

Preparing for your social care conversation: a guide for autistic adults

Introduction

This guide will help you prepare for a conversation with a worker from Adult Social Services.

You can choose how you use this guide. For example, you could:

- Read it to get an understanding of what the worker will talk to you about.
- Make notes in some or all of the spaces provided, to help you plan what you will say to the worker.
- Make notes in some or all of the diary templates provided, to help you think about how things are for you over the course of a week.
- Make notes and then send the document back to the worker or give it to them when you meet them.

This is your guide and you do not have to use it, or share it with the worker, unless you want to.

This guide covers the areas that the worker will talk to you about. It gives some suggestions about what to think about, to help you prepare for the conversation.

This guide is separated into the following sections:

Background information

Shopping for food, preparing meals, eating and drinking

Getting yourself washed, or having a bath or shower

Using the toilet

Getting yourself dressed and wearing suitable clothes

Being safe in your home

Keeping your home clean, tidy and in a good state of repair

Having relationships with family, friends and others

Taking part in work, training, education or volunteering

Using facilities in your local community

If you have children, looking after them

Background information

Background information

The worker will want to get to know you, and to understand what is important to you. You may want to tell the worker some information about yourself, to help them do this.

Here are some things you might consider

- Where do you live, and who do you live with?
- Who are the important people in your life, such as family members or friends?
- How do you spend your time? For example, do you have any hobbies or regular activities that you do?
- Do you have any dreams or ambitions for the future? If so, what are they?
- Do you have any physical or mental health needs? If so, are you receiving any treatment or support, or taking medication?
- What (if anything) would you like to happen as a result of the conversation with the worker?

Use this space to make notes if you wish

Shopping for food, preparing meals, eating and drinking

Shopping for food, preparing meals, eating and drinking

The worker will ask you about shopping for food, preparing meals, and eating and drinking. They want to know whether you need help from other people to eat and drink adequately.

Think about what you can currently do, and anything that you would like to be able to do in the future. Also think about anything that you find difficult, and whether you have found a way to manage. If you can do things on your own, does it take you longer than it would take other people, or cause you anxiety or distress?

Here are some things you might consider

- What do you eat? Are you happy with your diet?
- Are you able to get food shopping, either by going to a shop or ordering online?
- Does somebody remind you to eat and drink, or prompt you when preparing food?
- Do you get distracted when you are cooking? If so, what usually happens?
- Do you have routines that you follow when you are shopping for food, preparing food or eating?
- Do you have any sensory differences, such as sensitivity to the taste, smell, texture or colour of some foods?
- Do you want to learn any new skills in this area, such as cooking for yourself or learning new recipes?
- Is there anything else that you think may be relevant to shopping for food, preparing meals, eating and drinking?

On the next page, there is a space for you to make notes, or to complete a diary for a few days if you wish to do so.

Shopping for food, preparing meals, eating and drinking

Use this space to make notes if you wish

Use this diary template to make notes if you wish

For example, you could record what you ate, who prepared it, and anything that went well or that you had difficulties with.

Day/time	Morning	Afternoon	Evening	Night
Monday				
Tuesday				
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Getting yourself washed, or having a bath or shower

Getting yourself washed, or having a bath or shower

The worker will ask you about getting yourself washed and having a bath or shower. They want to know whether you need help from other people to keep yourself clean and manage your personal hygiene.

Think about what you can currently do, and anything that you would like to be able to do in the future. Also think about anything that you find difficult, and whether you have found a way to manage. If you can do things on your own, does it take you longer than it would take other people, or cause you anxiety or distress?

Here are some things you might consider

- Are you able to wash, or have a bath or shower on your own?
- How often do you wash, or have a bath or shower?
- Does somebody remind you to wash, or to have a bath or shower?
- Do you have routines that you follow when washing, or having a bath or shower? If so, what are they?
- Do you worry about cleanliness and hygiene, and does this make washing or sharing a bathroom difficult for you?
- Do you have any sensory differences? For example, are you sensitive to the feeling of water, temperature, or the smell of hygiene products like soap or toothpaste? If so, how does this affect you when you wash or have a bath or shower?
- Is there anything else that you think may be relevant to getting yourself washed, or having a bath or shower?

On the next page, there is a space for you to make notes, or to complete a diary for a few days if you wish to do so.

Getting yourself washed, or having a bath or shower

Use this space to make notes if you wish

Use this diary template to make notes if you wish

For example, you could record when you had a wash, bath or shower, and whether anyone supported you.

Day/time	Morning	Afternoon	Evening	Night
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Using the toilet

Using the toilet

The worker will ask you about using the toilet and whether you have any difficulties with this. They want to know whether you need help from other people to manage your toilet needs.

Think about what you can currently do, and anything that you would like to be able to do in the future. Also think about anything that you find difficult, and whether you have found a way to manage. If you can do things on your own, does it take you longer than it would take other people, or cause you anxiety or distress?

Here are some things you might consider

- Are you able to manage all of your toilet needs?
- Do you use the toilet when you are away from home?
- Does somebody remind you to use the toilet, or do you need any practical help from somebody else?
- Do you have any difficulties with managing period products (if this is applicable to you)?
- Do you have routines that you follow when using the toilet?
- Do you worry about cleanliness and hygiene, and does this make using the toilet difficult for you?
- Do you have any sensory differences, such as sensitivity to the feeling of toilet paper? If so, how does this affect you when you use the toilet?
- Do you have any gastric or digestive issues that cause difficulties for you, for example by causing constipation or diarrhoea?
- Is there anything else that you think may be relevant to using the toilet?

On the next page, there is a space for you to make notes, or to complete a diary for a few days if you wish to do so.

Using the toilet

Use this space to make notes if you wish

Use this diary template to make notes if you wish

For example, you could record any difficulties that you had with using the toilet, and whether anyone supported you.

Day/time	Morning	Afternoon	Evening	Night
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Getting yourself dressed and wearing suitable clothes

Getting yourself dressed and wearing suitable clothes

The worker will ask you about getting yourself dressed and wearing suitable clothes for the weather and your activities. They want to know whether you need help from other people to get dressed, or to choose and wear suitable clothes.

Think about what you can currently do, and anything that you would like to be able to do in the future. Also think about anything that you find difficult, and whether you have found a way to manage. If you can do things on your own, does it take you longer than it would take other people, or cause you anxiety or distress?

Here are some things you might consider

- Are you able to get dressed and undressed?
- Does somebody remind you to change into different clothes, or help you to choose what clothes to wear?
- Do you need any practical help with getting dressed such as help with buttons or zips?
- Do you wear suitable clothes for the weather (for example, a coat when it is cold or raining, or cool clothes in summer)?
- Do you have any routines for getting dressed or undressed?
- Do you have any sensory differences that make it hard for you to wear some clothes (for example, because of the texture or colour)?
- Do you wash your clothes yourself, or does somebody else do this?
- How often do you wash your clothes?
- When washing your clothes, do you follow a routine to wash and dry the clothes? Do you get distracted and forget to finish the laundry?
- Do you want to learn any skills in this area, such as how to wash and dry your clothes?
- Is there anything else that you think may be relevant to getting yourself dressed and wearing suitable clothes?

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Getting yourself dressed and wearing suitable clothes

Use this space to make notes if you wish

Use this diary template to make notes if you wish

For example, you could record what you wore, when you changed into different clothes, and when you washed and dried your clothes.

Day/time	Morning	Afternoon	Evening	Night
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Being safe in your home

Being safe in your home

The worker will ask you about keeping yourself safe in the home. This includes knowing what to do in an emergency and being able to use kitchen equipment safely. They want to know whether you need help from other people to stay safe, and whether there are any risks to your safety. If there are risks to your safety, they will talk to you about how to reduce these risks.

Think about what you can currently do, and anything that you would like to be able to do in the future. Also think about anything that you find difficult, and whether you have found a way to manage. If you can do things on your own, does it take you longer than it would take other people, or cause you anxiety or distress?

Here are some things you might consider

- Do you feel safe in your home?
- Are you able to use all the equipment in your home safely, including sharp knives and electrical equipment?
- Do you stay at home on your own, or is somebody always with you?
- Do you stay at home on your own overnight?
- Does somebody check that you are safe, or remind you to do things in a safe way?
- Does your home have working smoke alarms, and how often do you (or somebody else) test them?
- If there was an emergency, do you feel confident that you would know what to do?
- Are there any physical issues with your home that make it unsafe for you? For example, do you have difficulties with the stairs?
- Is there anything else that you think may be relevant to being safe in your home?

On the next page, there is a space for you to make notes, or to complete a diary for a few days if you wish to do so.

Being safe in your home

Use this space to make notes if you wish

Use this diary template to make notes if you wish

For example, you could record when you spent time in the home alone, or any times when you were worried about your safety.

Day/time	Morning	Afternoon	Evening	Night
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Keeping your home clean, tidy and in a good state of repair

The worker will ask you about keeping your home clean, tidy and in a good state of repair. This includes managing household bills and dealing with utility companies, such as gas and electricity. They want to know whether you need help from other people to keep your home reasonably clean and tidy, and in a good enough state of repair.

Think about what you can currently do, and anything that you would like to be able to do in the future. Also think about anything that you find difficult, and whether you have found a way to manage. If you can do things on your own, does it take you longer than it would take other people, or cause you anxiety or distress?

Here are some things you might consider

- Do you do the housework and cleaning in your home?
- If somebody else does the housework and cleaning, would you be able to do it if you had to?
- Does somebody remind you to clean and tidy up?
- Do you have any sensory differences that make cleaning difficult? For example, sensitivity to the noise of cleaning equipment, the feeling of cloths or the smell of cleaning products?
- Do you have routines that you follow for cleaning or tidying?
- Do you manage the bills for your home, such as rent, gas, electricity and council tax? If somebody else does this, would you know how to do it if you had to?
- Are there any problems with your home, which may make it unsafe to live in?
- Do you have a lot of belongings, so that it is hard to move around your home?
- Are there any new skills you would like to learn to help you keep your home clean, tidy and in a good state of repair?
- Is there anything else that you think may be relevant to keeping your home clean, tidy and in a good state of repair?

On the next page, there is a space for you to make notes, or to complete a diary for a few days if you wish to do so.

Keeping your home clean, tidy and in a good state of repair

Use this space to make notes if you wish

Use this diary template to make notes if you wish

For example, you could record when you did any housework, when you paid bills, or dealt with any issues to do with your home.

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Having relationships with family, friends and others

Having relationships with family, friends and others

The worker will ask you about your relationships with family, friends and other people. They want to know whether you need help from other people to manage your relationships, make friends, or manage social situations.

Think about what you can currently do, and anything that you would like to be able to do in the future. Also think about anything that you find difficult, and whether you have found a way to manage. If you can do things on your own, does it take you longer than it would take other people, or cause you anxiety or distress?

Here are some things you might consider

- Who are the important people in your life, and are you able to spend the time you would like to with them?
- What are the relationships in your life like?
- What do you enjoy doing with other people?
- Do you have contact with friends or other people online?
- Would you like more contact with other people, or to make friends?
- Do you find it hard to make friends, or to know how to keep them?
- Do you feel isolated or lonely?
- Do you worry about social situations, or find it hard to know what to do?
- Is there anything else that you think may be relevant to having relationships with family, friends and others?

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Having relationships with family, friends and others

Use this space to make notes if you wish

Use this diary template to make notes if you wish

For example, you could record when you met or talked to family, friends or other people, and when you did any activities with other people.

Day/time	Morning	Afternoon	Evening	Night
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Taking part in work, training, education or volunteering

Taking part in work, training, education or volunteering

The worker will ask you about taking part in work, training, education or volunteering. They want to know whether you need help from other people to get or keep a job, attend college or university, or to do voluntary work.

Think about what you can currently do, and anything that you would like to be able to do in the future. Also think about anything that you find difficult, and whether you have found a way to manage. If you can do things on your own, does it take you longer than it would take other people, or cause you anxiety or distress?

Here are some things you might consider

- Do you have a job, either paid or voluntary?
- Are you at college or university, or doing any Adult Learning or other courses? If so, what course are you doing?
- Do you have any ambitions for work or study?
- Have you had any jobs in the past? If so, did you enjoy them, or were there any difficulties?
- What would your ideal workplace be like?
- Are you able to travel to a job or to college?
- Is there anything else that you think may be relevant to taking part in work, training, education or volunteering?

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Taking part in work, training, education or volunteering

Use this space to make notes if you wish

Use this diary template to make notes if you wish

For example, you could record when you went to work (paid or voluntary) or to college.

Day/time	Morning	Afternoon	Evening	Night
Monday				
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Using facilities in your local community

Using facilities in your local community

The worker will ask you about accessing the community. This means going to places like shops, cafes, libraries, leisure centres, parks and your doctor's surgery. This also includes travelling to places, for example by public transport. They want to know whether you need help from other people to go to these places.

Think about what you can currently do, and anything that you would like to be able to do in the future. Also think about anything that you find difficult, and whether you have found a way to manage. If you can do things on your own, does it take you longer than it would take other people, or cause you anxiety or distress?

Here are some things you might consider

- What places do you go to and how often?
- Is there anywhere that you would like to go to?
- Do you have any sensory differences that cause difficulties in public places? For example, sensitivity to crowds of people, bright lights, unfamiliar smells or loud noises?
- How do you travel to places? Do you need support from anyone to travel to the places that you go to?
- If you were to go somewhere new, would you need somebody to help you get there to start with?
- Are you able to drive, or to travel by bus on your own?
- If things go wrong on a journey, do you feel confident to problem solve and work out what to do,?
- Is there anything else that you think may be relevant to using facilities in your local community?

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Using facilities in your local community

Use this space to make notes if you wish

Use this diary template to make notes if you wish

For example, you could record when you went out to different places, how you travelled there and who you went with.

Day/time	Morning	Afternoon	Evening	Night
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If you have children, looking after them

If you have children, looking after them

If you have children under the age of 18, the worker will ask you about looking after them. This will also include looking after any children that you have caring responsibilities for. They want to know whether you need help from other people to look after your children.

Think about what you can currently do, and anything that you would like to be able to do in the future. Also think about anything that you find difficult, and whether you have found a way to manage. If you can do things on your own, does it take you longer than it would take other people, or cause you anxiety or distress?

Here are some things you might consider

- How old are your children?
- What are your children's living arrangements? Do they live with you for all or some of the time?
- What support do you get from other people to look after your children, for example from their other parent, or from a partner or other relatives?
- Do you have any support from professionals, such as a health visitor?
- Do your children attend nursery or school? How do they get to and from nursery or school?
- Do your children have any additional needs?
- Do you have any worries about your children, for example about their development, or their behaviour?
- Do your children have any hobbies or activities that you do with them, or take them to?
- Do you have any routines to manage looking after your children? If so what are these?
- Is there anything you would like to be able to do with or for your children?
- Is there anything else that you think may be relevant to looking after your children?

On the next page, there is a space for you to make notes, or to complete a diary for a few days if you wish to do so.

If you have children, looking after them

Use this space to make notes if you wish

Use this diary template to make notes if you wish

For example, you could record what you did with your children, how you met their needs and any support you had from other people.

Day/time	Morning	Afternoon	Evening	Night
Monday				
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Wednesday				
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