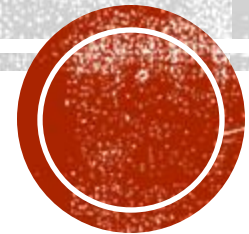


ASSESSMENT 2

Explore how Person-Centred Approaches develop inclusive practice with a cohort of your choice.

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INTRODUCTION

Presentation content:

- Explanation of Person-Centred Approaches (Lue, 2020);
- The Value of Inclusive Approaches in Health and Social Care (Makey, 2022);
- Utilising Person – Centred Methods in Health and Social Care (Sanderson, 2000);
- Person – Centred Approaches' effects on empowerment (Baresford, 2011);
- Advantages and Disadvantages of the Person-Centred Approach (Sanderson, Lewis, 2011);



PERSON- CENTRED CARE

Person-centred care (PPC) was coined by Carl Rogers, according to Nay *et al.* (2009). This definition is contingent upon the following:



- When it places a person and considers their needs and places the person at the centre of their care;
- Acknowledges and connects to the individual;
- Focuses on the individuals' objectives and strengths.

(Nay *et al.*, 2009)



EXAMPLES OF PERSON-CENTRED CARE

- Considering the requirements and preferences of individuals;
- Putting the values of the patient first;
- Getting friends and family involved and providing emotional support;
- Ensuring that people may get the care they require at the appropriate time and place;
- Ensuring information accessibility enables people to choose their assistance and care with knowledge;

(Taylor, 2023)



INCLUSIVE APPROACHES

- Person-centred techniques, which originated in the human rights movement and used to support people with learning disabilities, have evolved into a framework that is integrated into the process of "personalising" services. This framework emphasises shared key components across sectors and tailors' services to match the needs of individual clients to ensure practice consistency, promote cross-sector collaboration, and prioritise inclusivity (Lue, 2020).
- Individuals, families, and communities are given priority in a person-centred approach to health care, enabling people to freely communicate their priorities. The workforce interacts with people and values their opinions to have a better knowledge of their requirements and preferences. According to Lue (2020), this strategy fosters an atmosphere where workers feel appreciated, empowered, supported, and encouraged.
- Co-production aims to blend the expertise of professionals with the knowledge of service users. By striving for social fairness and equitable power distribution between leaders, professionals, and service users, co-production provides a platform for service users to have a voice, thereby enhancing their experiences and interactions within the healthcare system (Makey, 2022).



LEGISLATIVE PERSPECTIVE

- Employees must maintain an inclusive, rights-based attitude in their work by encouraging diversity, equality, and respect for people's opinions, choices, cultures, and preferences.
- Employees should be conscious of their prejudices and attitudes towards everyone, regardless of differences, and strive to treat everyone with respect and kindness.
- Positive relationships assist staff in establishing rapport with individuals and gaining an understanding of their values, beliefs, and preferences. This helps ensure that care is provided consistently.
- By making sure their voices are heard and advancing a rights-based approach, advocacy plays a critical role in aiding people who may struggle to express themselves due to factors like fear, lack of confidence, illness, or communication issues.

(Cyngor Gwynedd, n.d)



Regarding the rights of individuals, the Social Services and Well-being Act 2014 in Wales highlights the following fundamental ideas:

- to be treated with dignity;
- to be respected;
- to have privacy;
- to be treated equally and without discrimination;
- to be shielded from harm and danger;
- to receive support and care that is tailored to their needs, honours their choices, and keeps them safe;
- to interact with others using their preferred language and communication styles to gather personal data (Cyngor Gwynedd, n.d).

They are:

The Equality Act 2010 – This Law discusses equality and diversity in different fields for example, social services and social health. The nine essential parts of The Act are: Religion, sex, gender, race, disability, sexual orientation, marriage, maternity, pregnancy and gender reassignment (Toersen, 2024).

The Human Rights Act 1998 – This Act describes the basic human rights and equality ideals, it also discusses that the main five beliefs of this legislation are: equality, respect, fairness, autonomy and dignity (Toersen, 2024).

The Mental Capacity Act 2005 – This legislation was created to assist those who cannot do it for themselves to help with their right to freedom, dignity and independence, it is also to support those who are vulnerable to uphold their right to dignity and equality. That is when the Deprivation of Liberty Safeguards (DoLS) were implemented (Toersen, 2024).



EXAMPLE

'Creating Inclusive Workplaces for All'

Not everyone finds work to be fulfilling. In this stirring speech in TEDxTalks on YouTube, Catarina Rivera explains why many businesses and executives are unaware of the large number of handicapped workers they employ and offers advice on how to prioritise disability inclusion in the workplace to improve working conditions for everybody. Three easy, free and inclusive best practices that can be implemented immediately into everyone's culture will also be taught to them.

Catarina (@BlindishLatina) is a powerful public speaker, content developer, and consultant for DEI. She collaborates with businesses and groups to raise accessibility, inclusivity, and awareness of disabilities. She is a disabled Latina lady who is enthusiastic about sharing her narrative to create a more welcoming environment.

(TEDxTalks, 2022)



PERSON – CENTRED PLANNING

- Staff members face several difficulties while implementing person-centred planning in services;
- According to traditional Individual Programme Planning (IPP), staff members must act in a coordinated and uniform manner;
- The concepts of shared power and self-determination are the foundation of person-centred planning, however,
- People that use person centred planning make a conscious decision of commitment to share power;
- It makes sense to discuss with the person who has previously participated in planning how they would like to organise a meeting if they would like one, what kind of meeting they would like to attend, and how they would like to participate;
- The individual must choose who and how they wish to be involved in the planning process;
- Meetings are scheduled at appropriate times and locations, according to individual preferences, and equipped with accessible visual aids. Individuals with varying expertise levels and engagement levels are creatively engaged through person-centred planning;

(Sanderson, 2000)



After describing the help required from the individual's point of view, person-centred planning creates a special plan for obtaining that support.

Professionals are challenged by person-centred planning to actively create more inclusive communities rather than merely deliver better services.

Person-centred planning comes in a variety of forms or methodologies. The foundation of every style is the same: person-centred planning begins with the individual and concludes with certain activities that need to be implemented. Their methods of gathering information vary, as does the focus placed on day-to-day specifics or aspirations and longer-term goals for the future.

Different approaches to planning:

- Essential Lifestyle Planning,
- PATH (Planning Alternative Tomorrows with Hope)
- MAPs (Making Action Plan)
- Personal Futures Planning



PROS AND CONS OF PERSON - CENTRED APPROACH

A common set of values underpins all person-centred practices:

- autonomy and rights,
- joint production, control and choice,
- communities that are capable and inclusive;

- ✓ Excluding some groups;
- ✓ Excluding the personhood of the personnel;
- ✓ Injustice brought on by empathy;

(Sanderson, and Lewis, 2012)

(Summer Meranius *et al.*, 2020)



CONCLUSION

The individual is at the centre of their care when they receive person-centred care Taylor (2023) states. This guarantees the individual autonomy over how they get care and assistance. They can help to safeguard the individual by being completely informed. Furthermore, as Taylor (2023) declare in person-centred care, clients of social and health services are viewed as equal partners in the development, planning, and oversight of their care, with the goal of better meeting their needs. Considering people's values, social networks, and lifestyles is a key component of person-centred work.

Person-centred planning is a continuous process that involves working with family and friends, paying close attention to what the person values now and in the future, and listening and learning Sanderson (2000) claims. Effective person-centred planning constantly prioritises the needs of the individual, notwithstanding the variety of methodologies. The plan, which was created in collaboration with friends and family, provides a clear description of the person's strengths, needs, and areas of focus. It consists of deeds that put inclusivity first and encourage ongoing education and introspection (Sanderson, 2000).



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