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**SNAP**

**Implementation Resources Pack**

Within the SNAP Online Training Unit 2 we introduce you to some SNAP implementation resources that could help you with implementation:

1. Staff Survey on Current Practice (prior to SNAP Implementation)
2. SNAP Implementation Charter
3. SNAP Implementation Plan
4. SNAP Delivery Plan - guidance
5. SNAP Delivery Plan - template
6. SNAP Pilot Monitoring Template
7. SNAP – Common Questions
8. Staff Survey on Implementing SNAP
9. SNAP Final Checklist (before wider implementation)

These resources are provided for you within this pack to use in your SNAP Implementation, alongside your learning from SNAP Online Training Unit 2.

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**Staff Survey on Current Practice (prior to SNAP Implementation)**

This short five-question survey is designed to help us to clearly identify how everyone currently becomes aware of, and addresses, patients’ support needs.

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| 1. **What is your role?**
 | **Please tick** |
| Clinical Nurse Specialist (CNS) |  |
| Registered Nurse (RN) – other than CNS |  |
| Social Worker |  |
| Allied Health Practitioner (AHP) |  |
| Health Care Assistant (HCA) |  |
| Medical Practitioner |  |
| Other |  |

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| 1. **Do you identify patients’ support needs as part of your role?**
 | **Please tick** |
| Yes |  |
| No |  |
| Sometimes |  |

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| **If you answered yes or sometimes…** |
| 1. **How do you tend to do this?**
 |
| 1. **What sorts of support needs to you identify?**
 |
| 1. **How do you decide what action to take to respond to patients’ support needs?**
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**SNAP Implementation Charter**

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| **Aims statement: what we aim to accomplish** |
| Purpose of implementing SNAP (e.g., response to organisation policies and procedures) |  |
| Why we want to implement SNAP (e.g., reasons/the gap we will address) |  |
| What we aim to achieve (e.g., goals for staff, for the organisation, for wider stakeholders) |  |
| **What we require to meet our aims** |
| Key resources (e.g., time for training sessions, meetings, IT support) |  |
| Who we need to involve/ consult throughout (i.e., who will be impacted by implementing SNAP) |  |
| Possible constraints that may impact on successful implementation of SNAP and ways to overcome these (e.g., staff engagement, time to complete training) |  |
| **Implementation Team** |
| **Name** | **Role** | **Signed & dated** |
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**SNAP Implementation Plan**

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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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**SNAP Delivery Plan - guidance**

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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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**SNAP Delivery Plan - template**

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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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**SNAP Pilot Monitoring Template**

This template is designed to help us get your feedback on the SNAP pilot.

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| **Name of team/site:** |  |
| **Pilot start date:** |  |
| **Pilot end date:** |  |
| **Today’s date:** |  |
| **Reviewing your use of SNAP**As part of the pilot of SNAP, review how you used it within your practice. This will provide a basis for the evaluation of the pilot and for future planning on how SNAP can be incorporated into routine practice within your team, site or more widely. |
| **Area for review** | **Your feedback** |
| How many SNAP Tools were completed by patients during the pilot? (SNAP stages 1-2) |  |
| Have there been any situations when the SNAP Tool was introduced but the patient did not want to complete it? (SNAP stages 1-2) |  |
| How many SNAP needs-led conversations were held during the pilot? (SNAP Stage 3) |  |
| What sorts of actions were taken to address the individual support needs of patients following the shared response? (SNAP Stage 4) |  |
| Have there been any identified patient support needs that couldn’t be met? (SNAP Stage 4) |  |
| How many shared reviews were held with patients or planned during the pilot? (SNAP Stage 5) |  |
| **Your SNAP case exemplar**We encourage you write up an example of when you have used SNAP and you feel it has been beneficial for a patient. This will be helpful for discussions with colleagues and training others.  |
| Stage 1: Introduction - How and when did you introduce the SNAP Tool to the patient? |  |
| Stage 2: Patient considers needs -How did you enable the patient to consider and prioritise their support needs? |  |
| Stage 3: Needs-led conversation -Describe the conversation you had with the patient. What domain(s) did the patient prioritise to talk about? What were their individual support needs in the domain(s) prioritised? |  |
| Stage 4: Shared response -Describe how you came up with a shared response with the patient. What actions did you identify together to address their support need(s)? |  |
| Stage 5: Shared review -Did you complete or make plans for a shared review? |  |
| Describe what you feel were the benefits of using SNAP in this example |  |
| **Evaluating your use of SNAP**As part of the pilot of SNAP, we recommend that you think about those things that went well, any issues you encountered, and what you feel may help to overcome these issues before wider implementation within your site. |
| What has gone well? |  |
| What has been a challenge? | How did you overcome this/these challenges? Or what would help overcome this/them? |
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**SNAP – Common Questions**

Here are some common questions and concerns clinicians often raise during SNAP training, and our answers – these will be useful for you if you need to respond to your colleagues.

Remember that you can also see a short film clip of two clinicians who use SNAP in their daily practice sharing their thoughts on some of these questions on the SNAP website training page: <https://thesnap.org.uk/use-snap/training/>

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| **“I already tell people about the services that are available/give them an information pack/phone number for the service”** |
| * You do need to be aware of what is available for patients, but remember that pre-empting what they might need has several limitations
* A patient’s support needs may differ from what you believe them to be
* The patient will know what is available within their own resources
* The patient may already have some ideas about what might help
* This would be a clinician-led approach, rather than a patient-led one
 |
| **“Some people don’t like forms”** |
| * The way SNAP is first introduced to the patient is key to helping them understand that the “How Are You?” Booklet is not a form
* Think about the words you will use when you first mention the booklet to a patient (your ‘introductory spiel’)
* For SNAP to be successful it’s key that it is seen by both you and the patient to be an opportunity to discuss and identify the support they need, rather than just a form
* If you refer to the SNAP Tool as ‘a form’, or “questionnaire”, the patient is more likely to view it in this way – just call it the “How Are You?” Booklet
 |
| **“A change in my practice isn’t necessary”** |
| * SNAP does involve a new way of working and you may be wondering why this is necessary. Although you may already discuss many of the SNAP Tool domains with patients as part of your existing practice, how and when these domains are discussed is often different when using SNAP
* Using the “How are you?” Booklet means that the patient has an opportunity to consider all potential areas of support need
* Your existing approach may help to identify some of the patient’s support needs, however, you may have identified some limitations, for example, it may not be obvious to the patient that you are identifying and addressing their support needs
* SNAP legitimises the patient’s individual concerns and makes identifying and addressing them more comprehensive and visible
 |
| **“I need to establish a relationship with the patient before I introduce SNAP to them”** |
| * You may feel it is inappropriate to discuss potentially sensitive subjects with patients at an early stage. Whilst there is a need for sensitivity around what they want to discuss and when they want to discuss it, it’s important that the patient is able to determine when the right time is.
* Clinicians are very familiar with using their interpersonal skills to establish rapport with patients and discussing sensitive issues from the first point of contact – these will come into play when using SNAP
* We want to avoid making a judgement about when the patient is ready to discuss something
* SNAP ensures that patients have the opportunity to identify support needs that are important to them at the earliest opportunity
* By letting patients see the domains of support need in the SNAP Tool at an early stage it helps legitimise their concerns by highlighting that others in their circumstances have needed support in these areas – this doesn’t ‘force’ patient to talk about these issues before they are ready
* Patients who have used the SNAP Tool have commented that these are issues they have been thinking about or that they may need to think about in the future
 |
| **“What happens if the patient doesn’t want to complete the *‘How Are You?’* Booklet?”** |
| * The way in which the ‘How Are You?’ Booklet (the SNAP Tool) is introduced to the patient is likely to impact on how they view it
* There may be personal barriers to them looking at the booklet, such as language, literacy or visual problems that you can address
* It’s important the patient perceives the SNAP Tool as an ‘opportunity’ to consider their support needs as opposed to an ‘obligation’ to fill in a ‘form’
 |
| **“It’s too soon/too late to introduce SNAP”** |
| * You may feel that it is ‘too soon’ to introduce the ‘How Are You?’ Booklet (the SNAP Tool) at a first visit or appointment. On the other hand, you may feel it is ‘too late’ e.g., if the patient is approaching end of life.
* Patients’ needs change over time, so SNAP is useful throughout the patient’s illness trajectory
* As services vary widely with regards to when they first come into contact with patients, it is worth giving some thought as to when SNAP will be introduced
* Patients may well have support needs at an early stage. Likewise, patients first seen within in the last few weeks of life may have a number of support needs that could be addressed
 |
| **“What if the patient says they have no needs”** |
| * If the patient does not identify any support needs, you should still encourage them to record this in the ‘How Are You?’ Booklet (the SNAP Tool)
* It is still an opportunity for you to say that you want to support them and invite them to read through the questions
* Whilst they may feel they have no support needs now, you could ask them to keep the booklet to review in the future
* As support needs develop/ change over time, it is also worth ensuring that they know how they can raise any needs with you or the service
 |
| **“It will take too long to go through all of the SNAP Tool domains”** |
| * It is not necessary (or appropriate) for you to go through all of the domains
* Think of it as a screening tool that provides patients with the opportunity to consider their support needs
* Once their support needs have been ‘gathered’ they can prioritise those which are most important to them, at that moment in time
* The tool ensures that the patient’s consideration of their needs is comprehensive, and the conversation that follows is contained as it focuses on the patient’s prioritised needs only
 |
| **“SNAP will take too much time”** |
| * Clinicians tell us that SNAP saves time by focusing conversations on what matters most to patients
 |
| **“It could open up a ‘can of worms’”** |
| * Patients may identify a number of areas in which they feel they need more support, and this may lead to some clinicians feeling uncomfortable if they feel unable to respond to all of these concerns
* However, it is important to note that patients have these needs/expectations regardless of whether SNAP is used or not.
* SNAP is helpful in these situations as it encourages the patient to focus on (prioritise) support needs which are most important to them at that moment in time
* SNAP helps them to think about sources of support they may already have access to (i.e., facilitates ‘self-help’)
* SNAP facilitates ‘expectation management’ by having an open discussion about support needs which cannot be readily met
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**Staff Survey on Implementing SNAP**

This short four-section survey is designed to help us get feedback on implementing SNAP

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| --- | --- |
| 1. **Today’s date:**
 |  |

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| --- | --- |
| 1. **What is your role?**
 | **Please tick** |
| Clinical Nurse Specialist (CNS) |  |
| Registered Nurse (RN) – other than CNS |  |
| Social Worker |  |
| Allied Health Practitioner (AHP) |  |
| Health Care Assistant (HCA) |  |
| Medical Practitioner |  |
| Other |  |

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| 1. **Feedback on using SNAP**

We’d like your feedback about how you have used SNAP within your practice – this will help us evaluate how SNAP implementation is going |
| **Area for review** | **Your feedback** |
| How many SNAP Tools were completed by patients in the last month? (SNAP stages 1-2) |  |
| Have there been any situations when the SNAP Tool was introduced but the patient did not want to complete it? (SNAP stages 1-2) |  |
| How many SNAP needs-led conversations were held during the last month? (SNAP Stage 3) |  |
| What sorts of actions were taken to address the individual support needs of patients following the shared response? (SNAP Stage 4) |  |
| Have there been any identified patient support needs that couldn’t be met? (SNAP Stage 4) |  |
| How many shared reviews were held with patients or planned during the last month? (SNAP Stage 5) |  |

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| 1. **Evaluating your use of SNAP**

We’d like your feedback on those things that have gone well, any issues you have encountered, and what you feel may help to overcome these issues in the future |
| What has gone well? |  |
| What has been a challenge? | How did you overcome this/these challenges? Or what would help overcome this/them? |
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**Final Checklist**

Before moving to wider implementation of SNAP, it’s useful to reflect on a few points to determine if you are ready – think of it as a “final checklist”

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| **FINAL CHECKLIST** |
| **Date completed:**  |
| **Checklist: to be completed before****wider implementation** | **Y/N** | **Comments/****planned actions** |
| Support obtained from senior management to move to wider implementation |  |  |
| All clinicians who will be using SNAP in practice have completed their training |  |  |
| SNAP site champions identified for each team/site implementing SNAP (2-3 depending on team/site size) |  |  |
| Pilot of SNAP has been completed at each site and identified challenges addressed |  |  |
| All clinicians, senior managers and admin staff notified start date of wider SNAP implementation  |  |  |
| All clinicians delivering SNAP have a copy of the SNAP Delivery Plan |  |  |
| Plans for sustaining SNAP in place(e.g., staff meeting/MDT agenda item, aide memoires, new staff induction item)  |  |  |