



Gofal Cymdeithasol **Cymru**  
Social Care **Wales**

# Using the outcomes approach

Find information and resources on how using the outcomes approach can be used in practice.

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Find information and resources on how using the outcomes approach can be used in practice.

## How to use an outcomes focused approach in case recording

This resource looks at the principles and provides guidance to support personal outcomes-focused case recording based on research, consultation with practitioners, and evidence of what can work. The main focus is on case recording, by which we mean the day-to-day records of interactions between practitioners and people who use care and support, which inform and influence decision-making for and with people.

It also provides different examples of outcome-focused recording and reflective exercises. These will help people, teams and organisations make sure the recording is consistent and meaningful, which will help them build relationships and understanding with people who use care and support.

[Friend not foe](#)

PDF 935KB

### Friend not foe videos

Videos to support people that use care and support, practitioners, managers and commissioners.

### Make recording 'live' and joined up across the organisation

[View transcript](#)

00:00 --> 00:02

Friend not foe

00:02 --> 00:04

Supporting meaningful outcome-focussed recording

00:04 --> 00:09

in social care. Make recording 'live' and joined up across organisations.

00:10 --> 00:14

This resource contains examples of how recording from different

00:14 --> 00:18

settings can be used to support people and teams' reflection and discussions.

00:19 --> 00:25

The purpose of Friend not foe and this video is to support meaningful outcome-focussed recording.

00:27 --> 00:31

This video covers principles which come under two different themes – looking at

00:31 --> 00:37

making recording live and joined up, and secondly, ensuring recording is inclusive.

00:37 --> 00:42

The first theme is to make recording live and joined up across organisations.

00:43 --> 00:49

One principle is to make recording responsive to a person's journey – by capturing their story.

00:50 --> 00:56

In this example, Rhodri's personal outcome is to have the confidence to walk outdoors again

00:56 --> 01:01

and be able to spend time with pals after being seriously injured in a car accident.

01:01 --> 01:07

His story is recorded over time and includes some ups and downs as his circumstances change.

01:07 --> 01:09

After some initial progress,

01:09 --> 01:13

Rhodri has a setback with his health and reports feeling down in the dumps again.

01:14 --> 01:20

His progress is restored after seeing

a trusted physiotherapist who supports

01:20 --> 01:22

him in feeling safe enough to step out the door.

01:24 --> 01:29

In Rhodri's story, different people, including

Rhodri, have contributed to his outcome.

01:31--> 01:35

His journey included some setbacks,

which are a normal part of everyday life.

01:37 --> 01:41

And so we see here how Rhodri's story and

his outcomes are captured along the way.

01:43 --> 01:48

Next, we want to join up personal

outcomes recording across organisations.

01:49 --> 01:54

This is about understanding what information

different agencies need from the record.

01:55 --> 01:59

A foster carer told us about a

referral form regarding a child

01:59 --> 02:03

who had been living in a children's residential home for 18 months.

02:04 --> 02:08

Not a foster carer in the country would agree to take this boy due

02:08 --> 02:10

to the complexity of his behavioural issues.

02:10 --> 02:13

The referral read like a summary of what was best.

02:15 --> 02:19

The foster carer said they were ready to say 'no', until they saw one of his drawings.

02:20 --> 02:23

The picture spoke a thousand words,

02:23 --> 02:27

it showed he wanted to be part of a family and they said 'yes' right away.

02:28 --> 02:33

Understanding what other agencies need to be able to understand someone's personal

02:33 --> 02:37

outcomes can make a real difference  
to decision making and people's lives.

02:39 --> 02:43

The second theme covered in this  
video is making recording inclusive.

02:45 --> 02:50

Another principle is to make recording personal  
for people with communication difficulties.

02:50 --> 02:54

This information was recorded by a  
care home for a resident called Hugh,

02:54 --> 02:59

who has dementia, after Hugh's son  
Michael shared information with them.

03:00 --> 03:05

The staff noticed that when they  
played Radio 3 Hugh was more relaxed.

03:05 --> 03:10

Michael also told staff that his dad had  
always been a shy man who was not a 'joiner'.

03:12 --> 03:16

However, when the staff started to play Radio 3 in the residents' lounge,

03:16 --> 03:21

Hugh started getting up and moving to the music, as if conducting the music himself.

03:21 --> 03:26

This then led to other residents connecting with Hugh around the music,

03:26 --> 03:29

which was becoming a regular feature in the care home.

03:31 --> 03:34

We also want to make recording personal across the life course.

03:36 --> 03:39

The examples in this guidance are for children and adults.

03:39 --> 03:41

It is important to recognise that a

03:41 --> 03:45

personal outcomes approach is for



everyone – from cradle to grave.

03:46 --> 03:50

This can sometimes be forgotten

towards the end of life – when

03:50 --> 03:52

there are still opportunities

for outcome-focussed practice.

03:54 --> 03:58

There is a separate video which includes

a story of outcomes at the end of life.

## Make recording personal and accessible

[View transcript](#)

00:00 --> 00:02

Friend not foe.

00:02 --> 00:06

Supporting meaningful outcome-focussed recording

in social care.

00:06 --> 00:09

Make recording personal and accessible.

00:09 --> 00:14

This resource uses examples of how recording from different settings can be used to support

00:14 --> 00:19

people and teams' reflection and discussions.

00:19 --> 00:23

The purpose of Friend not Foe and this video is to support meaningful outcome-focussed

00:23 --> 00:25

recording.

00:25 --> 00:30

This video covers the principles of Friend not foe which relate to making your recording

00:30 --> 00:34

personal and accessible.

00:34 --> 00:41

Friend not foe is about recording personal, not standardised or organisational, outcomes.

00:41 --> 00:45

We want to capture what really matters to the person using their own language where

00:45 --> 00:46

possible.

00:46 --> 00:50

Let's take an actual example from a support plan.

00:50 --> 00:55

The written statement, "Archie needs to comply with his care plan", is unlikely

00:55 --> 01:00

to reflect what matters most to the individual.

01:00 --> 01:04

This seems more likely to reflect a professional or organisational goal.

01:04 --> 01:08

A more likely and personal outcome might read like this:

01:08 --> 01:13

Archie really wants to stay in the children's home because he trusts the staff and likes

01:13 --> 01:19

the other children, who are all younger than him. He understands that he is going to have

01:19 --> 01:24

to stop drinking which will assist him to manage his anger issues, as stated in his

01:24 --> 01:27

care plan.

01:27 --> 01:32

This ties in with the principle that recording should be personal, rather than everyone's

01:32 --> 01:34

outcomes being the same.

01:34 --> 01:38

You can find more examples in the written resource.

01:38 --> 01:42

Another principle of Friend not foe is to recognise and record the different types of

01:42 --> 01:45

outcomes that matter to people.

01:45 --> 01:50

Outcomes are not always about changing or improving everything.

01:50 --> 01:55

Outcomes can also include maintaining quality of life or process outcomes, which are about

01:55 --> 01:58

how people are supported.

You may consider an outcome which is about maintaining quality of life.

02:03 --> 02:07

Or we can think about a process outcome, like the following example.

02:07 --> 02:12

“My support worker makes me feel good about myself, like I can do stuff.”

02:12 --> 02:17

These short examples can tell us a lot about what really matters and how people want to

02:17 --> 02:19

be supported.

02:19 --> 02:24

On the same theme of making recording personal and accessible, another principle is to emphasise

02:24 --> 02:28

people's strengths, whilst identifying priority risks.

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Here we can see a part of a bigger family focus plan from Friend not foe.

02:33 --> 02:37

The plan includes both risks and strengths.

00:02:37,220 --> 00:02:42

An example of a risk from the plan is, "In the school, Aled is usually really good. But

02:42 --> 02:47

when he loses his temper, his behaviour can result in the school phoning his mum and asking

02:47 --> 02:50

her to collect him."

02:50 --> 02:56

An example of a strength is, "Aled is a brilliant reader and has read some great books.

02:56 --> 02:59

He wants to keep reading good books."

02:59 --> 03:04

Having Aled's strengths recorded helps us recognise what he is capable of and how he

03:04 --> 03:08

can best be supported.

03:08 --> 03:12

Continuing the theme of keeping recording personal and accessible, we also want to make

03:12 --> 03:16

recording clear and concise.

03:16 --> 03:22

Sometimes fewer words can say more, especially when they are written by the person themselves.

03:22 --> 03:28

Over-recording can be driven by anxiety about records being scrutinised for legal or compliance

03:28 --> 03:30

purposes.

03:30 --> 03:33

This means that important information gets lost.

03:33 --> 03:39

It can be very useful to work with your team  
to support each other to be concise with recording.

## Recording stories one: Fran's story

[View transcript](#)

00:00 --> 00:05

Friend not foe Recording stories one

Supporting meaningful outcome-focussed recording

00:05 --> 00:10

in social care

Recording stories one Fran's Story

00:10 --> 00:15

It was gold, it really was

This is one of two personal story videos in

00:15 --> 00:19

our series to support the written resource,

Friend not foe.

00:19 --> 00:24

The resource was produced to support meaningful  
outcome-focussed recording.



00:24 --> 00:28

This is Fran's story, titled "It was gold,  
it really was."

00:28 --> 00:35

Fran's story supports the principle of outcome-focussed  
recording from cradle to grave.

00:35 --> 00:41

Fran tells us about accessing his records  
as an adult from his adoption as an infant.

00:41 --> 00:47

Fran never met his birth parents.

He lived in a Barnardo's children's home

00:47 --> 00:53

for the first few years of his life.

He still has difficult memories of that time.

00:53 --> 00:58

Fran ended up being fostered by a couple who  
then adopted him at the age of sixteen.

00:58 --> 01:02

He didn't look for his birth parents as  
he didn't want to upset his new family.

01:02 --> 01:09

Later, Fran left home, got married and had children of his own.

01:09 --> 01:13

When he was in his thirties, he decided to look up his birth records.

01:13 --> 01:18

So he made an appointment with Barnardo's to go and read his file.

01:18 --> 01:22

Fran told us that reading his file was an amazing experience.

01:22 --> 01:28

Three things stood out for Fran. Firstly, he found out that his mum knew everything

01:28 --> 01:33

that had happened to him as it had been recorded by the social worker right through. Lots of

01:33 --> 01:36

things had happened to him.

He'd been in trouble with the police and

01:36 --> 01:41

at one point had been stabbed.

It meant a lot to Fran that his mum knew about

01:41 --> 01:45

his life.

Fran describes himself as quite a respectable

01:45 --> 01:50

artist.

He does painting with Formula One teams.

01:50 --> 01:54

The second thing that stood out for Fran from

his record was that his mum was a brilliant

01:54 --> 01:57

artist.

He was very excited by that discovery because

01:57 --> 02:02

of the connection he felt to his mum.

The third thing that stood out for Fran was

02:02 --> 02:06

that for the first time in his life, he saw

a picture of himself as a baby.

02:06 --> 02:11

It reminded him of his son as a baby, with a Mohican haircut.

02:11 --> 02:15

Fran was grateful to the social worker who took the time to record that information.

02:15 --> 02:20

It filled a gap for him and he told us, "It was gold, it really was."

## Recording stories two: Helen and the crane

[View transcript](#)

0:00 --> 0:06

Friend not foe Recording stories two

Supporting meaningful outcome-focussed recording

0:06 --> 0:10

in social care

Recording stories two Helen and the Heron

0:10 --> 0:16

Recording outcomes at the end of life

This is the second of two personal story videos

0:16 --> 0:20

in a series to support the written resource

Friend not foe.

0:20 --> 0:25

The resource was produced to support meaningful  
outcome-focussed recording.

0:25 --> 0:30

This is Helen's story, titled "Helen and  
the Heron".

0:30 --> 0:34

Like Fran's story in our other video, Helen's  
story supports the principle of outcome-focussed

0:34 --> 0:40

recording from cradle to grave.

While Fran's story is about accessing his

0:40 --> 0:47

records from birth, Helen's story is about  
recording outcomes at the end of life.

0:47 --> 0:52

The Hospice Movement teaches us about what  
matters at the end of life, as summed up by

0:52 --> 0:58

Cecily Saunders, the founder of the movement:

“You matter because you are you, and you

0:58 --> 1:06

matter to the end of your life. We will do

all we can not only to help you die peacefully,

1:06 --> 1:12

but also to live until you die.”

Hope can still be a part of the end of life

1:12 --> 1:17

and people often want to keep doing things

for themselves and set goals to maintain their

1:17 --> 1:21

quality of life.

Listening to and recording what people want

1:21 --> 1:26

to achieve and what will make life meaningful

is as important as ever.

1:26 --> 1:31

Helen, who is in her seventies, has had cancer

for three years.

1:31 --> 1:37

She knew it was incurable at the time of diagnosis,  
and her main outcome has been to remain living

1:37 --> 1:42

at home as long as possible and to have her  
husband and daughter around.

1:42 --> 1:47

This is what was recorded about Helen's  
wishes, which has been agreed with her family

1:47 --> 1:51

and which the professionals who are supporting  
her understand as important too.

1:51 --> 1:57

"Despite her advancing cancer, Helen wants  
to continue to walk to the river every day

1:57 --> 2:03

with her partner and her daughter Rhian, as  
long as this is possible. She always looks

2:03 --> 2:08

out for the heron which she sees as a good  
omen for her family."

2:08 --> 2:13

The background to what is recorded is that

Helen is finding walking more tiring due

2:13 --> 2:18

to her cancer and she knows that walking will

not be possible for much longer.

2:18 --> 2:23

She has found meaning in these walks and her

family plans to take her to the river in the

2:23 --> 2:29

car when walking is no longer an option.

They have also found a photograph of the heron

2:29 --> 2:35

for when Helen can't get to the river.

This helps the family support Helen and accept

2:35 --> 2:38

her condition.

We might think about outcomes for the family

2:38 --> 2:42

members who are caring for Helen at the end

of her life.



2:42 --> 2:47

We know that Helen's daughter wanted to spend time being close to her mum until the

2:47 --> 2:52

end of her life and that finding shared meaning and hope through watching the heron was comforting

2:52 --> 2:59

to her as well as to her mum.

Having a shared record helps everyone involved

2:59 --> 3:02

to understand priorities at every stage of life.

3:02 --> 3:06

It doesn't need to be lengthy to tell us a lot about what matters.

## How to use an outcomes approach in Information, Advice and Assistance (IAA) services

The principles of the [Social Services and Well-being \(Wales\) Act 2014](#) include:

- an emphasis on promoting well-being
- a preventative approach
- greater voice and control for the individual
- working co-productively with individuals and their families and friends.

The IAA service makes an important contribution to meeting these principles. In particular, the 'what matters' conversation sets the scene for establishing positive relationships with people which are based on co-production.

Conversations in the IAA services will focus on helping people to think about their circumstances identify their strengths and those of their family and community and consider how well-being can be supported.

We've developed a training pack for people working in IAA Services to help them have better conversations:

[Skills based resource pack - outcome focused 'what matters conversations' in IAA](#)

DOCX 1MB

[Skills based resource pack - PowerPoint slides](#)

PPTX 1MB

[Resource pack for managers - Outcome focused 'what matters conversations' in IAA](#)

DOCX 875KB

[Resource pack for managers - PowerPoint slides](#)

PPTX 408KB

## Using an outcomes approach in domiciliary care

Here you will find training resources to help domiciliary care managers and workers take an outcomes-focused approach to their practice.

### Resource for managers

This resource brings together information, ideas and practical tools for domiciliary care managers and people who lead and influence practice.

It covers topics managers need to know about such as culture change and conversations with partners, including commissioners and inspectors. It also includes ways to support staff teams through recruitment, supervision, learning and reflection.

[Understanding and using an outcomes approach: One-stop-shop for people who lead and influence practice in domiciliary care](#)

PDF 638KB

## Resources for workers

These resources can be used in any order and might be useful for:

- supervision
- team meetings
- training
- peer support.

The resource can also be used to support staff who are completing the [All Wales Induction Framework for Health and Social Care \(AWIF\)](#). We've noted where they align with the AWIF in the guide.

[Domiciliary care learning resource: brief overview \(bilingual document\)](#)

PDF 258KB

[Domiciliary care training - full guide](#)

PDF 324KB

[Delivering outcomes - Chapter 1.1 – Understanding Outcomes](#)

PPTX 471KB

[Delivering outcomes - Chapter 1.2 – Recording and monitoring outcomes](#)

PPTX 479KB

[Delivering outcomes - Chapter 1.3 – Linking up with the National outcomes framework](#)

PPTX 690KB

[Having a good conversation - Chapter 2 – What matters conversation](#)

PPTX 507KB

### [Positive risk and shared decision making](#)

PDF 383KB

### [Personal stories about balancing rights, risk and responsibilities](#)

PDF 136KB

[View transcript](#)

My name is Mr David Stanbury Britton, and this is my story.

In my younger days, I was a local councillor. I did this for over forty years. People look at me now and just see this (Mr Britton nodded his head towards his contorted hands) – but I’m a lot more than that.

I was devastated when I found out I had Parkinson’s disease. It was even harder when my son was diagnosed. Life isn’t fair sometimes. You’ve just got to make the most of it. When my wife died, I was on my own. My son’s illness was worse than mine, and I was in the dark. Cassie was my wife’s two eyes. That little cat is a symbol of hope; she’s more than just an animal.

After her passing, people tried to help me – but they kept saying “David, you need to think of your health and get rid of the cat”. But why couldn’t they understand, Cassie isn’t an animal, she’s my only friend. She’s my daily reminder of my wife. I wanted to make new friends, and do more things, but there’s no way I was moving out of that bungalow, if Cassie couldn’t come too. No one ‘got’ that. I was in and out of hospital all the time, and I was worried who would look after Cassie when I wasn’t there. The worry made me more unwell, and no one could understand why I didn’t want treatment. Truth is - I just wanted to be with my cat. But why was that so difficult? “You need to go to hospital, David.” “That bloody cat is making a mess everywhere, why don’t you get it rehomed?” “David you’ll be much safer in a care home, wouldn’t you feel better with more people around?” Isn’t it funny that people think they can tell you what you need.

Things are so much better now. I go to coffee mornings three times a week, and film nights every Thursday. I don’t just have friends, I have a best friend. I go to his flat every

week for a 'tot' of whiskey. When I go to hospital, the carers still come to feed Cassie. One of them even plays with her so she doesn't get bored. This means I can get better, without worrying.

I'm even part of the committee in the complex. My background of being a local councillor means that I know the area really well, and I'm good at organising things. I've got my voice back, and it's a good feeling.

[View transcript](#)

When I was younger I trained at Llandough Hospital to be a nurse but I left to have children. I went back there for 13 years or so as an auxiliary working nights cause that way I was there for the kids in the day.

00.31 I've done 20 odd years I worked with different charities but all around mental health, I've been a trustee and Vice Chair and Chair of a couple, and I absolutely loved it. And then about five six years ago, I mean I was walking with a stick by then anyway, but about five six years ago, seven, suddenly everything just crashed and I couldn't...partly my back, I couldn't stand up.

01.00 And it was catastrophic. I was in Llandough for roughly two months and most of the time sort of on the bed, on bed rest, and as the ulcers healed so my foot twisted. So it wouldn't go on the floor at all. It was, it started to get for me almost a game, because the doctors tried very, very hard to discharge me, they kept telling me medically I was fit "You can go home" but I think I'd become one of those social cases where the doctors would say "Go home" and the nurses would say "No she can't til she's got a package of care."

01.46 I accept now I couldn't manage without my package of care. There's a lot I cannot do for myself but it was horrendous. I didn't feel as though I was in control of my home anymore, I didn't feel as though I was in control of me.

02.02 A couple of I went on to what they call Your Choice and it does give me a lot more control. I seem to go in phases say for hospital appointments and I can go to two or three a week for a couple of months, and whereas before I just had to cancel all the meal breaks that it covered well now I can bank them so they're allocated to me in a separate area and I can take them back and use them for whatever I want which is a

huge difference from the actual package of care.

02.38 Before Your Choice was introduced to me if I didn't use that time which could have been I had a hospital appointment or whatever, those hours were lost.

02.51 I used to be involved with five or six charities all around mental health and because of my health I've had to give most of them up. I'm still involved with two. One of them is an Advocacy service, which is really, really brilliant. And when I go to a meeting it used to be I'd have to say cancel lunch and tea calls and I just lose the time and for years I've just lost the time. But now I bank those times so my lunch and tea call will give me an hour back which yes, you're in discussion with the office about when they can send somebody out, but I enjoy doing the meetings but it also means I'm gaining in terms of getting stuff done here that I want.

03.45 I want to get a lot of my crafting stuff down because I want to start doing crafting again but literally this room has been full because everything I've needed for the past six years has been in this one room. And what I'm doing with the banked hours under Your Choice, people come in and they'll help me pack stuff up, they'll take it upstairs and bring down what I want down here.

04.10 And one of my carers she helped – she's the one that helps with the showers in the week, she does my shopping call, and she thinks it's great. She enjoys doing it, and so do the others that have been here. They say they can see a difference in me and they want to get something down that I'm going to do and enjoy doing rather than just – basically I watch telly 20 hours a day.

04.43 And so yes, I've been to Barry Island on a train this summer, and actually got off the train, had a bag of chips and came back again.

04.54 But what – the one thing that – it's been me holding back a bit because Tory the carer's more than happy to do it, I want to try getting on a bus. Now I know the busses take wheelchairs, but my wheelchair like me is slightly bigger than the norm, and the thought of trying to get it onto a bus is scary.

05.20 But before the winter sets in we're going to do that. And yes, I mean if I can manage to accrue the banked hours again and maybe tag it onto the two hours social call, which is what I call it, I don't know what it's supposed to be called, then maybe we will go somewhere on the bus because that's what – that's my next big hurdle, is trying a bus.

05.44 And since I'm getting the extra time with a carer that is – I don't like the word 'dictating' but in a sense that's what I'm doing, I'm saying "This is what I want, this is what will make a difference to my life and my existence."

06.01 And it's happening. So I suppose I am feeling – I'm feeling more confident I think, or better about myself when I'm actually – when the carer's here.

06.16 When the carer isn't here if I'm having a bad day I'll go back into the 'can't do anything for myself' but that's wrong because I do get a lot of support now, and this Your Choice has been really amazing for that.

[View transcript](#)

00:00

I used to look after a customer who

00:02

lived in the tor vine area she was quite

00:05

a poorly lady she suffered with COPD

00:09

which are quite bad she her husband was

00:11

also quite an ill gentleman and she had

00:14

family but they were full-time and her

00:16

daughter were two women they come home

00:18

on a Friday and it was around the

00:21

Christmas sort of time when she was

00:23

wanted me to take her out into the

00:26

community to do some Christmas shopping

00:27

she hadn't been out for a long long time

00:29

and she wants to go and buy her

00:32

grandchildren Christmas presents but

00:35

they it had to be for me personally so I

00:38

arranged for her mobility scooter to be

00:41

put on charge and made sure it was all



00:43

up and running and because she was on

00:45

oxygen 24/7 how to arrange for somebody

00:47

to bring a small canister of oxygen so

00:51

that we were able to take it out with

00:52

her while she was out in the community

00:54

so I picked her up of any evening and we

00:57

went to come brown shopping with all the

01:00

Christmas lights and she done lots of

01:02

shopping for her grandchildren they were

01:03

you know 16 17 but it was irrelevant to

01:06

her it was the fact that she was able to

01:08

get out and do and buy personal items

01:11

for those children and we don't quite a

01:14

bit of shopping we had a whale of a time

01:16

it was really emotional but it was fun

01:18

as well went to Starbucks that she does

01:20

something where she's never been before

01:22

I had coffee and we had cake just

01:25

general chitchat about anything and

01:27

everything and it was it was just a Me's

01:30

and it was lovely to see her have a

01:32

smile on her face which is not very

01:34

often but it was very emotional for me

01:37

as well it was lovely to see and think

01:39

that I've given somebody a wish that

01:42

they wanted to do but you know that they

01:44

couldn't achieve that without some sort

01:46

of help

01:48

she sadly passed away a couple of months

01:50

after that so I think for me and it was

01:55

something that I will always look back

01:57

on every time I Drive past her home I

01:59

think about it is very fresh in my mind

02:02

although it was several years ago and it

02:05

has been sadly passed away but I think

02:07

for her she probably knew it was her

02:09

last Christmas and it was something that

02:11

she act to achieve to be able again

02:13

and about in the community so yeah

02:16

beautiful

02:17

- lovely lady

02:26

you

## Using an outcomes approach with carers

There are at least 370,000 carers in Wales. At 12 per cent of the population, Wales has the highest proportion of carers in the UK, and many of them provide more than 50 hours of care a week. The 2011 Census tells us there are over 30,000 carers under 25 in Wales, and 7,500 of these are under 16.

According to the [Social Services and Well-being \(Wales\) Act 2014](#) all carers with a support need themselves have a right to an assessment. The assessment must consider the outcomes the carer wants to achieve, which is why you need to have a 'what matters' conversation right at the start of your interaction with them.

## Assessing Carers' Support Needs resources

We have developed resources to help practitioners to assess the support needs of carers. The resources will help practitioners make quality assessments of carers and guide practitioners in working with carers and families to find out what really matters to them and to enable them to achieve their outcomes.

The toolkit of resources includes a:

- training manual giving information and guidance to trainers running formal sessions for practitioners
- slide pack to help trainers develop training sessions
- reflective workbook for practitioners who have not had a formal training session
- practitioner toolkit which brings together a number of practice tools in one place.

Please note: If you can't view PowerPoint presentations in Internet Explorer, try 'saving' the document to your desktop to view.

[Assessing Carers' Support Needs - Resource A – Training Manual](#)

DOCX 872KB

[Assessing Carers Support Needs - Resource B – Training Slides](#)

PPTX 1MB

[Assessing Carers' Support Needs - Resource C – Practitioner Self-Training Workbook](#)

DOCX 569KB

[Assessing Carers' Support Needs - Resource D – Practitioner Toolkit](#)

DOCX 288KB

## Contact us

If you have a question or if you can't find what you are looking for [get in touch with us](#).