



It's All About The Plan!

The Family/Guardian and the Individual Support Plan

Guidebook

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FRITZ & O'HARE ASSOCIATES

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About This Guide

This guide was developed as a supplement to the E-Learning course, *It's All About The Plan!* This online course contains four modules designed to provide information for individuals with disabilities, their families and guardians regarding the process of planning for services and supports. The four modules are:

- The Student and the Individualized Education Program (IEP)
- The Parent and the Individualized Education Program (IEP)
- The Individual and the Individual Support Plan (ISP)
- The Family/Guardian and the Individual Support Plan (ISP)

This particular guidebook is specific to the module for the Family/Guardian and the ISP. The purpose is to provide information to assist families and guardians in meaningfully participating in the planning process and in supporting the individual throughout the process.

Whether or not you choose to participate in the course, you will find information in this guide to be helpful as you navigate the system of services and supports for persons with intellectual or developmental disabilities in Nebraska.

Want to know more?

It's All About the Plan! was developed by Fritz & O'Hare Associates and Southeast Community College (SCC). The course is offered online through the Southeast Community College Continuing Education Division.

To register:

Contact SCC's Continuing Education Division at:
402-437-2700

For more information:



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Eligibility and Services

In order to meaningfully participate in the planning process for a person with a developmental or intellectual disability (referred to as the "individual" throughout this guide), it is important to first understand Nebraska's system of services. The Division of Developmental Disabilities (DD), located within the Department of Health and Human Services, is responsible for this system.

Eligibility

In order to receive services, individuals must be found eligible by DD. See *Appendix A: Fast Facts about Eligibility for Developmental Disabilities* for more information about how to apply and the eligibility determination process.

It is important to note that, due to limited funds in the state, funding is not available to fill all requests for services. Once individuals are determined eligible, they may be placed on a waiting list for services until funding becomes available. Funding is dependent upon several factors, including the date the services are needed and availability of funds appropriated by the Nebraska legislature.

One exception to this is for individuals who, at age 21, graduate from a Nebraska high school. These individuals are entitled to funding for certain services (Service Coordination, Specialized Day Services and/or Non-Specialized Services). They may request other types of services, but unless they are determined to be in an emergency (priority) situation, they will be placed on a waiting list for those services until funding is available.

Want to know more?

For additional information about the
Division of Developmental Disabilities,
visit their website at:

http://dhhs.ne.gov/developmental_disabilities/

Or, call:
(402) 471-8501
(877) 667-6266 (toll free)

Services

DD offers an array of services for eligible individuals. Services available through DD may be broken into three broad categories:

- Service Coordination
- Specialized Services
- Non-Specialized Services (also referred to as Community Support Program, or CSP)

For a description of the categories and a complete listing of services, see *DD Service Options (Appendix B)*.

Want to know more?

A booklet, titled "It's All About Choice", provides basic information about the services offered through the Nebraska Division of Developmental Disabilities.

View or download the booklet at:
<http://readyssetgo.site.esu9.org/files/2012/02/Ready-Set-Go-Booklet-for-WEB.pdf>

Importance of the Plan

Services are about the individual and what the individual wants and needs. The individual, their Service Coordinator, family members, guardian, and other people work together to make a plan. Because of this, a process has been developed to make sure that the right people are involved in assisting the individual and that the needs and wishes of the individual are taken into consideration when developing the plan.

There are some basic principles that go into the creation of a good plan to meet the unique needs of the individual. Those principles are:

Choice!

- ✓ Decide what supports are needed.
- ✓ Select the persons to support the individual.
- ✓ Allow the individual to choose with whom to spend their time.

Flexibility!

- ✓ Schedule supports when they are needed and where they are needed.
- ✓ Determine how much or how little support the individual receives.
- ✓ Design the plan based upon the individual's interests.
- ✓ Mix the type of services utilized to meet the individual's needs.

Control!

- ✓ Build upon the individual's strengths and address their needs.
- ✓ Use the individual's service budget in the best way possible to meet their needs.
- ✓ Change the plan when needed.

The Planning Process

The process for developing the plan for services and supports for individuals receiving developmental disability services in Nebraska includes two very important meetings. While the specific process may change over time, the information provided in this guide is intended to give families and guardians a better understanding of the purpose and general format of these meetings. This is critical in order to ensure that the important people in the individual's life are active participants in the planning process.

The first step in developing the plan is to listen to the individual and find out what is important to him/her, what is currently going well in his/her life, and what things need to be changed or enhanced. Additionally, information is to be gathered from others who know and care about the individual.

Individual/Family Meeting (IFM)

The first meeting is the Individual/Family Meeting (IFM). The purpose of the IFM to discuss the individual's hopes and dreams, develop a plan for services, and determine how the individual's service budget will be spent. This meeting is held approximately 60 days prior to the Individual Support Plan meeting.

Personal Focus Worksheet

The *Personal Focus Worksheet (Appendix C)* will be completed at this time. The questions on the worksheet are designed to identify specific issues that need change, growth, enhancement, or action. The Service Coordinator will document the answers and discussion.

The information is to first come from the individual and then supplemented by people the individual cares about and trusts, such as family and friends. When the person is not able or willing to contribute, the information should be recorded by someone chosen by the individual.

Budget

A projected Individual Budget is developed at the IFM when the Service Coordinator reviews and discusses the budget available for the individual's services and the service options. The individual and family/guardian will work with the Service Coordinator to plan and project a budget for the following year. They will determine the services and supports to be provided within the budget and select the provider(s) to deliver the chosen services. The final budget may differ from this projected budget, depending upon the chosen provider and services.

Individual Support Plan (ISP)

Approximately 60 days after the Individual/Family Meeting, a second meeting is held – the Individual Support Plan (ISP). In certain situations, the IFM and ISP may be combined and held at the same time.

ISP Team Members/Role

The ISP meeting will include the persons who attended the IFM, along with others as described below.

- The Individual
It is expected that the individual will attend the meeting and every effort should be made to see that this happens. If the individual chooses not to attend, the plan must be reviewed with him/her and efforts made to encourage attendance at future meetings.
- Legal Guardian
The legal guardian is a person appointed by the court to make decisions for the individual. This may or may not be a family member. Depending upon the specific court order for the individual, the guardian has authority to make decisions on behalf of the individual about such things as where to live, medical care and treatment, training and education, etc. The role of the guardian is to ensure that the individual's personal and financial interests are protected, while involving the individual in decision making as much as possible. In order to fulfill this role, the legal guardian should be encouraged to be an active member of the individual's ISP team. Note that not all individuals have a legal guardian.
- Family Members
Family members may attend, as selected by the individual and/or legal guardian.
- Service Coordinator (SC)
Service Coordinators are employed by DD and are responsible for ensuring that services are responsive to the preferences and needs of the individual and for promoting independence, interdependence, productivity, and inclusion of the individual. The Service Coordinator must:
 - Ensure appropriate team members, including family/guardians, are notified of the date, time, and location of ISP meetings.
 - Facilitate the ISP meeting and ensure a written record of proceedings is kept.
 - Share communication regarding the individual's progress in services and supports.
 - Ensure the ISP is implemented, tracked, monitored and reviewed.
 - Assist in securing needed services and supports and ensure that the services that people receive are the ones they need and want to make a difference in their life.

- Provider Representatives
These are either persons who represent a provider organization certified by the state to provide developmental disabilities services or an independent provider (person) who is employed directly by the individual through the state's non-specialized provider program.
 - Provider agencies work under contract with the state and are not state employees.
 - Providers help individuals work towards their hopes and dreams and support the choices they make about life, using the ISP as their guide.

- Optional Members
The individual or legal guardian may wish to invite others to the ISP meeting. This might be someone with special knowledge about the individual or may be someone to help support the individual or family members.

Documentation

The ISP that is developed as a result of this meeting is a contract between the individual, the State and the selected provider(s). First and foremost, this is a time to listen to the individual and develop a plan to achieve his or her goals for the future. This is an important meeting!

The ISP must:

- Be accurate and detailed;
- Document and track health and safety information of the individual;
- Identify strengths, needs, and resources;
- Develop the individual's vision for the future;
- Establish the individual's priorities;
- Identify if family/natural supports can meet the individual's needs;
- Identify if community resources can meet the individual's needs;
- Identify appropriate services and supports to meet the individual's needs; and
- Monitor the individual's progress.

Preparing for Meetings

As a member of the team, it's important to prepare for the IFM and ISP meetings. It may also be your role to help the individual prepare, as well. A few notes about preparation for meetings:

RSVP: Let the Service Coordinator know that you're coming. If you have invited another person to support you or the individual during the meeting, decide what role you would like him or her to play and discuss this ahead of time. Let the Service Coordinator know about this person's attendance and role. If the time or place for the meeting does not work for you, ask if it can be re-scheduled.

Gather & Review Information: Make notes or outline your thoughts, concerns or questions. Bring these notes and use them during the meeting. It may be helpful to keep a folder with important documents including previous ISPs, medical records, etc. to refer to if needed. Think about other information such as changes in family circumstances that would help the team gain a better understanding of the individual and what is going on in their life.

Discuss: Talk with the individual about the upcoming meeting and ask what they would like to discuss. If their communication skills don't allow this, talk with others close to the individual, including those who currently provide their services, to get an idea of topics that may be discussed.

Describe Process: Explain to the individual how the meeting works in a way that he or she can understand. Explain the importance of the meeting and stress that his or her opinions and input are valuable. If you aren't sure yourself about what to expect at the meeting, ask the Service Coordinator to explain this to you and the individual prior to the meeting.

Prepare Input: You may need to encourage the individual to speak up at the meeting. Discuss before the meeting how to share his or her feelings. You and the individual may even want to work together to create a "report" to share with the team. This could be as simple as making notes of what you want to say, creating a poster with words and/or pictures, or making a recording or video. Some individuals have even used PowerPoint presentations to share their story.

For More Information: Check out *The Individual and the ISP* module for more tips to assist individuals in meaningfully participating in their meetings.

Relationships and Concerns

Building Positive Relationships

As a family member or guardian attending meetings, it is important that you do everything you can to keep positive relationships going between you and other members of the individual's team. Here are some tips to help you.

- 1) Remember that, as a family member or guardian, you bring very important information to the meeting. You know the individual's strengths and weaknesses and all the little differences that make him or her unique. If the individual isn't able to communicate well, you may be the best person to speak on their behalf. Speak up!
- 2) Shift from being receiver of information to a true participant. It's a good idea to share your ideas as the meeting goes along. Don't wait until the end or until you are called upon to speak. If you have questions or concerns, state them. The ISP meeting is to be a conversation among all team members.
- 3) If a team member says something you don't understand, ask for an explanation. You may need to remind them more than once to use simple language and avoid acronyms. It is also important to be sure that the discussion is at a level and pace that allows the individual to participate as appropriate for their abilities. (See *Appendix D* for definitions of common terms and acronyms.)
- 4) If someone says something about the individual you don't agree with or have a question about, ask for more details. What backup information supports the person's statement? If you have different information, be sure to share it. If you disagree with something you hear, respectfully say so. Explain why, or offer your point of view. Consider that the individual may react differently in different circumstances, so that what others observe may be different than what you see.
- 5) There are many specific requirements for what must be discussed and documented during the meeting. Respect this, but know that you may need to remind the team that you're there to discuss the individual, not just to fill out a form. Everyone benefits from taking the time to slow down and listen!

Resolving Conflict

Any time a group of people are working together, there is the possibility of conflict. If this happens, either during a meeting or at any other time, following are some tips for addressing the issues.

First Steps

1. Start with working toward 'win-win' solutions.
2. Try to see the value in others' opinions and positions and work toward common ground.
3. Problem-solve and do what is reasonable to find the best solution.
4. Know that you have personal power and try not to feel threatened or victimized when things don't go as planned or expected.
5. Believe that you have the power get things done.

Next Steps

If you are unable to resolve an issue by addressing it directly with the Service Coordinator or other team members, next steps include:

1. Contact the Service Coordination Supervisor.
2. If the issue remains unresolved, contact the DD Central office.
3. If the issue continues to remain outstanding, follow grievance processes established in State regulations. (See 404 NAC 3-004)
http://dhhs.ne.gov/Documents/Title_404_Chapters_1-11.pdf

Service Delivery Issues

If you have specific concerns regarding the services delivered by the persons working with the individual or the provider agency, it is recommended that you:

1. Discuss the issue directly with provider staff.
2. If the staff member works for an agency (specialized services), discuss the issue with the staff member's supervisor. You may need to request a different staff person to provide services.
3. Discuss the issue with the individual's Service Coordinator.
4. If the issue remains unresolved, contact the service provider CEO (for specialized services).
5. If still unresolved with the specialized provider agency, you may need to see if another agency can provide services. Your Service Coordinator can help you identify other provider agencies in your community (if they are available).
6. If the individual is using non-specialized services and you are unable to resolve the issue, you may need to find a different provider.

7. If you feel the issue is one where the provider is not following State regulations, contact the DD Central Office. You may obtain a Complaint Form at the address listed below under *Contact Information*.
8. It may be necessary for you to file a complaint or grievance with the provider. Each specialized provider is required to establish a process for receiving complaints and grievances, so you will need to ask the provider about their process.
9. Issues regarding suspected abuse or neglect of the individual must be reported immediately to local law enforcement or Adult Protective Services on the 24-hour toll-free hotline at 1-800-652-1999.

Contact Information

For contact information and regulations for the
Division of Developmental Disabilities, go to:

http://dhhs.ne.gov/developmental_disabilities/

Or, call:

(402) 471-8501

(877)-667-6266 (toll free)

Rights and Responsibilities

As a family member and/or guardian, it is important that you understand the individual's rights as well as your own rights and responsibilities. It is also important that you understand the difference between the rights of a parent of an adult and the rights of a legal guardian.

The Individual's Rights

- Each individual receiving services has the same legal rights and responsibilities guaranteed to all other persons under federal and state constitutions and laws.
- The individual has a right to a copy of the ISP.
- If a family member is not the legal guardian, the individual has a right to request the family not attend or be involved with the ISP or with their services/supports.
- The individual may request that a particular provider representative not attend the ISP or that a particular staff person is not assigned to work with them. Provider and staff availability may limit this choice, but it is the individual's right to voice the request and make decisions accordingly.
- The individual has the right to information regarding all service options and providers available to him/her and to make an informed choice about how to live their life, unless those choices may be harmful to self or others.

The Family's Rights

- If the family has not been appointed as guardian for the individual by a court of law, the individual is responsible for making his or her own decisions.
- The family may receive a copy of the ISP document if they hold guardian status or if the individual agrees that they may have a copy.
- The family is responsible for carrying out agreed upon obligations as stated in the ISP.

The Legal Guardian's Rights

- The legal guardian has authority and responsibility to make decisions on behalf of the individual. The specific areas for which the guardian may make decisions are outlined by the court when guardianship is established.
- The legal guardian has a right to a copy of the ISP.
- The legal guardian is responsible for carrying out agreed upon obligations as stated in the ISP.

APPENDIX A



Fast Facts about Eligibility for Developmental Disabilities

1) How mental retardation (intellectual disability) or severe, chronic disability are determined:

Determination of an intellectual disability is made following a review of documentation submitted by the individual or guardian, or with consent by the individual or guardian, on behalf of the individual applying for DD services. In order to determine if a person is eligible this documentation should include a psychological evaluation completed by a licensed psychologist that contains the interpretation and results of a standardized assessment of intellectual functioning (IQ testing) and a standardized assessment of adaptive functioning (adaptive testing). It would be very helpful for the psychologist to clearly indicate assessments and determine the individual's level of adaptive functioning in the following domains: Learning, Expressive and Receptive Language, Fine and Gross Motor ability, Self-Direction, Economic Self-Sufficiency, Self-Care and Capacity for Independent Living. The evaluation needs to conclude with a **diagnosis** that indicates whether or not the individual meets diagnostic criteria of Mental Retardation as currently defined by the Diagnostic and Statistical Manual of Mental Disorders (DSM) current version. The report needs to be written in enough detail to ensure the reviewer understands how the diagnosis was determined. (For example a letter that simply says the person is moderately mentally retarded with deficits in Learning and Self-Care would not be sufficient).

In order to determine whether an individual has a severe chronic disability of a physical or genetic nature such as traumatic brain injury or Down's syndrome, appropriate medical documentation must be provided. If the nature of the disability is genetic, results of genetic testing are needed, or a medical diagnosis is needed by a qualified physician with documentation to support the diagnosis. In addition to this documentation there will also need to be an assessment of adaptive functioning in all of the domains noted above. This may be documented by the physician or other medical or mental health professional.

2) How to request an application:

There are a variety of ways to access the eligibility process:

- AccessNebraska: <http://accessnebraska.ne.gov>
- Contact local DHHS office
- Contact DD Central Office at toll free number (877) 667-6266,
- Eligibility website: <http://www.dhhs.ne.gov/dip/ded/DDEligibility.htm>
- Nebraska Dept. of Education website: <http://ndetransition.site.esu9.org/linksresources>
- Discuss eligibility during transition process with local ESU transition coordinator
- Contact local Arc office

Upon receiving an eligibility referral, the Division sends an eligibility application packet, which describes the eligibility requirements and processes.

3) Length of process:

A referral is held open for 90 days from the date that an application packet is mailed. This allows an individual to gather and mail in the information needed to consider whether the applicant meets eligibility criteria.

Once all information has been received, the information is reviewed and the applicant is formally notified of the determination for eligibility.

4) Items requested with application:

A cover letter is sent with the application which outlines all needed items, as well as the definition of a developmental disability as it is outlined in state statute. The eligibility criteria for Special Education services isn't the same as the eligibility criteria for DD services.

Required forms that should be returned with application: Notice of Rights & Obligations and United States Citizenship Attestation Form. Application also includes release of information form (necessary to allow the Division access to documentation necessary to review eligibility).

Other documents will include assessments, medical diagnoses and records, school records, and legal records. Again, the cover letter will include a checklist of records that are needed to determine whether you meet the definition of DD.

5) How the IEP and/or MDT are used:

The IEP is the Individual Educational Plan; a written statement, generated by the school system, for a child with a verified disability which specifies the special education and related services necessary to assure that the child receives a free, appropriate public education.

The MDT is the Multidisciplinary Team report; a set of evaluations and procedures used to determine whether the child has a verified disability by rule 51 educational standards. The MDT report identifies the nature and extent of the special education and related services that will be provided as well as summaries of cognitive, academic, adaptive, vocational, and if applicable, Autism assessments.

These documents are used to assist the reviewer in further understanding the nature of the intellectual or developmental disability but in and of themselves are insufficient to make the determination. A diagnosis by a licensed psychologist of mental retardation (see above) and/or a diagnosis of a physical impairment by a qualified physician (see above) are also necessary in order to make a final determination of eligibility.

6) What happens if determined eligible:

You will receive a Notice of Decision stating that you are eligible for DD services. Generally, within 10 working days a representative of Service Coordination will contact you to talk about the DD services you are interested in receiving, based on available funds.

7) What happens if determined ineligible:

You will receive a document called a “Notice of Decision” in the mail. The Notice of Decision will tell you whether or not you are eligible for DD services. If you are determined ineligible for services, you have the right to request either an Informal Dispute Resolution (IDR) meeting or a formal Appeal. Information explaining both those options, and the form for requesting either an IDR or an Appeal, will be delivered to you with your Notice of Decision.

8) Difference between IDR and Appeal:

An Informal Dispute Resolution (IDR) is an opportunity for you and/or your parent(s), guardian or other legal representative to discuss your application for services with a DD Division representative in an informal setting. Typically, IDRs are conducted over the telephone. An IDR can be used to identify additional information or records that might enable the DD Division Community Based Administrator to overturn a determination that you are ineligible for services.

An appeal is a formal administrative proceeding where your case will be reviewed by a Department of Health and Human Services Hearing Officer. The appeal hearing will be conducted according to the Administrative Procedure Act and applicable regulations in a manner similar to a court proceeding. An attorney for the Department of Health and Human Services will represent the Division of Developmental Disabilities at the hearing. You may choose to represent yourself, or be represented by your own attorney at your own expense. You may also choose to be represented by family member, guardian or other advocate. At the Hearing, both sides will present evidence for the Hearing Officer to consider. All witnesses who testify at the Hearing are subject to cross-examination by the other side and/or the Hearing Officer.

At the conclusion of the Hearing, the Hearing Officer will make a recommendation to the Director of Developmental Disabilities, who will make the final decision. If you are dissatisfied with the outcome of the Appeal Hearing, you may pursue a further appeal at your own expense through the judicial system.

9) Time available to request IDR or Appeal:

You may either request an IDR or file an Appeal at any time within 90 after you receive your Notice of Decision. If you request an IDR, the 90 day time period to request an Appeal is paused until the IDR is concluded. However, an IDR cannot be requested after you have filed a formal Appeal.

APPENDIX B

DD Service Options

In Nebraska, services available through the Division of Developmental Disabilities (DD) may be broken down into three broad categories.

Service Coordination: Service Coordinators assist individuals and their families in accessing developmental disability services and other community services needed to meet the needs of the individual.

Specialized Services: Services offered by community-based provider agencies approved by the state. Agencies are responsible for all administrative responsibilities (hiring, firing, scheduling, training, paying wages, etc.) related to staff members and oversight of services.

Non-Specialized Services: Flexible services and supports provided by community members or agencies. Non-Specialized providers must be approved by the state. Individuals or those assisting them are responsible for locating, hiring, firing scheduling, training and supervising their providers. Family members (parent, spouse, or child) and members of the individual's immediate household may not be approved as providers.

Want to know more?

For more information about these services and related requirements, you may wish to review the State regulations at:

http://dhhs.ne.gov/Pages/reg_ddregs.aspx

Or, request a copy of the regulations by calling:
(402) 471-8501 or (877)-667-6266 (toll free)

DD Service Options

Non-Specialized Services	Specialized Services
<p style="text-align: center;"><i>Community Living & Day Supports (CLDS)</i></p> <p><u>Employment Supports</u></p> <p>CLDS Employment Supports are provided to support the individual in getting and keeping a job of their choice, including:</p> <ul style="list-style-type: none"> ▪ Identifying types of jobs the individual may wish to pursue. ▪ Providing assistance in searching for a job. ▪ Providing assistance in preparing for and attending interviews. ▪ Assisting the individual on-the-job as needed, with the provider acting as a job coach. 	<p style="text-align: center;"><i>Day Services</i></p> <p><u>Integrated Community Employment</u></p> <p>Assistance in getting and keeping a job in the general workforce at or above minimum wage. Individuals choose their own job and services are provided on the job site.</p> <p><u>Vocational Planning</u></p> <p>Support in career planning, job searching, and paid and unpaid work experience.</p> <p><u>Work Station</u></p> <p>Development of work and social skills on the job. May include assistance in health-related tasks such as medication administration, treatments, and other personal needs.</p> <p><u>Adult Day Habilitation</u></p> <p>Formal training, activities, and staff supports that take place in a non-residential setting. These may be delivered in an integrated community setting or provider owned and operated setting. Services are designed for the individual to acquire, retain, or improve self-help, behavioral, or other skills needed for participation in successful community living. Services may be prevocational in nature or may be provided to those not currently seeking to join the work force.</p>

Non-Specialized Services	Specialized Services
<p data-bbox="240 281 808 352"><i>Community Living & Day Supports (CLDS)</i></p> <p data-bbox="212 369 643 401"><u>Independent Living Supports</u></p> <p data-bbox="212 422 813 525">Individuals may live in their family’s home or their own apartment, house, or condominium. Services include:</p> <ul data-bbox="261 543 821 966" style="list-style-type: none"> ▪ Household and home maintenance activities such as meal preparation, grocery or clothing shopping, cleaning and laundry. ▪ Hygiene and grooming tasks. ▪ Use of community services, including medical and other appointments. ▪ Participation in recreational activities. ▪ Participation in volunteer work in the community. 	<p data-bbox="902 281 1435 315"><i>Specialized Residential Services</i></p> <p data-bbox="857 369 1169 401"><u>In-Home Habilitation</u></p> <p data-bbox="857 422 1393 489">Training for the individual in his/her family home or in the community.</p> <p data-bbox="857 558 1138 590"><u>Companion Homes</u></p> <p data-bbox="857 611 1474 749">Individual lives in home, apartment or condominium they own or rent. Staff is on-site or available to provide training and support, as needed by the individual.</p> <p data-bbox="857 819 1295 850"><u>Extended Family Home (EFH)</u></p> <p data-bbox="857 871 1466 974">Individual and provider reside in a single family home, with the provider on-site and available at all times.</p> <p data-bbox="857 1043 1062 1075"><u>Group Homes</u></p> <p data-bbox="857 1096 1482 1199">Services for group of individuals in a provider agency setting, with staff on-site and immediately available at all times.</p>
<p data-bbox="402 1358 646 1392"><i>Other Services</i></p> <p data-bbox="212 1413 326 1444"><u>Respite</u></p> <p data-bbox="212 1465 824 1604">Temporary and occasional support and care of the individual to allow the caregiver time to pursue personal, social, and recreational activities.</p> <p data-bbox="212 1673 521 1705"><u>Assistive Technology</u></p> <p data-bbox="212 1726 824 1829">Purchase of devices, controls, or appliances to increase the individual’s ability to perform activities of daily living.</p>	<p data-bbox="1044 1358 1287 1392"><i>Other Services</i></p> <p data-bbox="857 1413 971 1444"><u>Respite</u></p> <p data-bbox="857 1465 1474 1604">Temporary and occasional support and care of the individual to allow the caregiver time to pursue personal, social, and recreational activities.</p> <p data-bbox="857 1673 1089 1705"><u>Behavioral Risk</u></p> <p data-bbox="857 1726 1482 1829">Intensive services for those with complex behaviors that place the individual and/or others at risk of harm.</p>

Non-Specialized Services	Specialized Services
<p><u>Home/Environmental Modifications</u> Modifications made to the individual's or family's home in order to meet the individual's accessibility needs.</p> <p><u>Vehicle Modifications</u> Modifications made to the individual's or family's vehicle in order to meet the individual's accessibility needs.</p> <p><u>Personal Emergency Response (PERS)</u> An electronic device/ system to allow individuals to get help in an emergency; for those who live alone or are alone for significant parts of the day.</p>	<p><u>Medical Risk</u> Intensive services for those with complex medical needs that require continuing care and treatment.</p>

APPENDIX C

Personal Focus Worksheet

The following questions are to be used to gather information from the person receiving services and others who know and care about the person. The Service Coordinator is responsible for completing this worksheet.

Question 1: Describe the relationships in this person's life:

1. Who are the person's favorite people to be around at home, at work, or at school?
2. Who does the person try to avoid? Why?
3. Who are the people, other than staff, that the person would like to be around?
4. How does the person keep in touch with his or her favorite people? (visiting, letters, e-mail, phone, online, etc.)

Question 2: Describe what this person enjoys and list his/her interests.

1. How does the person like to spend his or her free time?
2. What has been the person's favorite job or work around the house?
3. Where are the person's favorite places to go around town? What about out of town?
4. Where does the person have most fun?
5. What hobbies does the person have?
6. Does the person have a favorite holiday? What is it? How does he or she celebrate it?
7. What does the person talk about when asked about work or school?
8. What is important to the person about work? If the person could have any job, what would it be?
9. What does the person like to do in the Spring, Summer, Fall or Winter?

Question 3: Describe what this person dislikes.

1. What jobs or chores does this person avoid?
2. What activities does this person decline? Why?
3. What supports (daily living, medical, behavioral) does this person agree with?
4. What makes the person sad? What makes the person frustrated?

Question 4: Describe what this person wants to accomplish in the future.

1. What are the person's hopes and dreams?
2. What kind of jobs does this person want? Does the person want to advance in his or her current job?
3. What places does the person want to go?
4. What does the person want to learn?
5. What is something that the person would like to purchase?
6. Where would the person like to live? How would the person like to be living?
7. What is the person's choice of provider(s) and individuals for support? Who would the person like to work with on goals in his or her living situation and community inclusion? Who would the person like to work with on goals in his or her pre-voc/employment situation?

Question 5: List and describe what is most important to this person from his/her perspective.

1. Are there any themes from answers in this PFW that are most important to the person?
2. What are things the person doesn't want to live without?
3. What makes the person most happy, most content or really enjoy their life?
4. Has the team learned anything new around what's important to the person from other planning sessions or team meetings?
5. What is most important to the person about his or her job?
6. What does the person's schedule look like?

Question 6: Describe what people like and admire about this person:

1. What do you and others like about this person?
2. What do you and others admire about this person?
3. What does this person get complimented about?
4. What has this person taught you? (about anything in life)
5. What do you like to talk about with this person?
6. How does this person contribute to his/her community?

Question 7: Describe how this person interacts socially with others.

1. What types of environments does this person enjoy (large, small, quiet, noisy, etc.)?
2. How important are friends to this person? Do they have as many friends as they would like?

3. What supports, if any, are needed while interacting with others?
4. How does this person ask to change jobs, TV shows, activities, etc.?

Question 8: Describe any of this person's spiritual, religious, and/or cultural considerations.

1. What type of church or temple (or other) does this person like going to?
2. What spiritual activities does the person routinely do? Or would enjoy doing?
3. Who are the people that the person is connected to at their church or temple (or other)?
4. What type of church or temple (or other) did this person grow up with?
5. Are their family or cultural traditions that are meaningful to this person?
6. Are these considerations different than family ideas?
7. Are there other spiritual or cultural events that mean something to this person?

Question 9: Describe this person's living arrangements:

1. What does this person like about his or her current living situation?
2. What does this person not like about his or her current living situation?
3. Are routines around the home important to this person? Describe these routines.
4. What does this person like doing around the house?
5. What helps this person have a good day when arriving home from work or school?
6. What is the person's choice of provider(s) and individuals for support? Who would the person like to work with on goals in his/her living situation and community inclusion?

Question 10: Describe this person's pre-vocational/employment/school:

1. Does this person's job match his or her desires, strengths and interests?
2. Do activities and school programs match the person's desires, strengths and interests?
3. What helps this person have a good day when at work?
4. Is there something at break or lunch time that is most important? If so, be specific.
5. What jobs or tasks should change?
6. How does this person make money?

7. Is this person making as much money as he or she wants?
8. What does an average day look like? What should continue? What should change?
9. What jobs are good matches?
10. What jobs are bad matches?
11. What jobs does this person like to do best?
12. What are the person's choice of provider(s) and individuals for support? Who would the person like to work with on goals in his/her pre-voc/employment situation?

Question 11: Describe how this person communicates and the supports he/she needs with communication:

1. How does this person communicate his or her needs, wants and emotions?
2. How do staff/others know this person is happy? What does he/she look like?
3. When this person gets angry, what he or she needs most is...?
4. If this person uses words to communicate, are there supports needed to fully understand a request?
5. What do staff/others need to know about how this person communicates?

Question 12: Describe what is needed for this person to be healthy and safe.

1. What about the person's routines (morning, work, afternoon or evening) do others need to know that supports the person to be healthy and safe?
2. What works best when this person goes to a doctor's appointment?
3. What does the home and pre-vocational/employment environment need to consider to keep this person healthy and safe?
4. Describe any supports that assist this person in managing his/her medications and appointments (such as transportation, escort, assistance, making appointments, etc.)
5. What environmental factors help this person stay healthy and safe?
6. Are there any nutritional considerations to address for the person's health and safety?
7. Are there medical conditions that require support for the person? Is there a plan to support him/her? Does there need to be a plan included in the ISP (i.e. health care plan; nursing care plan; risk support documents)?

Question 13: Describe any supports this person needs to participate in activities that are important to this person.

1. Does the person need to consider making more money to participate in activities that are important to him or her?
2. What type of supervision or level of support does the person need?
3. Are specific staff characteristics needed?
4. What type of transportation is needed? What supports are needed to be in a vehicle?
5. What types of skills are needed to do specific jobs?
6. What budget supports does this person need?
7. What supports are needed for this person to carry money?
8. If the specialized provider is payee, to what extent does the person participate in the management of his/her finances? (Refer to 404 Chapter 4-005-05C)
9. Describe any adaptive equipment and related supports this person needs.
10. Are there any special clothing considerations for this person?

Question 14: What could improve this person's ability to be independent?

1. What would this person like to do independently but is not doing right now or needs supports to do?
2. What type of assistive technology would be a benefit? For what?
3. Are there any other learning opportunities or education to be considered?
4. Are there environmental adaptations to consider? At work? At home? At school?
5. How can this person make more choices and decisions? About activities? About finances?

Question 15: How could this person be more involved in activities or events in his/her community/neighborhood?

1. What activities does this person enjoy doing?
2. Are there groups or clubs this person wants to join? If so, what supports are needed for him/her to participate?
3. Does this person know what activities are available?

Question 16: What would improve this person's ability to increase his/her income?

1. What ways to earn income need to be explored? (not necessarily "jobs" but ways to earn income)
2. Are there new jobs this person wants to try?

3. Is this person working as much as he/she wants?
4. Are there job advancements to consider?
5. What type of adaptive equipment could assist in increasing his/her income or creating job duties?
6. Does the person want to learn about different jobs?
7. What gets in the way of this person being (more) productive at work? What are the barriers that need to be overcome?

Question 17: What would improve this person's ability to contribute to his/her household and/or community?

1. Does this person want to see how other people make money?
2. Does this person want to volunteer in his/her community?
3. Are there spiritual or cultural events/considerations or traditions that the person may want to participate in?
4. What gets in the way of this person being (more) productive around home or at work?
5. What could this person do in their home to contribute to the household?
6. What adaptive equipment needs to be purchased, maintained or updated?

Question 18: What does this person want to learn?

1. What does this person want to learn to have things that are important to him/her?
2. What jobs has this person asked to learn?
3. What activities or crafts has this person asked to learn?
4. What jobs or activities has this person indicated he/she'd like to try?

Question 19: What does this person need to learn?

1. What would assist this person to be involved in his or her community?
2. What does this person need to learn to work more independently?
3. Could this person benefit from learning to create or manage a budget?
4. Are there current health and safety supports that could be learned by this person, assisting in becoming more independent?
5. Has the team learned from other planning sessions or team meetings areas where increased skill knowledge would benefit this person?

Question 20: Describe any areas of conflict between health and safety supports and what is important to this person.

1. Are there things important to this person that are in conflict with his or her health and safety supports or being a valued member of the community?
2. Is something important to the person that is not able to happen because specific health and safety supports are in place that prevents it from happening?

APPENDIX D

Glossary/Acronyms

Assessment

The process that identifies the preferences, skills, and needs of the person and the services, interventions, and support that would facilitate a healthy, safe, and meaningful life.

Choice

The individual's expression of preference, opportunity for, and active role in decision-making related to the selection of assessments, services, providers, goals and activities.

Developmental Disability

1. An intellectual disability; or
2. A severe, chronic disability other than an intellectual disability or mental illness; which:
 - a. Is attributable to a mental or physical impairment other than a mental or physical impairment caused solely by mental illness;
 - b. Is manifested before the age of twenty-two years;
 - c. Is likely to continue indefinitely; and
 - d. Results in:
 - 1) In the case of a person under three years of age, at least one developmental delay; or,
 - 2) In the case of a person three years of age or older a substantial limitation in three or more of the following areas of major life activity, as appropriate for the person's age:
 - a) Self care;
 - b) Receptive and expressive language development and use;
 - c) Learning;
 - d) Mobility;
 - e) Self-direction;
 - f) Capacity for independent living; and
 - g) Economic self-sufficiency.

Division of Developmental Disabilities (DD)

Agency located within the Nebraska Department of Health and Human Services responsible for the statewide system of developmental disabilities services.

Family Member

The parent, spouse, or child of the individual in services or a person of the same relation by marriage.

Individual

The person receiving services.

Individual Support Plan (ISP)

A written plan developed by the individual with the other members of his/her interdisciplinary team, known as the ISP team, that describes the services to meet the assessed needs. The ISP may be developed in conjunction with the Individual Education Program (IEP) for children receiving special education or other community services. Note: The terms Individual Support Plan (ISP) and Individual Program Plan (IPP) may be used interchangeably.

Individual/Family Meeting (IFM)

The meeting with the individual, parent or guardian, and Service Coordinator that occurs before the Individual Support Plan (ISP) meeting. The purpose of the IFM is to develop a personal vision for the individual receiving services.

Intellectual Disability

Person with an intellectual disability means any person of sub-average general intellectual functioning that is associated with a significant impairment in adaptive behavior.

Non-Specialized Providers

People that the individual and/or their family hire directly to provide services.

Non-Specialized Services

Services provided for individuals with developmental disabilities delivered by a provider of the individual's choosing. May also be referred to as Community Support Program (CSP).

Service Coordination

Activities conducted on behalf of individuals with developmental disabilities and their families to help them access developmental disability services and other services not funded by the Department. Service coordination ensures that services are responsive to the preferences and needs of the individual and that services promote the independence, interdependence, productivity, and inclusion of individuals receiving services. Also referred to as case management.

Specialized Providers

Agencies in the community certified by DD that deliver specialized services.

Specialized Services

Services provided for individuals with developmental disabilities delivered by a certified provider under contract with the DD.