

Title	Undertake a non-complex individual support plan review with an older person living in the community		
Level	3	Credits	3

Purpose	<p>People credited with this unit standard are able to:</p> <ul style="list-style-type: none"> • summarise a range of approaches used to support a non-complex support plan review; • summarise risk and escalation procedures, and, • prepare, conduct, and complete a non-complex support plan review in the home of an older person living in the community.
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Classification	Health, Disability, and Aged Support > Community Support Services
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Available grade	Achieved
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Prerequisites	<p>Learners must hold the following unit standards:</p> <ul style="list-style-type: none"> • Unit standard 23925 - <i>Support, mentor, and facilitate a person to maintain and maximise independence in a health or wellbeing setting.</i> (Level 3, 6 credits) <p>And either:</p> <ul style="list-style-type: none"> • Unit standard 26974 - <i>Describe interaction, supports, and reporting for people with dementia in a health or wellbeing setting.</i> (Level 3, 8 credits) <p>Or:</p> <ul style="list-style-type: none"> • Unit standard 28563 - <i>Provide person-centred care when supporting a person with early-stage dementia in a health or wellbeing setting.</i> (Level 3, 8 credits)
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Guidance Information

- 1 Assessment conditions
 Ākonga/Learner practice must reflect appropriate values, processes, and protocols in relation to working with Māori, Pacific peoples and/or other cultures.

Evidence generated for assessment against this standard must be conducted under the supervision, direction and delegation of a Registered Nurse or other suitably qualified Registered Health Professional in a health and wellbeing setting.

Evidence generated for assessment against this standard must include three non-complex reviews, of which two demonstrate actions taken when escalation is required as part of outcome 5.1.

2 Assessment notes

Ākonga/Learner practice must reflect appropriate values, processes, and protocols in relation to working with Māori, Pacific peoples and/or other cultures.

3 Legislation and regulations relevant to this unit standard - and any subsequent amendments to them - include but are not limited to:

- Health and Disability Commissioner (Code of Health and Disability Services Consumers' Rights) Regulations 1996 (the Code of Rights);
- Health Information Privacy Code 2020;
- Human Rights Act 1993;
- Privacy Act 2020.

4 New Zealand Standard relevant to this unit standard:

- NZS 8134:2021 *Ngā paerewa Health and disability services standard*; available at <http://www.standards.co.nz/>

5 Definitions

- *Home* is a residence where a person chooses to live in the community and is receiving care for age-related needs. It excludes hospitals and residential aged care homes or facilities.
- *InterRAI* is a suite of standardised assessments used internationally and across the continuum of care. InterRAI assessments are designed to identify risks to a person's health and opportunities to improve it, which, when considering the person's needs and preferences, can form the basis of a support plan. InterRAI assessments are completed by a registered health professional who produces an assessment report.
- *Non-complex individual support plan* refers to a working document that provides information about a person and identifies relevant and beneficial supports for them. It is also used to predict and prevent issues.
- *Older Person* refers to a person aged 65 and over or aged between 50 to 64 with age-related needs.
- *SMART* refers to setting goals for a person that are Specific, Measurable, Achievable, Relevant, and Timely.
- *Support plan* is a generic term that covers the plans that are developed and reviewed at regular intervals for people receiving supports in the home (also known as a 'care plan').
- *Whakawhanaungatanga* refers to the development and maintenance of respectful, positive, and collaborative relationships.

Outcomes and performance criteria

Outcome 1

Summarise a range of approaches used to support a non-complex support plan review.

Performance criteria

1.1 Explain the key characteristics of approaches used to conduct a non-complex support plan review.

Range InterRAI assessment instruments, case-mix system, restorative care.

Outcome 2

Summarise risk and escalation procedures when conducting a non-complex support plan review.

Performance criteria

2.1 Explain approaches used to measure risk, and escalation procedures, when conducting a non-complex support plan review.

Range Stop and Watch tool.

Outcome 3

Prepare to conduct a non-complex support plan review in the home of an older person living in the community.

Performance criteria

3.1 Review documentation concerning an older person's health, background, and living arrangements, in preparation for a visit.

3.2 Communicate with an older person to schedule a review meeting and provide relevant information concerning the visit.

Outcome 4

Conduct a non-complex support plan review in the home of an older person living in the community.

Performance criteria

4.1 Apply Māori approaches to communication through whakawhanaungatanga to build a relationship with an older person.

4.2 Record observations of the visit in accordance with organisational requirements.

4.3 Develop SMART goals in partnership with an older person underpinned by Mātauranga Māori, te ao Māori, Te Whare Tapa Whā, and whānau knowledge.

Range may include but are not limited to – physical exercise, mental stimulation, social interaction, diet, faith.

4.4 Determine non-complex support plan review findings and discuss next steps with the older person.

Range may include but not limited to – identified needs and risks, achievement toward current goals, setting new goals, expected next steps, expected next review date.

Outcome 5

Complete a non-complex support plan review in accordance with organisational policies and procedures.

Performance criteria

5.1 Discuss risk and escalation procedures with a Registered Health Professional, and action as appropriate.

5.2 Record non-complex support plan review outcomes.

Planned review date	31 December 2029
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Status information and last date for assessment for superseded versions

Process	Version	Date	Last Date for Assessment
Registration	1	dd MMMM yyyy	N/A

Consent and Moderation Requirements (CMR) reference	CMR 0024
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This CMR can be accessed at <http://www.nzqa.govt.nz/framework/search/index.do>.

Comments on this unit standard

Please contact Toitū te Waiora Community, Health, Education and Social Services Workforce Development Council qualifications@toitutewaiora.nz if you wish to suggest changes to the content of this unit standard.