks her support worker, Viv, to take her to the shopping centre to buy a Christmas present for her sister.

The shopping centre is very crowded and after a few minutes Shana becomes very agitated and starts to moan and hit out at people. Viv takes Shana out of the centre and away from the crowds for her to calm down. They then talk about what she wants to buy for her sister.



Practice task 18

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

Case study

Tara is in her 30s and very social and outgoing. She has an acquired brain injury from a motor-cycle accident two years ago. She used to work as a manager in hospitality and wants to get back into the workforce. She attends job-search training at Centrelink to get support writing applications for hospitality positions like waiting on tables. One day in class, Tara swears very loudly at the trainer. The class goes quiet except for a few people who giggle.

1. Does this behaviour constitute a barrier to social participation? If so, why?

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2. What strategies could you suggest to help Tara understand that it was not appropriate to swear in class?

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3. What do you think may be the cause of Tara’s outburst?

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Click to complete Practice task 18

3F Discuss travel and transport issues with the person and identify strategies to deal with these

People you support may have access to a range of transport options – including their own car. However, transport is also one of the major barriers to people with disabilities participating in the community. Public transport in Australia is not uniform across states and territories, and in many cases is not disability friendly. Barriers to use include physical or access barriers, lack of service information and cost.

While taxi services cater to people with special needs, not all bus and tram services are accessible for people in wheelchairs. These services are being progressively upgraded and new vehicles with accessible features are replacing the older ones.

Rail typically offers the best access of the main public transport options, but station facilities are not always accessible and service, timetable and ticketing information is often not available in formats that all people can use. For example, station address systems overlook the needs of people with a hearing impairment.

Travel for people with disabilities can rarely be spontaneous. It is necessary to plan and prepare all details. For this reason it is useful to draw on the experience of peers who have already used various modes of transport.

Below are some of the issues that can arise with the various forms of transport and strategies to deal with these issues.

Private cars

Common issues:

- ▶ Expensive to run
- ▶ May be unsuitable for transporting a wheelchair
- ▶ Can't be used by people with many disabilities such as vision impairment or ABI

Strategies:

- ▶ Car pooling
- ▶ Modification of private vehicle
- ▶ Volunteer drivers or support person

Taxis

Common issues:

- ▶ Are expensive
- ▶ Can be late
- ▶ Unreliable
- ▶ Safety issues

Strategies:

- ▶ Use concession cards
- ▶ Book well in advance and allow plenty of time
- ▶ Check driver's identification on entering the taxi

Buses and trams

Common issues:

- ▶ Inaccessible to wheelchairs
- ▶ Automatic ticketing systems unsuitable for vision-impaired persons
- ▶ Can be very crowded

Strategies:

- ▶ Persons who use wheelchairs will need to find alternative means of travel
- ▶ Ask for assistance or pre-purchase tickets
- ▶ Travel outside of peak times where possible

Trains

Common issues:

- ▶ Hard to read timetables
- ▶ The height of platforms
- ▶ The gap between the platform and train
- ▶ Safety issues at night
- ▶ Crowding

Strategies:

- ▶ Use phone inquiry for times
- ▶ Ask for temporary ramp that should be available on request
- ▶ Travel during the middle of the day where possible

Car travel

A number of people with disabilities will have their drivers licence and their own car. Their licence may be granted according to certain conditions, for example, that they do not drive at night or that they only drive a properly modified vehicle.

People with physical disabilities can have a range of modifications made to their car to meet their individual needs. A number of specialised automotive engineers make these modifications according to strict standards.

Government and philanthropic funding is often available for people who need to pay for these modifications so that they have their own transport.

Some common modifications are shown here.



Steering wheel handle

To assist people who only have use of one arm to steer.



Hand pedals for accelerator and brake

For people without use of one or both legs.



Accessible driver's seat

For people who use a wheelchair to get around when not driving.

Air travel

Air travel is a source of anxiety for many people for a range of reasons. If the person you are supporting is planning to take a flight, discuss some of the challenges that can occur at each stage of the journey such as navigating the airport and accessing the toilets onboard the plane.

Requirements and conditions for people with disabilities who are travelling unaccompanied vary from one airline to another. Airline regulations require people with disabilities to occupy an aisle seat, which means fellow passengers may have trouble getting past them to get to the window seat.

Often however air travel is the only viable option.

Tips for undertaking air travel:

- ▶ Book in advance and notify airlines of any special needs.
- ▶ Consider travelling with a companion.
- ▶ Request mobility assistance at the airport.
- ▶ Request information in a suitable form.
- ▶ Arrive with plenty of time.
- ▶ Do a risk assessment and plan a contingency regime.
- ▶ Take advantage of early boarding for people with special needs.

Boat and ferry travel

If considering boat or ferry travel, discuss the person's previous experiences on water transport. Check, for example, if the person suffers from motion sickness and in what sort of conditions.

As with any form of transport, boarding, access and movement around the vessel may be issues. Toilets are not always accessible without negotiating steep ladder-type steps. This can be problematic particularly on overnight journeys.

Duty of care must be exercised throughout planning the trip, including considering how a person would access lifeboats in an emergency. The person should understand and accept any risks.

Some tips for safe travel on boats and ferries are provided here.

Boat and ferry travel tips

- ▶ Ask about access issues before travelling.
- ▶ Get someone to check and assess access options.
- ▶ Ask about policies on passengers with a disability.
- ▶ Check that fare concessions are available in all categories of travel.
- ▶ Ask about amenities such as toilets and refreshments.
- ▶ Discuss emergency arrangements.
- ▶ Ask if you or the person can visit the vessel before travelling.
- ▶ Check out other modes of transport for cost and convenience.
- ▶ Negotiate for the best deal to meet the person's needs.

Example

Discuss travel and transport issues with the person

Mia wants to travel from Hobart to Melbourne and thinks she would like to travel on the ferry. Mia has partial paralysis in her lower body and uses a manual wheelchair for mobility. Rosa the support worker goes with Mia to visit the ferry one morning when it has docked to check if it will be possible for Mia to board. Mia talks to one of the crew and he offers to show her around on board. She takes up this offer and checks out the access on board. She decides it will meet her needs so she books her ticket.



Practice task 19

Using the internet, research an accessibility action plan of the metropolitan or rural company responsible for transport; for example, the rail operator in your state or territory.

1. Find out what proportion of services or vehicles are fully accessible to people with disabilities.

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2. Find out what proportion of their facilities; for example, stations and platforms, are fully inclusive with services to meet the needs of people with a disability.

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3. What plan or targets do they have for improving accessibility over the next 5–10 year period?

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Click to complete Practice task 19

3G Evaluate the success of strategies

A critical part of the individual planning process is review and evaluation. As a support worker, you will be involved in reviewing the ongoing success of the plan's social inclusion aims at defined intervals.

However, inclusion strategies that are clearly not working should be reconsidered outside of the formal review. Adjustments may be needed. A strategy might be on the right track, but the implementation of it may need to be more gradual. There may be temporary factors, such as ill health, which are limiting success.



A plan should be responsive rather than set in stone. For the person's integration into the broader community to be successful, you need to watch for early signs that strategies in their individual plan are indeed working. You may well be the first person to notice any of these signs. The person themselves may or may not be aware that the strategies are working. First discuss your observations with them and seek their views on what is occurring.

Waiting for a planned review is fine as long as everyone is happy with the agreed goals and strategies in place.

Signs that the strategies are not working

When you notice that the plan's strategies are not working you have to initiate corrective action. Some of the early signs to look out for are shown here.

Early signs that the strategies are not working for the person are:

- ▶ non-attendance at planned social activities
- ▶ reluctance to attend and finding excuses not to
- ▶ lack of social cohesion with the group when person does attend
- ▶ appearing withdrawn or experiencing isolation in the social environment
- ▶ inability to communicate with others in the social environment
- ▶ inability to take part in group activities
- ▶ difficulty with comprehending the group activities and discussions
- ▶ difficulty accessing the venues
- ▶ ongoing difficulties with transport
- ▶ financial hardship caused by participation fees
- ▶ stress, fatigue or signs of ill health.

When to evaluate the strategies

Plans should have a formal evaluation system incorporated at the design phase. This usually consists of reviews at either three-, six- or 12-month periods but six to 12 months is too long to wait if a plan is not working. Triggers to bring forward evaluation of social inclusion strategies are listed here.

The person's strategies for social inclusion need to be evaluated for effectiveness:

- ▶ on the request of the person
- ▶ when interests change
- ▶ when there is a trend of non-participation
- ▶ when you identify issues of non-acceptance by the community
- ▶ when you identify that the activities are a poor match with the person's goals or expectations
- ▶ when an incident report or concern form is lodged
- ▶ when the person's health or circumstances change.

Evaluation

As a proactive support worker, you should engage in informal evaluation of the strategies being used every time you provide support to the person. The evaluation process is ongoing as you observe the person's level of community integration from day to day or week to week.

It is part of your reflective practice to consider what led to the successes and the difficulties, what moved the person towards their goals and what got in the way of them.

Steps in the evaluation process from informal to formal are listed here.

Stages in the evaluation process

- ▶ Monitor the person's participation on each occasion and, if possible, consult with them about how they feel it went.
- ▶ Provide constructive feedback, solve any minor issues that arise and document these issues even if they appear to be small.
- ▶ Identify whether the strategies are not working or a review is required for any of the previous reasons.
- ▶ Provide feedback to the person and gain their consent to undertake an evaluation of the strategies currently in place.
- ▶ Contact your supervisor and report your concerns in writing.

Reporting

Where you think the strategies that are in place are not working for the person, you must take some action. If you fail to notice these early signs, the person may lose confidence in the concept of social inclusion and decide to withdraw from community activity altogether. A person's early experiences of social networking must be positive to encourage continued involvement.

This action includes:

- ▶ discussing your concerns with your person
- ▶ notifying your supervisor or the person's case manager
- ▶ documenting your concerns
- ▶ requesting a review or reassessment for the person's individual plan.

Formal review

The formal review process is usually undertaken by supervisors. As a key player in the success of the implementation of the person's plan, it makes good sense for support workers to also be included in the process.

Support workers can contribute direct insights into the effectiveness of the strategies in place. The worker is also the person most likely to have the person's trust and respect so having them at the review will usually help the person engage in the review process and speak up.

Where persons are not capable of making decisions for themselves, a guardian or advocate may be involved on their behalf.

The formal review process consists of:

- ▶ revisiting the person's plan
- ▶ providing evidence that it is not working
- ▶ considering whether a formal assessment is required
- ▶ inviting the person to discuss their current strategies
- ▶ considering additional equipment, resources or training
- ▶ reading through all documents that relate to the individual plan
- ▶ clarifying anything that is unclear
- ▶ revisiting their learning goals and reconfirming or changing them
- ▶ redesigning strategies to meet the revised goals
- ▶ drafting up a new plan and signing it off by both parties.

Example

Evaluate the success of strategies

Ahmad finished studying at his local special school a few years ago and has been sitting at home mostly playing video games ever since. As part of a community engagement plan, he has decided to start a course to help him get a job at a nursery. The horticultural course he wants to study is at an institute several kilometres away and he is unfamiliar with the public transport system.

Pauline, his support worker, does some research with him on the internet to find out about the easiest public transport option. She prints off timetables and maps and discusses the journey with him. Pauline accompanies him on the trip from his house to the horticultural institute to get him enrolled.

Once Ahmad is enrolled and gets his study timetable, he sits down again with Pauline and works out exactly which service he is going to catch.

Ahmad is not confident that he can do the trip himself because his short-term memory is not very good. Ahmad and Pauline agree that, to make sure he does not get lost, Pauline will 'shadow him' for the first week on his journey to and from the course.



Practice task 20

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

Case study

Stephanie goes to pick up Rohan from his pottery class. When she arrives, she finds Rohan sitting outside on his own waiting for her. The class has not finished but Rohan says he is bored and wants to go home. Stephanie asks if he wants to say good-bye to anyone before he leaves. Rohan says they wouldn't notice he has gone.

1. What are the signs that the pottery class is not providing a meaningful social outlet for Rohan?

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2. What would you do if you were Stephanie?

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3. What new strategies might you suggest for Rohan?

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Click to complete Practice task 20

Summary

1. As part of the person's community inclusion plan, you need to develop strategies to meet their requirements in terms of support services, aids and equipment and the environment itself.
2. You need to become familiar with a range of communication strategies and aids so you can assist the person with communication as part of their social integration.
3. In collaboration with the person, you should identify physical barriers to their participation and find ways to overcome them.
4. It is important that you recognise your own limitations and know when you need to ask others for further assistance or advice.
5. The greatest barrier to community inclusion for many persons with an acquired brain injury is their own behaviour.
6. Transport issues remain one of the major barriers to integrated social activity for many persons with a disability.
7. Signs that a person's integration plan is not working need to be picked up early and addressed.

Part B

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

Case study

Alona is 32 years old and has an acquired brain injury from a car accident a number of years ago. The accident left her with cognitive impairment, memory issues and speech difficulties. She is also partially paralysed down one side. She can walk with the assistance of a walking frame, but finds it very tiring, so she prefers to use a wheelchair.

She has a severe stutter and often cannot find the words she is trying to say and is self-conscious about this. With strangers and new acquaintances she prefers to use a small electronic communication device to text message rather than have the embarrassment of saying them. Since her accident, Alona has epileptic seizures and these come without warning.

Alona lives alone and needs assistance with planning and sequencing tasks. She tends to forget things if they are not written down. Her literacy, numeracy and computer skills are good. Alona has a tendency to forget where she is when she visits new places and she can become distressed.

Alona was married but is now divorced. She has two children who now live with their father. She has visiting rights, and as part of her community plan wants to go with her children to the local playground and let them play there. She hopes that this way she will get to know other mothers and in time make new friends in the neighbourhood. The playground is 5 km away on a direct bus route.

- 1. Briefly explain what support needs Alona would require. Consider support services such as home care, personal care and respite, and also equipment and aids.

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- 2. What support do you think Alona would need to communicate when she takes her children to the playground?

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3. What physical barriers do you think the playground might present? What solutions could you suggest to overcome these?

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4. What are the barriers to social participation caused by Alona's acquired brain injury?

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5. What travel and transport issues do you think Alona would need to address?

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6. How would you evaluate the success of Alona's strategies for community inclusion and how often would you monitor the success of these strategies?

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7. Can you foresee any times when you, as Alona's support worker, would have to recognise your own limitations and seek advice?

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Topic 4

In this topic you will learn how to:

4A Conduct location or activity risk assessment

4B Discuss elements of risk

4C Work with people to identify strategies to remove or reduce risks

Determine risks associated with supporting participation and inclusion

The principle of supporting community participation and inclusion is a key component of current government initiatives to overcome social inequality experienced by people with disabilities. However, these activities do not come without some risk being involved. Particularly for people with a history of institutionalisation, intellectual disabilities and cognitive impairment such as dementia, there are risks involved when the support worker accompanies the person they are supporting into the community. You have a role in minimising these risks.

You need a clear understanding of your organisational policies and procedures for risk management and the strategies that can be adopted to reduce risk. These are based on legislation and standards which are applicable to your area of work.

4A Conduct location or activity risk assessment

All disability service providers have policies and procedures for supporting community inclusion that you must follow. These policies and procedures should be based on legislation, regulation and standards that seek to realise full community integration while balancing this with the inherent risk of any community activity and the specific risks of particular chosen activities.

Both you, as a support worker or supervisor, and the person you are supporting have the right to a safe environment. Additionally, you have a duty of care to any person you support. By adhering to your organisation's procedures and always doing what is fair and reasonable to prevent harm or injury you will meet that duty. You are not expected to ever eliminate all risk from an activity.

Major pieces of legislation, industry standards and principles that direct the way disability services are delivered are shown here.

Work Health and Safety Act 2011 (Cth)

Under this legislation it is necessary for your employer to guarantee a safe workplace and for you, as an employee, to participate in monitoring the safety of your workplace. Safety covers physical safety but also stress, bullying and harassment.

Disability Discrimination Act 1992 (Cth)

Under this legislation, discrimination against people with disabilities is prohibited. Specific areas are named, including access to and membership of clubs and sporting associations.

Disability Services

Disability Services Act 1986 (Cth) and National Standards for Disability Services

The standards cover:

- ▶ rights
- ▶ participation and inclusion
- ▶ individual outcomes
- ▶ feedback and complaints
- ▶ service access
- ▶ service management.

Duty of care

Duty of care is part of common law and it requires you to do what is fair and reasonable to prevent harm or injury to the person or their property.

Community participation and inclusion

Policies and procedures that impact on community participation and inclusion:

- ▶ Protecting privacy
- ▶ Protecting dignity
- ▶ Providing personal care
- ▶ Lifting and transferring people
- ▶ Handling money
- ▶ Medication
- ▶ Observing confidentiality
- ▶ Emergency procedures
- ▶ Incident reporting
- ▶ Providing transport
- ▶ Supporting families
- ▶ Reporting concerns

Types of risk assessment

Risk assessments are applied in a variety of ways within the disability services sector. At the organisational level, risk assessment and management will be a factor in the development of all organisation policies and procedures. At the service delivery level, the type of risk assessment needed will depend on the objective of the assessment.

Some risk assessments are principally to protect support workers and others working with people with a disability who has challenging behaviours. These are often referred to as clinical risk assessments and are not conducted by support workers and supervisors, but by behavioural specialists using specific assessment tools.

These clinical risk assessments may, however, affect the way that social and inclusion support is provided to a person. For example; one outcome may be a recommendation that two support workers should accompany a person during certain community activities.

A risk assessment that principally considers the possible risks to a person with a disability is often referred to as an environmental risk assessment. A location or activity assessment is a type of environmental risk assessment.

The person with a disability may be assessed in a range of environments where they commonly receive support, both inside and outside of their home. If a person is supported in a number of community settings, each of these should be included in any risk assessment.



Role of a support worker in risk assessment

A disability service provider's policies and procedures are an interpretation of their legal and ethical responsibilities and a response to these. You do not need to fully understand all the legal and regulatory details yourself, but if you have a good understanding of the underlying principles of the legislation and standards, you will be far clearer about your role as a support worker.

Support workers may be called upon to supply information to complete either a clinical or environmental risk assessment document. As the person most familiar with how a person with a disability is in a given environment, the support worker may take a larger role in a location or activity risk assessment. They may also be involved in the planning and documentation of strategies to overcome any risks identified.

Supervisors or specialists may need to instruct or train support staff in the implementation of specific risk management strategies. As a support worker, you may be involved in conducting the risk assessment because you have a good prior knowledge of the person and the strategies that are successful. The risk assessment is usually conducted by the case manager or supervisor, or may involve other relevant health professionals, including the support worker.



Circumstances of the person in risk assessment

Before a person with a disability commences their community inclusion activities, it is important that a risk assessment is conducted of both the location that the person will be visiting and the activities involved in their plan. In this assessment, you need to take into account the specific circumstances of the person. These include:

- ▶ physical circumstances, such as mobility and sight
- ▶ cognitive circumstances, such as ability to respond appropriately to changes in location
- ▶ emotional state, such as stress or excitement.



Risk assessment principles

The key variables in the assessment of any risk event are its likelihood or probability and consequences or impact.

Both of these variables are usually organised in a table and categorised into low, medium and high. The main principle of risk assessment is to put most time and energy into planning for common and serious risk events and not rare or relatively harmless ones.

The risk assessment therefore considers all the things that could potentially go wrong but only puts in place contingency planning to cover those events that have serious consequences or are very likely to happen.

Contingency planning will include ways of reducing and eliminating the risk and ways to respond to the risk should it occur.

Here is the matrix to use to assess risks.

LIKELIHOOD	VERY LIKELY	Acceptable risk Medium	Unacceptable risk High	Unacceptable risk Extreme
	LIKELY	Acceptable risk Low	Acceptable risk Medium	Unacceptable risk High
	UNLIKELY	Acceptable risk Low	Acceptable risk Low	Acceptable risk Medium
		MINOR	MODERATE	MAJOR
IMPACT				

Risk assessment for community inclusion

Risks associated with supporting community participation may include issues around the safety of the location as well as suitability of the activity for the person. To identify the level of risk it is important to ask the right questions.

Here is a summary of the major risk factors for community inclusion and the questions you can ask to assess the level of risk for the individual.

Non-acceptance

What it means:

There is a chance that the community group will not accept the person with a disability into their network.

This may be by direct action such as rejecting an application or indirect such as social isolation.

Questions to ask:

- Does the group have a policy on access and equity?
- Has the group previously had members with a disability?
- What was their experience?
- What is the level of knowledge of disability?
- Is there a sponsor, mentor or buddy to support inclusion for the person?
- Are the demographics such as age and gender suitable?

Poor match with activity and the group

What it means:

The activity does not meet the person’s needs or is not what they expected.

Questions to ask:

- Is the activity really one the person wants to take part in?
- Is the activity possible for the person with the disability?
- Are the communications in the group appropriate?
- Is the group ready to accept the member with the disability?

Safety of the activity

What it means:

The actual activity may not be safe for the person concerned.

Questions to ask:

What are the physical requirements of the activity?

Do these match the abilities of the person?

What are the stress or excitement factors?

What are the cognitive skills required?

Risk management procedures

Organisations should have risk assessment procedures and documentation in place. While systems vary from one organisation to the next, the following steps are commonly followed.

Steps in risk management for community inclusion

Risk assessment

1

A risk assessment is undertaken to identify risks as well as their likelihood and consequences. A risk matrix or table may be used to categorise risk events as serious/harmless and likely/unlikely. Some ideas for risk minimisation may be discussed as part of the assessment.

Action risk assessment

2

The assessment is actioned by the supervisor or case manager of the person with a disability. This may include developing and listing strategies or steps to be followed when working with an individual providing support. Strategies listed may be applied in any community situation or be specific to a particular environment.

Implement the strategies

3

The support workers involved with the person must all be informed of and, where necessary, trained in the strategies or steps that are to be implemented. The support worker may help to refine how the risk minimisation is implemented using their practical knowledge from working with the person.

Plan and review

4

The changes need to be reflected in the person's individual plan so that consistency of approach is ensured. Replacement or relief support workers should access this plan prior to providing support to the person. Where the risk management procedures decided upon require extra resources or funding, applications and arrangements need to be made.

Review

5

After a reasonable period, usually decided at the assessment stage, the risk management strategies will need to be reviewed. The review should consider whether any risks have been realised and the impact of those. The review should also seek feedback from the person and support workers about the effectiveness and suitability of the risk strategies.

Common risk issues

As well as the broad categories of risks already mentioned relating to the activity and the group, there are a number of environmental, behavioural and cognitive factors unique to the individual that may increase their risk in community settings.

A number of factors that you should consider are identified here.

Environment

Consider environmental factors such as:

- ▶ location and activity
- ▶ accessibility
- ▶ ease of parking
- ▶ crowds
- ▶ excessive noise
- ▶ lots of distractions.

Behaviour

Any known behaviour issues such as outbursts, aggression or verbal abuse.

Traffic awareness

The person may not be aware of cars and other vehicles when crossing roads.

Level of awareness

The person may have:

- ▶ memory support needs
- ▶ confusion
- ▶ money handling issues
- ▶ reduced level of insight
- ▶ cognitive impairment
- ▶ sensory impairment.

Triggers

There may be behaviour triggers such as:

- ▶ noise
- ▶ traffic
- ▶ crowds
- ▶ shops.

Known absconder

The person may have a history of wandering or may not be able to find their way home.

Organisational requirements

You need to be familiar with your organisation’s reporting process for a risk assessment. You may have a checklist to guide you, or a set form that you have to complete. If you are unsure, contact your supervisor.

A range of organisational policies will need to be considered along with any specific risk assessment documentation.

You need to be familiar with your organisation’s policies on:

- ▶ duty of care
- ▶ privacy and confidentiality
- ▶ unlawful restraint
- ▶ absconders
- ▶ manual handling
- ▶ accompanying a person into the community
- ▶ emergency procedures.

Example

Conduct location or activity risk assessment

Dot wants to join the Country Women’s Association of Australia (CWAA) and go to their meetings. She has always been interested in craft activities. Her support worker, Carmel, knows that Dot has memory support needs and a history of wandering when she becomes confused. Dot has good traffic sense and usually finds her way to the police station when she gets lost. They now know her by name. Carmel suggests that Dot needs to wear an identification card and be accompanied at all times. She also suggests that if Dot does wander, they should contact the local police immediately.



Practice task 21

Read the scenario, then answer the questions that follow.

Scenario

You are supporting Tasmin, a friendly but slightly anxious 18 year old with a mild intellectual disability and a degenerative condition that affects her eyesight. Tasmin is very fond of animals especially cats and farm animals and she dearly wants to attend the agricultural show in the city where she lives. She is generally very cooperative and easy to get along with. Her vision impairment mainly affects her peripheral vision; she cannot see things that are not directly in front of her. Her eyesight is most effective outside in daylight conditions but bright sunlight can be slightly uncomfortable for her.

1. As a supervisor, what sort of risk assessment would you do with Tasmin before her visit to the show?

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2. As a support worker who has supported Tasmin in the community before, what role might you have in the risk assessment?

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3. List all of the possible risk issues that may be a factor on a visit to the show with Tasmin.

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4. Which of these risk issues are serious and/or likely to occur?

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5. Which of these risk issues is are less serious and/or unlikely to occur?

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6. What risk issues should risk management strategies focus on?

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7. What organisation policies are important to consider when conducting the risk assessment for Tamsin?

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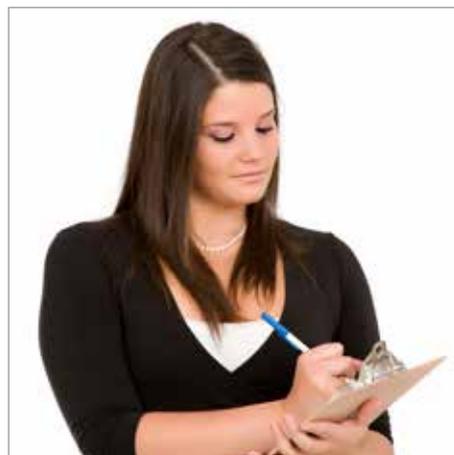
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Click to complete Practice task 21

4B Discuss elements of risk

The first step of a risk assessment is to ask questions to gather information specific to the individual person. An environment that presents no risk to one person might have major risk factors for another, as their behaviour and triggers for behaviour may be completely different. Similarly, issues about the suitability of the activity to the person’s goals are entirely individual and yet this may be the main reason for the failure of the social inclusion activity.



Communicate risk to the person

Once you have asked the relevant questions of the particular person who you are supporting, the next step is to discuss the elements of risk that you have identified with them and appropriate people who support the person. It is best to present the issues you have identified as concisely as possible and work together to develop strategies to overcome these risks. Success depends on your ability to communicate with the person and consult with them to find a strategy that works for them and meets their needs.

The purpose of the discussion is to assist the person in identifying strategies that will make social inclusion possible. It is also an opportunity for the person to learn problem-solving skills. Both these aspects of the discussion are empowering.

Here are some tips that may assist you to communicate with the person you are supporting.

Tips for communicating effectively with the person you are supporting

- 1 Think of the discussion as a joint problem-solving exercise.
- 2 Present the problem not the solution.
- 3 Discuss one risk at a time.
- 4 Let the person find the solution.
- 5 Give examples of when or why the issue may be a problem.

- 6 Assist the person to check the practicality of the solution.
- 7 Use active listening to summarise.
- 8 Document your discussion.
- 9 Use simple language and be patient
- 10 Ask the person what works best for them.
- 11 Discuss the benefits of taking part in the activities versus the possibility of risk.
- 12 Develop several options and look for solutions not restrictions.

Appropriate others

In some cases, it is necessary to discuss the risks you have identified not just with the person, but also with appropriate others. This may be undertaken as a joint meeting or case conference, or it may consist of less formal one-to-one discussions. When you are consulting with others, always inform the person, explain the reason and encourage them to be involved in the discussion.

The following shows some of the other people you may need to discuss risks with and the information and insights they may be able to provide.

Supervisor

Information they may provide:

- ▶ Organisational policies and guidelines
- ▶ Level of responsibility
- ▶ The history and goals of the person

Case manager

Information they may provide:

- ▶ If the person is a known absconder
- ▶ Previous behaviours
- ▶ Triggers
- ▶ Level of road sense
- ▶ The person's goals
- ▶ Strategies that have worked in the past
- ▶ Activities that have been successful in the past

Advocate or guardian

Information they may provide:

- ▶ The person's wants and aspirations
- ▶ Their rights
- ▶ Level of cognitive awareness

Family members

Information they may provide:

- ▶ Impact on family members
- ▶ History of absconding
- ▶ Known trigger for behaviours
- ▶ Strategies that work

Behavioural specialist

Information they may provide:

- ▶ behavioural strategies that are in place already
- ▶ triggers and risks specific to person with an acquired brain injury.

Other support workers

Information they may provide:

- ▶ everyday level of awareness of traffic and, environments that trigger behaviours
- ▶ the person's goals.

Rights

As a facilitator of community inclusion, you must remember that your aim is to assist the person to achieve participation in the broader community. It is important that you model an understanding of the person's rights at all times, including during the risk assessment process.

In order to uphold these rights, you need to be familiar with your organisation's policies. When in doubt, contact your supervisor for advice.

There are a number of rights that you should be aware of .

The person has the right to:

- ▶ respect
- ▶ choice
- ▶ take informed risks
- ▶ decision-making
- ▶ support
- ▶ dignity
- ▶ confidentiality
- ▶ access and independence.

Example

Discuss elements of risk

Jacque has an acquired brain injury from an armed robbery that went very wrong. It also resulted in him becoming blind in one eye. Jacque has always been strong in his community and has belonged to the local traders association for many years. As part of his community inclusion plan he wants to rejoin the traders association and play a role in promoting the local businesses to residents.



Jacque claims he does not have any major risk factors regarding the suitability of the activity or acceptance into the group, as people in the association already know him. However, Tom, his support worker, knows that Jacque has a problem: when he hears a police siren or similar sound, he has an anxiety attack. His heart races and he hides under the nearest table and refuses to come out. Tom identifies this as a potential risk to social acceptance. Tom and Jacque discuss the problem and Jacque agrees that they need to develop strategies to avoid this happening as it would cause social embarrassment for him.



Practice task 22

When discussing risks associated with community involvement with a person, the way you communicate with them, and people associated with them, reflects your understanding of both disability service principles and the rights of people with a disability.

Use the list of principles and rights to complete the following table by matching the principle or right with the communication approach it goes with. Then, write an example question or statement you might use that matches the approach.

Principles/rights:

- ▶ Decision-making
- ▶ Choice
- ▶ Dignity of risk
- ▶ Confidentiality
- ▶ Dignity
- ▶ Duty of care
- ▶ Independence
- ▶ Support
- ▶ Inclusion

Communication approach	Principle/Right	Question/Statement
<p>Treat the discussion as a joint problem-solving exercise.</p>		
<p>Present the problem not the solution.</p>		
<p>Discuss one risk at a time.</p>		
<p>Let the person find the solution.</p>		
<p>Give examples of when or why the issue may be a problem.</p>		
<p>Assist the person to check the practicality of the solution.</p>		
<p>Use active listening to summarise.</p>		

Communication approach	Principle/Right	Question/Statement
Use simple language and be patient.		
Ask the person what works best for them.		
Discuss the benefits of taking part in the activities versus the possibility of risk.		
Develop several options and look for solutions not restrictions.		
Do not include people the person doesn't want involved.		
Do not divulge sensitive information in front of inappropriate others.		

Click to complete Practice task 22

4C Work with people to identify strategies to remove or reduce risks

An important step in the risk management process is to work with the person, and any other appropriate people, to identify strategies to remove or reduce the risks you have now identified. The person themselves may well be the best person to suggest ways to reduce these risks. They may know what has worked in the past and will often have techniques and strategies that are tried and proven. If you consult with them and draw on this knowledge, you will find strategies to handle many of the problems that could arise.



Common strategies

Although the identification of strategies needs to be unique to each person's circumstances, there are some broad, general strategies that are worth considering. These are a guide only and you and the person may think of many others that are specific to their circumstances.

The following classifies situations into strategies that deal with the activity, the environment and the behaviour of the person. In many cases you need to look at all three classifications as part of the process of working with the person. While these strategies are a simple guide, they can be used to think about solutions that will reduce the likelihood of risk.

Strategies to deal with the activity, the environment and the behaviour of the person

1

Activity: Undertake community education to reduce rejection or lack of inclusion

The environment: Conduct a physical audit to ensure physical safety.

The behaviour: Identify triggers and remove them.

2

Activity: Provide peer support to ensure inclusion.

The environment: Modify entrance and exit to increase access.

The behaviour: Ask person and co-workers what has worked in the past.

3

Activity: Mentoring to provide support for inclusion.

The environment: Ensure toilet and other amenities are in place to meet physical needs.

The behaviour: Work out what the positive triggers to behaviour are. Positive triggers may be used to generate positive behaviour.

- Activity: Develop alternative activities to put in place if first choice fails. This can be done as part of original plan.
- 4** The environment: Make a temporary adjustment to environment such as temporary ramps or temporary relocation to quieter environment.
The behaviour: Behaviour modification programs can be used in consultation with behavioural specialist.
- Activity: Monitor person's level of motivation and act if it is low.
- 5** The environment: Consider permanent relocation of activity to quieter surroundings.
The behaviour: Educate peers about behaviour of person and its causes.
- Activity: Monitor attendance.
- 6** The environment: Slow acclimatisation to venue.
The behaviour: Make badges and tracking for absconders or people who wander.
- Activity: Review goals and then review activities.
- 7** The environment: Reduce the number of people.
The behaviour: Promote concept of a safe place for absconders.
- Activity: Put in place training to support skills development.
- 8** The environment: Increase access to parking.
The behaviour: Share information.
- Activity: Do activity in shorter bursts.
- 9** The environment: Provide transport to and from the venue.
The behaviour: Ensure the environment discourages wandering or absconding.
- Activity: Combine activities to increase satisfaction.
- 10** The environment: Provide time-out space.
The behaviour: Put a reporting system in place.
- Activity: Monitor regularly for satisfaction.
- 11** The environment: Undertake formal reviews and informal discussions.
The behaviour: Keep a log of behaviours and assess trends and triggers.

Dignity of risk

With many activities, it is not possible to eliminate risk altogether. Risk is a part of our daily lives and it is through risk, trying something new and sometimes making mistakes that we learn. This idea is sometimes expressed as 'dignity of risk' which means a person has the right to make their own choices and to take risks.

It is the role of the community worker to ensure the individual understands the risks they are taking and is therefore making an informed choice.

The key issue is to determine what is an acceptable level of risk for the benefit that the activity offers. These are not questions for you to answer alone. They are questions

you should work through with the person and appropriate others. You may come up with creative ideas, or research innovative solutions that have not been tried at your organisation before.

The three questions to ask:

- ▶ What are the potential risks?
- ▶ What are the potential benefits?
- ▶ How can the risks be reduced without reducing the benefits?

Example

Work with people to identify strategies to remove or reduce risks

Sarah is 15 years old and has cerebral palsy. She uses a wheelchair and needs assistance with toileting and some meals. She communicates verbally and has no intellectual impairment. Sarah wants to go on a youth camp with her school. She gets on well with the other students and they are used to making adjustments for her needs. The camp has been selected because it claims to be wheelchair accessible.

Marita, her support worker, identifies that there are risks to be managed and so she talks to Sarah and her parents about these risks. Sarah agrees that Marita needs to accompany her on camp. They contact the school and negotiate for Sarah to sleep in the small annex room away from the other students and for Marita to sleep nearby. They send a checklist to ensure the bathroom meets Sarah’s needs. Her teacher is also trained to provide meals assistance if Sarah needs. Sarah and Marita feel prepared for Sarah to take part in the school camp.

Practice task 23

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

Case study

Tasmin is a friendly but slightly anxious 18 year old with a mild intellectual disability and a degenerative condition that affects her eyesight. We met Tasmin in Practice task 21.

Tasmin is very fond of animals especially cats and farm animals and she dearly wants to attend the agricultural show in the city where she lives and go to the petting shed. She is generally very cooperative and easy to get along with but her parents are worried that she is too trusting of other and could be taken advantage of. Her vision impairment mainly affects her peripheral vision; she cannot see things that are not directly in front of her. She is a good reader and can read street signs and make sense of simple maps.

1. What are the two potential benefits of this activity for Tasmin?

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2. Think innovatively and create at least one strategy that does not interfere with the benefits of going to the show but helps minimise the risk to Tasmin posed by:
 - ▶ the activity
 - ▶ the environment
 - ▶ her behaviour.

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Click to complete Practice task 23

Summary

1. Before a person who you are supporting commences their community inclusion activities, it is important that a risk assessment is conducted of both the location and the activities involved.
2. Risk assessments are based on the likelihood and consequences of a given risk event occurring and provide a basis for deciding what is an acceptable level of risk.
3. Once you have identified possible risks, you should discuss these risks with the person and appropriate others.
4. You may be required to work with the person and other appropriate people, to identify strategies to remove or reduce the risks you have identified.
5. You will need to ensure that you are familiar with your organisation’s guidelines to ensure strategies to avoid risks are consistent with these policies and therefore with relevant legislation and standards.
6. Two key principles that inform legislation and standards are duty of care and dignity of risk. Risk management involves taking reasonable steps to prevent injury and harm but cannot and should not seek to eliminate risk entirely.
7. You will need to document risk minimisation strategies in accordance with organisational guidelines.

Learning checkpoint 4

Determine risks associated with supporting participation and inclusion

This learning checkpoint allows you to review your skills and knowledge in determining risks associated with supporting participation and inclusion.

Part A

1. Explain the principles of risk assessment and mitigation.

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2. What does your duty of care require that you do when supporting a person who has a disability?

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3. What is 'dignity of risk' and how does it affect the support that is offered to a person with a disability?

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4. When might a support worker be called on to be innovative or open to working with other people in their work?

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5. What communication strategies can you use to be effective in working with people to identify strategies to remove or reduce risks? List five.

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Part B

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

Case study

Darren is 18 years old and has just finished his Year 12 schooling. Darren has Asperger’s syndrome, which is at the high achieving end of the autism spectrum. He likes routine and is not good at understanding emotions and empathy. He does not have good interpersonal skills.

His case manager, Marion, is developing a community participation plan with him. He tells her he is interested in pure mathematics, chess and phonographs. Marion asks what phonographs are. Darren explains that they are old gramophones from the last century. Marion suggests they find a club where he can pursue this interest.

They find that there is a phonograph club that meets once a month. These are formal meetings followed by a get-together where members talk about their collections. The venue is accessible by public transport and the group meets at 6 pm. When she asks if they have any members with a disability, the president of the club tells her that most of the members are retired men and many of them have mobility or hearing impairments.

Marion is unsure that the club will meet Darren’s needs, because the members are all a lot older than him. She thinks he will be disappointed when he goes along. She is also concerned that the older members will find Darren’s disability difficult to understand.

When Marion talks to Darren, he is now very enthusiastic about belonging to the club. Marion tells him about her concerns and Darren talks to her about phonographs he has collected.

Darren agrees that to make sure nothing goes wrong, he will need to plan getting there on public transport and that he will like meetings that have a set format.

Marion says she is worried that the other members may isolate him because of his age. Darren agrees to practise his communication skills and practise reading people’s faces to see if they are angry or happy.

Marion fills out a community participation assessment form to record her concerns. While she has no concerns about the venue, she does have concerns about the suitability of the activity. However, Darren is very keen to join the club so she drafts a risk assessment plan that ensures they will review the plan after every meeting to see how it is going.

1. What are the aspects of his behaviour that you would need to take into account to assess the risk of failure for his community inclusion plan?

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2. Do you think the phonograph club is suitable to Darren’s needs? Briefly explain why or why not.

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3. Marion conducts a risk assessment of the activities and of the venue. What does she find? Briefly explain the potential risks or concerns that might need to be removed or reduced.

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4. How does Marion discuss the possible risks or disappointment with Darren? Does she succeed in helping Darren understand the risk and look at possible solutions? Briefly explain why or why not.

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5. What strategies do Marion and Darren discuss to reduce the chances of disappointment or isolation in the activity?

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6. What process does Marion follow to make sure it was in line with organisational procedures? What social policies and legislation may be relevant in this case?

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