

# 期望很重要 我的生活,我的选择,我的计划 以人为中心的计划指南

Shared Support Maryland, Inc. 马里兰州发育性残疾理事会资助

该项目得到了美国CFDA 93.630号赠款的部分支持。华盛顿特区卫生和公众服务部社区生活管理局20201。鼓励在政府赞助下进行项目的受赠人自由表达其调查结果和结论。因此,观点或意见不一定代表ACL的官方政策。

## 目录表

## 4-5 简介

马里兰州共同支持组织衷心感谢马里兰州发育性残疾理事会的资助,使 "期望重要"~"我的生活, 我的选择, 我的计划 "成为可能

```
以人为中心的计划和人权
6-14
        重要词语的定义
  6
  6-7
        以人为中心的计划含义
        以人为中心的计划的历史
  7-9
        人格尊严和人权/您在规划中的权利
  10-11
        支持性决策原则
  12-12
        支持性决策资源
  12
  12
        家庭角色
  13
        其他承诺出资人
  14
        注释
15-25
        前期规划
        您的团队成员都有谁?
  15-18
        您计划的重点领域
  19
  7/1/19
           工具和其它资源
  20
        进入规划流程
       日程表和准备工作清单
  20-22
  22-23
        会议规则和指南
  24-25 期望和要求
  25
        注释
26-35
        年度规划会议及流程
  26
        规划目的
  26-27
        负责人
  27
        会议方式
  27-28
        如何寻求引导师帮助
  7/1/19
           规划和复核
  30-32
        制定行动计划
  32
        如何确保您的计划适合您
  33-34 样品工具
  35
        注释
```

36-42	后期规划				
36	推进计划的方式				
37	规划后的时间表和沟通				
38	变更您的计划				
38	保持您的团队正常运转				
39	保持联系的方式				
39-40	如果您与团队成员有问题				
40-41	如果您在执行计划时遇到问题				
42	注释				
43	结论				
44-92	资源				
44	资源索引				

## 简介

期望很重要:我的生活,我的计划,我的选择人为中心的规划指南是为马里兰州残疾人及其家人提供。本指南可与期望很重要项目2小时或1小时培训单元一起使用或单独使用。

这本指南包含有用的资源、工具、网站链接和提示,帮助您和您的团队确定您的生活方向。

在本手册中,"您"是指您个人或"您"的家庭。

#### 本指南有四部分:

- (1) 以人为本规划与人权的历史
- (2) 前期规划(规划前)
- (3) 规划
- (4) 后期规划(规划后)

每一节后都有一页可以写上注释和其他信息。

最后还有一份很长的马里兰资源联系清单。您也可以写上您的重要团队成员的名字和联系信息。有很多方法来计划!在指南的后面,许多不同的计划方法的模板和示例。

本指南由残疾人、家庭成员和社区伙伴编写。

感谢本指南的编制人员: Atley Fortney、Joan Rumenap、Julie Randall、 Kara Jones、Kristi Culbreth、MeloneClark、Mona Goma、Pam Hodge 、Patti Saylor、Tjameka Davenport和Tracey Wright。

感谢Elizabeth Vasquez和Quality Trust提供技术支持,Lydia Brown和 Autistic Hoya通俗的语言编辑,ACSI翻译 ® 提供的西班牙语翻译。

所有人都有权利为了自己的人生目标和梦想而生活、爱、工作、娱乐和工作。

# 以人为中心的计划和人权

## 重要词汇的定义

残疾专业人士使用的词汇有很多。

#### 以下是一些重要词汇的定义:

- 1. 倡导 为自己或他人发声
- 2. 自我决定 控制自己生活的权利
- 3. 包容 残疾人士和非残疾人士都在一起
- 4. 人权一以自己的身份生活在这个世界上的基本自由

#### 以人为本规划的含义是什么?

以人为中心的计划是贯穿人的一生的过程。从理解所有人都有权利在他们的社区中生活、爱、工作、娱乐和追求他们的梦想开始。有许多不同的方法来实现规划,也有许多不同的使用模型。 本培训将帮助您理解指导以人为本的的各种计划的重要内容。

以人为中心的计划支持人们行使自己的权利去思考、决定和朝着他们生活中最重要的事情努力。以人为中心的计划帮助人们度过人生的起起落落。 无论是困境还是顺境都可以帮助人们。什么对自己来说是重要的,每个人都有独特的定义。 这对于每个人和家庭来说都是完全不同的。

## 以人为中心的计划的历史

以人为中心的规划建立在各种重要理论和运动的基础上,如残疾人权利、自我拥护、独立生活和正常化。

残疾人权利要求残疾人享有与非残疾人相同的权利和自由。不承认这是事实则视为对残疾称谓的"歧视"。 残疾人权利还包括残疾人与非残疾人是平等的。

自我拥护主张残疾人可以而且应该为自己发声。这是一种通过经历和其他关心你的人的支持来学习的技能。自我拥护还主张残疾人是自己生活和他们需求的专家。

独立生活说的是指残疾人可以和非残疾人一样生活在同一个社区。独立生活运动证明,在支持下,即使是严重残疾的人也可以克服在社区成功生活的障碍。独立生活还说残疾人通常能提供同样的人生活在社区所需的最佳支持。

正常化(现在被称为"社会角色价值化")意味着残疾人应该获得与社区中其他 人一样的机会和经历。

它的观点是,我们都是这样学习的,则残疾人往往因为没有机会像其他人一样体验典型的生活模式而受到阻碍。

Wolf Wolfensberger和Niels Erik Bank-Mikkelsen说,当残疾人过着尽可能接近"正常"的生活,在生活中经历美好的事情时,他们更有可能在社会中扮演重要角色,"正常化"得名于此。有价值的社会角色(如姐妹/兄弟、邻居、教堂成员、员工和许多其他人)通常是与他人建立联系和社区内有意义参与的基础。 这些想法是社区融合的早期例子和好好生活的早期想法。

始于1959年的 "正常化 "运动倡导残疾人与非残疾人在同一社区生活和学习。当残疾人在社区有一席之地时,他们的生活往往遵循更 "正常 "的生活模式, 他们会经历很多美好的事物。

以人为中心的规划也支持残疾社会模式。残疾的社会模式认为世界上所有的人都有相同的能力。这个世界的规划和组织是为了满足没有残疾的人的需求。因此,当有楼房有楼梯时,不能走路的人就成了残疾人。或者当课程进展非常快时,需要更长时间学习的人就会成为残疾人。残疾的社会模式表明我们不应该试图固化残疾人。相反,帮助残疾人意味着改变世界的运作方式。

在过去,像社会工作者、医生和其他可能不认识某个人的专业人士为残疾人 写计划。家庭没有参与规划,也没有质疑专业人员。残疾人对他们的计划没 有权利或选择,甚至不知道他们规划了什么。

以人为中心的规划始于1972年,旨在帮助了解残疾人的能力。

认为残疾是一种有缺陷的负担的观念已经在社会中扎根。残疾人的污名和我们对他们的轻视心态仍然严重。

以人为中心的思想直接反对残疾人区别对待的危险观点。(Cody Drinkwater, 2019年12月)

全世界,包括马里兰州,都在改变!

#### 人格尊严和人权/您在规划中的权利

您有权得到尊严和尊重。尊严意味着您是有价值的。

每个人都是不同的, 有不同的兴趣领域和对他们来说重要的事情。 残疾人也是如此, 对他们来说, 生活中最重要的东西可能与他们的残疾无关。

残疾人经常说"没有我们的参与,不要替我们做决定"。 这意味着,残疾人应该是任何有关残疾人计划的一部分。这意味着残疾人要掌控自己的生活。

只要您愿意, 人们可以提供帮助。但他们不应该为您或您的家人做决定。您的计划就是您的计划。您有权利让您的计划看起来像您想要的那样, 包括您最关心的事情, 而不包括您不想要的。

您应该参与所有关于您计划的沟通(对话、电子邮件、电话、会议等)。

随时掌控您的计划。确保您了解时间表和截止日期,以便做好准备。在您的计划付诸实施之前,要对其进行审查。 如果您需要,请寻求帮助。

您的计划说明了您想要的吗? 如果计划中有一些您不想要的东西,那就不 应该在计划中。

有人可能会解释,某些事情在您的计划中是有原因的。 例如,它可能与获得某个服务有关。如果有问题一定问清楚,这样您就能掌握所有您需要的信息,为您的生活和未来做出最佳决定。

您可以联系您的社区服务协调员、支持计划员、独立生活专家、个人教育计划协调员或您信任的团队中的某个人,随时进行更改。

## <u>支持性决策原则</u>

(Burton Blatt Inst & ASAN)

支持性决策是让您信任的人帮助您做出决策。

以下是支持性决策原则列表:

- 1. 每个人都有权做出自己的决定,尤其是关于影响他们的事情。
- 2. 假设人们都可以做出决定。

- 3. 尽一切努力支持人们自己做决定。
- 4. 有时人们可以自己做一些决定,但需要帮助来做出其他决定。

- 5. 决策是我们学习的技能。
- 6. 人们有权犯错误并从经验中吸取教训。
- 7. 人们有权改变主意。
- 8. 人们有权做出别人可能不同意的决定。
- 9. 人们有权获得他们所需的信息,以进行真正的选择。

## 支持性决策资源

- 1. supporteddecisionmaking.org
- 2. 支持性决策-美国律师协会
- 3. 自我决定的国家门户
- 4. www.dcqualitytrust.org

## 家庭角色

您的家人/您作为家庭成员可以为您主张。您的家庭可能对计划和服务有自己的期望。每个人的声音都应该被听到,但决策是由"拥有"计划的人做出的--这总是被计划的人的生活。

## 其它团队成员

当人们是您团队的一部分时,您应该知道他们的身份,为什么他们参与制定您的计划。您也有权控制谁参与您的团队。您现在可以要求某人加入你您的团队,但以后可以改变主意,让他们不要加入。您也可以邀请新来的人稍后加入您的团队。 这是您应该认真考虑的事!

<u>注释</u> :	

#### 前期规划

#### 您的团队成员都有谁?

您选择自己的团队成员!

最好选择那些非常了解您的人。 他们应该了解您的优点和缺点,并关心您在你最关心的事情上取得成功。

这些人将与您一起主张。他们将帮助你成长。

#### 记住:

- 1. 想想您想让谁加入您的团队,以及为什么让他们参与进来很重要。 您可以请您信任的人帮您想清楚。 如果您改变了主意,或者当您需要支持的时候,您之后可以更改。
- 2. 家庭成员可能对他们对您的要求有强烈的感受 但这不会妨碍您有自己的计划。您的计划中可以用他们的名字在旁边来表达他们的希望。
- 3. 支持在每个人的生活中都起着重要作用。人们有家人、朋友和社区,以及其他人参与他们的生活时,他们会更安全。

您可以邀请或取消邀请在您的团队中有偿工作的人员(社区服务协调员、学校过渡协调员、支持计划员、支持经纪人、提供商机构经理、直接支持人

员、护士)。

不同类型的人可以帮助您获得不同的服务或资源。 您可以在不同的时间邀请不同的人来帮助您做您想做的事情。

您可以考虑成为您是团队成员的人示例如下:

- 1. 社区服务协调员(CCS):帮助人们使用DDA服务,如个人支持、支持性就业或休息
- 2. 支持计划:帮助人们使用社区第一选择(CFC)和其他马里兰州服务
- 3. 职务开发人员/职务指导:帮助您找到并保留工作
- 4. 个人支持:帮助您满足日常需要,如做饭、穿衣服或清洁
- 5. 支持经纪人:如果您是自我指导,则为您提供辅导和指导
- 6. 项目经理:为服务商机构工作,帮助使用服务商服务的人

7. 过渡协调员:为学区工作,协助学生计划毕业和放学后的生活

- 8. 个人教育计划主席:为学校或学区工作,组织IEP会议和计划
- 9. 康复教练:与有积极成瘾的人和正在康复的人一起工作。康复辅导是一种基于优势的支持方式
- 10. 医护人员:认识您的护士、医生或治疗师
- 11. 地区宣传专家:在DDA地区办公室工作,帮助您进行自我拥护
- 12. 其它您信任的人: 您选择的任何人都可以支持你, 比如家庭成员、 配偶、伴侣或朋友

您也可以邀请您在社区认识的人或具有非常特殊技能的人,他们可以用其他方式帮助您实现您的目标和计划。

#### 示例如下:

- 1. 房地产经纪人:可以帮您找到或买房子
- 2. 网站开发人员:可以帮助您为业余爱好或业务制作一个网站

- 3. 一个有您想学习的爱好的邻居或朋友
- 4. 个人培训师或教练:可以帮助您实现健康目标

赋予团队中的人角色,有助于他们更好地支持您!他们可以在计划会议之前、期间和之后帮助您,并有担任多个角色。 他们也可以是没有其他角色的团队成员。

#### 角色示例如下:

- 1. 发送议程(会议计划)的人员:任何人都可以做到这一点,但您应该先过 一下议程!
- 2. 推进者:帮助会议继续进行的人。推进者顺利进行,并确保每个人都有机会发言。您可以推进自己的会议。您也可以请您信任的人为您或与您一起做。
- 3. 记录者:有人负责记录您在会议上谈论的内容。他们写下所谈的内容。

不同的人以不同的方式认识您!

## 您计划的重点领域

您的计划应该包括对您最重要的事。 以下是在您的规划会议中可能出现的 一些重点领域:

- 1. 工作
- 2. 社区生活
- 3. 人际关系和精神
- 4. 家庭和住宅
- 5. 终身学习
- 6. 健康和保健
- 7. 公民权和宣传权
- 8. 财政
- 9. 家庭支持

## 工具和其它资源

您的社区服务协调员、支持计划员或其他支持人员可能有不同的表格和工具来帮助你创建以人为中心的计划。

- 1. 您应该能够在会议前看到所有表格、报告或其他文件!至少在2周前提供,让您有时间思考。
- 2. 您可以随时询问有关工具的问题!
- 3. 您可以请人帮助您理解这些工具!

#### 4. 您随时可以改变主意!

## 进入规划流程

您可以您想要格式得到所有资源和信息。例如,您可以通过纸质文件、磁带 或在线上获得信息。

与他人一起准备会议可以帮助您在会议上感觉更好。 如果您知道人们会问您的问题或要谈论的话题,您就可以开始准备您的答案和您想分享的内容。 您可以要求您的社区服务协调员、支持计划员或其他您信任的团队成员在会议前与您交谈。

## 日程表和准备工作清单

制定一个议程和清单,以便您......

- 1. 知道您将谈论的内容
- 2. 掌握您在会议中的位置
- 3. 别错过任何事

每个人都是不同的。您会有您想谈的事。您也会有您不想谈论的事。

一些您可能想谈论的事示例如下:

- 1. 计划中您想要的东西
- 2. 您的身份和您想成为什么样的人
- 一些您可能不想谈论的事示例如下:
  - 1. 约会和人际关系
  - 2. 家庭问题
  - 3. 医疗信息

如果您不希望在会议上与整个团队成员讨论某些事情,您可以在会议之前与一个或多个团队成员单独会面。和他们谈谈您想对团队说的内容,如果有人提出您不想谈论的话题,他们可以在会议上支持您。

这是您的会议,主题应该是您最关心的问题,这样每个人都能清楚地了解您 对生活的要求。 如果您愿意,可以在会议上讨论以下几点:

- 1. 您喜欢做些什么?
- 2. 有人问您想要什么吗?
- 3. 谁是您的倾听者?
- 4. 梦想只有一个人的生活做过才会清晰。
- 5. 想想所有梦想的可能性。

- 6. 头脑风暴会议
- 7. 细分如何实现每个具体目标
- 8. 有什么好处?福利如何帮助您?

## 您会议的规则和指南

会议的规则和指南很有用。 可以帮助您:

- 1. 坚持不懈
- 2. 明智利用您的时间
- 3. 谈论所有对您重要的事情

所有人都能通过练习更好地召开会议。 以下是您在计划会议期间可能使用的一些指南和规则建议:

- 1. 轮流讲话
- 2. 一次只谈一个话题
- 3. 选择一个推进者来帮助您引导会议
- 4. 尽量不要分心, 比如发短信、戴耳塞、玩游戏、看电视、听音乐等等。

#### 期待和要求

您希望在计划会议期间感到舒适,您可以做一些事情来帮助自己感到更舒适。思考哪些事情会对您有用是在团队会议之前要做的另一件事。

以下是一些在会议上要做的事情,也许其中一些对您来说很有趣:

- 1. 问一个有趣的问题来帮助人们了解彼此(比如"您的梦想假期是在哪里?")
- 2. 为自己制作幻灯片或拼贴画

- 3. 选择您喜欢的零食和饮料
- 4. 选择会议地点
- 5. 坐在舒适的椅子上
- 6. 穿能让您感觉良好的衣服
- 7. 您感到不知所措或压力过大时,休息一下

如果您在计划会议时遇到困难,不要害怕寻求帮助。

1. 社区服务或支持计划协调员

- 2. 您的支持经纪人(如果您自行指导服务)
- 3. 供应商机构工作人员(案例经理、直接支持人员、您最信任的人)
- 4. 倡导组织(如马里兰州残疾人权利组织)
- 5. DDA地区办事处(特别是倡导专家小组)

<u>注释</u> :	

#### 年度规划会议及流程

#### 规划目的

规划会议的目的是什么?

- 1. 谈谈您的优势和才能
- 2. 决定您想怎样生活
- 3. 帮助您做出选择
- 4. 听听您想说什么
- 5. 尊重您的选择、兴趣、梦想和想法

## <u>负责人</u>

最重要的事情要记住是,您掌控自己的计划。

只有您才知道并决定什么是您生命中最重要的。您可以选择何时召开计划会议。您还可以选择计划会议的频率。

一定要得到您需要的帮助,以便您保持对自己计划的掌控。您的团队应该找您做最后的决定,并确保您的声音是计划表上所有人中最响亮、最受尊重的。

您可以让其他团队成员负责一些任务,比如拿饮料或制定时间表。但这是您的生活计划,您可以做出所有的最终决定。

## 会议方式

开好会议是一种可以学习的技能。 您可以使用一些提示和工具来让会议按 计划进行。 以下是一些常用的东西:

- 1. 日程表:坚持执行会议计划
- 2. 停车位:如果有人想说一些离题的话,写下来备用
- 3. 话棒:团队成员只有在拿着谈话棒时才能说话
- 4. 小组工作:如果有人问问题,您不必自己回答。您可以让小组帮您想答案

#### 如何寻求引导师帮助

引导师确保会议按计划进行。 如果您愿意,您可以当引导师--或者请别人和您一起或为您做推进者。

如果您需要他们的帮助,引导师可以帮助你做出选择。您也可以请引导者帮助进行会议,但不要发表意见。

以下是引导师可以提供帮助的一些重要方式:

- 1. 引导师帮助人们遵循会议议程或计划。这意味着要确保人们按顺序谈论主题。这还意味着要确保人们不能谈论一个话题太久。
- 2. 引导师帮助使空间对每个人来说都很舒适。这意味着帮助人们感受到尊重。这还意味着要确保人们在房间里感到舒适。
- 3. 引导师解释困以理解的想法,让每个人都理解。
- 4. 引导师倾听重要话题、关注点或关心情绪。
- 5. 引导师帮助结束会议。他们记录了每个人在会后要做的事情。

#### 规划和审查

在您的计划会议上可以讨论许多不同的事情,所以想想哪些话题对您和您的未来最重要。决定在会议上审查哪些内容时,需要考虑以下几点:

- 1. 您需要审查对您来说很重要的事情。例如,您可能需要回顾您未来将居住的地方的计划。
- 2. 您需要仔细检查任何可能影响您计划的变更。
- 3. 您需要谈谈哪些挑战可能会或将会阻碍您的目标。是什么阻碍了您做自己想做的事情? 您的团队也可以做一些事情来帮助您规避或摆脱可能阻碍您的事情。

计划会议应该是一个您可以从那些希望看到您成功的人那里获得帮助的时间。 为了从计划会议和您的团队中最大获益,您可以做一些事情:

- 1. 提问-尤其是当您不理解某事时。
- 2. 听听别人怎么说。重要的是了解其他人对事物的看法可能与您不同。
- 3. 努力学习。利用这段时间向聚集在一起帮助您的人学习。他们可能知道帮助您做事, 但是您却没想到的方法和资源。
- 4. 制定一个"行动计划"来实现您的目标。 您的计划不是一个愿望清单--它是你获得您想要的东西的地图。 所以要非常具体地说明您要做什么 . 以及其他人会做什么来实现您的目标。

## 制定行动计划

空白行动计划见第67-69页。

好的行动计划需要有人物、内容、时间和方式的细节描述,以便每个人都知道他们应该做什么--包括您!制定行动计划时需要问的一些问题如下:

1. 您想在您的会议上做什么?

- 2. 您必须做些什么才能达到您的目标?
- 3. 在您的会议上可以做些什么?
- 4. 您还需要什么?
- 5. 什么资源和支持计划可以帮助您?
- 6. 您需要谁作为资源?
- 7. 他们可以分享什么信息?
- 8. 谁会在具体活动中帮助您?他们将如何帮助您?
- 9. 团队将如何检查您的情况,以及你可能还需要什么?
- 10. 时间表是什么?

11. 您如何知道你已经达到了你的目标?

时间表帮助人们确定他们说要做的事情来帮助你。 当您试图衡量您和您的团队使您的计划为您工作时,这也是一个很好的工具。 在考虑时间表时,请提出以下问题:

- 1. 任务需要多快完成?
- 2. 这项任务是否涉及大量的研究或工作?

- 3. 此任务需要在其他工作之前完成还是可以等待?
- 4. 我给了团队成员足够的时间来完成任务吗?

您可以使用的一个工具是综合星。它可以显示您生活的不同部分,以及它们是如何协同起作用的。

#### 这些部分包括:

- 1. 技术
- 2. 社区型
- 3. 特定资格(如果您能得到政府的支持)

- 4. 个人优势和资产(您拥有的和擅长的)
- 5. 关系型

## 如何确定您的计划有效

- 1. 与您的记录员一起审查所有内容
- 2. 要求提供您的初稿的副本

- 3. 想想团队中每个人的优势
- 4. 给成员安排符合他们技能的任务

## 样品工具

(https://www.lifecoursetools.com/lifecourse-library/lifecourse-fra mework/)



## 以下是一个好的行动计划的特征:

- 1. 明确界定
- 2. 有时间表

- 3. 行动计划着眼于未来
- 4. 可估量
- 5. 随时更新

<u>注释</u> :		

# **后**期规划

#### 推进计划的方式

计划会议结束后,您的团队成员必须采取行动使计划生效。

您应该确保每个团队成员了解您希望他们做什么。一种方法是确保每个人 都有一份计划的副本,或者可以得到一份副本进行审核。

计划应该有每个特定的人的名字,每个人都要做计划中包含的任何任务,这样每个人都知道他们的工作内容。

#### 任务示例如下:

- 1. 您或您的律师会邀请朋友来参加下一次团队会议。
- 2. 您的护理员明天将与工作人员讨论改变他们的日常工作。
- 3. 您的社区服务协调员将在周末之前将您的预算变更发送给DDA。
- 4. 您的支持计划员将找到新的护理员供您选择。
- 5. 您的工作教练会帮助您谈论工作时间的变化。

## 规划后的时间表和沟通

您可以选择会议期间人们需要完成每一项任务的时间。这样每个人都会知道事情进展情况。如果您需要,或者如果发生了没有人计划发生的事情,您也可以改变时间线。

以下是制定任务时间表时要问的问题:

- 1. 这个星期需要做吗?
- 2. 还是可以在下次会议之前的任一时间进行?

确保团队中的每个人都同意时间表,这您和团队就为成功做好了准备!您可能希望事情进展比别人做的快。然后您可以找别人帮忙,他们可以在您想做的时候做,您还可以做出另外决定,比如等待。重要的是要清楚您的时间表,这样每个人都可以尽他们的最大努力。 只有当人们按计划行事时,计划才能发挥作用,而人们花太长时间来帮助你,可能对您的生活不利。

会后您和团队需要继续交谈。 您要想一想,如果您对计划有疑问,或者您认为有些事情没有按照您希望的那样发展,您应该联系谁。 如果您和您的团队成员能够在会议上就如何在您实施计划时保持联系达成一致,那么您的计划就更有可能取得成功。

## <u>变更您的计划</u>

您的计划应该反映今天真实的自己。计划会随着您的变化而改变!生活中的随时都有小变化。您可能想在计划会议之间改变您生活的一部分(和您的计划)。另外,如果有紧急情况,您可以立即寻求帮助并改变您的计划。

您可以随时改变您的计划。

### 如何更改计划方法如下:

- 1. 和您的和团队谈谈!告诉他们改变的内容。如果您有一个想法,但在细节上需要帮助,您的团队可以帮助您想办法使它发挥作用。
- 2. 根据需要更改的内容, 您的社区中心服务或支持计划人员可能需要将 其提交审批。

## 保持您的团队正常运转

您可以使用一些工具来帮助团队保持正常运转。您可以选择哪些工具对您和您的团队有效,以及您希望如何使用这些工具。一种方法是使用日历来提醒您或您的团队按计划报到或汇报工作。还可以用计算机帮助记住重要的日期和时间线。

## 保持联系的方式:

有很多方法可以与您的团队保持联系。还有一个好主意就是不同的人采用不同的方法。 有些人更适合打电话--而有些人更适合开会。 您还可以通过以下方式和您的团队保持联系。

- 1. 通过邮件发送行动计划
- 2. 计划跟进电话、会议/小组电话
- 3. 虚拟会议,如Zoom、Google Meetup、Skype和Facetime
- 4. 安排定期跟进会议
- 一定要在会议之间保留笔记和新信息,以便在您报到时与您的团队分享。您不必独自做这件事!您可以选择某人来支持您,甚至可以负责这些工具。

## 如果您对团队成员有意见:

有时,本应帮助我们的人并不总是能帮忙。如果您对团队中有人帮助您的方式不满意,请联系您信任的人谈谈。 您可以为自己辩护,或让您信任的人和你一起辩护,以尝试解决导致您担心的任何问题。

## 要记住的事:

- 1. 您选择自己团队成员。如果有人未和您交谈或完成他们的任务,您可以和他们谈谈。
- 2. 如果您对与团队成员交谈感到紧张,您可以写信、发电子邮件、打电话或向朋友寻求帮助。 有一个好主意是在真正的谈话之前,与您信任的人进行角色扮演。
- 3. 您可以找个调解人。调解人就像引导员。调解人帮助解决问题,尤其是 在人与人之间的问题。

### 如果您在使计划发挥作用时遇到问题:

有时,最好的计划并不像大家想象的那样起作用。您可以寻求帮助。这时,您 要考虑如何使您的计划能够发挥作用。同样,需要记住的是:

- 1. 不要放弃!有很多条路可以到达同一个目的地!
- 2. 有什么妨碍您? 也许有什么是您以前没有看到的?
- 3. 是时候想出新办法让您的计划为您所用了吗?

社区中也有一些团体,您可以向他们寻求帮助:

- 1. 独立生活中心
- 2. DDA倡导专家
- 3. 质量信托基金
- 4. 马里兰州残疾人权利
- 5. 康复服务部
- 6. 更多

<u>注释</u> :	

## 结论

本以人为中心的规划手册是帮助您学习该做什么的工具。而不是规则清单。作为自己计划的负责人,您可以选择使用手册中的哪些部分。

重点是这个计划是您的。

您掌控自己的计划。您要做所有的决定。您可以选择任何您想要的人加入您的团队。你团队中的每个人都会支持您和您的决定。说到您的计划,您的声音应该总是最响亮的。您对每个决定都有最终决定权。您可以随时改变您的计划。

## 资源索引

45-47	可以帮忙的人-个人联系人名单
48-53	可以帮忙的人-组织联系名单
54-55	在线资源和链接
56-65	空白生活课程工具
66-68	空白行动计划模板
69-75	Paz 计划
76	圆桌会议表
77-89	DDA重点探索的领域
90-91	以人为中心的规划汇总页面

## 可以帮忙的人-个人联系人名单

## <u>我的联系人</u>

您的团队中可能没有所有这些人或角色。 填写您想联系的人的表格。

1.	我的DDA服务的社区服务协调员是	
	电话号码:	
	电子邮件地址:	
	我的社区服务协调员在(公司)工作:	
2.	我的社区首选(CFC)服务支持规划师是	
	电话号码:	
	电子邮件地址:	
	我的支持计划员为(公司)工作:	
3.	我的护理机构是	
	他们为我提供的服务:	-
	我的个案经理/联系人:	
	0	
	电话号码:	
	电子邮件地址:	

4.	我的职业康复(DORS)服务的顾问是			
	电话号码:			
	电子邮件地址:			
5.	我的自我指导DDA服务支持经纪人是			
	电话号码:			
	电子邮件地址:			
6.	我的财政管理服务提供人是			
	电话号码:			
	电子邮件地址:			
7.	对我来说另一个重要的人是	c		
	与我的关系:			
	电话号码:			
	电子邮件地址:			
8.	对我来说另一个重要的人是			
	。 与我的关系:			
	电话号码:			

9.	对我来说另一个重要的人是
	与我的关系:
	电话号码:
	电子邮件地址:
10	. 对我来说另一个重要的人是
	与我的关系:
	电话号码:
	电子邮件地址:
11	. 对我来说另一个重要的人是
	与我的关系:
	电话号码:
	电子邮件地址:

电子邮件地址:

可以帮忙的人 - 组织联系名单

**期望很重要~我的生活, 我的**选择, 我的计划

电子邮箱:mylifemychoice@sharedsupportmd.org

电话:240-437-4281

网址: https://www.personcenteredplanningmd.com

### 自闭症患者自我倡导网络(ASAN)

地址:华盛顿邮箱:66122:邮编:20035

电子邮箱:info@autisticadvocacy.org

#### 华盛顿特区残疾人士质量信托基金

网址: https://www.dcqualitytrust.org/

电子邮箱:info@dcqualitytrust.org

电话:(202) 448-1450

#### 马里兰州东岸经纪公司

地址:马里兰州惠利维尔邮箱123号;邮编:21872

办公电话:410-726-2967

手机号:443-614-8873

电子邮箱: easternshorebrokers@yahoo.com

网址:easternshorebrokers.com

### 马里兰州社区服务协会(MACS)

地址: 8835 Columbia, 100 Parkway, Unit P, Columbia, MD, 21045

电话:410-740-5125

电子邮箱:macs@macsonline.org

网址: macsonline.org

## 项目行动!

电子邮箱: pholton@dcqualitytrust.org

电话 :202-448-1458

### 马里兰州独立生活中心

### 安妮阿伦德尔县和霍华德县

独立可用资源 (ARI)

地址: 1406-B Crain Highway South, Suite 206, Glen Burnie, MD 21061

电话:410-636-2274

传真:443-713-3909

网址:http://arinow.org/

### **阿勒格尼**县、加勒特县和华盛顿县

独立资源

地址: 30 North Mechanic Street, Unit B, Cumberland, MD 21502

电话:301-784-1774 转101

网址: http://www.rficil.org/

巴尔的摩市、巴尔的摩县和哈福德县

马里兰州影像中心

地址:东300号马里兰州陶森约帕路302室;邮编:21286

电话 410-982-6311

网址: www.imagemd.org

卡尔弗特县、查尔斯县和圣玛丽县

南马里兰州独立生活中心

地址:马里兰州梅卡尼克斯维尔罗比威385881室:邮编:20659

电话:301-884-4498

网址: www.smcil.org

## 卡罗尔县和弗雷德里克县

自由中心

地址: 550 Highland Street, Suite 510, Frederick, MD, 21701

电话:(301)846-7811

网址: www.thefreedomcenter-md.org

**卡**罗琳县、塞西尔县、多尔切斯特县、肯特县、安妮女王县、萨默塞特县、 塔尔博特县、维科米科县和伍斯特县

湾区CIL

地址:马里兰州索尔兹伯县 Progress Circle 909号300室;邮编:21804

电话:443-260-0822

网址: http://discoverhci.org/

## 蒙哥马利县和乔治王子县

Independence Now有限公司

地址:马里兰州银泉 旧哥伦比亚派克街12301号101室;邮编:20904

电话:301-277-2839

网址: www.innow.org

<u>DDA地区办事处</u>

南马里兰州地区办事处

网址:DDA 南马里兰州地区办事处

电子邮箱: smro.dda@maryland.gov

电话:(301)362-5100

文字电话:(301)362-5131免费电话:(888)207-2479

中部马里兰州地区办事处

网址: DDA 中部马里兰州长地区办事处

电话:(410)234-8200 免费电话:(877)874-2494

#### 西部马里兰州地区办公室

网址: DDA 西部马里兰州长地区办事处

电子邮箱: stacey.walters@maryland.gov

电话:(301)791-4670 免费电话:(888)791-0193

#### 东海岸马里兰州长地区办事处

网址: DDA 东海岸马里兰州长地区办事处电子邮箱: carriea.day@maryland.gov

电话:(410)572-5920

免费电话:(888) 219-0478 TDD:(800) 735-2258

#### DDA 倡导专家

#### 南马里兰州地区办事处

电话:(301)362-5141

#### 中部马里兰州地区办事处

Cheryl Gottlieb

电子邮箱: cheryl.gottlieb@maryland.gov

电话:(410)234-8210

#### **西部**马里兰州地区办公室

Jessica Stine

电子邮箱: jessica.stine@maryland.gov

电话:(301)791-4670

#### 东海岸马里兰州长地区办事处

Cody Drinkwater

电子邮箱: cody.drinkwater@maryland.gov

电话:(410)572-5949

#### 通过发育性残疾管理局链接到社区服务机构协调员名单

- 中部马里兰州地区社会服务协调员提供商服务于安妮·阿伦德尔县、巴尔的摩市、 巴尔的摩县、哈福德县和霍华德县。
- 东岸地区社会服务协调员提供者为卡罗琳县、塞西尔县、多尔切斯特县、肯特县、 安妮女王县、萨默塞特县、塔尔博特县、维科米科县和伍斯特县服务。
- 南部马里兰州地区的社区服务协商员提供商为卡尔弗特县、查尔斯县、蒙哥马利县、乔治王子县和圣玛丽县服务。
- 西部马里兰州西部地区的社区服务协调员提供产为阿勒格尼县、卡罗尔县、弗雷德里克县、加勒特县和华盛顿县服务。

### 马里兰州残疾人权利

网址: https://disabilityrightsmd.org/

电话:410-727-6352

免费电话:1-800-233-7201

#### 康复服务部

网址: https://dors.maryland.gov/ 电子邮箱: dors@maryland.gov

电话:410-554-9442 免费电话:888-554-0334

视频电话:443-798-2840 (仅限聋人和重度听力障碍者)

#### 马里兰州长残疾人部

地址: 217 East Redwood Street, Suite 1300, Baltimore, MD, 21202

网址: http://mdod.maryland.gov/

电话: 410-767-3660 传真: 410-333-6674

电子邮箱:info.mdod@maryland.gov

#### 马里兰州老年中心

地址:西普雷斯顿街301号1007室

巴尔的摩, MD, 21201 电话: 410-767-1100 免费电话: 800-243-3425 传真: 410-333-7943

网址:https://aging.maryland.gov/

#### 马里兰州ABLE账号

网址: https://www.able-now.com/

电话:1-844-669-2253

## 在线资源和链接

如果您正在阅读硬拷贝,您可以在互联网上查找这些链接。您也可以寻求帮助。

促进以人为中心的做法和制度中心

网址:https://ncapps.acl.gov/

描绘生命历程

网址: Lifecoursetools.com 生命历程框架 - 生命历程网

国家过渡和就业家长中心

网址: www.pacer.org

马里兰州父母之家

网址:https://www.ppmd.org/

项目10过渡教育网络(佛罗里达州资源)

网址:http://project10.info/DPage.php?ID=103

成人准备(英国资源)

网址: www.preparingforadulthood.org

支持性决策工具

**残疾人**质量信任基金

网址: dcqualitytrust.org

## 支持我的决定

网址: supportmydecision.org

## 全国支持性决策资源中心

网址: supporteddecisionmaking.org

包容

网址:https://inclusion.com

美国公民自由联盟--支持性决策

## CHARTING the LifeCourse 🔼 👊 🚺











#### What is the Charting the LifeCourse?

Charting the LifeCourse is a framework that was developed to help individuals and families of all abilities and at any age or stage of life develop a vision for a good life, think about what they need to know and do, identify how to find or develop supports, and discover what it takes to live the lives they want to live. Individuals and families may focus on their current situation and stage of life but may also find it helpful to look ahead to start thinking about life experiences now that will help move them toward an inclusive, productive life in the future. The framework is designed to help any citizen think about their life, not just individuals known by the service system.

Even though the framework was originally developed for people with disabilities, it is designed universally, and can be used by any family making a life plan, whether they have a member with a disability or not.

#### Foundation of the LifeCourse Framework

Core Belief: All people have the right to live, love, work, play and pursue their life aspirations just as others do in their community.



#### **ALL People**

ALL people, regardless of age, ability or family role, are considered in our vision, values, policies and practices for supporting individuals and families. All families have choices and access to supports they need, whether they are known to the disability service system or not.



#### Family System and Cycles

People exist and have give-and-take roles within a family system, which adjust as the individual members change and age. Individuals and families need supports that address all facets of life and adjust as roles and needs of all family members change as they age through the family cycles.



#### Life Outcomes

Individuals and families focus on life experiences that point the trajectory toward a good quality of life. Based on current support structures that focus on self-determination, community living, social capital and economic sufficiency, the emphasis is on planning for life outcomes, not just services.



#### Life Domains

People lead whole lives made up of specific, connected, and integrated life domains that are important to a good quality of life, including daily living, safety and security, community living, healthy lifestyle, social and spirituality, and citizenship and advocacy.

The LifeCourse Toolkit is a product of the UMKC IHD, UCEDD. More materials at lifecoursetools.com.

May 2016

## CHARTING the LifeCourse 🔼 🤐 🚺













#### Life Stages and Trajectory

Individuals and families can focus on a specific life stage, with an awareness of how prior, current and future life stages and experiences impact and influence life trajectory. It is important to have a vision for a good, quality life, and have opportunities, experiences and support to move the life trajectory in a positive direction.



#### **Individual and Family Supports**

Supports address all facets of life and adjust as roles and needs of all family members change. Types of support might include discovery and navigation (information, education, skill building); connecting and networking (peer support); and goods and services (daily living and financial supports).



#### Integrated Delivery of Supports

Individuals and families utilize an array of integrated supports to achieve the envisioned good life, including those that are publicly or privately funded and based on eligibility, community supports that are available to anyone, relationship based supports, technology, and that take into account the assets and strengths of the individual and family.



#### Policy and Systems

Individuals and families are satisfactorily involved in policy making so that they influence planning, policy, implementation, evaluation and revision of the practices that affect them. Every program, organization, system and policy maker must always think about a person in the context of family.

Connect with the LifeCourse framework and materials at lifecoursetools.com.

The LifeCourse Toolkit is a product of the UMKC IHD, UCEDD. More materials at lifecoursetools.com.

May 2016



## Developmental Disability Administration (DDA) Supports and Services Planning Tool

Person's Name:	on's Name: Date of Interview:				
Initial Date of Planning To	ool:		_:		
Date of DDA Referral:		Date	e of Initial Contact:_		
Region (Check one)	☐ CMRO	ESRO	SMRO	☐ WMR	O
Address:					
County:					
Phone:		Email:			
Name/Agency:					
I. Circle of Support (Authorized representative, family, friends, people who know you best) Who are the critical members of your circle of support? Are they present?					
Name	Relation	ship	Contact Informati	on	Present? (Y/N)

Version Created October 5, 2018

1



#### II. Identify Goals and Preferences

Everyone wants a good life. What does a good life mean to you? Help identify what you do and don't want. For example, for many people, a good life includes living in their own home, having friends and family in their lives, working, and more. We will use this information to help plan for life experiences, supports, and services that point you in the direction of your good life.

#### Vision for a Good Life

What do you want?			
Describe how you want your overall good life to look:	Perspective of your Circle of Support (if applicable):		
What don't you want?			
Describe what you don't want in your life:	Perspective of your Circle of Support (if applicable):		

#### III. Identify Strengths

What do people like and admire about you? What are your talents, strengths, and skills?

#### IV. Guided Conversation on Employment and Daily Life

1. Are you currently working or have you worked in the past? If you aren't currently working,

Version Created October 5, 2018

2

are you interested in working? If not, why not?

- 2. If engaged in volunteer work or other similar activity, would you like to consider a job where you could do similar types of activities?
- 3. Is there anything that you believe challenges your ability to do the things you like or are interested in during the day?

Version Created October 5, 2018

3



#### **INTEGRATED SUPPORTS STAR | TIPS SHEET**

This tips sheet provides an overview of how and why to use the Integrated Supports Star.

#### Overview of the Integrated Support Star Principle:

All of us access a variety of supports to achieve our envisioned good life. Historically, planning for a person's and/or family's supports focused mainly on the government or specialized services available and often left out the many assets and resources that could be leveraged to meet a person's needs.

The Integrated Supports Star encourages accessing five main areas of supports:

- Public or privately funded based on eligibility
- Community places and services that are available to anyone
- Relationships
- Day-to-day and adaptive technology
- The assets and strengths of the individual and family

This principle serves as a reminder that everyone accesses a variety of supports to meet their day-to-day needs, support the achievement of long-term or short-term goals, solve problems, or enhance their quality of life.

#### Who Should Use it and Why?

The Integrated Support Star can be used by anyone (individuals, families, or professionals) for mapping current services and supports, problem-solving for a specific need or planning next steps. It can be used to explore current needs, identify gaps, or plan how to access supports for the future. The tool can be used to guide a conversation over the phone or facilitate an in-person planning meeting with one person or a group of people. The Integrated Supports Star can be used by anyone to guide their thinking.

#### Important Things to Remember about the Integrated Supports Star:

- The Integrated Supports Star helps organize and generate ideas. This can be done using the actual tool or just remembering the five points of the star during your planning and problem-solving.
- · Use the Star for making day-to-day decisions or use it for planning for the future. It can also help when having conversations with other support team members about new ideas or hard to talk about topics.
- There is no wrong way to get started or place to put your ideas. It is designed to expand your ideas and to help you see how to leverage and connect the different types of support.
- Completing the star for the sake of completing the form should never be the goal. The tool is designed to help you have interactive conversations and visually organize your thoughts.
- · Be mindful that any conversation about someone's life or future is very personal. It is important to recognize and be responsive to the diversity of experiences, situations and reactions when planning.















Developed by the Charting the LifeCourse Nexus - LifeCourseTools.com © 2020 Curators of the University of Missouri | UMKC IHD • May2020



#### **INTEGRATED SUPPORTS STAR | TIPS SHEET**

#### Suggested Steps for How to Use the Integrated Supports Star:

#### Decide the Purpose:

The Integrated Supports Star can be used to explore many different situations. Decide if you are mapping supports or using it to work on a specific goal or situation and then use the center part of the Star to write that purpose. If you are problem-solving put the specific problem or goal. If you are mapping current or future supports, write the name of the focus person.

#### **Explore Each Part of the Star:**

Use each part of the Star to begin thinking about what types of things are currently being used or that might be available to help achieve the goal or solve the problem. Use the Star on the front of the Tip Sheet to guide you through each section. Start with the section that seems the easiest to list specific supports and then work your way around the other sections. You will jump around the different sections of the Star and you will go back into each section to add more information as you learn more.

#### On-going Use of the Star:

The Star tool is designed to be used over and over again. You can create a different Star for each situation or keep building on your current Star, adding and changing things as you go. The completed Star can help you communicate what you want when you are talking to other people. You can take the Star to a meeting to help explain or advocate for the types of supports you need. It is designed to help you stay organized and explore new possibilities as you continue on your journey to achieving your goals and your day-to-day vision.

#### **Conner's Integrated Supports Star**

Conner's support team wrote Conner's name in the center of the Star because they were exploring the supports that would help him right now in his life. After actively listening to Conner and his family discuss their concerns, the facilitator recognized that the Star would help to visually show the supports available that would help the planning process.

Conner's team explored each area of the Star and would go back in fill in other areas as they learned more. It helped to highlight Conner's interests and the number of people that he has in his life. It also pointed out that he really wants to keep active in the community. The team realizes how important technology is and are identifying ways to use it now and in the future. They identified new services or funding that would pay for staff or assistive technology to help during the day.

The family continues to use Conner's Integrated Support Star when they have meetings with their case manager. Conner used the Star during his Individual Education Plan meeting to help set goals for the year. He also took it with him to his medical appointment when planning for his next surgery.





This Tip Sheet was supported, in part, by a grant from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living policy.









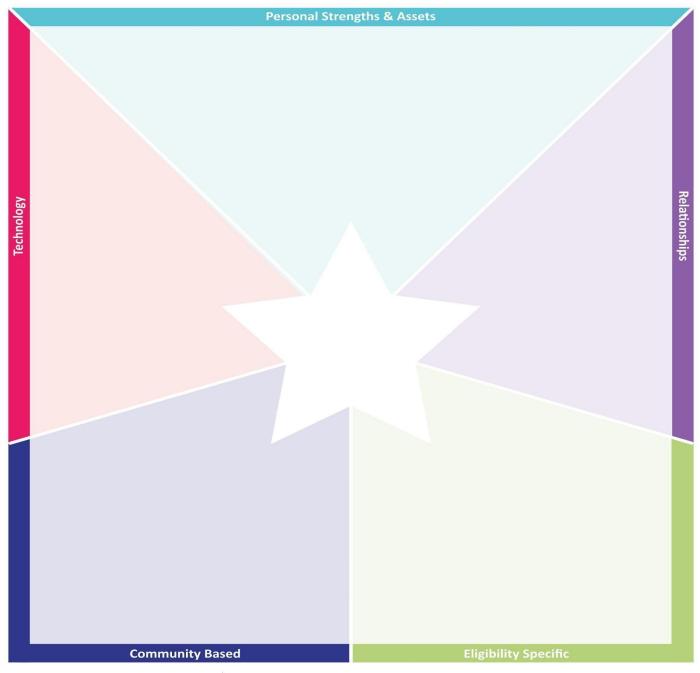




Developed by the Charting the LifeCourse Nexus - LifeCourseTools.com © 2020 Curators of the University of Missouri | UMKC IHD • May2020



### INTEGRATED SUPPORTS STAR















Developed by the Charting the LifeCourse Nexus - **LifeCourseTools.com** © 2020 Curators of the University of Missouri | UMKC IHD • March2020

1.	Personal strengths and assets:
2.	Relationship-based supports:
3.	Technology:
4.	Community-based supports:
5.	Eligibility-specific supports:

Version Created October 5, 2018

5

## VI. Perceived Services and Support Needs



## Your perspective:

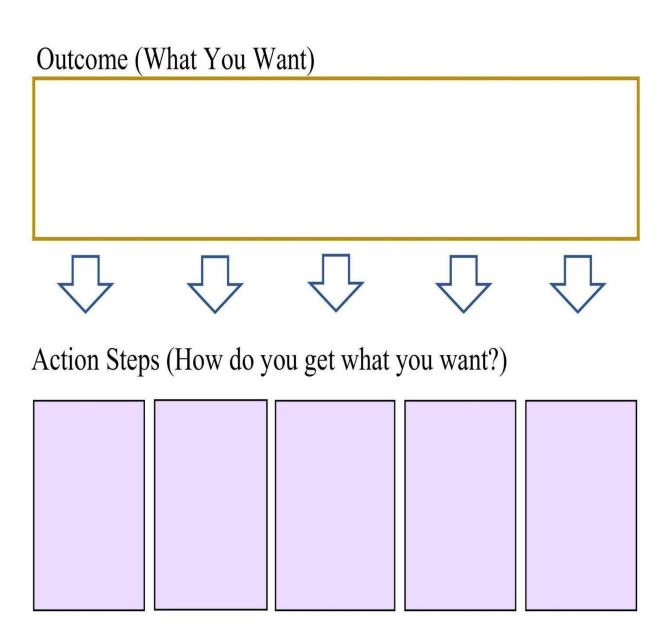
What's Working?	What's Not Working?	
_	-	

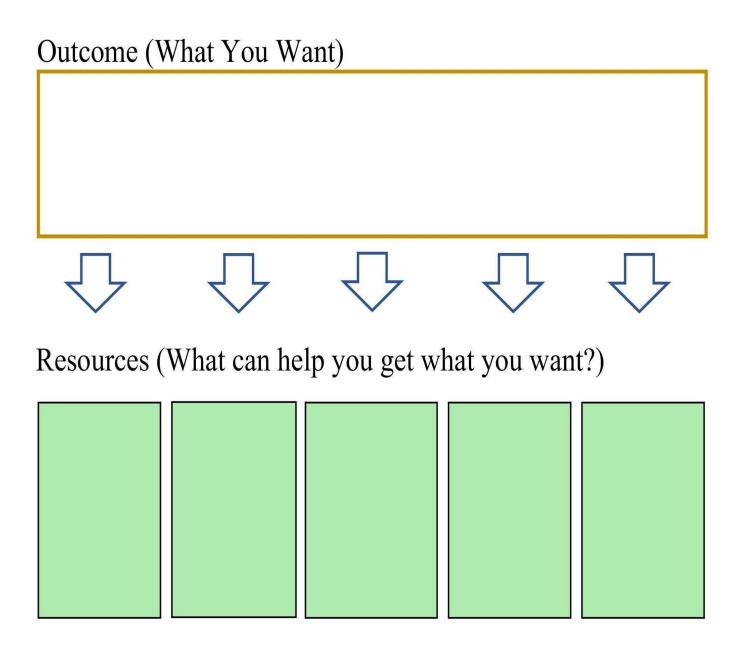
## Perspective of your Circle of Support:

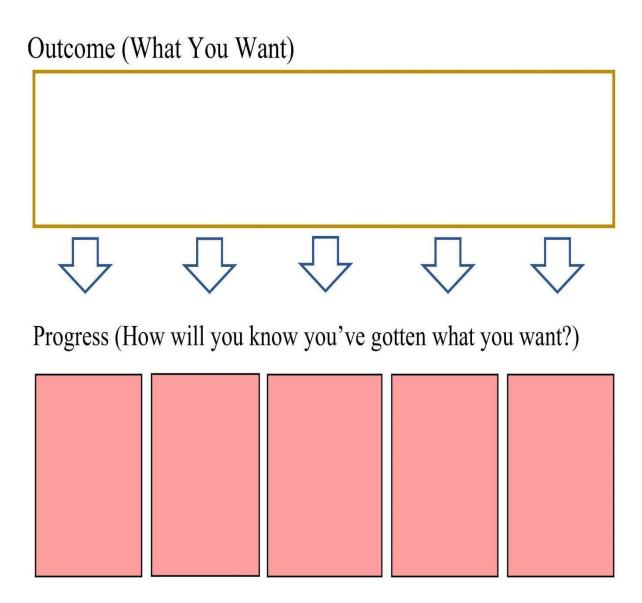
What's Working?	What's Not Working?	
_	_	

Version Created October 5, 2018

6







## Paz 计划

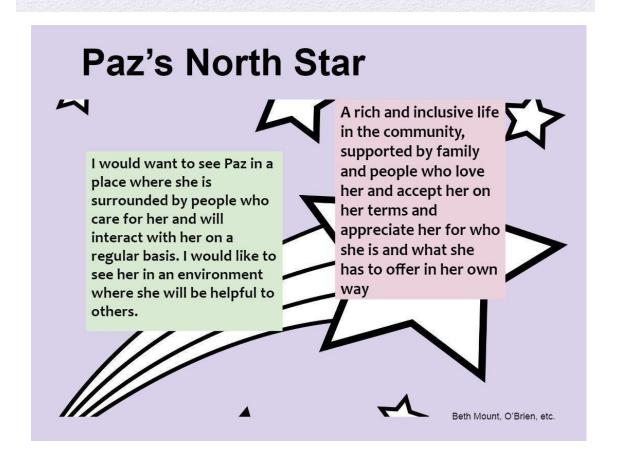
这是以人为中心的计划的一个例子。有许多不同的计划。每个人的计划都是 不同的!



## Who's Part of Paz's Futures Planning

- 21 people at School 1 year before Graduation
- 15 people to determine logistics just before plan was finalized

Always! Paz, her parents and her sister in the lead



# **Capacities and Gifts**

- Gifts of the hand abilities and skills that the person can contribute
- Head knowledge, questions, experience and information that the person can contribute
- Heart interests, enthusiams, personal passions, and rewards of the relationships that the person can contribute
- History and identity experiences, knowledge, duties, responsibilities, concerns, possibilities for belonging that come with membership of the person's family, religion, national or ethnic group, citizenships

# Who is Paz?

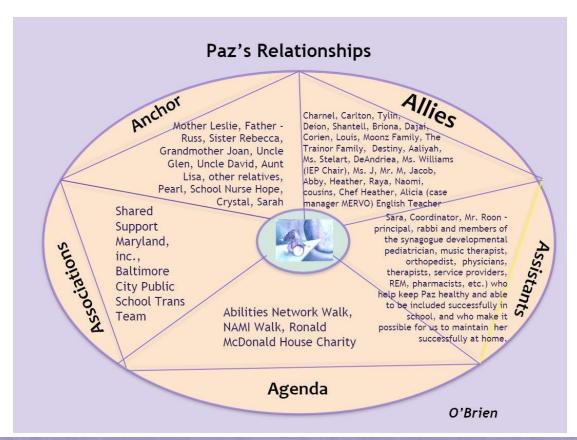
- Paz is an engaging person who communicates a great deal without speaking. She offers unconditional love and acceptance and has boundless patience and tolerance for everything life throws her way. She loves people and music, breezes and being read to. She loves fruit and chocolate, being massaged with body lotion, and having her nails done.
- Paz's facial expressions and body language are very representative of her feelings and/or reaction to her environment. When she smiles, she makes everyone around her smile. One of the best moments all year was when Paz hit the switch herself during the quote of the day. the students were so excited and I was so happy! Paz has also been observed moving her head and upper-body (when in her stander) when she hears music. She loves it when students read aloud to her and when she is working in groups. Pazya also likes movies and responds nonverbally to peer-to-peer interaction. The students have said they know she understands them even if she cannot speak to them. Paz is an inspiring student because she brings joy to her classmates on a regular basis. Paz also has a gift of calming students down and reaching students who normally have a difficult time warming up to others quickly.

# Who is Paz?

- When Paz is not in class you can feel it she makes people feel positive energy. When people are having a bad day they can go to talk to Paz.
- Paz appreciates many different experiences she responds to new and different things
- She will do anything and enjoy new things
- Non judgmental and patient
- Paz is an adventurist!
- Unconditional love to people those that really get to know

## Paz!!!!!

- Social, Calming demeanor and Positive spirit
- Talking to Paz she loves when people talk to her
- She helps people appreciate the simple things in life see things from her perspective...
- Emotional intelligence
- Paz likes teamwork
- Paz brings kids together when they are on different sides.. When they can't concentrate.. She's a unifier, the whole class dynamic changes when Paz is around,
- Everyone likes to work with Paz



Paz's Capacities, Interests, Social Roles and Work				
Interest	Capacity	What social role is possible?	What can you do to get paid?	
Culinary Arts	Engaging, provides therapy for students		A greeter at a store, a hostess at a restaurant, Sam's Club Sampler Girl	
Poetry Loves to be read to		Readings, Slams READING Volunteer in schools, having kids read to her. (PPPCS ~ after school program ~ 20 minutes each day 2 <sup>nd</sup> grade).  Speech practice, find all opps for kids and people to have to read - explan		
Movies		Movies in the Park		
Music		Choral Groups, Band,	Give out programs at concerts	
			Godwin, Smull	

## How Can Paz have more fun in ordinary places?

Brainstorming ~ Life in the community and richness that she has at school ~ outside of school....

- Charnel ~ Paz and Charnel will call each other and hang out outside of school
- · Being a greeter at a store
- Being with kids ~ kids have their own paradigm "differences" are not an issue as they may be ~ they are all together
- How can kids stay connected when school ends ~ without the shared experience of school
- Get together on a Saturday and go to the movies
- Kids visit at Paz's home
- · They hang out at the mall
- The power of technology ~ social (Skype, FaceTime, ...) just rely on the young adults!!!
- Long term relationships for the kids in the Culinary Arts ~ there could be the opportunity for friends to perhaps be the natural supports in Paz's life, roommates, job coach, etc..
- Art teacher assistant principal what not sure but…
- Groupon for instructional cooking at home
- Attend the special olympics
- Volunteer back to at the school when she graduates

David Pitonyak, 7 Questions

## WHO SHOULD BE AT THE MEETING Who you want to be there and how you will get them there—Tip: the more people who know and care about your customer and can be at the meeting, the better! You might also consider inviting someone who doesn't know your customer but who is a good contact for him or her to have, for example another broker. How to get them there - email? call? who will Who should be there be doing the inviting? \_\_\_\_\_ THE AGENDA FOR THE MEETING Tip 1: Ask your customer for agenda items he or she wants covered at the meeting. Tip 2: It's good to have some standing topics, that is, topics for the agenda every time, for example, "Progress on the PC Plan", "Follow-up, concerns, or questions from last month", "Plans for the coming month," "Date, time of the next circle meeting". PREPARING FOR THE MEETING-TO DO LIST What I need to create for the meeting (handouts? flip charts?) or bring to the meeting (resources? refreshments?); who I need to send the agenda to or talk to about the meeting, etc. FOLLOW UP ACTION ITEMS AND WHO WILL HANDLED THEM Who Will do what

期望很重要~我的生活, 我的选择, 我的计划(2021年8月)

\_\_\_\_\_

		ATION

Focus area exploration questions should be discussed during the facilitation/interview prior to the Annual Meeting using appropriate person centered planning methodologies (Pathways, Essential Lifestyle Planning, Paths, Maps, etc.)

EMPLOYMENT	FOCUS AR	EA							
Am I currently em	oloved? 🗆Y	es 🗆 No							
	rently employ								
		least minimu	m wage?	Yes N	lo				
		minimum wag	2000	30 00 00					
Is my empl	oyment a con	petitive, inte	grated positi	on? 🔲 Ye	es 🔲 No				
		competitive, in							
Would I lik	e a different jo	ob? Yes [	No						
YES -	would like a	different job: (	Work Experi	ence, Job II	nterests and i	Employment Sum	mary sections	required)	
NO - I	would not like	e a different jo	b: (Work Exp	perience ar	nd Employme	nt Summary sect	ions required)		
		t a competitive uired. An outc					rk Experience,	Job Intere	sts and Employment
NO - I am not required		ast minimum v	vage: (Comp	etitive Emp	oloyment, Wo	ork Experience, Jo	b Interests an	d Employr	nent Summary sections
NO - I am not	currently emp	oloyed:							
☐ I am	retired: (No d	additional que	stions/sectio	ns required	d.)				
☐ I am	not retired: (0	Competitive Er	mployment, J	lob Interes	ts and Emplo	ment Summary	sections requi	red.)	
Decision ma Decision ma Access to m Access to be I don't know I want to wo	toward comp nding sources incluc king by me king by my re edical support havioral supp if I'm ready f	d in order to b etitive, integra ling staffing, ti presentatives is needed orts needed or employmen inow where to	e in the mos ated employ ransportatio	t integrate ment are: n, etc.	d setting are:				
Barrier		Notes		Strategie	s for Addres	sing	Update on	status/pr	ogress
WORK EXPERIE	NCE								
Employer	Positio	n Type	Natural	Supports	Wage	Start Date	End Date	Liked	How Found

DDA PCP Nov 2017 page 1

INPAID EXPERIEN	ICE					
Organization	Position Type	Natural Supports	Start Date	End Date	Liked	How Found
OB INTERESTS						
would like to explor	e these job skills:					
would like to learn r	more about these employers	:because:				
hese people can hel	lp me identify employment o	ptions:				
Vhen I am not worki	ing I want to do these activiti	es:				
MPLOYMENT SUI	MMARY					
	What's Working for M	102		What's Not	Markin	a for Mo2
(abilities,	strengths, preferences, conti				eds, dislik	
***************************************						
		What Supports	Do I Need?			
Important To Me			Important For I	Me		
	ross v					
isks and How Addre	Description	How /	Addressed			Rights Restriction
Nion	Description	HOW A	uui esseu			rigitis restriction

r this focus	area, relevant topics include: Expressing Yourself, Un	serstanding Others and Making Decisions
(abili	What's Working for Me? ities, strengths, preferences, contributions, etc.)	What's Not Working for Me? (unmet needs, dislikes, etc.)
	What Sup	ports Do I Need?
nportant To		Important For Me
mportant To		Important For Me
mportant To	Me	Important For Me

inder this focus	area, relevant topics include: Learning Styles, Self-Ad	rocacy, Post-Secondary Education and	Other Learning & Developmen
(abili	What's Working for Me? ties, strengths, preferences, contributions, etc.)		Working for Me? eds, dislikes, etc.)
	What Sup	ports Do I Need?	
Important To	Me	Important For Me	
Important To		Important For Me	

nder this focus ar	ea, relevant topics include: Going Places & Doing 1	Things, Cultural & Spiritual Activities,	Activities that are Meaningful to M
(abilitie	What's Working for Me? es, strengths, preferences, contributions, etc.)		ot Working for Me? needs, dislikes, etc.)
	What Su	pports Do I Need?	
mportant To N	de	Important For Me	
Important To N		Important For Me	

er this focus a onal Safety	area, relevant topics include: Personal Care, N	Moving Around at Home, Meal	s & Food, Shopping, Taking Care of My Home, a
(abilit	What's Working for Me?  ties, strengths, preferences, contributions, etc.	.)	What's Not Working for Me? (unmet needs, dislikes, etc.)
	Wh	at Supports Do I Need?	
mportant To	Me	Important Fo	r Me
mportant To	Me	Important Fo	r Me
Important To		Important Fo	r Me

FINANCE FOO	CUS AREA			
Jnder this focus	area, relevant topics include: Banking, B	udgeting, Bill Payment and	Benefit Management	
(abili	What's Working for Me? tities, strengths, preferences, contribution	is, etc.)		ot Working for Me? needs, dislikes, etc.)
		What Supports Do I N	Need?	
Important To	Me	Impor	rtant For Me	
isks and How A	ddressed			
Risk	Description	How Addres	sed	Rights Restriction

onsiderations and	Roommate Considerations		ation Considerations, Accessibility Considerations, Financia
HOICE IN HOUS		2 20 20	
chose where I live	now: Yes No I ch	ose who lives with me	Yes No N/A
IOME AND HOU	SING SUMMARY		
(abilitie	What's Working for Me? es, strengths, preferences, contributions	s, etc.)	What's Not Working for Me? (unmet needs, dislikes, etc.)
	0	What Supports Do	I Need?
Important To N			o I Need?
Important To N			
Important To N			
Important To N	le		

HEALTH AND V	WELLNESS FOCUS AREA			
Under this focus Care	area, relevant topics include: Food & Nu	itrition, Physical Ac	tivity, Healthcare (Appointments,	Illness Care, Injury Care), and Dental
SUPPORTED HE	EALTHCARE DECISION MAKING			
Advance Directiv	re:			
I have an Advanc	e Directive Yes No			
YES - Mary	land Advanced Directive Five Wi	shes Maryland	Medical Order for Life Sustain	ning Treatment (MOLST)
NO – 🔲 I am	interested in having one -or- I a	m not interested	in having one	
Healthcare Age	ent:			
☐I do have a He	althcare Agent – Name and phone:			
☐I do not have	a Healthcare Agent			
I am intere	ested in having one -or- I am no	t interested in ha	ving one	
HEALTH AND V	VELLNESS SUMMARY		What's Nati	Washing for Man
(abili	What's Working for Me? ties, strengths, preferences, contribution	ns, etc.)		Working for Me? eds, dislikes, etc.)
		What Support	s Do I Need?	
Important To	Ma		Important For Me	
important 10			important for me	
Risks and How A	ddressed			
Risk	Description	How	Addressed	Rights Restriction

er this focus a	area, relevant topics include: Family, Friends, Neighbo	s, Romantic Relationships and Professional Relationships
(abilit	What's Working for Me? ties, strengths, preferences, contributions, etc.)	What's Not Working for Me? (unmet needs, dislikes, etc.)
	What Sunn	orts Do I Need?
	what supp	orts but need:
nportant To I		Important For Me
mportant To I		
mportant To I	Me	

RSON CENTERED PLAN SUMMARY PAGE				My Anı	nual Plan Date:
		My Life, My	Plan, My	Choice	
	My Name is:				
	What I like and a	idmire about m	weelf.		
	2000/00 (000/00) (00 00)		iyacii.		
		8	mai		
	best way to com	municate with	me.		
ate:	Created	Date:		_ Approval Date:_	
				Type of Plan: Initia	I □Annual □Revised
	Age: years 1	MA Number:		LTSS ID	):
dress:				Phone Numb	er:
echnology:					
or of Commu	nity Services:			Phone Numb	er:
	ney oct viceo.				···
Outcome			Outcome	Description	Requested Services
			Dank	Important FOR Mo	Discoursed in /5 4
important	TO IVIE DISCOVERED	III (Focus Area)	Kalik	important FOR Me	Discovered In (Focus Area)
			ressed	Rights Restriction	on Discovered In (Focus Area
ie	Description	now Add	resseu	Rights Restricte	Discovered in (rocus Area
nary of rights	restrictions:				
Restriction	Related Specific and				
	Assessed Need	Condition	Less	mitrusive Metrious me	u Effectivelless
utcomes					
Outcome			Outcome	Description	Requested Services
	dress: echnology: or of Community omes Outcome hary of what is Important hary of risks a ne hary of rights of the community of the comm	My Name is: What I like and a What I'm interes Important peopl Best way to com  Age:	My Life, My  My Name is:  What I like and admire about m What I'm interested in doing: Important people in my life: Best way to communicate with  ate: Age: years MA Number: dress: echnology: or of Community Services: ones  Outcome  hary of what is important to and for me: Important TO Me Discovered In (Focus Area)  hary of risks and how they will be addressed:  the Description How Add  hary of rights restrictions: Restriction Related Specific and Assessed Need Condition  outcomes	My Life, My Plan, My  My Name is:  What I like and admire about myself: What I'm interested in doing: Important people in my life: Best way to communicate with me:  Age:	My Life, My Plan, My Choice  My Name is:  What I like and admire about myself:  What I'm interested in doing:  Important people in my life:  Best way to communicate with me:  Approval Date:

DDA PCP PILOT Nov 2016 - Mar 2017 [extended Sep 2017 - Jun 2018]

page 1

Outcome:  Relevant Focus Area(s):  Projected Start Date:  Description of Outcome:  Related Important TO Me:    Important To Me 1   Important For Me 1   Important For Me 1   Important For Me 2   Important For Me 2   Important For Me 3   Impo	Outcome Category: Outcome:	
Projected Start Date: Description of Outcome: Projected Completion Date: Description of Outcome: Projected Important To Me: Important To Me 1 Important To Me 2 Important To Me 2 Important To Me 3 Important For Me 1 Important To Me 3 Important For Me 3 Importan		
Projected Start Date: Description of Outcome: Projected Completion Date: Description of Outcome: Projected Important To Me: Important To Me 1 Important To Me 2 Important To Me 2 Important To Me 3 Important For Me 1 Important To Me 3 Important For Me 3 Importan	Relevant Focus Area(s):	
Description of Outcome:    Related Important TO Me:		
Important To Me 2   Important For Me 2   Important For Me 3   Importan	Description of Outcome:	
What technology do I need to support this outcome?  How and how often will progress towards this outcome be reviewed?  In what way will the team know progress is occurring?  What does progress look like to me?  What does progress look like to my team?  What is the frequency that is planned to support my outcome?  Frequency for assessing satisfaction:  Frequency for assessing implementation strategies:  Outcome review frequency:  Support Considerations:  Natural/Community/Other Contributing Resources to Support Outcome:  Support Person  Relationship  Support Role  Phone Number  Non-DDA Agency Resource to Support Outcome:  Agency  Support  Contact Person  Requested DDA Service to Support Outcome:	☐ Important To Me 2 ☐ Important For Me	2
How and how often will progress towards this outcome be reviewed?    In what way will the team know progress is occurring?	How are community resources and/or natural supports being used or developed?	
In what way will the team know progress is occurring?  > What does progress look like to me? > What does progress look like to my team?  What is the frequency that is planned to support my outcome?  > Frequency for assessing satisfaction: > Frequency for assessing implementation strategies: > Outcome review frequency:  Support Considerations: Natural/Community/Other Contributing Resources to Support Outcome: Support Person Relationship Support Role Phone Number  Non-DDA Agency Resource to Support Outcome: Agency Support Contact Person  DDA-Funded Service to Support Outcome: Agency Support Contact Person  Requested DDA Service to Support Outcome:	What technology do I need to support this outcome?	
> What does progress look like to me? > What does progress look like to my team?  What is the frequency that is planned to support my outcome? > Frequency for assessing satisfaction: > Frequency for assessing implementation strategies: > Outcome review frequency:  Support Considerations: Natural/Community/Other Contributing Resources to Support Outcome:  Support Person Relationship Support Role Phone Number  Non-DDA Agency Resource to Support Outcome: Agency Support Contact Person  DDA-Funded Service to Support Outcome: Agency Support Contact Person  Requested DDA Service to Support Outcome:	How and how often will progress towards this outcome be reviewed?	
> What does progress look like to me? > What does progress look like to my team?  What is the frequency that is planned to support my outcome? > Frequency for assessing satisfaction: > Frequency for assessing implementation strategies: > Outcome review frequency:  Support Considerations: Natural/Community/Other Contributing Resources to Support Outcome:  Support Person Relationship Support Role Phone Number  Non-DDA Agency Resource to Support Outcome: Agency Support Contact Person  DDA-Funded Service to Support Outcome: Agency Support Contact Person  Requested DDA Service to Support Outcome:	In what way will the team know progress is occurring?	
> What does progress look like to my team?  What is the frequency that is planned to support my outcome?  > Frequency for assessing satisfaction:  > Frequency for assessing implementation strategies:  > Outcome review frequency:  Support Considerations:  Natural/Community/Other Contributing Resources to Support Outcome:  Support Person Relationship Support Role Phone Number  Non-DDA Agency Resource to Support Outcome:  Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  Requested DDA Service to Support Outcome:		
What is the frequency that is planned to support my outcome?  Frequency for assessing satisfaction: Frequency for assessing implementation strategies: Outcome review frequency:  Support Considerations: Natural/Community/Other Contributing Resources to Support Outcome: Support Person Relationship Support Role Phone Number  Non-DDA Agency Resource to Support Outcome: Agency Support Contact Person  DDA-Funded Service to Support Outcome: Agency Support Contact Person  Requested DDA Service to Support Outcome:		
> Frequency for assessing satisfaction: > Frequency for assessing implementation strategies: > Outcome review frequency:  Support Considerations: Natural/Community/Other Contributing Resources to Support Outcome: Support Person Relationship Support Role Phone Number  Non-DDA Agency Resource to Support Outcome: Agency Support Contact Person  DDA-Funded Service to Support Outcome: Agency Support Contact Person  Requested DDA Service to Support Outcome:	What does progress look like to my team?	
Frequency for assessing implementation strategies:  Outcome review frequency:  Support Considerations:  Natural/Community/Other Contributing Resources to Support Outcome:  Support Person Relationship Support Role Phone Number  Non-DDA Agency Resource to Support Outcome:  Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  Requested DDA Service to Support Outcome:	What is the frequency that is planned to support my outcome?	
Support Considerations:  Natural/Community/Other Contributing Resources to Support Outcome:  Support Person Relationship Support Role Phone Number  Non-DDA Agency Resource to Support Outcome:  Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  Requested DDA Service to Support Outcome:	<ul> <li>Frequency for assessing satisfaction:</li> </ul>	
Support Considerations:  Natural/Community/Other Contributing Resources to Support Outcome:  Support Person Relationship Support Role Phone Number  Non-DDA Agency Resource to Support Outcome:  Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  Requested DDA Service to Support Outcome:	Frequency for assessing implementation strategies:	
Non-DDA Agency Resource to Support Outcome:  Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  Requested DDA Service to Support Outcome:	Outcome review frequency:	
Non-DDA Agency Resource to Support Outcome:  Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  Contact Person  Requested DDA Service to Support Outcome:		
Support Person Relationship Support Role Phone Number  Non-DDA Agency Resource to Support Outcome:  Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  Requested DDA Service to Support Outcome:		
Non-DDA Agency Resource to Support Outcome:  Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  Requested DDA Service to Support Outcome:		
Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  Requested DDA Service to Support Outcome:	Support Person Relationship Support Role Prione Number	
Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  Requested DDA Service to Support Outcome:		
Agency Support Contact Person  DDA-Funded Service to Support Outcome:  Agency Support Contact Person  Requested DDA Service to Support Outcome:		
DDA-Funded Service to Support Outcome:  Agency Support Contact Person  Requested DDA Service to Support Outcome:		_
Agency Support Contact Person  Requested DDA Service to Support Outcome:	Agency Support Contact Person	1
Agency Support Contact Person  Requested DDA Service to Support Outcome:		
Agency Support Contact Person  Requested DDA Service to Support Outcome:		
Requested DDA Service to Support Outcome:	DDA-Funded Service to Support Outcome:	
	Agency Support Contact Person	1
Service	Requested DDA Service to Support Outcome:	
	Service	

DDA PCP PILOT Nov 2016 - Mar 2017 [extended Sep 2017 - Jun 2018]

page 2