



Helping to deliver personalised care using the Universal Care Plan

A 'how to' guide for domiciliary care



Contents

Section (hold ctrl + click the title to access the section)	Page number
Section 1: What is in a Universal Care Plan?	3
Section 2: Why use the Universal Care Plan?	4
Section 3: Getting started with the Universal Care Plan	6
Section 4: How to use the Universal Care Plan in your service	9
Section 5: Top tips for using the Universal Care Plan	15
Section 6: Frequently Asked Questions	18

If you are **new to using** the Universal Care Plan you should find **all sections** of the document useful.

If you are **already using** the Universal Care Plan you might want to focus on **sections 4-6**.



Section 1: What is in a Universal Care Plan?

The Universal Care Plan (UCP) programme is an NHS service, and a **digital tool** used to **record and share the personalised care and support wishes of a client**, with their **health and care professionals** across London as appropriate.

A UCP is created following a conversation between the client and a healthcare professional, such as a GP, district nurse or end of life team. The conversation can also include the client's family or carers, if they wish. In some cases, when a client cannot fully participate in the decision-making, family members or the Lasting Power of Attorney (LPA) can have these conversations on behalf of the client.

The conversation should include:



- What is important to the client in their day-to-day life.



- Their preferences or wishes about their care. For example, their wishes for treatment of reversible conditions, often referred to as ceilings of care, or hospital conveyance.



- What support they need, and who is best placed to provide this.



- Information about others who may be involved in their care, such as relatives or carers.

The UCP is a live document which can and should be updated as a client's care needs change.



Section 2: Why use the Universal Care Plan?

Benefits for your clients and their families

- The UCP is a shared record. This means that clients and their families **do not have to repeat conversations** about care preferences which can often be distressing.
- Clients can share their **preferences for their personal care**, which helps support their **wishes to be respected** and gives them a **sense of dignity**.
- It helps to explain how to **manage a client's symptoms effectively**.
- The plan provides clear information, which can help to **reduce confusion and stress**, particularly in an emergency.
- The plan outlines a client's **preferred place of care**, for example in their home or in a hospital.
- The plan's information follows clients to different care settings, ensuring **consistency of care**.
- Clients and families may find comfort in knowing the **client's final wishes are documented** and used to **guide decision making** at the end of their life.

Benefits for Domiciliary Care staff

- Domiciliary care staff may feel more empowered and confident in **handling emergencies** as they can follow the directions given in the UCP.
- It **provides clarity** on the usual condition of a client, so staff have a better understanding of new clients.
- The information from the plan provides a **clear line of escalation**, **reducing pressure** on staff to make difficult decisions.
- Gives domiciliary care teams **access to information** they may not otherwise have access to, helping them deliver safer, more joined up care.



Benefits for your domiciliary care service

- The UCP will help to **support your clients' voices to be heard** and their **wishes to be respected**.
- The UCP can help **enable clear communication** with GPs, ambulance crews, urgent community treatment teams etc., further strengthening relationships between these services and other social care and health professionals.
- The UCP may help **clients to remain in their chosen place of care** by reducing callouts by London Ambulance Service (LAS) and hospital admissions.
- The UCP can support domiciliary care providers' **compliance with Care Quality Commission (CQC)** standards as it meets several criteria:
 - **Safe** - improves the safety of clients by having a visible and accurate record of health information and care preferences.
 - **Effective** - can reduce the number of unnecessary London Ambulance Service (LAS) callouts and conveyances to hospital where this is not in line with the client's wishes.
 - **Caring** - clinical decision making may be improved to provide better outcomes for clients.
 - **Responsive** - information about clients can be used to support clinical decision making.
 - **Well-led** – the UCP is a shared platform which means that everyone involved in a client's care should have information to make informed decisions for the client, which may also improve collaboration and partnership working with external agencies and organisations.



Section 3: Getting started with the Universal Care Plan

How to get started with the UCP web portal

To begin accessing the Universal Care Plan via the UCP Web Portal, you need to complete the following steps.

Step 1: Make sure your service is compliant with the Data Security and Protection Toolkit (DPST). You can find out more about the DSPT by clicking [here](#). This is to make sure your service has the required Information Governance and Security Standards to access and manage sensitive client information.

Step 2: Ensure you have a named email address that only you have access to and is provided by your organisation, or an NHS email address. Ensuring that the email address can only be accessed by you is necessary to ensure that clients' information is secure and only being accessed by people who are caring for them.

Email example	Will it work for the UCP web portal?
John.smith@yourcareservicename.co.uk	YES
John@yourcareservicename.co.uk	YES
John.smith@yahoo.co.uk John.smith@gmail.co.uk John.smith@hotmail.co.uk	NO – not linked to your organisation
John.smith@nhs.net	YES
Manager@nhs.net	NO – not linked to a specific person
manager@yourcarehomeservice.co.uk	NO – not linked to a specific person



You will use the UCP Web Portal to access the UCP. Follow the guidance below to access the UCP via the Web Portal.

Staff will have **read only** or **editable** access to the UCP (depending on their role). When you sign up for the UCP you will be able to see what type of access is available to you. See the examples on the following pages.

Example 1: If you are a **non-clinical member of staff**, for example a Domiciliary Care manager, you **will** be given access to **edit** the first five sections of the plan. These are:

- a) Personal Information
- b) Professional and Personal Contacts
- c) Alerts
- d) Communication and Accessibility
- e) What Matters to Them

Example 2: If you are a **clinical member of staff**, for example a nurse, you **will** be given access to **edit all of the sections listed above**, and further sections such as:

- a) Diagnosis and Prognosis
- b) Symptom Management Plan
- c) CPR and Treatment Escalation (where appropriate within your scope of practice)
- d) Thinking Ahead
- e) Medications and Allergies
- f) Daily Activities and Support Needs
- g) Medical Devices



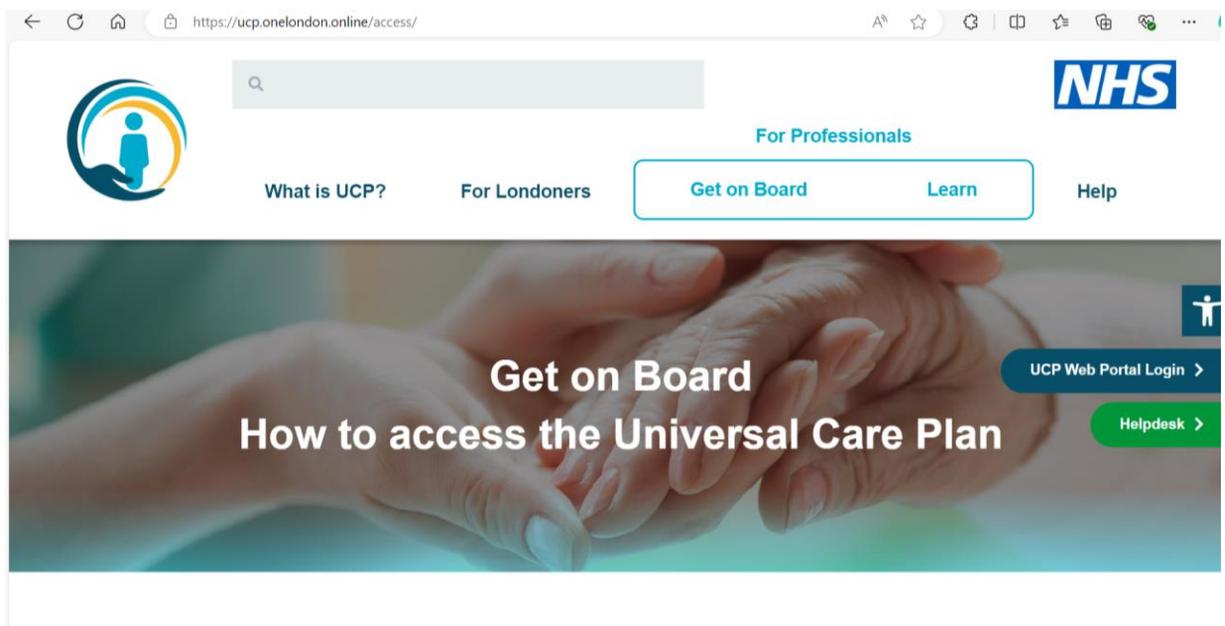
Step 3: Apply for a web portal log in on the UCP website. The link to apply can be found here: ucp.onelondon.online/on-boarding

- The UCP team will aim to issue your login details within three working days. Look for a confirmation email from ucp.better@nhs.net. This will include:
 - your username
 - a link to activate your account and set your password – please note, the link expires after 2 weeks. If this happens, please contact the [UCP helpdesk](#).
 - and instructions on how to access the UCP

Be sure to check your junk folder as well

Step 4: Set up your profile on the Web Portal and read the section: '[How to use the UCP in your service](#)'

For more information on access, please see the UCP website:
ucp.onelondon.online/access



Section 4: How to use the Universal Care Plan in your service

The UCP works best when all parts of the health and care system are using it. The best way to get the most out of the UCP is to make it part of your everyday policies, processes and procedures. The following recommendations suggest how and when you might use the UCP in your care setting and have come from social care providers and other health and care professionals.

When you first start to use the UCP

Step 1: Search for all clients to check if they have a UCP.

It is recommended you search for their name **and** NHS number to avoid incorrect individuals coming up in the search. If you do not have their NHS number, check their date of birth is correct.

Step 2: For clients who do not have a UCP, bring this to the attention when speaking with other health and social care professionals involved in their care e.g. GP, end of life team.

Who does what?

- All health and care providers should be referring to a client's UCP when providing care. However, due to the different ways of working across London, it can be hard to know who should do what.
- It is recommended that you arrange a meeting with relevant health and care professionals such as the district nurses, end of life care team, occupational therapists etc. to discuss roles and responsibilities and agree locally who is going to complete which sections of the UCP.
- As an example, you can use the table below to keep a record of which sections of the UCP you or your stakeholders will fill out. Once completed, you can copy this information into your standard operational plan or policy for your service.



	Staff within the services who can complete the UCP section					
Section of UCP	Your care setting	Secondary Care	Primary Care	Hospice	Community Physical Health	Community Mental health
Personal Information	Auto populates from NHS spine					
Personal & Professional Contacts						
Alerts						
Communication and Accessibility						
What Matters to Them						
Diagnosis and Prognosis						
Symptom Management Plan						
CPR and Treatment Escalation Decisions						
Thinking Ahead						
Medication and Allergies						
Daily Activities and Support Needs						
Medical Devices						

Table created by the Greenwich UCP Task and Finish Group and shared here with permission



When you get a new client

The UCP can improve partnership working with client and families so when a new client starts using your service, check to see if they have an existing UCP.

- If they do, you can pin them to your dashboard on the UCP web portal so you can easily find them again. You can do this by clicking '**Mark as my Patient**'. You can also register the client to your organisation.
 - For more information on how to do this refer to the guide by clicking here: [Worklist Guide](#)
- If they do not have a UCP, discuss this with relevant health and care professionals involved in their care
- UCPs can form part of the initial assessment and the development of the client's care plan.
- Once this has been set up, support the client to access their [UCP via the NHS App](#).



Including the UCP in existing policies, processes and procedures

- The UCP should be written into domiciliary service's existing policies, processes and procedures such as: Admissions Policy, Care Plan Policy, Record Keeping Policy, New Staff Inductions etc.
- The UCP should be also be referred to in your service's escalation and deterioration pathway and handovers with other health and care professionals. Be sure to let them know that your service is using UCPs.
- UCPs should form a routine part of ongoing reviews to ensure information remains up to date and reflects the client's wishes.



When there is a change in a client's health or circumstances

A client may wish to change information on their UCP, for example their resuscitation status, their preferred place of care, or their ceilings of treatment. They may change their information at any point. If a client raises this with you, ensure the Domiciliary Care manager is notified (if that's not you) so that this information can be shared when you next speak to health and care professionals involved in their care.

When there is a change in a client's health, discuss this in the next meeting with health and social care professionals you work with. You can work together to decide if the UCP needs updating, ensuring the client and their relatives are involved, and agree to any changes.

When the **London Ambulance Service (LAS)** is called, **please remind them the client has a UCP**. LAS staff are able to see an overview of the information in a client's UCP on their portable devices. This means that the UCP can inform important clinical decisions, so the client's voice is at the centre of decision making.

Training resources

For additional support:

- A range of e-learning resources are available on the UCP website. Some take just a few minutes and others take longer depending how much time you have. You can access the training here: ucp.onelondon.online/training



More ways to support the use of the UCP in your domiciliary service

Get staff onboarded with the UCP

- Use the [Why use the Universal Care Plan](#) section on pages 4-5 as part of your staff training and in staff meetings. Taking the time to explain the benefits to staff will help them understand the value of the UCP, how it can support clients, help them in their roles, and enable your service to deliver better quality care.

Maximise the number of staff with access to the UCP

- If possible, try to have staff members set up on the UCP Web Portal with their own login details. This ensures there is always someone on duty who can access the UCP.

Identify a dedicated UCP champion in your service

- This person could be responsible for checking new clients' UCPs, reminding others at meetings and helping members of staff sign up.

Who can help?

Technical issues with the UCP

- The UCP helpdesk: contact details can be found here: ucp.onelondon.online/contact

Out of date or missing information on a UCP

- If it is within your scope of practice and your UCP permissions to add and update information, please make the necessary changes yourself.
- If clinical information needs to be added or updated, contact other healthcare professionals involved in their care.
- Contact the local UCP lead for your area to find out who can make changes for you:
 - If they are unable to help or you are unsure who to go to, you can contact the UCP Team on: ucp.onelondon.online/contact



Other support

It is recommended that you speak to all the other health and care professionals that your service has contact with, to understand who else is able to create UCPs or update them following a change to a client's health. Please note this varies across London.

Below we have provided a list of possible colleagues you can speak to. This list is not complete nor limited to the examples given. There may be additional support in your area, and you may also find job roles in your area have different titles:

- Allied Health Professionals
- Care Coordinator
- Domiciliary Care Contract Lead
- Community/District Nurses
- Complex Case Management Team
- End of Life/Palliative Care Teams
- Hospices
- Hospital Discharge Manager
- Mental Health Community Teams
- Rapid Response Teams
- Social Workers
- Trusted Assessors
- Urgent Community Response Teams
- Diabetic Nurse
- Occupational Therapist
- Continence Team
- Community Treatment Team (UCR Team)

Please note that the London Ambulance Service (LAS) have **read only** access to the UCP so cannot create or edit UCPs.



Section 5: Top tips for using the Universal Care Plan

A good quality UCP will provide health and care professionals with clear, well documented information that represents a client's wishes and preferences for their care.

When you are creating or editing a plan you should **ensure you include accurate, good quality information**. Consider **what you would want to know if you were reading it**. Particularly, if you were **reading it in an emergency**, at 2am, for example.

Be sure to include any **key information for the London Ambulance Service (LAS)** to use as well.

It can be hard to work out where to start when introducing a new tool. The following pages provide some **top tips** you could work towards introducing in your care setting.





Tip 1: Work with colleagues to update the UCP every time there is a change in the client's wellbeing, and as a minimum, review it every 6 months to ensure it is still in date.



Tip 2: Agree a schedule for auditing UCPs in your service. If anything looks wrong, raise it with the relevant professional so the UCP can be reviewed and corrected.



Tip 3: Raise the UCP as a discussion point in all meetings.



Tip 4: Create UCPs with other colleagues in your service or health and care providers, rather than in isolation. This ensures that all colleagues are on the same page.



Tip 5: Use the UCP information to help you to deliver personalised care in line with a client's wishes.



Tip 8: The digital nature of the tool may require clients to be given support to access and view their UCP.





Tip 7: Where possible, make sure the language that is used in the UCP is in plain English, clear and meets professional standards. Avoid the use of acronyms.



Tip 8: Establish a communication channel so that your service is informed of changes to a client's UCP and given an updated copy by the relevant team if your service does not have access to the UCP.



Tip 9: When the London Ambulance Service (LAS) is called, please remind them the client has a UCP.



Tip 10: For clients who have been funded by social care, take the opportunity at the six-week review meeting to ask if the UCP has been created and what the plans are for doing this, if not.



Section 6: Frequently Asked Questions

Q1: What do I do if I can't log in?

Contact the UCP helpdesk: ucp.onelondon.online/contact

Q2: Do I have to sign up with an NHS email?

You **do not** have to have an NHS email to sign up to the UCP. You are required to have a named, organisational email address that only you have access to.

Firstname.Lastname@domcare.co.uk for example. This is to protect people's data confidentiality.

Refer to the table on page 6 in the [getting started with the UCP](#) section

Q3: Who should have a UCP?

Anyone can have a UCP. It can help set out someone's wishes for their care and their support needs so all clients could benefit from a UCP.

Q4: Who can access the UCP?

Anyone who works for a London organisation that provides direct care can have access to the UCP, including London Ambulance Service. Clients can view their UCP on the NHS App. Clients, relatives, Lasting Power of Attorneys (LPA) can request printed copies of a UCP.



Q5: What do I do if a client or relative disagrees with the contents of the UCP?

It is important to respect the wishes of the client. If changes need to be made to the information in the UCP, arrange a meeting with the client and relatives to discuss and document the updated wishes.

Q6: How do I support staff and clients who are worried about having an advance care planning conversation?

Check if your local end of life team provide specialist or hospice support and if so, arrange for them to have the advance care planning conversation, and/or provide additional training for staff.

Q7: Who can edit the plan?

Check the sections [Examples of how the UCP is being accessed in London](#) on page 7 or [Who can help?](#) on page 13-14 for more information.

Q8: Does the UCP need to be written and completed in one sitting?

No, the UCP can be written section by section over time, and you are not required to complete all sections. The UCP can be continuously added to and updated. Any information that is submitted will be available to view by health and care professionals.



Q9: How often does the UCP need to be reviewed and updated?

Every time there is a change in a client's wellbeing, the UCP should be updated to reflect the change.

Your service should put in place a review schedule for all UCPs. It is recommended that this is done every 6 months, as a minimum.

Q10: What should I do if the UCP is incomplete, or needs updating with new information?

If you have editable access to the section that requires additional information, you can update the plan yourself.

If you do not have editable access, you should check if anyone in your service has editable rights and let them know what information should be updated. If no one in your service can edit the plan, contact health and social care professionals involved in their care, and ask them to make the updates.

Q11: Who signs off the plan?

Any changes made to the clinical sections of a UCP need to be 'submitted' by someone in a clinical role. Once this is done, the changes will be viewable by other UCP users.

Sign off is not required for the non-clinical sections of the plan.



Q12: Who is responsible for the plan?

All health and care professionals are responsible for looking at the plans and updating information.

It is recommended that you arrange a meeting with relevant stakeholders such as the community care team, end of life care team etc. to discuss who does what in your local area. Use the table on page 10 as a guide.

Q13: What happens to a UCP if a client dies?

You may be asked this question by clients or relatives. If a client with a UCP has died, the care plan remains on the UCP system, marked as a deceased care plan. If preferred, the client's next of kin or Lasting Power of Attorney (LPA) can request for the record to be withdrawn from the system, meaning this can no longer be accessed by any clinician. Please speak to a healthcare professional for more information.

