

# Contingency Planning Thinking Ahead

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# What is contingency planning?

Taking action now in consideration of the future, should there be a change *in* circumstances, such as a carer no longer being able to provide care.

Examples being::

- ▶ Emergency cards
- ▶ Power of attorney/deputyship
- ▶ Advanced decisions/directives
- ▶ Letter of wishes, usually associated with discretionary trusts

When is the best time to plan ahead?



A case example

This case is a real example. The factual account of what happened when my mother was no longer able to look after my father. The intention Being to highlight issues encountered both as a carer and professional when the breakdown of care took place

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Holistic information that might have helped if documented and provided:.

Information about what my father did during the day.

A personal history so that care workers, who had never before met my father, would know who he was referring to when he started speaking about people from the past, or wanting to talk to a member of his family.

Things my father enjoyed to eat or things that would make him feel more settled.

Preferences, about how care should be provided, and key people, usually family members who had authority to act in certain ways on his behalf.

Areas where family members lived, or where my father might have a preference to live

# What will happen when my circumstances change

There is an expectation that services will act in the best interest of a “service user”.

Services will be reviewed, usually yearly, or when there’s been a change in circumstances. A review should not be used to change someone’s established service unless there is some best interest reasoning why this should be required.

Cost implications can be a consideration but it would be difficult to justify a complete change of package if things have been working well.

# Consider what could be lost, if the professional performing care planning doesn't know the person, as well as you do?

- ▶ This is why it is essential that a service user's support plan reflects all required needs. It is also essential that a person's preferences, and their key information is documented in the form of an advanced decision.
- ▶ If a healthcare professional/social worker is suddenly assigned to this case and the only information they have is based on an assessment of need, consider what potentially could be overlooked.
- ▶ If someone with care needs has significant difficulties to communicate during the assessment process they are entitled to advocacy; however, if the advocate does not have access to information that gives insight into that person's preferences and wants, how can they support them to achieve this in future care planning.
- ▶ Giving clear directions can also help family. Breakdown, or changes, in care can be a very stressful thing and even small disagreements can cause incredible tension.
- ▶ Sadly, you cannot plan for all eventualities, and the way that it would be preferred for care to be provided may not be possible. However, knowing preferences, key contacts and general wishes greatly increases the likelihood that these will be incorporated into the care planning.

# Financial Planning

Depending on circumstances it might be advisable to put money in a Trust. This is where a 3<sup>rd</sup> person is given money to look after on behalf of a service user.

Organisations such as Mencap, and Rethink, are able to advise you on how to put money in trust for the person you care for.

It is advisable to get specialist advice on this topic, because of the large amount of money that may be involved.

Having additional funds can support care planning, as it allows for the topping up of social care provision to shape the support being delivered.

Technically, you can't top up NHS services, such as Continuing Health Care Funding. However you are allowed to pay for amenities and other services not related to health, this gives some potential scope for flexibility. The government are also considering making changes to the Care Act 2014, to better integrate health and social care; combined health and social packages. This would allow more scope for topping up care potentially.

## How do we get started?

A good first step is to start thinking about what you would like to happen in future and ensure this is documented. Adding any key information that you think is important.

ECC is currently in talks with the Eclipse Team to create a contingency form template, you can help us do this by telling us what concerns you have regarding the future and what information you believe should be included: both mandatory or generally.

On behalf of:

William Newland

Redacted

Please accept this letter as proof of consent that I authorise Danny Newland, my son, of Redacted to act as my representative.

Please provide access to any requested information to Danny and allow him to act on my behalf as my advocate. This authorisation is conferred for the period of 2 years, from the below date, or until I withdraw consent; you will be notified should this be the case.

Signature of authorisation

Date: 26<sup>th</sup> August 2018

W Newland

# Communication examples



Microsoft Word  
Document

**Thank you, any questions?**