



Active Support

A handbook for supporting people with learning disabilities to lead full lives

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SUPPORT

Part One: An Overview

Part Two: Interacting to Promote Participation

Part Three: Activity Support Plans

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Part one

An Overview

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PRINCIPLES

People with learning disabilities are entitled to lives which are as full as anyone else's. Although every one of us differs, there are some core things we all have in common. It is important for most people to:

- be part of a community
- have good relationships with friends and family
- have relationships that last
- have opportunities to develop experience and learn new skills
- have choices and control over life
- be afforded status and respect ... and ...
- be treated as an individual.

So important are these core elements of life that they have come to define what we mean by leading a socially valued lifestyle.

Engagement in a full range of typical activities is part and parcel of such a lifestyle. Basic requirements for a full life are the opportunities to:

- participate in the full range of activities that everybody else does
- be involved and share interests with other people ... and ...
- develop relationships, skills, and experience.

When a person is not able enough to do typical activities independently, he or she will need support to do them.

Active Support is designed to make sure that people who need support have the chance to be fully involved in their lives and receive the right range and level of support to be successful. Several research studies have shown that it is effective (see the Appendix for some key references).

ACTIVE SUPPORT

Active Support has 3 components:

- 1. Interacting to Promote Participation.** People who support the individual learn how to give him or her the right level of assistance so that he or she can do all the typical daily activities that arise in life.
- 2. Activity Support Plans.** These provide a way to organise household tasks, personal self-care, hobbies, social arrangements and other activities which individuals need or want to do each day and to work out the availability of support so that activities can be accomplished successfully.
- 3. Keeping Track.** A way of simply recording the opportunities people have each day that enables the quality of what is being arranged to be monitored and improvements to be made on the basis of evidence.

Each component has a system for keeping track of progress, which gives feedback to the staff team and informs regular reviews.

WHERE DOES ACTIVE SUPPORT FIT IN?

The aim of Active Support is to help people lead full lives. But Active Support is not the solution to everything. You will use Active Support alongside other approaches that are designed to achieve other aims, such as:

- a) Person-Centred Plans.** Person-centred planning provides a way to consider important developments in people's lives as part of a regular overall review of what has been achieved and what might be possible in the future. Individual preferences and the involvement of the person concerned in deciding what outcomes to pursue are important. Objectives may be agreed for developing a person's activity, social relationships, learning, independence, autonomy, health, home, job or some other aspect important to his or her quality of life. Objectives then need to be translated into action and taken forward. Active Support, as a complementary person-centred approach, may have a role to play in developing the person's opportunities and activities.
- b) Opportunity or Learning Plans.** Opportunity plans provide a way to focus on a number of skills and organise frequent opportunities to practise them so as to help a person learn. Learning plans provide even more specific guidance on how to teach particular skills.
- c) Positive Behavioural Support.** Positive behavioural support concentrates on helping people develop so that their reliance on challenging behaviour is no longer necessary. Active Support and opportunity and learning plans may have a role to play in a comprehensive positive behavioural support plan.
- d) Communication Plans.** The abilities to understand other people and to express what one wants are very important. Specific planning is often required for people with severe learning disabilities and limited language if their communication needs are to be met. Ways of supporting people to express what they want should be brought into Active Support.

IMPLEMENTING ACTIVE SUPPORT

Learning to use the Active Support approach usually involves 3 forms of preparation:

1. Reading this manual to learn how the components fit together. The manual contains examples of planning and monitoring paperwork, with instructions and worked examples that explain and show what to do. The manual is always available as a source of reference.
2. Working through the components of Active Support in a **training workshop**. Training presentations and exercises are part of the overall package.
3. Working with a **practice tutor** in a real situation to learn how to implement Active Support and give support to individuals at the right level.

Implementing Active Support requires commitment from all of the staff team and from management. Time for staff to meet regularly and frequently (preferably every week) is also essential so that they can discuss how well everything is working and revise plans accordingly.

WHY IS ACTIVE SUPPORT IMPORTANT?

Participation and contribution are important to self-esteem

Everybody spends most of their time participating in activities. No-one likes having nothing to do for very long. We look after ourselves, we do chores, we do hobbies, we help others, we have a good time, we see our friends, we enjoy a well-earned rest with a favourite pastime. Some activities are chores that have to be done. Others we choose. But we rarely do absolutely nothing.

Such participation, or engagement, in activity is a big part of what we think of as our quality of life. It:

- helps keep us fit and mentally alert
- allows us to express who we are
- establishes common interests with other people
- provides the basis for friendships and for living together
- develops our talents and allows us to show what we can do ... and ...
- is the means by which we look after ourselves and our daily needs.

People with learning disabilities need support to participate

Having a learning disability often results in a lack of independence. People with a learning disability cannot arrange all they might want or need to do for themselves. The greater the severity of disability, the larger the knowledge or skills gap becomes. Good support can help to fill this gap. This means planning for the best use of time and giving people as much support as they need to get things done for themselves. With sufficient planning and support, everybody can:

- participate in activities and have a full day regardless of their disability
- contribute even if they haven't got all the skills needed for a particular activity
- take on their share of responsibility ... and
- be involved in things they like to do and make informed choices.

Planning is a way of supporting people; it shows commitment

Most of us have a good idea of what we are going to do each day. We all make and use plans, even if they are only in our heads. We have a basic routine, we think about what

we *have* to do each day and then what we would *like* to do, we make lists, we make appointments, we keep diaries.

We often feel like we've got too much to do, so we have to plan how to fit it all in. People with learning disabilities often have too little to do. They spend time waiting, perhaps bored, for the next opportunity to do something and make a contribution. Planning for a full day can help people lead more fulfilling lives.

Providing support bridges the gap between what people can and cannot do

It is easier for people to control their lives and meet their day-to-day needs when they have the skills and knowledge to act independently. People with learning disabilities can rarely do everything they want for themselves. So, people need assistance. With well-judged assistance, everyone can be involved in every activity that concerns them. How to assist people effectively and how to structure activities so that the steps match their abilities is part of Active Support. This is covered next.



Part two

Interacting to Promote Participation

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HOW TO SUPPORT ENGAGEMENT

The goal of active engagement

It is easy to tell when someone is engaged in doing something. Typically, they will be actively participating in an everyday pursuit, such as communicating with another person, concentrating on something of interest or using their hands to complete a task or produce something. Everyday life is full of opportunities to be actively engaged. The goal of full engagement is equivalent to leading a full life. By supporting individuals, you can help them to be engaged in running their own lives and in pursuing their interests and hobbies.

Matching support to need

The level of support provided is matched directly to the person's need for support in each activity, always making it person-centered in practice. While the support provided has to be enough, the aim is always to promote the person's independence by giving only as much support as is needed. Assistance is gradually faded out as practice makes the person more skilled.

Ways of giving support

Different types of support give more or less help. For example, telling somebody how to use a toaster provides a lower level of assistance than guiding their hands through each step of the task. We can think of different levels of support in the following order:

ASK - INSTRUCT - PROMPT - SHOW - GUIDE

ASK (or SUGGEST or TELL) is a verbal prompt which lets someone know that its time to do something or that something needs to be done

Examples:

"Would you like to start peeling the potatoes for dinner now?"

"How about peeling the potatoes for dinner now?"

"Its time to peel the potatoes for dinner now; OK?"

ASK may be all the support a person needs if they can basically do the activity.

INSTRUCT is a series of verbal prompts which tells the person what to do one step at a time. It helps to guide a person through the activity.

Examples:

“Put the bread in the toaster.” ... “Push down the lever.” ... “Wait.” ...
“Watch the toaster.” ... (the toast pops up) ... “Take out the toast.”

INSTRUCT works well when a person can physically do the task but needs to be reminded of the sequence of steps. It does also depend on the person’s ability to understand the instruction. Using simple clear directions is the most helpful.

PROMPT is a clear gesture or sign to tell the person what to do next. It is like an instruction but works better when the person does not easily understand words. Briefly miming an act can provide a lot of information for the person to follow. PROMPT can be combined with INSTRUCT.

Examples:

Pointing to the potato peeler and then miming peeling a potato.
Pointing at a cup that needs to be put away and then to the place in the cupboard where it needs to go and saying “Put it here”.
Gently nudging the person’s arm behind the elbow so as to indicate the need to move the arm forward to pick up a spoon.

PROMPT works well when a person does not know what to do but is able to interpret and follow gestures or respond to signs of what to do next.

SHOW is demonstrating what needs to be done. A demonstration is more definite and provides more information than a prompt. It, therefore, provides a higher level of support. You give a demonstration and then the person does the same thing immediately afterwards. SHOW can be combined with PROMPT or INSTRUCT.

Examples:

Putting one of six forks away in a drawer, handing the next fork to the person and pointing to the right compartment in the drawer to put it in.

With the individual also holding a potato and potato peeler, putting the potato in a bowl of water, pulling it out and saying "Do that". Then showing how to position the peeler to start and waiting until the individual has copied. Then pulling the peeler to take off a strip of peel, saying, "Like this".

SHOW works well when a person does not know what to do but is able to imitate.

GUIDE is giving the person direct physical assistance to do something. The type of physical support and how long you do it for can vary according to the person's need for support. Placing your hand over the person's hand and guiding it gives more support than guidance at the wrist or forearm. Guidance may be given only at the beginning of a step to get the person going (like a prompt), or it may be given throughout the step. GUIDE can be combined with PROMPT or INSTRUCT and can follow SHOW.

Examples:

Guiding a person's hand at the wrist to align the bread over the slot of the toaster saying, "Put in the bread."

Putting one of six forks away in a drawer, handing the next fork to the person and guiding his or her hand so that the fork is over the right compartment in the drawer, letting go so that the person finishes the step unaided.

GUIDE works well when a person needs a lot of support.

Using ASK-INSTRUCT-PROMPT-SHOW-GUIDE in practice

Depending on people's precise skills, different steps in an activity will require different support levels. You will be familiar with the level of support a person may need to do something. Start at where you think is the right place (e.g., prompt the person). If the person does not do the activity, give more support (e.g., show and then prompt, or guide). If they seem to do it easily, make a mental note to give less support next time so that the person will be more independent. In other words, use the levels of support flexibly according to a person's needs for support in each particular situation.

THINKING IN STEPS

Most activities are a sequence of steps. We are often most conscious of this when we are learning a new activity. Guidance for activities is often set out in a series of steps as in a recipe book or DIY manual. Being aware of the sequence of steps within an activity is useful when supporting people with learning disabilities to participate or learn new skills. Thinking in small steps is particularly helpful for people with more severe learning disabilities. Each step can then be supported at an appropriate level using **ASK-INSTRUCT-PROMPT-SHOW-GUIDE**.

The process of breaking an activity into steps is sometimes called 'task analysis'. It is quite straightforward to do by watching someone do an activity and making notes of the order in which they do different parts of it. You can also do this by going over how to do an activity in your 'mind's eye'.

The degree to which you break a task down can vary, from a few larger steps to many more smaller steps.

People need different combinations of steps and support depending on their skills. It is important that steps are not initially too large, and that they are broken down further if the person has continuing difficulties. Support can lessen and the number of steps reduce as people get better at the activity.

Example: 2 versions of the steps involved in making toast

Fewer, larger steps

More, smaller steps

1. Get bread out

1. Open bread bin
2. Pick up packet of bread
3. Put bread on table
4. Open packet and take out 1 slice

2. Put bread in toaster

5. Put bread into toaster

3. Swith toaster on and set dial

6. Switch toaster on and set dial

4. Start toaster

7. Press lever down on toaster

5. Get Plate

8. Open cupboard
9. Pick up plate out of cupboard
10. Close cupboard door
11. Put plate on table

6. Get butter and jam

12. Open fridge
13. Pick up butter and put on table
14. Pick up jam and put on table
15. Close fridge

7. Get knife and spoon

16. Open drawer
17. Pick up knife and put on table
18. Pick up spoon and put on table
19. Close drawer

TOAST IS READY AND POPS UP

8. Put toast on plate

20. Take toast out
21. Put on plate on table

9. Spread butter on toast

22. Open butter dish
23. Pick up knife
24. Scrape up a lump of butter
25. Spread butter on toast
26. Put knife down

10. Spead jam on toast

27. Open lid of jam jar
28. Pick up spoon and put in jam
29. Take a spoonful of jam
30. Put jam on toast
31. Put spoon down
32. Pick up knife
33. Spread jam with knife
34. Put knife down

LETTING THE PERSON KNOW THAT THEY ARE DOING FINE

It is important to help people recognise that they are doing the right thing, particularly when they are doing something well and are achieving something positive. Making sure that people connect their participation in activity with what it achieves is sometimes called 'positive reinforcement'. Positive reinforcement is about providing appropriate recognition and reward. Some reinforcers occur naturally as part of the activity. Making a cup of tea leads to drinking it, switching on the television leads to being able to watch it. The person will be rewarded for their activity if they want a cup of tea or want to watch television.

However, the value of activities is something everybody has to learn. People need recognition for what they achieve and they need encouragement along the way. Here, praise is important. Praise helps people to recognise that they are doing something useful and doing it well.

How frequently you praise or reinforce people will depend on their abilities and will change over time. Someone who is used to doing something and can do it fairly well may just need the occasional encouraging remark. Someone who has very few skills and does not participate easily may need almost constant praise. Here, you will want to praise the person immediately and often: as soon as they begin to participate and repeatedly throughout the activity.

Some people find praise less reinforcing than others. Sometimes you will need to look very carefully at what a person likes to have or do in order to identify reinforcers individual to him or her.

DEALING WITH PROBLEMS

Most people are happy to do activities as long as they have:

- balance and variety in what they do (e.g., a mix of chores and leisure activities, of social and private time etc.)
- some control over precisely when they do things ... and
- the skills to do the activity or, alternatively, enough support to do it.

If someone refuses to do an activity

Check whether it is a good time to do it. If the person is normally willing to participate in activities and has done that activity before, his or her reluctance may be because he or she wants to do something else at that moment. Choice is important. In general, avoid interrupting people when they are engaged in other activities or arranging things when they have something better to do. The planning of activities with people in a way that reflects their personal preferences should help with this (see Part Three). Revise the activity plan as necessary.

Give more support. Most people feel that activities are more demanding and less enjoyable when they are not very good at them. People with learning disabilities may have a considerable experience of failure, which will need consistent and persistent encouragement to reverse. Refusing to join in or simply not responding to your request, instruction, prompt or guidance may be a way by which the person shows you that the activity is too hard or insufficiently rewarding. It is important in these circumstances to reduce what the person is being asked to do (add extra steps, reduce the scope of the activity or task, do more of the activity yourself with the person), and to give much more support (a higher level of support), be more encouraging (speak enthusiastically and praise participation in the activity more readily) and make the activity more enjoyable (vary how it is done, point up what it leads to).

A person doesn't seem to want to do anything

This is probably a case of the person not getting the support and encouragement to achieve things frequently enough in the past. It will take time to change but the key is to keep it simple (small steps) and give a high level of support (prompts combined with guidance). Avoid nagging the person, even in an encouraging way. Continuing only to ask and verbally encourage the person is not enough. Increase the support being



offered. The person probably sees all requests (however polite) as demands that cannot be met. Asking a person whether they want to do something is not really giving him or her a choice if he or she does not have sufficient experience of doing any part of it successfully. Set up the activity so it is ready to do. Prompt and guide simple ways to participate (“stand up” – “come with me” – “switch on the kettle” – “put a tea-bag in the mug” etc.). Reinforce the person immediately they begin to participate in any way.

Getting a person to concentrate

Minimise distractions before supporting someone participate in an activity. Give short, clear instructions, prompts or demonstrations. Once the person is participating, give them praise. But don't fill the silences with chit-chat as this breaks the person's attention span. Instruct, prompt or guide the next step so that the person remains engaged in the task. Plan breaks carefully (a short time for a rest, for conversation, or to do something else) rather than allowing the activity to go on for too long. If you have indicated when a break will occur (e.g., “do 3 more and then we will have a cup of coffee”), stick to it. Don't be tempted to carry on because everything is going so well. Avoid setting the person up so that he or she has to be disruptive in order to stop participating.

A person starts to behave disruptively

Challenging behaviour is often a way of exerting control. Refusal to join in, an attempt to leave the situation, agitation, getting cross, shouting, hitting out, or other similar disruptions are all ways to indicate that the person does not want to start the activity or to carry on with it. Staff have to be sensitive and learn how to gauge the difficulty of tasks and the amount and type of support provided so that the person begins to experience success and enjoy the activity instead. This will mean being firm but fair.

If challenging behaviour occurs, follow this approach:

IGNORE - REDIRECT - REWARD

IGNORE: Do not overreact or focus attention on the person's behaviour. Ignore the behaviour to show that you are not thrown off course.

REDIRECT: Give more support. Prompt the person to become engaged in the activity. Give assistance calmly - enough to be successful.

REWARD: Praise the person immediately for engaging in the activity. Continue to praise frequently.

Don't try to keep the activity going too long. After the challenging behaviour has subsided and the person has engaged in the activity for a while, judge when to suggest a short break (a few minutes only). Then start again (using the same approach) so that the person begins to get used to short successful bursts of activity.

A person continues to behave disruptively

There is probably a more general problem if any of the above strategies is not successful relatively quickly. Review everything that is discussed in this section: the level at which activities are pitched in relation to the person's skills, the level of support given, the person's perception of support (whether it is seen as support or as a further demand), the style of interaction (is it calm and positive or wary or confrontational?), the reinforcement available for participating (is it something the person genuinely wants?). Explore whether different staff have different experience and develop a common approach based on the most successful ways of involving and supporting the person. Finally, consult any professional advisors who might have something to offer.



Part three

Activity Support Plans

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ACTIVITY SUPPORT PLANS

Planning is part of ordinary life

Most adults lead busy lives and therefore plan how they are going to fit the things they want or need to do into the day. Some activities are part of our personal routine: when we get up, when we have meals, when we wash morning and evening and so on. Other activities reflect our roles and responsibilities: cooking, washing up, tidying, doing the washing, ironing, gardening, shopping, taking the dogs out etc. We know that these activities have to be done but there is often some flexibility as to who in the household will do them, and when. So, we will discuss practicalities with the people we live with a day or so ahead and negotiate how tasks can be slotted in with other things which we want to do, such as regular commitments (e.g., to a hobby or favourite TV programme) or one-off social engagements (e.g., going to the cinema, pub or out to dinner). When we share our lives with other people, being clear about our plans helps things to run smoothly.

It is rare for people to plan everything on paper. Mostly, we keep our plans in our heads, with the aid of diaries and the occasional list to help us remember what to do or what's on. However, this degree of self-reliance may not be possible for many adults with learning disabilities. Planning activities and planning the support they require will be necessary for most people in supported housing. This part of the handbook suggests a way that staff can support adults with a learning disability living and running a house together get the most from life.

Plans should be flexible

Having a plan is not the same as having an unchanging routine. Nor does it interfere with being person-centred. Part of the purpose of planning is to make sure that individuals do get the opportunity to do what is important to them.

There are basic routines in most people's lives, such as getting ready for work in the morning. None of us has much choice here and what we do usually follows a set pattern unless the unexpected happens. Adults with learning disabilities similarly have commitments which will shape their routine.

In other cases, we might have a regular time for doing something, such as usually doing the household shopping on a Saturday morning. It is not set in stone: we can still be

flexible: a friend asks you out for the day, so you do the shopping the previous evening. The purpose of planning is to enhance life, not to make spontaneous activities more difficult.

Recognising this is a good starting point to drawing up a plan. Plans can help individuals be more independent. They do not have to be rigidly followed. Part of being independent is being able to change your plans.

Planning support arrangements

People with severe learning disabilities living in staffed housing often have many people involved in providing them with support. Co-ordination, communication and decision making need to be clear. All staff teams need to develop systems to record and pass on information. Activity plans do need to be written down, because more than one person has to know about them. Plans also need to set out the support arrangements: which staff or other person (relative, friend, neighbour, volunteer) is to support each individual to do what at what time. Planning needs to take account of staff shifts and shift times.

Plans should be person-centred

Good plans take account of personal preferences and build on personal strengths. This does not usually mean that people can always opt out of necessary activities, such as washing or doing their fair share of household activities. But it does mean working out with people when it is convenient to do things and negotiating compromises among members of the group. It also means taking account of what individuals want to do in their leisure and social pastimes. The goal is to work out a full life with and for each person which reflects his or her personal likes and dislikes and his or her responsibilities to a collective household.

THE ACTIVITY AND SUPPORT PLAN: HOW IT WORKS

Every so often, work out a basic weekly timetable which covers all regular activities:

- all of the domestic, gardening and DIY activities which need to be done to maintain household standards
- each individual's personal and self-care activities
- each individual's leisure, vocational and social activities and appointments.

Write down the days and times when these activities normally occur.

Map these onto a big piece of paper covering the week so you can see whether everything fits together and whether there is a good balance across the week in what is being done.

Then transfer the details to a series of Activity Support Plans - probably two or possibly three per day - to cover the week. You can use similar Activity Support Plans over subsequent weeks until you think you need to review the routine again.

Each day, the staff on duty meet briefly several times - first thing, after breakfast, around lunch and around the evening meal. They review the plan, add any particular activities that need to be done, and plan how to deploy themselves to support the range of activities set out.

At the end of each shift/day, staff complete the Participation Record for each person to show the range and extent of opportunities he or she was given.

The remainder of this section goes over the above stages in greater detail.

DECIDING THE BASIC TIMETABLE

Involving everyone as much as possible, discuss and agree all of the personal (self-care), household, leisure, social and other activities which go on in the course of a week. (It is sometimes useful for staff to go over what they have done in their own lives in the last week to check that everything has been considered.)

Self-care	Household	Leisure/Social
Getting up	Preparing breakfast	Jill (Tenant 1):
Washing	Setting the table	Out to pub
Bathing	Clearing away	Country walks
Showering	Washing up	Church
Dressing	Preparing lunch	'Eastenders' on TV
Breakfast	Setting the table.... etc.	... etc.
Coffee	Preparing dinner/tea... etc.	Carol (Tenant 2):
Lunch	Weekly shopping	Contact with family
Dinner/tea	Daily shopping	Time with Alan (friend)
...etc.	Laundry	Gardening
	Ironing	...etc.
	Cleaning kitchen	Bill (Tenant 3):
	Cleaning toilets/bathroom	Visiting Beryl (neighbour)
	Cleaning downstairs	Photography
	Cleaning bedrooms	'Neighbours' on TV
	Daily tidying	Fitness class
	... etc.	... etc.

Note how frequently each occurs in a week. This may require being clear about personal or household standards (e.g., how regularly does a person bath, how frequently are rooms cleaned etc.)

Use this list to map the basic routine for an average week. Set a time frame for each day based on typical times for getting up, going to bed and mealtimes (times may vary at the weekend or even between weekdays). Regular activities act as anchors around which related activities occur. They also divide the day up into time periods into which other



activities need to fit. Allocate the other activities to these periods. Some activities may not have a routine time (e.g., gardening, going for a good walk). They may be things which are kept as 'Options' (see the example).

Remember that you are planning to provide and support opportunities for activity for a number of people, so that more than one activity will normally be occurring at the same time. Mark activities with people's initials where it is clear that a particular person will be involved. Decide how much you think it makes sense to distribute some of the household activities among individuals at this stage. Mark those for which there is a good reason to do so with individuals' initials.

Check the overall impression of the timetable. Is everything included? Does the balance of activity from day to day look about right? Is the time given to things realistic (neither too much nor too little)?

Transfer the information from the weekly timetable onto a series of daily Activity Support Plans each covering part of the day (such as that shown on the next page). The planning sheet has a column for each person headed by their names. Activities which are clearly allocated to a person are entered into these. There is another column for listing general household activities which need to be done on a particular day at a particular time but it is left open who will do them. This will be decided nearer the time or on the day. Finally, there is a column where 'Options' (i.e., optional activities) are listed, things which would be good to do if they can be fitted in.

Example : 114 Glamorgan Street

ACTIVITY & SUPPORT PLAN											Monday Morning	
Staff names and shift times												
1 from to.....											2 from to.....	
3 from to.....											4 from to.....	
5 from to.....											6 from to.....	
Time	Jill	S	Carol	S	Bill	S	John	S	Household	Options		
6.30	Get up Shower+hair						Get up Cup of tea					
7.00	Dress		Get up Cup of tea		Get up breakfast		Bath		Put bins out NB. All prepare own breakfast	Sort Mail		
7.30	Breakfast Medication		Back to bed		Cup of tea Shower		Shave Dress		Clear up			
8.00	Cup of tea		Get up Cup of tea		Shave		Breakfast Medication		Load dishwasher Wipe surfaces			
8.30			Shower						Change linen on beds	Go for a walk		
9.00			Dress		Physio				Clean bathroom	Water plants		
9.30			Hair		↓							
			Breakfast				Clean Car Check Oil and water		Make coffee/tea	Ironing		
10.00	Art Class at FE College				Clean bedroom				Mop floor	Swim and Sauna		
10.30	↓		Exercise Video		Hoover, dust & polish				Local Shop Bread & milk			
11.00									Do Laundry	Mow the lawn Gardening		
11.30									Prepare lunch	Hang out washing		
12.00										Golf range		
12.30	Lunch in Café		Lunch		Lunch		Lunch		Load & start dishwasher	Lunch out		



Checking the routine with individuals

Ideally, you will have involved people as best you can throughout the process of drawing up the basic timetable. If this was not possible to do for everyone, now is the time to check what you propose with each individual. Discussion with families and advocates is important when people have so little language that they are unable to represent their own views completely effectively. This helps to safeguard that particular activity preferences are not overlooked.

USING ACTIVITY AND SUPPORT PLANS EVERY DAY

The staff on duty get together, normally with the individuals in the house, for several very short discussions at intervals throughout the day. First thing in the morning, you decide what arrangements to make until breakfast. At or after breakfast, you decide the plan until lunch; over lunch, you decide the afternoon plan, and at the evening meal, the plan for the evening.

Three things are decided at each discussion:

- Who will do the general household activities which need to be done. Activities can either be written in under people's names or linked to a person by an arrow (see the following example).
- Which staff will support whom (there will often not be a 1:1 support ratio so support workers may be assigned to support more than one person, needing to go between them to give intermittent support to each).

Note: The support arrangements do not need to stay constant across an entire period. The Plans can be used to work out how staff responsibilities for working with individuals change during the course of the shift. The initials of the staff member supporting each person in each activity are entered in the narrow column next to the activity (see the following example). Initials of family members, volunteers or other people may be entered if they are providing the support for the activity.

- Whether each person has sufficient activity opportunities to keep busy during the period concerned. Use activities from the Options list to make sure that everyone has the opportunity to do something constructive.

Example : 114 Glamorgan Street

ACTIVITY & SUPPORT PLAN

Monday Morning

Staff names and shift times

- 1 **Alice** from **6.30** to **11.00** 2 **John** from **7.00** to **1.00**
 3 **Colin** from **7.00** to **12.00** 4 **Diana** from **11.00** to **4.00**
 5 **Eric** from **12.00** to **8.00** 6 from to

Time	Jill	S	Carol	S	Bill	S	John	S	Household	Options
6.30	Get up Shower+hair	A					Get up Cup of tea	A		
7.00	Dress Put bins out	A	Get up Cup of tea	A	Get up breakfast	C	Bath	J	Put bins out NB. All prepare own breakfast	Sort Mail
7.30	Breakfast Medication	A	Back to bed	A	Cup of tea Shower	C	Shave Dress	J	Clear up	
8.00	Cup of tea	C	Get up Cup of tea	A	Shave	C	Breakfast Medication	J	Load dishwasher Wipe surfaces	
8.30	Change linen on beds		Shower	A	Load dishwasher Wipe surfaces	J	Clear up	J	Change linen on beds	Go for a walk
9.00	Water plants		Dress Hair	A	Physio	J	Clean bathroom	A	Clean bathroom	Water plants
9.30			Breakfast	J			Clean Car Check Oil and water	C	Make coffee/tea	Ironing
10.00	Art Class at FE College	J	Clear up	J	Clean bedroom	A	Make coffee/tea	C	Mop floor	Swim and Sauna
10.30		J	Exercise Video	A	Hoover, dust & polish	A	Mop floor	C	Local Shop Bread & milk	
11.00		J	Do Laundry	D			Local Shop Bread & milk	C	Do Laundry	Mow the lawn
11.30		J		D	Gardening	D		C	Prepare lunch	Gardening
12.00		J	Prepare lunch	E		D	Prepare lunch	E		Hang out washing
12.30	Lunch in Café	J	Lunch	E	Lunch	D	Lunch	E	Load & start dishwasher	Lunch out

Communicating effectively

Activity Support Plans are a tool for staff to help them provide the best level of opportunity and support for individuals that they can. Therefore, any useful notes or other additions are fine provided that they are clear, legible and relevant. One way of retaining flexibility while maintaining organisation is through efficient communication. Notes and messages can be written on the back of Plans for subsequent days (see the example below). Plans are kept in a ring binder, one week, (or a fortnight) ahead so that you can write notes on the organisation of days to come. The Plans themselves are not used as a record and need not be kept after the day in question.

Types of message can be as shown in the example below:

1. Something planned earlier (e.g., in the morning) is incomplete or not done and is left for completion later (in the afternoon or the next day)
2. Some change or unexpected event has happened
3. Some request is made of staff to do preparatory work for something that will happen later.

Notes and Messages

1. No time for Olive to do her laundry this morning. She needs her keep-fit clothes tomorrow. Please can you make sure they are done.
2. Roger's father would like him to go out for dinner with him this evening. He will not want dinner here and could he please bath and change after gardening.
3. David, please buy braising steak with Ann and a jar of korma cook-in sauce. She wants to cook curry for tomorrow's evening meal.

KEEPING TRACK

Each individual has his or her own personalised record of activity - the Participation Record - kept in a personal file. At the end of each shift, staff tick the activities that the person has been given the opportunity to do. Categories of activity include: preparing meals or snacks and laying the table, clearing up after meals and washing up/using the dishwasher, tidying and cleaning, laundry and ironing, shopping and putting shopping away, gardening and DIY, leisure and hobbies at home, social life, leisure and hobbies in the community, other use of community amenities. This range of activities reflects a typical lifestyle, so don't be tempted to cut it down. Activities within each of these categories can be recorded throughout the week and a summary of weekly totals calculated. Totals are transferred onto a Participation Summary which gives an overview of the opportunities a person has had over 3-6 months.

Adapt the Participation Record to reflect the activity opportunities being supported: Add rows for additional activities.

Participation recordName Bill RobinsonDate 25/10/09

SELF CARE	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	Total
Showered self	✓	✓	✓	✓	✓	✓	✓	7
Shampooed hair			✓					
Dried self	✓	✓	✓	✓	✓	✓	✓	7
Put toothpaste on brush	✓	✓	✓✓	✓✓	✓✓	✓✓	✓✓	12
Dried hair						✓	✓	2
Combed hair		✓		✓		✓	✓	4
Total								32

MEALS	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	Total
Prepared breakfast	✓	✓	✓	✓	✓	✓	✓	7
Prepared lunch	✓		✓			✓		3
Prepared dinner	✓			✓	✓			3
Laid Table		✓			✓	✓	✓	4
Made cup of tea/ coffee	✓✓✓	✓✓✓✓	✓✓✓	✓✓✓✓	✓✓✓	✓✓	✓✓✓	22
Cleared table	✓		✓✓				✓	4
Total								43

CLEARING UP AFTER MEALS	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	Total
Put dishes/cutlery away	✓	✓	✓✓	✓	✓	✓	✓	8
Loaded dishwasher	✓		✓	✓✓	✓			5
Emptied dishwasher		✓				✓✓	✓✓	5
Wiped kitchen surfaces		✓				✓	✓	3
Wiped kitchen table			✓		✓			2
Total								23

TIDYING & CLEANING	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	Total
Dusted bedroom				✓		✓	✓	3
Mopped kitchen floor	✓	✓	✓		✓		✓	5
Vacuumed lounge		✓			✓		✓	3
Cleaned bath			✓	✓			✓	3
Made bed		✓		✓				2
Total								16

Laundry	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	Total
Used washing machine								
Hung out clothes		✓						1
Used tumble drier								
Ironed clothes								
Put clothes away								
Total								1

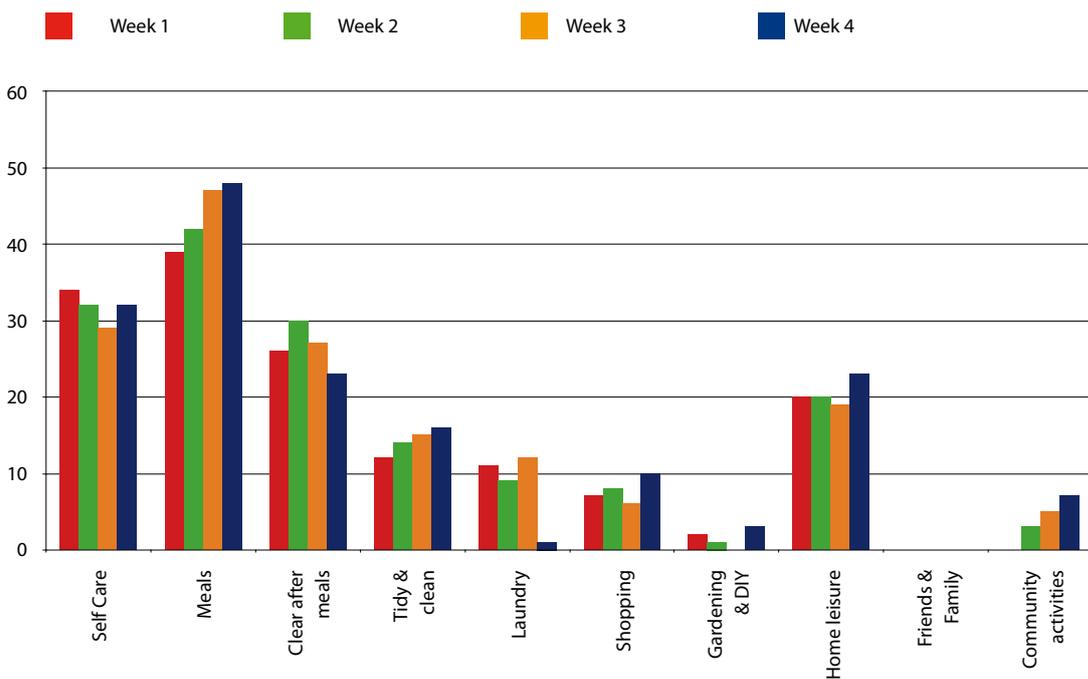
Participation summary

NAME: Bill Robinson											
DATE	SELF CARE	MEALS	CLEAR AFTER MEALS	TIDY & CLEAN	LAUNDRY	SHOPPING	GARDENING & DIY	HOME LEISURE	FAMILY & FRIENDS	COMMUNITY ACTIVITIES	TOTAL
04/10/09	34	39	26	12	11	7	2	20	0	0	151
11/10/09	32	42	30	14	9	8	1	20	0	3	159
18/10/09	29	47	27	15	12	6	0	19	0	5	160
25/10/09	32	48	23	16	1	10	3	23	0	7	163
											etc.

Report from Key worker:

.....

Participation summary graph: Bill Robinson



ADMINISTRATION

Staffing

Staff shift patterns can be entered at the top of the Activity Support Plans once they have been worked out for the coming weeks.

N.B. Having worked out the balance of activity across the week in preparing the Activity Support Plans, it makes sense to plan staff cover accordingly. For example, are there times when individuals are doing community activities with other people (e.g., family, friends, neighbours, other club members etc.) that staffing within the house can be reduced, or is the need for support on one evening so high that more staff are required?

The regular staff meeting

Regular staff meetings are an important planning forum. Success is recognised. The Participation Records give a summary of the variety and total extent of the opportunities made available to people. They show whether the level of opportunities is being maintained or increased. Any problems can also be discussed - standards not being kept up, activities not getting done, particularly difficult times to provide sufficient support - and decisions can be taken to refine the daily timetables. Any issue concerning an individual can be discussed - a low level of opportunity in a particular area (as shown by the Participation Record), difficulties getting a person to do something, new activities that a person seems to want to do. The way staff set up the activity and give support can be looked at or, again, the timetable can be refined.

The staff writing the minutes of the weekly meeting enters changes on the Activity Support Plans for the relevant days of the next and subsequent weeks. Any change in approach to a person or activity is described in full so that all staff can be consistent.

Appointments

The Activity Support Plans do not replace the household or personal diaries. These will still be used to record longer-term appointments and deadlines, such as dates of holidays, family birthdays, and professional appointments.

Appointments for the current week should be transferred from the household or personal diaries to the Activity Support Plans. This can be done when the staffing details are put on. Any appointment made for only a few days ahead can be entered straight onto the relevant day's Activity Support Plan.

Other ideas

Involving individuals in discussion can sometimes be difficult. Using a variety of visual aids, such as objects, photographs, pictures, cards with line drawings which depict different types of activity can be useful. Speech and Language Therapists can provide helpful advice on the best ways of communicating.

Typically the early morning period on a week day until breakfast is very busy. You might want to establish a set way of arranging this, which can then be written out on the Activity Support Plans.

People often have different ways of going about their household arrangements (e.g., whether food is served onto plates in the kitchen and carried to the table or served from serving dishes at the table). Sometimes people feel quite strongly that their way is the correct way. Members of the staff team may very well vary in how they do things at home. If they bring their own ways to their work, they could override the preferences of the people living together. One could even have different staff making different arrangements on different days. Deciding the household's preferred ways of conducting household routines can avoid inconsistency and promote the principle that the people living in the house have their own ways of living their lives.

Periodically, a person's range of activity opportunities and level of participation in different types of activity should be discussed. Goals for promoting opportunity and choice in activity and greater independence should be set and the Activity Support Plans revised accordingly.



Part four

Maintaining Quality

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KEEPING GOING

Any new way of working tends to be introduced with enthusiasm at the start, particularly if it has a good impact on the quality of life of individual tenants. Keeping everything going with the same level of commitment and enthusiasm when it has become routine is a challenge. This section sets out some approaches to keeping up the quality of Active Support as time passes.

It is divided into four sections:

- **Working as a team and being consistent** deals with setting up good co-ordination and communication between staff and having regular staff meetings to review progress and agree specific courses of action.
- **Positive managerial support** discusses the importance of leadership and the role that senior staff have to encourage and support staff when things are going well and when problems have to be sorted out.
- **Using the information recorded** suggests ways of demonstrating the achievements which are being made and of pinpointing problems.
- **Quality Assurance and Case Management** describes how the Active Support approach can fit within a wider context of quality circles, external inspection and making sure that service support is directed towards enhancing people's lives.

WORKING AS A TEAM AND BEING CONSISTENT

Effective co-ordination requires some level of routine.

Everyone needs to know what they are supposed to do and when to do it. Everyone needs to have confidence that what should be done will be done. It is often easier to develop regular times for doing things. For example:

- Activity Support Plans are worked out everyday first thing and after each meal.
- Participation Records are completed by each staff at the end of the shift.
- Participation Summaries are prepared the evening before the weekly staff meeting.

It is important that staff discuss and agree what needs to be done and when they should do it. Then, they will have a firm foundation for implementing Active Support. Changes in routine can of course occur as long as these are communicated to other staff, particularly those coming on duty next.

Co-ordination also depends on good communication

A routine helps people to be organised; communication helps people to make routines flexible. Changes in routine are inevitable and often desirable. It is important that staff tell each other what has been done and what needs to be done, particularly across shift boundaries.

A checklist of important things to do at staff handovers is shown below.

Things to do at Handover: Incoming staff

1. Check each person's file. Remind yourself of current Opportunity Plans, Teaching Plans or other Individual Programmes.
2. Check messages from the previous shift and get an update from departing staff members. Check the Appointments Diary.
3. Check the Activity and Support Plan and discuss and agree activity and support arrangements. Check that Opportunity and Teaching Plans and other Individual Programmes or appointments are covered. Check that each person has sufficient opportunities to fill their time constructively.

Things to do at Handover: Outgoing staff

1. Check appointments have been recorded: for the current week, directly onto the relevant Activity Support Plan; for a future date, in the household diary.
2. Check clear messages have been left.
3. Check recording is complete: Participation Record and recording in relation to any other current interventions or treatments.

The staff meeting

Having a time when all staff can meet together regularly and frequently (ideally once a week or fortnight) is essential. The Active Support approach creates a focus on each individual - the person's range of activities, the support he or she requires to do them and the most effective ways of giving that support, together with ensuring that interventions and treatments arising from each individual's person-centred plan are reliably undertaken. There is a lot to get through to review progress, and plan and agree new developments - not only discussion of what to do but also how to do it.

It is important to maintain a consistent approach. Staff need to be involved in what is agreed. They need to understand what to do and ask for clarification when they don't. It is also important for staff to stick to what is agreed. Individual staff members should not decide to do things differently to everyone else (e.g., to adopt a different way of doing an agreed activity). So it is important that they can raise concerns for discussion at the weekly meeting if they think things are not working as well as they should.

The staff meeting is run by the senior staff member within the house. He or she should review progress for each person in turn, noting success, resolving problems and working out new arrangements.

Check the following:

- **The person's Participation Record** and staff feelings about how well their support of participation is going - is the range of involvement getting better, staying the same or getting worse? Are any particular activities being avoided? Is there too much focus on in-house tasks? What about social contact with family and friends? Are there particular areas of difficulty (e.g., difficulties in gaining involvement or in

giving support)? Do some staff have success but others difficulty? Discuss problems one by one, decide what to do and minute the agreed approach.

- **The person's other individually tailored interventions** - (e.g., opportunity plans, learning plans, positive behavioural support plans) - are they being carried out? Any difficulties? What progress? Problems which cannot be resolved by the staff team are referred to the relevant professional where relevant (e.g., doctor, psychologist, speech therapist etc.) who may be invited to the next meeting. All decisions are minuted.
- **The person's person-centred plan** - to make sure that needed action has been initiated. Check on progress. Referral for professional assessment or advice where needed should be minuted, as should other decisions.

Prioritising issues concerned with individual welfare

Following the above agenda for each person in turn will make sure that the weekly staff meeting focuses on outcomes that are important for the individual. That is not to say that staff issues are not important but rather that they should not dominate. Dealing with issues for individuals first before dealing with staff concerns makes sure that proper attention is given to tenant welfare.

Involving all staff

The staff rota needs to be drawn up so all staff can attend the meetings., It is also important that any regular relief carers are introduced to and trained in the Active Support procedures so that they understand how to do what is required.

Household practices and standards

Where there is a sizeable staff team, staff are likely to bring different household practices and standards with them to work. Sometimes, opinions about the 'correct' ways of doing things can be strongly held. It is important that staff recognise that their place of work is the tenants' home and that household practices and standards should not vary just because different staff are on duty. Tenants should expect that their home develops its own distinctive style, one which they have been involved in deciding as much as possible. This may mean that specific discussion of household routines is occasionally needed so as to make sure that staff are not encouraging someone to do something one way on one day and another way the next.



Monitoring practice

It is important for the senior staff to be in close touch with how support staff work with individuals and follow agreed practices. Senior staff should work alongside all support staff on a regular basis so that they can see that activities are conducted as planned, that positive and supportive relationships are developed, and that the necessary paperwork is done. Whilst doing so, senior staff can model good practice, motivate staff and give them constructive feedback.

POSITIVE MANAGERIAL SUPPORT

Active Support is designed to help services achieve a range of important quality of life outcomes for the people they support. Achieving such outcomes is now often stated by services as their central function. It is logical, therefore, that first-line and more senior managers should pay attention to how well Active Support is being implemented and monitor its achievements. Managing process and outcome is just as important as managing resources. Moreover, senior house staff will be putting considerable thought and effort into implementing Active Support day-to-day. They need the support and encouragement of an informed and pro-active manager.

What is covered in this section is relevant to the relationship between the first-line manager and the house staff. Much is also relevant to the relationship between the senior house staff and support staff.

Managerial involvement is required when things are going well

It is a big mistake for a manager to 'leave well alone' when everything seems to be going all right and to intervene only in crises. Staff don't get the recognition or support they deserve. They don't get help to solve small problems as they appear (before they become big ones). They don't get responsive adjustments in the resources that they require. The manager does not gain experience of what works and the way the service was organised when it was effective. The manager does not gain experience of helping to solve small problems as they appear. The manager ends up with the unenviable task of trying to put back together a system of working which has broken down, with demoralised staff.

The active involvement of their manager in monitoring what they do and the outcomes they achieve communicates to staff the importance of what they are doing and how they are doing it. The manager's recognition of success provides important motivation for staff. The manager should attend staff meetings when possible, read meeting minutes, recognise particular successes or breakthroughs and make sure to talk knowledgeably to staff about the progress being made.

The manager can help solve problems

The manager is an important source of advice. He or she may be able to suggest approaches to overcoming particular difficulties (e.g., getting a person to co-operate or how to rearrange shifts), or suggest another knowledgeable person who staff could



consult. The manager also has some ability to support staff with extra resources if that will help to get over a temporary problem.

The manager is also often better placed than the staff involved to spot when inconsistencies start to creep in. Overall, progress might be OK but the manager checks that staff are still using the methods which led to high standards in the first place:

- Are Activity Support Plans being worked out every day?
- Are staff offering enough support (Ask-Instruct-Prompt-Show-Guide) or are they starting to 'nag' people to join in?
- Are staff continuing to support people once they are participating in an activity (offering more support as the activity proceeds to enable the person to keep doing it) or are they starting to let their attention wander or do more of the activity themselves?
- Are current interventions and treatments being implemented reliably and is progress being made? Is suitable action being taken about issues raised in people's person-centred plans? (It is not encouraging or good practice for intervention/treatment/person-centred plans for individuals to get stuck, without sign of progress)
- Is the staff meeting following the kind of agenda set out above and staff being given enough opportunity to discuss issues and reach a clear understanding of what is to be done?
- Is there a staff member who doesn't do what is required - either doesn't seem to understand what to do or wants to go his or her own way?
- Are staff recognising their success sufficiently - is recording reflecting what is done and is staff effort acknowledged?

The manager should discuss issues such as these as early as possible with senior staff and agree a plan of action to correct what could be the start of a downhill trend.

Planning to avoid stagnation

Person-centred planning should keep what services are trying to achieve on behalf of a person fresh and forward looking. Periodically reviewing arrangements systematically is very important to staying enthusiastic. The manager can help staff and the service in general from getting in a rut.

Every now and again:

- Suggest that the basic timetable and option lists which underpin Activity Support Plans are thoroughly reviewed. Repeat the exercise that generated them in the first place (see Part Three).
- Hold a brainstorming review concentrating on a single person – if the person has a key worker, he or she could be asked to prepare an individual progress report of outcomes achieved in the last few years. In what range of areas has progress been made (e.g., independence, social relationships, language, dexterity, work, household participation, community skills, intimacy, hobbies, interests, health) and what has been overlooked? Are there major issues which have not been taken on because they appear irresolvable or too difficult and is there any possible support which could help? Does the person have strong interests or ambitions which are still to be fully met?

USING THE INFORMATION RECORDED

Active Support generates information about the day-to-day opportunities being offered and the range of participation in activity that individuals enjoy.

The Participation Summary provides simple data of the extensiveness of household opportunities (sum of Meals, After Meals, Tidy and Clean, Laundry, Shopping, Gardening and DIY), Recreation (sum of Hobbies at Home, Hobbies in the Community, Other Community Use), Social Contact (Social Life) and Community Integration (sum of Shopping, Hobbies in the Community, Other Community Use). Such indicators can be calculated for individuals or a household every six months.

Some of the activities undertaken may have been particular goals of an individual's person-centred plan and this can be highlighted. In general, success can be indicated by listing the developments which individuals have experienced since the last plan review.

These indicators can have many uses. As well as being interesting in their own right, they provide useful feedback to the service and other interested parties. Relatives, advocates and individuals themselves can appreciate the summary of what is being achieved.

The indicators provide information that can be used to account for service quality to outside bodies such as statutory inspection units. It can also be used to show that the service meets contract specifications set by commissioners.

The indicators can also form the basis of a regular audit of quality across the provider agency. Most agencies publish annual reports which lay stress on the accomplishments which they associate with a high quality service. However, most have difficulty in showing what is being achieved in practice against these criteria. Active Support produces information which can contribute to a regular annual report on quality. Use of the information in this way also provides individual services which are doing a good job with wider recognition.

QUALITY ASSURANCE

Good internal monitoring and planning systems such as have already been described are one component of a sound overall approach to quality assurance. Active Support can make a big contribution to this. However, external inspection is also important and so is consumer representation.

External inspection

Inspection remits are typically broad and include issues beyond the scope of Active Support, such as safety regulations, financial probity and so on. However, when it comes to assessing service user outcomes, the information on participation collected and summarised as part of Active Support will be very relevant and welcome to those conducting the inspection. Inspectors often have great difficulty in checking whether all that could be done regarding quality of life is being done. Using Active Support to its full extent will be impressive in this respect. Moreover, if external inspection can help to validate the information collected (i.e., to make sure it is honest and accurate), then the quality indicators produced become all the more objective and useful.

Consumer representation

Involving tenants in discussion and decision-making has been stressed throughout (e.g., in deciding activity options and preferences). Making sure that tenants have formal access to consumer representation (e.g., through a Tenants' Association or a House Tenants Meeting) is an additional safeguard to making sure that what is being done is what tenants want. Active Support tends to increase the range of opportunities tenants have, their involvement in activity, their skills and the control that they have over daily life (in that they get the support they require to do more). It can also lead to other improvements (e.g., in health, appearance and possessions). While these may seem generally beneficial, tenant support should not be assumed. Discussion of the developments which are occurring at Tenant Association meetings allows tenants the opportunity to confirm their support and to say what things they would like changed. (Remember, it may not be what is being done but the way that it is being done which tenants might like improved). Moreover, the group solidarity at a tenants meeting may allow some issues to be raised that do not come up in individual person-centred planning.

APPENDIX

Other Active Support resources

Brown, H., Toogood, S., & Brown, V. (1987). *Bringing People Back Home: Participation in Everyday Activities. Programme Two.* South East Thames Regional Health Authority. Bexhill-on-Sea: Outset Publishing.

Mansell, J., Beadle-Brown, J., Ashman, B., & Ockenden, J. (2005). *Person centred Active Support: A multi-media training resource for staff to enable participation, inclusion and choice for people with learning disabilities.* Brighton: Pavilion Publishing.

Mansell J. & Elliott, T. (1996). *Active Support Measure.* Canterbury: Tizard Centre, University of Kent.

Toogood, S. (in preparation). *Interactive Training: Supporting people with severe and profound intellectual disability in meaningful activities: a reference guide for trainers and training trainers.* Brighton, Pier Publishing.

Toogood, S. (in preparation). *Person-centred action plans.* Brighton, Pier Publishing.

Active Support and person-centred approaches

Harman, A.D. & Sanderson, H. (2008). How person-centred is active support? *Journal of Intellectual and Developmental Disability* **33**, 271-273.

Jones, E. & Lowe, K. (2008). Active support is person-centred by definition: A response to Harman and Sanderson. *Journal of Intellectual and Developmental Disability* **33**, 274-277.

Mansell J. & 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**, 1-9.

Sanderson, H., Jones, E., & Brown, K. (2001). *Essential lifestyle planning and active support.* Manchester: North West Training and Development Team.

Sanderson, H., Jones, E., Brown, K. (2002). Active Support and Person-Centred Planning: Strange bedfellows or ideal partners? *Tizard Learning Disability Review* **7(1)**, 31-38.

The origins of Active Support

Felce, D. (1989). *Staffed housing for adults with severe or profound mental handicaps: The Andover project.* Kidderminster: BIMH Publications.

Felce, D., de Kock, U., & Repp, A.C. (1986). An eco-behavioral analysis of small community-based houses and traditional large hospitals for severely and profoundly mentally handicapped adults. *Applied Research in Mental Retardation* **7**, 393-408.

Felce D. & Repp, A. (1992). The behavioral and social ecology of community houses. *Research in Developmental Disabilities* **13**, 27-42

Felce D. & Toogood, S. (1988). *Close to home: A local housing service and its impact on the lives of nine adults with severe and profound mental handicaps*. Kidderminster: BIMH Publications.

Jenkins, J., Felce, D., Mansell, J., de Kock, U., & Toogood, S. (1987). Organising a residential service. In W. Yule & J. Carr (Eds.), *Behaviour Modification for People with Mental Handicaps, 2nd edition*. Beckenham, Kent: Croom Helm Ltd.

Mansell, J., Felce, D., Jenkins, J., de Kock, U., & Toogood, S. (1987). *Developing Staffed Housing for People with Mental Handicaps*. Tunbridge Wells: Costello.

Mansell J., McGill P. & Emerson E. (2001). Development and evaluation of innovative residential services for people with severe intellectual disability and serious challenging behaviour. In L.M. Glidden (Ed.), *International Review of Research in Mental Retardation* **24**, 245-298. New York: Academic Press.

McGill, P. & Toogood, S. (1994). Organizing community placements. In E. Emerson, McGill, P., & Mansell, J. (Eds.), *Severe Learning Disabilities and Challenging Behaviours. Designing High Quality Services*. London: Chapman & Hall.

Saxby, H., Felce, D., Harman, M., & Repp, A. (1986). The maintenance of client activity and staff-client interaction in small community houses for severely and profoundly mentally handicapped adults: A two-year follow-up. *Behavioural Psychotherapy* **16**, 189-206.

Research on the effectiveness of Active Support

Bradshaw, J., McGill, P., Stretton, R., Kelly-Pike, A., Moore, J., Macdonald, S., Eastop, Z. & Marks, B. (2004). Implementation and evaluation of Active Support. *Journal of Applied Research in Intellectual Disabilities* **17**, 139-148.

Felce, D., Bowley, C., Baxter, H., Jones, E., Lowe, K., & Emerson, E. (2000). The effectiveness of staff support: evaluating Active Support training using a conditional probability approach. *Research in Developmental Disabilities* **21**, 243-255.

Felce, D., Jones, E., & Lowe, K. (2002). Active Support: Planning daily activities and support for people with severe mental retardation. In S. Holburn & P.M. Vietze (Eds.),

Person-Centred Planning: Research, Practice, and Future Directions. Baltimore, Maryland: Paul H. Brookes.

Fyffe, C., McCubbery, J. & Reid, K.J. (2008). Initial investigation of organisational factors associated with the implementation of active support. *Journal of Intellectual and Developmental Disability* **33**, 239-246.

Jones, E., Felce, D., Lowe, K., Bowley, C., Pagler, J., Gallagher, B., & Roper, A. (2001). Evaluation of the dissemination of Active Support training in staffed community residences. *American Journal on Mental Retardation* **106**, 344-358.

Jones, E., Felce, D., Lowe, K., Bowley, C., Pagler, J., Gallagher, B., Roper, A., & Kurowska, K. (2001). Evaluation of the dissemination of Active Support training and training trainers. *Journal of Applied Research in Intellectual Disabilities* **14**, 79-99.

Jones, E., Perry, J., Lowe, K., Felce, D., Toogood, S., Dunstan, F., Allen, D., & Pagler, J. (1999). Opportunity and the promotion of activity among adults with severe intellectual disability living in community residences: The impact of training staff in Active Support. *Journal of Intellectual Disability Research* **43**, 164-178.

Koritsas, S., Iacono, T. Hamilton, D. & Leighton, D. (2008). The effect of active support training on engagement, opportunities for choice, challenging behaviour and support needs. *Journal of Intellectual and Developmental Disability* **33**, 247-256.

Mansell, J., Beadle-Brown, J., Macdonald, S. and Ashman, B. (2003). Resident involvement in activity in small community homes for people with learning disabilities. *Journal of Applied Research in Intellectual Disabilities* **16**, 63-74.

Mansell, J., Elliott, T., Beadle-Brown, J., Ashman, B., & Macdonald, S. (2002). Engagement in meaningful activity and 'Active Support' of people with intellectual disabilities in residential care. *Research in Developmental Disabilities* **23**, 342-352.

Smith, C., Felce, D., Jones, E. & Lowe, K. (2002). Responsiveness to staff support: evaluating the impact of individual characteristics on the effectiveness of Active Support training using a conditional probability design. *Journal of Intellectual Disability Research* **46**, 594-604.

Stancliffe, R.J., Harman, A.D., Toogood, S., McVilly, K.R. (2007). Australian implementation and evaluation of Active Support. *Journal of Applied Research in Intellectual Disabilities* **20**, 211-227.

Stancliffe, R.J., Harman, A.D., Toogood, S. & McVilly, K.R. (2008). Staff behaviour and resident engagement before and after active support training. *Journal of Intellectual and Developmental Disability* **33**, 257-270.

Stancliffe, R.J., Jones, E. & Mansell, J. (2008). Research in Active Support. *Journal of Intellectual and Developmental Disability* **33**, 194-195.

Stancliffe, R.J., Jones, E., Mansell, J. & Lowe, K. (2008) Active support: A critical review and commentary. *Journal of Intellectual and Developmental Disability* **33**,196-214.

Toogood, S. Interactive training. *Journal of Intellectual and Developmental Disability* **33**, 215-224.

Toogood, S., Drury, G., Gilsean, K. Parry, D. Roberts, K. & Sherriff, R. S. (2009) Using Active Support procedures to establish a context for the reduction of challenging behaviour: A clinical case example. *Tizard Learning Disability Review* **14 (3)** page range tba.

Totsika, V., Toogood, S., & Hastings, R. P. (2008). Active Support: Development, evidence base and future directions. In L. Glidden (Ed) *International Review of Research in Mental Retardation* **35**, 205-249. London: Elsevier Academic Press.

Totsika, V., Toogood, S., Hastings, R. P., & McCarthy (in press). The effect of Active Support interactive training on the daily lives of adults with an intellectual disability. *Journal of Applied Research in Intellectual Disabilities*.

Totsika, V., Toogood, S., Hastings, R.P. & Nash, S. (2008). Interactive training for Active Support: Perspectives from staff. *Journal of Intellectual and Developmental Disability* **33**, 225-238.

Other research on engagement in activity and staff support related to Active Support

Felce, D. & Emerson, E. (2001). Living with support in a home in the community: Predictors of behavioral development and household and community activity. *Mental Retardation and Developmental Disabilities Research Review* **7**, 75-83.

Felce, D., Jones, E., Lowe, K., & Perry, J. (2003). Rational resourcing and productivity: Relationships among staff input, resident characteristics and group home quality. *American Journal on Mental Retardation* **108(3)**, 161-172.

Felce, D., Lowe, K., & Jones, E. (2002). Staff activity in supported housing services. *Journal of Applied Research in Intellectual Disabilities* **15(4)**, 388-403.

Felce, D., Lowe, K., & Jones, E. (2002). Association between the provision characteristics and operation of supported housing services and resident outcomes. *Journal of Applied Research in Intellectual Disabilities* **15(4)**, 404-418.



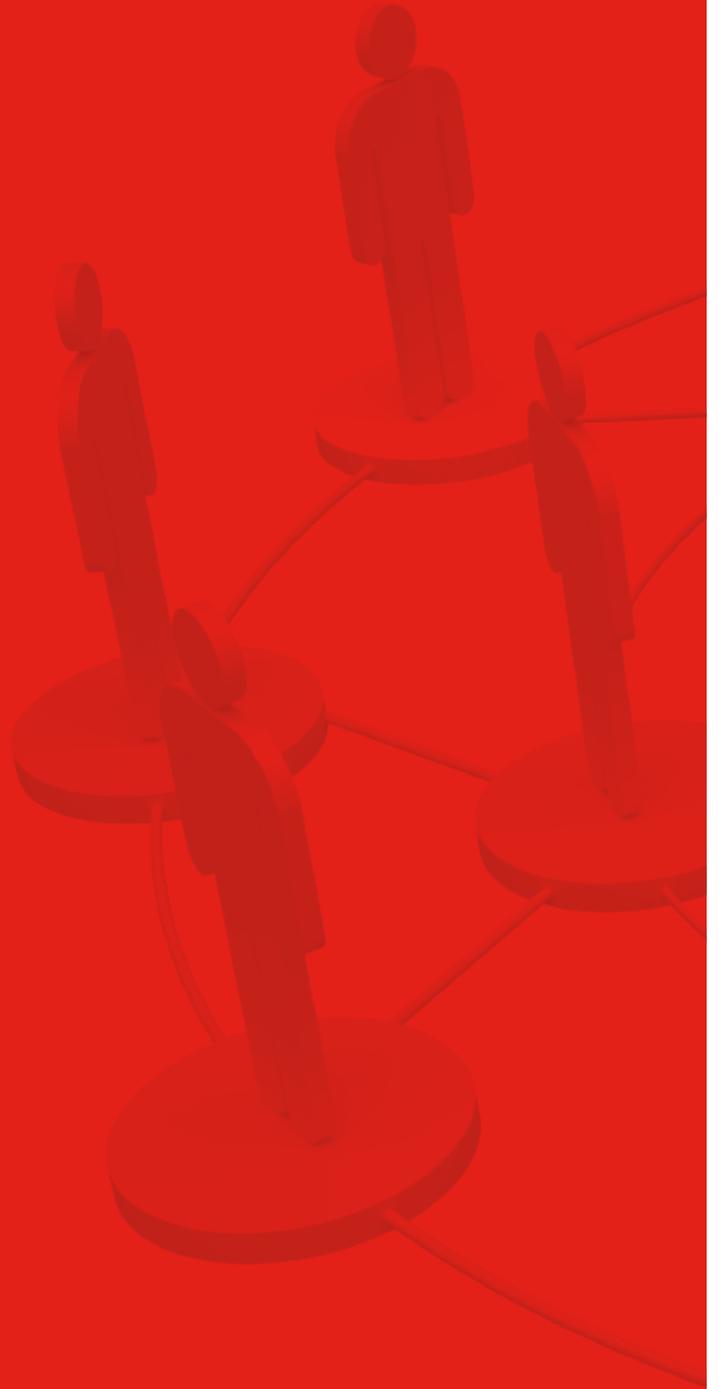
Felce, D. & Perry, J. (1995). The extent of support for ordinary living provided in staffed housing: The relationship between staffing levels, resident characteristics, staff: Resident interactions and resident activity patterns. *Social Science & Medicine* **40(6)**, 799-810.

Felce, D. & Perry, J. (2004). Resource input, service process and resident activity indicators in a Welsh national random sample of staffed housing services for people with intellectual disabilities. *Journal of Applied Research in Intellectual Disabilities* **17**, 127-132.

Perry, J. & Felce, D. (2005). Factors associated with outcome in community group homes. *American Journal on Mental Retardation* **110(2)**, 121-135.







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