The Enablement Framework is designed to assist your clinical reasoning when faced with complex situations within acute/general hospital based practice.

It is intended to support risk enablement and discharge planning.

The Enablement Framework might be something you use for self-reflection, in supervision, or as part of a wider discussion with the multi-disciplinary team. The most important thing to remember is that it can be used for any situation where the issue of *risk* arises; from ward based behaviours such as walking, to social tasks such as making a cup of tea, to decisions about community life and plans for discharge home.

The Enablement Framework includes prompts to help guide discussion/ reflection and a snapshot of an example tool. More detail & additional examples can be found within the Department of Health document *Nothing Ventured, Nothing Gained: Risk Guidance for people with dementia* (2010).

NHS
Greater Glasgow and Clyde

The Enablement Framework: a Clinical Reasoning Tool to Support Risk Enablement & Discharge Planning within Allied Health Professional Practice

Step 1:
Understanding the Person's Needs

Find out what is **important** to the person.

Move on from identifying skills & needs to capturing the **value** of the behaviour/activity/task.

Can they tell you?
Communication:
- Has a "Getting to Know Me" or similar document already been completed?
- Consider referral to speech & language therapy.

Capacity & consent:
- Does the person have capacity?
- Are legal frameworks in place?
- Consider family/friend/carer involvement.

Prompts:
- Begin with the assumption that the person is going home.
- What is important to the person?
- What are their goals?
- What do they want to do?
- What is their "norm"?
- What is the "crisis"?
- Find their life story.
- Is the behaviour an expression of need eg walking due to pain?
- Clarify carer expectations.
- Are the right people engaged in the process?

Step 2:
Identifying Key Risks & Impacts

Begin to examine potential risks while considering how much a particular activity may contribute to or take away from a person's quality of life.

Ensure a balanced approach to risk is taken by using tools such as a **HEAT** map or personal risk portfolio.

Prompts:
- What is the likelihood of harm?
- What is the potential severity of the danger?
- What are the benefits of taking the risk?
- What are the risks of not facilitating the behaviour/task/activity?
- What are your own fears?
- What are others' fears?
- Does the behaviour/task/activity promote well being or meet a psychological need?
- What are the carer's needs?
- What are the "dealbreakers" for discharge eg mobility, continence?
- Are the right people engaged in the process?

Contribution to quality of life

	High		
High	Maximise safety enhancement and risk management protect the individual and manage the activity	Carefully balance safety enhancement and activity management to protect the person	Minimal safety enhancement necessary – carry out with normal levels of safety enhancement
Medium	Substitute can the same personal benefit be delivered in a different way seek different activities?	Carefully balance safety enhancement and activity management to protect the person	Minimal safety enhancement necessary – carry out with normal levels of safety enhancement
Low	Do not allow level of risk is not related to the benefit/value to the person find alternatives	Challenge real value of the activity to the individual seek alternatives that are more attractive and lower risk	Allow the activity or seek alternatives that will provide a better relationship with their needs
	High	Medium	Low

Risk of harm or quality of life to the individual

Step 3:
Risk Enablement, Management & Planning

Reach agreement between the person & all key people involved to create a plan which reflects the best "fit" between the behaviours/tasks/activities, the risks and any steps to be taken to minimise risks.

Remember: not all risks can be managed or mitigated but some can be predicted.

Prompts:
- How can we promote independence?
- How can we maintain skills?
- How can we prevent deterioration?
- Is this the least restrictive option?
- How can risks that naturally relate to the behaviour/activity/task be made acceptable?
- (How) are the risks related to environmental factors?
- How can we balance this person's rights against that of other patients?
- Can we promote the person's safety without interfering with their engagement in the behaviour/activity/task?
- Are there ways to change the way the person takes part in the behaviour/activity/task whilst still respecting their choices & promoting quality of life?
- Can agreement be reached?
- Is their multi-disciplinary team support for all plans?
- Are the right people engaged in the process?

Step 4:
Review

Understand that risk can & will change over time & needs to be revisited regularly.