



Office for People With Developmental Disabilities

Workforce and Talent Management

Training Curriculum Series



SUPPORTING PERSON CENTERED OUTCOMES

An Introduction to Person Centered Planning

Participant's Manual



GENERAL BACKGROUND INFORMATION on PERSON CENTERED PLANNING

Overall, person centered planning (PCP) is a lifestyle discovery process used to search out what is truly important to and about a person and what capacities and skills that individual possesses. It is value based with the contention that each and every individual has unique capacities and skills. It focuses on a positive vision of the future for a person based on his or her strengths, preferences and capacities for acquiring new skills, abilities and attributes. It focuses on what a person can do versus what a person cannot do. A step-by-step process by a trained facilitator is used to help gather relevant information about a person. Each process step contributes to discovering a fuller picture of that person.

Person centered planning also identifies the various needs of an individual (e.g. habilitation needs, health care or behavioral needs, etc.) and strategies to address these needs. These strategies may be related to staffing supports, service needs, or met by natural or generic supports that exist in a person's life. The process serves to identify what is needed to create supports and services to meet the individual's needs and helps to support their direction to a quality of life that is productive and meaningful to them.

The individual is always at the center of the person centered planning process and the individual is as involved in the planning process as they are able. The person centered planning process is best accomplished with others who know and care about the person. A group engagement process explores the most important components of a person's current life, past history and future to formulate directions to take. It is very important to bring together people from various aspects of a person's life that know



and value the individual. The discovery process emphasizes active listening with a focus on capacities, skill identification, and acquisition.

Working together with unified focus, a short and long-term vision for the person's life is developed and ultimately put in place for the person to explore and learn what works for him or her. A person's true life path takes not one but many paths. Discovery does not happen once but reoccurs with each new capacity, new relationship, and new direction.

It is important not to abbreviate or simplify the person centered planning process, every element of the process is vital to real Person Centered planning. Once fully complete, the resultant person centered plan is not a finished product, instead, the plan needs to change and adjust with and for the person over time. Consequently, it is necessary to revisit the plan periodically (at least once a year) to revise, amend and qualify what works and what new paths to take. In revisiting the plan, greater understanding and discovery is achieved. These changes and modifications are similar to pathways that all people make each and every day.

There are a number of person centered planning methodologies. Although the techniques may differ, the fundamental philosophies and principles are the same. Personal Futures Planning, Making Action Plans (MAPS) and Planning Alternative Tomorrow's with Hope (PATH) are some versions of Person Centered Planning where graphics are employed to capture the discovery process. These graphic pictures are referred to as maps. Marsha Forest began using the mapping process in the 1980's in an effort for people with developmental disabilities to more actively participate in the discussion, particularly as a better and more transparent way to understand and visualize the interactive process. As the saying goes "A picture is worth a thousand words". The visual use of maps, help everyone understand and capture what takes



place. Pictorial maps assist in bridging communication gaps for everyone participating in the meeting and can be especially worthwhile for people with developmental/intellectual challenges. Instructional guidance and experiential exercises are provided in this training on how to create and use these maps to inform an individualized service plan (ISP). Some people find graphics development easy whereas others find it more challenging. In either case, practice makes for better graphic mapping. Multimedia techniques are also becoming more popular in the development of person centered plans; including translating plans into personal PowerPoint presentations, portfolios and/or onto iPads.





SUPPORTING PERSON CENTERED OUTCOMES: An Introduction to Person Centered Planning

TRAINING AGENDA

<u>TOPIC</u>
INTRODUCTIONS
<p>SEGMENT 1: The Planning Discovery Process</p> <ul style="list-style-type: none"> • Introduction to Person Centered Philosophy • Activity #1: Routines Exercise • Activity #2: Values Clarification • Hallmarks of Person Centered Planning • Personal Outcome Measures
Break
<p>SEGMENT 2: The Tasks and Tools of Person Centered Planning</p> <ul style="list-style-type: none"> • DVD It's Never too Early; It's Never too Late • Framework of PCP: The Tools and Tasks of Personal Futures Planning • (Optional Mapping Exercise)
<p>SEGMENT 3: Identifying Risks and Developing Appropriate Safeguards</p> <ul style="list-style-type: none"> • Understanding Risk • Collaborative Approaches to Developing Appropriate Safeguards
Training Summary/Conclusion



THE PRINCIPLES OF SELF DETERMINATION Defined by the Self Advocacy Association of NYS (SANYS)	
FREEDOM:	The ability for a person with a disability, along with freely chosen family and friends, to plan their own lives, with necessary support, rather than just purchase a program.
AUTHORITY/CONTROL:	The ability of a person with a disability to control a certain sum of money in order to purchase supports.
RESPONSIBILITY:	The ability to arrange resources and personnel – both formal and informal-that will assist a person with a disability to live a life in the community that is rich in social associations and contributions.
SUPPORT:	The acceptance of the valued roles how a person with a disability wants to be a part of their community, such as through competitive employment, organizational affiliations, spiritual development and general caring for others in the community.
SELF ADVOCACY:	The ability for a person with a disability to speak up for themselves, expressing their needs and wants.



EXAMPLES OF SYSTEM CENTERED VS. PERSON CENTERED THINKING	
SYSTEM CENTERED	PERSON CENTERED
<p style="color: red; font-weight: bold;">FROM</p>  <p style="color: green; font-weight: bold;">TO</p>	
Treatment and Programmatic orientation to meet needs.	Develop an individualized plan based on the person’s strengths and interests as well as their needs.
Programs are often segregated and only support people with intellectual/development disabilities	Find new possibilities for person where they become regular members of their general communities.
There is a focus on filling slots, beds and residential placements.	Support people to live as independently in their homes and communities of choice.
People with disabilities are often stereotyped and “placed” with others who have the same diagnosis or Challenges.	Support people to develop friendships with people they like or who they share something in common with.
Regulations, Policies and Rules are used to govern people’s activities.	More emphasis on the persons interests, dreams, and desires to lead meaningful lives and be productive citizens.



**COMMUNICATION EXERCISE #1
INSTRUCTIONS**

Choose a partner and communicate to each other the following:

Recall the most meaningful thing you did in the past week or so. It does not have to be earthshaking, just something that was meaningful and memorable that you engaged in over the past week. Take 2-3 minutes to share your experience with your partner and then your partner will have 2-3 minutes to share their meaningful and memorable experience with you.



VALUES CLARIFICATION EXERCISE

What is most important to you? What makes you happiest? The following is a list of things that people value, things they wish they had, things they want to keep. Please circle the (10) words from this list that would be most important to you.

Self-reliance	Faith/Church	Friends
Family	Food	Fame
Independence	Quality	Sex
Appearance	Productivity	Freedom
Hobbies	Involvement	Recreation
Self-worth/Respect	Love	Animals/Pets
Work	Self-direction	Home
Achievement	Security	Peace
Acknowledgement	Knowledge	Right to grieve
Health	Laughter	Children
Personal Goals	Money	Retirement
Space	Inclusion	Contribution
Creativity	Preferences	Helping Peole
Protection	Participation	Try things out
Learning	Senses	Improvement
Influence	Skills	Agreement
Dignity	Intelligence	Support
Acceptance	Attitude	Agility/movement
Optimism	Experimenting	Responsibility
Contentment	Comfort	Explore new directions

**PMR #4**

Eight Essential Hallmarks of Person-Centered Planning

- 1. The person and people important to him or her are included in lifestyle planning, and have the opportunity to express preferences, exercise control and make informed decisions.***

Indicators:

- The person and advocates participate in planning and discussions where decisions are made.
- A diverse group of people, invited by the person, assist in planning and decision making.

- 2. The person's routines, supports and services are based upon his or her interests, preferences, strengths, capacities and dreams.***

Indicators:

- The person's dreams, interests, preferences, strengths, and capacities are explicitly acknowledged and consequently their plan drives activities, services and supports.
- Services and supports are individualized and do not rely solely on preexisting models.
- Supports and services result in goals and outcomes that are meaningful to the person.

- 3. Activities, supports, and services foster skills to achieve personal relationships, community inclusion, dignity and respect.***

Indicators:

- The person has friends, and increasing opportunities to form other natural community relationships.
- The person has a presence in a variety of typical community places. Segregated services and locations are minimized.
- The person has the opportunity to be a contributing member of the community.
- The person can access community-based housing and work if desired.

- 4. The person uses, when possible, natural and community supports.***

Indicators:

- With the person's consent, the support of family members, neighbors and co-workers is encouraged.



- The person makes use of typical community and generic resources whenever possible.

5. *The person has meaningful choices, with decisions based on his or her experiences.*

Indicators:

- The person has opportunities to experience alternatives before making choices.
- The person makes life-defining choices related to home, work and relationships.
- Opportunities for decision-making are part of the person's everyday routine.

6. *Planning is collaborative, recurring, and involves an ongoing commitment to the person.*

Indicators:

- Planning activities occur periodically and routinely. Lifestyle decisions are revisited.
- A group of people who know, value, and are committed to serving the person remain involved.

7. *The person's opportunities and experiences are maximized, and flexibility is enhanced within existing regulatory and funding constraints.*

Indicators:

- Funding of supports and services is responsible to personal needs and desires, not the reverse.
- When funding constraints require supports to be prioritized or limited, the person or advocates make the decisions.
- The person has appropriate control over available economic resources.

8. *The person is satisfied with his or her activities, supports, and services.*

Indicators:

- The person expresses satisfaction with his or her relationships, home, and daily routines.
- Areas of dissatisfaction result in tangible changes in the person's life situation



**PMR #5****Personal Outcome Measures**

Personal Outcome Measures focus on the choices people have and make in their lives. The Personal Outcome Measures developed by CQL are organized into 3 topic areas highlighted below:

My Self

1. People are connected to support networks
2. People have intimate relationships
3. People are safe.
4. People have the best possible health.
5. People exercise rights.
6. People are treated fairly.
7. People are free from abuse and neglect.
8. People experience continuity and security.
9. People decide when to share personal information.

My World

10. People choose where and with whom they live.
11. People choose where they work.
12. People use their environments.
13. People live in integrated environments.
14. People interact with other members of the community.
15. People perform different social roles.
16. People choose services.

My Dreams

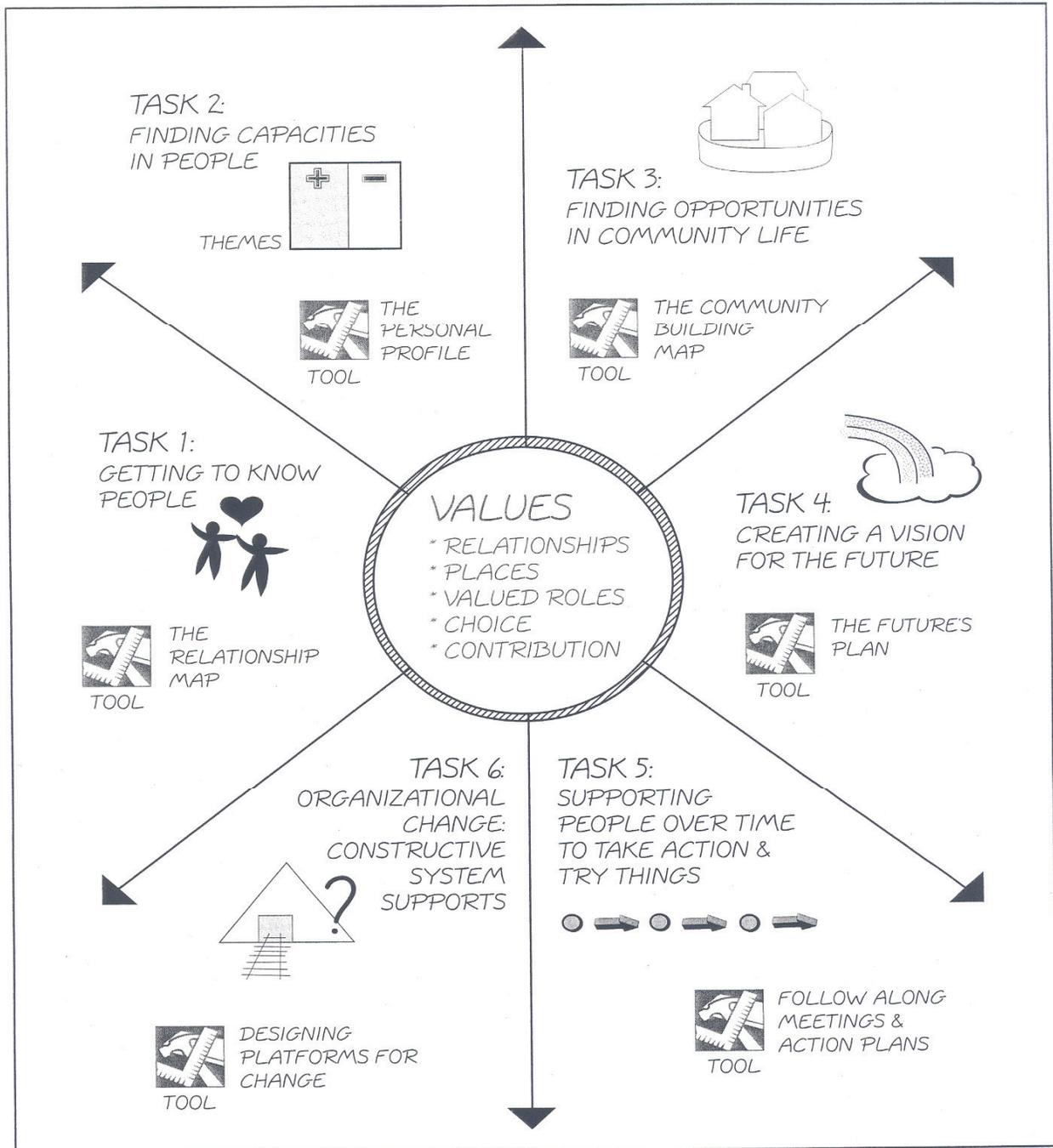
17. People choose personal goals.
18. People realize personal goals.
19. People participate in the life of the community.
20. People have friends.
21. People are respected.

From the Council on Quality and Leadership (CQL), 2005

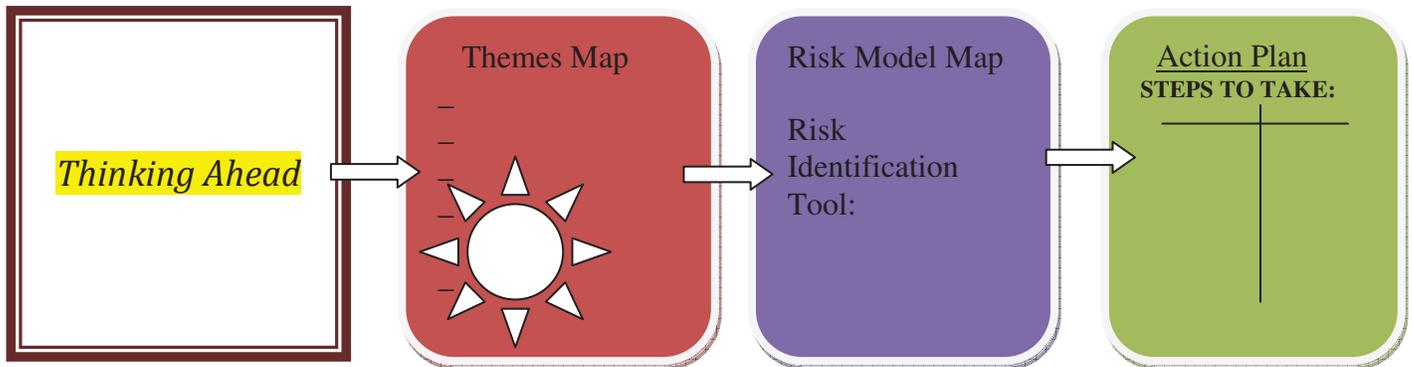
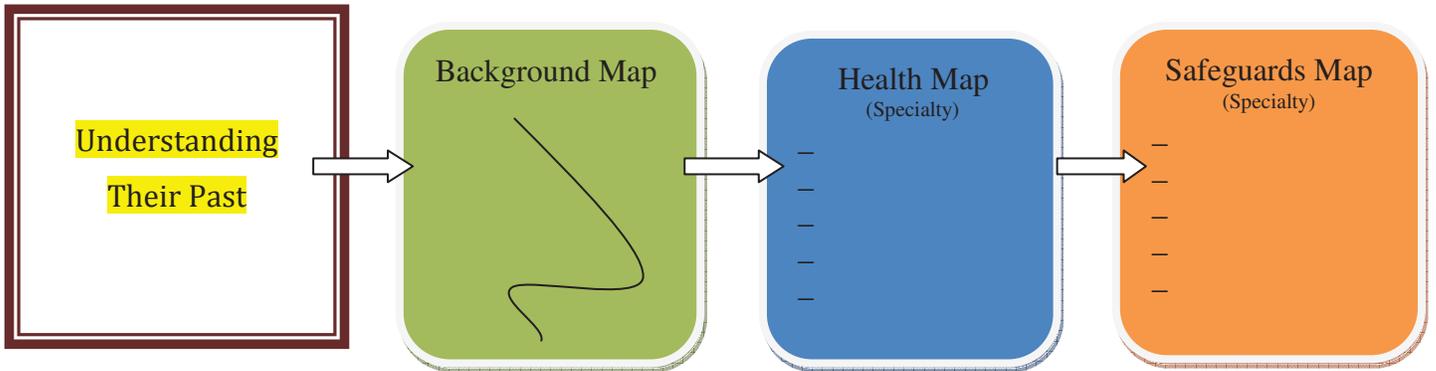
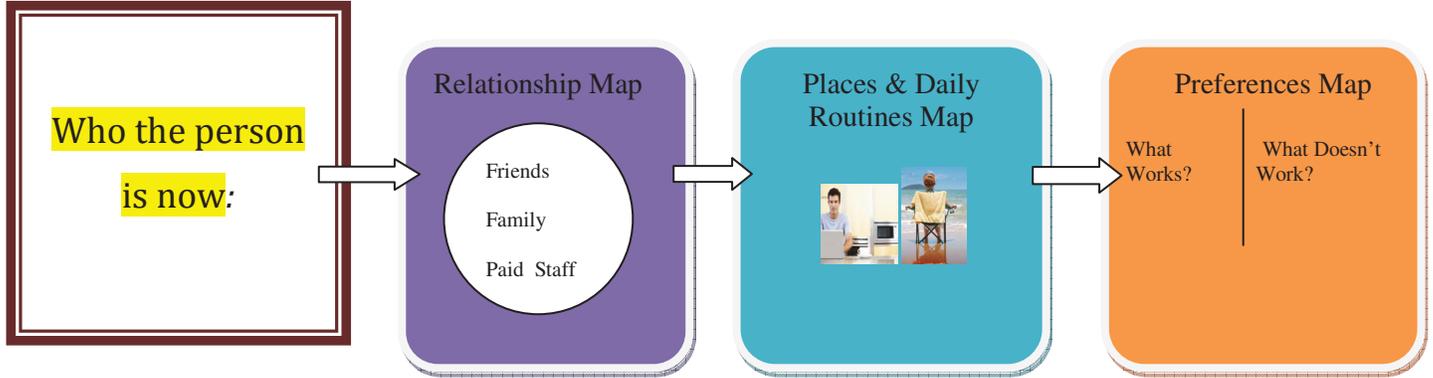
* Disclaimer: This training curriculum is NOT focused on educating people on the CQL process but for reviewing these outcome areas. This content is only meant to identify the important area for consideration in a person centered planning process.

PMR# #7

**A ROAD MAP OF THE JOURNEY
THE TASKS AND TOOLS OF PERSONAL FUTURES PLANNING**



The Discovery Profile

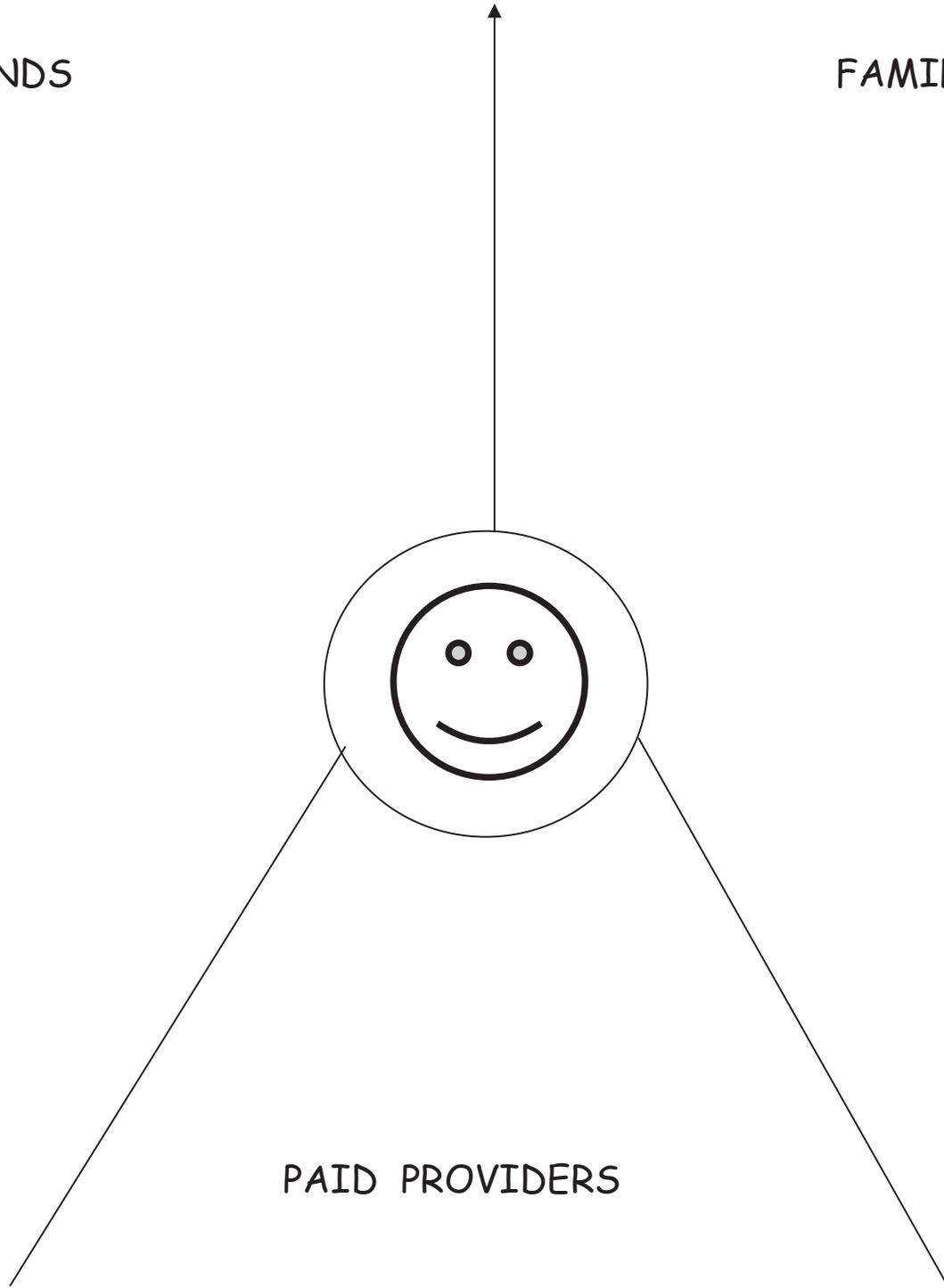


PMR #8

RELATIONSHIP MAPPING EXERCISE

FRIENDS

FAMILY



PAID PROVIDERS



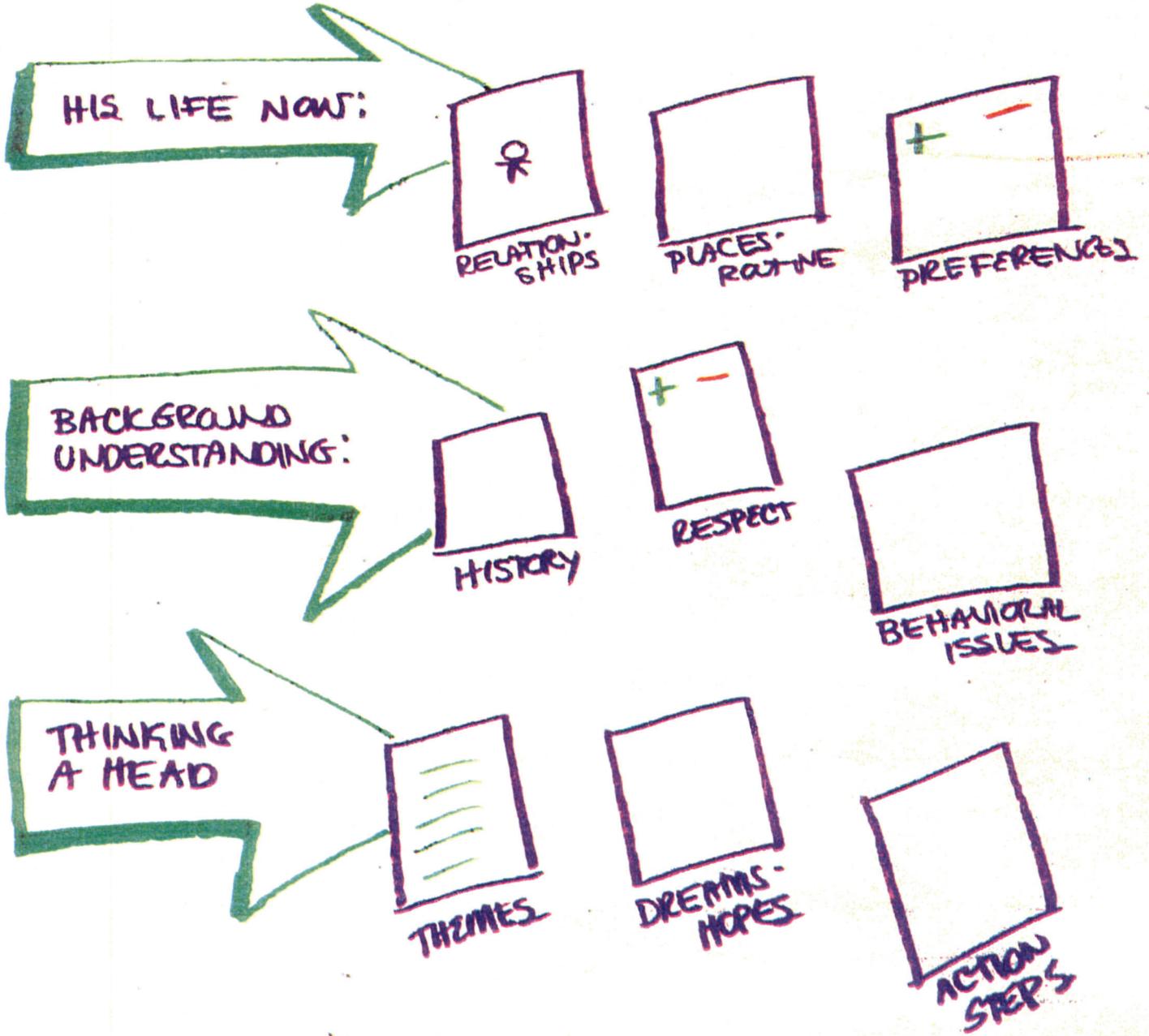
**COMMUNICATION EXERCISE #2
INSTRUCTIONS**

Return to your partner from this morning and once again communicate to each other the following:

Recall the most meaningful thing you did in the past week or so. It does not have to be earthshaking, just something that was meaningful and memorable that you engaged in over the past week. Take 2-3 minutes to share your experience with your partner and then your partner will have 2-3 minutes to share their meaningful and memorable experience with you.

Partners are to use skills discussed today to ask any questions they feel will help them better understand the experience their partner is sharing with them.

JOHN'S PROFILE



4/25/95

RELATIONSHIPS

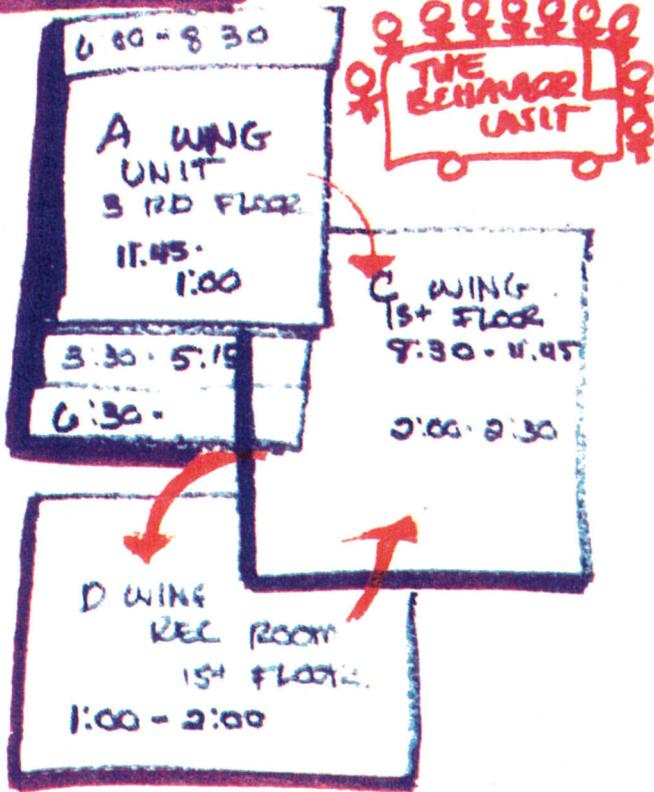
#1

FRIENDS

FAMILY
 older EDWARD
 BROWNE
 FUSHING
 ANTHONY
 YOUNGER
 2 BROTHERS
 USED TO SEE HIM
 IN WILLIAMSBURG



PLACES



TRIPS OUT

- Monday AM
- 2 x afternoon
- almost every evening - when I feel
- weekend trips

COMMUNITY EVERY MONDAY

• PARKS

• ZOO

GROUPS - PLACES -

1 TO 1 TIME

PR GO ON WAYS

ROUTINE

- 6:00 am - WAKE UP ADL's washing, etc
- 7:30 am - BREAKFAST ACTIVITIES
- 8:30 am - PROGRAM starts ACTIVITIES HOME PC
- 11:45 LUNCH RELAX - A
- 1:00 - 2:00 REC
- 2:00 - 2:30 clean up
- 2:30 - BACK TO WING
- 2:30 - REC. ACTI INSIDE or OUTSIDE 2 x week TRIPS
- 5:15 - SUPPER
- 6:30 RECREATION etc.
- 7:30 SNACK
- 8:00 EVENING ROUTINE
- 10:00 - BED TIME POOR SLEEP

Monday AM, 2 TIMES 3:30 - 5:00

PREFERENCES

THINGS THAT "WORK" ALIVENESS; INTEREST; ENGAGEMENT

- WHEN DAVID TOOK HIM OUT 1 to 1 TO 1 ATTENTION - INDIVIDUAL
- ENJOYS FRESH FRUIT, CANDY, SODA, COOKIES - MEAL TIME - LIKES ^{GOOD APPETITE} FOOD
- WEAR BASEBALL HATS, KITCHEN HATS
- BALLS, TOYS, LITTLE TOYS
- MUSIC - MOTOWN
- ENJOYS SEEING FAMILY - WANTS TO GO HOME
- SWIMMING
- WEAR SLIPPERS when feet hurt
- USED TO ENJOY CAMP - went to CAMP IN FAMILY CAGE - (FROM 1980 - 1984) ^{AGE 23-29} FAMILY CAGE
- LIKED DRYING SILVERWARE - FINE ^{MEASUREMENT}
- TO ESTABLISH OWN TERRITORY HIS SPACE - OWN SPACE
- PERSONAL ATTENTION ^{FROM} TO PEOPLE HE VALUES - IF HE RESPECTS YOU TOUCHING - WARMNESS
- COMES UP TO PEOPLE HE VALUES. PEOPLE WHO TALK TO HIM, TOUCH, COME INTO HIS SPACE, WORK ON HIS REQUESTS, YOU ARE GOING TO STICK THERE - FEARLESS PEOPLE
- VERY SENSITIVE TO WHAT HE CAN GET FROM PEOPLE - HOW THEY WILL RESPOND - KNOWS AUTHORITY FIGURES
- QUIET AREAS - NOT MUCH NOISE
- PEOPLE WHO CAN "HOLD THEIR OWN"
- WHEN HE HAS A BALL IN HIS HAND THROWING BEAN BAG - PLAY HANDBALL - SPECIAL ATTENTION ^{SOMETHING IN HIS HAND}
- TO BE PHYSICALLY ACTIVE PIVOTS, TWIRLING, MARCHING, MOTION
- RHYTHM - QUALITY TO MOVEMENT
- OUTSIDE - GET OUT -
- RESPONDS TO PRAISE, ^{BEING} NOTICED
- ASKS FOR CERTAIN CLOTHES -

THINGS THAT DON'T WORK FRUSTRATION, BOREDOM, UPSET

5/25/15

#3

- WEAR HIS HELMET - DOESN'T MIND CARRYING IT
- CANNED FRUIT
- BITING
- DOESN'T SLEEP
- GOING INTO PROGRAM ROOMS SENSE OF CONFINEMENT ENCLOSURE
- GETS BORED FAST
- ^{Other} PEOPLE entering his own territory INVADING HIS TERRITORY = BITING OR PUSHING
- INTERRUPTION IN ROUTINE, PROGRAM RESTRICTIONS BASED ON BEHAVIOR
- SITTING STILL, TV, MOVIE
- TEASING HIM,
- NOISY SPACES + PEOPLE - AVOIDS PEOPLE WHO ARE ANNOYING OR AN EASY TARGET
- UNDESIRABLE PEOPLE WHO ARE EASY TARGETS
- ACTIVITIES WITH PEERS
- ARTS + CRAFTS - TABLE-TOP ACTIVITY NO REAL OUTCOME OR PRODUCTIVITY -
- TV OR MOVIES - OWN THE SCREEN

PREFERENCES (CONT.)

- +
- DARNING BALL, FLYING KITES,
 - LIKED TO PLAY WITH A PHONE
CELLULAR PHONE
 - HOLDING + PLAYING WITH STRINGS.
USING HIS HANDS
 - ^{TOY} TRAINS, CARS, - AUTOMOTIVE
ELECTRONIC
 - RADIO - DANCING + DANCING
 - HE WANTS TO HAVE HIS
MUSIC
 - LARGE CLOCK - LIKED TO
FEED DUCKS
 - AIRPORT DRIVING RANGE
GOLF
 - IMPORTANCE OF ROUTINE,
PREDICTABILITY, KNOWING
WHAT'S COMING.
LIKES HIS DAILY ROUTINE -
 - VERY CLEAR EXPECTATIONS
 - LIKES TO HELP OUT +
BE RESPONSIBLY
 - LIKES TO BE ENGAGED -
MAKE SOMETHING CONCRETE
MORE CONCRETE TO
CONSTRUCT
BUILD, MAKE,
PUT TOGETHER
TINKERER
BEGINNING, MIDDLE, + END
PUZZLES
 - HE LIKES OTHER PEOPLE TO
GET IN TROUBLE
 - TRAVELS WELL - CARS, BUSES,
BOATS -
 - DOES WELL IN
COMMUNITY RESTAURANTS

-
- WEAR UNDERWEAR BACKWARDS

HISTORY - BACKGROUND

BORN 1957

WILLOW BROOK

1963 - 78

AGE 6 - 15 YEARS

78

mom/DAD
BROOKLYN

JOHN WAS BORN BREECH - DIDN'T NOTICE THINGS GOOD BABY
 • STARTED TO HURT HIMSELF - EATING DIRT
 • SPIN AROUND
 NOT SLEEPING AT NIGHT

14 MONTHS
 something wrong
 EVALUATIONS

EVALUATION AT VINCENTS

KENNEDY CHILD STUDY CENTER

KING'S COUNTY HOSPITAL

DIDN'T TAKE ST

VINCENTS

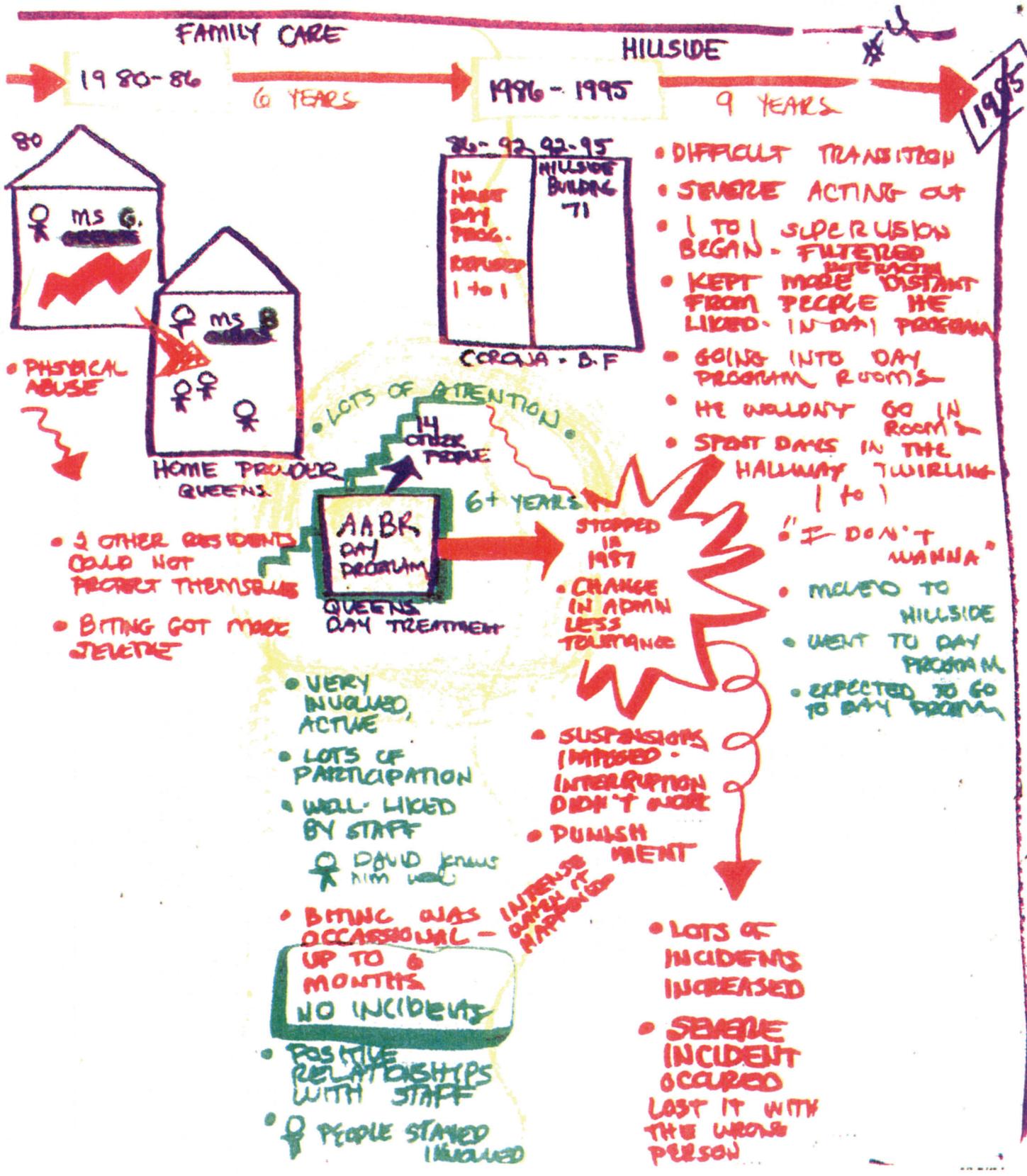
WILLOWBROOK
 LOTS OF PAIN
 • HE DID NOTHING BUT BITE
 • LOTS OF ABUSE
 • PICKED UP LOTS OF BAD HABITS

1ST NAME IS PARENT

- TOOK HIM ALL OVER
- PEOPLE MAKE YOU CRAZY - TOOK LITTLE TESTS -
- IMAGINE SITTING THE ROOM WITH 25 PSYCHOLOGISTS
- "THERE'S NOTHING WE CAN DO FOR HIM"
- NEVER GOT BACK WITH US PHYSICALLY
- VERY ACTIVE -
- THEY HAD HIM TIED TO THE BED - ABOUT AGE 3
- "HE HAS BRAIN DAMAGE" - TESTS RESULTS -
- PARENTS LABELED
- YOU NOT LAZIED TO KEEP HIM AT HOME

DEPLORABLE

- 1964 • "LEFT HIM FOR DEAD" SUFFERED FROM LOTS OF ABUSE
- YOU COULDN'T SPEAK UP - OR YOU WERE LABELED
- DIDN'T WANT TO GO
- HE LOVED HIS GRANDFATHER THE TELEPHONE A LARGE CLOCK
- FAMILY VISITS - PLAYED BASEBALL, PUT KICKS, PUT GOLF.
- TOOK HIM OFF THE GOODS FEED DOGS



RESPECT

POSITIVE, ENHANCING

- * HIS ABILITY TO READ PEOPLE - DISCRIMINATE BETWEEN PEOPLE HE LIKES + DOESN'T LIKE PERSONAL RESPONSIVENESS
- * DEMONSTRATES INTEREST BY SMILING OR REACHING OUT - INITIATES + CONTACT
- * ABILITY TO FIND ENJOYMENT IN ACTIVITIES HE LIKES
- * JOHN WAS ONE OF THE MORE RESPONSIVE PEOPLE - IT STOOD OUT - ABILITY TO LEARN NEW SKILLS
- * RESPONDS TO PEOPLE WITH WARMTH - MAKES YOU FEEL GOOD - CONNECTED WITH PEOPLE
- * HE LIKES TO HELP PEOPLE LIKES TO HELP OUT - RESPONDS
- * WASN'T HARD TO MOTIVATE HIM TO PARTICIPATE IN INTERESTING PROGRAMS -
- * HE HAS A SENSE OF NEATNESS + ORDER ABOUT HIS APPEARANCE
- * KNOWS GOOD + BAD -

ODD, UNUSUAL, ATYPICAL

- * AGRESSION TOWARD OTHERS - BITING
- * BITING HIMSELF

BEHAVIOR ①

10 UNDERSTANDING OF BEHAVIORAL ISSUES

BEHAVIOR

* BITING OTHERS -

- MULTIPLE ATTEMPTS

- DEAL BITES

FREQUENCY

STAFF CAN INTERVENE +
BLOCK OR REDIRECT BITES -
1 OUT OF 2 TIMES, HE'LL
ACTUALLY BITE

FEB - 13

MAR - 15

APR - 20

• AVE 15 TIMES
A MONTH

* BITING SELF :

APR 23 INCIDENTS

MAR 7

FEB 14

AVE 12-20 INCIDENTS
A MONTH

BITES ARM + HANDS

* FLIPS OVER A TABLE

OCCASSIONALLY -

BEHAVIOR (2)

DEGREE OF THREAT

- MAKES IMPRESSION -
- OFTEN BRUISES THE SKIN
is SIMORE

TEETH IMPRESSIONS -
RARELY BRUISES SKIN
DOESN'T REQUIRE
MEDICAL ATTENTION

INTERPRETATION, UNDERSTANDING

INSIGHT

- * OFTEN A FORM OF TERROR HIT -
+ GETTING BACK AT PEOPLE
- * OFTEN GUARDING HIS TERRITORY
- * WORST MARKS ARE THOSE WHO
DON'T DEFEND THEMSELVES ^{ON}
- * NOT GETTING WHAT HE WANTS
MAY TO EXPRESS PREFERENCE
- * IF IT'S NOISY -
- * BEING PROVOKED BY OTHERS -
BEING TERSED OR IRTATED
- * NEVER TRIED TO BITE PARENTS
- * NEVER BITES STAFF WHO HE LIKES,
ESPECIALLY WHEN THEY SET LIMITS
- * FRUSTRATION HE TAKES OUT
ON HIMSELF
- * WHEN HE'S OVER EXCITED
- * WHEN HE'S ANGRY -
HE'S OFTEN REMORSEFUL
HE'LL CRY WHEN SCOLDED.
- * WE KNOW THAT UNDER BETTER
CONDITIONS, THE BITING
DOESN'T HAPPEN.

THEMES IN JOHN'S LIFE: 5/25/15
WHAT'S MOST IMPORTANT TO HIM + THE QUALITY OF HIS LIFE?

- * HE LIKES BEING OUTDOORS, BEING PHYSICALLY ACTIVE, #7
MOVING, WALKING, SWIMMING, SPORTS, BASEBALL, GOLF
HANDBALL
- * HE LIKES MUSIC, ESPECIALLY MOTOWN - GOOD
DANCING MUSIC, LISTENING TO RADIO
- * HE'S GOOD WITH HIS HANDS - BUILDING, MAKING,
PUTTING THINGS TOGETHER
- * HE LIKES SPECIAL ATTENTION, FROM PEOPLE HE
RESPECTS + LIKES; WARM, AFFECTIONATE, ^{W/} SET LIMITS.
- * PREFERS PURPOSEFUL ACTIVITIES + A PREDICTABLE
DAILY ROUTINE
- * LIKES HIS OWN SPACE, PREFERS QUIET PLACES
- * HE LIKES TO HELP OTHER PEOPLE
- * HE LIKES TO GO HOME; FAMILY IS REALLY IMPORTANT
TO HIM; LIKES FAMILY PHOTOS, SENSE OF FAMILY
- * HE LIKES PURPOSEFUL ACTIVITIES - A BEGINNING, MIDDLE +
END, A PRODUCT
- * HE MIGHT BE INTERESTED IN GOLF, CLOCKS
- * HE HAS A SENSE OF NEATNESS + ORDER ABOUT
HIS PERSONAL APPEARANCE - LIKES BASEBALL CAPS
- * HE LIKES CARS + TRAINS + STRAWS
- * HE LIKES TO EAT; LIKES TO HELP WITH ^{FOOD} PREP
- * HE USES BITING TO EXPRESS PREFERENCES,
GUARD HIS TURF, A REACTION TO NOISE + IRRITATING PEOPLE

5/25/95

DREAMS + HOPES FOR THE FUTURE

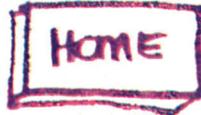
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GOLF CART

LIVE IN A HOUSE

- BIG BACK YARD
- OWN ROOM - PEOPLE FOR LIFE
- NO ROOMMATES, OR PEOPLE WHO ARE QUIET



- PICTURES OF HIS FAMILY
- EXPLORE FOOD PREPARATION

- PEOPLE WHO RESPECT HIM
- A STRUCTURED, DAILY ROUTINE
- A NIGHT-TIME ROUTINE
- MUSIC - HIS OWN RADIO
- ABILITY TO DRESS NICE

- A WAY TO MAINTAIN IN SOMNIA - ACCOMMODATE - NAPPING

PHYSICAL ACTIVITY



- CARRY - HELP WITH LAUNDRY

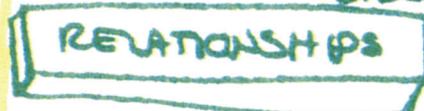
- GROUNDS CREW
- PURPOSEFUL ACTIVITY WITH VARIETY
- PERHAPS A NON-TRADITIONAL DAILY ACTIVITY - ROUTINE

meet for dinner at - SIZZLE -



- GOING TO A GOLF RANGE
- EXPAND OPPORTUNITIES TO GO OUT
 - SWIMMING
 - STRUCTURED OUTDOOR ACTIVITIES

- FAST FOOD PLACES
- OUTDOOR FRUIT MARKET
- LIVE WRESTLING - MATCHES - BOXING MATCH



- ♀ INCLUDE MS GIBBS
- ♀ INCLUDE NINA
- ♀ RECONNECT WITH STAFF FROM OLD DAY PROGRAM
- ♀ STRENGTHEN TIES TO BROTHER - WITH STAFF SUPPORT
- ♀ CONSIDER HOME VISIT - DAY TIME WITH FAMILY

STRATEGIES: TO DO, EXPLORE, FOLLOW UP

5/25/15

#9

1. COMPLETE HEALTH MAP - ♀ SHELDON
2. PLAN DINNER / VISIT HOME W FAMILY - ♀ DAD
TALK TO BROTHERS RE INNOVATION
3. TRY OUT COOKING ACTIVITY ♀ BARBARA
4. GET "ON LIST" FOR GROUPS.
MAINTENANCE - TRY IT OUT ♀ BARBARA / NWA
5. JAN WILL INVITE DR GIBBS.
JUNE 22 NE - 9:00 - 12:00 ♀ JAN -
6. INVITE DAN PROGRAM PERSON
TO COME TO NY - 1 MEETING ♀ LAY ♀ ALLEN.
LOOK INTO PRUDYER
7. WRITE LP PROFILE ♀ BOB / CHRIS

Transition into Adult Life:
Being Self Directed

Sandra Van Eck
The Arc of Rensselaer
County

This presentation will highlight information learned during a very in-depth person-centered planning process. It was used to develop a living arrangement for a young man who was living in an “out of state” residential school. He presently is supported in a self-directed situation and he lives successfully in the community. He does have a strong circle of support.

February 2014

His Profile includes the following diagnoses:

- PDD/Asperger's Disorder
- Learning Disability
- Attention-Deficit/Hyperactivity
- Oppositional-Defiant Disorder
- Anxiety Disorder
- Depressive Disorder



February 2014

Supporting Person Centered Outcomes
 Participant Manual
 PPT Handout

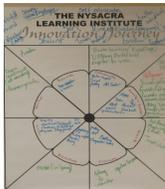
The Paperwork reported the following:

- Impulse to set fires
- Influenced by peers to steal items from stores (charges dropped) and other people who may have what Rob considers valuable.
- Self-Injurious Behaviors- "cutting of wrist"
- Verbally Aggressive and using his size to intimidate
- Engaging in risk-taking behaviors.
- Elopement
- Non-compliant
- Easily taken advantage of in an attempt to fit in.
- He also was placed in 14 various Residential situations by the age of 20. (e.g. Pathway Residential School, Second Nature Wilderness Program

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Planning process: The process takes a whole person approach. We attempt to learn from the past- this is done from the person's perspective, family perspective, and the provider perspective. We turn deficits into capacities and **co-design** a plan that creates opportunities for success in the future.

Design Process:



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<p><i>Deficit</i></p> <p>Rob is a person who needs external limits and structure and needs to be involved in the process to help problem solve.</p>	<p><i>Capacity</i></p> <p>Rob is very creative and often expresses himself in untraditional ways. If provided with opportunities to negotiate he is likely to be more successful.</p>
<p><i>Creating Opportunities For Success:</i></p> <p>Rob lives with two roommates who mentor him with everyday activities and expectations. As a group they design structure for all of them.</p>	
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<p><i>Deficit:</i></p> <ul style="list-style-type: none">• Rob needs different methods of instruction that match his learning style. Example: step-by-step verbal directions, physical modeling, hands on experience, rote practice, and positive reinforcement.	<p><i>Capacity:</i></p> <ul style="list-style-type: none">• Rob is great with his hands, and with time to practice is considered an excellent employee. He is a artist, outdoorsmen, and builder.
<p><i>Creating Opportunities for Success</i></p> <p>Rob has a Mentor who works side by side with him at the local state park (after a short apprenticeship it became paid employment), sells his handmade wallets at local shop and is enrolled in a classes to become a park ranger. At the end of each day they process and discuss new approaches for the next day.</p>	
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<p><i>Deficit:</i></p> <ul style="list-style-type: none">• Rob is in need of continued psychiatric monitoring for medication management to address attention, impulsivity, thought disturbance, anxiety and mood difficulties.	<p><i>Capacity:</i></p> <ul style="list-style-type: none">• Rob acknowledges and seeks support for his mental health wellbeing
<p><i>Creating opportunities for Success</i></p> <p>Rob visits a community therapist and Psychiatrist regularly</p>	
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Support Broker Roles

- Co-Manage the Circle of Support
- Co-Support the Staff
- Communication between everyone
- Family Relations.

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Reflections from:

Present Accomplishments

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Rob's Supports

- | | |
|--|-----------------------------------|
| Has a CSS Plan | Has 2.75 FTE's |
| Has a Circle of Support | Has a Well trained Support Broker |
| Members include: | |
| • Mom & Step-Dad | |
| • Dad | |
| • Family Friend | |
| • Martial Arts Instructor | |
| Lives in a three bedroom home in Country | |

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