

# ISP Meeting Agenda

Person's legal name: Paul Kiel ISP meeting date: 10/10/2016

Preferred name: Paul

Based on conversation with the person supported, the team, and/or information gathered in the Person Centered Information Form ([SDS 4115](#)) and the needs assessment, record what Paul and/or team members want to talk about and note the action taken.

**Consider the following:**

- Celebrations and achievements from the previous year
- Review One Page Profile(s)
- Anything Paul wants to talk about at the meeting
- Assessed needs and how Paul wants to be supported
- Any supports Paul needs to more fully participate in planning his/her life, to understand his/her rights or to understand his/her ISP
- Anything that Paul wants support to work toward, change and/or learn
- What others believe is important for Paul to work toward, change and/or learn
- Any items from previous agendas that need to be discussed again
- Briefly review goals from the previous ISP. Were there any barriers that need to be addressed?
- Other items not yet addressed that the team needs to discuss

| Discussion topic   | Action taken/outcome, e.g., desired outcome, issue resolved ( <i>note how it was resolved</i> ), added to Safety Plan, etc. |
|--|---|
| Paul wants to live in his own apartment. His mom will continue to support him and help him to practice skills, but she would prefer he have someone else support him with practicing skills once he moves out. She will continue to assist him with cooking and shopping once he moves out. Paul feels he can keep his own apartment clean but agrees to have a little help with this to make his mom feel assured. He just wants to make sure it is on his terms; he wants to be able to say when and how the person helps him at any time. | Desired outcome and chosen service for Attendant Care added to ISP.   |
| Paul wants to be his own rep payee. He knows he has excellent budgeting and money management skills and doesn't need someone else to take on this responsibility.  | Desired outcome added to ISP.   |

*At the end of the meeting, the SC/PA leads the team to review the finished ISP and support documents.*

This form may contain your personal information. There is some risk someone could steal the information from you when you send this form by email. You may want to mail or fax it if you do not want to take the risk.

You can get this document in other languages, large print, braille or a format you prefer. Contact the Office of Developmental Disabilities Services (ODDS) at 503-945-5600. We accept all relay calls or you can dial 711.