

This essay's predominant aim is to investigate and critically evaluate different types of person-centred planning (PCP). Alongside this, a further key objective of the essay is to largely focus on a personally constructed person-centred service for a specific group of vulnerable children. The individually designed service which will be used as a baseline for content discussed during the second half of the essay, consists of a multi-activity community club for looked after children and young people. Regarding the content of the essay, it will outline the core ideology of the prominent contemporary concept whilst linking to similar historical ideology. Furthermore, it will critically discuss a range of PCP approaches whilst linking to practical applications in various services including a critical comparison. Moreover, the essay will ensure to relate back to fundamental policy, legislation and theory which provides core rationale and motive for the existence of PCP. Finally, the essay will outline the ideology surrounding the chosen vulnerable group alongside critically discussing the personally designed service, with a predominant emphasis on key concepts such as social inclusion, empowerment and life opportunities.

Regarding the terminology surrounding the ideology, Stalker and Campbell, (1998) define the term PCP as an umbrella phrase which regards particular interventions which aid people who rely on social care services in planning their future lives. Moreover, Sanderson, Thompson and Kilbane (2006) define PCP as finding creative solutions to solve complications, rather than using outdated, monotonous solutions, with a focus on promoting inclusion in their community. Building on this, this term 'social inclusion' is defined as the process of promoting opportunities for individuals to thoroughly participate in wider society, leading to empowerment and further life opportunities (Allman, 2013).

At the outset, it would be appropriate to regard to the ideological underpinnings of PCP. According to the Joseph Rowntree Foundation (JRF) (2006), the origins of PCP can be traced to the early 1970's whereby mass institutions for disabled individuals began to close, thus, placing an emphasis on necessary approaches to regard the future of disabled individuals encompassed within these establishments. The JRF (2006) progresses to state that these approaches were deemed extensively

effective, thus, influencing wider society to build and develop on the ideology to specifically promote social inclusion and life opportunities of these individuals.

Mansell and Beadle-Brown (2004) proclaims that a prominent characteristic of PCP aims to include and mobilise the wider family as Sanderson (2000) asserts that family members often know and understand the individual the most and it will be these immediate family members who will encourage and support the individual for the entirety of their life. Building on this, Cambridge and Carnaby (2005) suggests that PCP emphasises in providing the support required for individuals to achieve aspirations, rather than limiting ambitions due to their deficiencies. It is clear therefore PCP directly co-constructs with Dalrymple and Burke's (1995) concept of 'anti-oppressive practice' in which support is targeted at individuals with needs; ensuring that they are embedded within the development and facilitation of a user-controlled service.

Regarding implementation of historic practice prior to PCP, it would be appropriate to refer to the 'medical model of disability'. This fundamental concept of PCP certainly provides a major contrasting ideology to the oppressive medical model of society which according to Philos (2016) focuses on providing solely medical solutions to 'cure' individuals' impairments. It is evident that in contemporary society, this model is largely outdated and is subject to extensive criticism such as critique from Haegele and Hodge (2016) who affirm that the model creates a widespread hatred perception of disability's, thus, creating a generic stigma which directly leads to disempowerment and social exclusion.

In contemporary society, it is apparent that a range of different PCP approaches are implemented in a range of different services with a common shared aim; to provide core life opportunities for individuals through empowerment. Giovanna (2016) affirms that a prominent PCP approach is known as a 'one-page profile' which can be described as a set of vital information captured on a single sheet of paper which is specific to each individual. This approach centralises three core focus points being 'what people like about the individual', 'what is important to the individual' and 'how best to support the individual', however, it is presented from a first-person perspective which enables the individual to maintain control, thus, promoting empowerment (Giovanna, 2016).

According to Stalker and Campbell (1998), the approach has been described as a fundamental concept to provide service practitioners with core understanding of the individual and acting as a core facilitator when the child is in need. Giovanna (2016) builds on this and affirms that one-page profiles are paramount as they provide service professionals with guidance regarding child-centred best practice. However, from a critical perspective, as Sanderson (2015) asserts that as the one-page profile fixates on three predominant focus points, this suggests that the approach produces deterministic values due to its lack of broad focus points, thus, affirming that the predetermined tool produces a similar correlation and does not account for the changing needs of an individual.

A further fundamental PCP approach constructed by Pearpoint, Forest and O'Brien (1993) known as 'PATH' (Planning Alternative Tomorrows with Hope) embeds the concept of an action plan tool by gathering a dedicated and committed team to encompass an individual within an seven-step template with the objective of developing, planning and achieving a realistic, desirable ambition or goal in the individual's future life. Building on this, Sanderson (2003) notes that the plan is not the outcome, instead, it should be used as a guide which needs continual review to reach the final outcome of achieving the ambition. Furthermore, Pearpoint, Forest and O'Brien (1993) suggests that this approach directly leads to direct and immediate action to provide hope for individuals who may feel discontent with components in their lives that they are unable to change alone. However, from a critical perspective of the concept, Mansell and Beadle-Brown (2004) report failures and expose an 'implementation gap', which focuses on the lack of actually applying the plan in the individual's life, thus acting as a major barrier. In similarity to criticism of the first approach, this would defeat the entire concept of the approach as it would consequently produce a sense of false ambition.

In addition to the previous approach, Vandercook, York and Forest (1989) proclaim a further prominent PCP tool is known as 'MAPS' ('The McGill Action Planning System'). Vandercook, York and Forest (1989) affirm that the approach, much similar to the PATH approach is a strategy that implements a focus team to work alongside the individual to create a 'map' of eight various steps, focussing on the service user's talents and needs whilst working towards achieving their desirable ambitions. According to Vandercook, York and Forest (1989), MAPS is a fundamental tool as it

predominantly focuses on the strengths of the individual, not the weaknesses, thus, similar to one-page profile approach, it puts the individual with uttermost control regarding their own life. Building on this, Rasheed et al (2006) asserts that the concept directly produces active self-determination with regards to ensuring change in the individual's life.

However, from a critical viewpoint, Holburn and Vietze (2002) declare that a prominent barrier to producing an effective MAP is a flaw within components of the appointed services. Holburn and Vietze (2002) indicate that due to a large range of individuals being supported by the service, it would certainly be difficult to individualise each person's MAP to ensure that it is unique, especially when few practitioners are constructing numerous MAPS. This lack of individualism directly creates disempowerment and a lack of determination to achieve 'personal' goals. Although the various approaches encompass different features, it is evident that the common theme pertains. JRF (2006) set out that this 'family' of approaches strive to socially include individuals by ensuring that they are not disadvantaged to society's stereotypes and stigmas, thus striving to drastically reduce oppression.

Regarding the practical application of these approaches, it would be appropriate to discuss the various services that these approaches are implemented in. Firstly, the ideology of PCP is embedded within a core holistic service known as Team Around the Family (TAF) as the Port Talbot Council (NPTC) (no date) assert that it focuses on supporting the family's needs. Furthermore, various PCP approaches are therefore implemented to directly lead families in becoming independent, soundly cohesive and thriving during the future when the family adjourns from the service. However, that being said, as the NPTC TAF (no date) proclaim that the service is a short-term strategy due to high demand for the service and this would certainly raise issues regarding ensuring that the plan, in agreement with Sanderson (2003), it is being continually reviewed to encompass changing needs.

Moreover, a further service which is embedded with the concept of PCP is known as Team Around the Child (TAC). Although this service shares a similar title to the previously discussed TAF, it is clear that TAC encompasses a difference in components, with a different objective; to place firm emphasis on constructing a team to specifically focus on the child's needs (Children's Workforce Development

Council (CWDC), 2009). Implementing PCP within TAC appears to be a diverse strategy which provides child service users with content and confidence regarding their future life (CWDC, 2009).

Progressing on, it would certainly be appropriate to relate this ideology of PCP to contemporary, underpinning policy and legislation. Robertson et al (2005), affirms that the core policy such as the 2001 White Paper 'Valuing people' and best practice guidance published in 2002 as 'Planning with People – Towards PC Approaches' are fundamental policies whereby PCP resides at the heart. Building on this Robertson et al (2005) asserts that PCP is implemented to meet a key target of the policy; to productively 'change' the lifestyle of the individual, as PCP ensures mandatory change. That being said, from a critical perspective, the further 2002 guidance sets out to criticise the whole ideology of PCP asserting that no matter how well PCP was implemented, the concept could not deliver further white paper targets, thus, questioning the validity and reliability of the entire ideology (Robertson et al, 2005).

A further core piece of legislation which is underpinned by PCP is the Additional Learning Needs (ALN) and Education Tribunal Act Wales which was passed in 2018 and is expected to be completely implemented by September 2020 (Welsh Assembly Government (WAG), 2018). The WAG (2018) affirms that this major reform of the disability system, sets out to transform expectations, experiences and outcomes for children with ALN. Building on this the WAG (2018) suggests that PCP approaches used throughout components of the system will ensure individuals' needs, views, wishes and feelings at the heart of the process. Moreover, these core opportunities that arise from this diverse legislation strives to ensure equity within the community whilst also laying the foundation for all individuals to experience reduced stigma due to emphasis on the core promotion of ALN.

It would also be appropriate to link the ideology of PCP to relevant, underpinning theory and theoretical frameworks. As PCP is assuredly person-centred, it would be extremely applicable here to link to Bronfenbrenner's (1979) Ecological Systems Theory which is a child-centred approach which focuses on the individual's surrounding environment's impact on their entire life's development. Regarding the context of the theory, Bronfenbrenner (1979) conceptualised a nested structure

composing of four ecological subsystems ranging from the child's most immediate environment to a further expansive context, with the child directly in the centre.

With regards to the link to PCP, it would definitely be applicable to place the ideology within the first, most immediate system known as the microsystem. This is due to the fact that as Allman (2013) asserts, the predominant objective of PCP is to create a better future through planning and working alongside wider family to ensure the individual is content for the entirety of their lives. Furthermore, as PCP focuses on this life-long development, it is evident that that it poses an immense and paramount influence on the individual and thus, provides motive to be placed in the microsystem. However, from a critical standpoint, Christensen (2016) suggests critique claiming that the theory completely disregards an individual's ability to develop independently, thus, suggesting that the theory is bigoted and lacks recommendations for development.

Regarding a key theoretical framework which PCP would certainly advocate for contrasts the medical model and is known as the social model of disability which the WAG (2006) proclaims that it is directly society's attitudinal, environmental and institutional barriers that disable people as opposed to their impairments. This ideology is evidently diverse and creates core life opportunities through the promotion of equity in society (WAG, 2006). However, that being stated, Shakespeare (2013) affirms criticism of the model, arguing that it would simply be illogical to disregard specific impairments as they are a key influence in the individual's life alongside asserting that it would be potentially perilous to ignore impairments as numerous individuals assuredly require medical intervention to maintain good health. However, contrasting this criticism, O'Brien and O'Brien (2000) proclaim that PCP does not 'ignore' disability, instead, it is shifted the emphasis on seeking the capacity of an individual.

Progressing on from discussing the vast ideology of PCP whilst drawing on applicable policy, theory and legislation, this part of the essay will predominantly focus on a personally constructed service for vulnerable individuals. The vulnerable group chosen to provide a service for are 'looked after children' (LAC). Regarding the terminology, Guishard-Pine, McCall and Hamilton (2007) define a looked after child as an individual who has been in the care of the local authority for more than

twenty-four hours. According to the NSPCC (2019), in 2017 there were approximately ninety-six thousand children and young people in care with the number increasing every year since 2010. Building on this, statistics from the WAG (2018) project that in 2018, there were a colossal six-thousand four-hundred children deemed 'looked after' in Wales alone.

Reasons as to why children become looked after vary however Mannay et al (2017) affirms that the predominant reasons including parents becoming unwell and unable to effectively support and protect the child alongside intervention by child services due to maltreatment. With the number of children and young people becoming looked after immensely rising, it is vital that thorough support is implemented to ensure that these children are protected and develop to their full developmental potential. A reputable way of ensuring these opportunities is by implementing PCP approaches to plan the individual's life, thus, striving to ensure that they are not disadvantaged in any way by any occurred or occurring experience.

The chosen service for this specific vulnerable group is a 'multi-activity community club'. The club targets ages seven to seventeen with the key principles consisting of implementing both personal tailored and structured activities, with two core objectives; to provide an environment where LAC can flourish, whereby LAC continually look forward to attending and having an extremely enjoyable and exciting experience alongside the service being thoroughly productive regarding the LAC's future life through the implementation of PCP approaches. To ensure that the LAC are motivated, confident and maintain interest and attendance, PCP approaches will not be constrained onto the individuals at the outset as this would assuredly produce a negative association for the child. The club adheres to the belief that these LAC may certainly have had traumatic experiences, thus, the service believes it is paramount to provide LAC with this extremely enjoyable environment to ensure that these LAC develop mentally and physically, then, when their current lives are content and they are mentally and physically healthy and ready, PCP approaches will be introduced to focus on their future lives as a participant within society.

Regarding which PCP approach will be implemented varies from child to child based on what they want their future to hold. When content and ready, all children will construct a 'one-page profile' to provide both practitioners and other LAC with vital

information regarding themselves. Furthermore, with permission from the LAC, these one-page profiles will be displayed on an information wall to ensure practitioners receive a thorough understanding of each individual's unique needs, and also acting as a facilitator when the child is in need of support. PCP approaches such as PATH's and MAP's will also be implemented throughout the service to provide LAC with control over their lives that they may have never experienced. This also provides LAC with a complete 'fresh start' and thus, provides a sense of dedication and commitment to achieving their final, future goal.

Alongside a core emphasis on enjoyment, PCP approaches are also at the heart of the community club. PCP approaches used at the community club offer an array of opportunities for LAC such as it gives LAC a clear vision of a productive life, it pursues the ambitions of the LAC and also it develops a positive mindset, keeping LAC intellectually active and subsequently, promotes health and wellbeing (Wigham, 2008). Building on this, in similarity with other PCP orientated services such as TAF and TAC, this service directly maximises the LAC's participation and connections with the wider community, thus, promoting social inclusion and life opportunities whilst reducing oppression. Regarding this term social inclusion, the service is aware of the detrimental effect social exclusion causes such as poor self-esteem, loneliness and poor mental health, thus, the community club strives to empower and include LAC by building links with community projects and schools alongside ensuring thorough social contact is maintained.

Although an array of opportunities arises as a result of the service, it is also subject to criticism. Joseph Rowntree Foundation (2000) affirms that PCP is an extremely complex strategy which requires practitioners to be extensively and accredited to be deemed a suitable PCP practitioner. Building on this, this links to a further barrier of requiring funds to construct a dedicated, experienced team of professionals which small-scale services often are unable to provide, thus potentially producing non-effective practice (JRF, 2000). A further prominent barrier regarding practice is that there is minimal contemporary guidance regarding a deemed universal best practice, thus, causing widespread turmoil and apprehension for practitioners (JRF, 2000).

It is apparent that these barriers are a common theme throughout numerous services which encompass PCP, not just the community club. Therefore, it is evident that

facilitators are set out to strive to limit these barriers to effectively support the individual. Sanderson (2003) suggests that barriers to PCP can be overcome by all practitioners developing and implementing a common goal for each individual and striving to achieve this goal. Furthermore, O' Brien and O' Brien (1998) builds on this and suggest that practitioners should work cohesively as an interworking team to build on and draw knowledge from each other to maintain positive relationships and a universal style of working, thus producing a similar outcome whilst working with individuals.

In conclusion, it is clear that PCP is a paramount, fundamental ideology whilst specifically regarding the future lives of individuals. PCP produces an array of opportunities for individuals who would usually be disregarded within society. Moreover, PCP directly empowers individuals as well as providing them with essential life opportunities with a particular focus on their desirable ambitions. Furthermore, this certainly provides rationale that PCP is a unique, diverse concept which fixates on social inclusion. Although there are various barriers to the ideology alongside there being minimal contemporary policy and legislation to support the concept, it is apparent that PCP is still a growing trend, thus, during the future, policy and legislation will certainly be constructed to provide a unified best practice guidance to overcome contemporary barriers and support practitioners further. Although, in this moment in time, PCP appears to be extensively effective for individuals that reside at the heart of the concept.

References

- Allman, D. (2013) 'The Sociology of Social Inclusion', *Sage Open*, 3 (1), pp. 1-16. (Accessed: 06/05/19) DOI: 10.1177/2158244012471957
- Bronfenbrenner, U. (1979) *The Ecology of Human Development: Experiments by Nature and Design*. USA: Harvard University Press.
- Cambridge, P. and Carnaby, S. (2005) *Person Centred Planning and Care Management with People with Learning Disabilities*. London: Jessica Kingsley Publishers.

Children's Workforce Development Council (2009) *The Team Around the Child (TAC) and the Lead Professional*. Available at:
<https://webarchive.nationalarchives.gov.uk/20130903170613/http://media.education.gov.uk/assets/files/pdf/lead%20professional%20practitioners%20guide.pdf>

(Accessed: 07/05/19).

Christensen, J. (2016) 'A Critical Reflection of Bronfenbrenner's Development Ecology Model', *Problems of Education in the 21st Century*, 69 (1), pp. 22-28.

Dalrymple, J. and Burke, B. (1995) *Anti-oppressive practice: social care and the law*. Buckingham: Open University Press.

Giovanna, P. (2016) 'Using One-page Profiles to Improve Person-centred Care on the Inpatient Unit', *BMJ Journal of Supportive and Palliative Care*, 6 (1) pp. 54-55.

(Accessed: 07/05/19). DOI:10.1136/bmjspcare-2016-001245.146

Guishard-Pine, J., McCall, S. and Hamilton, L. (2007) *Understanding Looked After Children: An Introduction to Psychology for Foster Care*. London: Jessica Kingsley Publishers.

Haegele, J. and Hodge, S. (2016) 'Disability Discourse: Overview and Critiques of the Medical and Social Models', *Quest Journal*, 68 (2), pp. 193-206.

Holburn, S. and Vietze, P. (2002) *Person centered planning: research, practice, and future directions*. Baltimore: Paul H Brookes Publishers.

Joseph Rowntree Foundation (2000) *What are the Barriers in Relation to Person-centred Planning*. Available at:
<http://www.ideaswa.net/upload/editor/files/downloads/Joseph%20Rowntree%20Foundation%20PCP%20Article.pdf> (Accessed: 07/05/19).

Joseph Rowntree Foundation (2006) *Person Centred Planning in Social Care*. Available at:

<https://www.jrf.org.uk/sites/default/files/jrf/migrated/files/9781859354803.pdf>

(Accessed: 07/05/19).

Mannay, D. et al (2017) 'The consequences of being labelled 'looked-after': Exploring the educational experiences of looked-after children and young people in Wales', *British Educational Research Journal*, 43 (4), pp.683-699.

Mansell, J. and Beadle-Brown, J. (2004) 'Person-centred planning or person-centred action? Policy and practice in intellectual disability services', *Journal of Applied Research in Intellectual Disabilities*, 17, pp. 1-9.

Neath Port Talbot Council (no date) *Team Around the Family*. Available at: <https://www.npt.gov.uk/5614> (Accessed: 11/04/19).

Neath Port Talbot Council Team Around the Family (no date) *Could Team Around the Family Help?* Available at: <https://www.npt.gov.uk/media/6744/edu2646-professionalleaflet20-2.pdf> (Accessed: 11/04/19).

NSPCC (2019) *Looked After Children*. Available at: <https://learning.nspcc.org.uk/children-and-families-at-risk/looked-after-children/> (Accessed: 07/05/19).

O' Brien, C. and O' Brien, J. (1998) *A Little Book about Person Centred Planning*. Ontario: Inclusion Press.

Pearpoint, J., Forest, M. and O'Brien, J. (1993) *PATH: A Workbook for Planning Personal Futures*. Toronto: Inclusion Press.

Philos, J. (2016) 'Beyond Models of Disability?', *The Journal of Medicine and Philosophy*, 41 (2), pp. 210-228. (Accessed: 07/05/19). DOI: 10.1093/jmp/jhv063

Rasheed, S. et al (2006) 'Person-centred Planning: Practices, Promises, and Provisos', *Journal for Vocational Special Needs Education*, 28 (3), pp. 47-59.

Robertson, J. (2005) *The Impact of Person -centred Planning*. Lancaster University: Institute for Health Research.

Sanderson, H. (2003) 'Implementing person-centred planning by developing person-centred teams', *Journal of Integrated Care* ,11 (3), pp. 18–25.

Sanderson, H. (2015) *One Page Profiles*. Available at: <http://www.helensandersonassociates.co.uk/> (Accessed 16.2.15)

Sanderson, H., Thompson, J. and Kilbane, J. (2006) 'The Emergence of Person-centred Planning as Evidence-Based Practice', *Journal of Integrated Care*, 14 (2), pp. 18-25.

Shakespeare, T. (2013) *The Disabilities Studies Reader*. Fourth Edition. Oxon: Routledge Publishing.

Stalker, K. and Campbell, V. (1998) 'Person-centred planning: an evaluation of a training programme', *Health and Social Care in the Community*, 6 (2), pp. 130–42.

Vandercook, T., York, J. and Forest, M. (1989) 'The McGill Action Planning System (MAPS): A Strategy for Building the Vision', *Journal of the Association for Persons with Severe Handicaps*, 14 (3), pp. 205–215

Wales: Welsh Assembly Government (2006) *Disability Scheme*. Cardiff: Welsh Assembly Government. [online]. Available at: <http://www.assembly.wales/meeting%20agenda%20documents/supporting%20document%20-%20welsh%20assembly%20government%20disability%20equality%20scheme-29112006-44881/bus-chamber-e728ace14cb397ba3f3fd58c6405a874-cymraeg.pdf> (Accessed: 07/05/19).

Wales: Welsh Assembly Government (2018) *Additional Learning Needs Transformation Programme*. Cardiff: Welsh Assembly Government. [online]. Available at: <https://gov.wales/sites/default/files/publications/2018-09/additional-learning-needs-aln-transformation-programme-v2.pdf> (Accessed: 07/05/19).

Wales: Welsh Assembly Government (2018) *Children looked after at 31 March by local authority, gender and age*. Cardiff: Welsh Assembly Government. [online]. Available at: <https://stats.wales.gov.wales/Catalogue/Health-and-Social-Care/Social-Services/Childrens-Services/Children-Looked-After/childrenlookedafterat31march-by-localauthority-gender-age> (Accessed: 07/05/19).

Wigham, S. (2008) 'Reported Goal Setting and Benefits of Person-Centred Planning for people with Intellectual Disabilities', *Journal of Intellectual Disability*, 12 (2), pp.143-152.