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**SNAP Online Training Workbook – Unit 2**

Instructions

As you work though SNAP Online Training Unit 2 there are some brief activities where we ask you to pause the presentation and note your thoughts/answers to questions. The activities are highlighted on the training slides with red text, and a **black workbook icon** in the top right-hand corner of the slide flags where we suggest you complete your workbook.



Please note your thoughts/answers in the relevant boxes/grids provided in the workbook.

Completing the workbook will help you collect your thoughts, and it will evidence your training.

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| Name: |  |
| Date(s) of training: |  |
| SNAP Unit 2 Online Training version date  (date given on title slide): |  |

**Activity 1: Consider… & reflect**

How has your team, site, or organisation previously introduced and embedded new initiatives? Think of an example of an initiative that was introduced and embedded well – and one that went not so well.

Take a bit of time to consider and jot down a few notes in answer to each of the questions in the table below.

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| **Consider…** | **Example that worked well:** | **Example that went not so well:** |
| **How was the initiative introduced?** |  |  |
| **What preparation was done in advance?** |  |  |
| **How were individual clinicians helped to prepare?** |  |  |
| **How successful was it?** |  |  |
| **What helped?** |  |  |
| **What hindered it?** |  |  |

Now, thinking about the answers you’ve noted down in the table above, briefly **reflect** for a moment on this question:

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| What should be done differently when implementing SNAP as a new way of working? |

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| **When you have completed Activity 1, restart the presentation to continue the training** |

**Activity 2: SMART**

What are your goals for the implementation of SNAP – your organisational goals?

The **SMART system** can be used to help you identify your goals for the implementation.

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| SMART  Specific | State the area that needs improvement, what action you will take, what you hope to achieve and who will be involved in making the change |  |
| SMART  Measurable | Think about how you will measure if you have met your goals, and who will do this |  |
| SMART  Attainable | Reflect on if your goals are attainable within your team, site, or organisation given the resources you have available e.g., time, staffing |  |
| SMART  Realistic | Reflect on if your goals can actually be achieved within your team, site, or organisation and if they are relevant to your work |  |
| SMART  Timely | Set an appropriate timeframe within which to achieve your goals |  |

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| **When you have completed Activity 2, restart the presentation to continue the training** |

**Activity 3: Draft Implementation Plan**

Jot down a few bullet points into the template to start formulating your draft Implementation Plan. Or use the template to review the key tasks and start planning who will lead on them and work out some initial dates for completion. We have also included a copy of this template in your SNAP Implementation Resources Pack.

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| **SNAP Implementation Plan** | | | | |
| **Key task** | **Complete by (date)** | **Who is leading this task?** | **Completed?**  **Y/N** | **Comments** |
| Set up Planning Meetings |  |  |  |  |
| Revisit relevant policies/ procedures |  |  |  |  |
| Identify current practice (baseline) |  |  |  |  |
| Format the *“How Are You?”* Booklet (the SNAP Tool) |  |  |  |  |
| Establish initial plan for records system |  |  |  |  |
| Goal setting: what you aim to achieve by  implementing SNAP (use SMART) |  |  |  |  |
| Complete SNAP Implementation Charter document |  |  |  |  |
| Circulate SNAP Implementation Charter to all relevant colleagues for review |  |  |  |  |
| Identify what information to collect on use of SNAP |  |  |  |  |
| Create awareness of the implementation of SNAP |  |  |  |  |

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| **When you have completed Activity 3, restart the presentation to continue the training** |

**Activity 4: Draft Delivery Plan**Start by reading the Guidance in the table below, then use the blank template that follows it (which maps to the guidance) to put down some initial ideas – just a few bullet points – to start formulating your draft Delivery Plan. We have also included a copy of this guidance and template in your SNAP Implementation Resources Pack.

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| **Guidance for developing a Delivery Plan for SNAP**  [Guidance version 03/03/2022] | | | |
| **Stages of SNAP** | **How will this be done in your practice?** | | |
| **1 Introduce SNAP**  *Convey this is the start of a conversation about the patients’* ***support needs***  *Language used is crucial. Avoid using the term ‘form’ or ‘questionnaire’*  *Referring to the “****‘How are you?’ booklet****” is more meaningful for patients.* | **How** are you going to introduce SNAP? Will it be to all patients? | | * Consider developing a set of key bullet points so the whole team gives the same message in their introduction – that this **is the start of a conversation** about the patient’s support needs * This is particularly important for introductions over the phone/by post |
| **What** are you going to do at this stage – Stages 1-4 or introduce only? | | * Introduce the SNAP Tool and work through to needs-led and shared planning? If so, include this in the introduction * **Introducing the tool only?** When will a later contact be made to complete the needs-led conversation? How will you arrange this with the patient? |
| **Who** will introduce it?  Do they need to arrange follow-up? | | * If not, who will do this, how will the follow be arranged? |
| **When?** At what point in the care trajectory? | | * First contact, later contact? * How will you ensure that it has been introduced? |
| **Where** will SNAP be introduced? | | * In the home, ward, clinic, by telephone? * How much time needed to explain that the SNAP Tool is not just another form? |
| **2 Patient considers needs**  *Enabling time and space for the patient to look at the SNAP Tool and reflect on their individual support needs* | **When** will patients have time to reflect on **their needs**? | | * Will they do this after your consultation? |
| **Where** will the patient complete the SNAP Tool? Do they have privacy if needed? | | * Is there privacy/space in the setting for the patient to complete it if needed? |
| **What** will the patient do with their completed SNAP Tool? | | * Have you explained to them what to do at this point, who will follow up on this? |
| **3 Needs-led conversation**   * *Asking patients which domain(s) they* ***most need support with –*** *prioritisation* * *Then exploring the* ***patients’ individual needs*** *within prioritised domain(s)* | **How** will you ask about priorities and explore their individual needs? | | * To find out the domain(s) the patient needs most support with at the moment (**their priorities**) * To enable the patients to say what **their individual needs** are within their prioritised domain(s) * As with Stage 1 (Introduce SNAP), consider developing some key phrases that the team can use to help them have this conversation |
| **Who** will complete the conversation with the patient? | | * The same person who introduced SNAP? * A different clinician? If so, how will this be coordinated? |
| **When** will it happen? | | * At the time of introduction or at a separate date? * If another date, how will this be arranged? |
| **Where** will it happen? | | * In the home, ward, clinic, by telephone? * Is there a space/privacy for the conversation? * Do you know if the patient is happy to talk in front of others? * If not, what alternative arrangements can be made? |
| **4 Shared response**  *The conversation is documented on the Support Plan:*   * *domains prioritised* * *needs explored* * *actions put in place to meet needs (at the contact or following it) through:* * friends/family * directly delivered support * signposting * referral on | **What** actions (supportive input) will be put in place? | * **Find out first** **what the patient feels would help** meet their needs before highlighting what is available * **Consider different types of supportive input:**   + *Active listening by the clinician at the contact*   + *Friends / family (input may not always come from your team)*   + *Directly delivered by the clinician at the contact (reassurance, advice, information, educational input, training)*   + *Signposting to other sources of support that patients can access*   + *Referral on to other services (with consent)* | |
| **Who by?** By the person who did the needs-led conversation? | | * If the needs-led conversation is by a healthcare assistant, are they able to put an action plan in place? * If not, how will this stage be managed? |
| **When/where** will it happen? | | * Usually done at the time of the needs-led conversation (Stage 3) * If not, what alternative arrangements can be made? |
| **Using the SNAP Support Plan** | | |
| **How** will patients’ individual support needs and support provided be recorded? | * The Support Plan is provided for this purpose * Consider whether this will be included on the back of the “How are you?” booklet or on a separate A4 Support Plan kept at base | |
| **Where** will the Support Plan be kept (on paper or electronic)? | | * Paper or electronic? The Support Plan (but not the tool itself) can be incorporated into paper records and put on electronic record systems |
| **5 Shared review**  *Actions put in place to support the patient need to be reviewed for effectiveness.*  *There also needs to be continuing review in response to changing situation of the patient over time* | **Who** will do the review? | | * Whose responsibility will it be? |
| **When/where** will Support Plan be reviewed? | | * When will it be reviewed to determine whether actions recorded have met the patient’s needs? * In the home, ward, clinic, by telephone? * Is there a space/privacy for the conversation if needed? |
| **How** will the review be recorded? | | * Update the previous Support Plan? * Start a new Support Plan? |
| **How** will you decide whether or when SNAP is needed again (Stages 1-5)? | * **Consider when SNAP is needed** **again** (including completion of another SNAP Tool)? * After a defined period of time? * Are there key trigger points for pro-active review (e.g. a change in the patient’s condition or their carer’s situation)? | |
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Now that you’ve read Guidance table, use the blank template on the next page to put down some initial ideas – just a few bullet points – to start formulating your draft Delivery Plan…

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| **Blank template for developing a delivery plan for SNAP**  [Template version 03/03/2022] | | |
| **Stages of SNAP** | **How will this be done in your practice?** | |
| **1 Introduce SNAP**  *Convey this is the start of a conversation about the patients’* ***support needs***  *Language used is crucial. Avoid using the term ‘form’ or ‘questionnaire’*  *Referring to the “****‘How are you?’ booklet****” is more meaningful for patients.* | **How** are you going to introduce SNAP? Will it be to all patients? |  |
| **What** are you going to do at this stage – Stages 1-4 or introduce only? |  |
| **Who** will introduce it?  Do they need to arrange follow-up? |  |
| **When?** At what point in the care trajectory? |  |
| **Where** will SNAP be introduced? |  |
| **2 Patient considers needs**  *Enabling time and space for the patient to look at the SNAP Tool and reflect on their individual support needs* | **When** will patients have time to reflect on **their needs**? |  |
| **Where** will the patient complete the SNAP Tool? Do they have privacy if needed? |  |
| **What** will the patient do with their completed SNAP Tool? |  |
| **3 Needs-led conversation**   * *Asking patients which domain(s) they* ***most need support with –*** *prioritisation* * *Then exploring the* ***patients’ individual needs*** *within prioritised domain(s)* | **How** will you ask about priorities and explore their individual needs? |  |
| **Who** will complete the conversation with the patient? |  |
| **When** will it happen? |  |
| **Where** will it happen? |  |

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| **Stages of SNAP** | **How will this be done in your practice?** | |
| **4 Shared response**  *The conversation is documented on the Support Plan:*   * *domains prioritised* * *needs explored* * *actions put in place to meet needs through:* * friends/family * directly delivered support * signposting * referral on | **What** actions (supportive input) will be put in place? |  |
| **Who by?** By the person who did the needs-led conversation? |  |
| **When** will it happen? |  |
| **Where** will it happen? |  |
| **Using the SNAP Support Plan** | |
| **How** will patients’ individual support needs and support provided be recorded? |  |
| **Where** will the Support Plan be kept (on paper or electronic)? |  |
| **5 Shared review**  *Actions put in place to support the patient need to be reviewed for effectiveness.*  *There also needs to be continuing review in response to changing situation of the patient over time* | **Who** will do the review? |  |
| **When/where** will Support Plan be reviewed? |  |
| **How** will the review be recorded? |  |
| **How** will you decide whether or when SNAP is needed again (Stages 1-5)? |  |
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| **When you have completed Activity 4, restart the presentation to continue the training** |

**Activity 5: Enablers & challenges**

It is helpful to reflect what factors you believe will enable clinicians to successfully integrate SNAP into their practice, and how they could be harnessed/enhanced. It is also helpful to reflect on factors which could present challenges to clinicians successfully integrating SNAP into practice, and how they could be addressed. Use the two tables below to start thinking about enablers and challenges and how you can work with them, adding rows as you need to.

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| **What might enable clinicians to successfully integrate SNAP into their practice?** | **How they could those enablers be harnessed/ enhanced?** |
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| **What might be the challenges to clinicians successfully integrating SNAP into practice?** | **How they could those challenges be addressed?** |
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| **When you have completed Activity 5, restart the presentation to continue the training** |

**Activity 6: Pilot Planning**Piloting is extremely useful and helps to early on identify what works and what does not work so well. This activity helps you to plan for your pilot.

Jot down some initial thoughts on this – just bullet points – in the table below

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| **PLAN** | |
| Which clinicians will pilot the use of SNAP? |  |
| How long will you pilot SNAP for? |  |
| What are your goals for the pilot? i.e., what do you hope it will help inform? |  |
| How will you collect information during the pilot to help you to meet your goals? e.g., will you gather feedback from clinicians and patients? |  |
| **STUDY** | |
| How will you evaluate your pilot of SNAP? |  |
| Who will you provide feedback on the outcomes of the pilot to? e.g., senior management, the rest of the team? |  |
| How do you plan to provide feedback on the outcomes of the pilot? e.g., an existing staff meeting, set up a meeting dedicated to  discussing the outcomes? |  |
| What format will you provide feedback in? e.g., presentation, a brief report? |  |

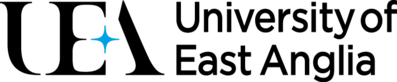
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| **When you have completed Activity 6, restart the presentation to continue the training** |

**Activity 7: Normalising SNAP**Normalising the use of SNAP is important for longer-term sustainability. This activity helps you to think through some of the ways you could do this within your team, or across sites or your organisation.

Jot down some initial thoughts on this – just bullet points – in the table below

|  |  |
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| **Normalising the use of SNAP** | **Comments** |
| What links to old ways of working might you need to remove? e.g., old paperwork or records |  |
| How can you help to ensure that SNAP remains ‘in view’ within each site? What reminder systems might work for your setting? |  |
| How could you ensure that SNAP remains ‘on the agenda’? e.g., could SNAP be added as an agenda item to existing meetings? |  |
| Can you add SNAP training to new staff induction programmes? |  |
| Can responsibility for ongoing monitoring of SNAP be handed over to senior managers to signal that this is no longer a ‘pilot’? |  |

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| **When you have completed Activity 7, restart the presentation to finish the training** |

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**SNAP Online Training – Unit 2**

**Certificate of Completion**

**This is to certify that**

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**completed the SNAP online training - Unit 2**

**[version date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ ]**

**on: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_\_**

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| **SNAP Online Training – Unit 2**  **Learning Outcomes** | |
| **Training section** | **What I learned** |
| 1. **Planning: getting ready for SNAP implementation** |  |
| 1. **Piloting: getting started with SNAP implementation** |  |
| 1. **Cascading SNAP training** |  |
| 1. **Sustaining SNAP implementation** |  |