

## **Dundee action plans**

### **Action plan 1**

#### **I WILL DO**

- 1) I will include promoting inclusion on "Supervision Agenda".
- 2) Arrange to meet E Hayman (Forfar - Day Service), comparable field of work) to consider "promoting inclusion". To contact also via e-mail.
- 3) I will present to team and increase my knowledge re this.
- 4) To put Inclusion on next Team/Service planning day.

## Action Plan 2

- ❖ I will continue to network with Community Groups in order to explore opportunities available for my clients.
  
- ❖ I will make up personal plans with clients according to their needs.
  
- ❖ Explore client needs/dreams – Empower them to take forward in small steps into Social Inclusion.

### **Action plan 3**

I will do . . . feedback to 3 staff groups on the content and tools from today to pass on info and to reinforce my learning – in the next 2 months, i.e. by end of January 2006.

We will do . . .

I will encourage staff to make use of some of the tools particularly the assessment of community facilities.

## **Action plan 5**

At present I am working in the green light mainly

- ❖ To take group working from the amber light and to use the Inclusion map to help individuals to move further into Social Inclusion.

## **Action plan 6**

I will in my new job collect as much information on informal groups and activities in the locality as I do on formal/agency support groups and networks.

I will endeavour to keep in mind the analysis of Social Inclusion when assessing client need.

## Action plan 7

I will:

- ❖ Write up and reflect on the course during my next CPD slot, ie before end of December 2005.
  
- ❖ Share information/reflections with other strategic people around me in OT service and wider Mental Health Service by the end of December 2005.
  
- ❖ Plan to incorporate into my slots within local in-service programme to share with staff in my area, ie run workshop(s).

We will:

- ❖ Put "Social Inclusion" onto local MH clinical effectiveness agenda (possibly Tayside one).
  
- ❖ Formally discuss how we can more intentionally make use of tools/principles within our own clinical practice.

## **Action plan 8**

I would like to explore the possibility of using the measuring inclusion modal as a means of checking where we are with service users and as a modal for working with service users. To get in contact with other agencies, how they are using it and if it is working.

## **Action plan 9**

I will audit my case load (3) to review inclusion strategy for a specific identified goal.

To check out my assumptions of how I am facilitating the process.

Will review this alongside service user empowerment audit, to identify common issues for improvement.

## **Action plan 10**

### **INCLUSION**

I will pass on the information gathered over the last 2 days to the rest of the staff team, volunteers – training session, in preparation for working with our clients.

## **Action plan 11**

I will continue to be mindful of the agenda of social inclusion in whichever social work field I practice in.

## **Action plan 12**

I will enable other team members to make connections with other Community groups, for example, Community Education to find out the option of “No Charge” situations and encourage them to run inclusive groups.

I will endeavour to educate others, ie Inverurie District Mental Health.

We will, as an NSG Group. → See A.E. plan.

### **Action plan 13**

I will do:

I will include promoting inclusion in supervision agenda.

I will facilitate the meeting up of day care service in Angus and rural Perth & Kinross to share ideas on promoting inclusion.

## Action plan 14

- ❖ Look at the befriending activities. Are we encouraging clients to depend on volunteers rather than helping to empower them to use community facilities alone.
- ❖ Look at length of matches. Should we try to offer the services of more than one volunteer (is this realistic)?

## **Action plan 16**

We will do:

- Find your way – the circle of inclusion, explore working with this model in engaging with service users.
- Evaluate each service, with a view of learning from each other.
- Decide how we / and who will evaluate our services.
- Bring up social inclusion on agenda of Operations Management and Board of Management of our national organisation and encourage review of values / philosophy of organisation.
- Explore doing more effective community facilities / services evaluation / research re social inclusion.

## Action plan 17

### ACTION PLAN

- 1) Organise Team Briefing Event  
    —→ Traffic light exercise Feb 06  
Split teams so that each group has got skill / experience / value mix.
  
- 2) Go through Community Mapping exercise with STS Team as this fits in well with redevelopment.
  - Organise training session on community mapping and promote process. Jan 06
  - Contact Pete to get community mapping check list. Dec 05
  - Set up subgroup Service Users/staff to take project forward.  
    —→ Design own check lists March 06
  - Subgroup to identify community resources (newspapers, newsletters, Clacks web, word of mouth).
  - Work in partnership with SAMH and expert staff, service users to visit and assess 1 resource per month. May 06
  
- 3) Promote use of “Find your Way” with STS and SES team and introduce this tool as part of “getting to know you” process.  
Jan 06 Team Meeting

## **Action plan 18**

### **ACTION PLAN - SOCIAL INCLUSION**

Commit to agenda item on supervision – case discussion to challenge and support social inclusion. Ongoing with Elaine.

## Action plan 19

### ACTION PLAN

#### I WILL DO:

case discussion within supervision with line manager where the focus is on how opportunities could be maximised for the individual.

#### WE WILL DO:

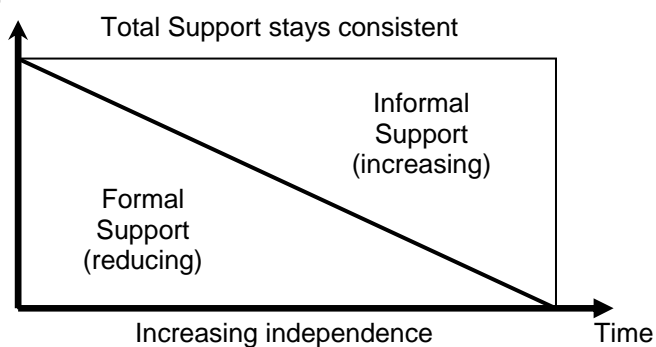
Make a commitment to network and meet up with Perth & Kinross Day Services to discuss our history – where we are now and what we can learn from each other with emphasis on again maximising opportunities for inclusion.

### SLOW INCLUSION

#### Relationship based thoughtfulness

#### STRATEGIES FOR SUPPORTING INCLUSION

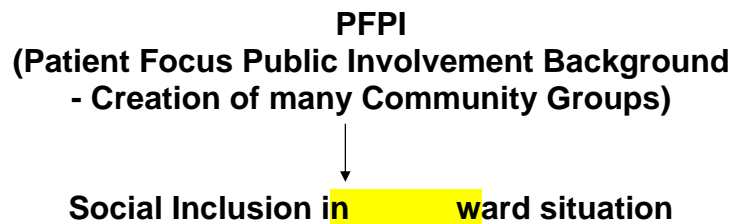
Support Level



Model used in supported accommodation.

SOCIAL INCLUSION PLANNER  
Clusters of Strategies

## Action plan 20



### Assessment

- 1) Look at client nature of illness, social disadvantage.
- 2) What will person be discharged back into? What needs to change?
- 3) What does the client want? Views of relatives.
- 4) Role of multi-disciplinary team, who does what?
- 5) Look at psycho-social aspects of treatment in relation to re-integration into home situation.
- 6) What support will be needed, what level of independence can be achieved.
- 7) Who needs to be involved in the community services and individuals.
- 8) Attitudes of immediate agencies, groups/individuals that would be involved in **dis** planning,
- 9) What monitoring/safety net, if needed, procedures in place.
- 10) Feedback – is it accurate and can it be used to help make social inclusion more effective for individual and for other folk in the future.

# MODEL OF SOCIAL INCLUSION

