

Guidance on using the Support Needs Approach for Patients (SNAP) with Electronic Systems (E-Systems)

This guidance addresses different issues relating to SNAP and E-Systems to ensure that both the principles that underpin SNAP and the terms and conditions of the SNAP Tool licences are followed.

The guidance also applies to the use of the SNAP-MH Tool and SNAP in Prisons Tool.

It covers five topics/FAQs:

1. How are SNAP contacts generally recorded?
2. Why can I not simply record what the patient 'ticks' on the SNAP Tool?
3. Using SNAP in practice if my organisation has gone paperless
4. Summary of the key SNAP principles to be retained on E-record systems

1. How are SNAP contacts generally recorded?

Practitioners using SNAP need to be able to record the content of the conversation with patients to document their individual needs and the support provided or planned with them.

The SNAP Support Plan is a good way to capture these. This also enables organisations to evidence and evaluate their work on supporting patients.

 Support Needs Approach for Patients		
Support Needs Approach for Patients (SNAP): Support Plan		
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Name of patient: _____		
Date of needs-led conversation	Support need prioritised (state the specific need identified, not the item ticked on the SNAP tool)	Shared response (agreed action plan to address support need discussed)

Paper copies of the 'How are you?' booklet and Support Plan can be stored in secure cabinets or scanned and stored electronically.

2. Why can I not simply record what the patient ‘ticks’ on the SNAP Tool?

There are several very specific reasons for **not** recording the tool domains ‘ticked’ by the patient and instead focusing on their priorities and recording the content of the conversation and action planning.

- The SNAP Tool questions represent very broad domains of support need - **not patients’ individual needs**. Only through the person-centred conversation are the patient’s specific support needs within those broad domains identified and discussed.
- The specific need/needs within each domain can be completely different from one patient to another and this is not captured by only recording the domains ‘ticked’.
- The categories ‘No’, ‘A little more’ and ‘Quite a bit more’ **are not a measurement scale** and cannot be scored or used to indicate levels of support needed. They are on the tool simply to encourage the patient to identify areas of where they may need more support. This is because we know it can be easier for a patient to say they need only ‘a little more’ support. The key information from the tool is whether they require more support or not and **what they prioritise for discussion** – interestingly, their priority is often what they need a ‘little’, rather than ‘quite a bit more’, support with.
- Patients’ support needs change over time and organisations will want to evidence this and evaluate the support provided: that is not possible if only the ticked SNAP Tool domains are recorded.
 - For example: A patient may at one point indicate they need support with ‘managing symptoms and medicines’, and the needs-led conversation that follows reveals their need relates to understanding a particular symptom e.g., breathlessness, which is then addressed.
 - If the same patient completes the tool a month later, they may indicate they need more support in the same domain. However, this time their individual need within that domain may be totally different, e.g. wanting to know more about a particular medication.
 - Therefore, if only the domain(s) ticked are recorded, any evaluation will show no change in unmet need (suggesting that no response was made, or that it was ineffective) when in fact the earlier individual need was successfully addressed, but new ones in that domain have since developed.
- Crucially (and something that can easily be missed) if everything on SNAP Tool is ticked as “no” there can still be an assessment conversation between the patient and practitioner where the completed tool is reviewed. This discussion can often result in identification of a support need, completion of a shared action plan and subsequently a shared review. This important input would be missed entirely if only ticked domains were recorded.

It can be helpful to evidence what you have achieved in using SNAP in practice to support patients by completing the SNAP Support Plan.

3. Using SNAP in practice if my organisation has gone paperless

Stage 1: Introduce SNAP

The first stage of SNAP is to introduce the intervention to the patient. To do this, traditionally many services present patients with a paper copy of the 'How are you?' booklet which they can complete to start a discussion with a practitioner about their support needs.

With paperless systems the licensing agreement permits the SNAP Tool to be shown electronically to patients – this is for the sole purpose of aiding communication with the patient as part of delivering SNAP in practice. If using the SNAP Tool on a tablet/screen with a patient, **the licensed tool should be shown in full**, including the full set of response categories to encourage patient completion.

Stage 2: Patient considers needs

Just as the patient completed the 'How are you?' booklet, they can complete the SNAP Tool on the tablet/screen indicating the domains (questions) where they need **more support** and which of these are **most important to them (i.e., their priorities for discussion with the practitioner)**. The practitioner and patient can then review this jointly on the screen as they would have with a paper booklet.

However, it is important to note that

- If your organisation wishes to transfer and/or store the patient's SNAP Tool responses on an e-platform, these need to be transformed to indicate **only whether more support was needed or not, displaying "Yes" or "No" for each domain** (in accord with principles in Section 3 above).
- That is, the response categories that appear on the tool itself (i.e. 'a little more' or 'quite a bit more') **are not to be transferred and/or replicated** on the recording system, as they cannot be 'scored' or used to indicate level of need;
- Domains prioritised for discussion by the patient should also be reported as **"Yes" or "No" for each domain** (in accord with principles in Section 3 above)
- This complies with the SNAP Tool principles to be retained on e-record systems which are **part of the SNAP Tool licence agreement** signed by organisations using SNAP in practice and summarised below.

Stage 3: Assessment conversation

Whether using the paper 'How are you?' booklet or SNAP Tool on an e-platform, **the essential assessment conversation** then takes place between the patient and a practitioner focusing on the domains/questions the patient has prioritised. This conversation explores the patient's individual needs within the prioritised domains and what they feel would be helpful in meeting these needs.

Stage 4: Shared action plan

While many practitioners using SNAP in practice will use the paper SNAP Support Plan, many are

moving to using only electronic records to record contacts with patients. With E-Systems the content of the SNAP needs and action planning conversation is recorded using the same components of the SNAP Support Plan (**domains prioritised, specific support needs, and action plan to meet the identified needs**). These form the **core information** to be recorded on E-Systems. The format of the paper Support Plan does not need to be replicated, you can use any method or design to capture the three components: which prioritised domains were discussed, the patient's specific support needs and agreed action plan.

Stage 5: Shared review

As on paper systems, the components of the SNAP Support Plan (domains prioritised, specific support needs, and action plan to meet the identified needs) provide the basis for a shared review.

4. Summary of the key SNAP principles to be retained on e-record systems

The SNAP Tool itself only serves as a communication tool, and what should be captured on a recording system is the content and outcomes of the SNAP needs conversation on a SNAP Support Plan. The following principles for recording should therefore be followed:

- on the tablet/screen presented to the patient, the licensed tool should be replicated in full, including the full set of response categories to encourage completion by the patient;
- any recording of the completed SNAP Tool responses stored on an e-platform will transform the responses to indicate **only whether more support was needed or not**, e.g. display “Yes” or “No” for each domain or just mark the domains where more support was needed;
- the domains prioritised for discussion by the patient will be recorded “Yes” or “No” for each domain or otherwise marked;
- SNAP Tool responses should always be accompanied by a SNAP Support Plan; and
- the SNAP Support Plan will record the identified domains prioritised by the patient (using domain numbers), a summary of the individual support needs of the patient discussed at the assessment conversation and an explanation of agreed actions put in place.

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