How to Create Pre-Care Assessment Questions: Examples and Guidance

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Use these example questions and care domains as a starting point when creating your organisation’s Pre-Care Assessment.

Takes 15 minutes

For: Managers

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Introduction

The **Pre-Care Assessment** can be used to help identify which Care Review domains may be relevant to an individual based on their current needs, preferences, risks and goals.

There is no single set of questions that will suit every care service. The questions your organisation uses should reflect the people you support, the type of care you provide and the Care Review domains you have created.

This guide provides **example questions and domain mappings** that you can use as a starting point when building your own Pre-Care Assessment. Examples are provided for nursing homes, domiciliary care and supported living services.

These examples are intended as guidance rather than a required assessment template. You can adapt, remove or add questions to suit your organisation.

In this guide you'll find:

- Guidance for writing effective Pre-Care Assessment questions
- Example questions for nursing homes
- Example questions for domiciliary care services
- Example questions for supported living services
- Suggested responses and domain mapping
- Examples of information to explore once a domain has been identified

How should Pre-Care Assessment questions work?

Pre-Care Assessment questions should help staff identify which areas of a person's care may need to be explored during their Care Review.

Think of these as **routing questions**. They are designed to identify a possible support need, preference, goal or risk and suggest the relevant Care Review domain.

For example, you could ask:

Does the person need support to move, transfer, change position or use mobility equipment?

If the answer indicates that support is required, this could suggest a **Mobility and Transfers** domain for the Care Review.

> **Remember:** A Pre-Care Assessment question helps identify an area that may need reviewing. It should not replace any detailed assessment, risk assessment or escalation process required by your organisation.

Writing your questions

Questions should be clear enough for staff and the person receiving care to understand what is being considered.

Where possible, focus questions on the person's current support needs, preferences, goals or risks rather than simply asking whether they have a particular diagnosis or condition.

For example:

Instead of: Does the person have mobility problems?

Consider: Does the person need support to move around, change position, transfer or use mobility equipment?

This gives staff more context about what the question is trying to identify and can make it easier to map the response to an appropriate Care Review domain.

Suggested response options

Your organisation can decide which responses are appropriate for its assessment.

A useful starting point could include:

- **Yes** – the area may be relevant and the associated domain should be considered.
- **No** – the question has not identified a current requirement for that domain.
- **Unsure** – further information or assessment may be required.
- **Not applicable** – the question does not apply to the person or service.

> **Important:** A response during a new assessment should not automatically be used to remove an existing Care Review domain without considering whether the person's existing support needs, risks and goals still apply.

Example questions for nursing homes

The following examples are designed around a nursing home environment, where support may be available throughout the day and night and care may include nursing needs or instructions from healthcare professionals.

You can use these examples as a starting point and map each response to the equivalent Care Review domain used by your organisation.

- **Communication:** Has the person's preferred way of communicating changed, or do they need support to understand information or express choices?
- **Hearing:** Does the person need support with hearing or hearing aids?
- **Sight:** Does the person need support with sight, glasses or visual aids?
- **Cognition and Memory:** Do memory, orientation or changes in thinking affect the support the person needs?
- **Decision-Making and Capacity:** Is there a particular decision for which the person needs support, or a concern about their ability to make that decision?
- **Consent and Legal Authority:** Have consent arrangements, representatives or authority to make decisions changed or become relevant to care?
- **Nutrition and Eating:** Does the person need support to eat, choose meals or maintain their nutritional intake or weight?
- **Hydration:** Does the person need support to drink enough or follow an agreed fluid plan?
- **Swallowing and Mealtime Safety:** Is there a concern about chewing or swallowing, or a professional instruction about food, drink or mealtime support?
- **Oral Care:** Does the person need support with mouth care, dentures or accessing dental care?
- **Continence:** Does the person need support with toileting, continence products, a catheter or a stoma?
- **Personal Care:** Does the person need support with washing, bathing, dressing, grooming or their preferred appearance?
- **Mobility and Transfers:** Does the person need support to move, transfer, change position or use mobility equipment?
- **Falls Prevention:** Has the person fallen, nearly fallen or become less steady, or has their falls support changed?
- **Skin Integrity and Wound Care:** Is there skin damage, a wound, pressure damage or an agreed need to protect the person's skin?
- **Medicines:** Does the person need support with medicines, or have their administration, monitoring or medicine preferences changed?
- **Pain and Symptom Management:** Is there pain or another symptom that staff need to recognise, monitor or help manage?

- **Health Conditions and Nursing Care:** Is there a health condition, nursing intervention, device or professional instruction that affects daily care?
- **Sleep and Night-Time Care:** Does the person need support with sleep, rest, overnight checks or a preferred night-time routine?
- **Emotional Wellbeing:** Has the person's mood changed, or do they need support with anxiety, loneliness or emotional wellbeing?
- **Distress and Behaviour Support:** Does the person experience distress or behaviour for which staff need an agreed, individual approach?
- **Family, Friends and Relationships:** Does the person need support to maintain relationships, receive visitors or stay in contact with people important to them?
- **Meaningful Activity, Identity and Beliefs:** Does the person need support with activities, interests, faith, culture or community involvement?
- **Privacy and Intimate Relationships:** Does the person need support with privacy, intimacy or sexual wellbeing?
- **Money, Possessions and Personal Space:** Does the person need support to manage money, personal belongings or decisions about their room?
- **Safeguarding and Personal Safety:** Is there a safeguarding concern or an agreed action needed to support the person's personal safety?
- **Future Care and End-of-Life Wishes:** Are there wishes or decisions about serious illness, future care or end of life that the person wants recorded or reviewed?

Example questions for domiciliary care

For domiciliary care, questions can focus more closely on what happens within the person's own home, what support is provided during visits and whether the existing visit arrangements continue to meet their needs.

- **Communication:** Has the person's preferred way of communicating changed, or do care workers need to adjust how they explain information or support choices?
- **Hearing:** Does the person need support with hearing or hearing aids during visits?
- **Sight:** Does the person need support with sight, glasses or visual aids during visits?
- **Cognition and Memory:** Do memory, orientation or changes in thinking affect how the person manages between visits or receives care?

- **Decision-Making and Capacity:** Is there a particular decision for which the person needs support, or a concern about their ability to make that decision?
- **Consent and Legal Authority:** Have consent arrangements, representatives or authority to make decisions changed or become relevant to the service?
- **Meals and Nutrition:** Does the person need support to plan, prepare or eat meals, shop for food, or monitor food intake?
- **Hydration:** Does the person need help to access drinks or maintain hydration during and between visits?
- **Swallowing and Mealtime Safety:** Is there a concern about chewing or swallowing, or a professional instruction that affects the support given with food or drink?
- **Oral Care:** Does the person need support with mouth care, dentures or arranging dental care?
- **Continence:** Does the person need support with toileting, continence products, a catheter or a stoma during visits?
- **Personal Care:** Does the person need support with washing, bathing, dressing, grooming or their preferred appearance?
- **Mobility and Transfers:** Does the person need help to move, transfer or use equipment safely during visits?
- **Falls Prevention:** Has the person fallen, nearly fallen or become less steady, particularly when alone or moving around their home?
- **Skin Integrity:** Is there skin damage or a need for agreed support with positioning, skin checks or reporting concerns?
- **Medicines Support:** Does the person need help with medicines, such as prompts, assistance or administration agreed as part of the service?
- **Health and Symptom Support:** Is there pain, a health condition or a change in health that care workers need to observe, respond to or report?
- **Agreed Health-Related Tasks:** Is a specific health-related task part of the agreed service, with instructions, training and oversight in place?
- **Daily Routine and Night-Time Support:** Does the person need support with getting up, going to bed, sleep or overnight care?
- **Emotional Wellbeing:** Has the person's mood changed, or do they need support with anxiety, loneliness or emotional wellbeing?
- **Distress and Behaviour Support:** Does the person experience distress for which visiting staff need an agreed, individual approach?

- **Relationships and Community Life:** Does the person need support to maintain relationships, attend activities or take part in their community?
- **Domestic Tasks and Daily Living:** Does the person need support with shopping, laundry, light household tasks or other agreed daily living activities?
- **Home Environment and Access:** Is there a change to access, keys, equipment, utilities or the home environment that affects how visits are delivered safely?
- **Appointments, Going Out and Transport:** Does the person need help to arrange or attend appointments, go out or use transport?
- **Money and Possessions:** Does the person need support with money, shopping payments or personal possessions as part of the agreed service?
- **Visit Schedule and Continuity of Care:** Have visit times, duration, frequency, tasks or arrangements for support between visits stopped meeting the person's needs?
- **Shared Care and Contacts:** Have the roles of family, unpaid carers, other providers or health professionals changed, leaving any gap or overlap in support?
- **Safeguarding and Personal Safety:** Is there a safeguarding concern, or a concern about the person's safety when care workers are away?
- **Future Care and End-of-Life Wishes:** Are there wishes or decisions about serious illness, future care or end of life that the person wants recorded or reviewed?

Example questions for supported living

For supported living, questions can place greater emphasis on the person's choice, control, independence, home life and participation within their community.

Questions should be discussed with the person in a way that works for them. This could include conversation, pictures, Easy Read information or communication aids.

- **Communication:** How does the person prefer to communicate? Do staff need to change how they help them understand information or express choices?
- **Hearing:** Does the person need support with hearing or hearing aids?
- **Sight:** Does the person need support with sight or visual aids?
- **Sensory Needs:** Do noise, lighting, touch, crowds or other sensory experiences affect the person's comfort or daily routine?
- **Choice and Decision-Making:** Does the person need support to make everyday choices, such as what to do, eat, wear or who to spend time with?

- **Capacity and Best Interests:** Is there a specific decision for which the person may need a capacity assessment or an agreed decision-making process?
- **Consent and Legal Authority:** Are there consent arrangements, representatives or legal authority details that staff need to follow?
- **Independence and Skill Development:** Has the person said they want to learn a skill or do more for themselves? Does staff support need to change to help them achieve this?
- **Food, Cooking and Nutrition:** Does the person need support to plan meals, shop, cook or eat?
- **Hydration:** Does the person need support to get drinks or maintain their hydration?
- **Swallowing and Mealtime Safety:** Is there a concern about chewing or swallowing, or a professional instruction about food, drink or mealtime support?
- **Oral Care:** Does the person need support with brushing their teeth, dentures or visiting a dentist?
- **Personal Care and Continence:** Does the person need support with washing, dressing, toileting, grooming or their preferred appearance?
- **Mobility and Falls Prevention:** Does the person need support to move around, transfer or use equipment at home or in the community?
- **Medicines Support:** Does the person need help to take or manage medicines, or has the agreed level of help changed?
- **Physical Health Support:** Is there a health condition, pain, symptom or health-related task that staff need to recognise, support or report?
- **Health Appointments and Reasonable Adjustments:** Does the person need help to arrange or attend health checks, screening, vaccinations or other health appointments?
- **Health Communication and Reasonable Adjustments:** Does the person need an accessible health profile, hospital passport or agreed adjustments when using health services?
- **Emotional and Mental Wellbeing:** Has the person's mood, mental health or emotional wellbeing changed? Do they want different support?
- **Distress and Positive Behaviour Support:** Are there situations in which the person becomes distressed, and do staff need an agreed approach to understand and support them?
- **Sleep and Overnight Support:** Does the person need support with sleep, their preferred routine or overnight arrangements?
- **Home and Daily Living Skills:** Does the person need support to look after their home, do laundry, clean, manage rubbish or use household equipment?

- **Housing and Tenancy Support:** Does the person want support with their tenancy, housing choices, repairs or communicating with their landlord?
- **Home Life, Privacy and Shared Living:** Does the person want changes to how they use private or shared space, or to arrangements with the people they live with?
- **Money and Possessions:** Does the person need support with money, benefits, budgeting, purchases or keeping possessions safe?
- **Relationships and Social Life:** Does the person need support to see family or friends, make new friendships or maintain important relationships?
- **Intimate Relationships and Sexual Wellbeing:** Does the person want support with dating, intimacy, sexuality or understanding healthy relationships?
- **Activities, Identity, Learning and Work:** Does the person want support to pursue hobbies, faith, culture, volunteering, education or paid work?
- **Travel and Community Access:** Does the person need support to travel, use transport or access places and activities in the community?
- **Support Arrangements:** Do support hours, staffing arrangements or the balance between shared and individual support need to change to meet the person's goals?
- **Safeguarding and Personal Safety:** Is there a concern about abuse, exploitation, discrimination or safety that requires an agreed response?
- **Future Planning and Wishes:** Are there wishes about future housing, changes in health, serious illness or end-of-life care that the person wants to discuss or record?

What should happen when a domain is identified?

Once a question identifies a relevant domain, the Care Review should explore the person's individual circumstances in more detail.

Useful areas to consider include:

- What matters to the person in this area
- What they can do independently
- What support they want or need
- What has changed
- Whether their current support is working
- Anything they would like staff to do differently

- Any relevant risks, equipment or professional instructions
- The person's agreed goals or outcomes
- What staff should do to support those outcomes

> **Person-centred assessments:** Wherever possible, complete the assessment with the person using their preferred way of communicating. Their needs, preferences and goals should help determine both which domains are relevant and what is recorded within them.

Adapting the examples for your organisation

These examples are intended to provide a starting point. You do not need to use every question or use the wording exactly as shown.

When creating your own Pre-Care Assessment, consider:

- The type of care and support your organisation provides
- The people who use your service
- The Care Review domains available within your organisation
- Whether each question clearly identifies why a domain may be relevant
- Whether the wording is easy for staff and the people you support to understand
- Whether different questions are needed for different services or care settings

You can then map responses to the relevant Care Review domains when building your Pre-Care Assessment in Care Control.

> **These are examples only.** Your organisation remains responsible for deciding which questions, domains, assessments and processes are appropriate for the people you support and the services you provide.

Top tip

Keep your Pre-Care Assessment focused on identifying the areas that matter to the individual. A question should help determine whether a care domain may be relevant, while the Care Review itself should contain the detailed assessment, support requirements, goals and agreed actions.

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