## Appendix 2: Guidance on using the Wellbeing and Safety Plan:

This plan is intended to be used as a strengths-based tool, alongside the person there are concerns about. It is intended to facilitate a person-centred conversation to understand the person's experiences and how they wish to be supported. The purpose of the plan should be made clear to the person at the start of the intervention. This plan will support an open conversation about how the individual, carers and professionals view behaviours that concern and why, in a non-judgemental way.

The practitioner should ensure that they have checked with the person there are concerns about, whether they would like anyone to support them with the conversation. This can be a family member, neighbour, friend, advocate, another professional, or anyone else the individual would like to support them. The practitioner should remain mindful of whether there may be concerns regarding abuse from this person, including coercive control.

Voice of experts by experience:

- The professional is there to do things with the person and not for them.
- The professional should be aware of their own bias, agendas and time restraints.
- This plan can take place over a period of time and should be considered a multidisciplinary plan that belongs to the person and is shared so all professionals working with them understand the plan.
- Ensure that you have checked whether the Wellbeing and Safety Plan needs to be provided in an alternative format, e.g. braille, large print, easy read or the persons preferred language.
- Once you have finished writing up the plan, please take a copy of this to the person there are concerns about and talk this through to obtain their agreement on the plan and leave them with a copy.

Top Tips on using this tool from information from experts with experience:

- Do not judge the person
- Using the word 'risk' can make the person feel judged. Talk to them about safety, welfare and wellbeing. Be honest with them about what this conversation is about. It is okay to tell the person you are concerned and why.
- Listen to the person's experience, don't start the conversation with your own idea of what they need. Give them time.
- Ask the person what is going well. Celebrate all "wins", however small they may seem
- Get to know the person and build a relationship with them before having difficult conversations with them.
- Remember this is the person's life and they need to make decisions about their life where able.
- Reassure the person
- Use clear language and check their understanding.
- Be consistent with advice
- Remember things may get worse before they get better
- Make sure you have the right information. Check that the information you have is correct, such as personal details and listen to the person if they raise a concern about the information.
- Be responsive, acknowledge and respond to emails and phone calls.

## A strengths-based approach

- Ensures risk is looked at as an enabler, not as a barrier. Concerns should be explored from the persons own perspective.
- The role of the professional is to support the individual in managing positive risks and behaviours of concern.
- Supporting the person in identifying potential benefits and potential hazards or dangers of a particular activity or decision
- Supporting the person to understanding the consequences of both the potential benefits and the potential hazards or dangers for themselves and others
- Working in collaboration with the person, identifying the best ways to manage the identified behaviours of concern, hazards or dangers.
  Maximising the benefits and if appropriate reducing the potential negative consequences

The aim should be about the benefits and reducing the risks for the individual and others. Not just for the professional. When using this tool ensure the conversation is trauma informed, this will support a richer conversation.

The Mental Capacity Act 2005:

The Mental Capacity Act 2005 provides a legal framework for acting and making decision on behalf of adults who have been assessed as lacking capacity to make particular decisions for themselves.

It provides 5 core principles that support the application of the Act in practice and a checklist to ensure that when an individual is assessed to lack capacity to make a specific decision that a standard approach to best interests decision making is applied.

The Act does not stipulate that a person must have any specific training to undertake mental capacity assessments, although does state that they should be the most appropriate person in relation to the decision to be made. For example, a decision about dental treatment would be best placed to be completed by a dentist.

This tool does not require that a mental capacity assessment is completed, however asks you to consider if one may be needed. This would be indicated where an individual is making repeated unwise decisions that is placing their health and wellbeing at risk, suggesting there is reasonable doubt about their ability make an informed decision.

Assessing mental capacity in relation to issues of self-neglect can be complex. If you have any concerns in relation to undertaking a mental capacity assessment in regards to the decision to be made, it would be best to discuss this further with your Line Manager and/or with the Multi-Disciplinary/Agency Team supporting the individual.

More information on the Mental Capacity Act 2005 can be found here:

https://www.scie.org.uk/mca/introduction/mental-capacity-act-2005-at-a-glance

## Other legislation to be mindful of:

Disability and Discrimination Act 1995

Equality Act 2010 – consider protected characteristics