1A Use appropriate methods to assess client’s leisure and health needs

When programming activities you first need to determine what the person’s needs are. Take a holistic approach and consider the physical, emotional, mental, social, spiritual and cognitive needs of the person. A team of assessors, including health practitioners, will determine the person’s overall needs and make appropriate recommendations. These should be outlined in the person’s care plan.

Methods of assessment

Methods of assessment and who you are authorised to speak with will be specific to the organisation. Consult your supervisor to clarify the most appropriate method to use for the individual situation. You can use interviews, care plans, observation and standard forms (pro formas) to assess a client’s leisure and health needs.

The following methods can be used to assess a person’s leisure and health needs.

**Interviewing the client, parents and/or family**

Identify the person’s physical, emotional, cognitive, social and spiritual needs. Use nonverbal communication (gestures, facial expressions, or the client may lip-read) if there are language barriers, impairment or the person is very young. Face the person so nonverbal cues can be interpreted. Use a professional interpreter or the client’s guardian or family members if necessary.

Treat individuals and their family members with respect, including respecting cultural differences.

**Interviewing care workers**

Speak with care workers who assist the person with daily living as they will have first-hand experience and an excellent understanding of the person’s needs, requirements, interests, strengths and abilities.

Obtain information about all aspects of the person including their physical, emotional, mental, cognitive, spiritual and social needs. Accurately record the information according to workplace policy and procedure, and consult with your supervisor before any actions are taken.

**Reviewing the care plan documentation**

Care plans are usually devised by a registered nurse (RN), who interviews the person and/or their guardian to record the person’s needs. Care plans address medical history, physical and mental health status and daily living abilities.

Consult the care plan before starting any action or service. Know where care plans are located and check them regularly for amendments. Consult with your supervisor or the RN about terms you don’t understand. Follow recommendations detailed in the plan.
Use a variety of appropriate methods to record information under the guidance of an experienced worker

To record detailed information from a person, it is necessary to use a variety of appropriate methods for recording information. The organisation in which you work will have guidelines and protocols of ways in which to record information. More experienced workers can assist with advice on how to record and appropriate methods that would suit a particular person according to their support needs.

Use guidelines to record information

Your organisation will have specific data collection procedures that comply with government, legal and ethical standards. These procedures may include double-checking the person’s name, date of birth and gender, signing and dating all documents, using the correct terminology, and using appropriate medical abbreviations.

Data collection is a continuous process which means that recording must be done on a regular basis. Always check with your supervisor if there is anything you are unsure of. Although the method of recording used will depend on the individual person and the situation, there are some basic rules to follow when documenting client information. Consider the following guidelines.

<table>
<thead>
<tr>
<th>Guidelines for collecting and documenting information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Record information according to organisational policy and procedure.</td>
</tr>
<tr>
<td>Use a method of recording appropriate to the person and the situation.</td>
</tr>
<tr>
<td>Be concise and brief; use factual, specific language, concrete terms and examples.</td>
</tr>
<tr>
<td>If using medical terminology, be sure you understand the terms you use; if you are unsure, consult your supervisor.</td>
</tr>
<tr>
<td>Actively listen to the clients, family members and other care workers to obtain correct information.</td>
</tr>
<tr>
<td>Keep client records confidential according to organisational protocol.</td>
</tr>
</tbody>
</table>

The purpose of records

When gathering detailed information about the person, keeping records is important as they synthesise the relevant information that can be used to develop a person’s leisure and health program. Maintaining clear and factual records is a very important aspect of working in community services.
Theories of development

When you are assessing a client, it is important to consider their age and developmental stage. There have been many attempts to understand human psychological development. Here is a brief summary of some of the most famous theories.

Piaget’s cognitive developmental theory

- Swiss theorist Jean Piaget (1896–1980) focused on the cognitive development of children. He saw development as a stage process, whereby one stage is completed before the individual moves on to the next stage. Piaget’s cognitive developmental stages are as follows:
  - Sensorimotor stage – infants use their senses and movements to explore the world.
  - Preoperational stage – pre-schoolers use symbolic thought and play.
  - Concrete operational – school-age children use more forms of reasoning.
  - Formal operational stage – adolescents and adults employ abstract reasoning.

Freud’s psychosexual stages of development

- Austrian Sigmund Freud (1856–1939) believed that mental conflicts, like anxiety, occur because a person is stuck in a particular psychosexual stage. Personality was determined by three layers of self:
  - Id – present at birth, and focuses on biological needs and impulses.
  - Ego – develops in infancy and is the conscious self, which rationalises between the id and the superego.
  - Superego – represents social values and a person’s conscience.
- Freud’s stages are oral (birth to one year); anal (one to three years); phallic (three to six years); latency (six to eleven years); and genital (adolescence).

Erikson’s psychosocial stages theory

- Like Freud, Erik Erikson (1902–1994) was a psychoanalyst. He saw stages of development across the lifespan. He believed that at each stage of the lifespan the ego develops new skills and attitudes that form an individual’s personality. The following are Erikson’s stages of development:
  - Trust vs mistrust (infant)
  - Autonomy vs shame and doubt (toddler)
  - Initiative vs guilt (early childhood)
  - Industry vs inferiority (middle childhood)
  - Identify vs confusion (adolescence)
  - Intimacy vs isolation (young adulthood)
  - Generativity vs stagnation (middle age)
  - Integrity vs despair (old age)
1E Observe and record and maintain confidentiality

Gathering information and recording a person’s strengths and needs must be completed in accordance with the organisational and legislative requirements for confidentiality and privacy. Information regarding a person’s health and/or personal information must not be shared with others without the person’s consent and only those who are authorised should have access to this information.

Maintain confidentiality

Confidentiality is a crucial factor when working in the community services sector. It refers to a person’s right to privacy. As a support worker, you often have access to privileged and sensitive information about the people you work with. The way confidential information is handled should reflect the person’s right to privacy.

All information is private, and only the healthcare team and people involved in the care of the person should have access to the information. Confidentiality provisions restrict an individual or organisation from using, storing and disclosing information about a person that is outside of the scope for which the information was collected. Confidentiality refers to both written and verbal information. Information relating to people must be securely stored, with access limited to those working directly on the case, according to organisational policy and procedure.

To share information with other services, you need to obtain the person’s written consent. Confidentiality means that support workers must have a reasonable purpose for collecting, storing, accessing and distributing information about a person. Organisations and workers must also not collect generalised information without an implicit reason.

Confidentiality is an important aspect of duty of care to ensure the safety and wellbeing of people in receipt of their services – this includes securing their personal information.

Obtain permission

You should first ask the person and/or your supervisor which family members should be consulted and what information can be discussed before gathering and recording information. Depending on the situation, the age of the client and the ability of the person, the parent or guardian may be responsible for providing and accessing personal information about the person.

A guardian is a responsible person appointed in lieu of a parent. Note that a family member or guardian may have power of attorney, which means they have been legally permitted to make decisions or act on behalf of a person, if the person has been deemed not competent to make their own decisions.
Use a consultative approach based on the client’s leisure and health needs assessment

Gathering information about the client’s health and leisure needs is an important aspect of designing a leisure and health program for a person. Every person has individual needs, strengths and interests. Once this preliminary work has been done, this information can then be used in a consultative approach with others, to design an individual program.

Use a consultative approach

Research and consultation play a key part in program development. Health practitioners, leisure and health professionals and relevant others should be consulted during each of these steps, in order to increase the quality, safety and relevance of programs. A support worker should discuss or consult with key stakeholders involved in the person’s leisure and health assessment to gain a thorough understanding of their needs. Stakeholders should include the person and may include the person’s family members or carers, health practitioners, leisure and health professionals and relevant others to increase the quality, safety and relevance of programs.

Leisure programs need to:

- address the needs of the individual
- meet individual needs in accordance with research
- increase participation in existing programs
- include active and passive activities
- include physical, mental, emotional, social and spiritual activities
- address barriers to participation using various strategies
- be initiated by the organisation, community groups, other organisations or the community
- respond to social, economic and demographic change.

Research to match leisure needs

It is important to stay up to date with current trends and research when designing individual program plans. Part of the consultative process is to research the most suitable activities and programs to suit a person’s needs. The planning team may have some ideas and be able to direct you to current research.

Research provides insight into the most suitable activities for particular needs, and should be based on large samples and specific data. The organisation you work for will have access to current research and practices. Speak with your supervisor about what research is available and what is most relevant to your clients’ needs.
Art-related leisure experiences

Art is beneficial as it can provide an opportunity for the expression of feelings, builds a sense of community, incorporates different cultures, encourages a sense of fun, and allows creative thinking.

Some examples of art related leisure experiences include:
- drawing
- painting
- needlework
- knitting
- craft
- art gallery visits
- theatre visits
- poetry
- scrapbooking.

Listening to and participating in music

Some benefits to music include that it allows for self-expression and socialisation, increases positive social behaviours and cognitive function, promotes creativity which can improve one’s mental state, and provides an atmosphere conducive to physical, mental, emotional and spiritual healing.

There are many types of music related leisure experiences including:
- singing
- dancing
- playing an instrument
- going to the theatre
- relaxation/ meditation to music
- attending church.

Sport related leisure experiences

Sport is beneficial as it provides opportunities to build friendships with others in a local area, and provides opportunities to build communication skills with familiar and non-familiar people. Participating in sport related leisure activities is skill-building and confidence boosting.

Examples of sport related leisure experiences include:
- swimming
- aqua aerobics
- lawn bowls
- bicycle riding
- yoga
- walking
- attending the gym
- exercise groups
- outdoor recreation like fishing and camping.
Use appropriate motivational techniques

It is essential that a worker understands what motivates people to be involved in a leisure activity. Three important aspects of motivation include: the participant’s belief about their ability in the activity, social support and enjoyment.

Motivational techniques include:

▶ addressing the needs of the individual, including physical, emotional, mental, social/spiritual and cognitive needs
▶ using a range of resources and ideas
▶ using a variety of experiences to help engage a person’s interest (experiences can be familiar or unusual, special events, structured or unstructured, indoor or outdoor, busy or quiet, surprising or planned and predictable, challenging or confirming)
▶ enhancing the person’s health and wellbeing by building upon their strengths
▶ incorporating the person’s life, development and social context
▶ making activities fun
▶ using praise and positive reinforcement and recognising achievement
▶ setting challenges for all levels of ability
▶ providing a supportive environment.

**Example**

**Identify and include a range of resources and ideas to meet the client’s leisure**

Su-ling Mae works as a leisure officer for an aged care facility and is responsible for coordinating activities for the residents. Su-ling has programmed a range of activities to suit different clients’ needs. In the mornings, at least two activities are available, including visits from volunteers and a musical performance or craft session. In the afternoon, skill-building sessions or physical recreation, like yoga or water aerobics are offered. From month to month, Su-ling revises the program to ensure it suits the current residents’ needs and alters the activities to maintain clients’ interest. She uses a range of sources for ideas of suitable activities – she subscribes to an online aged care magazine and a diversional therapy publication and receives weekly updates from these publications. Su-ling talks with the people about their own interests and needs and with her colleagues at regular team meetings. Su-ling also likes to talk with the organisation’s volunteers, who often have very practical and useful activity ideas to offer. Su-ling never runs out of ideas of interesting activities to run, as there are so many resource options available.
Incorporate the additional and specific leisure and recreation needs of clients

A person working in the leisure and recreation sector needs to consider the needs of the person they are supporting while reflecting and considering the philosophy and goals of the service organisation in which they are working. There is also legislation that determines operations and inclusion of people in health and leisure activities.

There are a number of theories and principles that determine the way programs are planned and delivered that aim for inclusion of everyone. Programs can be designed to meet the additional and specific needs of people – particularly those with complex needs.

Inclusion

Inclusiveness involves supporting each individual person to belong, participate, access opportunities, be recognised and valued. Theories of inclusion means taking particular care to accommodate everyone’s needs to ensure activities are suitable and relevant for everyone. These principles recognise that everyone can contribute and feel connected to their community. Community programs and activities are important and participation is valued.

Non discriminatory practices

Non-discriminatory practices means that activities are inclusive of all client’s needs and abilities. The activities you have planned must consider the needs of each individual who is participating. It is a legal and ethical requirement that all people are included in activities as far as practicable. All people have a right to equality and to be treated fairly.

At times, some people may discriminate against another person. To discriminate means to treat someone unfairly or favour others. This may occur when there is a mix of cultures and when people don’t understand cultural differences. People with disabilities may also be discriminated against. Discrimination is never acceptable behaviour and is against the law.

Organisations providing leisure and recreation services, like all community services, must promote equality for everyone. It is unlawful to discriminate against people on the basis of age, gender, ethnicity, disability or impairment, marital status, sexual preference, or political or religious beliefs.
Mental health issues

Explanation:
- Mental health issues, such as depression, bipolar disorder and schizophrenia, affect mood and thinking. People with a mental illness may experience periods of time when they appear well with no symptoms of the illness.

Example:
- A client with bipolar disorder participates in an art workshop at a community house that is run by experienced tutors trained in working with clients with mental illness.

Disadvantaged groups

Explanation:
- People who experience disadvantage through being homeless, socially isolated, long-term unemployed or housebound are often limited in their ability to interact and participate in the activities of mainstream society.

Example:
- A middle-aged man who is homeless visits a breakfast club at his local church to eat nutritious food and interact with others in his community.

Selecting a specific program

Gathering information about a person’s health and leisure needs is an important aspect of designing a leisure and health program. Always make sure that the person, other members of your team, parents or family members and your supervisor are involved in selecting a specific program. A criteria list can be developed that can be helpful in determining what program approach would best match the needs of the person.

When selecting a specific program ensure that it:
- addresses the needs of the individual
- meets individual needs in accordance with research
- extends the participation numbers in existing programs
- includes active and passive activities
- includes physical, mental, emotional, social and spiritual activities
- addresses barriers to participation using various strategies
- is directed towards the individual person and their needs
- is directed at the general community
- responds to social, economic and demographic change.
Summary

1. Use a consultative approach when identifying the person’s leisure and health needs.

2. Ideas and suggestions for program planning should come from a range of sources, including the person, colleagues, other workers, publications and professional bodies.

3. A variety or combination of activities and programs is likely to meet the holistic needs of a person.

4. Use a consultative approach when identifying the person’s leisure and health needs.

5. When assessing a person, consider their age and developmental stage by applying one of the many theories of development.

6. Leisure and health programs provide a great opportunity to enhance a person’s skills and abilities.

7. Ensure planned activities and programs are designed to enhance the person’s physical, mental, emotional and cognitive health.

8. People may have cultural, religious, medical or other specific needs that need to be considered when developing an individual leisure and health plan.

9. You must ensure plans reflect the philosophy and goals of the service you work for, including philosophies about inclusion.

10. Understanding the specific implications of various conditions and complex needs helps you integrate the person into leisure activities in a safe and appropriate way.

11. It is your responsibility to complete documentation about people and program plans according to organisational policy and procedures.
Location decisions

The location of the activities you run will vary from situation to situation and client to client. The following identifies some of the factors you need to consider in selecting a location.

Assessing potential sites

Locations may be at a residential facility, outdoors or at a community facility such as a:
- pool
- gym
- library
- restaurant.

The following are important considerations when making a decision about a location.
- Does the budget cover the cost of the location and the resources needed?
- Is the location available?
- Is the location suitable for the activity?
- Is the location suitable for your client?

Meeting client needs

- Is there adequate access for a client who uses a wheelchair or scooter?
- Are there stairs and, if so, are there handrails for support?
- Is there a suitable toilet?
- Where are the fire exits of the location?
- Is the furniture suitable for your client and their needs?
- Is the lighting adequate for the activity?
- Is the temperature of the venue appropriate?
- Is the furniture arranged in a way that promotes easy access?
- Is there a telephone available in case of emergency or assistance?

Needs and availability of clients

The setting and environment you choose for the activity needs to be suitable for your client and their individual needs. Conduct a risk assessment before the program begins and again (if necessary) closer to the date to ensure the environment is safe. Refer to your client’s care plan and assessment notes to understand everything you can about their needs. This information will determine the location, equipment and other resources required to run the leisure activity. An important factor to consider is the transportation to and from the venue or location. This can take some planning and time and will be determined by funding constraints and the needs of the people attending the activity. Refer to your supervisor or speak directly with the person or their family if you are concerned that any aspect of the environment or location may be unsuitable.
Personal protective equipment (PPE)
Wearing and using personal protective clothing or equipment is the least effective hierarchy of control measure. The use of personal protective clothing and equipment can be a hazard if it restricts movement, sight or hearing, and is the last option for risk control.

Organisations must:
- provide appropriate protective clothing and equipment
- ensure the clothing fits well and is comfortable under work conditions
- ensure people use properly and when necessary
- train workers in why the clothing is necessary
- teach workers how to wear the right protective equipment for the task; for example, wearing waterproof foot protection when showering consumers will help you avoid having wet footwear, so you will avoid or minimise the risk of fungal infection and the risk of slipping and injuring yourself.

Hazards for various activities
The following shows some examples of hazards that may be considered during a risk assessment of various activities.

Examples of hazards of various activities

**Computer use**
Safe electrical loads on power boards.
Safe placement of electrical cords to avoid tripping hazards.
Space around the computers for movement.
Computers at a safe height for clients to see screen.
Restricted duration to avoid prolonged screen staring.

**Outdoor games**
Locking mechanisms on fences and gates in working order (if clients are children or older people with dementia).
Clients informed of out-of-bounds areas.
Particularly close supervision in certain areas, such as climbing frames.
Sunsafe practices in place.

**Meal breaks**
Children and clients with reduced cognitive abilities restricted from entering kitchen areas.
Clear processes in place to prevent clients with food allergies coming into contact with these foods, including banning of certain foods such as nuts.

**Indoor tasks**
Dangerous substances such as cleaning fluids removed or locked away.
Smoke alarms tested and cleaned regularly, and placed in correct positions according to regulations.
Basic fire safety awareness training for staff and clients.
Contribute to the development of timetables that provide structure and flexibility and serve as a communication tool.

<table>
<thead>
<tr>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>Choice of:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lawn bowls 9.00-12.00 noon</td>
<td>Lawn bowls 9.00-12.00 noon</td>
<td>Musical performance 10.00-11.00</td>
<td>Cooking class 10.00-11.00</td>
<td>Musical performance 10.00-11.00</td>
</tr>
<tr>
<td>Outing 10.00-11.30</td>
<td>Aqua aerobics 10.00-11.30</td>
<td>Dance lessons 10.00-11.30</td>
<td>Outing 10.00-11.30</td>
<td>School Visit 10.00-12.00 noon</td>
</tr>
</tbody>
</table>

Practice task 12

1. What are two main reasons for developing and using timetables?

2. Provide three reasons why a timetable needs to allow for flexibility.

Click to complete Practice task 12
Gather and organise resources required for the individual program plan

Most activities will require both physical and human resources, depending on the particular activity and group the program is designed for. Resources need to be well managed and organised to ensure the activity can flow smoothly.

Gather and organise resources

When you are planning the activities, make a comprehensive list of everything you require, with a focus on the needs of your clients. Check the documentation for the planning to see if all of the resources listed are available. Consult with others as required to check the availability of the resources required for the program. Questions that may be raised in reference to material resources and human resources are presented here.

Material resources

Is specialised transport required for someone who uses a wheelchair?
Do you need to check whether the venue has wheelchair/scooter access?
Do you need to use a hoist for a client and have you had adequate training in its use?
Do you need specialised equipment or tools for an activity?
Do you need to translate material to cater for languages other than English?
Do you need to provide food for the clients; are dietary requirements addressed?
Do you have access to a telephone in case of emergency?
Do you know where the fire exits and fire safety equipment is located?
Have timetables been clearly displayed?
If you are using a community resource, does it meet WHS standards?

Human resources

Do you need bilingual staff or volunteers?
Are staff and volunteers sufficiently trained for the activities you are providing?
Are staff and volunteers sufficiently trained to look after specific client needs?
Are staff and volunteers sufficiently trained in using aids and equipment?
Are staff and volunteers sufficiently trained in WHS practices?
Do staff and volunteers have first aid training and current first aid certificates?
Do you require specialised staff for particular activities?
Are specialised staff or personnel available at the time of the activity?
Have you received the necessary permission forms for clients to participate?
**Transport**

If you are going into the community, you need to arrange transport well in advance. The organisation you work with may have a vehicle that can be used or the organisation may use a specific transport company and/or driver. Always be mindful of traffic and the time taken to load and unload people and parking requirements.

Transport considerations include:
- suitability for people
- wheelchair access, if required
- whether there are enough seats for people
- ensuring the driver has a suitable driver’s licence.

**First aid and emergency considerations**

First aid knowledge is an important component when working with people. A person may have a change of physical status or there may be a medical emergency. Ensure that someone with current first aid qualifications accompanies the group and that appropriate first aid equipment travels with you. Look carefully at the needs of the people you are taking and consider the individual program plans that should mention medical information and medications that must be taken. This may be a staff member or a volunteer.

While you are on an outing, you also need to have continual access to a telephone in case of a medical emergency or other incident. You may have your own mobile phone or be given a mobile phone by the organisation. Ensure that the phone’s battery is charged and you have enough credit before you go on the outing. Check mobile phone coverage, which can be sparse in regional areas, as part of your risk assessment when planning the outing.

Consult the person’s care plans, and speak with your supervisor about necessary medications. You are required to manage whether a person needs to bring medication with them or if you need to bring it for them. Medication may be for diabetes, allergies, asthma or any other illness or disease. Ensure that staff qualified to administer the medication accompany a person on the outing.

**Appropriateness of the venue**

The venue you are visiting must be suitable for all people and meet WHS standards. The venue may be one you have visited previously and you may be familiar with what it offers. If the activity involves an outing, then there is likely to be various locations identified as part of the program. If not, visit the venue before an activity is scheduled to ensure it is safe for people and workers by conducting a risk assessment. You also need to practise inclusion and not discriminate, so do not plan an activity at a venue that is unsuitable for some people to attend.

Make the following considerations when assessing a venue’s accessibility and suitability.
Program monitoring and evaluation

- When monitoring and evaluating the program, you need to provide feedback to your supervisor. Communication with your supervisor may be formal or informal. You may have a scheduled team meeting every week or fortnight, for example. This is a formal opportunity to communicate with your supervisor about the program and the outcomes being met. It is also an opportunity to raise concerns or issues you may have.

Formal methods

- The supervisor may use the team meeting as an opportunity to give feedback regarding client outcomes, responses from clients and organisational requirements. These meetings may be recorded in minutes and filed so that all communication about the activity program is recorded. Other formal methods may be written reports or standard forms; you should follow your organisation’s procedures.

Informal methods

- You may also communicate informally with your supervisor about the program. You may have a concern about an activity, a staff member, a volunteer or a client that can’t wait until the scheduled team meeting or for you to schedule a meeting directly with the supervisor. In this situation it is appropriate to call or email your supervisor. It is important to keep them up to date. In emergencies, you should always phone your supervisor.

Communicate with team members

Your supervisor is part of your team, as are health practitioners, colleagues and co-workers. You may be co-facilitating the activity and be involved with more than one person when scheduling an activity or locating resources. Sharing mutual objectives and having a clear understanding about how and which activities are being run is vital to the success of your activity.

Occasional conflict between team members is inevitable so it is important to learn how to manage conflict effectively so objectives can be achieved. The following outlines the sources of conflict and management and resolution strategies.

Conflict management strategies

Sources
Conflict can arise from:
- difficulty understanding each other
- different objectives
- different perspectives
- differences of opinion
- stress
- fear
- anger
- frustration.
Topic 4
In this topic you will learn how to:

4A Assess progress of each individual and use specified processes

4B Contribute to regular review of the individual program plan

4C Regularly document and evaluate individual program plan outcomes

4D Clearly identify criteria for documentation and evaluation and use for review

Monitor and evaluate individual program plans

The purpose of evaluating individual program plans is to ensure the program is meeting the client’s needs, identify whether leisure behaviours have changed, give clients the opportunity to give input and feedback about the program, and give clients further autonomy and involvement in the program.
Interviews

Your team may organise a formal interview with a client and/or their family to track client needs. You may also use informal conversations with the client and/or family members to determine how the client experiences the program and whether they feel their needs are being met.

Observations

Observation sessions may be scheduled regularly. Your supervisor or a relevant health practitioner may elect to make a formal observation of the client’s progress. Informal observations include noting any behavioural, physical and emotional changes in the client.

Surveys

Another way of gathering feedback from clients about the activity program is to provide questionnaires or surveys. Responses to these can provide insight into how individual participants respond to activities as well as how the group responds as a whole.

Assess progress of each individual using specified processes

Mary is a supervisor for an outreach program for teenagers with drug and alcohol addictions. Each month, Mary conducts an evaluation of the activities program to ensure it employs best practice standards and meets the needs and goals of the individuals and the service. Mary draws up a brief report each month. She uses a number system out of 10 where 10 is the highest score. Here is what the evaluation form looks like.

<table>
<thead>
<tr>
<th>Activities</th>
<th>Short-term goals</th>
<th>Long-term goals</th>
<th>Goals of service</th>
<th>Group progress</th>
<th>Budget</th>
<th>Best practice</th>
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</thead>
<tbody>
<tr>
<td>Music class</td>
<td>8</td>
<td>8</td>
<td>9</td>
<td>6</td>
<td>8</td>
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<tr>
<td>Cooking class</td>
<td>6</td>
<td>8</td>
<td>8</td>
<td>7</td>
<td>8</td>
<td>10</td>
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<tr>
<td>Yoga</td>
<td>9</td>
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<td>10</td>
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<td>7</td>
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</tr>
<tr>
<td>Swimming</td>
<td>5</td>
<td>7</td>
<td>8</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>Arts and crafts</td>
<td>8</td>
<td>9</td>
<td>10</td>
<td>9</td>
<td>7</td>
<td>9</td>
</tr>
</tbody>
</table>

Additional comments:
The group is progressing well this month. There has been excellent attendance in general. Yoga and craft had 100% attendance and the feedback from the clients was most positive for these activities. They have requested additional services of this nature. The budget was kept well this month.

Signed: Mary Jones
Date: 2/7/16
Evaluate outcomes

You need to assess whether outcomes are being achieved and needs are being met. Clients’ needs are ever changing, so outcomes need to be reviewed and programs adjusted to reflect these changes. After information has been analysed, you and your team need to speak about practical applications that can either sustain client outcomes or improve the opportunity for outcomes to be achieved.

The following lists the evaluation methods and considerations when analysing and interpreting the information.

### Methods of evaluation

Methods for evaluating outcomes include:

- interviewing clients and/or family members
- interviewing relevant health professionals
- conducting surveys
- conducting questionnaires
- undertaking informal observations
- undertaking formal observation sessions.

### Documenting findings and analysis

- Documenting this information clearly and accurately ensures patterns and trends in the information can be identified. For example, a facilitator may document that a client told them they are unhappy with an activity. The facilitator may also document that the client appeared despondent and chose not to participate. As a result of this information, the client’s health practitioner may confirm that the activity is unsuitable for the person. Privacy and confidentiality is a priority when documenting information related to the person.

### Contribute to regular review of the individual program plan

**Example**

Leslie is a client who has dementia. Her program has been devised to meet her specific needs and engage her in a range of cognitive, social and physical activities. The reading group Leslie participates in is designed specifically for people with dementia. Only very short texts are chosen, and discussions about texts are kept brief.

During reading group one day, one of the facilitators notices that Leslie appears very distant and confused. She asks Leslie if she is okay, and Leslie just turns to look out the window and does not respond. The facilitator documents this in her end-of-shift notes and mentions it to the supervisor. The supervisor says that one of the other group facilitators had also noticed Leslie was not enjoying the activity and appeared confused.

The team meet to discuss how suitable Leslie’s program is for her at this moment. The registered nurse conducts a consultation with Leslie and helps the team to establish a more effective activity for her. In consultation with Leslie and her daughter Beth, the team amend the program to include fewer social activities and more gentle cognitive activities. They monitor Leslie’s behaviour in subsequent scheduled activities she participates in to see if the adjustments are appropriate.
**Summary**

1. Progress assessments allow the client and the organisation to see that client needs are being met and that the program reflects the changes the client experiences.

2. Regularly reviewing the program from the perspective of individual clients will mean the program continues to be suitable for the person and their needs.

3. You and your team will review the program plans for individuals with additional needs and review strategies for meeting the needs of individuals within the context of a whole group.

4. You need to follow organisation protocols when evaluating, and ensure documentation is complete, accurate, signed and dated, and filed correctly.

5. The program plan outcomes will be determined in the client assessment and will be based on individual client needs.

6. After evaluation practical applications must be decided upon that will either sustain client outcomes or improve the opportunity for outcomes to be achieved.

7. Effective communication is important when reviewing strategies and approaches to activity programming with your team.

8. To effectively conduct a review of the program, you need clear criteria for assessment.