



# Universal Care Plan Quick Reference Guide

## How to create/update a care plan

### Decide to create or update

Patient, carer, clinician or non-clinical staff.

### Find the UCP

In context - log on to local EPR system and find patient's Universal Care Plan.

Web portal access - search for patient, if not found, click 'add new citizen' & demographic details will import from NHS Personal Demographic Service (PDS).

Optional – mark as 'my patient' to add to personal worklist list or click 'Add to my organisation list' to add to organisational worklist.

### Access (or start) a care plan

First time, 'start plan' and agree to clinical responsibility and data sharing according to your local guidelines and GDPR regulations for direct care.

### Update one or more sections

Update data fields in one or more sections (see sections).  
Sections can be updated and submitted individually.

### Submit for other users to view

You can submit sections based on your role (see legend - top right corner).  
Submitting a section makes it 'live' for other users to guide treatment given at the point of care.

### Closing a plan

A care plan can be withdrawn for a number of reasons in the "settings" section.  
NHS-PDS automatically updates date of death & changes status to 'deceased' & closes the plan.

## Information about the UCP

### How to access the Universal Care Plan

### How to use the Universal Care Plan

### Personalised care planning with the Universal Care Plan

### Ageing well with the Universal Care Plan

## Conversation Prompts

### Prepare:

- Share leaflets and information with patient prior to conversation.
- Identify which sections and fields of care plan need input.
- Refresh understanding of requirements and mandatory fields of the UCP.

### Conduct & Consult:

- Discuss purpose and benefits of UCP.
- Create in a collaborative way with patient/guardian/carer.
- Build on prompt questions included in personalised care and support plan.
- Consult with other clinical professionals delivering care to patient.
- Once care plan is created discuss with patient, notifying others of its existence.

Visit [ucp.onelondon.online](http://ucp.onelondon.online) for links to relevant guidance, and find more prompts on p.19 of PRSB's [Personalised care and support plan - detailed implementation guidance](#)



# Universal Care Plan content - quick guide

Non-clinicians and clinicians can submit

Only clinicians can submit

## How to use the UCP



Universal Care Plan  
System Training Video

## Need Help?

### UCP Helpdesk

020 3880 0285

ucp.helpdesk@swlondon.nhs.uk

### Frequently Asked Questions

UCP Section	Content		Directions / Tips / Links
Personal Information	Preferred name Gender & pronouns	Patient contact details Personal details	Demographics will be imported (PDS)
Personal & Professional Contacts	Personal relationships & contacts Lasting power of attorney	Deputy for personal welfare People the person cares for professional contacts	<a href="#">Parental responsibility guidance</a> <a href="#">Care contingency planning</a>
Alerts	Medical alerts Mental health alerts	Personal alerts Social alerts	Shown in the banner of the care plan
Communication & Accessibility	Language Support to access healthcare	Additional support with communication	<a href="#">Has the reasonable adjustment flag imported from GP system</a>
What Matters to Them	Who they are Daily life & interests	Concerns & wellbeing Goals	<a href="#">NHSE guidance on involving people in their own health and care</a> <a href="#">NHSE dementia good care planning guidance</a>
Diagnosis & Prognosis	Current diagnosis Awareness of diagnosis	Other significant medical past prognosis	<a href="#">The surprise question</a>
Symptom Management Plan	Symptom management plan Crisis management plan	Day-to-day management plan Sickle cell pain management plan	Provide information for how to manage these in a crisis or non-crisis (day-to-day) situation
CPR & Treatment Escalation Decisions	Record CPR or treatment escalation decision	Capacity for involvement in decisions	<a href="#">Resuscitation Council UK</a>
Thinking Ahead	Advance decision to refuse treatment (ADRT)	End of life care wishes Organ donation	<a href="#">Guidance of Advance Decision to Refuse Treatment</a> <a href="#">Organ donation</a>
Medications & Allergies	Current medications and allergies in GP record	Medications & MAAR chart locations in residence	The information will be imported from GP connect directly and will appear as read only Medications and allergies will not be entered manually
Daily Activities & Support Needs	WHO performance status Frailty score GMFCS	Patient disabilities Social situations & support	The <a href="#">Rockwood Clinical Frailty Score</a> is a tool used to estimate individual's degree of frailty on a scale of 1 (very fit) to 9 (terminally ill)
Medical Devices	Feeding equipment Catheterization Stoma	Respiratory Cardiac Intravenous	Information about any devices currently in use to support care