Possability

Practice Framework for Disability Services.
About Us

Possability assists people to develop their independence and confidence, live the life they choose and achieve their goals. We offer a full range of services across Tasmania designed to enable people to realise their potential.

Our services include:

> Accommodation
> Respite
> Community Connections
> Life Skills and Support
> Coordination of Supports
> Leisure and Recreation
> Intensive Support Services
> Out of Home Care

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About the Practice Framework

The Practice Framework for Disability Services is designed to be a best-practice guide for Possability staff, grounded in core organisational values, legislation and evidence-based research.

The Practice Framework reflects recent disability reforms in Australia and the new direction of the National Disability Insurance Scheme (NDIS). It ensures high quality, person-centred service provision.

Prior to the NDIS, a report by the Australian Government Productivity Commission (2011) clearly demonstrated a need for organisations to adopt client-centred and more equitable, effective practices than the previous system:

“The current disability support system is underfunded, unfair, fragmented, and inefficient, and gives people with a disability little choice and no certainty of access to appropriate supports.”

(AGPC, 2011, P. 2)

Possability works to understand and recognise the individual’s abilities, needs and aspirations. This ensures that participants can live the life they desire and achieve the goals they set for themselves. Possability values independence, skill development and self-determination. Our clients have a voice and are provided with opportunities to make free and informed choices. We promote and encourage participation, and support individuals to engage in a range of different experiences in and outside of the home environment. Possability provides a high quality service through evidence-based approaches that are person-centred, innovative and collaborative.

The Practice Framework for Disability Services allows us to better meet the needs of the individuals we support. It focuses on creating safe, positive learning environments that encourage clients to grow and achieve their goals.
Legislation, Standards and Principles

Disability support models and practice frameworks, including the new Disability Services Framework and the New Zealand Disability Strategy, are grounded in key principles and legislation (see DHHS, 2009; ODI, 2001). Standards including quality, safety and upholding personal rights, for example, underpin frameworks that guide actions. Possability’s Practice Framework is informed by these same standards, but also by our own core organisational values.
Our Vision
That all people supported by Possability will have the maximum potential to lead a good life.

Our Mission
To empower people with additional needs to achieve their vision of a good life, by delivering excellence in support.
Our Values

Humanity
Human rights and dignity underpin all our decisions and actions. We believe that every individual has the potential to grow and the right to determine how their life will be lived.

Honour
We take pride in our work, are true to our word, honour our commitments and treat our colleagues and clients with integrity and respect.

Innovation
Driven by our commitment to excellence, we are continually learning, taking on new challenges, and constantly finding ways to excel in the dynamic world we operate in.

Accountability
We know where we are heading and why. By being efficient, effective and persistent we find ways to make things possible and deliver results.
Promoting choice, quality and safety in service provision are areas of focus that underpin the current disability reforms.

There is a demand for approaches that meet high standards and that are person-centred and responsive to need. The practices we employ must be inclusive and tailored to the individual and their needs and aspirations (see DHHS, 2009; ODI, 2001). There is a need for approaches that enable greater engagement in activities and that lead to an enhancement in client health and wellbeing.

Possability’s practices are therefore guided not only by our purpose and values, but also by the current directions in the sector and evidence-based best practice demonstrated through research. Possability’s approaches include:

- person-centred approaches
- inclusive practices
- active support practices
- positive behaviour support approaches

Possability always includes participants in planning and decision-making. We value and respect client choices, we listen and we act (see DHHS, 2009; ODI, 2001).

Some of our actions include:

- understanding the client’s life story and planning according to expressed needs and aspirations
- planning with the individual – with a focus on skills development and participation activities
- implementing, reviewing and adapting personal plans and individual support plans to suit individual circumstances and need.

“I started to set goals and achieve them, things I thought I could never do or things that I had thought weren’t possible” (Client)
Inclusive practices

The disability reforms strongly emphasise the right that participants have to make decisions and choices. Reform papers, disability frameworks and legislation highlight the need to uphold the right to access, equality and inclusion (e.g. DHHS, 2009; ODI, 2001; DSC, 2012). All individuals have the right to participate, feel they belong and be recognised as making a contribution (see DHHS, 2009). Possability therefore:

> creates safe and familiar environments that enable a sense of belonging as well as skills development
> empowers individuals to make choices and be involved in life planning
> provides opportunities to engage in various activities in and out of the home
> provides opportunities to engage in conversations, forums and meetings to voice opinions and network or make connections with others
> creates a sense of home, where ‘home’ is defined as:

“A home is not merely a shelter. A real home has hearth; a sense of warmth and comfort. A real home has heart; it’s a place of emotional warmth and emotional connection. Home is a place of privacy where the occupant can control who comes in and who does not come in. A real home has a sense of identity. It has roots, it is where the person belongs…” (MCCLEAN, 2014)

“We have a lot of fun when we are all together... it’s nice to have friends to talk to now” (CLIENT)
Positive behaviour support approaches

Possability employs positive behaviour support approaches as these are complementary to several other practices including active support approaches, person-centred approaches, and inclusive approaches. Further to this, the positive behaviour support model aligns with our core values and the legislation. The key actions of Possability staff that are associated with these approaches include either preventing problem behaviour or reacting to it by:

> creating environments designed to meet individual need, and knowing the person and their cues to communicate that they are not coping

> focusing on skills development, including skills that replace problem behaviour, and coping and tolerance skills

> responding to the needs that are being communicated through behaviour, and offering assistance and understanding.

(SEE LAVIGNA AND WILLIS, 2012)

“We created a safe, calm environment for Peter with clear expectations and opportunities for him to engage in therapeutic sensory activities and preferred activities” (COORDINATOR)
Active support

The disability legislation and the literature concentrate on upholding personal rights, particularly inclusion. Skills development and education are avenues to greater freedom, independence and choice; hence they increase the likelihood of social and economic participation and inclusion. To enable more opportunities for learning, growth and inclusion, Possability focuses on active support practices which involve participation and engagement in a range of purposeful experiences. Some examples of how we do this include:

> using a range of communication and engagement strategies to establish relationships between clients, staff and people in the wider community

> providing opportunities for engagement in activities that are meaningful to the individual and that include experiences both in the home and in the community

> focusing on what is important to the clients we support and planning skills development around their interests as well as their needs

> designing and implementing specific projects for clients, for example, those that build confidence and self-determination and those that build community connections and friendships.


“He is more confident in the supermarket. He is able to write a shopping list and find items in the store”
(SUPPORT WORKER)
Possability aspires to and achieves high standards. These standards are guided by our values, the legislation and new directions in service provision. The outcomes we seek to achieve include:

> social and economic participation
> enhancement in health and wellbeing
> increased goal attainment.

The outcomes are delivered by being aware of the direction we are taking, and being committed, motivated and courageous. Achieving excellence in service provision leads to outcomes for the organisation and the individual. When we create opportunities for growth, discovery and learning in secure, safe environments, this leads to our clients building their skills and participating socially – in the home, school and community – and in the economy. This way our clients achieve goals, which in turn enhances their health and wellbeing.

To ensure that Possability continues to deliver current best practice we will:

> regularly consult with and always value the input of all participants
> reflect on and monitor our services by conducting research and measuring outcomes
> continue to research and innovate to generate new practices and evidence
> attend forums and conferences to share knowledge, learn about new directions and build collaborative partnerships with key stakeholders
> monitor literature, review emerging trends, implement and evaluate new practices
> regularly review the practice framework that guides our actions
> promote development and provide opportunities for staff to engage with relevant education and training.

The disability reform literature and associated practice frameworks and strategic plans demonstrate a need for practices to be contemporary and evidence-based (e.g. DHHS, 2009; DSC, 2013). The practices that are currently included in Possability’s Practice Framework have been shown through published, peer reviewed research to be effective. Furthermore, these practices are consistent with Possability’s values and the legislation and frameworks under which Possability is contracted to provide services. All of Possability’s practices are grounded in protecting the rights of the individual, and in providing high quality and effective support.

To ensure that Possability continues to deliver current best practice we will:
Case Study: How does our Practice Framework work for James?

As part of James’s NDIS plan, he and his family identified that he would like to live away from his family home. At 22 years old they all felt it was time James became more independent. However, James, his family and the NDIS agreed that he was not ready to live on his own and that sharing with others was the best option. James did not have the skills to take care of his own place and prepare his own meals. He also needed help making and keeping friendships as in the past he had frightened people he wanted to be friends with. He would get angry when they did not return his texts straight away or if they did not want to do the same things he did. James, who has autism, also struggles with anxiety and, when really anxious, he has hit others and damaged property.

The NDIS asked Possability to prepare a quote for supported accommodation and suggested some other people that James might be able to share with. James does not always enjoy socialising and wants to live independently in the future, so Possability looked for a house that gave James the option of his own space when he needs it.

Before moving in, James and his housemates met at the house to choose rooms, pick some drapes and furnishings, have some meals together and go on outings to make sure they wanted to share a house. James was encouraged to bring his favourite football posters and other prized possessions to decorate his room. The housemates had their first resident meeting before moving in and talked about things that were important to them, such as taking turns to do chores, picking meals they liked and respecting each other’s personal space (bedrooms). From the start, staff sought to create a warm, caring, secure, and familiar environment that empowered all housemates to make choices.

As a result of this meeting, the housemates established initial agreements about routines and expectations. Support staff followed these agreements, respectfully reminding and negotiating if a housemate did not want to do a chore and encouraging the person to discuss it at the next meeting so that a change or compromise could be agreed on. Staff always asked housemates for permission before entering the house or their personal space. If a housemate was not enjoying the company of a Support Worker, the Coordinator investigated the cause and, if changes could not be made, the Support Worker was moved to a more suitable location. Family members and friends also visited regularly and enjoyed staying for a relaxed meal. This is how a sense of home is created, when ‘home’ is defined as:

“A home is not merely a shelter. A real home has hearth; a sense of warmth and comfort. A real home has heart; it’s a place of emotional warmth and emotional connection. Home is a place of privacy where the occupant can control who comes in and who does not come in. A real home has a sense of identity. It has roots, it is where the person belongs…” (MCCLEAN, 2014)
Case Study: How does our Practice Framework work for James?(cont.)

The Practice Development Consultant, James and his family identified some key goals that James wished to achieve. These included meal preparation, housekeeping skills, finding and keeping friends, and managing his anxiety better. All of these were essential to achieving James’ long-term goal of living independently. Planning was done according to James’ expressed needs and life aspirations. The Team Leader and Support Team then broke down his goals into achievable steps. Three meals that James liked were chosen to teach him to prepare independently, and two chores – laundry and vacuuming – were the initial focus of housekeeping skills. James and the staff agreed the times that he would work on these skills as part of his weekly routine. The staff monitored his progress, identifying different ideas for teaching and when James was ready to move on to learning a new skill.

One of James’ biggest challenges was managing anxiety and frustration. The Team Leader and staff worked with James to identify the signs that James was not coping and his cues to communicate this. Together they identified some key events and triggers. Some examples were: being tired, consuming a lot of caffeine and or sugar, being in noisy environments, unexpected things happening, and feeling people were rude or rejecting him. Staff supported James by reminding him about the importance of healthy lifestyle choices and creating predictable routines. James also worked with a psychologist on recognising anxiety and ways to manage this such as deep breathing, which support staff reinforced at home. He also participated in a self-advocacy program that helped him better understand his rights and the rights of others and to communicate assertively rather than aggressively. This provided skills development, including skills that replace problem behaviour, and coping and tolerance skills.

When James did become upset, staff supported him by offering preferred activities they knew helped him to feel calm, such as listening to his favourite music, spinning in his chill-out chair and reminding him about all the people who liked him and the things they had done together. They also started to deep breathe with him as he mastered the skill.

Practice:

> Responding to the needs he was communicating and offering assistance and understanding.

A key goal for James was finding and keeping friends. He felt included within his home as a result of participating in resident meetings and being involved in decisions about his preferences, but his next goal was to be included in his community.

Staff identified two key interests – playing guitar and listening to country music – and looked for opportunities for James to become more involved. James started guitar lessons with a tutor and attended regular country music nights at a local club. As he became more confident, he participated in ‘open mic’ sessions and volunteered to take money on the door. Staff and his psychologist discussed these social situations and what is expected, including role-playing his job on the door. Recently a band has invited James to jam with them, and he is practising two songs that he will perform with them in future.
### Useful Resources


