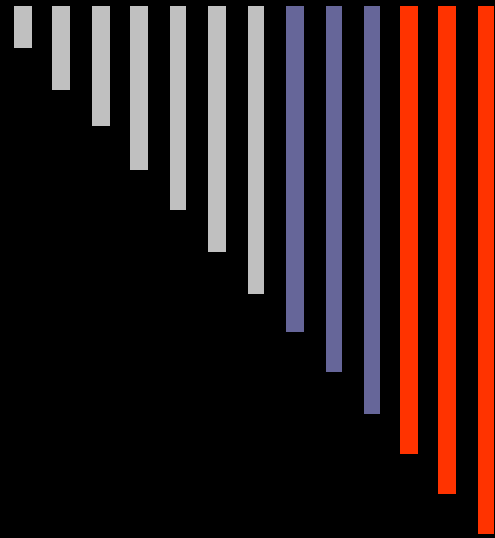


# *A Balanced Plan to a Better Life*

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Jean E. Tuller & Teresa Kelley

Oregon

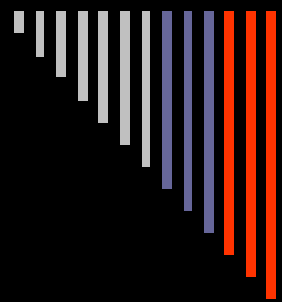
Technical

Assistance

Corporation

National Association of State Developmental Disabilities Directors  
Minneapolis Minnesota : July 31, 2003

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# HCBS Quality Framework CMS\*

- ❖ DESIGN – Front loaded
- ❖ DISCOVERY – Problem Identification
- ❖ REMEDY – Rapid Response
- ❖ SYSTEM IMPROVEMENT – Ability to discern pattern to be preventative, not just respond. Facilitate systems redesign

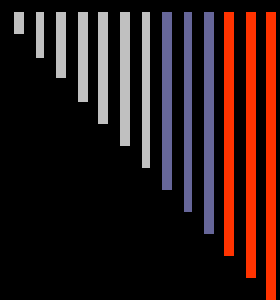
\* The Gospel According to Thomas



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## Beginnings: Developing Oregon's New Individual Support Planning System

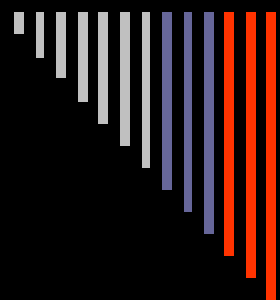
- ❖ Person centered planning guidance from CMS
  - ❖ Support from advisory team of state, county, provider agency representatives, people with disabilities and their families
  - ❖ Assistance from provider agencies who participated in field testing the new ISP system
-



---

## What We Want To Accomplish

- ❖ Focus on what is most important to the person
  - ❖ Provide consistent statewide planning methodology
  - ❖ Track significant risks – health/medical, safety, financial and behavioral
-

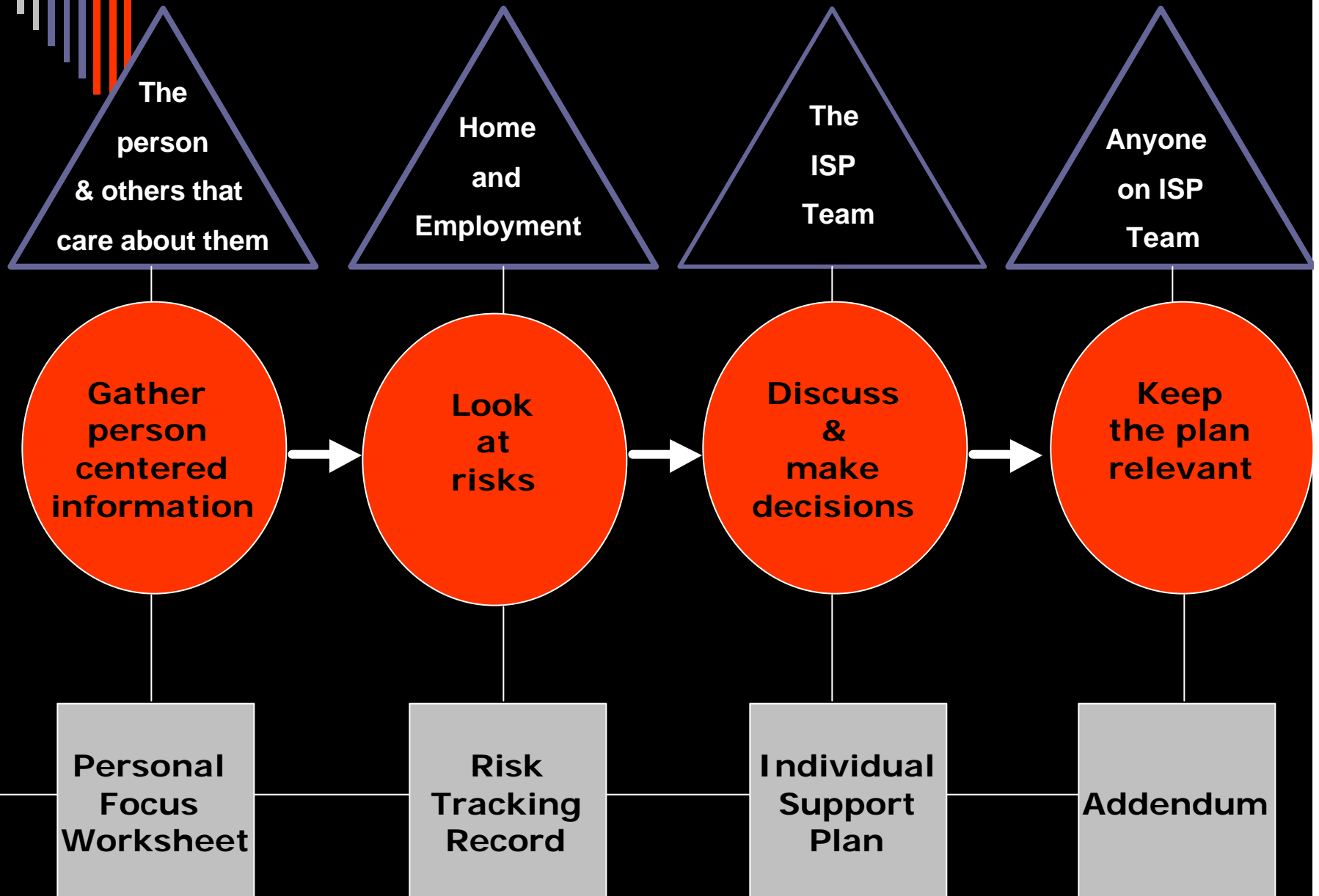


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## What We Want to Accomplish

- ❖ Improve quality of care by coordinating residential and employment planning
  - ❖ Reduce paperwork
  - ❖ Meet CMS quality assurance standards for health, safety and person-focused planning
-

# Oregon's ISP System



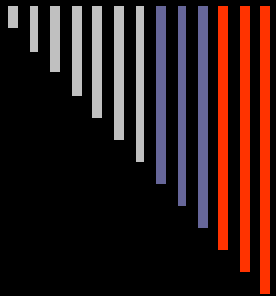
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# Person Centered Information

- ❖ Change process and expectations of how we help people plan for their futures
- ❖ Make sure the person's voice is clearly heard, considered and used in the process of planning





# Personal Focus Worksheet



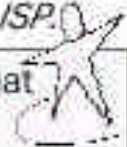
The person's voice

© IFD 2002

## Personal Focus Worksheet

These are things for the person's ISP team to keep in mind as they develop the ISP.

What is written on this page comes only from \_\_\_\_\_ or from people that he/she has chosen to contribute. If \_\_\_\_\_ is not able to speak for him/herself or to choose others that may speak on his/her behalf, then what is written here comes from people that \_\_\_\_\_'s ISP Team or legal representative has chosen as who would best be able to express what \_\_\_\_\_ might say.

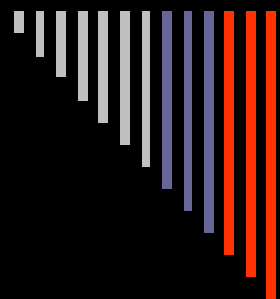


1. List the names of the people that contributed to this page:

Name	Relationship	How Chosen

2. What is important to \_\_\_\_\_? Write it here:





# Personal Focus Worksheet



People that  
care about  
the person

## Personal Focus Worksheet

© SPQ-12102

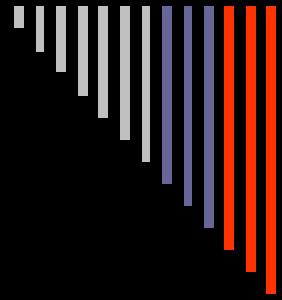
*These are things for the person's ISP team to keep in mind as they develop the ISP.*



What is written on this page comes from people that care about \_\_\_\_\_.

1. What is important to remember for \_\_\_\_\_? Write it here:

# What Makes Sense & What Doesn't Make Sense



SPD 3.15.03

## Personal Focus Worksheet

*These are things for the person's ISP team to keep in mind as they develop the ISP.*



### What Makes Sense

What works? What's going well? What needs to be maintained/enhanced?  
(The upside right now.)

### What Doesn't Make Sense

What doesn't work? What isn't going well? What needs to change? What must be different?  
(The downside right now.)

\_\_\_\_\_'s perspective:

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# History of Risk in Oregon

- ❖ Series of “preventable deaths” occurred
  - ❖ Provider agencies had no formal, systematic way of identifying risks
  - ❖ No supports in place to minimize risks
-

---



# The Risk Tracking Record

- ❖ Consider the ways in which the person's health and safety may be in jeopardy
  - ❖ Align supports that will help to minimize those risks
  - ❖ Identify if those supports interfere with what is most important to the person
-



---

## Risk Tracking Record Format

- ❖ Yes/No question format
  - ❖ Designed to look at risks from multiple angles
  - ❖ Required tasks lead teams to consistent approach to minimize risks
-



# Risk Tracking Record

1. Does this person have a diagnosis of seizures or epilepsy, or take medications for seizures?				
Answer	Tasks	Who	When	Done
<b>Yes.</b>	A. Add risk of <i>Seizures</i> to ISP. Ensure development of Seizure Protocol. Complete B below.			
	B. Has a seizure occurred in the past year? <input type="checkbox"/> Yes → Seizure Protocol must list safety precautions (water, bicycle, etc.). Go to question 3. <input type="checkbox"/> No → Complete C below.			
	C. Has the type or dosage of this person's seizure medication been changed in the past 2 months? <input type="checkbox"/> Yes → Seizure Protocol must list safety precautions (water, bicycle, etc.). Go to question 3. <input type="checkbox"/> No → Go to question 3.			
<b>No.</b>	Go to question 2.			



# Health & Medical Risks

- ❖ Aspiration
  - ❖ Dehydration
  - ❖ Constipation
  - ❖ Seizures
  - ❖ Choking
  - ❖ Diabetes
  - ❖ Ostomy
  - ❖ Injury from food/liquid seeking
  - ❖ Other risks identified by teams
- The Fatal 4**

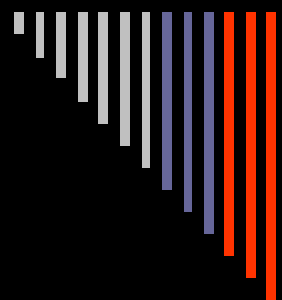


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# Safety & Financial Risks

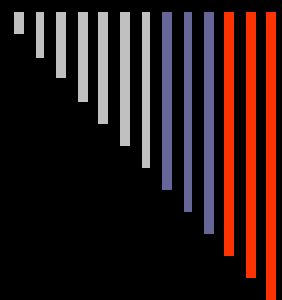
- ❖ **Supervision**
  - ❖ **Assistance with water temperature**
  - ❖ **Assistance with chemicals**
  - ❖ **Fire evacuation**
  - ❖ **Assistance with finances**
  - ❖ **Other risks identified by the team**
-





# Behavioral Risks

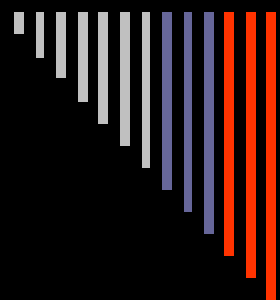
- ❖ Aggression towards self or others
- ❖ Pica
- ❖ Property destruction
- ❖ Running away
- ❖ Mental health condition



---

## Behavioral Risks

- ❖ Illegal use/abuse of drugs or alcohol
  - ❖ Suicidal attempts, gestures, or threats
  - ❖ Unsafe use of weapons or flammable materials
  - ❖ Other risks identified by the team
-

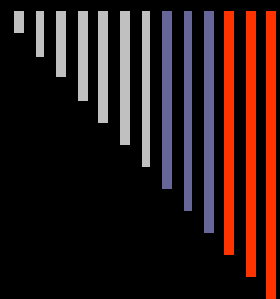


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## The Balancing Act

*Does any part of the support provided  
around the risk(s) interfere with  
what's most important to this person, as listed  
on his/her most recent  
Personal Focus Worksheet?*

---



# The Document Review



Listed below are the documents that tell staff how to support this person around each risk identified. Indicate with a check (✓) in the first column those that apply. Check "Other" for documents used that are not already named in the list. Specify document title when "Other" is checked.

Review each document and answer this question:

Does any part of the support provided around the risk(s) interfere with what's most important to this person, as listed on his/her most recent Personal Focus Worksheet?

When yes, the ISP team must develop an Action Plan to correct or must address as an unresolved issue on the Discussion Record.

Constipation Protocol

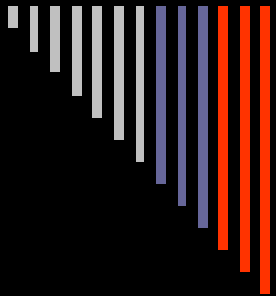
No

Yes → Explain:

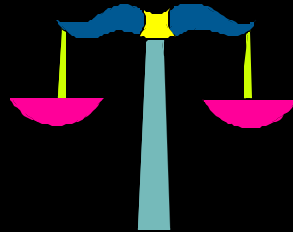
Aspiration Protocol

No

Yes → Explain:



# Individual Support Plan



## INDIVIDUAL SUPPORT PLAN

Person receiving services: \_\_\_\_\_

Does this person have a Legal Representative?  No  Yes, name: \_\_\_\_\_

Meeting date: \_\_\_/\_\_\_/\_\_\_

ISP start date: \_\_\_/\_\_\_/\_\_\_

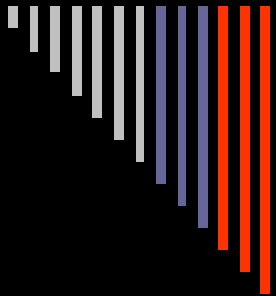
ISP end date: \_\_\_/\_\_\_/\_\_\_

What's most important to \_\_\_\_\_ (from page 1 of Personal Focus Worksheet)

- ★ \_\_\_\_\_
- ★ \_\_\_\_\_
- ★ \_\_\_\_\_

- ★ \_\_\_\_\_
- ★ \_\_\_\_\_
- ★ \_\_\_\_\_






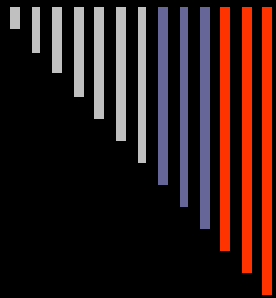


# Action Planning

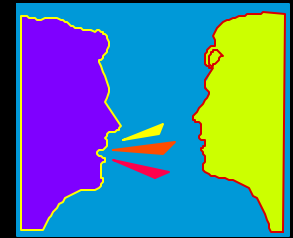
Action Plan

Generated from \_\_\_\_\_

Desired Outcome (how the person's life will be different)				Issue (why this change needs to happen)			
							
Steps that will be taken to reach Desired Outcome	Where:			Who's responsible	How often or date due	Where to record	Notes (use back if more space needed)
	H	W	O				
A: 							



# Discussion Records



SPD 3.15.03

**Discussion Record** - Record of the team discussion that occurs when an issue or disagreement is left unresolved from anyone's perspective. Consider all issues that have arisen during the planning and preparation for this ISP.

Issue
Discussion
Action Plan associated with this issue? <input type="checkbox"/> Yes <input type="checkbox"/> No

Issue
Discussion
Action Plan associated with this issue? <input type="checkbox"/> Yes <input type="checkbox"/> No





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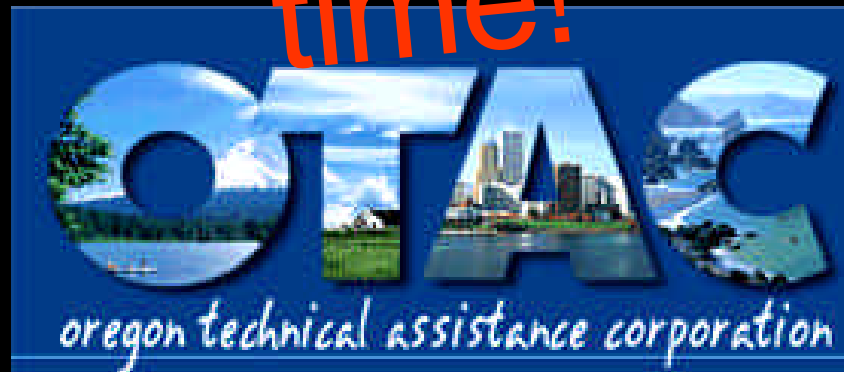
# Statewide Rollout Strategies

- ❖ State broken into regions, one region targeted at a time for training
  - ❖ Provider agencies attend 4-Day training series with partner provider and complete ISP during training
  - ❖ Follow-up technical assistance and quarterly updates offered
  - ❖ Separate agency collecting data to track results of new planning system
-

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Thank you for your  
time!



For more information on the implementation and training of Oregon's New ISP System, contact:

Jean Tuller

[jtuller@otac.org](mailto:jtuller@otac.org)

503-364-9943 x12

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