

# Person Centered Planning

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DEVELOPMENTAL DISABILITIES  
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# Person Centered Planning

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## Chapter 1: What is Person Centered Planning and why do we use it?

### OBJECTIVES:

#### Did you know?

Person Centered Planning is an ongoing problem-solving process used to help people with disabilities improve their lives and plan for their future. In person centered planning, groups of people who know an individual well, meet with the individual to help them plan how they can be actively involved in meaningful activities. They consider that person's preferences and ideas about what they would like to do in the future. This "person-centered" team meets to identify opportunities for the focus person to develop personal relationships that last, gain new experiences and skills, participate in their community, increase control over their own lives, and develop the skills and abilities needed to achieve these goals. Person Centered Planning depends on the commitment of a team of individuals who care about the person. These individuals take action to make sure that the strategies discussed in planning meetings are consistently implemented regardless of the significance of disability-related support the person needs. [<http://www.pacer.org/transition/learning-center/independent-community-living/person-centered.asp>].

After you complete this lesson, you will be expected to:

- Tell others what Person Centered Planning means in your own words
- Tell why we use Person Centered Planning
- Tell how Person Centered Planning improves services
- Give an example of Person Centered values
- Tell what happens when team planning isn't used
- Tell what you would do to make sure a person receives active support.
- Describe what to do if you observe circumstances that will interfere with reaching goals in the plan.

**Individual planning:** Most people make plans. Some plans are very simple. You might plan what to have for supper tonight, what to do on your next day off or what food to buy at the store. Simple plans are usually not written down. If they are written, they are recorded on a brief list or as a note on the calendar.



Some plans are a little more complicated. For example, you may plan how to get some new furniture for your apartment. This could involve going to furniture stores and checking out costs. Or you might plan how to get a promotion at work. This could involve taking some classes or finding a mentor. Maybe you want to plan how to "live a healthier life." This could involve going to the doctor for a checkup, starting an exercise program, or learning new ways to cook food. These kinds of plans are more complex and involve setting some long range goals. Most people need some support to carry out complex plans for their lives. Often we find someone who can help us learn new skills.

You might not have a written plan for meeting your goals. But you probably told other people about them. You might have invited your family and friends to tell you about their experiences or to make suggestions. You may have tried to learn more about choices by reading or looking

for information online. You might have used this kind of planning when you left home for the first time, if you decided to join the military or when you took out your first loan at the bank.

In each of these examples, you were the planner. You made the plan. You chose the supports and therefore needed to carry out the plan. After you started, you may have made changes along the way. You may have relied on others to help you learn new skills or support you in other ways. If they didn't, you moved on and found someone else or tried another way. This kind of thinking is called **individual planning or problem solving**.

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

1. Circle the simple plans and underline the comprehensive life goals  
what to eat for dinner                      apply to college  
buying a home                                  what to wear to work  
what to plant in the garden                live a healthier life

**Team Planning:** Team planning is used when *several people work together to set and work on a common set of goals*. Team planning can be used to reach work, community or personal goals. For example, a committee at work might use team planning to set new safety guidelines. Or a group of neighbors might use team planning to make changes in the city zoning rules or to build an accessible playground. In each of these examples, one person was probably the leader but everyone helped make the plan and carry it out. Everyone has a role to play in helping the team succeed in reaching their goals.

**Person Centered Planning:** We use person-centered planning to help people with disabilities reach goals. In this approach, the person works with their team to set goals and decide what steps and supports will work best to help them achieve the goals. The team has a *shared responsibility* to create and carry out the plan. The person looks to their team for help to design a plan and help them solve challenges and succeed in meeting their personal outcomes and living a meaningful life.



Individual problem solving is often all that is necessary for many people to make and carry out simple plans. *Person Centered Planning* is usually needed to help people with disabilities set and meet complex life goals. Person Centered Planning is an important support for people with disabilities. This video explains *What is Person-Centered Planning?* (3:07)  
<https://www.youtube.com/watch?v=ECcH5SR4KzM>

**What is the purpose of Person Centered Planning?** People are social. Even though we all need to be alone at times, we learn best in groups. When a group of people work closely to help someone reach complex goals they are usually more successful than one person working alone. At first the members of the team don't know each other very well. Over time, they realize that they can rely on one another. They become a team by working together. People soon learn that Person Centered Planning is an effective way to get things done. Why?

- Some goals are too complex for one person to manage alone.
- Teams can solve challenges by thinking about what might work better. Information about options helps people with disabilities develop self-determination.
- Teams bring together different ideas, views, skills, and knowledge.

- Team members share solutions and learn from each other.
- Teams keep members are held responsible when it would be easier to give up. This builds trust and helps ensure the person will achieve a life that is meaningful to him/her.
- Supporting people to discover their dreams builds confidence.
- Teams help people share important experiences and stories.
- Some problems can't be solved unless team members cooperate.

Person Centered Planning makes so much sense that laws have been passed to require agencies to use this approach. In North Dakota, agencies are licensed to offer services to people with DD. **Getting a license requires agencies to go through a formal process. To earn accreditation, agencies must also use Person Centered Planning.**

In this video, Michael Smull explains *What is meant by person centered approaches, thinking and planning?* (5:47) <https://www.youtube.com/watch?v=tvANuym5VXY>

### Person Centered Planning Leads to QPerson-Centered Services:

Agencies are evaluated based on their ability to provide quality services to people with disabilities. We do this by:

- measuring consumer satisfaction.
- going through an *external* review.
- going through an *internal* review.

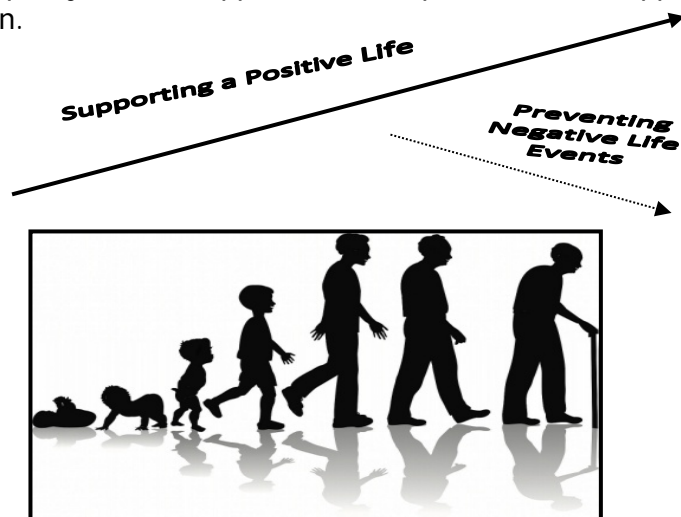
Each kind of evaluation process usually measures how well the agency uses Person Centered Planning and if the staff are actively supporting the person to be engaged in their life.

**How are Person Centered Planning and quality services linked?** *Most of the supports you provide to people with disabilities are created through some type of Person Centered Planning process. Person Centered Planning helps you improve* quality services when you:

- realize that people with disabilities need support to plan their lives (best practice).
- Actively and consistently provide the support in an individualized and respectful way (individualize services).
- share responsibility for accomplishing planned goals and objectives (personal outcomes).

**Charting the Life Course** is a framework that was developed to help professionals, individuals with disabilities and families at any age or stage of life think about what they need to know, identify how to find or develop supports and discover what it takes to support people to live the lives they want. This chart demonstrates the major life tasks at each stage for individuals with disabilities and their families. Person Centered Planning at each life stage helps support a positive life and prevent negative life events. A vision for a good, quality life, and opportunities, experiences and support move the life course in a positive direction.

Life Stages
<b>Prenatal/Infancy:</b> Early years, wondering if meeting developmental milestones
<b>Early Childhood:</b> Preschool age, getting a diagnosis
<b>School Age:</b> Everyday life during school years



<b>Transition:</b> Transitioning from school to adult life
<b>Adulthood:</b> Living life as an adult
<b>Aging:</b> Aging and preparing for end of life (parent/family/individual)

Person Centered Planning will help individuals and their team support their vision for a meaningful life. This chart shows that Person Centered Planning is at the center of the efforts to support people with disabilities. A combination of different kinds of support helps lead to an inclusive, quality, life across all of the **Life Categories**. **Supports** are defined as resources and strategies to promote the development and personal well-being. Types of support include: personal strengths and assets, relationships, technology, community-based supports available to everyone in the community and supports available only to those who meet eligibility criteria.



**Life Categories** are different aspects and experiences of life that we all consider as we age and grow.

Life Categories
<b>Daily Life &amp; Employment:</b> What a person does as part of everyday life – school, employment, volunteering, communication, routines, life skills.
<b>Community Life:</b> Where and how someone lives – housing and living options, community access, transportation, home adaptations and modifications.
<b>Safety &amp; Security:</b> Staying safe and secure – emergencies, well-being, guardianship options, legal rights and issues.
<b>Services &amp; Supports:</b> Services and supports for individuals and families – both funded (systems) and natural supports; personal/family financial.
<b>Healthy Living:</b> Managing and accessing health care and staying well – medical, mental health, behavior, developmental, wellness, and nutrition.
<b>Social &amp; Spirituality:</b> Building friendships and relationships, leisure activities, personal networks, faith community.
<b>Citizenship &amp; Advocacy:</b> Support for families/individuals – peer support, self-advocacy.

The Life Course Guide [\[https://dhs.sd.gov/dd/lifespan/LifeCourseGuide.pdf\]](https://dhs.sd.gov/dd/lifespan/LifeCourseGuide.pdf) from the South Dakota Department of Human Services recommends Person Centered Planning teams consider specific questions for each life category as the person transitions from one life stage to another. The LifeCourse framework is explained in this video: (22:32) *LifeCourse Overview* <https://www.youtube.com/watch?v=WeOmxzWBC6Y>

**A Person Centered Plan is Not a Guarantee:** A Person Centered Plan is a guide for the team to follow. Just because someone has a good Person Centered Plan does not mean that goals will be achieved. Sometimes people are afraid to write goals that are really important to people but seem very difficult to accomplish. What if we don't reach these goals? Many challenges can occur along the way. While a Person Centered Plan does not guarantee the person that their goals will be met, it usually helps. Teams want to be realistic in setting goals. But if we never stretch for what is beyond our immediate reach, we can't grow. Goals, by definition should be a bit of a stretch for everyone involved. Setting goals and making plans involves risk. It is a reasonable step to take if we want people with disabilities to have lives that they enjoy and find meaningful.

**Self-assessment**

Check your understanding of this section's content by completing this self-assessment.

- 2. True or False – Person Centered Planning:
  - helps people reach complex goals
  - brings together people with different ideas, knowledge, viewpoints, and experiences
  - is easier and faster than other types of planning
  - is required by accreditation agencies
  - is a guarantee people will meet their goals
  - helps support a positive life and prevent negative life events
  - ensures that only easy goals will be included
  - helps the team consider a variety of supports to assist the person in reaching their goals

**Person Centered Planning Values:** People with disabilities and their families have been very clear about what support they want in planning goals and services. We do not work in teams so that the people who talk the most or have the most authority can dominate. Person Centered Planning is most helpful when the team has a shared set of values. These values help the team to be respectful of each person and act in ways that are likely to help individuals achieve a meaningful life.



Teams and plans will be seen as respectful and individualized when teams act in ways that match the following core values. The table below shows a list of important values and examples of actions taken by teams that match each belief.

Core Values	Action
-------------	--------

<b>Learning is lifelong.</b> People with disabilities can learn new skills throughout their lives.	John is 56 and his parents are in their late 70's. He is helped to visit a funeral home and learn more about death and dying.
<b>Life has many seasons.</b> Activities should be culturally and age appropriate.	Susan is 19. She wants to sleep late and hang with her friends in the evenings. She likes helping people. Susan is supported to find a job in retail where she doesn't need to be to work before 10:00 am.
<b>Everyone learns in different ways.</b> Most people do best when learning conditions and teaching methods are adapted to their strengths.	Sara doesn't follow directions well when she is tired, but she loves pictures and enjoys using computers. Staff helped her set up a picture reminder system on her computer.
<b>Everyone needs support and assistance sometimes.</b> People with disabilities do not have to learn everything required to live "independently" before they can live where they want. They have the right to live in the community NOW. Services and supports can make that possible.	Mike wants to live in an apartment but is inconsistent about doing chores. He cannot afford a housekeeper. Mike gets an automated vacuum to help him do his cleaning. Mike's staff join him and support him to do less preferred tasks by sharing their attention and humor and working together.
<b>Everyone is unique.</b> Programs should fit the person and not the other way around.	Ashley is referred for services. She uses sign language to communicate. No one who uses sign language has been served in your agency before. Staff members take an online course in sign language. They help Ashley teach new friends some sign too.
<b>Everyone needs choice and control.</b> Person Centered Planning is not about making people into "good workers" but about supporting people to set goals and realize dreams.	Marge has been fired from several jobs for yelling and throwing things at co-workers. She is helped to make a picture list of what she needs to succeed on the job and to share that list with her team at the meeting.
<b>Everyone learns from others.</b> People need more than accommodations and support. Sometimes it is important to be shown how to do an activity and lots of practice with support.	Paula has a visual cookbook and utensils that are easy for her to use. However, these adaptations are not enough. Paula needs Jim to teach her how to tell when the hamburger is completely cooked, what to do when she cuts her finger, and how to get enough to eat without taking food from someone else's plate.
<b>Everyone has something to contribute. Everyone's contribution is valuable.</b> How we package our contribution is important. We want people to grow and succeed because of and not in spite of us.	Mark is close to his family and they know him well. If they continue to cook for him every night, he will remain dependent on them. They have seen Mark through many crises and have valuable insight about what works and what doesn't. But they may need support from the team in finding a way for Mark to assume more responsibility in this area.

Kathie Snow explains *Regular Lives for Families with Children with Disabilities* (5:10) *Adult Life and Living* <http://mn.gov/mnddc/kathie-snow/kathie-snow-12.html>

## Application Activities

The following activities are designed to help you apply the content that you learned in this chapter to your position as a DSP. These reflection exercises correlate with important DSP knowledge or skills.

3. Teams use core values to guide Person Centered Planning. Give an example of how your agency meets these core values:

Learning is lifelong \_\_\_\_\_

\_\_\_\_\_

Life has many seasons \_\_\_\_\_

\_\_\_\_\_

Everyone learns differently \_\_\_\_\_

\_\_\_\_\_

Everyone needs support \_\_\_\_\_

\_\_\_\_\_

Everyone is unique \_\_\_\_\_

\_\_\_\_\_

Everyone needs choices \_\_\_\_\_

\_\_\_\_\_

Everyone can contribute \_\_\_\_\_

\_\_\_\_\_

**What happens when Person Centered Planning values are not shared?** Suppose you got together with a group of friends, your boss, some community leaders and even one of your parents. Let's say that you asked these people to meet with you and help you make a plan for your life.

- How helpful would it be if the group took over?
- What would happen if they sat around and talked about you as if you weren't in the room? How about if they used vocabulary that you didn't understand?
- What if they discussed what was wrong with you and brought up every mistake you had made in the past few years?
- What if you wanted to get married and they told you that you had to lose weight first?
- Suppose they decided you had to do a certain kind of job, because other people your age had selected that even if you weren't sure you would like it?
- Suppose they decided where you had to live and who your roommate would be.

- What if you could see that they weren't really willing to help you figure out a way to get what you wanted?

How long would you keep that team around? Do you think you would follow the plan they created? What would you do? Would you be non-compliant?

**What happens when Person Centered Planning values are shared?** This time, let's imagine that you got together with a group of friends, your boss, some community leaders and even one of your parents. Let's say that you asked these people to meet with you and help you make a plan for your life.



- How helpful would it be if the group really knew you well?
- How would you feel if they encouraged you to share your ideas and they really supported you in learning what it was that you wanted and had some great ideas that you could try?
- What if they showed you a path built on your strengths and were willing to help you try different options until you decided what would work best?
- Suppose you sometimes made choices that didn't always help you reach your goals.
- What if they were patient and supportive and showed that they cared about you even when you messed up?

How long would you want that team to be part of your life? Do you think you would follow the plan you created together? What would you do? Would you gain confidence?

### **What happens when a Person Centered Plan is not followed or stops working?**

Everyone benefits when a Person Centered Plan works. Still, many challenges can come up during Person Centered Planning. These challenges happen during meetings or afterwards when Person Centered Plans are being implemented. Example: Suppose a staff person leaves and the new team member doesn't follow the Person Centered Plan correctly. Or suppose the Person Centered Planning is not done well and no one really agrees with the plan but don't tell others about these concerns during the meeting. When that happens, big challenges can occur.

You may observe someone with a disability make a poor choice. (Example – he or she does not make their bed or eats five pieces of pizza at the party.) Although these choices may not be the best, the person can still achieve his or her goals and the Person Centered Plan probably does not need to be changed. Sometimes people make choices that are self-defeating or put themselves in harm's way (example, refusing to go to bed at a reasonable hour can result in poor work performance or damage relationships.) If you observe behavior or circumstances that will interfere with reaching the goals identified in the Person Centered Plan, it is important to act right away. You may need to find someone who can call the team together and share your concerns. **If you don't inform the team:**

1. other team members won't know about important information that only you know.
2. good strategies for achieving a goal may be dropped or lost over time.
3. important changes to the Person Centered Plan may not occur.

## The results of these challenges can be that:

1. the person may continue to make choices with limited information about the long term results.
2. the person may not be able to achieve important goals and dreams.
3. everyone becomes discouraged.

A Direct Support Professional's (DSP's) responsibilities for Person Centered Planning begin as soon as you start working with people with disabilities. When you provide support to a person, you are a member of their team, whether you attend their planning meeting or not. One of the biggest challenges to Person Centered Planning occurs when a new person joins the team. It can take some time for a new member to meet the rest of the team, read and understand the Person Centered Plan, learn how to carry out the Person Centered Plan and start sharing important information with other team members. So it is important to start right away. It is never too late to get involved in Person Centered Planning.



**Remember:** Unless Person Centered Plans are continuously reviewed, adjusted, and carried out, they are just pieces of paper that sit in notebooks or drawers. If you care about someone, you want them to succeed. You'll work hard to make that happen. If you don't know the person well, it's hard to make a connection between the Person Centered Plan and what you do every day. When you get to know the person, the Person Centered Plan starts to make sense. If you care about the person you want a good plan that will help the person reach his or her goals. You can make a real difference in someone's life.

Person Centered Planning is a process of continuous improvement. No one has all the skills or information needed to make the Person Centered Planning process perfect. In this module you will learn more about Person Centered Planning and how to do it well. You can make an important contribution to the lives of people with disabilities.

## Self-assessment

Check your understanding of this section's content by completing this self-assessment.

4. Give examples of 3 simple challenges that can undermine or threaten Person Centered Planning.
  - a.
  - b.
  - c.

In Chapter 3 you will learn more about your roles and responsibilities in Person Centered Planning. First, let's look at some plans. Chapter 2 will help you understand what a Person Centered Plan is and how it works.

## Application Activities

The following activities are designed to help you apply the content that you learned in this chapter to your position as a DSP. These reflection exercises correlate with important DSP knowledge or skills.

5. Marty's goal is to work as a cook at Taco John's at least two hours a week. Marty has never had a paying job before. List some actions that staff might take at home and at work to help Marty achieve his goal.

At Home I Could:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

At Work I Could:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

6. Explain why each item listed below is important in person-centered planning:
- a. Working as a team to meet goals
  - b. Giving people information about options
  - c. Supporting people to discover their dreams
  - d. Making sure people achieve their goals

## Chapter 2: What is a Person Centered Plan and how does it work?

### Did you know?

The person remains in control over how these plans are made, who is to be involved in them, how they are to be recorded, and whose help they will need to make the plans happen. Person Centered Plans need to be revisited regularly as a person's requirements naturally changes over time. [ <http://www.learningdisabilities.org.uk/help-information/learning-disability-a-z/p/person-centred-planning/> ]

After you complete this lesson, you will be expected to:

- Locate the Person Centered Plan for any person you are asked to support.
- Identify the person's goals
- Learn what you can do to help carry out the Person Centered Plan
- How to provide active support even when the person is not focused on a specific goal
- Find out who else is part of the team and why
- Document important events that could impact the Person Centered Plan
- Know what to do if the Person Centered Plan doesn't seem to be working

### Terminology:

**Person Centered Plans:** Over the years, agencies have used many different names and methods for plans. All are a way to help a person get from where they are to where he or she wants to be. Common names are:

- The *individual habilitation* plan or the IHP
- The *individual program* plan or the IPP
- The *futures* plan
- The *person-centered service* plan or the PCSP
- The *individual education* plan or the IEP
- The *essential lifestyle* plan or the ELP
- The *personal futures* plan or the PFP
- *Planning Alternative Tomorrows with Hope* or PATH
- The *individual service design* or the ISD
- The *overall service* plan or the OSP

Different agencies use different words. In this module, we will keep it simple and refer to any similar document as the *Person Centered Plan*.

### Program Coordinator (PC) or Qualified Developmental Disabilities

**Professional(QDDP):** Both these job titles describe people who help individuals plan and coordinate their meetings. Some agencies use the titles Case Manager or Program Manager.

For consistency, we will use PC/QDDP when referring to a person that helps individuals plan and coordinate their Person Centered Planning meeting.

**What is the Person Centered Plan?** The Person Centered Plan is a written document that the team uses to record discussions, goals, services, supports, strategies and decisions. Each Person Centered Plan is designed to help someone reach their goals and live a meaningful life.

Life has meaning when you live where you want to live, do what you want to do and spend time with people you enjoy. Life involves work and play, challenge and comfort, familiar routines and some adventure. People who live a meaningful life have choice and control over everyday events. They have continuity in their relationships and they feel safe. Life also has meaning when you are actively engaged and not just sitting around doing very little. Life has meaning when you have a valued role in your group of friends, and community (social roles) and when it includes the friendships and intimacy. Life takes on meaning when you participate in the normal rhythms and activities for someone of your age and culture. Life has meaning for people who are very old or near death when they receive support to manage pain and decide how to live the remainder of their life.



A Person Centered Plan to help reach goals and live a meaningful life is very important. That kind of plan may include goals for employment, daily living, recreation, relationships and community life. Because life is complex, a Person Centered Plan usually has many different parts.

Self-advocates explain *What is Person Centered Planning?* (3:16)  
<https://www.youtube.com/watch?v=sQDypbjal2o>

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

1. Describe **two main purposes** for a Person Centered Plan that is used to document the team's discussions, goals, services, supports and decisions. The plan is designed to help someone:
2. How can you tell when a life has meaning? (Describe at least 3 points)
  - a.
  - b.
  - c.

**What Do Person Centered Plans Do?** Direct support professionals support people to reach their goals and enjoy their lives. When a team makes a Person Centered Plan, it is written down so everyone can remember and understand what they need to do. The Person Centered Plan provides an outline that the team can use to be accountable. The Person Centered Plan is a guide for everyone who provides support.

The team agrees to follow the Person Centered Plan. Team members have an obligation to work together to carry out the objectives and procedures in the Person Centered Plan. In making this promise, the team commits to giving that person the planned support she needs to meet the goals and the active support needed to have a meaningful life. If we stop following the Person Centered Plan because we want to try our own ideas or we disapprove of the person's choices, the whole

process breaks down. **Team members need to follow the plan as written.** If some team members or family members question the plan, DSPs should refer them to the PC/QDDP. If we follow the plan some of the time but do not help the person to be actively engaged in their own life during the rest of the day, any progress will be slow and the person will not be very satisfied with their life.

Sometimes a team includes a unique support or service in the Person Centered Plan. If they learn the service is not available, the team tries to provide as much support as possible until the needed resources become available. No plan can cover every possible set of circumstances. Sometimes a person becomes ill or their health status changes. Sometimes the person gets a new job or gets frustrated with his or her life. You may wonder what to do. Their Person Centered Plan may not tell you. When questions come up, they should be shared with the person who is coordinating the Person Centered Plan. Teams should expect to revise Person Centered Plans when changes are significant. Each Person Centered Plan should be reviewed at least once a year.

### **Learning About Person Centered Plans:**

Most agencies have some type of system for documenting or storing Person Centered Plans. Person Centered Plans often contain confidential information that should be shared on a need to know basis. Often, part of the Person Centered Plan may be kept at the individual's home or job site so people can check the plan frequently. Some agencies use Therap as a way to store this information electronically and securely.

To learn more about Person Centered Plans, you need to gain experience with the kinds of Person Centered Plans that your agency uses. **All team members need to follow the plan as written.**

**The Parts of a Person Centered Plan:** Person Centered Plans often look like a report. but they should be easy to understand and written in everyday language. Here are some common parts found in Person Centered Plans:

<b>Team Plan Section</b>	<b>Purpose</b>
Cover sheet	A cover keeps the information inside private
Personal information	Most teams include contact information, the date the plan was made and facts about the person's age and gender.
Team members	This includes the names of the people who helped make the Person Centered Plan. The team may have changed over time.
Background information (Social History)	Many Person Centered Plans record important information about the person, their history and their life situation such as jobs or the success of past Person Centered Plans
Dreams, nightmares, and wishes	This information gives the team a vision for the kind of life that would have meaning for this person.
Strengths & needs	This section tells about personal preferences and what other people say about what the person has accomplished. It also includes information about what kinds of support are helpful.
Goals	Goals are broad statements about what the person wants to accomplish and why. A goal needs criterion so that the team can tell when it has been met.
Objectives	Objectives are outcomes or steps that, when met, lead to achievement of a goal.

Supports or Action Steps	Teams often write out what support staff need to do to provide active support throughout the day and to achieve each objective. This can include what to say and how to respond to provide support.
Decisions or minutes	Sometimes teams record decisions or minutes so that others can learn what was discussed or decided as team members change.

**Therap:** Some agencies use Therap to share the Person Centered Plan with other members of the team and collect data. Therap is a secure, web-based application suite that was designed to provide a comprehensive solution for the planning, documentation, reporting, communication and billing needs of organizations supporting people with intellectual and developmental disabilities in home and community-based services (HCBS) and other settings. Therap Team. (2014, December). Retrieved from <https://www.therapservices.net/meet-the-therap-team/>. Here are some of the modules (sections) that are available for agencies to use:

Module Name	Purpose
Individual Data (ID)	<ul style="list-style-type: none"> <li>• Demographic face page</li> <li>• Person's given name</li> <li>• Date of Birth</li> <li>• Residential Address (mailing and billing)</li> <li>• ID numbers</li> <li>• Social Security, Medicaid, Medicare Numbers, Insurance</li> <li>• Family, emergency contacts</li> <li>• Physicians, service providers</li> <li>• Diagnosis + ICD9/10, DSM-IV, DSM V codes, as it applies</li> <li>• Medical concerns, allergies</li> <li>• Adaptive equipment, emergency orders, blood type</li> <li>• Additional attachments, as it applies</li> </ul>
Overall Service Plan (OSP)	Includes details on Assessment Review, Health and Welfare, Safeguards
Individualized Support Programs (ISP Program) Cont.	<p>Lists:</p> <ul style="list-style-type: none"> <li>• staff services and supports</li> <li>• scoring methods for each staff to select for each support</li> <li>• individual's personal, measurable goals with staff supports</li> <li>• task analysis and teaching methods for completing the task or guidelines for each support</li> <li>• long term goals, objectives and reasons for each program</li> <li>• frequency and documentation frequency</li> </ul>
Individualized Support Programs Data (ISP Data)	<p>Staff can:</p> <ul style="list-style-type: none"> <li>• select scores/responses for each service or support offered, or each goal addressed</li> <li>• review guidelines, goal and objectives behind each program and service</li> <li>• run reports and collected data (graphs, charts, clinical reports)</li> </ul>
Risk Management Assessment and Plan (RMAP)	Records different risk factors for an individual, assessment on these factors and the plan for the appropriate steps that should be taken when the risk arises
Individual Plan of Protective Oversight	A documented and approved plan used to ensure individual safety. It lists the key activities that affect the health and welfare of a person with a

and Safeguards (IPOP) Residential and General Information	disability. It documents the procedures and guidelines for providing support to the person along with their protection and safety requirements for different programs
General Event Reports (GERs)	A report that explains factors related to injuries, medication errors, deaths, and restraints, etc.
Behavior Event Reports (BERs)	<ul style="list-style-type: none"> <li>• Used for identified and approved behavior plan implementation</li> <li>• A report that explains factors related to behavioral events, utilizing interventions or reinforcements for positive/negative behaviors with optional ABC charting</li> <li>• Staff can chart the number of times per hour target behaviors are exhibited (behavioral interval data) or record times, duration and intensity of behaviors</li> </ul>
SComm	A way to exchange information among co-workers in a secure, HIPAA compliant way
T-Logs	A way to write individual specific, health, nursing, behavior or summary notes related to an individual, facility or shift-to-shift communication log
Health Tracking	<ul style="list-style-type: none"> <li>• Blood glucose readings, treatments</li> <li>• Height/weight tracking</li> <li>• Intake/elimination charting</li> <li>• Medication histories and current medications</li> <li>• Menses tracking</li> <li>• Seizure tracking</li> <li>• Vital signs</li> <li>• Health care reports</li> <li>• Monthly summary reports</li> <li>• Review</li> <li>• Nurse reports</li> <li>• Track appointments</li> <li>• Immunization history and scheduled vaccinations</li> <li>• Infection tracking</li> <li>• Lab tests</li> <li>• Respiratory tracking, treatment</li> <li>• Skin/wound tracking</li> </ul>

**Application Activities**

The following activities are designed to help you apply the content that you learned in this chapter to your position as a DSP. These reflection exercises correlate with important DSP knowledge or skills.

3. Find out about Person Centered Plans in your agency.



- a. What name has your agency given to the Person Centered Plan (OSP, ISP, IPP, IHP, IEP, etc.)?
- b. What title has your agency given to the people that coordinate the plan?
- c. Does your agency use Therap? If so, which modules do they use?
- d. If your agency does not use Therap, where are the Person Centered Plans kept?
- e. What parts are in each Person Centered Plan?
- f. What are your responsibilities related to the Person Centered

Plan?

- g. When and how can plans be changed?

To get the answers to these questions you can check with a supervisor, PC/QDDP, a co-worker or a person you support. Take a few minutes to study the Person Centered Plan. Look at the different parts. See if you can learn anything new about the person you are supporting.

4. Find out what a person you support knows about their Person Centered Plan.

- a. Can this person tell you what his or her goals are this year?
- b. Have you observed them learning or doing anything to reach their goals?
- c. What are you supposed to do to help the person reach his or her goals?
- d. Does the Person Centered Plan tell you when, where, and how to provide support to this person?

Check with the individual or with other support staff to answer these questions. The idea is not to quiz the person with the disability but to have a conversation about his or her Person Centered Plan. Does he or she understand the Person Centered Plan? What works for other people? What do you think would work?

### **Report what you learned and discuss with others.**

At a staff meeting, training session or when visiting with a supervisor, talk about the assignment and tell others what you learned. What surprised you? What did you find out? What are the next steps you should take to support the person? Is everyone carrying out the plan? Do you think it is working?

**The Team:** Most Person Centered Plans list the members of the team. Teams usually include the person with the disability, people who know him or her well, people they have asked to be part of their team, and other people with special expertise who can provide information that will help the team make important decisions with the person. Some individuals ask their families to participate and some do not. Some individuals may have a legal guardian to help them make decisions. Read about Mary and the people included in her team.

Mary is 34 years old. She has worked at the local grocery store for 8 years. She is legally capable of making her own decisions. She asks her friend **Susan** to be part of the team. Susan lives down the hall and they have been friends for 2 years. Mary has a job coach who helped her learn the job. Mary asks her **job coach** to be on the team. She asks **Marty** to be on the team too. Marty helps her budget her money and with shopping on the weekend. Finally Mary asks a **nurse** from the agency to come because Mary has diabetes and she needs good advice about her health. Mary also asks her sister **Darla** and her **Aunt Ashley**. **Barb**



**Barb** helps Mary get the team together and plan the meeting. Barb suggests that Mary invite **her boss**. Mary feels a little shy about that. Barb explains that since Mary has worked on the job for some time, she might not need a job coach in the future and her boss could help her feel confident about trying the job on her own. So Mary says, "OK."

Some of the people on Mary's team help support her at home and on the job. They are important because they can do the most to help Mary set new goals and meet them. Some members of the team provide special expertise in those areas. Some team members attend because they are family and friends. Mary is comfortable with her large team and the people she knows well. She is private about making life decisions but willing to have her boss attend because someone she trusts asked her to consider this. Here is another example of choosing team members based on the persons strengths, needs, and goals. Bob's team is smaller than Mary's.

*Bob is 29 years old. He is blind and deaf. He is in good health. He has significant intellectual disabilities. Bob's awareness of his world is limited to having a familiar routine and looking forward to his favorite meals and activities. People who know Bob well sign words into his hands to communicate. Bob feels the signs in his hands and recognizes what a few signed words signal (example when the sign for "pop/soda" is pressed into his hands he smiles and smacks his lips). Bob is not aware that he has a team or what a goal may be. Bob has been willing to try new activities that he thinks are exciting. For example, Bob tried riding in a tandem go-cart for the first time. He used his sign for "more" several times when the ride was finished. Bob does not like to manipulate objects or do work that he does not understand. So he has a volunteer job taking food items from various sites to the local food pantry. Bob likes loading and unloading these groceries. Bob's **father** attends his meeting. He is Bob's legal guardian and helps him make financial, medical and legal decisions. Bob's team meets in Bob's living room after work. **Char** who helps Bob at home is there. She has worked with Bob for six years.*



***Melanie** is there too. She only met Bob about two weeks ago. The speech therapist, **Cindy**, is there. Cindy designed the communication system to help Bob connect with his world. **Frank** is there too. He drives the van and takes Bob on his volunteer route. Bob's team is small. They have a lot of responsibility to help Bob live a meaningful life.*

## Self-assessment

Check your understanding of this section's content by completing this self-assessment.

5. List five people that are often found on teams.

Example: Person with a disability

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

**Following the Person Centered Plan:** Your job is to learn and follow the plan. This means that you need to read and understand the goals and objectives. The best way to follow a Person Centered Plan is to make a list of things that you need to do each time you work with the person. Add the steps that you need to complete less often.

<b>Joe's Person Centered Plan</b>	
<b>Goal: At the end of the year, Joe will make at least five of his favorite meals on his own so he can invite his family and friends to a dinner that he prepared and cooked himself.</b>	
<b>Things I will do to help Joe start</b>	<b>Things I will do every day/week</b>
<ol style="list-style-type: none"><li>1. Help Joe get photos of his favorite meals and put them in sheet protectors.</li><li>2. Make simple recipes with words and pictures that Joe can follow step by step for each meal.</li><li>3. Arrange for Joe to meet with friends to share/exchange cooking tips/stories.</li></ol>	<ol style="list-style-type: none"><li>1. Remind Joe to use his picture cookbook to select a meal to practice.</li><li>2. Help him practice two of the meals he chooses.</li><li>3. Assist Joe to circle the steps he needs help to complete.</li><li>4. Work with Joe to make difficult steps easier. Document your ideas.</li><li>5. Show Joe a simple graph of the progress he is making.</li></ol>

The Person Centered Plan may include tips for communicating with the person, steps for teaching someone to cook or shop, or ways to help someone stay calm when people ask them to work hard or when something happens that is upsetting. You may start supporting someone when their Person Centered Plan has been in place for a long time or just after a Person Centered Plan was developed. You may not agree with the Person Centered Plan. Follow the Person Centered Plan anyway. If the Person Centered Plan is not clear, make sure you ask a supervisor or the PC/QDDP for clarification. **Team members need to follow the plan as written.** As you get to know the person it might work better than you think. However, team members may suggest the need for another meeting if:

1. One or more goals have been met.
2. Events that might put the individual in harm's way have happened.
3. The person is acting in ways that will make it hard to achieve a goal.
4. The person experienced a life change and the plan no longer makes sense.
5. The person doesn't have the resources needed to make the plan work.

**Changing the Person Centered Plan:** Person Centered Plans can be changed whenever the team meets. Getting a team together may take time. The Person Centered Plan should be followed until the team can meet unless doing so would place the individual in harm's way. Any member of the team can ask for a meeting to consider changing the Person Centered Plan. Obviously the person with a disability has to agree to have a meeting. At most agencies, the PC/QDDP helps plan the meeting and coordinates supports. It may take time for them to schedule a new meeting but the team needs to respond as quickly as possible. Also, teams will include steps in the Person Centered Plan that give the team a lot of flexibility in carrying out the plan. See how one team did that for a person they support in the following example:



*Dora met with her team to consider the support she might need to move out of her parents' home and try living on her own. Because the team was not sure how this plan would work for Dora, they wrote a goal for Dora to try up to three different types of living arrangements: alone, with a roommate of her choice; or with a college student who was paid to share the apartment and provide support. Dora started the plan by living on her own. When she became lonesome and started bothering the neighbors for attention, Dora and her team realized it was time to switch to a different option. The team was able to respond quickly with the second phase of the goal.*

Obviously the support staff and other team members needed to talk often and work together to help Dora find a roommate and succeed in her goal to live apart from her parents. In Chapter 3 you will learn more about the roles and responsibilities of team members.

### Application Activities

The following activities are designed to help you apply the content that you learned in this chapter to your position as a DSP. These reflection exercises correlate with important DSP knowledge or skills.

6. Read each description of the parts of a plan. What is the title of each part?

\_\_\_\_\_ This section tells about personal preferences and what other people say about what the person has accomplished. It also includes information about what kinds of support is helpful.

\_\_\_\_\_ are outcomes or steps that, when met, lead to achievement of a goal.

\_\_\_\_\_ Teams often write out the steps staff members need to do to achieve each objective. This can include what to say and how to respond to provide support.

\_\_\_\_\_ are broad statements about what the person wants to accomplish in a big way and why. Each one needs criterion so that the team can tell when it has been met.

7. Read the goal below. List things you might do to help Sara achieve her goal soon after the planning meeting. List more things you will do every day or week. Talk it over with others to get ideas.

**Sara's Person Centered Plan**

**Goal: At the end of the year, Sara will send or respond to daily emails from family and friends without help from others. Sara has her own laptop and reads emails, recipes, lists, and short stories. She can copy words but tires easily.**

**Things I will do to help her start**

**Things I will do every day/week**

1.

1.

2.

2.

3.

3.

### Chapter 3: What are the roles and responsibilities of team members?

#### Did you know?

Team members know what is important to and for the individual with a disability. Team members' roles and tasks related to developing and caring out the plan are based on the team members' strengths and interests.

#### Objectives:

After you complete this lesson, you will be expected to:

- Tell or find out who the members of a team are.
- Give some examples of responsibilities that team members share in providing active support
- Tell others what role exchange means in your own words.
- Tell others why direct support professionals are important team members.
- Tell about other special team roles.
- Explain the steps an individual must go through if he/she demonstrates a need for support in decision making (guardianship)

**Policies:** Each agency has developed internal policies to guide the Person Centered Planning process. These policies and procedures may describe in detail the ground rules for conducting a meeting, working through conflicts, and resolving disagreements. Policies specify who will carry out different roles and how the plan will be recorded and stored.



**Joint responsibilities:** Teams that have a positive outlook and support each other will create the best plan possible. This involves showing up on time, dressing appropriately, listening, and sharing ideas and concerns. The team works with the person with a disability to create a Person Centered Plan that will support him or her in living a meaningful life. Teams meet at least once a year.



The team should meet in a place where the individual will be most comfortable—one that is big enough for the size of the group. Often teams meet in an agency conference room. Although, this location supports the serious work of the team, it can be scary for some people. Each person should be asked where they want their team to meet. A time of day that works for everyone should be selected. Remember the goal of the team is to involve the person with a disability to the greatest extent possible.

#### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

1. Describe at least two steps teams can take to make decisions about when and where meetings should be held.
  - a.
  - b.

**Role Exchange:** People with disabilities may not always accept support from someone they do not know well. They may not trust a team member with the most expertise if that person hasn't spent time with them. If this person is not available to visit the person at home or on the job for more than a few times, teams use a process called role exchange to overcome this challenge. The person with expertise often trains a direct support professional to use special techniques. The direct support professional teaches the specialist about what works for each person. The two team members form a partnership. They learn from each other in order to help the person with a disability. Learning from each other is called role exchange. Role exchange is a powerful tool that teams use to work together.

**Example:** After the meeting, the speech therapist teaches everyone who communicates with the person receiving services to use specific communication techniques. Parents, job coaches, residential support staff, behavior specialists, and nursing staff all begin to use these techniques whenever they visit with the individual. This approach helps the individual learn and practice communication skills in natural settings. The person is more likely to learn and remember these skills when they are taught in everyday settings. They are more likely to try the new techniques when they are modeled by someone they know and trust. The speech therapist monitors the person's progress, answers questions, and revises the program as needed.

### **Team Members:**

In the earlier chapters you read how people choose others to be on their team. Who is part of the team? Besides the person with a disability, who must be a member of each planning team and why? Here are the typical team members:

- A. The person with a disability
- B. Someone who can help the person plan the meeting and coordinate services (Often this will be a social worker or PC/QDDP but it can be anyone who is organized and has good communication skills.)
- C. People who will provide direct support to the person with a disability at home, at work or in the community
- D. Anyone with legal responsibility to make decisions for the person with a disability (a legal guardian or a parent for a minor child)
- E. People he or she invites to serve on the team, friends or coworkers.
- F. People with special skills or information who are willing to serve as consultants to the team

- A. People with Disabilities:** Many people with disabilities are excited to be meeting with their team. Some individuals know what they want in their life and can state their goals clearly. They invite people to the meeting and if given a chance, will tell the team what kind of support they need. Many people with disabilities need some support to structure the meeting and keep track of the decisions and outcomes. It is easy for individuals to get lost in the meeting conversation and lose track of what they set out to accomplish. Some people need a lot of support to understand the Person Centered Planning process. They may need someone assigned to help them understand what is said or grasp what might happen if proposed ideas are put into place. Sometimes people need help to prepare a list or set of pictures that show the team their preferences, progress, goals, and ideas. This kind



of support is often given by direct support professionals or support staff. Chapter 4 will discuss strategies to support the person during the Person Centered Planning Process.

**B. Program Coordinator/Qualified Developmental Disabilities Professional.** As you read in chapter 2, a PC/QDDP is also a part of the team. They are the people who help individuals plan and coordinate their meetings. These individuals need to be organized, have good communication skills, and have the ability to lead the team in solving challenges and resolving conflicts. The PC/QDDP usually meets with the individual before the meeting. He or she will typically invite direct support professionals to help the person prepare for the meeting. If the person with a disability is not able to themselves, the PC/QDDP usually sends out the invitations, leads the discussion, and summarizes the results of the meeting.

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

2. Describe 2 skills the PC/QDDP/meeting facilitator needs to have and special tasks that they may complete during a meeting.

**Skills:**

**Tasks:**

**C. Direct Support Professionals (DSPs):** Support staff are among the most important members of the team. They help the person at home, at work, and in the community. They are in the best position to see if the Person Centered Plan is working, if the person is actually receiving active supports during the week and on weekends and help the individual with daily problem solving. Yet, being part of the meeting may be intimidating or scary for support staff. Their input at the Person Centered Plan meeting is going to help determine what the person with a disability's Person Centered Plan is going to look like in the future. Also, direct support professionals help the people they support overcome any self-defeating behaviors and succeed in achieving their goals. The information that they document daily assists with assessments such as self-assessments, RMAPs, and/or IPOP. Direct support professionals are often asked to help individuals prepare for their meeting. They may even be asked to complete some of the assessments because the person with a disability trusts them. Direct support professionals play an important role in helping people with disabilities understand the discussion and decisions made during the meeting.

Sometimes direct support professionals lack confidence in their ability participate in the Person Centered Planning process. When people are unsure of what to expect, they often wait for someone else to take the lead. They may hesitate to share their real thoughts until after the meeting. Questioning the decisions made at the meeting on the way to the parking lot after the meeting won't help the person. Team members can avoid these challenges by preparing well. Ask your supervisor or the person responsible for planning the meeting what to expect and how to prepare. If you are not the person

who will be attending the meeting, be sure to share information that should be considered with the team members who will be participating. Remember that you will be carrying out the Person Centered Plan. You need to believe in the Person Centered Plan and the person you are supporting.

## Self-assessment

Check your understanding of this section's content by completing this self-assessment.

3. Which of the following describe ways that direct support professionals provide information that will assist the team in the Person Centered Planning process?
  - a. Assisting with assessments that are used in Person Centered Planning
  - b. Regular documentation
  - c. Supporting the person to prepare for his or her meeting
  - d. Sharing information at the meeting
  - e. Sharing information with others who will be attending the meeting
  - f. All of the above

**D. Family or Guardians:** People with disabilities often invite a parent to attend their meeting. Each person becomes their own legal guardian at age 18 unless the court appoints a parent or someone else to serve as a guardian. Agencies cannot share confidential information with parents after their child with a disability reaches the age of 18. There are two exceptions to this rule. 1) The person with a disability can and often does sign a release that allows the agency to share information with their parents. 2) The agency can share information when the parent or someone else has been appointed by the court to serve as a legal guardian. Even then, the role of the guardian may be limited to certain areas of responsibility such as financial, medical, or legal decisions. Sometimes the guardian may be responsible for all decisions.

Most people with disabilities want family members to share their lives and help other team members get to know something about their history and preferences. Family members have known this person for a long time and often are willing to help. For example, the person might need family support when moving, recovering from a surgery or illness or when a crisis occurs. Family can play an important role in a team meeting by helping the individual to accept adult roles. The relationship between child and parent gradually changes over time to more of an adult-adult relationship. They can let the team know about important supports that will protect and encourage their adult son or daughter. Some people are close to a brother, sister, aunt etc. and want them to be part of the team. As parents age, other family members may take over some supports or decision making roles in team meetings.



## Self-assessment

Check your understanding of this section's content by completing this self-assessment.

4. Number these statements from 1 to 4 in the order they should take place if an adolescent/adult demonstrates a need for support in decision-making.

- \_\_\_\_\_ The court appoints the parent as a legal guardian for financial and medical decisions only.
- \_\_\_\_\_ A parent petitions to become their legal guardian.
- \_\_\_\_\_ The PC/QDDP meets with the parent to discuss finances.
- \_\_\_\_\_ An individual approaches/reaches age 18.

**E. Friends or Co-workers:** Sometimes people with disabilities invite friends, classmates or co-workers to help develop the Person Centered Plan. As people move away from their parents' home, sometimes friends and co-workers become more important in their lives. When friends or co-workers are invited to a planning meeting, they should be given a role at certain times during the meeting. They may need encouragement to speak up as this experience may be unfamiliar to them. We don't want them to feel nervous when we ask questions about their friend or coworker. It is best to conduct the meeting as a conversation so that people are comfortable sharing their ideas and concerns.

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

5. Check all of the items below that make a true statement.

A person may want to invite his or her friend, classmate, or co-worker to the team meeting because they:

- \_\_\_\_\_ a. are experts in the team planning process
- \_\_\_\_\_ b. are important people in the person with a disability's life
- \_\_\_\_\_ c. help the person share in the team planning experience
- \_\_\_\_\_ d. know the agency policies and procedures
- \_\_\_\_\_ e. usually know the person well

**F. Consultants and supporting roles:** Many other people from the community or a support agency may be called by the team to help with the planning process. Sometimes they will be invited by the person with a disability or by the PC/QDDP. Examples may include: a health care professional, a behavior specialist or psychologist, a speech therapist, an employer, a co-worker, an occupational therapist, other support staff, or a minister or counselor. The consultant may share information with the team in different ways. Some will come to the meeting if asked. Others may provide a report or a list of suggestions for a team to consider. The people invited may depend on:

1. the wishes of the person with a disability.
2. unique needs that require special supports.
3. professionals who can help the team.
4. consultants that can describe support options.
5. community people who are experts about settings the person wants to use (i.e. members at a senior center, participants in a quilting group).

## Self-assessment

Check your understanding of this section's content by completing this self-assessment.

6. Name at least 3 people with special expertise who might advise team members or train direct support professionals in how to implement a person's plan.
  - a.
  - b.
  - c.

## Application Activities

The following activities are designed to help you apply the content that you learned in this chapter to your position as a DSP. These reflection exercises correlate with important DSP knowledge or skills.

7. Answer these questions about your agency's policies for developing person-centered plans.
  - a. Are the policies written down for you to follow? Yes/No
  - b. Where are any policies kept? \_\_\_\_\_
  - c. Does your agency use ground rules in a meeting? Yes/No
  - d. What informal rules are followed by staff? \_\_\_\_\_  
\_\_\_\_\_
  - e. Does the person you support understand or have a copy of his/her Person Centered Plan? \_\_\_\_\_
  - f. How can a direct support professional assist a person to understand his/her plan?  
\_\_\_\_\_  
\_\_\_\_\_

8. Here is a list of people who might be on a team. Describe how each of these team members contributes to the person-centered planning process. Tell why they are important.
  - a. Person with a disability
  - b. PC/QDDP or team facilitator
  - c. Direct support professional
  - d. Someone who knows the person well
  - e. Consultant

Michael Smull introduces a person centered thinking tool for clarifying roles and responsibilities in this video, *The doughnut* (5:50) <https://www.youtube.com/watch?v=gCtxICX9118>

This is a link to a preview the *Breaking Shells* video that follows two men with developmental disabilities that travel across South Dakota informing people who receive services that they have the right to make decisions that impact their lives (2:09)  
<http://www.tie.net/content/learning/resources/DVDs/breakingShells.htm>

## Chapter 4: How Can I Support People to be Active in Person Centered Planning?

### Did you know?

As a direct support professional, the work you do benefits the freedom and independence of another human being. Take satisfaction in knowing that the job you do is essential. Without you, this process will not work.

You are very important to the Person Centered Planning process because you...

- Know the person
- Understand what is important to the person
- Understand the person's communication style/nonverbal communication
- Have a trusting relationship with the person
- Support the person in different environments
- Are the individual the person turns to for assistance and support

Your job is to encourage and support. You are clearly an important part of each person's life. [[http://www.cmhcm.org/provider/centrain/Training\\_Units/PCP.pdf](http://www.cmhcm.org/provider/centrain/Training_Units/PCP.pdf)]

### OBJECTIVES:

After you complete this lesson, you will:

- Help people understand the purpose of a Person Centered Plan
- Support people in making every day plans and in being actively engaged.
- Find ways for people to plan or control what happens at the meeting
- Help people share strengths or achievements with the team
- Help people get feedback from the team
- Support people in planning goals and objectives
- Support people in reviewing their Person Centered Plan over time
- List ways to support individuals in measuring progress toward their goals and objectives

**My meeting or my Person Centered Plan:** You will often hear people with disabilities tell someone else about the meeting. The person may say "*Will you come to my meeting?*" Or sometimes you may hear "*I am having my meeting next week.*" Unfortunately, you are much less likely to hear "*This is my Person Centered Plan,*" or "these are my goals" or "*Would you like to see my Person Centered Plan for this year?*" or "*My Person Centered Plan is really working well!*" Why is it that people with intellectual disabilities talk about their meeting, but not their Person Centered Plan?"



One reason is that anyone can have a meeting but a Person Centered Plan is private. Still we all make plans so why is it that people with disabilities know more about having a meeting than they do about having a Person Centered Plan? There are several reasons for this but the most common ones are:

1. The Person Centered Plan that is created is talked about at the meeting but written later.
2. The Person Centered Plan is not usually written by the person with the disability.
3. The person with the disability often cannot read and understand the Person Centered Plan.
4. They may not be given a copy of the Person Centered Plan to keep.
5. They may not have a place to keep the Person Centered Plan safe.

6. They may not have a routine that has them check their Person Centered Plan until the next meeting.

This chapter will show you how to help individuals be active participants in creating Person Centered Plans and deciding if they are working. You will select different ideas to use depending on how the person you support likes to communicate and remember information. Over time, you may change or modify some of these activities. The important idea is to start getting people involved today!

**Making Person Centered Plans Real:** Person Centered Plans are real when the plans are actually used by someone to guide what happens. In order for a person with an intellectual disability to actually use his or her Person Centered Plan, it will need to:

- Use symbols the person can understand
- Be in a format the person can check and use frequently
- Be in a format the person can share with people who are helping carry out the plan

Sometimes Person Centered Plans are legal documents. There are laws that tell schools or provider agencies what to include in the plans they develop. This can make the Person Centered Plan harder to understand for someone with a disability.

There are many different ways that teams can create Person Centered Plans that people can understand and use. Different ideas work best for different people. Teams that experiment with creating easy to understand Person Centered Plans find that:

- All members of the team are better able to understand and follow the Person Centered Plans.
- People are more likely to go along with Person Centered Plans they help create.
- Problem solving skills are enhanced.

This chapter describes many ways you can help people with disabilities with Person Centered Planning. Our goal is to support people so they can:

- a. Get involved in the meeting
- b. Create Person Centered Plans that are useful to them
- c. Choose action steps and supports that work for them

Which activities you select depends on the person with a disability and their understanding of the connection between a Person Centered Plan and real life. Think about the people you support as you read this information. Do you know someone who might benefit? Which activities do you think people might like to try?

This video explains team members roles by *Matching support* (7:01)

<https://www.youtube.com/watch?v=ObTXp0wKFMO>

**Inviting people to the meeting:** One of the first steps that you can take to involve people with disabilities in creating their Person Centered Plan is to involve them in inviting people to the meeting. Read the list of steps below. Which steps could your agency suggest to a person who will be meeting with his or her team?

- Meet with the PC/QDDP before the meeting
  - Look at pictures or names of people who know you well
  - Select people to invite to your meeting
- Use simple words and clip art to make an invitation to the meeting
- Deliver the invitation in person or by email or mail
- Use a pre-recorded phone message to send to someone you plan to invite.
- Set the date. Put a sticker, clip art or date for the meeting on your calendar.
- View a video to help you remember what happens at a meeting.
- Ask someone else to take care of these details for you.



### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

1. Name three ways that people with disabilities can be supported to invite others to their meeting
  - a.
  - b.
  - c.

### Application Activities

The following activities are designed to help you apply the content that you learned in this chapter to your position as a DSP. These reflection exercises correlate with important DSP knowledge or skills.

2. Can you think of other ways that people can take control of their meeting?

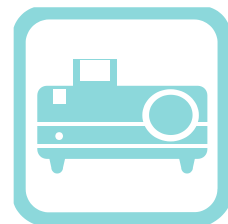
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**Sharing information in the meeting:** This involves sharing information about your goals, dreams nightmares and wishes. It can also involve talking about your strengths and needs. Finally it involves inviting other members of the team to weigh in on the discussion and tell you what they think. To get the person with a disability more involved in sharing information, staff might assist the person to:

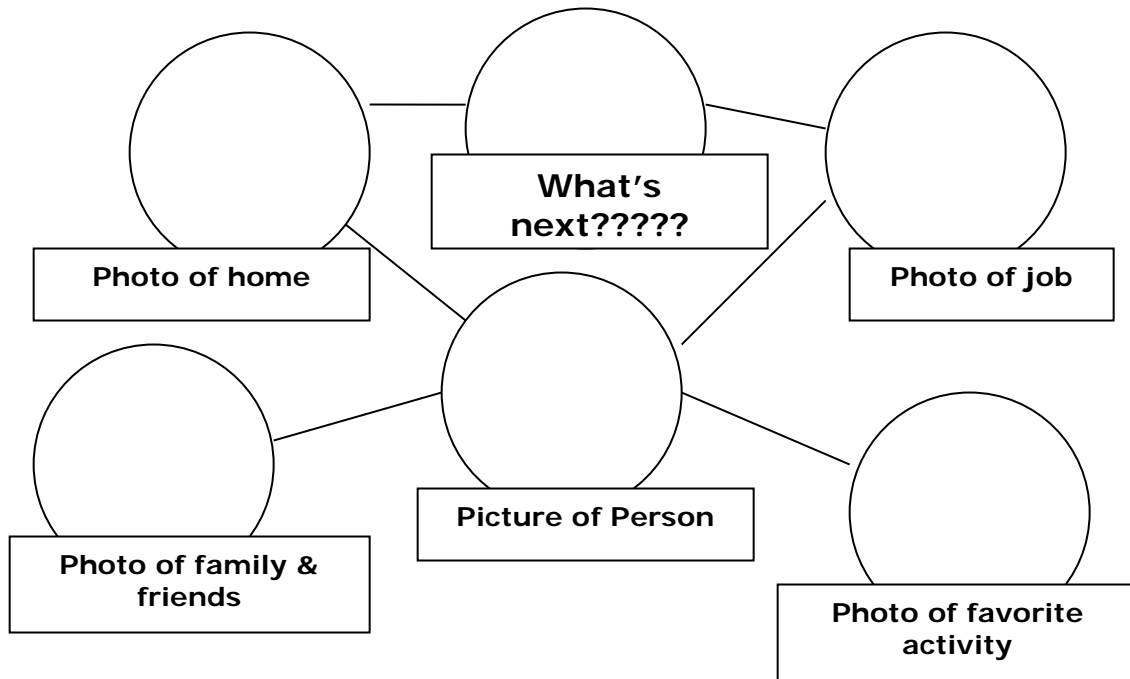
- Respond to a signal that it is time to share information.
- Bring ideas in a format he/she can share and understand. Have the person share ideas by clicking through the slides in a PowerPoint
- Invite other people who know them well to contribute
- Understand what other people are sharing or saying about them
- Tell others if they agree or disagree with what is said



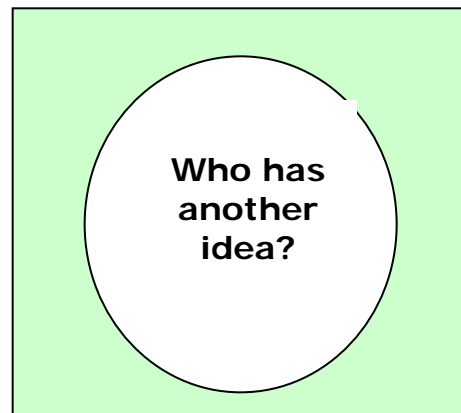
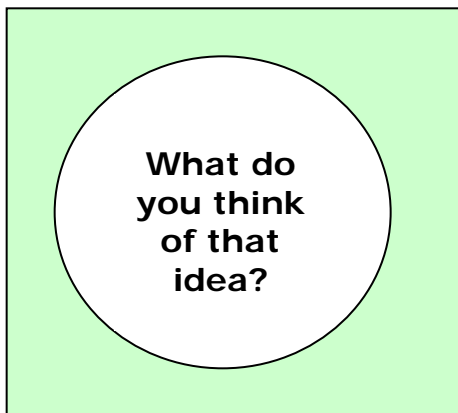
Many teams have experimented with ways to support people with information sharing. This can be done by:

- Drawing icons or stick figures by key words and ideas

- Using Power Point to display photos of key concepts or achievements
- Putting together a collage, scrap books or photo diary of key events
- Using concept maps to display important points about a person



Using switches to make key statements that direct the group to respond. Example:



### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

3. Frank always sits quietly at his meetings but does not respond well when his team asks him questions in the meeting. You know Frank does not want to be put on the spot but has a lot to share. What would you do to help him share information at the meeting?

**Reviewing the previous Person Centered Plan:** At some point in the meeting the team will discuss current goals and objectives and decide if they are met. To help people understand concepts about goals and progress the team can use many different ideas:

- Pie charts that show how much of a goal is accomplished
- Glasses that are filled, partially filled or empty
- A game board with the goal written at one end and a path leading to the goal.
- A figure on the game board that can be moved back and forth
- An hour-glass that is empty or full (an egg timer can be used)
- A picture of a head and shoulders with key thoughts the person shared. The person's ideas or suggestions by other members of the team can be listed or displayed in bubbles around the picture.

These activities are just examples. The point is to be creative and try different ways to help the person understand what is happening and participate at some level in reviewing their Person Centered Plan.

Some people will not be able to understand these ideas. They are just too abstract. In that case it is best to create understanding or awareness of:

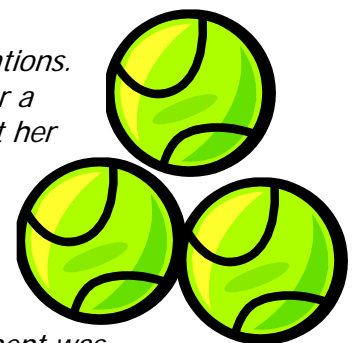
- a. How satisfied the person is with their daily routine. The routine should reflect activities that are helping the person achieve goals set by the team (with their interests, strengths and preferences in mind).
- b. How well the routine is working to help the person achieve their goals.

To help people understand concepts about satisfaction with a daily routine, the team can use concrete activities to involve the person in communicating about their day:

- Bring remnants or objects representing the activities they like/dislike to the meeting. Display them for the team to consider.
- Bring photos of the person in special moments that show a positive or negative reaction to typical events.

Objects can also be used outside of the team meeting to help people make sense of a Person Centered Plan. Example:

*Mary would begin to yell and scream each time she became bored or frustrated at work. Mary was blind and had significant cognitive limitations. She did not speak or understand abstract symbols. Her team gave her a bowl with three tennis balls. They built in special activities throughout her day that they hoped she would enjoy. When it was time for the activity they would help Mary to feel her bowl. Each time she began to yell and scream they waited until she was calm again. Then they helped her (physical assistance) to remove one of the tennis balls. When the bowl had 1, 2 or 3 balls left the reinforcement was delivered. If the bowl was empty (3 or more outbursts) no reinforcement was delivered. Mary quickly learned to leave one ball in the bowl through self-control. The team gradually helped her learn better self-control. Soon all 3 balls were left in the bowl.*






This story shows how objects can be used to give information to people about their Person Centered Plans and lives even when they do not understand much of the conversation at a team meeting.

**Captioning team discussion and decision making:** Help people get involved in remembering what has been discussed and decided. Again there are many different ways to help teams with this process. Options include:

- Ask someone to record for the team as the meeting goes on
- Use a large font
- Write only key phrases and drop in clip art icons. Don't worry if the objectives are perfectly worded for the purpose of this activity. The PC/QDDP can work on the wording required for a measurable behavioral objective after the meeting.
- Ask the person to approve or add to sections
- Give this to the person at the end of the meeting

An example of this approach is shown below.

### John's Person Centered Plan for 2008

	<b>Goals &amp; Objectives</b> (just enough information to get the team to understand the main idea)	<b>Help &amp; Support</b>
At work 	Get a job at Taco Johns <ul style="list-style-type: none"> <li>• Apply for work</li> <li>• Take a tour</li> <li>• Interview</li> <li>• Get hired</li> </ul>	Jody will help John do one step each week until the goal is met.
At home 	Learn to cook 3 Italian meals by himself <ul style="list-style-type: none"> <li>• Spaghetti</li> <li>• Hot dish</li> <li>• Lasagna</li> </ul>	Pete will help John follow a Simple recipe for the Spaghetti and hot dish. They will use a microwave Lasagna for that meal. They Will cook 2 x a week.
In the community 	Invite a friend to join him for popcorn & a movie 2 x a month without help.	Pete and Joe will help John <ul style="list-style-type: none"> <li>• Call a friend</li> <li>• Rent a movie</li> <li>• Buy a ticket</li> <li>• Make choices</li> </ul>

This Person Centered Plan does not have all the words or criteria that the team may set. It will let John have a plan that is useful to him. More icons can be added if needed. Direct support professionals can help to create this type of chart at the meeting. It can be posted on a fridge or in the person's bedroom. When thinking about this kind of Person Centered Plan, many teams ask about privacy. Who should see this kind of chart? What about confidentiality?

Think about your answers to these questions.

- Can we ask the person, how much information they want to share?
- Is there anything on the chart that tells people they have a disability?
- Is there anything on the chart that tells people the person has a plan associated with having a disability (example – IEP or IPP or IHP)?
- Is any of the information deeply personal reflecting things that only people with disabilities do?

People with disabilities often need help to use Person Centered Plans as a guide for decision making after the meeting. To make this activity real, the direct support professional can:

- Assist the person to review the Person Centered Plan at periodic intervals
- Help the person put a reminder on their calendar to check the Person Centered Plan
- Help the person practice sharing his or her Person Centered Plan with others
- Help the person notice and cross off or initial steps that have been completed

### Directing or Controlling Team Activities

In many meetings, the agenda and discussion are led by the PC/QDDP. But people with disabilities can often manage some or all of these activities. Their comments may not be as sophisticated as a professional's, but there is much that the person can do. We know from research that giving people a sense of choice and control is important for development of self-determination.

### Application Activities

The following activities are designed to help you apply the content that you learned in this chapter to your position as a DSP. These reflection exercises correlate with important DSP knowledge or skills.

4. Read the list of actions that take place in a meeting. Circle the ones that you think the people you support might like to try?
  - Thank people for coming
  - Say "Let's get started."
  - Pass out an agenda
  - Show a copy of the goals from last year
  - Say "Tom helped me write 2 things I am good at."
  - Say "Does anyone else have something to add?"
  - Share a picture of dreams for the future
  - Say "What do you think of that idea?"
  - Say "How can we make that happen?"
  - Say "Will you write down these ideas for me?"
  - Say "Who will be responsible for that?"



Some people coordinate their own meeting. However, some people do not. Some of the reasons why this doesn't happen may include:

- The person doesn't know what to say
- The person doesn't know when to say it
- The person doesn't know what to do
- The person hasn't had a chance to practice
- The person hasn't seen someone else they think is "like me" try it
- We have always done this some other way
- We would have to learn new ways of doing things and we aren't sure that it would work
- We would have to stop doing things the old, familiar way

## Application Activities

The following activities are designed to help you apply the content that you learned in this chapter to your position as a DSP. These reflection exercises correlate with important DSP knowledge or skills.

- Suppose when people came to the meeting they had an agenda to help them. Look at the sample agenda below. Read the headings: What I Do, What I Can Say, and What's Next. Now fill in the next blanks with some examples of your own.

Taylor's Meeting		
What I Do	What I Can Say	What 's Next
Thank people for coming	<ul style="list-style-type: none"> <li>Thanks for coming</li> <li>I'm glad you came</li> <li>It's good to see you</li> </ul>	Go to the next step
Start the meeting		
Share your goals		

This format will not work for everyone. It can be too overwhelming for some people. The important thing is to recognize that the process of leading the team can be broken down into steps and people can be encouraged or taught to take responsibility for many of these steps. Some teams have had success by:

- Inviting people to learn and use one or two steps
- Giving people lots of chances to lead or organize activities throughout the year
- Helping people keep "problem solving" logs of how to handle different challenges
- Putting all the steps into a PowerPoint and having the person lead the meeting by clicking on the slide with the questions pre-printed for the team. For some people it might be helpful to embed an audio recording of the question in the PowerPoint.

Direct support professionals can be very helpful when they assist people to get ready for this new role in a team meeting. They are the ones who may help the person get familiar with an agenda, practice, make contacts, and even put their ideas into a PowerPoint, video, or audio recording, etc. You can make an important difference in the amount of control people with disabilities have in their own meetings.

**Visualizing Goals and Objectives:** Writing goals is one of the hardest steps for any team. The person with a disability may have difficulty with this part of Person Centered Planning. If we are not careful, during this part of the meeting the person will just sit and listen to others talk about them. If we are lucky, they will chime in and say: "Yeah – what she said."

People write goals from a picture they form in their mind. Getting people involved in thinking about "what might be" is helpful. The simple chart with goals that we looked at before is one way to begin

visualizing goals and objectives. Teams often experiment with other ways to help people think about the future. This can be done by:

- Sharing ideas of what other people are doing, where they are living, working etc.
- Choosing ideas that match the activities that you would like to do
- Bringing photos or objects that represent future possibilities to share at the meeting

This same process can be used to represent “nightmares” or worst case scenarios the person wants to avoid. It is useful for planning teams to collect a gallery of work or living option photos. Search for photos online using Google Images. This can be a fun and informative activity if staff include the person with a disability in the search. Looking for images and talking about possibilities helps direct support professionals learn what is important to the person. It also helps us find out what the person doesn't know and experiences that might help the person achieve a more meaningful life.

### **Measuring When Goals or Objectives Are Met**

There are many different approaches that teams use to involve the person in deciding if a goal has been met. Remember that often people with disabilities will tell us what they think we want to hear. So it is important to help people feel free to say what they really think and learn how to be objective in deciding if something has happened or not. Here are some ideas other teams have used.

1. Videotape the person in an activity. After watching the video together, answer questions about what has been accomplished. Compare answers. Discuss differences.
2. Create a folder or scrapbook of accomplishments. Add to this from time to time. It helps the person notice what they are doing well. It's good for self-esteem and can serve as motivation to keep trying to learn new things.
3. Make a list of steps or goals you think the person has achieved. Invite someone they trust to review the list. See if they agree. If not, decide together what needs to happen. This approach puts the person in the driver's seat.
4. Use objects or counters whenever a task or goal is attempted. Help the person decide on an all or nothing basis. Example: All the boxes are filled means the goal is met.
5. Use bar charts or line graphs to show progress so that when the line is at the top or enters a shaded area, that means the goal is met.



### **Self-assessment**

Check your understanding of this section's content by completing this self-assessment.

6. Think about a person you support. Describe one example of how you could involve the person in deciding if he/she has met a goal or an objective.

### **Opportunities for Practice**

Suppose someone wanted you to try a new activity. Suppose you had never tried it before AND you had never seen someone else do that activity either. Would you be nervous? Do you think you would want a chance to practice?

People with disabilities will need opportunities to practice any/all of the ideas described in this module. Practice involves trying something over and over until you can do it without mistakes.

Although a person with a disability may have gone to many meetings, that does not mean they have observed what other people at the meeting were doing. They may be aware that someone was talking and even commented themselves. That does not mean they will be ready to imitate that person. Often the model used is too complex for the person to remember or pick out what to repeat.

When you teach new ways of getting involved, showing the person how to do the activity will not be enough for the person to feel confident. You will need to offer them opportunities to actually try out the activity many times. A group experience may work best so they can see several people doing the activity. They won't feel like they are the only one trying this technique.

### **Celebrating Accomplishments**

It is easy to focus on the negative. When people with disabilities accomplish something, it may have taken a great deal of effort. What do teams in your agency do to celebrate accomplishments? These celebrations can help people who need extra attention (some people do) and create a hunger for working harder or doing more. Here are some activities that other teams have tried.

- Bring a cake
- Have a toast
- Give a certificate
- Make an announcement
- Give a round of applause
- Take pictures
- Put a page in the scrap book
- Make a CD the person can replay



This module is just the beginning to help you understand how you can get involved in helping people take charge of their lives and make plans. Good luck!

### **Application Activities**

The following activities are designed to help you apply the content that you learned in this chapter to your position as a DSP. These reflection exercises correlate with important DSP knowledge or skills.

7. Check any of the items below that are true.

- a. Person Centered Plans become "real" when the plans are written by the team
- b. Person Centered Plans become "real" when the plans are used by someone as a guide
- c. Person Centered Plans must be developed using technical terms in order to meet funding and accreditation standards.
- d. Person Centered Plans written in easy to understand language with picture symbols increase the likelihood that the person with a disability will be able to use the plan.

- \_\_\_\_\_ e. Some Person Centered Plans are legal documents. They cannot be adapted for people with limited reading ability.
- \_\_\_\_\_ f. While some Person Centered Plans are legal documents, a simpler copy can be made.
- \_\_\_\_\_ g. Easy-to-understand Person Centered Plans are created only for the benefit of the person with a disability.
- \_\_\_\_\_ h. Easy-to-understand Person Centered Plans benefit many members of the team.
- \_\_\_\_\_ i. People are more likely to go along with Person Centered Plans if people who know them well helped create the Person Centered Plan.
- \_\_\_\_\_ j. People are more likely to go along with Person Centered Plans they help create.

8. Match the step in the team process with the examples for increasing participation by the person with a disability.

<b>Steps in Person Centered Planning</b>	<b>Strategies for Increasing Participation</b>
a. Review the previous goals	_____ Bring ideas in a format he/she can understand
b. Share information with the team	_____ Set the date. Put a sticker, clip art or date on your calendar
c. Plan the meeting	_____ Use visual aids to show how much has been accomplished (graph, pie chart, etc.)
d. Lead the meeting	_____ Put all the meeting steps into a PowerPoint and show the person how to advance each slide.
e. Capture team discussion	_____ Ask someone to record discussion and decisions during the meeting
	_____ Bring photos that show some of this person's strengths and dreams for the future
	_____ Meet with the PC/QDDP. Look at photos of people who could attend. Select pictures of people to invite.
	_____ Use bar graphs that show how much is accomplished
	_____ Record important decisions using clip art and key words.
	_____ Record an audio file of pivotal questions to ask the team. Help the person activate it at key points in the meeting.

9. List at least two skills that people with disabilities may learn from Person Centered Planning.

## Chapter 5: Introduction to Person Centered Career Planning

### Did You Know?

There is a dramatic difference in employment outcomes between people with disabilities and people without disabilities (ODEP, 2015):

#### Labor Force Participation

- People with disabilities: 19.2%
- People without disabilities: 68.3%

However, people of all abilities are demonstrating their desire and capacity to contribute to society and gain the benefits of meaningful work. Identifying and supporting employment goals can be accomplished through the Person Centered Planning process.

### Objectives:

After you complete this lesson, you will be expected to:

- Tell important outcomes of meaningful work
- Explain why there is an increasing focus on employment outcomes for people with disabilities
- Explain how Person Centered Planning can support employment outcomes
- Describe how planning is individualized for people based on their path to employment
- Describe the Discovery Process
- Explain why people with disabilities may need extra support in identifying employment possibilities
- Describe how the Person Centered Team can support people at every stage of their path to employment
- Translate life interests into work possibilities

### Why is there an Increasing Focus on Employment Outcomes for People with Disabilities as a Part of Person Centered Planning?

Over the past several years, advocates, government agencies, policy makers, providers, and people with disabilities have supported increasing opportunities for integrated employment for people with disabilities (I/DD). Federal agencies including the Departments of Education, Labor, Justice, and Health and Human Services have identified employment of people with significant disabilities as a national priority through policy and regulations. These entities urged self-advocates, families, service providers, and employers to consider the benefits of integrated employment for people with disabilities and work together to improve employment outcomes for all people with disabilities.

In 2012, the National Governor's Association sponsored a national initiative to increase employment outcomes among individuals with disabilities called, *A Better Bottom Line*. Specifically, the initiative focused on the employment challenges that affect individuals with significant disabilities and the role that both state government and business can play in facilitating and advancing opportunities for these individuals to be gainfully employed in the competitive labor market (NGA, 2012). This is a video of Governor Markell's press conference announcing the Better Bottom Line initiative (33:47)

<https://www.youtube.com/watch?v=cFgbFHwVfZE>

In 2011, the Centers for Medicare and Medicaid Services published an Employment Bulletin. (Available online: [http://dhs.sd.gov/dd/documents/CMS\\_employment\\_bulletin.pdf](http://dhs.sd.gov/dd/documents/CMS_employment_bulletin.pdf)). In this bulletin CMS highlighted the importance of competitive work for people with and without disabilities and their goal to promote integrated employment options through the waiver program. Among other best practices, the bulletin emphasized the critical role of Person Centered Planning in achieving employment outcomes. In the bulletin CMS stated:

*Work is a fundamental part of adult life for people with and without disabilities. It provides a sense of purpose, shaping who we are and how we fit into our community. Meaningful work has also been associated with positive physical and mental health benefits and is a part of building a healthy lifestyle as a contributing member of society. Because it is so essential to people's economic self-sufficiency, as well as self-esteem and wellbeing, people with disabilities and older adults with chronic conditions who want to work should be provided the opportunity and support to work competitively within the general workforce in their pursuit of health, wealth and happiness. All individuals, regardless of disability and age, can work – and work optimally with opportunity, training, and support that build on each person's strengths and interests. Individually tailored and preference based job development, training, and support should recognize each person's employability and potential contributions to the labor market.*

This video is a short documentary featuring several people with disabilities and their bosses and their jobs (13:45) <https://www.youtube.com/watch?v=LCa02lgV0IO>

## Self-Assessment

Check your understanding of this section's content by completing the self-assessment.

### True or False

- \_\_\_\_\_ 1. Actions by Federal agencies suggest that employment of people with significant disabilities is a national priority.
- \_\_\_\_\_ 2. Federal agencies are the only entities advocating for increasing integrated employment options for people with disabilities.
- \_\_\_\_\_ 3. Person Centered Planning plays a critical role in increasing employment outcomes for people with disabilities.
- \_\_\_\_\_ 4. Which of the following are important outcomes that people can achieve through meaningful work:
  - a. improved physical and mental health
  - b. improved self-esteem
  - c. wages
  - d. all of the above

## What do People with Disabilities Want and Need to Have Successful Employment Outcomes?

Studies have found the people with disabilities want opportunities to do meaningful work, demonstrate their skills and talents, choose their own careers, and have the same opportunities for career advancement as people without disabilities. Some of the reasons people with disabilities want to work include: earnings to pay bills, buy things, and go places, independence, learning new things, opportunities to meet new people and make new friends, making a

contribution, better physical, emotional, and mental well-being, productivity, and the admiration and respect of others (Windsor, Sulewski, Flippo, & Butterworth, 2015; SD DHS, 2015).

In a survey conducted by the South Dakota Employment First Alliance subcommittee for Person Centered Practices (2014), self-advocates, families, and providers said that one of the major barriers to increasing the number of people in integrated work settings is low expectations related to employment for people with disabilities. In recent years, focus has been placed on meaningful days and helping people find more of what's meaningful to them. Work or employment faded into the background for many as they pursued other interests and hobbies. The report stated:

*While it is vital that all people have meaningful days and lives that are full and rich with experience, work cannot be overlooked as a key component to this. As adults we all seek to have full, meaningful lives and for many that includes having a job that provides us with income and thereby shelter, food, clothing, and the means to pursue our other hobbies and interests. For most people, our interests, hobbies, and dreams are achieved mostly due to our employment.*

*Through work, we also build social capital. An identified area of need across South Dakota and beyond has been to assist people to make real connections in their communities and create natural support networks. Employment is a natural place for these connections to begin. While at work, we get to know our colleagues, find common interests and build meaningful, reciprocal relationships. Making these connections is vital as we strive to find ways to support people to realize their dreams.*

*An expectation to work translates to an expectation that employment is presented as a high priority to working age adults and that they are provided with information about how work will impact their life, and that the conversation continues as people's lives shift and change.*

Individuals with disabilities say they need the following to accomplish their employment goals (Winsor, et al, 2015):

- Support and assistance offered in a way that allows for individual choice
- Encouragement to pursue employment from support providers and families.
- Opportunities to do meaningful work, demonstrate their skills and talents, choose their own careers, and have the same opportunities for career advancement as people without disabilities
- Respect

## **Self-Assessment**

Check your understanding of this section's content by completing the self-assessment.

- \_\_\_\_\_ 5. Studies have found that people with disabilities want opportunities to:
- a. Do meaningful work
  - b. Demonstrate their skills and talents
  - c. Choose their own careers, and have the same opportunities for career advancement as people without disabilities
  - d. All of the above

## True or False

- \_\_\_\_6. One of the major barriers to increasing the number of people in integrated work settings is low expectations related to employment for people with disabilities.
- \_\_\_\_7. One benefit of integrated employment can be an increase in connections and social capital.
- \_\_\_\_8. Encouragement from professionals and families has little impact on a person's choices to pursue integrated employment.

## Employment Guide to Planning

To achieve positive employment outcomes, work must be presented as a high priority across the lifespan. Families, young adults in high school, working age adults and the members of their support network need information about work, career exploration, employment supports, and how work will impact the person's life. These important conversations must continue and be adapted as people's lives change.

The Oregon Path to Employment (2011) is a tool used as a part of the Person Centered Planning Process to prepare for discussions with individuals, families, teams and others to choose and implement supports that will lead to a Path to Employment. This graphic (Coulson, 2015) illustrates the paths to employment for each stage of career development.



The tool identifies sample questions and directions based on the person's response. Suggested action plans for inclusion in the Person Centered Plan are individualized based on person's current path. The various Pathways to Employment include:

1. The person currently has a job or career
2. The person is unemployed or underemployed and wants a job this year
3. The person is unemployed and wants a job within two years.
4. The person is currently not focused on employment
5. \*The person is still in high school and planning for employment after graduation.

\*Note: The South Dakota Department of Human Services adapted the tool and added the fifth path. This version of the tool also includes a column with suggestions on Tools to use to support the person in this Path. The South Dakota Department of Human Services, Division of Developmental Disabilities' *Person Centered Employment Planning Guide* is included in the Appendix and available online

[<http://dhs.sd.gov/dd/documents/SD%20Person%20Centered%20Employment%20Guide.pdf>]

## Self-Assessment

Check your understanding of this section's content by completing the self-assessment.

### True or False

- \_\_\_\_\_ 9. To achieve positive employment outcomes, work may need to be presented as a high priority across the lifespan.
- \_\_\_\_\_ 10. The person centered team will need to provide individualized support to each individual based on where the person is on the path to employment.
- \_\_\_\_\_ 11. Every person with I/DD, who isn't currently employed, understands the value of work wants to be employed.
- \_\_\_\_\_ 12. \_\_\_\_\_ often need information about work, career exploration, employment supports, and how work will impact the person's life.
  - a. Families of the person with a disability
  - b. Young adults in high school and working age adults with disabilities
  - c. Members of the person's support network
  - d. All of the above

## Discovery and Person Centered Planning

Some people with disabilities (but not all) need a very detailed planning process, before actively seeking a job. Many people with disabilities, have had limited (or no) work and life experience on which to base job search decisions. They also have limited expectations for themselves. Some people with disabilities have also had few opportunities to make decisions. They are used to letting other people make decisions for them. Some job seekers may not be sure of what type of job to try. The people who support them may also struggle to identify a successful job match. The person may have ideas about the type of job he/she may enjoy based on limited information. He or she will need support to figure out how to turn that idea into a job (ICI, nd).

The discovery process is a comprehensive planning support for people who need intensive individualized efforts to find a job. The process identifies tasks the individual could perform. It also informs the team about other factors that will help the person be successful at work. Discovery identifies assistive technology needs, environmental supports, and additional support needs that we don't find using traditional vocational assessments (Coulson, 2015).

During discovery we talk to those who know the job seeker and observe him/her in different community and home settings. The person helping with Discovery spends time with the person during activities that make up the person's typical day as well as observing the person in unfamiliar settings that are of interest to the person. This process helps identify personal preferences and conditions for successful employment as well as contributions the person could make at a job (Callahan, nd).

The purpose of the Discovery Process is to answer the question, "Who is this person?" It allows each person's gifts to be recognized and appreciated without comparing people to others or to arbitrary standards. This chart helps explain what Discovery is and clarifies what it is not (WISE, 2015):

<b>What is Discovery?</b>	<b>Discovery is Not</b>
<ul style="list-style-type: none"> <li>• Spending time with a person to take a close look at their life.</li> <li>• A strategy to translate life activities into job possibilities</li> <li>• A process to find out who the person is in as many aspects of life as necessary to form a career plan.</li> <li>• A way to identify the contributions the person can/could make</li> <li>• A way to discover people's strengths in places familiar and comfortable.</li> <li>• A way to go beyond what we know about a person and find things we didn't know</li> <li>• A way to look at the life a person has led; their current life; and the life the person wants to lead</li> <li>• Descriptive</li> </ul>	<ul style="list-style-type: none"> <li>• Standardized testing or assessment</li> <li>• Deficit or problem based</li> <li>• A list of likes, dislikes, job titles</li> <li>• A way to compare people against others or standards</li> <li>• Asking, "What do you want to do?"</li> <li>• Evaluative</li> </ul>

The Discovery Process is especially suited for matching a job seeker to work that make sense. It may include several trial work and/or volunteer experiences that allow the job seeker to test out preferences and skills. It also helps identify tasks in which the person may be employed and support needed for them to be successful.

The Discovery Process may take several months. But learning about the person is only the beginning. The critical next step is to convert what is learned about the person into a job. During this phase, information from the person's typical daily life is used to (Condon, 2012):

- Clarify support needs and conditions for success. When does the person do their best?
  - Successful strategies and needed supports
  - Social and physical conditions that will help ensure the best performance
- Convert interests into job possibilities
  - What is the individual motivated to do without being asked? How can these be related to employment?
  - What contributions has the person made and how could these be translated to employment?
    - Identify tasks that the person does and could do with training
    - List the skills involved in performing the tasks
    - Generalize these skills to additional tasks the person could do

### **Self-Assessment**

Check your understanding of this section's content by completing the self-assessment.

### **True or False**

\_\_\_\_ 13. Everyone with a disability needs support with discovery process before actively seeking a job.

14. Which of the following are reasons that people with disabilities may need extra support in finding meaningful work? (More than one answer may be correct)

- a. limited work and life experience on which to base job search decisions
- b. limited expectations for themselves
- c. limited experience in making decisions for themselves
- d. supporters sometimes have difficulty identifying successful job matches
- e. limited information about jobs

15. Which of the following are descriptors of the Discovery Process?

- a. A way to compare people against others or standards
- b. Spending time with a person to take a close look at their life
- c. Deficit or problem based
- d. A way to discover people's strengths in places familiar and comfortable.
- e. A strategy to convert life activities into job possibilities
- f. A way to look at the life a person has led; the current life; the life the person wants to lead.
- g. Planning support for job seekers who need intensive individualized efforts
- h. Can be completed in an afternoon
- i. Especially suited for matching an applicant to job possibilities that make sense

\_\_\_\_\_ 16. The next step after Discovery is to translate what was learned about the person into \_\_\_\_\_.

- a. Assessment scores
- b. Job possibilities
- c. Volunteer opportunities
- d. Goals and objectives

### **True or False**

\_\_\_\_\_ 17. Discovery is the last step in finding a person a job.

### **Employment Profiles**

While there are many different formats for presenting what has been learned about the job seeker during the Discovery Process, they all have the same goal – to inventory (make a list) personal qualities of the job seeker and assist in a successful job search. Effective Discovery and employment profile development will positively impact the person's satisfaction with their job. It will also enhance job retention and their long-range career development.

The Office of Disability Employment Policy (ODEP) included "Positive Personal Profiles" (PPP) in their online Integrated Employment Toolkit [<http://www.dol.gov/odep/ietoolkit/>] as a support strategy for helping job seekers find and keep jobs (Tilson, nd). The PPP can form the basis for developing goals in the Person Centered Planning and ensures that the team has a clear picture of the person's positive qualities as well as where they may need support or accommodations to be successful at a job. A PPP describes the person's

- 1) Dreams and Goals
- 2) Interests
- 3) Talents, Skills, and Knowledge
- 4) Learning Styles
- 5) Values

- 6) Positive Personality Traits
- 7) Environmental Preferences
- 8) Dislikes
- 9) Life and work experience
- 10) Support Systems
- 11) Specific Challenges
- 12) Creative Solutions and Accommodations
- 13) Creative Possibilities and Ideas

A template for a Positive Personal Profile and a sample completed Personal Profile are included in the Appendix. For a full explanation of each section, visit the ODEP website[<http://www.dol.gov/odep/i toolkit/publications/501.pdf> ] The outcome from the Positive Personal Profile activity is documentation of what was learned by the about the person and how it relates to an employment goal. The profile should convey to the team the person's interests; strengths, environments that would foster success, activities, and learning modalities in which the job seeker is at best; types and methods of effective supports; assistive technology needs; accessibility needs; and present level of performance; and current or potential employment possibilities.

### **Self-Assessment**

Check your understanding of this section's content by completing the self-assessment.

- \_\_\_\_18. \_\_\_\_ documents what was learned through the Discovery Process.
- a. Employment Profile
  - b. Resume
  - c. Case file
- \_\_\_\_19. The Employment Profile can be used to \_\_\_\_.
- a. form the basis for developing employment goals in the Person Centered Planning Process
  - b. help ensure that the team has a clear picture of the person's positive attributes
  - c. identifies supports or accommodations that will help ensure that the job seeker will be successful at a job
  - d. All of the above.

### **True or False**

- \_\_\_\_20. Challenges the person experiences are not included in a Positive Personal Profile

### **Developing Employment Goals during Person Centered Planning**

The activities during the portion of the Person Centered Planning meeting devoted to setting an employment goal will vary depending on where the person is in their Path to Employment. If the person is of working age and currently not focused on employment, the person may need support to consider how their present plan and life activities, experiences, and interests may lead closer to employment in the future. The plan may focus on how preferred activities that could be related to future employment will be identified and ways these may inform future decisions related to employment (SD DHS, 2015).

For individuals who are currently on a path to employment but not currently employed, the Discovery Process and the resulting Employment Profile are the foundation on which the person

and their team can set the employment goals. During this part of the meeting, the team is focused on employment possibilities rather than impossibilities or limitations. Marc Gold and Associates recommend that the team describe a job development plan in the form of a blueprint that includes (Callahan, nd):

- What works and doesn't work for the individual
- The person's preferences, contributions, and conditions for employment
- The types of job tasks the person hopes to have in their future job
- Specific employment sites where a job might be developed for the job seeker
- Employment leads and possible employers

If the person is currently in a job/career and is satisfied with their current job and earnings, then the focus will be to maintain or improve the outcomes of their current job (e.g. more or better hours, pay, expanded job responsibilities, etc.). However, if the person indicates dissatisfaction with their current job and/or earnings, but clearly wants to work or change work situations, the team will want to support the person through the process described for a person who is currently on a path to employment but not currently employed.

Teams need to develop processes that enable job seekers to review their current work situation and move on to other job options when desired. Traditionally, job seekers with disabilities have had to develop job-related problems or lose their jobs before further career planning would be offered. If we are committed to Person Centered Career Planning, we will take the time to ask people if they are satisfied with their jobs or if they have any concerns. Remember the obvious: People's likes, dislikes, hopes, dreams, and aspirations change over time (Conson, Fichera, & Dreilinger, 2003).

This video demonstrates the importance of a meaningful career to one person with intellectual disabilities: *Careers for People with Intellectual Disabilities* (4:29)  
<https://www.youtube.com/watch?v=PhPIi9KF4Cw>

## Self-Assessment

Check your understanding of this section's content by completing the self-assessment.

### True or False

- \_\_\_\_\_ 21. The team needs to consider where the person is in their Path to Employment when setting Employment goals during the Person Centered Planning meeting.
- \_\_\_\_\_ 22. If a person is not currently focused on employment there is no need to discuss employment at the Person Centered Planning meeting.
- \_\_\_\_\_ 23. For individuals who are currently on a path to employment but not currently employed, the team is focused on employment possibilities rather than impossibilities or limitations.
- \_\_\_\_\_ 24. If the person is currently in a job/career and indicates general satisfaction with their current job and earnings there is no need to discuss employment at the Person Centered Planning Meeting.
- \_\_\_\_\_ 25. If we are committed to person centered career planning, we will take the time to ask people if they are satisfied with their jobs or if they have any concerns at their Person Centered Planning meeting.

## Final Thought

Most people of all abilities find their jobs through networking. As a part of daily life in this community, Direct Support Professionals eat, shop, and attend community events. Keep your eyes open for employment opportunities for people with disabilities. You may notice that a business is hiring, but look deeper for subtler signs that the business might benefit from hiring a worker with a disability to make the business more efficient/profitable. Share these ideas with employment specialists and team members and help support people with disabilities on their path to employment.

## Application Activities

The following activities are designed to help you apply the content that you learned in this chapter to your position as a Direct Support Professional. These reflection exercises correlate with important DSP knowledge or skills.

Translate the following observations gathered during Discovery into Conditions for Success or Conditions to Avoid when considering employment possibilities for the following job seekers. Also, are there additional things that the team should look into further to gain all they need to know to help the person be successful?

1. Katherine focuses on crossword puzzles at the table in the center of the room hardly noticing her family and younger siblings running through, bumping into things.
2. Aaron was asked to help prep for the annual spaghetti feed and he did for an entire hour. Aaron's mother said he won't help in the kitchen at home.

Translate the following life interests into Work Interests

1. John will not let anyone in the family get their hands on the TV remote, he won't let anyone watch anything but cop shows all night, every night.
2. Shayla is always in the kitchen, offering to "help."

Translate the following observations into specific contributions that could translate to employment possibilities:

1. Mary's family says the thing she does best is open Christmas gifts.
2. Thomas loves listening to his CDs. He can get them out of the case, into the player and going so fast, you couldn't stop him if you tried.

## Additional Resources

Some additional key federal influences and resources on competitive employment of people with intellectual and developmental disabilities include:

**Workforce Innovation and Opportunity Act (WIOA)** (2014). WIOA increases individuals with disabilities' access to high quality workforce services and prepares them for competitive integrated employment. Through WIOA, youth with disabilities will receive extensive pre-employment transition services so they can successfully obtain competitive integrated employment. The US Department of Education has developed this website as a resource on WIOA:

<http://www2.ed.gov/about/offices/list/osers/rsa/wioa-reauthorization.html>

**Partnerships in Employment** is a national transition systems change project whose purpose is to identify, develop, and promote policies and practices to improve transition, post-secondary and competitive employment outcomes for individuals with intellectual and developmental disabilities. The Institute for Community Inclusion (ICI) and the National Association of State Directors of Developmental Disabilities Services (NASDDDS) are partners in this project. Publications and Resources of the Project are available online <http://partnershipsinemployment.com/>

**The LEAD Center.** The LEAD Center is a collaborative of disability, workforce and economic empowerment organizations dedicated to a single mission: advancing sustainable individual and systems level change to improve competitive, integrated employment and economic self-sufficiency for all people across the spectrum of disability. Publications and resources of The LEAD Center are available online: <http://www.leadcenter.org/>

**ODEP Integrated Employment Tool Kit.** ODEP's Toolkit offers a collection of resources, reports, papers, policies, fact sheets, case studies, and discussion guides from a variety of sources to accommodate the full range of users and increase capacity and understanding about the value and potential of integrated employment. It is organized by different audiences or perspectives. Within each audience, there are key, commonly-asked questions to guide the user to the appropriate materials. <http://www.dol.gov/odep/ietoolkit/>

## Video

Washington state implemented its Working Age Adult Policy in 2006, the first Employment First" policy in the country. According to leaders in the state of Washington and independent reviews of state policy, there are four essential ingredients to generating these outcomes. They are: well-articulated values, clear focus on employment at the local level, outcomes oriented funding, and investment in training and technical assistance. *Integrated Employment - Shared Advantages* (7:18) [http://www.dol.gov/odep/ietoolkit/index\\_video.htm](http://www.dol.gov/odep/ietoolkit/index_video.htm)

In this video, Michael Smull facilitates *Person-Focused Career Planning Exercise* (33:47) <https://www.youtube.com/watch?v=OQbs5JhKNXM&feature=youtu.be>

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## Chapter 6: How do Person Centered Planning teams prepare effectively? What works and why?

### Did you know?

The Person Centered Plan should share information, discuss wants, wishes, and dreams, as identified during the pre-planning process and involve futures planning. This will lead to the development of a plan that incorporates the person's dreams, desires and preferences into long-term goals. The following areas will be addressed:

- Identify ways to accomplish desired outcomes (Goals) and address barriers to outcomes.
- Identify resources in the person's network of family, friends, and community to assist them in achieving their desired outcomes.
- Discuss and determine how often the person will get regular feedback on supports and services and their progress toward desired outcomes as well as their satisfaction with services.

[\[http://www.cmhcm.org/provider/centrain/Training\\_Units/PCP.pdf\]](http://www.cmhcm.org/provider/centrain/Training_Units/PCP.pdf)

### OBJECTIVES:

After you complete this lesson, you will:

- Know what to expect in a team meeting
- Prepare well for a team meeting
- Show a positive attitude
- Improve your participation
- Organize a team meeting
- Identify how to discover an individual's interests, dreams, strengths, and goals
- List examples of possible solutions if an individual is trying to overcome barriers in the Person Centered Plan.

**Knowing what to expect:** What will actually happen during a meeting? What can you expect? Different teams organize the meeting in different ways. Some meetings are very formal. Some are informal. Most people with disabilities and their families prefer informal meetings. Here are some common activities that the team often uses to create or change a Person Centered Plan.

### Person Centered Planning Steps:

**DURING** the Person Centered Planning meeting, the team may need to **assist the person to**:

- a. Greet everyone and make introductions.
- b. Review his or her current life situation.
- c. Talk about personal strengths, dreams and vision for the future.
- d. Identify some possible goals.
- e. Discuss any support or teaching the person will need to help reach the goals.
- f. Identify possible solutions for any challenges that might prevent the person from meeting the goals.
- g. Record important goals, objectives, timelines, and who is responsible to carry out each part of the Person Centered Plan.



**AFTER** the Person Centered Plan has been put into action the team needs to:

- h. Decide if the Person Centered Plan is helping the person meet the goals.
- i. Revise the Person Centered Plan as needed.

### Application Activities

The following activities are designed to help you apply the content that you learned in this chapter to your position as a DSP. These reflection exercises correlate with important DSP knowledge or skills.

1. Here is a list of steps that many teams follow to create plans. Review this list with someone at your agency. In the box next to the list, write in any differences in the steps teams follow in your agency.

Many agencies follow these steps	In our agency we add/change these steps
<ul style="list-style-type: none"> <li>a. Greet everyone. Make introductions.</li> <li>b. Review the person’s current life situation.</li> <li>c. Talk about his or her strengths, dreams, and vision for the future.</li> <li>d. Identify some possible goals.</li> <li>e. Discuss any support or teaching the person will need to help reach the goals.</li> <li>f. Identify possible solutions for any challenges that might prevent the person from meeting the goals.</li> <li>g. Record important goals, objectives, timelines, and who is responsible to carry out each part of the plan.</li> </ul>	

Here is an example of the kind of discussion that a team might have with someone during a Person Centered Planning meeting.

**Alice (PC/QDDP):** Hi Jack! Hi Mary! Hi Alan! Hi Pete! Hello Susan and Mrs. Peterson (mother). Well Jack, it looks like everyone you invited is here. I think we all know each other. Let’s visit a little about the past year and see how things are going for you. You’re still working right?

**Jack (Person with disability):** Yup at Taco John’s. I have worked there for 2 years now.

**Pete (Job coach):** Jack’s boss told me last week you are doing a great job Jack!

**Jack (Person with disability):** Yup, I should get a raise! (laughter).

**Alice (PC/QDDP):** You know Jack; that sounds good. You can talk with your boss about that idea. I wonder if other people where you work get raises.

**Jack:** I don’t know about that.

**Pete (Job coach):** We could visit with Frank (your boss) about that Jack. I can help you practice what you might say to him.

**Jack:** OK, Pete.

**Alice:** Good. We should also visit a little bit about your home situation. Let’s see, you are living with some other people in a home that you share right.

**Jack:** (*very quiet*) Yeah.

**Mrs. Peterson (Mother):** Jack and I were visiting over the holidays. Jack, I'm not sure you like sharing a living space with several people. I know you've always wanted to have a cat and some of the people you live with now are allergic to animals.

**Mary (DSP):** Jack, you told me last week that sometimes the noise bothers you.

**Jack:** Sometimes, yeah.

**Alice:** I was trying to remember how long you have lived at the group home, Jack.

**Jack:** A long time.

**Alice:** Alan, you and Jack are good friends. It sounds like there are some things about Jack's home that he doesn't like right now.

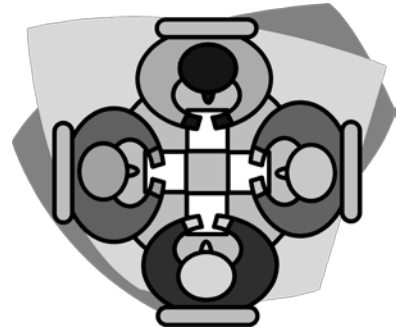
**Alan (Friend):** Jack and I talk sometimes when he helps me in the barn at my farm. I know, Jack, that you would really like your own place. Maybe it's hard to tell your team but I think you could do it.

**Jack:** My mom told me that I need someone to help me but I don't like those people.

**Alice:** Jack, it sounds like you'd like to choose the people you live with and live on your own but you're not sure if that can happen. I think you want your family to support your decision.

**Mrs. Peterson (Mother):** I thought Jack would always need to live in a group home. I said that. But, Jack, I didn't think you could keep a job and you did. I didn't think you could learn to cook but you did. I guess it's time for me to learn that you can live somewhere else *(laughter)*.

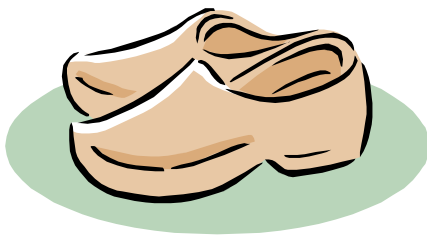
**Jack:** *(Raising his head)* – "Yeah, mom!"



Can you pick out some of the steps that were covered in this discussion? Which steps did you find? Did you spot the:

1. Introductions?
2. Review of the life situation?
3. Dreams and vision for the future?
4. Possible goals?
5. Supports or teaching?

Of course Jack was able to tell others what he liked and didn't like. He was able to put his thoughts into words even if he held back some ideas. He had a team who knew him well. They were willing to voice what they thought he wanted. Jack received a lot of support from his team. Other people need even more support to participate. Sometimes people with disabilities need other team members who know them well to help voice what they are expressing through their behavior and choices.



*Charles does not use words to speak. He will hand a familiar object to someone as a way of communicating. For example, he goes and gets his shoes and brings them to a support person when he wants to go for a ride. He actively resists activities that involve manipulating objects. He is not particular about where he lives as long as he can go for long walks, watch the trains go through the valley, enjoy country music and eat his favorite meals. He doesn't socialize very much and is very dependent on a*

*few people who know him well. His brother Mike does not visit often as he lives pretty far away. Charles is generally content with life but does need some help with bowel and bladder management. Charles seldom goes anywhere (except for walking) but will usually go if he is invited. When Charles's team met with him he smiled at everything. What kind of goals do you suppose they wrote for Charles? How will they know if the goals are acceptable? What do you think of these goals?*

1. Charles will take a trip by train to visit his brother Mike in the next three months.
2. On his own, Charles will bring a CD of country music to a housemate for an evening of shared music, popcorn, and fun on Friday nights.
3. Twice a month, Charles and a friend will collect recyclables from his neighborhood by walking from house to house on a familiar route.
4. Charles will go Christmas caroling with a group using a portable CD player to share country Christmas tunes.

Teams are problem solvers. Much of what happens in the meeting is about identifying and solving different kinds of challenges. Some are small and solutions are easy to find. Other issues can confuse or challenge a team. Good problem-solving helps.

### Preparing for Team Meetings

Person Centered Planning looks easy on paper. Making sure that the meeting results in a good plan, however, takes some work. It is an ongoing process that happens all year long. The team is constantly evaluating the plan to ensure it is assisting the person to lead a meaningful life. Each team member needs to prepare for meetings by reviewing the plan and documentation that has been collected throughout the year. Reviewing the plan and documentation closer to the meeting will give team members a broader view of the Person Centered Plan rather than focus on the most recent challenge. What should Direct Support Professionals do to prepare? How about the other members of the team?

There are seven important actions to prepare for a meeting. Some take more time than others. If this is your first meeting, you may need more support preparing for and participating in a Person Centered Planning meeting than a more experienced person. Over time you will gain confidence. Think about someone you support. Which techniques would work best for that person?



1. **Get to know the person:** Learn as much as you can about the person's interests, dreams, strengths, goals and satisfaction with their current life.
  - Ask about his or her life
  - Talk to others who know him
  - Read past plans together
  - Ask about preferences
  - Visit them at home or work
  - Spend time with them Look at scrap books
  - Go out for coffee together

2. **Get to know the Person Centered Plan:** Become very familiar with the current Person Centered Plan. What was supposed to happen? Did it? How effective is the current plan for this person?
  - Read the plan
  - Re-state goals in your own words
  - Make a list of key actions
  - Find out which activities were done and not done and why
  - Ask questions
  - List steps to do before you meet
  - Figure out what works
  - Re-assess objectives that others said were met
  - Talk with other team members about their experiences
  - See what the person says about their plan

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

2. Your module says that to prepare for a Person Centered Planning meeting you should get to know the \_\_\_\_\_ and their \_\_\_\_\_ .
3. When you are trying to get to know the person, you want to learn as much as you can about the person's \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ and \_\_\_\_\_ with their current life.
4. How would you go about finding out this information from the people you support?
3. **Look for solutions:** List solutions to possible challenges or barriers to any goals that are important to the person you are supporting.
  - List what others have done
  - Visit with a consultant to get ideas
  - Ask the person's family to comment (with permission)
  - Ask the person what they think will work
  - Re-state challenges as needs (Example: Mary doesn't take the time to cook and wants to eat out every night = Mary needs easy-to-fix favorite meals).
  - Look for ideas in online search engines or videos
  - Visit with an employer or community expert

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

5. List four solutions to possible challenges or barriers to any goals that are important to the person you are supporting.
4. **Be a good role model:** Act in a professional manner during the Person Centered Planning meeting. Follow your agency dress code. It doesn't cost a great deal of money to look and act like a professional. Direct Support Professionals made the following list of tips for people who want to be good role models:

Professional Appearance	Professional Behavior
<ul style="list-style-type: none"> <li>• Use good hygiene</li> <li>• Leave T-shirts with slogans at home</li> <li>• Wear clothing that isn't revealing</li> <li>• Get rid of chewing tobacco</li> <li>• Don't chew gum</li> <li>• Follow the agency dress code</li> <li>• Be a role model for coworkers</li> </ul>	<ul style="list-style-type: none"> <li>• Show up 5 minutes early</li> <li>• Turn off your cell phone</li> <li>• Don't text message</li> <li>• Bring a pen/notepad</li> <li>• Listen, don't interrupt</li> <li>• Take turns</li> <li>• Remember to smile</li> </ul>

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

6. List 3 things you can do to look and act as a good role model for others at the Person Centered Planning meeting.
  - a.
  - b.
  - c.

5. **Prepare to speak up and to respond:** Recognize how the Person Centered Planning meeting will be organized and when to respond or how to bring up ideas during the meeting.

- Call the PC/QDDP.
- Ask for an agenda.
- Observe several meetings.
- Think about contributions you can make, write them down and bring them to the meeting.
- Make and bring a list of five key ideas/things that you know are important to the person.
  - Create the list with the person receiving support. Remember you spend the most time with the individual supported so you may be able to get them to share more.
  - Show ideas to co-workers – get feedback.
  - If you are unable to be at the meeting, share with staff that will be at the meeting to share your ideas.
- Assist the person to tell a story
- Practice what to say at a staff meeting.
  - Share your experiences – what works and what are some of your struggles
  - The information you share is used on an ongoing basis to assist the person build a meaningful life



Many people are shy or do not like to be the center of attention. Others dominate and insist on their point of view. It is better if everyone contributes. Some people think they need to ask questions or direct others. These behaviors put people on the spot and stifle good input.

People don't like surprises. They do want to prepare for the meeting. If you are aware of a new challenge, tell the person and whoever is leading the meeting about it before the

meeting starts. If it is important enough to bring up, plan a tactful way of describing the challenge. Use good judgment. Remember no one wants to discuss their tooth brushing habits or menses in a crowd.

This video for the New Hampshire Council on Developmental Disabilities, Peter Leidy describes the Direct Support Professionals role in Person Centered Planning: (17:00) *Doing Our Best Work*: <http://peterleidy.com/human-services-video-dvd/> In the video, Leidy describes ten essential components of quality direct support including:

1. Believing in positive possibilities
2. Building community relationships
3. Listening deeply
4. Working as a team
5. Embracing curiosity
6. Understanding the power of language
7. Supporting people through relationships with them
8. Asking "What brings out the best in this person?"
9. Having power with, not power over
10. Questioning structures and policies that limit people

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

7. You must be prepared to speak up and to respond at a Person Centered Planning meeting. List two strategies you can use to prepare to speak and respond at the meeting.

**6. Prepare to write effective, measurable goals and objectives:** Find out how to take good ideas and create measurable goals so you can participate in this part of the Person Centered Planning process.



- Complete the *Writing Objectives and Measuring Behavior* module.
- Ask the PC/QDDP to show you some well written goals/objectives before the meeting
- Look at the person's goals from last year and think about what would have to happen to meet each goal.
- Think about someone you support. If they were you, what goals would you have?
- Rewrite a goal that seems kind of long and full of jargon in everyday language.

**7. Practice a positive approach:** Practice sharing your observations and ideas in positive terms.

Some people are naturally positive. Other people like to argue. Whatever your style, it is important to share your ideas in positive terms. We cannot make good Person Centered Plans if people in the meeting are on the defensive or feeling intimidated. A positive approach helps make sure that everyone has a chance to share ideas and get support. This includes not only the people we support but also your co-workers, the supervisory staff, and consultants.

Remember to show respect even when speaking of someone who provides services but is not at the meeting (example - a physician).

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

8. Give an example of how you would share a concern about someone's behavior in positive terms.

Carson likes to stay up late and watch TV. He refuses to go to bed and is too tired to get up for work.	
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### At the Meeting

**Begin with the welcome.** Teamwork involves cooperation, trust, sharing and respect.



Teams need an atmosphere that gives everyone the confidence that these experiences will be possible. Participants tend to hold back at the very beginning of a meeting, when a team is new, or if members change. At these stages, the level of trust and confidence is low. Teams need to begin their work by welcoming everyone. Part of the welcome involves assuring that everyone understands roles, expectations, and tasks to be accomplished. This can be done by the person with the disability (usually with support) or a team facilitator (the PC/QDDP).

It is also a good idea, even for teams that have been together for a long time, to regularly review their roles and responsibilities. Invite everyone to:

- Share their names.
- Tell about their connection to the person.
- Tell special roles they have on the team.

**Example:** "I'll start. My name is Alice. Melissa asked me to help her lead the meeting today." "Hi my name is Ron and I support Melissa in learning her job." "Hi I'm Rita, Melissa's mom." "Hi! Fred Parker – here! I help Melissa at her apartment." "Hi! I'm Patty and I'm a nurse. Melissa has diabetes and I'm here to help the team with any special questions about health care for Melissa."

**Tips:** Titles such as job coach, direct support professional, trainer, etc., are not used because people with disabilities or their families know team members by their first names, not their titles.

Invite others to introduce themselves. Use a warm, welcoming voice. If someone makes introductions or tells each person when to speak, it may send a message that *"This is a very*

*formal meeting and I am in charge.*" If that happens, people may be unsure of when to speak and may not participate actively.

**Review the general purposes of the meeting.** Identify any outcomes which are necessary and expected as a result of the meeting.

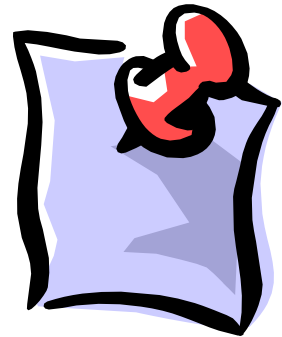
**Example A:** "We're here to help Melissa plan and set goals for the next year. Or "Melissa, you invited us over to help you plan and set goals this year."

**Example B:** "Mr. and Mrs. Gardner, Mary's legal guardians, asked for a meeting with Mary's team. They don't believe the behavior support plan is working and want to review it with the rest of the team."

You can see that each of these statements describe a very different type of meeting and help the team understand the work that needs to be done.

**Review any important group "rules" on how the meeting will be conducted.**

Discussions about rules can include how decisions will be made, when to ask questions or express ideas, time limits etc. Teams sometimes use *ground rules* at meetings. Ground rules tell team members how to communicate in the meeting. Respect is demonstrated by taking turns, listening, brainstorming etc. Sometimes these rules are communicated through a poster or handout. They can be shared at the beginning of the meeting with a quick reminder like these examples:



"Let's use our ground rules about respect and good communication to plan today."

"Does anyone have any questions about that before we start?"

"I know we have many concerns about Melissa's behavior plan. We may not agree on what is happening or on how to respond. I would like to share three important rules that I think will help us in planning. Let me know if these rules will work for us as a team."

When the purpose of the meeting is different, the way rules are handled may change as well.

**Identify any specific challenges on the agenda for the meeting. Decide what action is necessary by the team.**

- Decide how to respond to a health issue.
- Help someone make decisions about a job option.
- Consider the impact of a new job on someone's lifestyle.
- Remove restrictions on a person's rights.
- Resolve conflicts over someone's choices that place them at risk.

**Confidentiality:** Teams share information about the Person Centered Plan with others on a "need-to-know" basis. Who needs to know the details of the Person Centered Plan or what happened in the Person Centered Planning meeting? People who will be expected to carry out the Person Centered Plan but may not have been at the meeting need to know what it

says. Family members may be told about a Person Centered Plan as well if the person you are supporting wants that information shared. Many agencies appoint someone to be the single point of contact for communicating with families. Other agencies allow for more informal communication. Be sure to find out your agency policies on sharing information. Staff members who are not part of the team do **not** need to know the details of the Person Centered Plan. People are often curious and may ask. It is important to say, "Well that's confidential." You could also make a generally positive statement about the person. "Jack is a great guy, thanks for caring."

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

9. Describe in your own words what "need-to-know" means. Who needs to know about someone's plan?

### Application Activities

The following activities are designed to help you apply the content that you learned in this chapter to your position as a DSP. These reflection exercises correlate with important DSP knowledge or skills.

10. When preparing for a team meeting, what questions do you need to ask about the person's current plan and how will you find the answers?
11. What other roles do direct support professionals have in getting ready for the meeting?
12. Read the story in the box below. Respond to each item in the box on the right. Consult with other people to think of answers.

At the Meeting	What you Think
<p>Alice is leading a team meeting for Mary for the first time. Mary has invited her family and two friends from high school to be on her team. Staff members from her residential program and a new job coach are also at the meeting. Mary is 22 year's old and has just moved away from home into an apartment for the first time. Mary wants a job and plans to give a party next weekend. <i>"Mom would never let me have a party at home and now I can,"</i> she tells the team. Mary's mom is not sure that is a good idea and is expecting you to tell Mary that she needs to wait or be careful. Mary worked in the cafeteria at her school and babysat her younger brother. She can read romance novels and newspapers but is easily taken advantage of by others. Mary has a boyfriend and she is hoping he will buy her a ring for her birthday. Mary is sure her new roommate will be her best friend. She plans to go shopping for a new bedspread this weekend. Her parents are the representative payee for her government benefits.</p>	<p>List 3 strengths for Mary.</p> <ol style="list-style-type: none"> <li>a.</li> <li>b.</li> <li>c.</li> </ol> <p>Describe her vision for the future.</p> <p>List a potential goal.</p> <p>Describe a conflict that Mary might have with her family.</p> <p>How will the team balance the need to support Mary and keep her safe?</p>

13. When and how do Person Centered Planning teams in this agency:
  - a) Decide if the Person Centered Plan is helping the person meet the goals?
  - b) Revise the Person Centered Plan as needed?

## Chapter 7: How do Person Centered Planning Teams work together?

### Did you know?

Consensus decision making is a creative and dynamic way of reaching agreement between all members of a group. Instead of simply voting and having the majority of the group make the decision, a team using consensus is committed to finding solutions that everyone actively supports, or at least can live with.

This ensures that all opinions, ideas and concerns are taken into account. Through listening closely to each other, the group aims to come up with proposals that work for everyone. Consensus is neither compromise nor unanimity - it aims to go further by weaving together everyone's best ideas and key concerns - a process that often results in surprising and creative solutions, inspiring both the individual and the group as whole [<http://www.seedsforchange.org.uk/consensus>].

### OBJECTIVES:

After you complete this lesson, you will:

- Tell others in your own words what person-centered planning means
- Tell others in your own words how the Person Centered Planning team makes good decisions
- Be confidential about the results of the meeting
- Explain the advantages of consensus building
- Resolve challenges when consensus can't be reached.
- Explain the use of "common language" at a team meeting

**Person Centered Planning** is a *way of thinking about and planning with people* that shows respect for their interests, hopes, dreams, and desires. It is a *process* of discussion and self-evaluation. In this kind of planning the person discovers how he or she wants to live. The person's circle of support helps to explore what needs to be done to reach these goals.



When Person Centered Planning is used, the person directs the planning process. The team focuses on what the person wants and needs. The person can direct the meeting themselves or rely on someone who knows them well. Person Centered Planning grew from the work of several different groups. Each group has given the idea a slightly different name. No matter what it is called, person-centered planning methods have some things in common. Person centered plans:

1. See others as people first. Look past any labels to find the person.
2. Use ordinary language and images instead of professional jargon.
3. Actively search for a person's gifts and capacities in community life.
4. Strengthen the voice of the person and those who know the person best.
5. Evaluate the person's present situations in terms of valued experiences.
6. Define desirable changes in the person's life.
7. Decide how to implement changes and support people in reaching their goals.

All that sounds nice but what does it mean? The way a person who needs support is seen and understood by others has a powerful influence on the way the person is served.

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

1. Person Centered Planning is a way of thinking about and planning with people that shows respect for their \_\_\_\_\_, \_\_\_\_\_ and \_\_\_\_\_.
2. List at least two features of Person Centered Planning that help to make it respectful or unique.

Let's take a look at how a team that is using Person Centered Planning sees someone differently than a team that may use a more traditional approach. When you plan with a person who has a disability, it is often easy to brush aside the person's ideas and replace them with your own. In person-centered approaches the team takes what people want seriously.

Traditional Perspective		Person Centered Perspective	
<i>Who is Mike?</i>	<i>What does he need?</i>	<i>Who is Mike?</i>	<i>What does he need?</i>
<ul style="list-style-type: none"> <li>• A person with a mental age of 9 years 3 months</li> <li>• A person with IQ &lt; 60</li> <li>• A person with intellectual disabilities</li> <li>• A person who has "an indication of organicity, including difficulty with angles, closure, retrogression, over-simplification and an inability to improve poorly executed drawings."</li> <li>• A person with acute tantrums</li> </ul>	<ul style="list-style-type: none"> <li>• A program for persons with DD</li> <li>• To be protected from poor decisions</li> <li>• To learn basic housekeeping tasks</li> <li>• To be educated separately from non-disabled people because of his slow learning rate.</li> <li>• Highly specialized staff who can address challenges of poor problem solving, etc.</li> <li>• To learn from natural consequences to control his temper</li> <li>• To access typical settings only after he is better controlled</li> </ul>	<ul style="list-style-type: none"> <li>• A 40 year old man who has missed most typical experiences and has never had a real job</li> <li>• A person with no income who is poor</li> <li>• A person who has been isolated all his life</li> <li>• A person with few contacts or connections to the wider community</li> <li>• A person who has little control over the direction of his life</li> <li>• A person with more difficulty learning new skills</li> <li>• A delightful man who makes a difference in the lives of those who care about him</li> </ul>	<ul style="list-style-type: none"> <li>• A lot of experiences</li> <li>• A real job/income</li> <li>• To be included and present in the community</li> <li>• Friends</li> <li>• Vision for the future and support in getting there</li> <li>• Someone who can speak out on his behalf</li> <li>• A lot of support for learning</li> <li>• More people who see and treat him as an adult</li> <li>• People who can enjoy him</li> <li>• A way to be taken seriously so that he doesn't have to resort to outbursts to get his point across.</li> </ul>

**Exchange Information:** Now that the Person Centered Planning team members are prepared, they need to exchange information with each other. Each team member needs accurate and complete information in order to help plan. The Person Centered Planning team gathers all the relevant information. Then we can make informed decisions and find the best solutions for any challenge. Each team member has a different perspective. Everyone's information needs to be shared with the rest of the team. Teams use a "common language" so that everyone can fully understand what is said. Members avoid technical or special terms and acronyms (letters that stand for long titles). This can be very challenging. For example many agencies refer to "medication administration." But families or people with disabilities may not fully understand that term. The words "taking your medicine" are easily understood by all. Everyday vocabulary works best.

Some technical terms can't be avoided. For example if you are supporting someone with diabetes, the words "low blood-sugar" will probably be used. Be sure you define these terms for people who might not understand. Terms that should either be avoided or carefully explained are the names of tests, special intervention techniques or places, and titles or activities that might be unfamiliar to team members who are not employees or health professionals.

Use clear language to clarify the difference between facts and beliefs. If you are expressing an opinion or a personal feeling, let everyone know it is not a fact. Always make the difference between fact and opinion clear when sharing information. Other rules about clear, specific language are discussed in the module, *Writing Behavioral Objectives and Measuring Behavior*.

### **Self-assessment**

Check your understanding of this section's content by completing this self-assessment.

3. When technical terms can't be avoided at the meeting, be sure you \_\_\_\_\_.

In the information-gathering phase of the meeting, invite participants to:

1. Share ideas about strengths, suggested service needs, and preferences.
2. Report progress since the Person Centered Planning team last met. Decide if any goals were met.
3. Report the results of any assessments that were given.
4. Tell what the findings mean for the person with a disability.
5. Share important observations about recent events that may impact the person.
6. Include new ideas, interests, goals or experiences that shape their future vision

**Tips:** This part of the Person Centered Planning process is important and can take a long time. People get comfortable. They like to tell stories. Soon the team is talking and having a conversation. That is good. But people also get tired when meetings last too long. We don't want team members to use all their energy and time in storytelling. We don't want to have to rush through the next steps which are harder and just as important. Good teams avoid this challenge by creating an informal atmosphere **and** getting right to the point. Being prepared also helps save time. Sometimes it helps to post the agenda, question statements and decisions on a poster for the team to read. Visual cues help keep everyone focused.



### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

4. Two examples of \_\_\_\_\_ are reporting the results of any assessments that were given or telling what the findings mean for the person with a disability.

**Pivotal Statements:** Team leaders often make statements to keep the team on track. Example: "Let's take about 15 minutes to review progress and talk about strengths and preferences. We'll use these priorities to plan goals and objectives." This kind of statement is sometimes called a "pivotal" comment. The action of the team hinges on what is said. From this statement, the team realizes what it needs to do and how much time to take. Everyone is invited to participate. Pivotal statements turn the Person Centered Planning team's attention to important tasks. Effective leaders use these statements to keep the team on track and the planning process flowing. As different teams experimented with Person Centered Planning, leaders learned to ask important questions that cut through story-telling and helped teams plan effectively.

These questions are:

- **Who is this person we are here to support?**
- **What really matters *to* this person?**
- **What are his or her dreams, nightmares, goals?**
- **What are his or her most important human needs? Or, What is important *for* this person?**
- **What do we need to know to support this person?**
- **What happens when this person needs assistance or training?**
- **What are this person's greatest risks in the near future?**
- **What would have to happen to meet their needs?**

Person-centered Planning takes preparation. Most teams build the agenda around the questions that are used to help get to know the person. The team helps the person create a picture of the life they would like to be living and their vision for their future. Some

individuals are willing to talk about their preferences. Other individuals need people who know them well to help make a list of things important to them. We use our observation of choices and behavior to help to identify what people like and dislike. Then the team thinks about or tries out actions that are a match for those preferences.

Learning what is important to others is an important step in preparing for the Person Centered Planning meeting. Observe for many different signs or indicators that can tell you about each person. The chart below lists different signs, what to look for, and guiding questions that can be used to help get to know others. These steps are an excellent way to get to know people you are asked to support. A plan that uses what we know about what the person likes and dislikes is more personalized and likely to succeed.

<b>Think about the Signs</b>	<b>Ask Questions</b>	<b>Look for answers How can you tell?</b>
<b>Self expression</b>	What are this person's favorite activities?	Foods, TV shows, games, places to go, animals, music, colors, clothes, being alone, friends, objects or toys
<b>Feelings</b>	What do they feel strongly about?	Calming, happy, motivates, dislikes, fears, relaxes, worries, regrets, strong beliefs
<b>Relationships</b>	What people are important to them? Why?	Communication style, affection, friendships, responses to others, sense of humor
<b>Choices</b>	What is important in this person's routines?	Food, clothing, activities, sports, bedtime, bathing, shopping, hygiene, travel, meals, medications, therapy
<b>Physical</b>	What is this person's body saying	Best time of day, energy level, medication effect, stamina, control, frustration level
<b>Health</b>	What are this person's health issues?	Illnesses, wellness, allergies, immune system, symptoms, when they feel bad or good, going to the doctor or dentist
<b>Roles</b>	What roles does the person have in their family and community?	Involvement, caregivers, choice making options, contributions, dreams for the future

The information for the preceding chart was taken from the *Personal Preference Indicators Guide for Planning* created by the Center for Learning & Leadership at the University of Oklahoma Health Sciences Center.

### **Self-assessment**

Check your understanding of this section's content by completing this self-assessment.

5. Pivotal statements turn the Person Centered Planning team's attention to important tasks. Name at least two pivotal statements that a PC/QDDP might use to focus the team on important actions and keep the team on track.
  - a.
  - b.

**Leading Discussion:** Sometimes team leaders need help generating the kind of informal conversations teams need to help make decisions. Direct support professionals excel in team meetings when they look for and respond to opportunities to:

- Share positive information
- Affirm others
- Make suggestions
- Clarify information
- Solve challenges



To prepare for the communication that Person Centered Planning meeting, you skilled at looking for and responding to opportunities. You may not always get a direct signal such as “OK Jim. It’s your turn to talk.”

happens in a need to become communication

Person Centered Planning team leaders may say: “Does anybody have any ideas for how we can support Jack to find a new job?” or “Let’s review Charles plan from last year.” These are indirect but important signals that it’s time to share positive information. **Don’t wait for a direct question.** This was your chance. Jump in. Then, listen, and encourage others to take a turn.



Affirming statements bring out ideas that the team needs to explore, “You talked about a train trip for Charles. That seems like a big challenge for him. Would you tell us what you had in mind?” Affirming statements can also encourage team members to work together. “That’s a good idea! I’d be willing to work with you on that.” Affirming statements also help the team put something that was said with strong emotions into a more positive context. (Example – “I can see that you care about Jack and want him to be safe.”)

There are no direct signals for giving affirming statements. The important thing to look for is a chance to bring out an idea, support the work that needs to be done or acknowledge what is important by reframing what is said in positive terms. **Affirming statements build trust.** They help the Person Centered Planning team have a conversation and create the close working relationships that result in effective plans.

It is up to the Person Centered Planning team members to ask questions when you are unsure of what a person meant. You can help remind the team when jargon is used by asking on behalf of a person receiving support. Examples: “I’m new here. What does occupational therapy mean?” “Are long-range goals the same as goals? I’m not sure Mary is used to that term.”

## Self-assessment

Check your understanding of this section’s content by completing this self-assessment.

6. Check all of the items below that make a true statement.  
Direct support professionals excel in Person Centered Planning team meetings when they look for and respond to opportunities to:  
\_\_\_\_\_a. share positive information

- \_\_\_\_\_ b. affirm others
- \_\_\_\_\_ c. describe the residential program
- \_\_\_\_\_ d. explain the latest challenge
- \_\_\_\_\_ e. clarify information
- \_\_\_\_\_ f. solve challenges

**Decision Making:** The Person Centered Planning team will use these priorities to support the person to make important decisions about specific plans. As much as possible, the team tries to reach consensus, or agree on results that everyone can live with for now.

During the decision-making part to the Person Centered Planning meeting the team:

- Evaluates all proposed goals and determines if they match for the person's priorities.
- Identifies possible services/supports needed to achieve the goals.
- Selects services or supports that best meet the person's goals.
- Creates objectives which if met will lead to achievement of the goals.
- Considers ways to achieve objectives. Selects strategies that
  - Build on the person's strengths
  - Respect the person's preferences.
  - Use methods that have been proven effective.
- Devise a plan for measuring, monitoring, and evaluating progress. Make sure that the plan can be modified as necessary.

Decision-making is the most important and most difficult task facing the team. Team decisions affect the person's quality of life, the degree of independence they will achieve, the control they will exert over their environments, and the extent to which they will cooperate with the plan. Each team meeting will be slightly different from others. One reason for this is that the details of each person's life are unique.

To make decisions in a meeting, the Person Centered Planning team usually goes through a four-step process.

1. Highlight or point out a decision to be made in a way that invites comments:
  - Let's take a minute to talk about how your seizure medications are working
  - Let's help Mary think about her work situation
  - John would you like to add a new fitness goal?
  - Would anyone like to start the discussion about Susann's communication goal from last year?
2. Listen to and consider the ideas from team members as a team
3. Sift through the ideas and reach a consensus about how best to respond
4. Make decisions and plan specific actions
5. Repeat these steps for each important decision



As decisions are made, the team uses "shared values" to guide the decision-making process. These values were learned through visiting with many people who have disabilities and their

families. The values help to enhance lives and opportunities. Each value and examples of how it might be used are listed in the chart below.

Team Value	Person-Centered Example
<b>1. Help the person achieve outcomes which are important to them.</b>	<ul style="list-style-type: none"> <li>• Get a certain job</li> <li>• Meaningful activities</li> <li>• Choose where to live</li> <li>• Spend time with family &amp; friends</li> </ul>
<b>2. Help the person move from a position of dependence toward a position of independence.</b>	<ul style="list-style-type: none"> <li>• Cut own food</li> <li>• Take medication safely without help</li> <li>• Cook own meals</li> <li>• Wake up to an alarm clock</li> </ul>
<b>3. Help the person move from powerlessness toward having more control over his or her environment.</b>	<ul style="list-style-type: none"> <li>• Control who enters by locking the door</li> <li>• Give a signal when ready to be lifted</li> <li>• Make a choice of what to wear for the day</li> <li>• Learn how to ask for help</li> </ul>
<b>4. Help the person move from basic to more complex behaviors to adapt or cope with more and more complex situations.</b>	<ul style="list-style-type: none"> <li>• Learn to call a friend and plan to get together</li> <li>• Take turns in a conversation at break time</li> <li>• Make a full meal instead of heating up items</li> <li>• Use the stove top and not just the microwave</li> </ul>
<b>5. Help the person move from negatively valued behaviors to more positively valued responses.</b>	<ul style="list-style-type: none"> <li>• Say "No," instead of sitting down on the floor</li> <li>• Turn off the TV and go to bed on time</li> <li>• Check the mail once instead of six times a day</li> <li>• Help out at church</li> </ul>
<b>6. Help the person to both exercise his or her own rights and be responsible for the outcomes of their actions on others.</b>	<ul style="list-style-type: none"> <li>• Get a phone and refraining from calling 911 except in emergencies</li> <li>• Rent a video and return it on time</li> </ul>
<b>7. Help the person develop a wider-base of relationships to extend beyond the service agency.</b>	<ul style="list-style-type: none"> <li>• Meet others through shared activities</li> <li>• Learn to date or have a girlfriend</li> <li>• Spend time with family</li> <li>• Learn rules of healthy relationships</li> </ul>

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

7. The Person Centered Planning team uses \_\_\_\_\_ to guide the decision-making process.
8. Name 3 shared values.
  - a.
  - b.
  - c.

### Consensus Decision Making

There are several ways to reach any decision. In Person Centered Planning the consensus method for decision making is preferred. Why? The consensus method makes the most effective use of the combined knowledge of everyone in the group. It results in high quality decisions that each member of the team can support. Reaching a consensus or agreement is not the fastest or easiest way to make decisions. But, it is one of the most respectful.

## What is Consensus Decision Making?

Every member of the group has an equal opportunity to influence the final decision, and every member of the group must agree to carry out the decision even if they have some reservations.

## Why Was the Consensus Method Chosen?

Individual decisions or those made through majority rule are considered faster and more "efficient" methods than consensus. Some groups consider voting or other methods of majority rule as the best ways of reaching a solution when the group is divided on an issue. This can cut down on the meeting time required. But voting and majority rule methods can keep some people from sharing their ideas. They may feel alienated (as if no one is listening to them). When people's ideas are not considered they become less willing to share their ideas. Taking a vote too soon also eliminates the possibility of reaching a compromise, or creative combination of points of view.

Consensus methods are important because:

- 1) The best possible decisions are made
- 2) Every group member is committed to carrying out the plan.

When Person Centered Planning teams use the consensus method, they must persist with discussion about each challenge until they reach a decision with which each team member agrees. This method will obviously require more time and discussion than other methods. But people tend to feel the strongest commitment to decisions they helped make.



## How Does the Consensus Method Work?

Reaching consensus requires cooperation from each group member. Silence in the group can be taken for consent. If a goal is proposed and no one objects then the team leader may assume they have consensus and move on to the next step. If you have a concern or after-thought it is your obligation to speak up or you will have committed to the decision. Formal steps to reach

consensus are used when a challenge arises and it is clear that the group does not agree.

**Step 1: Define the challenge.** Groups often assume that every member has the same definition or understanding of a challenge, but this is seldom the case. **The group must begin by agreeing among themselves on a definition of the challenge.** The group can discover basic differences about what the real challenge might be and work to achieve consensus on just what the challenge is.

Example: Mary has refused to go to a specific job site anymore. Some people on her team are convinced that Mary is refusing because she doesn't like that kind of work and that she should be supported to try something else. People who know Mary well are aware that she hasn't been sleeping well and is having conflicts with her roommate. They believe these challenges have overwhelmed Mary and that she is refusing things she used to enjoy. Who is right? What is the real challenge?

First the group tries to make a careful and specific statement that includes all aspects of the challenge. As the team moves through the steps in decision making, it may redefine the challenge one or more times.

**Step 2: Gathering information.** Once the challenge has been defined, consider what information you need to solve it. Next decide if that information is already available. Sometimes a Person Centered Planning team may need to gather the information they need and meet again before continuing.

**Step 3: Set criteria for judging alternatives.** Next set some guidelines, or basic criteria, for what an acceptable solution would be. For example, in team decisions, certain guidelines related to values should guide the process. The team must consider legal and human rights, normalization, and respect for the dignity of the person in all decisions.

**Step 4: Think about and discuss possible courses of action (Brainstorming).** There are many possible solutions or courses of action for any one challenge. Before making a decision, consider all of the possible alternatives. Involve the creativity and imagination of each member of the team.



The Person Centered Planning team needs to listen to all ideas without judging them so that every important idea is shared. Evaluation of ideas will be done later. A supportive team will avoid shutting down the production of ideas at this point.

Highly creative and individualized alternatives are often the result of this sort of brainstorming. If the brain-storming session is skipped, team members may tend to think only in terms of what is already available or what has been done before. Brain-storming by the team can be an effective tool for making decisions which are very individualized and helpful to the person receiving services.

**Step 5: Evaluating and selecting alternatives.** Now is the time to use critical judgment and evaluation skills. Select ideas that are consistent with basic values. Ideas that are simple will save time but if they do not promote the growth/dignity of the person, they won't help. The Person Centered Planning team judges the acceptability of each brainstormed idea using the criteria from step 3.

Select one solution as the best and most practical to carry out immediately. In considering alternatives, ask these questions:

- a) Which solution best meets the person's goals?
- b) Are the resources available to put this plan into effect?
- c) If resources are not available, what must the team do to find or develop them?
- d) If resources are not available, what is the next best alternative?

Part of good planning is anticipating what might go wrong. Create back-up plans to use if the first choice is not possible for some reason, or if it fails to have the desired effect. If the group is unable to agree, you may decide to set a trial period for testing the effectiveness of

the alternatives in question. Set criteria for evaluating that suggestion and consider how to monitor its success.

**Step 6: Implement the Person Centered Plan.** Make plans to put team decisions into action. Assign responsibility for various tasks to team members and establish time lines. Find ways to measure how engaged each person is in their life throughout the day. Monitor progress.

**Step 7: Evaluate the Person Centered Plan.** Evaluate how well the team met its goals and resolved any challenges. Specify the outcome data that will be collected to measure success and/or pinpoint challenges. The team should assign someone to review the plan periodically. This helps the team make sure that back-up plans can be put into effect when necessary.

### Self-assessment

Check your understanding of this section's content by completing this self-assessment.

### True or False

- \_\_\_\_\_ 9. In consensus decision-making, **not** every member of the group has an equal opportunity to influence the final decision.
- \_\_\_\_\_ 10. Silence during consensus decision-making can be mistaken for consent.
- \_\_\_\_\_ 11. There are 5 steps to consensus decision-making.
- \_\_\_\_\_ 12. The first step in consensus decision-making is agreeing on a common definition of the challenge.
13. What advantages does consensus decision making have over majority rule decisions?
14. List three criteria for judging alternatives generated during problem solving at Person Centered Planning meetings
- a.
  - b.
  - c.

**Summarization:** Before the Person Centered Planning meeting ends, all team members need to be in agreement with the decisions that have been reached. All members must understand their individual responsibilities for carrying out the plan.

The Person Centered Planning team talks about what happened at the meeting so that changes can be made, if necessary, in future meetings. Good performance by the team is recognized and reinforced. Summarization activities may include:

- Review conclusions and decisions made.
- Check for team member understanding of decisions and consensus
- Make sure that the person receiving services understands the plan if possible.
- Decide whether or not the Person Centered Plan reflects the person's priorities.
- Review procedures and assign responsibilities for plan evaluation.
- Inform each team member of his or her responsibilities to carry out the plans.

- Evaluate the Person Centered Planning meeting. Discuss accomplishments first. It is always easy to criticize. Think about steps to change in future meetings.
- Make arrangements for the next meeting if necessary.

**Follow Up:** Direct Support Professionals play an important role in carrying out the Person Centered Plan. Some teams write out step-by-step descriptions for parts of the Person Centered Plan. This is often done when members of the team need to respond consistently (the same way every time) to challenging behaviors. Written procedures may also be used for learning objectives because Direct Support Professionals will need to provide specific and consistent instruction. Other goals may require informal follow up. This may include visiting with someone after a meeting, getting information needed to start a new activity, or helping the person prepare for changes in their life.



**Remember:** Good Person Centered Plans don't happen by accident. They take a lot of careful preparation. If you care about someone, you want them to succeed. You'll work hard to make that happen. If you don't know the person well, it's easier to just show up without spending the time to prepare. When you get to know the person, planning becomes easier but will still require some work on your part. If you care about the person you want a good Person Centered Plan that will help the person reach his or her goals. You can make a real difference in someone's life.

Person Centered Planning and decision making is complex. You can gradually become an expert in how to participate or even in how to lead a team. Chapter 4 discussed many ways to support people with disabilities in becoming active in Person Centered Planning. You can make an important contribution to the lives of people with disabilities.

### Application Activities

The following activities are designed to help you apply the content that you learned in this chapter to your position as a DSP. These reflection exercises correlate with important DSP knowledge or skills.

15. A plan that uses what the person knows about his or her likes and dislikes is more personalized. Fill in the blank below with your ideas for signs or behaviors that can tell you about someone you support's preferences if they do not or could not speak.

Think about the Signs	Ask Questions	Look for answers How can you tell?
<b>Self expression</b>	What are this person's favorite activities?	
<b>Feelings</b>	What do they feel strongly about?	
<b>Relationships</b>	What people are important to them? Why?	
<b>Choices</b>	What is important in this person's routines?	
<b>Physical</b>	What is this person's body saying	

<b>Health</b>	What are this person's health issues?	
<b>Roles</b>	What roles does the person have in their family and community?	

## Person Centered Planning Questions Key

### Chapter 1: What is Person Centered Planning and why do we use it?

1. Circle the simple plans and underline the comprehensive life goals

what to eat for dinner                      apply to college  
buying a home                              what to wear to work  
what to plant in the garden              live a healthier life

2. True or False – Person Centered Planning:

T helps people tackle complex goals  
T brings together different ideas, viewpoints, knowledge, and experience  
F is easier and faster than other types of planning  
T is required by accreditation agencies  
F is a guarantee people will meet their goals  
T helps support a positive life and prevent negative life events  
F ensures that only easy goals will be included  
T helps the team consider a variety of supports to assist the person in reaching their goals

3. Teams use core values to guide planning. Give an example of how your agency meets these core values: *(Answers will vary – see examples of correct answers below)*

Learning is lifelong: We teach adults to read or pass drivers tests

Life has many seasons: People in their 60's cut back on work hours

Everyone learns differently: Some people use pictures to help them remember. Others leave objects out where they can be seen.

Everyone needs support: Some people get rides to work, others get help with personal care

Everyone is unique: Some individuals have low vision, others hearing loss, others mobility challenges etc.

Everyone needs choices: Some people are offered 2 outfits and asked which they prefer to wear, others make decisions about what to eat for dinner, who they want as a roommate, etc.

Everyone can contribute: People volunteer, help their roommate, recycle, etc.

4. Give examples of 3 simple challenges that can undermine or threaten Person Centered Planning.

a. *Person Centered Planning values are not shared*  
b. *Team members are new*  
c. *Plans are not followed*  
d. *Direct support professionals don't share important information*

5. Marty's goal is to work as a cook at Taco John's at least two hours a week. Marty has never had a paying job before. List some actions that staff might take at home and at work to help Marty achieve his goal.

At Home I Could: *(Answers will vary – see examples of correct answers below)*

- a. Help Marty practice working for up to 2 hours to build stamina
- b. Help Marty care for his uniform
- c. Help Marty get to work on time

At Work I Could:

- d. Help Marty practice wrapping food
- e. Teach Marty to be friendly and greet co-workers
- f. Teach Marty to deposit or cash his paycheck

6. Explain why each item listed below is important in person-centered planning:  
*(Answers will vary)*

- a. Working as a team to meet goals *(makes it easier to solve challenges, be creative)*
- b. Giving people information about options *(leads to self-determination)*
- c. Supporting people to discover their dreams *(builds confidence)*
- d. Making sure people achieve their goals *(builds trust, meaningful life)*

## Chapter 2: What is a plan and how does it work?

1. Describe **two main purposes** for a plan that is used to document the team's discussions, goals, services, supports and decisions. The plan is designed to help someone:

- a. reach their goals
- b. live a meaningful life

2. How can you tell when a life has meaning? *(Answers will vary but should cite 3 or more of these points.)*

- a. *Life has meaning when you live where you want to live, do what you want to do and spend time with people you enjoy.*
- b. *Life involves work and play, challenge and comfort, familiar routines and some adventure.*
- c. *People who live a meaningful life have choice and control over everyday events.*
- d. *They have continuity in their relationships and they feel safe.*
- e. *Life also has meaning when you have a valued role in your community and when it includes the friendships and intimacy that you desire.*
- f. *Life takes on meaning when you participate in the normal rhythms and activities for someone of your age and culture.*
- g. *And when that is no longer possible because of advanced age or the near likelihood of death then life has meaning when you are supported to manage your pain and decide how you want to live the remainder of your days).*

3. Find out about Person Centered Plans in your agency. (*Accept answers consistent with your agency's policies*)
  - a. What name has your agency given to the Person Centered Plan (OSP, ISP, IPP, IHP, IEP etc)?
  - b. What title has your agency given to the people that coordinate the plan?
  - c. Does your agency use Therap? If so, which modules do they use?
  - d. If your agency does not use Therap, where are the Person Centered Plans kept?
  - e. What parts are in each Person Centered Plan?
  - f. What are your responsibilities related to the Person Centered Plan?
  - g. When and how can plan be changed?
  
4. Find out what a person you support knows about their Person Centered Plan. (*Accept answers consistent with your agency's policies*)
  - a. Can this person tell you what his or her goals are this year?
  - b. Have you observed them learning or doing anything to reach their goals?
  - c. What are you supposed to do to help the person reach his or her goals?
  - d. Does the Person Centered Plan tell you when, where, and how to provide support to this person?
  
5. List **five** people that are often found on teams.
 

Example: Person with a disability

  - a. PC/QDDP
  - b. Someone who knows the person well
  - c. Family
  - d. Direct Support Professional
  - e. Consultant
  
6. Read each description of the parts of a plan. What is the title of each part?
 

**Background Information** This section tells about personal preferences and what other people say about what the person has accomplished. It also includes information about what kinds of support is helpful.

**Objectives** are outcomes or steps that, when met, lead to achievement of a goal.

**Supports or Action Steps** Teams often write out the steps staff members need to do to achieve each objective. This can include what to say and how to respond to provide support.

**Goals** are broad statements about what the person wants to accomplish in a big way and why. Each one needs criterion so that the team can tell when it has been met.
  
7. Read the goal below. List things you might do from the start to help Sara achieve her goal. List more things you will do every day or week. Talk it over with others to get ideas.

<b>Sara's Plan</b>	
<b>Goal: At the end of the year, Sara will send or respond to daily emails from family and friends without help from others. Sara has her own laptop and reads emails, recipes, lists and short stories. She can copy words but tires easily.</b>	
<b>Things I will do to help her start</b>	<b>Things I will do every day/week</b>
<p>1. Set up a word bank with key phrases she can cut and paste into messages.</p> <p>2. Install Cube Writer a program that helps her form messages easily</p> <p>3. Set up a mailing tree to have people send messages every day.</p>	<p>1. Help her decide which message to keep</p> <p>2. Write out simple messages for her to copy</p> <p>3. Listen to her comments about email</p>

### Chapter 3: What are the roles and responsibilities of team members?

1. Describe at least two steps teams can take to make decisions about when and where meetings should be held.
  - a. Select a place and time the person is most comfortable with using
  - b. Make sure it works for others on the team
2. As you read in chapter 2, a PC/QDDP is also a part of the team. They are the people who help individuals plan and coordinate their meetings. Describe 2 skills the PC/QDDP/meeting facilitator needs to have and special tasks that they may complete during a meeting.

**Skills:** to be organized, have good communication skills and the ability to lead the team in solving challenges and resolving conflicts

**Tasks:** meets the individual before the meeting and also invites direct support professionals to help the person prepare for the meeting. They usually send out the invitations, lead the discussion or summarize the results of the meeting.

3. Which of the following describe ways that direct support professionals provide information that will assist the team in the Person Centered Planning process?
  - a. Assisting with assessments that are used in Person Centered Planning
  - b. Regular documentation
  - c. Supporting the person to prepare for his or her meeting
  - d. Sharing information at the meeting
  - e. Sharing information with others who will be attending the meeting
  - f. **All of the above**
4. Number these statements from 1 to 4 in the order they should take place if an adolescent/adult demonstrates a need for support in decision-making. (The parents may also wait to petition for guardianship after the person turns 18 but it is usually done before)
 

  3   The court appoints the parent as a legal guardian for financial and medical decisions only.

  2   A parent petitions to become their legal guardian.

  4   The PC/QDDP meets with the parent to discuss finances.

  1   An individual approaches/reaches age 18.
5. Check all of the items below that make a true statement.

A person may want to invite his or her friend, classmate, or co-worker to the team meeting because they:

- a. are experts in the team planning process
- b. are important people in the person with a disability's life
- c. help the person share in the team planning experience
- d. know the agency policies and procedures
- e. usually know the person well

6. Name at least 3 people with special expertise who might advise team members or train direct support professionals in how to implement a person's plan. (*Answers will vary. Could also include OT/PT, employer etc.*)

- a. *Speech Language Pathologist*
- b. *Nurse*
- c. *Psychologist*

7. Answer these questions about your agencies' policies for developing person-centered plans. (*Accept any answer consistent with your agency's policies*)

- a. Are the policies written down for you to follow? Yes/No
- b. Where are any policies kept? \_\_\_\_\_
- c. Does your agency use ground rules in a meeting? Yes/No
- d. What informal rules are followed by staff? \_\_\_\_\_
- e. Does the person you support understand or have a copy of his or her plan? \_\_\_\_\_
- f. How can a direct support professional assist a person to understand his/or her plan? \_\_\_\_\_

8. Here is a list of people who might be on a team. Describe how each of these team members contributes to the person-centered planning process. Tell why they are important.

- a. **Person with a disability** (*They are the reason we have a plan, our goal is to involve them as much as possible*)
- b. **PC/QDDP or team facilitator** (Helps the person lead the meeting, make sure everyone is supported to participate)
- c. **Direct support professional** (*Has the most involvement in carrying out the plan from day to day*)
- d. **Someone who knows the person well** (*In the best position to make sure the plan will work for the person and can share their unique history*)
- e. **Consultant** (*Brings special knowledge needed by the team*)

#### **Chapter Four: How Can I Support People to be Active in Planning?**

1. Name three ways that people with disabilities can be supported to invite others to their meeting

- a. *Meet with the PC/QDDP before the meeting*
- b. *Use simple words and clip art to make an invitation to the meeting*
- c. *Deliver the invitation in person or by email or mail*
- d. *Use a pre-recorded phone message to send to someone you plan to invite*
- e. *Set the date*
- f. *Put a sticker, clip art or date for the meeting on your calendar*
- g. *View a video to help you remember what happens at a meeting*
- h. *Ask someone else to take care of these details for you*

2. Can you think of other ways that people can take control of their meeting? (*Answers will vary*)

3. Frank always sits quietly at his meetings but does not respond well when his team asks him question in the meeting. You know Frank does not want to be put on the spot but has a lot to share. What would you do to help him share information at the meeting? *(Answers will vary but should involve sharing information in a format that makes sense to Frank using photos or objects).*

4. Read the list of actions that take place in a meeting. Circle the ones that you think the people you support might like to try? *(Answers will vary)*

- Thank people for coming
- Say "Let's get started."
- Pass out an agenda
- Show a copy of the goals from last year
- Say "Tom helped me write 2 things I am good at."
- Say "Does anyone else have something to add?"
- Share a picture of dreams for the future
- Say "What do you think of that idea?"
- Say "How can we make that happen?"
- Say "Will you write down these ideas for me?"
- Say "Who will be responsible for that?"

5. Suppose when people came to the meeting they had an agenda to help them. Look at the sample agenda below. Read the headings: What I Do, What I Can Say, and What's Next. Now fill in the next blanks with some examples of your own. *(Answers will vary)*

6. Think about a person you support. Describe one example of how you could involve the person in deciding if he/she has met a goal or an objective.

*Answers will vary but should reflect creative approaches similar to those in the module:*

- a. Videotape the person in an activity. After watching the video together, answer questions about what has been accomplished. Compare answers. Discuss differences.
- b. Create a folder or scrapbook of accomplishments. Add to this from time to time. It helps the person notice what they are doing well. It's good for self-esteem and can serve as motivation to keep trying to learn new things.
- c. Make a list of steps or goals you think the person has achieved. Invite someone they trust to review the list. See if they agree. If not, decide together what needs to happen. This approach puts the person in the driver's seat.
- d. Use objects or counters whenever a task or goal is attempted. Help the person decide on an all or nothing basis. Example: All the boxes are filled means the goal is met.
- e. Use bar charts or line graphs to show progress so that when the line is at the top or enters a shaded area, that means the goal is met.

7. Check any of the items below that are true.

- a. Plans become "real" when the plans are written by the team
- b. Plans become "real" when the plans are used by someone as a guide
- c. Plans must be developed using technical terms in order to meet funding and accreditation standards.
- d. Plans in easy to understand language with picture symbols increase the likelihood that the person with a disability will be able to use the plan.
- e. Some plans are legal documents. They cannot be adapted for people with limited reading ability.

- T   f. While some plans are legal documents, a simpler copy can be made.
- g. Easy-to-understand plans are created only for the benefit of PWD
- T   h. Easy-to-understand plans benefit many members of the team
- i. People are more likely to go along with plans if people who know them well help helped to create the plan.
- T   j. People are more likely to go along with plans they help create

8. Match the step in the team process with the examples for increasing participation by the person with a disability.

Steps in Person Centered Planning	Strategies for Increasing Participation
a. Review the previous goals	<u>  b  </u> Bring ideas in a format he/she can understand
b. Share information with the team	<u>  c  </u> Set the date. Put a sticker, clip art or date on your calendar
c. Plan the meeting	<u>  a  </u> Use visual aids to show how much has been accomplished (graph, pie chart, etc.)
d. Lead the meeting	<u>  d  </u> Put all the meeting steps into a PowerPoint and show the person how to advance each slide.
e. Capture team discussion	<u>  e  </u> Ask someone to record discussion and decisions during the meeting
	<u>  b  </u> Bring photos that show some of this person's strength's and dreams for the future
	<u>  c  </u> Meet with the PC/QDDP. Look at photos of people who could attend. Select pictures of people to invite.
	<u>  a  </u> Use bar graphs that show how much is accomplished
	<u>  e  </u> Record important decisions using clip art and key words.
	<u>  d  </u> Record an audio file of pivotal questions to ask the team. Help the person activate it at key points in the meeting.

9. List at least two skills that people with disabilities may learn from planning.  
*(Understanding an if/then relationship, Following a rule or a guide, Learning how to control events, Visualizing what you want to happen, Recognizing symbols or icons, Reading simple information or sight words, Organizing your thinking to solve challenges)*

## Chapter 5: Person Centered Career Planning

### True or False

- T   1. Actions by Federal agencies suggest that employment of people with significant disabilities is a national priority.
- F   2. Federal agencies are the only entities advocating for increasing integrated employment options for people with disabilities.
- T   3. Person Centered Planning plays a critical role in increasing employment outcomes for people with I/DD.

4. Which of the following are important outcomes that people can achieve through meaningful work:
  - a. improved physical and mental health
  - b. improved self-esteem
  - c. wages
  - d. all of the above**
  
5. Studies have found that people with disabilities want opportunities to:
  - a. Do meaningful work
  - b. Demonstrate their skills and talents
  - c. Choose their own careers, and have the same opportunities for career advancement as people without disabilities
  - d. All of the above**

### True or False

- T   6. One of the major barriers to increasing the number of people in integrated work settings is low expectations related to employment for people with disabilities.
  
- T   7. One benefit of integrated employment can be an increase in connections and social capital.
  
- F   8. Encouragement from professionals and families has little impact on a person's choices to pursue integrated employment.
  
- T   9. To achieve positive employment outcomes, work may need to be presented as a high priority across the lifespan.
  
- T   10. The person centered team will need to provide individualized support to each individual based on where the person is on the path to employment.
  
- F   11. Every person with disabilities, who isn't currently employed, understands the value of work wants to be employed.
  
12. \_\_\_\_\_ often need information about work, career exploration, employment supports, and how work will impact the person's life.
  - a. Families of the person with a disability
  - b. Young adults in high school and working age adults with disabilities
  - c. Members of the person's support network
  - d. All of the above**

### True or False

- F   13. Everyone with a disability needs support with discovery process before actively seeking a job.
  
14. Which of the following are reasons that people with disabilities may need extra support in finding meaningful work? (More than one answer may be correct)
  - a. limited work and life experience on which to base job search decisions**

- b. **limited expectations for themselves**
  - c. **limited experience in making decisions for themselves**
  - d. **supporters sometimes have difficulty identifying successful job matches**
  - e. **limited information about jobs**
15. Which of the following are descriptors of the Discovery Process?
- a. A way to compare people against others or standards
  - b. **Spending time with a person to take a close look at their life**
  - c. Deficit or problem based
  - d. **A way to discover people's strengths in places familiar and comfortable**
  - e. **A strategy to convert life activities into job possibilities**
  - f. **A way to look at the life a person has led; the current life; the life the person wants to lead**
  - g. **Planning support for job seekers who need intensive individualized efforts**
  - h. Can be completed in an afternoon
  - i. **Especially suited for matching an applicant to job possibilities that make sense**
16. The next step after Discovery is to translate what was learned about the person into \_\_\_\_\_.
- a. Assessment scores
  - b. **Job possibilities**
  - c. Volunteer opportunities
  - d. Goals and objectives

### True or False

  F   17. Discovery is the last step in finding a person a job.

18. \_\_\_\_\_ documents what was learned through the Discovery Process.
- a. **Employment Profile**
  - b. Resume
  - c. Case file

19. The Employment Profile can be used to \_\_\_\_\_.
- a. form the basis for developing employment goals in the Person Centered Planning Process
  - b. help ensures that the team has a clear picture of the person's positive attributes
  - c. identifies supports or accommodations that will help ensure that the job seeker will be successful at a job
  - d. **All of the above**

### True or False

  F   20. Challenges the person experiences are not included in a Positive Personal Profile

- T   21. The team needs to consider where the person is in their Path to Employment when setting Employment goals during the Person Centered Planning meeting.
- F   22. If a person is not currently focused on employment there is no need to discuss employment at the Person Centered Planning meeting.
- T   23. For individuals who are currently on a path to employment but not currently employed, the team is focused on employment possibilities rather than impossibilities or limitations.
- F   24. If the person is currently in a job/career and indicates general satisfaction with their current job and earnings there is no need to discuss employment at the Person Centered Planning Meeting.
- T   25. If we are committed to person centered career planning, we will take the time to ask people if they are satisfied with their jobs or if they have any concerns at their Person Centered Planning meeting.

**Chapter 6: How do teams prepare effectively? What works and why?**

1. Here is a list of steps that many teams follow to create plans. Review this list with someone at your agency. In the box next to the list write in any differences in the steps teams follow in your agency.

<b>Many agencies follow these steps</b>	<b>In our agency we add/change these steps</b>
a. Greet everyone. Make introductions b. Review the person's current life situation c. Talk about his or her strengths, dreams and vision for the future d. Identify some possible goals e. Discuss any support or teaching the person will need to help reach the goals f. Identify possible solutions for any challenges that might prevent the person from meeting the goals g. Record important goals, objectives, timelines, and who is responsible to carry out each part of the plan.	<i>(Answers will vary. Accept responses consistent with your agency's policies)</i>

2. Your module says that to prepare for a meeting you should get to know the (person) and their (plan).
3. When you are trying to get to know the person, you want to learn as much as you can about the person's (interests, dreams, strengths, goals), and (satisfaction) with their current life.
4. How would you go about finding out this information from the people you support? *(Interview, read file, conversation, ask others, observe, etc.)*

5. List four solutions to possible challenges or barriers to any goals that are important to the person you are supporting.
  - List what others have done
  - Visit with a consultant to get ideas
  - Ask the person's family to comment (with permission)
  - Ask the person what they think will work
  - Re-state challenges as needs (Example: Mary doesn't take the time to cook and wants to eat out every night = Mary needs easy-to-fix favorite meals).
  - Look for ideas in online search engines or videos
  - Visit with an employer or community expert
  
6. List 3 things you can do to look and act as a good role model for others at the team meeting.
  - a. *Listen, take turns, speak up*
  - b. *Be on time, take notes*
  - c. *Dress professionally*
  
7. You must be prepared to speak up and to respond at a team meeting. List two strategies you can use to prepare to speak and respond at the meeting.
  - *Call the PC/QDDP*
  - *Ask for an agenda*
  - *Observe several meetings*
  - *Make a list of five key ideas to bring*
  - *Create the list with the person receiving support*
  - *Show them to co-workers – get feedback*
  - *Practice what to say at a staff meeting*
  
8. Explain why it is important to share your ideas in positive terms in a meeting. Give an example of how you would share a concern about someone's behavior in positive terms.

Carson likes to stay up late and watch TV. He refuses to go to bed and is too tired to get up for work.	<p><i>Accept any effort to restate this challenge in positive terms.</i></p> <p><i>Example: Carson, you like to go to bed when you are ready. I am concerned that you may not be getting enough sleep. I know you have been tired in the morning.</i></p>
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9. Describe in your own words what "need-to-know" means. Who needs to know about someone's plan? *People who have to carry out the plan need to know what it says. This can include family if they will be supporting the person when they visit home*
  
10. When preparing for a team meeting, what questions will do you need to ask about the person's current plan and how will you find the answers? *(Answers will vary – what are the goals, are they met, how do we know, are they working for the person, how quickly were they met)*
  
11. What other roles do direct support professionals have in getting ready for the meeting? *(Being ready with ideas to contribute, helping the person prepare, knowing what works and having solutions to propose)*

12. Read the story in the box below. Respond to each item in the box on the right. Consult with other people to think of answers.

At the Meeting	What you Think
<p>Alice is leading a team meeting for Mary for the first time. Mary has invited her family, and two friends from high school to be on her team. Staff members from her residential program and a new job coach are also at the meeting. Mary is 22 year's old and has just moved away from home into an apartment for the first time. Mary wants a job and plans to give a party next weekend. "Mom would never let me have a party at home and now I can," she tells the team. Mary's mom is not sure that is a good idea and is expecting you to tell Mary that she needs to wait or be careful. Mary worked in the cafeteria at her school and babysat her younger brother. She can read romance novels and newspapers but is easily taken advantage of by others. Mary has a boyfriend and she is hoping he will buy her a ring for her birthday. Mary is sure her new roommate will be her best friend. She plans to go shopping for a new bedspread this weekend. Her parents are the representative payee for her government benefits.</p>	<p>-List 3 strengths for Mary</p> <ul style="list-style-type: none"> <li>• Brave</li> <li>• Has goals</li> <li>• Work experience</li> </ul> <p>-Describe her vision for the future</p> <ul style="list-style-type: none"> <li>• Have a job</li> <li>• Enjoy life</li> <li>• Do what other young people do</li> </ul> <p>-List a potential goal</p> <ul style="list-style-type: none"> <li>• Mary will have a safe party at her new apartment</li> </ul> <p>-Describe a conflict that Mary might have with her family.</p> <ul style="list-style-type: none"> <li>• Having fun vs being safe</li> </ul> <p>-How will the team balance the need to support Mary and keep her safe?</p> <ul style="list-style-type: none"> <li>• Show Mary how to have fun in a safe way.</li> <li>• Teach Mary about healthy relationships.</li> </ul>

13. When and how do Person Centered Planning teams in this agency: *(Answers will vary. Accept responses consistent with your agency's policies)*
- a. Decide if the plan is helping the person meet the goals?
  - b. Revise the plan as needed?

### Chapter 7: How do Person Centered Planning teams work together and solve challenges?

1. Person Centered Planning is a way of thinking about and planning with people that shows respect for their *(Interests, hopes and dreams)*
2. List at least two features of Person Centered Planning that help to make it respectful or unique. *(Accept any of the following)*
  - *See others as people first. Look past any labels to find the person*
  - *Use ordinary language and images instead of professional jargon*
  - *Actively search for a person's gifts and capacities in community life;*
  - *Strengthen the voice of the person and those who know the person best*
  - *Evaluate the person's present situations in terms of valued experiences*
  - *Define desirable changes in the person's life*
  - *Decide how to implement changes and support people in reaching their goals*

3. When technical terms can't be avoided at the Person Centered Planning meeting, be sure you (define these terms for people who might not understand).
4. Two examples of (information sharing) are reporting the results of any assessments that were given or telling what the findings mean for the person with a disability.
5. Pivotal statements turn the Person Centered Planning team's attention to important tasks. Name at least two pivotal statements that a PC/QDDP might use to focus the team on important actions and keep the team on track. *(Accept any two answers)*
  - *Who is this person we are here to support?*
  - *What really matters to this person?*
  - *What are his or her dreams, nightmares, goals?*
  - *What are his or her most important human needs? Or What is important for this person?*
  - *What do we need to know to support this person?*
  - *What happens when this person needs assistance or training?*
  - *What are this person's greatest risks in the near future?*
  - *What would have to happen to meet their needs?*
6. Check all of the items below that make a true statement.  
Direct support professionals excel in Person Centered Planning team meetings when they look for and respond to opportunities to:
  - a. share positive information
  - b. affirm others
  - c. describe the residential program
  - d. explain the latest challenge
  - e. clarify information
  - f. solve challenges
7. The Person Centered Planning team uses (shared values) to guide the decision-making process.
8. Name 3 shared values. *(Accept any 3 from the list below)*
  - a. *Help the person achieve outcomes which are important to them.*
  - b. *Help the person move from a position of dependence toward a position of independence.*
  - c. *Help the person move from powerlessness toward having more control over his or her environment.*
  - d. *Help the person move from basic to more complex behaviors to adapt or cope with more and more complex situations.*
  - e. *Help the person move from negatively valued behaviors to more positively valued responses.*
  - f. *Help the person to both exercise his or her own rights and be responsible for the outcomes of their actions on others.*
  - g. *Help the person develop a wider-base of relationships to extend beyond the service agency.*

### True or False

- F** 9. In consensus decision-making, **not** every member of the group has an equal opportunity to influence the final decision.
- T** 10. Silence during consensus decision-making can be mistaken for consent.

- F 11. There are 5 steps to consensus decision-making.
- T 12. The first step in consensus decision-making is agreeing on a common definition of the challenge.

13. What advantages does consensus decision making have over majority rule decisions?
- *Taking a vote too soon eliminates the possibility of reaching a compromise, or creative combination of points of view.*
  - *Consensus decision making increases the chances for the best possible decisions*
  - *People tend to feel the strongest commitment to decisions they helped make*

14. List three criteria for judging alternatives generated during problem solving at team meetings.
- *Legal and human rights*
  - *Normalization*
  - *Respect for the dignity of the person*

15. A plan that uses what the person knows about his or her likes and dislikes is more personalized. Fill in the blank below with your ideas for signs or behaviors that can tell you about someone you support's preferences when they do not or could speak. *(Answers will vary. Accept any two or more examples that are similar for each category)*

<b>Think about the Signs</b>	<b>Ask Questions</b>	<b>Look for answers How can you tell?</b>
<b>Self expression</b>	What are this person's favorite activities?	Foods, TV shows, games, places to go, animals, music, colors, clothes, being alone, friends, objects or toys
<b>Feelings</b>	What do they feel strongly about?	Calming, happy, motivates, dislikes, fears, relaxes, worries, regrets, strong beliefs
<b>Relationships</b>	What people are important to them? Why?	Communication style, affection, friendships, responses to others, sense of humor
<b>Choices</b>	What is important in this person's routines?	Food, clothing, activities, sports, bedtime, bathing, shopping, hygiene, travel, meals, medications, therapy
<b>Physical</b>	What is this person's body saying	Best time of day, energy level, medication effect, stamina, control, frustration level
<b>Health</b>	What are this person's health issues?	Illnesses, wellness, allergies, immune system, symptoms, when they feel bad or good, going to the doctor or dentist
<b>Roles</b>	What roles does the person have in their family and community?	Involvement, caregivers, choice making options, contributions, dreams for the future

# APPENDICES

# Resource

## Positive Personal Profile (PPP)

Name: \_\_\_\_\_

<b>Dreams &amp; Goals:</b>	<b>Talents:</b>
<b>Skills &amp; Knowledge:</b>	<b>Learning Styles:</b>
<b>Interests:</b>	<b>Positive Personality Traits:</b>
<b>Temperaments:</b>	<b>Values:</b>
<b>Environmental Preferences:</b>	<b>Dislikes, Quirks, &amp; Idiosyncrasies:</b>
<b>Work Experiences:</b>	<b>Support System:</b>
<b>Possibilities &amp; Ideas:</b>	

## Positive Personal Profile

**Name: Robert H.**

<p style="text-align: center;"><b><i>Dreams and Goals</i></b></p> <p>Get a job and move into my own apartment. Meet some friends.</p>	<p style="text-align: center;"><b><i>Interests</i></b></p> <p>Music, likes hip hop, rap and Heavy metal, Listens to the radio- a lot, (KMEL and the BONE), WWF, comics, Spanish soaps, likes basketball and baseball. Wants to meet cool people. Loves computer/video games (Playstation) – action games “killing people” Rides his exercise bike, likes walking/hiking</p>										
<p style="text-align: center;"><b><i>Talents, Skills and Knowledge</i></b></p> <p>Knows a lot about music (current artists), very athletic- good coordination, worked in mailrooms familiar with USPS, worked at Virgin Megastore(seasonal), familiar with lots of office equipment (computers, fax, copiers), likes working with “machines” and tools, learns quickly, good memory</p>	<p style="text-align: center;"><b><i>Learning Styles</i></b></p> <p>Verbal directions should be clear and concise. Modeling new tasks is preferred. Can follow written directions if he is familiar with tasks. Does not like change- introduce and explain any changes- may need reminders if expected to do things differently.</p>										
<p style="text-align: center;"><b><i>Values</i></b></p> <p>Being respected by others. Being popular- having friends.</p>	<p style="text-align: center;"><b><i>Positive Personality Traits</i></b></p> <p>Punctual! , Honest, Candid, Smart, detail-oriented, a man of great resolve, strong self-advocate,</p>										
<p style="text-align: center;"><b><i>Environmental Preferences</i></b></p> <p>Clean, well organized. Casual, hip places (but not loud) - nothing too professional or boring. Quiet but friendly.</p>	<p style="text-align: center;"><b><i>Dislikes</i></b></p> <p>Kids. chaotic loud places. Special Ed and disabled services, will not ride the bus at night, change, people talking about him, being interrupted- or being told what to do. Being patronized, condescending, people asking questions or interrupting me</p>										
<p style="text-align: center;"><b><i>Work Experiences</i></b></p> <p>No starch press- order fulfillment/shipping, lite data entry Virgin Megastore (x-mas job)- processing cd’s (liked this job best because of the people and music, didn’t like helping customers) Garden center- hated it. Does not like dirt or helping customers. Trader joes- collecting carts/stocking—hated customers, did not like cleaning (swept and mopped salesfloor), job was in afternoon- hated that.</p>	<p style="text-align: center;"><b><i>Support System</i></b></p> <p>Family (Pacita/mom,Anthony/dad and two brothers- TJ still at home)</p>										
<p style="text-align: center;"><b><i>Specific Challenges</i></b></p> <p>Needs assistance when he has to be “flexible”. Needs explanation when things change. Sometimes gets angry when things are not going his way. Needs reminders to stay focused. Initiative is a concern.</p>	<p style="text-align: center;"><b><i>Solutions and Accommodations</i></b></p> <p>Structured tasks, consistent routine. Concrete, concise instruction. Direct feedback.</p>										
<p><b>Career Ideas and Possibilities to Explore:</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Metreon- playstation store (stockroom)</td> <td style="width: 50%;">SEGA</td> </tr> <tr> <td>KMEL (Clear Channel)</td> <td>Niketown or Copeland’s sports</td> </tr> <tr> <td>The BONE</td> <td>Guardian newspaper/SF WEEKLY</td> </tr> <tr> <td>Virgin Megastore (stockroom/pricing)</td> <td>COMPUSA (games section)</td> </tr> <tr> <td>GAMEPro Magazine</td> <td>Duplication houses—Olde West, Mixonic, Revolver Records</td> </tr> </table>		Metreon- playstation store (stockroom)	SEGA	KMEL (Clear Channel)	Niketown or Copeland’s sports	The BONE	Guardian newspaper/SF WEEKLY	Virgin Megastore (stockroom/pricing)	COMPUSA (games section)	GAMEPro Magazine	Duplication houses—Olde West, Mixonic, Revolver Records
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SD Department of Human Services  
Division of Developmental Disabilities

PERSON CENTERED EMPLOYMENT  
PLANNING GUIDE

*2015*

Path to Employment	Sample Questions	PCT Tools for Discovery	Participant Responses and Direction	Employment Action Plan and ISP Content ✓ Employment Discovery OR Supported Employment/Career Planning
Person is in school and is planning for employment post-graduation	<p><u>Individual Interests</u></p> <ol style="list-style-type: none"> <li>1. What are your favorite parts of the school day?</li> <li>2. If you could have any job, what would it be and why?</li> <li>3. Have you had a job before?</li> <li>4. Do you have responsibilities/chores at home?</li> <li>5. Which chores do you enjoy most?</li> <li>6. Which chores do you most dislike?</li> </ol> <p><u>Money</u></p> <ol style="list-style-type: none"> <li>1. When you graduate, where will you live?</li> <li>2. Will you have to pay for rent, groceries, and utilities?</li> <li>3. Do you know how much you need to make to pay your bills?</li> <li>4. How much money will you need to have fun?</li> </ol> <p><u>Self-Determination</u></p> <ol style="list-style-type: none"> <li>1. Is there anything that worries you about getting a job?</li> <li>2. Is your family excited that you want to get a job?</li> </ol>	<ul style="list-style-type: none"> <li>• Important To/For</li> <li>• Using Gifts to Build Connections</li> <li>• Good Day/Bad Day</li> <li>• Routines/Rituals               <ul style="list-style-type: none"> <li>○ Identify peak performance time throughout the day/evening</li> </ul> </li> <li>• Relationship Map               <ul style="list-style-type: none"> <li>○ Natural support networks</li> <li>○ Informs Matching Tool for personality characteristics</li> </ul> </li> <li>• Matching Tool               <ul style="list-style-type: none"> <li>○ Identify supports and skills needed,</li> <li>○ Personalities that may or may not work well for the person</li> </ul> </li> <li>• Communication Chart               <ul style="list-style-type: none"> <li>○ Identify communication and supports on the job</li> </ul> </li> <li>• Learning Log               <ul style="list-style-type: none"> <li>○ Use during job shadowing, etc.</li> </ul> </li> <li>• Hopes and Fears exercise               <ul style="list-style-type: none"> <li>○ Positive focus while acknowledging and addressing fears</li> </ul> </li> </ul>	<p>If the participant has a clear desire for employment after graduation, the team can:</p> <ul style="list-style-type: none"> <li>• Determine whether career path includes post-secondary education</li> <li>• Decide to move forward and learn together,</li> <li>• Consider this participant as a candidate for Vocational Rehabilitation services,</li> <li>• Identify employment support provider and resources related to achieving employment</li> </ul> <p>If the participant is of working age but unable to clearly answer the questions, the team may:</p> <ul style="list-style-type: none"> <li>• Go to the next set of questions and consider employment in 2 years, rather than this year, or</li> <li>• Stay with this plan if they believe the participant does want a job in the next year.</li> </ul>	<ol style="list-style-type: none"> <li>1. Identifies the desired weekly schedule, including:           <ul style="list-style-type: none"> <li>• Hours of Service and Outcome (1-40)</li> <li>• Schedule and environments</li> <li>• Identify present level of employment outcomes</li> </ul> </li> <li>2. Identifies the desired outcome for the participant through Employment Action Plan;           <ul style="list-style-type: none"> <li>• Addresses the goal with activities targeted to having a job within the next twelve months</li> </ul> </li> <li>3. Identifies actions and activities to identify and highlight employment related competencies (Outcome is to overcome job seeker and family fears and barriers)</li> <li>4. Identifies employment support provider and resources related to achieving employment</li> <li>5. Identifies strategies to access potential funding resources for employment</li> <li>6. Addresses other “Important To” and “Important For”</li> </ol>

Path to Employment	Sample Questions	PCT Tools for Discovery	Participant Responses and Direction	Employment Action Plan and ISP Content ✓ Supported Employment/Career Planning
The person is currently in a job or career	<ol style="list-style-type: none"> <li>1. Do you want to stay where you are?</li> <li>2. What do you like about the job you have now?</li> <li>3. Is there anything you do not like about the job you have now?</li> <li>4. Do you want to try something new where you are currently working?</li> <li>5. Do you want to learn about different jobs?</li> <li>6. How can we help you learn about other kinds of jobs?</li> <li>7. Would you like a job somewhere else? How much money did you make last year?</li> <li>8. Are you making enough money to meet your living expenses?</li> <li>9. Do you need to make more money? If so, why?</li> </ol>	<ul style="list-style-type: none"> <li>• Important To/For</li> <li>• Working/Not Working <ul style="list-style-type: none"> <li>○ From perspective of participant, employer, job coach</li> </ul> </li> <li>• 4+1 Questions <ul style="list-style-type: none"> <li>○ Create an action plan to address concerns and be sure that there is support to continue with “what we’re pleased about”</li> </ul> </li> <li>• Using Gifts to Build Connections</li> <li>• Donut <ul style="list-style-type: none"> <li>○ Help with clarification on job responsibilities, duties</li> </ul> </li> </ul>	<p><u>If individual indicates general satisfaction</u> with their current job and earnings, then the focus of this path is to maintain or improve the outcomes of their current situations (e.g. hours, pay, expanded job responsibilities, promotion)</p> <p><u>If the individual indicates dissatisfaction</u> with their current job and/or earnings, but clearly wants to work or change work situations, go on to the next set of questions, under the path “Person wants a job this year.”</p>	<ul style="list-style-type: none"> <li>• Hours of service and outcome (1-40 hours per week).</li> <li>• Identify present level of employment outcomes, if any.</li> <li>• Consideration for Vocational Rehabilitation services;</li> <li>• Identifies employment support provider and resources related to achieving employment;</li> <li>• Identifies desired weekly schedule and environments;</li> <li>• Identifies strategies to access potential funding resources for employment;</li> <li>• Identifies actions and activities to identify and highlight employment related competencies;</li> <li>• Addresses how the participant will increase their wages, either through increased hours or another job.</li> <li>• Addresses other “Important To” and “Important For” activities, supports that may continue to be available.</li> <li>• Documents team recommendation if group supported employment is identified as the participant’s desired outcome, and <ul style="list-style-type: none"> <li>○ Documentation that the person has made an informed decision to retain group supported employment rather than individual integrated employment</li> <li>○ Documentation of continued team discussion regarding the participant’s employment goals</li> </ul> </li> </ul>

Path to Employment	Sample Questions	PCT Tools for Discovery	Participant Responses and Direction	Employment Action Plan and ISP Content ✓ Employment Discovery
Person is unemployed or underemployed and wants a job this year	<p><u>Individual Interests</u></p> <ol style="list-style-type: none"> <li>If you could have any job what would it be?</li> <li>Do you like working alone or with people?</li> <li>What is important to you about work?</li> <li>Have you had a job before?</li> <li>Do you want to try some different kind of work?</li> <li>Do you want to advance your career in the same field?</li> <li>What type of training might help you achieve your goal?</li> </ol> <p><u>Money</u></p> <ol style="list-style-type: none"> <li>How much money do you need to make to pay your bills?</li> <li>How much money will you need to have fun?</li> </ol> <p><u>Self-Determination</u></p> <ol style="list-style-type: none"> <li>Are there jobs you do not want to do?</li> <li>Are there reasons you are having a hard time getting a job?</li> <li>Is there anything that worries you about getting a job?</li> <li>Is your family excited that you want to get a job?</li> </ol>	<ul style="list-style-type: none"> <li>Important To/For</li> <li>Using Gifts to Build Connections</li> <li>Good Day/Bad Day</li> <li>Routines/Rituals             <ul style="list-style-type: none"> <li>Identify peak performance time throughout the day/evening</li> </ul> </li> <li>Relationship Map             <ul style="list-style-type: none"> <li>Natural support networks</li> <li>Informs Matching Tool for personality characteristics</li> </ul> </li> <li>Matching Tool             <ul style="list-style-type: none"> <li>Identify supports and skills needed,</li> <li>Personalities that may or may not work well for the person</li> </ul> </li> <li>Communication Chart             <ul style="list-style-type: none"> <li>Identify communication and supports on the job</li> </ul> </li> <li>Learning Log             <ul style="list-style-type: none"> <li>Use during job shadowing, etc.</li> </ul> </li> <li>Hopes and Fears exercise             <ul style="list-style-type: none"> <li>Positive focus while acknowledging and addressing fears</li> </ul> </li> </ul>	<p>If the participant has a clear desire for employment now, the team can:</p> <ul style="list-style-type: none"> <li>Decide to move forward and learn together,</li> <li>Consider this participant as a candidate for Vocational Rehabilitation services,</li> <li>Identify employment support provider and resources related to achieving employment</li> </ul> <p>If the participant is of working age but unable to clearly answer the questions, the team may:</p> <ul style="list-style-type: none"> <li>Go to the next set of questions and consider employment in 2 years, rather than this year, or</li> <li>Stay with this plan if they believe the participant does want a job in the next year.</li> </ul>	<ol style="list-style-type: none"> <li>Identifies the desired weekly schedule, including:             <ul style="list-style-type: none"> <li>Hours of Service and Outcome (1-40)</li> <li>Schedule and environments</li> <li>Identify present level of employment outcomes</li> </ul> </li> <li>Identifies the desired outcome for the participant through Employment Action Plan;             <ul style="list-style-type: none"> <li>Addresses the goal with activities targeted to having a job within the next twelve months</li> </ul> </li> <li>Identifies actions and activities to identify and highlight employment related competencies (Outcome is to overcome job seeker and family fears and barriers)</li> <li>Identifies employment support provider and resources related to achieving employment</li> <li>Identifies strategies to access potential funding resources for employment</li> <li>Documentation if an extension is deemed necessary to assist the participant in achieving desired outcome             <ul style="list-style-type: none"> <li>Progress and milestones accomplished within one-year timeframe</li> <li>Barriers to be addressed during extension period</li> <li>Action plan to build on success and address identified barriers</li> <li>Addresses other "Important To" and "Important For"</li> </ul> </li> <li>Addresses other "Important To" and "Important For"</li> </ol>

Path to Employment	Sample Questions	PCT Tools for Discovery	Participant Responses and Direction	Employment Action Plan and ISP Content ✓ Community Life Engagement
Employment within 2 years	<p><u>Interests, Activities, Strengths</u></p> <ol style="list-style-type: none"> <li>1. What's a typical day look like?</li> <li>2. Is there something you are really good at? What do you think you would be good at?</li> <li>3. Where do you like to spend time? What else do you like to do?</li> <li>4. Do you want to learn a new skill?</li> </ol> <p><u>Self-determination</u></p> <ol style="list-style-type: none"> <li>5. Do you want to learn about different jobs?</li> <li>6. Do you want to see how other people make money?</li> <li>7. Can you share your own interests?</li> <li>8. What is your greatest fear when thinking about working?</li> <li>9. What do we need to do better to help you be prepared to think about it in the future?</li> <li>10. What motivates you to start your day, be in your community and to work?</li> </ol>	<ul style="list-style-type: none"> <li>• Important To/For</li> <li>• Using Gifts to Build Connections</li> <li>• Good Day/Bad Day</li> <li>• Routines/Rituals</li> <li>• Learning Log <ul style="list-style-type: none"> <li>○ Use during job shadowing, etc.</li> </ul> </li> <li>• Hopes and Fears exercise <ul style="list-style-type: none"> <li>○ Positive focus while acknowledging and addressing fears</li> </ul> </li> </ul>	<p><u>From the typical day</u>, try to match activities and skills with potential employment</p> <p><u>As you listen to the answers to the questions</u>, determine if the plan should address structured activities to further self-determination.</p> <p><u>If the participant (or team) is able to answer a few questions and believes in the possibility:</u> Use Vocational Assessment to determine gaps in information that should be considered as part of Employment Action Plan.</p>	<ol style="list-style-type: none"> <li>1. Identifies the desired weekly schedule, including: <ul style="list-style-type: none"> <li>• Hours of Service and Outcome (1-40)</li> <li>• Schedule and environments</li> <li>• Identify present level of employment outcomes</li> </ul> </li> <li>2. Addresses how the individual is learning about employment so as to assess their interests, their ability to make informed choice and to overcome fears and barriers.</li> <li>3. Addresses fears and barriers related to employment.</li> <li>4. Addresses other "Important To" and "Important For" activities, supports and/or outcomes that may continue to be available during this year.</li> </ol> <p>ISP must documentation must include team decision that Community Life Engagement services are most appropriate for the person, including but not limited to:</p> <ul style="list-style-type: none"> <li>• Consideration of how current plan and activities, experiences, or interests may lead closer to employment in the future;</li> <li>• Information presented to the participant about opportunities for employment on an annual basis;</li> <li>• Documentation that the participant has made an informed decision not to work;</li> <li>• Documentation of team recommendation if Community Life Engagement services are provided in residential setting</li> </ul>

Path to Employment	Sample Questions	PCT Tools for Discovery	Participant Responses and Direction	Employment Action Plan and ISP Content ✓ Community Life Engagement
Not Focused on Employment	<ol style="list-style-type: none"> <li>1. Can you think of how your life might change if you had money for what you wanted?</li> <li>2. Can you think of how your life might change if you were more involved in the community? (friends at work, etc.)</li> <li>3. How will you spend your days while you are unemployed and/or retired?</li> <li>4. Are you a morning person?</li> <li>5. Do you like to do things later in the day?</li> <li>6. Do you like to be with other people?</li> <li>7. Do you like to be alone?</li> <li>8. Do you feel good when you are helping someone out?</li> <li>9. Do you like physical activity?</li> <li>10. Do you prefer quiet activities?</li> </ol>	<ul style="list-style-type: none"> <li>• Important To/For</li> <li>• Presence to Contribution</li> <li>• Routines/Rituals</li> <li>• Dreams/Goals</li> </ul> <p><u>If the working age participant says “I don’t want to work”</u> It is the responsibility of the team to:</p> <ul style="list-style-type: none"> <li>• Consider how present plan and life activities, experiences and interests may lead closer to employment in the future</li> <li>• Present information about and opportunities for employment on an annual basis</li> </ul> <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> <li>• Clearly document that participant has made an “informed decision” not to work (See Draft criteria)</li> </ul>	<p><b>Draft criteria: Possible Evidence of “informed choice related to decisions about employment”</b></p> <ul style="list-style-type: none"> <li>• Environment supports choice-making</li> <li>• Information is available on a variety of employment options</li> <li>• Person has had experience with options to develop personal preferences</li> <li>• Information is provided in a manner reflective of person’s ability to understand and communicate</li> <li>• Non-judgmental advice and support are offered.</li> <li>• Support includes consideration of positive and negative consequences of the decision.</li> <li>• Presentation of information is provided by more than one provider or team member.</li> </ul>	<p><u>If the participant is beyond typical working age (62) and has not expressed an interest in employment</u>, Employment Action Plan is not required within ISP</p> <p><u>For those of working age:</u></p> <ol style="list-style-type: none"> <li>1. Identifies the desired weekly schedule, including: <ul style="list-style-type: none"> <li>• Hours of Service and Outcome (1-40)</li> <li>• Schedule and environments</li> </ul> </li> <li>2. Describes non-work activities in which the participant chooses to participate in during this plan period.</li> <li>3. Addresses how preferred activities that could be related to future employment will be identified, through exploration and ways these may inform future decisions related to employment.</li> <li>4. There is a discussion record that captures efforts to assure that the participant is making an informed decision about not working. <ul style="list-style-type: none"> <li>• Documentation of team recommendation if Community Life Engagement services are provided in residential setting.</li> </ul> </li> </ol>

**The purpose of the Person Centered Employment Guide is to assist Case Managers, job development staff and others to prepare for discussions with individuals, families, and support teams to choose and implement supports that will lead to a Path to Employment.**

\*Adapted from Oregon Path to Employment, 2011.  
[http://www.dhs.state.or.us/dd/supp\\_emp/paths-to-employment.htm](http://www.dhs.state.or.us/dd/supp_emp/paths-to-employment.htm) Published by the SD Department of Human Services – 500 copies published at an approximate cost of \$.58





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