

About Reablement

Reablement is committed to working in partnership and communication with those we support, their families and/or carers, other professionals and external agencies as means of improving service delivery.

Community Outreach and Reablement is a local authority establishment and its service provision and delivery is monitored by the Isle of Wight Council as well as the Care Quality Commission (CQC).

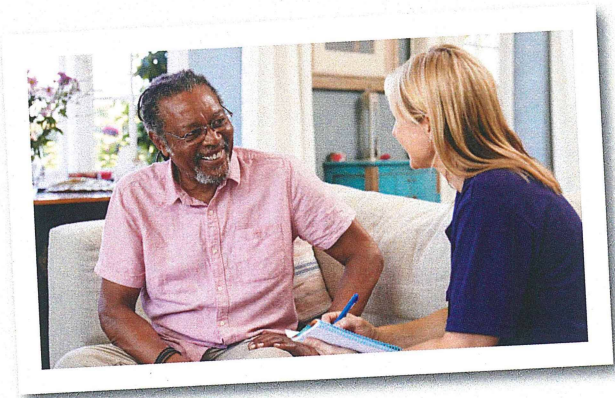
Visit www.cqc.org.uk for more information

Contact

ASC Community Reablement and Outreach
Isle of Wight Council
Civic Centre Building
Barrack Block
Broadway
Sandown
PO36 9EA

(01983) 823830

If you have difficulty in understanding this document please contact us on (01983) 823830 and we will do our best to help you.



What if I need longer term support?

Sometimes an individual may require support for a longer period than Reablement can provide. During a care review, if it appears you may require longer term support, a conversation will be held with you and any person you wish to be present, to discuss moving forward and referring on for long term support. It is at that point that any ongoing support by the service becomes chargeable.

You will be contacted by the financial assessment and charging team to arrange a visit to review your finances and determine what, if any, contribution you will be required to make for your care.

A Social Worker will also visit you to complete a Your Needs Assessment. The Reablement service will however continue to support you until such time an external provider is found to take over so you will never be left without support.

Adult Social Care

Community Reablement and Outreach



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Supporting you in your return to health

Welcome to Reablement

This leaflet is to provide you with some information about what Reablement is, how we aim to work with you, through to supporting your return home to remain living independently.

Reablement is a free, high quality and short-term service provided by the Isle of Wight Council for a period of up to six consecutive weeks. The service vision is to support people to regain or maximise their ability to live independently following a period of illness or injury.

What will you receive?

Reablement can support you with such daily living tasks as personal care (e.g. washing/dressing), meal preparation or adopting a medication regime.

Reablement is a **do with you service** rather than a **do for you service**. This means that Reablement will work **with you** to return to your previous ability to undertake these tasks yourself.

What to expect next?

A referral will have been submitted to our service for you to help you to return home. We will give a clear date for when you will go home, and we will give you an idea of the times we will visit you at home. Unfortunately, call times cannot be guaranteed, however Reablement will ensure that all call times are suitable to your needs. Call times may change but we will always endeavour to keep you informed of any changes we make.



When will Reablement commence?

Your referral has been passed to our Reablement office to look for availability to provide your package of support. If no availability is found your referral will also then be passed to the wider market place (other providers of care in your own home), in an effort to facilitate your discharge as quickly as possible.

Once availability has been found, the ward will inform you and your friends and/or family (whichever you nominate) what the start date of your support will be and then begin discharge arrangements.

What happens when you return home?

Shortly after your arrival home, you will be contacted by your case co-ordinator (known as a Reablement leader) to arrange a suitable time to visit you. During this initial visit, the Reablement leader will work with you to complete an assessment to identify your individual Reablement goals.

The assessment will also identify various Health and Safety aspects that are required by law. These are referred to as risk assessments and include things like how you get around (moving and handling) and your home environment. For example, if you have a pet, we will record this in your plan, so all members of our team are aware.

Once you and your Reablement leader have identified the areas where you require support, a goal plan will be written with you. You will be asked to sign the goal plan giving your consent to the care and treatment as well as confirming your involvement in the construction of the plan.

The support workers who will visit you daily will refer to the goal plan.

Finance

The assessment process also includes letters to sign in relation to finances.

These are to make you aware that although the initial part of support (up to six consecutive weeks) is free of charge, if you have a long-term need identified you will be assessed and charged, whether the six-week period is completed or not.

It is also worth noting that the six-week period is not an entitlement as if you have completed all of your goals it would be our intention and interest to close the package of support to you so we can continue to support more people wanting to be discharged from hospital, just as we did with you.