# My FIRST Plan Preparation

It's time to start thinking about developing your first plan.

To have as much influence over what goes into your plan as you want, you should think about some things before we meet.

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| Below are some questions to help you think about your plan. There is space for you to make some notes after each question. You don’t have to fill this out. You could just have a chat with someone in your family, with me or someone else who knows you well. Either way, we will talk about these things to develop your first plan when we meet.Your name |
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### Reflecting on the services you've received

Since you came home from hospital, you've had services from

* [fill in services you are currently receiving]

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| * What has been most helpful to you?
* What benefits have you had from these services?
* Do you want to continue with any of these services, and why? – what do you want to achieve?
* Are there any problems with these services? Is there anything stopping you getting the most from the service?
* Are there any services you don't think you need any more?
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| Your notes: |

### Reflecting on progress and strengths

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| Is there anything you've learned about yourself since your injury? Think about when you might have surprised yourself with what you achieved, or obstacles you overcame, or difficulties you experienced that you weren't expecting. |
| Your notes: |
| Is there anything you've learned about the people around you – your family, your friends, your community? Think about what support you get, what positive interactions you've had, or when connections and experiences have surprised you. |
| Your notes: |

### Setting priorities

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| What's most important to you at the moment?  |
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| Given all you have going on at the moment, what do you want to work on most? |
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| Where do you see yourself in 6 months? |
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| Are there any goals you'd like to work on in the next 6 to 12 months?Think especially around these five areas:1. Independence (independence from family; independence from support workers)
2. Work, work trials, work-related opportunities/activities
3. Health
4. Social life
5. Quality of Life – recreation/leisure; what motivates you to get up in the morning
 |
| Your notes: |
| A lot of your time recently has focused on therapies and rehabilitation. Is there anything you'd like to do/achieve that is just about fun? Or about achieving a better quality of life? |
| Your notes: |
| Are you ready to look at volunteering or paid work? |
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### Maximising independence

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| What have I been doing for you that you are ready to do for yourself (with help from your support workers if relevant)? |
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| Is there anything you need to know or need to do to help you become more independent – from me / from your family / from your support services? |
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### Questions

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| You may have some questions you'd like to ask at your planning meeting. Note any questions you'd like to discuss when you meet with me (your case manager) to develop your plan. |
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|   | Lifetime Care GPO Box 4052, Sydney, NSW 2001 **General Phone Enquiries: 1300 738 586**Email: care-requests@icare.nsw.gov.auwww.icare.nsw.gov.au  |   | Workers Care GPO Box 4052, Sydney, NSW 2001 **General Phone Enquiries: 1300 738 586**Email: care-requests@icare.nsw.gov.auwww.icare.nsw.gov.au  |