

Person's legal name: John Smith

Date of last update: 06/13/2017

What name does this person prefer to be called? John

Ask John and those close to him what his current priorities are. What are the things happening right now that John wants to strengthen or maintain? Are there issues of concern that need to be addressed?

Seek to understand more about the current priorities by asking follow-up questions when needed.

Record what you learn on this form. The amount of information you record in each topic area will vary depending on John's priorities and how well you know him.

If you don't have information about a particular topic area because it is not a current priority or John doesn't want to discuss it, note that on this form.

## Communication

*How John communicates wants/needs/pain, assistive devices used for communication, accommodations needed, receptive and expressive communication skills, reading/writing skills, opportunities to gain or maintain skills, etc.*

### Person's perspective:

John said he likes talking with his favorite staff (usually) when something is bothering him. John said he talks with people he knows about anything in his life. He does not have any issues with telling people how he feels. He does not like when people hurry him by their words or actions ("no like those people") and he will yell or scream.

### Additional input:

John typically communicates using single words but does use simple sentences, too. He is able to tell you what he wants and needs when given time to do so. He is very patient with others to figure out what he means. He will use different words to help others understand him. He uses some phrases regularly and over time will expect people to understand those phrases such as "those people" [people who scare him] or "cheese" [smile]. Home and work have "familiar phrases" sheets to help others know what they are.

Also, John has a very expressive face. When someone knows John, it is easy to know what he is feeling. When he is joking around (which is often) he will have a big smile and laugh a lot. When he is sick, he will not smile, joke, and usually puts his head down.

## Life in current living arrangements

*Where and with whom John lives, where John wants to live, options for where John can live (including non-disability specific options), planning to live more independently or on his own, looking for a new home or moving out of family home, rents or owns, private room, contribution to household, daily routine, activities at home, hobbies, pets, family, roommates, accessibility throughout home, meal planning, shopping, preparing meals and cooking, cleaning, skills for maintaining own household, modifications in home, safety.*

**Person's perspective:**

John is very proud of his great teeth. He has no cavities. He always brushes his teeth after eating (except at work). He does not like people who are loud. John is a morning person and is usually up (without an alarm) by 6am every day; he may sleep in until 7:30am on the weekend. He makes his own lunch; he always uses cinnamon raisin bread for all sandwiches. He loves raisin bread! (and does not like people making fun of his sandwiches) John helps out around the house. He will help with many things. He will help in the kitchen; he loves to chat with people. He will dust on the weekend; he says this is his favorite chore. He does not like to vacuum; he says it is too loud. He likes to help with dishes but they are hard for him to do because of his short stature. John likes having one DSP that he spends more time with, and right now that is Kevin S. He said he does this because then he has one person who knows more and can help him with anything, and he does not have to explain reasons for things to so many people.

John does not like everyone he lives with. He does not like talking about it but he will avoid one house mate in particular. He wishes he did not have to live with this person. He wants his SC to be aware that if this person ever wants to move, John is all for it. John said he doesn't want to move out, but wishes this person would.

**Additional input:**

John will ask anyone to help him call his family if Kevin is not around. John prefers to call his "white cane," a walking stick. However, he does not like using his walking stick; when asked to use it, he will raise his voice and tell the person to shut up. John has expressed that he does not like living with one particular person in his home. He has told staff that he would rather that person would move, but that he does not want to move for the sake of this person. Staff and SC have tried to help John work through his issues with this person, but John usually doesn't want to talk about it or doesn't want to talk to the person to work it out. They stay away from one another, have spare rooms at opposite ends of the house but can't really fully avoid one another living in the same home.

**Pre-employment and/or work**

*Career goals, developing job skills, interests, job exploration, financial concerns, social security benefits concerns, job development for self-employment or paid work, current job, job satisfaction, workplace safety, childcare needs, co-workers, work routine, work environment, planning for retirement, etc.*

**Person's perspective:**

John is in process of getting a job outside of the workshop (Q Services Inc.). He has gone to the Oregon Commission for the Blind (OCB) for the initial meeting with a rehabilitation counselor but does not have a plan yet. He talks about working in an office. John says that he would feel safe in an office because people are not usually rushing around. He likes the office setting and wants to pursue a job where he can work in an office environment.

John needs some accommodations and tools due to his low vision (legally blind). For example, currently, he needs contrasting colors at his workstation. It is best when a product is white, for example, John works on a table that is black, and vice versa. John asks for help when he needs it.

**Additional input:**

John really likes to stay busy. He does say "scared" and "hurt" when talking about very busy work environments. We think this is why he has talked about office work because office jobs have more people sitting and not rushing around. He also has developed many skills for working in an office through his work at the sheltered workshop and work experiences. He is afraid to be hit in his chest (blow to his chest, even if an accident) as this would cause a health emergency for him. John tells you "no like" or "not well" when he doesn't like a job or is not feeling well; John communicates great about all aspects of work and what he needs.

John is very social and needs a job where he can interact with people some while working but definitely at breaks and lunch. He loves chatting with people, so a job where this isn't a problem is ideal. John does know the social cues and phrases, and his need to talk with people does not get in the way of his work. You can make a simple statement if you (or he) need to get back to work; he goes with the flow in these situations.

## Employment-related skills

*Interests, hobbies, talents, strengths, prior work experience, education, reading and writing skills, communication skills, computer skills, organization, timeliness, reliability, areas of focus if still in school, etc.*

John can answer a phone. He cannot dial a phone unless it has large keys. He has good dexterity but not with very small objects; these are hard for him to see. John can put labels on envelopes with the right fixture to know where to place the label, and the ability to have them “come off” in case they are crooked. When he has the “system” down for any job, he does it with high quality. John is VERY friendly and everyone likes him; he is easy to get along with. His computer skills are not very strong, mostly because he has not had the opportunity.

When he has used the IntelliKeys (large numbers/letters) and now, he uses EZSee (by DC) keyboard, he can do things on the computer such as basic writing of a letter, basic game playing, or find one internet site (not surfing the web); he has never done a spreadsheet. John knows the alphabet and basic words. John is a morning person, and as long as transportation works out, he is very dependable and on time. He says he likes working in the mornings.

## Employment-related preferences

*Hours, time of day, days of week, mornings, evenings, pay, location, environment, people and coworkers, noise level, distance from home, type of job, type of tasks, pace, etc.*

John likes working in the morning. He could start as early as 7:30 am but wouldn't want to start after 10am. Working weekends would not work for John; he spends a lot of time with his family on Saturdays and he goes to church on Sunday. When talking about pay, he just wants to know that he is getting paid, and is able to save money to go to Hawaii. He would like to work close to home as he knows transportation can be an issue if further away. John would like to work in a predictable work environment that is clear when people are coming and going. John wants to work with coworkers who are willing to communicate when they are coming and going (specifically when they are in or near John's space). John is social, friendly, and likable, the opportunity to work around other people would be best. John is willing to try new jobs, and will ask questions; he will go slow at first because he wants to get any job/task correct the first time (or as soon as possible).

## School and life-long learning

*Things John would like to learn, classes interested in taking, continuing education, personal or professional development, accessing school options, graduation preferences and diploma options, transition, etc.*

### Person's perspective:

John said that he is not interested in continuing education classes right now. He said if he finds something he is interested in that he would let someone know. John graduated high school (Springfield High) with a modified diploma. He has stayed friends with a few of his high school friends.

### Additional input:

John has taken a few continuing education classes in the past. He took a cooking class; he didn't like

it too much. He took an art class which he really liked; he was able to talk more during the art class.

## Community and social life

*Recreation or leisure activities, community activities, concerts, festivals, churches, accessing community locations, shopping, visiting friends and family, social networking, clubs, social events, volunteer work, safety, opportunities to develop social skills, opportunities to contribute to the community, transportation, etc.*

### Person's perspective:

John's family is very important to him. He makes plans with them regularly. Phil is his best friend and they go to movies together as well as many other things. John does call people on the phone but needs help to dial; he usually just wants someone there to make sure he dials correctly. He has his own phone with large keys. Church is very important to John. He attends United Methodist Church on Olive Street. He has gone there for 15 years. He likes to take cookies on special occasions. He goes to Wednesday evening services every week. The minister of his church is named Sherman; John calls him "Sher-Sher" but it sounds like "sure-sure"...this is a joke between them. John's ultimate favorite place in the world is Hawaii. He saves money every year to go. He says "hula" for Hawaii, and has a calmer demeanor when he comes back from his vacation.

### Additional input:

John's social life is very robust and he maintains this lifestyle (with some supports) very well. John would probably want to join more clubs (anything social) but he doesn't have a lot of time right now as he has so many family events and time with friends.

## Relationship map

	People who are important to John:	Others in John's life:
Family	"Mom" (Nancy Smith), "Papa" (Mark Smith)	Kevin (nephew), "Pea" (short for Peter, nephew), and Fran Johnson (sister)
Friends	Jasmine Jones (friend), Phil Brady (best friend)	Bradley Johnson (brother-in-law), Ester and Diane (Church Friends)
People at work, school or in the community	Ingrid Moore (employment coordinator)	Mark Lang (employment supervisor) Susan Deal (job developer)
People paid to provide support	Kevin Squirt (DSP Lynn St), Molly Reynolds (DSP Lynn st), Billy Burke (DSP Lynn St)	Michelle Manor (house managers)

## Relationships

*Anything about current relationships John would like to change, making friends, opportunities to make choices about who is involved in planning at home and at school, connections with distant friends and family, personality traits of favorite people, traits or people to avoid, etc.*

### Person's perspective:

John talks about spending more time with Phil. He sees his mom at least twice a month. He goes to her house for the weekend. He will call her when he wants throughout the week. John sees his dad about every other month. Mark lives in Aberdeen, Washington and travels a lot. He goes to the movies with Kevin and Pea (nephews), and either Fran or Bradley comes along. He has a few friends



from high school that he still keeps in touch with, usually an occasional letter but mostly by phone calls. John does not want to be around people who talk bad about things he likes such as WWE wrestling. He also does not like people talking to him like a child or touching his head (don't pat him on the head).

#### **Additional input:**

John hasn't talked about anything specific with spending more time with Phil; would need to pursue what John means. John likes to be around people who have a good sense of humor. At home, we have been trying to work with John on sending emails to friends; this is going slow as there are lot of new things for him to learn.

## **Characteristics of people who best support this person**

*Personality characteristics, any personality traits to avoid, specific skills, education or training needed, gender, physical attributes, strengths, interests and hobbies, specific people already identified.*

#### **Person's perspective:**

Some other characteristics John wants in someone who will support him.

- Someone who does not scare John --by either "boo" around the corner or by moving too quickly (John sometimes thinks he will get hurt when people are moving too fast around him)
- Someone who will sit and listen to him (he processes his problems verbally)
- Someone who doesn't mind holding his hand to cross streets
- Someone who has a positive attitude. John does not like people who are negative or complain a lot.

#### **Additional input:**

John needs someone who can joke around but not sarcastically. John likes if people can talk about things he is interested in such as WWE wrestling (he says "Hulk Hogan" for most wrestlers but does know the current names), current movies, or Hawaii (where he loves to take vacations).

John needs someone who gives him enough time to do things on his own. He is legally blind and it can take some time to do some tasks. He needs someone who will not be annoyed while waiting.

## **Health and wellness**

*Relationships with medical professionals, developing skills for taking care of himself, medical equipment, things that make medical appointments successful, skills for making and keeping medical appointments, physical fitness, sports, preventative care, health screenings, nutrition, nursing services, occupational therapy, dental care, planning for end of life care, advance directive, etc.*

#### **Person's perspective:**

John does not like when people he loves die. When he says "Joseph" he is talking about a friend who died when he was 20; he cries when he misses him and others who have died. John likes walking to the mailbox (his neighbors) down the street when he gets home from work every day unless it's too icy or snowy in the winter; he doesn't mind the rain. John is very proud to have no cavities. He never minds going to the dentist (or doctor either). John likes to hold hands with the person he is walking with; he does not want/like to use his walking stick. He does not need to hold hands the whole time walking but does when he gets to curbs or a lot of lines in a parking lot (for example). John likes corn dogs!

**Additional input:**

With John's recent health concerns, Nancy (mom) has finally begun talking about end of life planning; she agreed to John getting a burial plan. When John is walking around, he sees curbs and numerous yellow lines as barriers and needs help to cross them. John needs a low-salt diet because he is beginning to get arthritis in his ankles. We have found that John does like the tofu corn dogs which are significantly less in sodium than regular ones; this way he can have them when he wants but they will not adversely affect his health or prescribed diet. John eats very slowly and knows what foods are easy for him to chew (or not). He doesn't like eating chicken unless ground or cut into dime sized pieces (and even then, he's not a huge fan of chicken). He does not have a chopped diet order because John knows how and does this when needed. He also is cautious trying new foods. His mom said it was from when he was a kid and had an issue; she couldn't remember the details.

John cannot receive a blow to his chest because he had heart surgery as a child and now, has congestive heart failure.

## Financial life

*Budgeting, managing money, using cash, counting change, planning for the future, special needs trust, benefits, risk of exceeding resources, managing credit, education, controlling money, etc.*

**Person's perspective:**

John knows he loses his wallet at least every year (if not more), so he doesn't carry a lot of money in it. He is responsible to carry large sums of money if he has pockets or can put it in his jacket. John doesn't usually want a lot because Hawaii is his primary budgetary concern. John likes to go out to eat and to the movies regularly.

**Additional input:**

John could do more of his own budgeting, so he really knows what it takes to go to Hawaii. His family will chip in if he hasn't saved enough but staff are not sure John really knows how much that is sometimes. With a better job, he will be able to pay for it all by himself. Nancy has agreed to work with John on putting some money into a burial plan; she did not want to talk about this until recently. Nancy and Mark both have been encouraging him to budget more money for Hawaii, and talking about the true costs in a way he understands.

## Protection and advocacy

*Self advocacy skills, skills for saying "no" to things that are unwanted, making choices and decisions, opportunities to gain or practice skills, protection from exploitation, participating in self-advocacy groups or activities, personal privacy, any supports that interfere with privacy, identity protection, etc.*

**Person's perspective:**

John has no issues with advocating for himself. When someone has bothered him, he usually talks with someone he trusts before saying something to the person. John verbally processes information, so giving him time to do this is important. Overall, John is a very happy person and likes his life; this is what he says when you ask him.

**Additional input:**

John likes to talk with people, and when he is having an issue, he will wait until people have gone to their rooms to talk with staff. He wants to just talk and talk about an issue; he figures out his own solution typically. You have to give him time to verbally process any situation. When he wants help with the decision, he will ask.

## Cultural considerations

*Family, traditions, stories, faith, heritage, rituals, celebrations, holidays, food, clothing, books or literature, items, planning for end of life, etc.*

### Person's perspective:

John's parents grew up in Hawaii. He loves to hula, go to pig roasts, and be at the beach. His family went to a Lutheran church when he grew up, and he currently attends United Methodist Church (on Olive St). John chose the church he currently goes to; his family is supportive. Christmas is his favorite holiday. John likes to decorate his house and pretend to be Santa Claus.

### Additional input:

When John is Santa Claus, he does need reminders to not “ho-ho-ho” to everyone in his house (or at work) all day long as they have asked him to not say it all the time.

## Sexuality and/or intimate relationships

*Education, family planning, privacy, anything that interferes with privacy, opportunities to express sexuality, dating, places and events to meet potential partners, online dating, safety considerations, etc.*

### Person's perspective:

John gets embarrassed when talking about having a girlfriend. He will talk with people he likes about this but not most people. He is very private about this.

### Additional input:

John occasionally will talk about wanting a girlfriend but then will get “shy” and not want to talk about it. He spends time with a few women when he goes out places but has not dated anyone recently. His parents said that he had someone he really liked in high school, and they went places together for a while, but his parents think he is too much of a jokester sometimes...and woman are a bit put off by that. From staff, they think he just hasn't found the right person. John would need someone who understands some of his health issues and do not try to do too much at one time.

## Mental health

*Concerns about mental health; relationship with any mental health professionals; availability of helpline or other resources for John, family or supporters; things or people that make appointments better; effective strategies; accommodations needed; skills for making health care decisions; support to make informed health care decisions, etc.*

### Person's perspective:

No mental health concerns

### Additional input:

No mental health concerns

## Behavioral health

*Concerns about behavioral health, relationship with any behavior professionals, availability of helpline or other*

*resources for family or supporters, effective strategies, etc.*

Person's perspective:
None
Additional input:
John does yell or scream when he is scared that someone might hurt him. This happens if someone is walking too fast by him. This does cause some people to react as it is startling to hear someone scream. This does not happen very often and does not cause a big issue; there is no need to provide formal supports.

## Transportation

*To/from work, school, activities, learning how to get around independently, learning the bus routes, getting a driver license, vehicle with lift, safety concerns, etc.*

Person's perspective:
John does not like to walk long distances. He prefers taking a bus to/from work. He likes family taking him to other places.
Additional input:
Currently, John does not arrange his own transportation. This is something he could do. John has an expectation that other people will provide him with rides and sometimes forgets to ask if it is arranged in advance. This has caused some issues in the past when he wanted to do something but didn't arrange it ahead of time, and he either had to be late or miss out on something. He has been working on telling someone he needs rides or arranging it with family ahead of time because as he says "hate late" and he does not like to miss out on things (especially if he is looking forward to it).

## Assistive devices (AD) or technology (AT) needed to increase independence, reach personal goals or lessen the need for other paid support.

*An assistive technology discussion guide is available to help research options, explore funding, acquire devices or technology, and establish monitoring and maintenance for AD/AT already in place.*

*Wheelchair, scooter, walker, cane, crutches, prosthetic device, and orthotic device, helmet, emergency alert devices (LifeAlert, MedicAlert), alternative or augmentative communication (AAC) device, iPad/tablet, phone, GPS-enabled device, communication chart, audio reader, alternate keyboards, talking photo album, screen reader, screen magnifier.*

Person's perspective:
John is open to most adaptive equipment; he does not like his walking stick and refuses to use it most of the time. When there are tools to help with his job, he is very open to trying them and working to find the right one. When he uses the EZSee keyboard, this is very helpful to be able to do tasks on the computer.
Additional input:
Due to John's low vision and short stature, he needs various tools to help him be more independent on the job and at home. Once he learns to use a tool, he likes using them and becomes more independent in whatever task it is. When he gets a new job, new devices/tools will need to be researched. EZSee keyboard works well for John.



## **Environmental modifications** needed to increase independence, reach personal goals, or lessen the need for other paid support.

*Research options, explore funding, acquiring modification, establish monitoring and maintenance for modifications already in place.*

*Padded corners and edges, widened doors and hallways, smooth floors (no carpets), roll-in showers, lowered or raised sinks, counters and cabinets, ramps, lifts (hydraulic, manual or electric), hand rails and grab bars, automatic or manual door openers, doorbells, specialized electrical or plumbing systems, heating and cooling adaptations, emergency indicators such as strobe-light fire or carbon monoxide detectors, bed shakers, etc.*

<b>Person's perspective:</b>
John just wants to make sure that his environment is safe so he won't trip and fall and hit his chest.
<b>Additional input:</b>
John needs to be in an environment where he will not receive a blow to his chest; this is very serious. When he gets a new job, he will need help in making any needed accommodations to the job site. He will also need orientation and mobility training to help him get to work as well as navigating the building. It is hoped that staff from Oregon Commission for the Blind will assist him with both of these areas. This will be coordinated once John gets a job.

## **Hopes and dreams**

*Personal goals, career goals, education goals, vacations to take, purchases to make, things to achieve now or in the future, things to do or try, experiences to explore, marriage and children, long- and short-term.*

<b>Person's perspective:</b>
John wants to work in an office because he thinks it will be a calmer environment. He wants to make sure he always has enough money to go to Hawaii every year (at least once if not more). John does not talk much about changing where he lives. He states that living at 1863 Lynn Street is safe for him right now, and did not want to talk about anything else related to living somewhere else.
<b>Additional input:</b>
John does not like talking about changing places to live. Some DSP and employment staff think he could live in his own apartment but would need a roommate because he is so social and likes talking with someone regularly. John's SC gave him information about the settings in which he can live in a way that did not upset him, while still honoring his rights. SC told John that she needs to give this information to everyone so that John knew he would not be made to move but had choice if interested. John would do best in a work environment that is slower paced (such as a place where people are not moving quickly near John).

## **Other individualized planning documents**

*Are there others to partner with for services coordination? Check with the family/guardian for other assessments/ service plans the person may have to help the DD system better coordinate/maximize supports and services for the person and family/guardian. Examples include Essential Lifestyle Plan (ELP), Personal Futures Plan, and also documents from school such as Summary of Performance, Individual Education Plan (IEP), Individualized Family Service Plan (IFSP), Individualized Learning Plan (ILP) or a 504 plan.*

List other available documents that can be referenced for more information:  
John's Individual Plan for Employment (IPE) from the Oregon Commission for the Blind is not done yet, but will be within the month.

## Contributors to person's perspective

Name	Relationship
John Smith	Self

Did anyone else contribute their perspective on behalf of John?

☒ Yes ☐ No

Michelle Manor and Ingrid Moore	House Manager and Employment Coordinator
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## Contributors to additional input

Name	Relationship
Michelle Manor	House Manager
Billy Burke	DSP at Lynn St
Molly Reynolds	DSP at Lynn St
Kevin Squirt	DSP at Lynn St
Ingrid Moore	Employment Coordinator
Susan Deal	Job Developer
Nancy Smith	Mom
Mark Smith	Dad

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# Risk Identification Tool

Person's legal name: John Smith

Date of last update: 7/5/2017

## HEALTH AND MEDICAL

### 1. Aspiration (*check all that apply*):

Risk present? ☐ Yes ☒ No ☐ History ☐ SC/PA follow-up

- ☐ a. Diagnosis of dysphagia, or has been identified to be at risk for aspiration by a qualified medical professional
- ☐ b. Ingests non-edible objects, places non-edible objects in mouth, or has a diagnosis of pica
- ☐ c. Has a feeding tube
- ☐ d. Diagnosed with gastroesophageal reflux (GER) and the physician has identified the person at risk of Aspiration
- ☐ e. Complains of chest pain, heartburn, or have small, frequent vomiting (*especially after meals*) or unusual burping (*happens frequently or sounds wet*) and the physician has identified the person at risk of Aspiration
- ☐ f. Someone else puts food, fluids, or medications into this person's mouth

***If the person experiences any of the following symptoms, a current evaluation by a qualified professional is expected to determine if the person is at risk of aspiration. (Check all that apply)***

- ☐ g. Food or fluid regularly falls out of this person's mouth
- ☐ h. Coughs or chokes while eating or drinking (*more than occasionally*)
- ☐ i. Drools excessively
- ☐ j. Chronic chest congestion, pneumonia in the last year, rattling when breathing, and persistent cough or frequent use of cough/asthma medication
- ☐ k. Regularly refuses food or liquid (*or refuses certain food/liquid textures*)
- ☐ l. Needs his/her fluids thickened and/or food texture modified
- ☐ m. Eats or drinks too rapidly

Evaluation results: ☐ Risk present ☐ No risk ☐ Other (*see comments*)

Comments:

**2. Dehydration (*check all that apply*):**

Risk present? ☒ Yes ☐ No ☐ History ☐ SC/PA follow-up

- ☐ a. Asks for or routinely requires assistance to get something to drink
- ☐ b. Receives fluids through a tube
- ☐ c. Required intravenous (IV) fluids due to dehydration in the past year

***If the person experiences any of the following symptoms, a current evaluation by a qualified professional is expected to determine if the person is at risk of dehydration. (Check all that apply)***

- ☐ d. Takes medication known to cause dehydration and this person would not recognize or communicate if he/she were dehydrated
- ☐ e. Coughs or chokes while eating or drinking (*more than occasionally*)
- ☒ f. Drools excessively
- ☐ g. Chronic chest congestion, pneumonia in the last year, rattling when breathing, and persistent cough or frequent use of cough/asthma medication
- ☐ h. Regularly refuses food or liquid (*or refuses certain food/liquid textures*)
- ☐ i. Needs his/her fluids thickened and/or food texture modified

Evaluation results: ☒ Risk present ☐ No risk ☐ Other (*see comments*)

Comments:

**3. Choking (*check all that apply*):**

Risk present? ☐ Yes ☒ No ☐ History ☐ SC/PA follow-up

- ☐ a. Ingests non-edible objects, places non-edible objects in mouth, or has a diagnosis of pica

***If the person experiences any of the following symptoms, a current evaluation by a qualified professional is expected to determine if the person is at risk of choking. (Check all that apply)***

- ☐ b. Eats or drinks too rapidly

☐ c. Stuffs food into his/her mouth

☐ d. Coughs or chokes while eating or drinking (*more than occasionally*)

Evaluation results: ☐ Risk present ☐ No risk ☐ Other (*see comments*)

Comments:

**4. Constipation (*check all that apply*):**

Risk present? ☐ Yes ☒ No ☐ History ☐ SC/PA follow-up

☐ a. Takes routine bowel medications for constipation or has taken “as needed” (prn) medications for constipation more than two times a month within the past year (*do not include fiber*)

☐ b. Required a suppository or enema for constipation within the past year

***If the person experiences any of the following symptoms, a current evaluation by a qualified professional is expected to determine if the person is at risk of constipation. (Check all that apply)***

☐ c. Has had more than one episode in the past year of complaining of pain when moving his/her bowels

☐ d. Has had more than one known episode of hard stool in the past year

☐ e. Takes a medication that causes constipation and this person would not recognize or communicate if he/she were constipated

Evaluation results: ☐ Risk present ☐ No risk ☐ Other (*see comments*)

Comments:

**5. Seizures (*check all that apply*):**

Risk present? ☐ Yes ☒ No ☐ History ☐ SC/PA follow-up

☐ a. Has a diagnosis of seizures or epilepsy and/or had a seizure within the past five (5) years

☐ b. Takes medication to control seizures and/or has taken medication to control seizures within the past five (5) years

☐ c. Has had a seizure in the past year. Address safety precautions e.g. driving, water safety, bicycle use, safety equipment, etc.



Comments:

Other health risks	Yes / No / History	SC/PA follow-up
<b>6. Unsafe medication management:</b> At risk of serious harm as a result of misuse of medication, medication overdose, frequently missing a medication dose, or lifestyle choices that conflict with medications ( <i>diet, supplements, alcohol, other drugs or medications, etc.</i> )	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>7. Complications of diabetes:</b> Has a diagnosis of pre-diabetes or diabetes	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>8. Complications associated with</b> ( <i>list type of tube or ostomy</i> ):  Has an ostomy or tube, such as a urinary catheter, colostomy, etc.	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>9. Unreported pain or illness:</b> Does not report or is unable to describe pain, signs of illness, or where it is located	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>10. Lack of access to medical care:</b> Transportation, geographical, financial, cultural, or other ( <i>non-behavioral</i> ) reasons exist that prevent medical care	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>11. Injury due to falling:</b> Needs support to avoid an injury due to falling. Consider risk due to mobility or transfer support needs	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>12. Other serious health or medical issues:</b> Consider any other important, serious health or medical issues. List specific additional risk(s): Congestive Heart Failure (CHF); Injury due to blow to the chest	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<p>#11: John is at great risk if he falls forward or receives a blow to his chest. John can safely fall on his bottom without injury to chest.</p> <p>Comments: #12: John was diagnosed with CHF on 3/15/89 by Dr. Jones; information is in his medical archive file. Information provided by M. Manor 7/5/17</p>		

## SAFETY

Risk	Yes / No / History	SC/PA follow-up
<b>13. Water temperature safety:</b> Needs any support to adjust water temperature to avoid scalding	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>14. Fire evacuation safety:</b> Needs any assistance to evacuate when a fire or smoke alarm sounds	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>15. Household chemical safety:</b> Needs any support to avoid serious injury from household chemicals	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>16. Vehicle safety:</b> Needs any assistance to remain safe around traffic, while getting in or out of a vehicle or while riding in vehicles	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>17. Court-mandated protection:</b> <b>Someone else</b> has a court-mandated condition or restriction against them to address this person's safety (e.g. <i>protective orders or restraining orders to keep this person safe</i> ). If yes, list court order and date:	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>18. Significant risk of exploitation:</b> Evidence, signs, or circumstances of significant increased risk of abuse or exploitation	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>19. Enters into contracts that he/she may not be able to complete:</b> Consider the person's capacity to make an informed decision about contracts or agreements he/she enters into.	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>20. Safety and cleanliness of the residence:</b> Conditions within the residence may lead to injury, illness, eviction, or significant loss of property.	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
<b>21. Other safety issues:</b> Consider any other important, serious safety issues at home or in any other setting (e.g. <i>workplace equipment, bullying, harassment</i> ). List specific additional safety risk(s): New tool use	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
Comments:		

## FINANCIAL

Risk	Yes / No / History	SC/PA follow-up
<b>22. Potential for financial abuse:</b> Complaints or evidence of significant increased risk of financial exploitation (e.g. <i>provider organization staff or Foster provider handle the person's money, frequently loans money or property to others, bills are unpaid, etc.</i> )	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> History	<input type="checkbox"/>
Comments:		

## MENTAL HEALTH

☒ No risk identified in this section (*skip to next section*)

## BEHAVIOR

☒ No risk identified in this section (*skip to next section*)

## EVALUATIONS

Risk(s)	Type of evaluation	Evaluation date	Has condition changed since evaluation?	Where evaluation is kept
Dehydration	conversation with PCP	5/24/2011	No, evaluation is current.	Dr's Visit Form kept in Medical File

## CONTRIBUTORS

Name	Title/relationship
John Smith	Person receiving services
Michelle Manor	House Manager
Ingrid Moore	Employment Coordinator

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# ISP Meeting Agenda

Person's legal name: John Smith

ISP meeting date: 08/30/2017

Preferred name: John

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 John 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 John wants to talk about at the meeting
- Assessed needs and how John wants to be supported
- Any supports John needs to more fully participate in planning his/her life, to understand his/her rights or to understand his/her ISP
- Anything that John wants support to work toward, change and/or learn
- What others believe is important for John 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.
Celebration: John has had an initial meeting with VR and says he's ready to work in an office. John also took another trip to Crater Lake National Park.	No action needed
John's created a One Page Profile with John at work (Vocational provider site), using the IntelliKeys keyboard.	John has the ISP One Page Profile for home, and another for work.
John goes to Hawaii at least once every year. He helps out a bit with budgeting for these trips, and even though his family helps out, he would rather pay for the trip himself. Staff thinks that John could be more involved with budgeting, knowing what it completely costs and how much he needs to save each month. This will help with a better idea of what it takes, and gain more money management skills.	<b>Goal related to saving for his trip.</b> <b>Staff will support John by showing him what the total cost for the trip is, what amount he will have of his own money after saving at the current rate he saves, and what the difference is that his family chips in.</b>

<p>John wants a job in an office. He needs a job in an environment that is supportive of him not being rushed or having people rush by him quickly without saying anything. He can answer a phone but cannot dial without an assistive technology as he is legally blind. He went to the School for the Blind for high school, and has many skills from that education.</p> <p>John knows that he cannot receive a blow to his chest. He wants a safe work environment, where this is not a big issues. It will be important that the people working with John on his employment goal know what works best for him so that he will be set up for success. He likes working with people who understand his communication, who aren't too loud or sarcastic, and who are willing to listen to him. John would like to start work in the mornings (no later than 10am, 7:30am is okay). He is a morning person and gets up around 6am daily. He makes his lunch for work each day, upon coming home from work. He will be on time and ready to work as long as transportation is reliable.</p> <p>John wanted to talk about his teeth. He is very proud of them because he takes really good care of them and sees the dentist regularly. John showed everyone his teeth. He has a great smile.</p>	<p>Goal for John to find a job. He is currently working with OVR\$ to find a job. Those supporting John, including his Services Coordinator, will help him communicate what his preferences are around employment, what his support needs are, and what works best for him.</p>
<p>It is really important for John to keep up his social life both at church and with his friends. He wants staff to continue to support him to call friends and help him with these connections by providing transportation and supporting him to cross streets when necessary, and other things as needed depending on the activity. John likes to be on time and to take part in social activities with his family and others.</p> <p>Sometimes he doesn't let staff or his family know in advance when he needs a ride somewhere. Then, he is very disappointed if he is late or misses out. Staff has encouraged John to take more responsibility for scheduling rides in advance, which he is working on. John also mentioned that he wants to have more time with Phil.</p>	<p>John will continue to be more proactive about asking for rides in advance. Staff will continue to encourage him to schedule rides in advance.</p> <p>Staff and others close to John will talk with John more about what he means when he says he wants more time with Phil and take action as John directs.</p>



Protocols did not need updating but the Safety Plan was updated. The team decided that even though John's evaluation showed no signs of dysphagia or risk of aspiration, the protocols in place for this were still appropriate due to other health issues. These protocols are not interfering with anything important to him and the team feels they are keeping him safer. John excused himself at the end of his meeting and his SC and group home manager finished this conversation.	Staff will continue following all current and updated protocols
John was made aware of his rights; they were explained to him in a way he could clearly understand. He was also given a copy of his rights in written form. John was also given information on how to make complaints, who he can complain to, and how to request changes to his plan, services coordinator, living situation, etc.	No further action needed
It was brought up from Michelle that John could live in a downstairs apartment with his best friend Phil. John says he feels safe where he lives and would rather not talk about it at this time.	Services Coordinator (Carrie Jones) will follow up with John.
John always likes to have his ISP meetings at his mom's house. This year, due to scheduling conflicts, most of the team was not available on the same day as his mom. After talking to John about this scheduling conflict it was decided to have the meeting at his home. He wants the team to schedule meetings well in advance in the future to make sure they can all do it at his moms.	SC added information in Comments on the Acknowledgments page to show that John prefers to meet at his mom's for meetings and made a compromise this time, but would rather not have it happen at home in the future.

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

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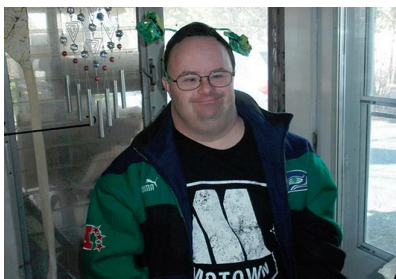
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## John Smith's **ONE PAGE PROFILE for work**

### What people like & admire about me

- Easy to get along with
- Funny (in a great way)
- Interesting
- Open-minded
- Adventurous



### What's important to me

- I like to spend time with my family.
- I liked being around people with a good sense of humor
- Staying busy. I like work.
- Doing my favorite works tasks. It helps me do task "not so like"
- John said he likes working around people who are nice.
- John does not like to be rushed when eating.
- I don't like being rushed.
- I love anything about wrestling or WWE!

### How best to support me

- John talks in either single words or simple sentences. If you don't understand him, he will change what he says to help you understand him.
- John doesn't like people to rush him or push him, even joking, he will yell or scream.
- When John says he has corn dogs, he really is eating tofu dogs; no need to say anything about his diet.
- He is very social and likes to joke around but knows when it is time to "get to work."
  - If you have to cross streets or be somewhere with yellow lines, John prefers to hold hands with someone he likes. He doesn't like using his walking stick.
- He needs contrasting colors at his work station. If he is working with white envelopes, a brown or black desk (or paper on top) is needed for him to see the product



# Individual Support Plan (ISP)

Person's legal name: John Smith

Preferred name: John

Plan effective dates: 08/01/2017 – 07/31/2018

## One page profile for: Home

### What people like and admire about John:

- \* John is very social and likes parties.
- \* He is very helpful.
- \* John enjoys joking around.
- \* He's up early and ready to have a great day--always a smile on his face!
- \* Everyone admires that John has great teeth--he has no cavities!
- \* John is just plain fun to be around and chat about anything.
- \* John knows what he wants and isn't afraid to ask!



### What is important to John:

WWE! Hulk Hogan!  
I love talking with Papa (dad) on the phone. I do this a lot.  
I really like spending time my family.  
I enjoy going to the movies with my mom.  
Kevin and Pea (nephews) - like playing games (video)  
I like Christmas, and dress up like Santa.  
Eating corn dogs and hot dogs.  
Not to be rushed by "those people."  
Not being around people who are loud and sarcastic  
Having people around who listen to him and like to chat  
John likes people with a good sense of humor.

### How to best support John:

John talks in either single words or simple sentences.  
When he's scared, he may yell or scream.  
He dislikes chicken. It's really hard for him to chew.  
He likes holding hands to cross the street and around vehicles  
because he does not like using his walking stick. When there are  
yellow lines, he thinks they might be a black hole. Let him know  
how he needs to walk near them.  
Be aware of Johns health and safety needs



## Desired outcomes

**Desired outcome:** John maintains his robust social life, doing the things he enjoys with people he has fun with and cares about, and increasing his independence with arranging activities because he has asked for this support.

**What supports this outcome?** Residential Services and Informal Supports

Key step/goal	Who is responsible?	Timelines	Where to record progress	Additional implementation strategies expected?
1 John continues to get support from staff to contact friends, especially Phil, and family as he requests.	John, PDQ Res. Svs. staff, Friends and Family	Currently taking place and expected to continue throughout the ISP period	PDQ Activity Tracking Sheet	PDQ Action Plan in place
2 Staff will also support John with rides as needed, and help him arrange LIFT ride for certain activities.	John, PDQ Res. Svs. staff	Currently taking place and expected to continue throughout the ISP period	PDQ Activity Tracking Sheet	PDQ Action Plan in place
3 John will work on being more proactive with requesting rides and the supports he needs to maintain his relationships and doing his favorite activities.	John	Currently taking place and expected to continue throughout the ISP period	PDQ Activity Tracking Sheet	PDQ Action Plan in place
4 John will work with staff on his calendar of activities with friends, especially Phil, and family. He will add when transportation is needed to his calendar, using a picture that works for him.	John, PDQ Res. Svs. staff	Just beginning and expected to continue throughout the ISP period	PDQ Learning Log	PDQ Action Plan developed by 8/10/17

**Desired outcome:** John takes a trip to Hawaii.

**What supports this outcome?** Residential Services, Informal Supports

Key step/goal	Who is responsible?	Timelines	Where to record progress	Additional implementation strategies expected?
<b>1</b> John continues to save money for his trip, by going to the bank to make deposits into his "vacation" savings account.	John, PDQ Residential Services staff, and Family	At least once a month until June 2017	PDQ Activity Tracking Sheet	PDQ Action Plan to be developed by 08/10/2017
<b>2</b> John spends time with his mom and staff on budgeting for his Hawaii trip.	John, PDQ Residential Services staff, and Family	One time per months with staff and mom, separately	Financial document with review comments	PDQ Action Plan to be developed by 08/10/2017
<b>3</b> Once John has a different job, he will find out if payroll deductions to savings is possible.	John, PDQ Residential and Employment provider	Once in job, within first month of hire	Pay stubs	None at the moment

## Career Development Plan (CDP)

**Oregon is an “Employment First” state:** Oregon believes with the right supports, everyone can work and there is a job for everyone. Everyone has the right to work in the community. See the “[Employment Discussion Guide](#)” for ideas about the employment conversation, which must occur at least annually.

Employment services are not tests people have to pass but resources people can choose. **To receive an employment service, a person must have a goal of at least exploring competitive integrated employment, also known as individual, integrated employment.**

### Working-age adults

Highest education level completed to date: High school - modified or alternate certificate

Status with VR:    ☒ Currently receiving VR services    ☐ Wants a referral to VR    ☐ Other/not applicable

Notes: John was referred by VR to the Oregon Commission for the Blind

**Describe John’s current employment status and what he wants to do now by selecting A or B:**

☒ **B.** Currently **not working** in competitive, integrated employment or small group employment and chooses to (*check all that apply*):

- ☒ Get competitive, integrated employment for 25 hours per week
- ☐ Get small group employment for \_\_\_\_\_ hours per week
- ☐ Explore interests in individual, integrated employment through an employment path, discovery or other time-limited service.
- ☐ Retire — is at least 60 years old or will be this ISP year.
- ☐ Not explore integrated employment at this time. *Complete "Decision not to explore employment" section.*

Known/current barriers to working in an individualized, integrated job	How will barriers be addressed? If the person has a desired employment outcome, include strategies to address known barriers within the outcome.
Transportation not able to take him to/from work at scheduled times (work schedule).	John suggested working close to home so that he can get to work on time. Services Coordinator and providers will support John to look into alternative forms of transportation, including the local bus and other natural resources (e.g. John's neighbors, Luke and Mara, are a potential natural support for rides to work intermittently. John and his residential providers will talk with them and see if they are willing and able to give John rides to work now and again.)

## Desired employment outcomes

<b>Desired employment outcome:</b> John works at a job he thoroughly enjoys; where he is making good money and can pay for a larger portion of his trip to Hawaii on his own.				
<b>What supports this outcome?</b> Community Resources, Residential Services, and Employment Services				
Key step/goal	Who is responsible?	Timelines	Where to record progress	Additional implementation strategies expected?
1 John likes Susan Deal with Q services and would like her to be his job developer. She will work with John to develop supports that will allow him to be as independent as possible at work. The CDP will be updated when John gets a job. Job Developer from Q Services will look for a job that John can get to by using the local bus.	John, Employment Coordinator (with Q Services Inc.) and VR Job Developer (Susan Deal)	SC will work with Comm for Blind to make sure timelines work. Once John has a job, Job Developer will support John to find a job and monitor timelines	Job Placement and Training Record (JPTR), SC Progress Notes	Follow Comm. for Blind Individual Plan for Employment (IPE)

2 Initial job coaching: John said he will wait until he almost has a job to see who may help him best on the job. He hopes the same person can do short-term and long-term job coaching.	John, Employment Coordinator and VR Job Developer	Discussions to occur weekly and decision made prior to starting job. (John's hope is to have a job by January 2018)	Job Placement and Training Record (JPTR)	An action plan for job coaching will be created once an integrated office job is found and John hires a job coach.
3 Ongoing job coaching: John wants to work with Q Services Inc. once he is stable in a job.	John, Services Coordinator, Long Term Job Coach (TBD)	SC will support John to find a Long Term Job Coach that he likes, so that he has a Job Coach ready to work once stable in his job.	Job Placement and Training Record (JPTR),  SC Progress Notes	An action plan for job coaching will be created once an integrated office job is found and John hires a job coach.

**Desired employment outcome:** John will increase his ability to contact his transportation to and from work so that he knows he is on time to work and gets home safely and become knowledgeable about clerical related jobs in the community.

**What supports this outcome?** Community Resources, Employment Services

Key step/goal	Who is responsible?	Timelines	Where to record progress	Additional implementation strategies expected?
1 Q Services will arrange 3 tours of community businesses per quarter for John. During these tours, staff will have John call for transportation to and from the locations, when possible, and they will help John to observe clerical-related jobs as well as other jobs he may be interested in.	John and Q Services Inc.	John will have had one scheduled tour by 09/17 and then 3 each quarter thereafter.	Learning Log with information about experiences in Springfield.	Action Plan has been developed by Q Services for Employment Path Service outlining steps for gaining office job related skills along with transportation.



## Chosen case management services

Chosen case management provider: Sweet Home County CDDP	
Authorized dates: <input checked="" type="checkbox"/> Same as plan effective dates	
Required frequency of case management contact: Quarterly	Prime number: 12131415
<p>Case management will monitor the effectiveness of services and supports being provided, John's satisfaction and well-being, and progress toward identified desired outcomes throughout the year.</p> <p>Other anticipated case management services during the year include:</p> <p>SC will ensure that John's next meeting is scheduled far in advance so that it can be at his mom's house as he prefers, SC will coordinate planning and monitor that the supports in place are meeting his needs. SC will monitor desired outcomes and support provider to adjust action plans as necessary. SC will provide John with resources about activities he might like to try and will encourage John to let her know when he thinks of things he might like to try so she can update his Person Centered Information and inform him about things that meet his preferences as she hears about them. SC will check in on how protocols and other support documents are working or not working to keep him safe and healthy. SC will communicate regularly with Commission for the Blind Counselor to ensure that John's services are meeting his needs and to help him advocate for his needs whenever he requests. SC will help John hire a job coach as soon as Commission for the Blind helps him find a job.</p>	
<p>John's preference on how case management is provided:</p> <p>John likes to have meetings at his mom's house or the CDDP; he likes the smaller conference room. He likes the people he trusts and who know him best to be at his meetings. He especially likes for his mom to be involved. He wants enough time set aside so that he has enough time to talk about current issues and ask questions.</p>	

## Informal supports, community resources and other voluntary services and supports

Describe supports	Provided by
Employment Supports (Job Development): John needs support finding a job he likes and is good at. He needs support finding a job that matches his skills and interests (office work). John needs support from a low vision specialist to make needed changes to his workplace.	Future Job Development funded by OCB (since referred by VR)
Going to church. John needs support getting to and from church on time and support to socialize and include himself in church activities while at church.	Friends—either Ester or Diane pick him up to go to church and help him, along with many other church member, while at Church

When John is home with his mom on weekends, she provides all his support needs naturally. She does not get paid.	Mom (Nancy)
--	-------------

## Chosen State Plan Personal Care (SPPC) services

☒ None selected

## Chosen family support services

☒ None selected

## Chosen K plan services

☒ None selected

## Chosen waiver services

**Service element: SE54 Employment/Day Services for Adults**

**Service code: OR401-Individual Supported Employment - W5, Initial Job Coaching support**

Number of units: 40	Unit type: Hour(s)	Per (frequency): Week
Authorized dates: <input checked="" type="checkbox"/> Same as plan effective dates		

Chosen provider type(s) and current rate(s) (*PSW, non-PSW independent provider, provider organization, general business, etc.*):  
 Provider Organization (\$45.88/hr)

List needs identified by the needs assessment that this service will address:

John needs initial support to train for job tasks above the typical responsibility of an employee's supervisor. John needs ongoing job support in order to maintain employment, including training for new job tasks as they arise, sharpening skills for tasks he has already learned, and communicating effectively with supervisors and coworkers when he is scared at the office. Regular check-ins about his adaptive equipment and work fixtures are needed to assure they always meet his needs.

John's preference on how this service is delivered:

John prefers to work with his job coach and/or job developer to figure out the best fixtures to use on the job.  
 John needs schedules that have contrasting colors to assist with his low vision.

**(This service will begin when initial support from OCB ends and will continue for about 90 days thereafter.)**

**Service element: SE54 Employment/Day Services for Adults**

**Service code: OR401-Individual Supported Employment - W6, Ongoing/Follow-along support**

Number of units: 40	Unit type: Hour(s)	Per (frequency): Week
Authorized dates: <input checked="" type="checkbox"/> Same as plan effective dates		

Chosen provider type(s) and current rate(s) (*PSW, non-PSW independent provider, provider organization, general business, etc.*):  
Provider Organization (\$40.15/hr)

List needs identified by the needs assessment that this service will address:

John needs ongoing job support in order to maintain employment, including training for new job tasks as they arise, sharpening skills for tasks he has already learned, and communicating when something has scared him in the work environment. Regular check-ins about his adaptive equipment and work fixtures are needed to assure they always meet his needs.

John's preference on how this service is delivered:

**(This service will begin upon completion of initial job coaching.)**

John is very social, and likes to talk about how things are going on his job in a comfortable environment.

John prefers to process problems out loud, and talk with someone, who will listen first, and then assist him in making recommendations for change, if he is unable to come up with an idea himself.

**Service element: SE54 Employment/Day Services for Adults**

**Service code: OR541-Employment Path Services - W1, Facility**

Number of units: 15

Unit type: Hour(s)

Per (frequency): Week

Authorized dates: ☒ Same as plan effective dates

Chosen provider type(s) and current rate(s) (*PSW, non-PSW independent provider, provider organization, general business, etc.*):  
Provider Organization (\$11.45/hr)

List needs identified by the needs assessment that this service will address:

John needs support to gain skills toward his goal of integrated employment. Currently, he needs contrasting colors at his workstation. With his low vision (legally blind), it is best when a product is white, for example, John works on a table that is black, and vice versa. John asks for help when he needs it.

John's preference on how this service is delivered:

- John is very social, and likes to talk about how things are going on his job in a comfortable environment. John prefers to process problems out loud, and talk with someone, who will listen first, and then assist him in making recommendations for change.
- John really likes to stay busy.
- He does say “scared” and “hurt” when talking about very busy work environments.
- He doesn't like people not rushing around, and this is serious to him.
- He is afraid to be hit in his chest (blow to his chest, even if an accident) as this would cause a health emergency for him.
- John tells you “no like” or “not well” when he doesn't like a job or is not feeling well.
- John communicates great about all aspects of work and what he needs. John is very social and needs a job where he can interact with people some while working but definitely at breaks and lunch; he loves chatting with people. He knows the boundaries of breaks verses needing to work. He doesn't have any issues if told to re-focus back on the job.

**Service element: SE54 Employment/Day Services for Adults**

**Service code: OR541-Employment Path Services - W2, Community**

Number of units: 10	Unit type: Hour(s)	Per (frequency): Week
Authorized dates: <input checked="" type="checkbox"/> Same as plan effective dates		

Chosen provider type(s) and current rate(s) (*PSW, non-PSW independent provider, provider organization, general business, etc.*):

Provider Organization (\$19.77/hr)

List needs identified by the needs assessment that this service will address:

John needs support to gain skills toward his goal of integrated employment. John asks for help when he needs it, and may ask for help if people are scaring him.

John's preference on how this service is delivered:

- When John gets a job, he would prefer to end this service before his facility-based service.
- John likes to have a plan and know what is happening; he can manage immediate changes when needed.
- He does best with photos on a large calendar rather than stick figures as they are hard for him to see.
- John is very social, and likes to talk about how things are going on his job in a comfortable environment. John prefers to process problems out loud, and talk with someone, who will listen first, and then assist him in making recommendations for change.
- John really likes to stay busy.
- He does say “scared” and “hurt” when talking about very busy work environments.
- He doesn't like people not rushing around.
- He is afraid to be hit in his chest (blow to his chest, even if an accident) as this would cause a health emergency for him.
- John tells you “no like” or “not well” when he doesn't like a job or is not feeling well.
- John communicates great about all aspects of work and what he needs. John is very social and needs a job where he can interact with people some while working but definitely at breaks and lunch; he loves chatting with people.

## Chosen K plan residential services

**Complete the following only if the person chooses *RESIDENTIAL* services.**

Service setting: 24-hour Residential - Adult DD 50

Chosen provider: PDQ Residential Services (Lynn Street group home)

Authorized dates: ☒ Same as plan effective dates

John chooses: ☒ Private bedroom ☐ Shared bedroom

The K plan services already included in residential services: ☒ Attendant care - ADL/IADL ☒ Skill training ☒ Community transportation

Additional K plan services included in residential services: ☐ Behavior supports ☒ Nursing supports

List needs identified by the needs assessment that this service will address:

- Assistance with medication management (reminders to take medication on time and in the correct amount)
- Assistance with complex health management supports (setting appointment, following through with appointments, and understanding his medical needs as well as communicating his health needs (e.g. expressing where/when he is feeling ill))
- Full physical assistance with shaving (he does prefer a man to help him), assistance with expressive and receptive communication and telephone use (dialing the phone and communicating clearly), assistance with safety and fire evacuation (verbal cue to leave premises safely, quickly, and cues to evacuate to a safe location)
- Full assistance with transportation (setting up rides, riding safely, and finding all the locations he needs to get to and from)
- Assistance with meal prep (preparing ingredients properly, using the stove and oven safely, turning the oven and stove on to the right temp, setting and listening for timer, using sharp items safely)
- Partial assist with laundry and housekeeping (sorting laundry, putting clothes into the washer, using the proper temp and correct amount of soap, cues to listen for timer, and physical support for folding)
- Assistance with shopping and money management (paying bills on time, budgeting for needed items and bills, making monetary exchanges)
- Assistance with coordinating social activities (encouragement to schedule activities ahead of time, support to find activities of interest, and support to follow through with activities with reminders about time and day, as well as support with transportation to and from all activities)
- Partial assistance with social interaction (reminders to talk with someone when someone scares him).

John's preference on how this service is delivered:

John can let you know what he likes and doesn't like. He wants to direct his supports as they are being delivered. He would like people to refer to his One Page Profile to know what is important to him and how to best support him. He wants anyone who is working with him to be willing to learn his communication style and listen to him (really listen). He wants people to ask before helping him.

### Chosen K plan transportation service

Transportation type: Van transportation

Authorized dates: ☒ Same as plan effective dates

Chosen provider type or description of service:

PDQ Residential Services

### Additional chosen services

☒ None selected



## Risk management plan

Emergency preparedness (*natural disasters, power outages, community disasters, etc.*):

John's home and work providers have Emergency Preparedness Plans.

Preventing abuse (*physical, emotional, financial, sexual, neglect*):

John is around someone at all times who can help him protect himself. He advocates for himself and has trusted people around him at home, work, and with friends who he feels comfortable expressing concerns to, when necessary. John has reported in the past when someone has tried to take money from him.

What happens if John can't be reached (*timelines for notifying others, who to contact, etc.*)?

John has a missing person's plan located both at home and at work.

## Known risks

Risk	High risk ⓘ	Describe the issue and how it is addressed or note where other information can be found. ⓘ
<b>Dehydration</b>	<input type="checkbox"/>	Protocol at PDQ & Q Services
<b>Injury Due to Falling Safety: New tool use</b>	<input type="checkbox"/>	Safety Plan at PDQ & Q Services, John's safety plan includes recommendations provided by his doctor. The information from John's doctor is dated 8/15/2003. M. Manor stated on 7/17/17 that at each doctor appointment this is reviewed and no changes in his recommendations have occurred to date. The "New tool use" is only in the work Safety Plan.
<b>Other Medical Risks: Congestive Heart Failure Injury Due to Blow to Chest</b>	<input checked="" type="checkbox"/>	Health/Medical Problem List at PDQ and at Q Services (for CHF), John's CHF may cause hospitalization especially when he gets sick. This has happened each year for the past five year, which is an increase from previous years. (This is a high risk due the increase in hospitalizations.)  Injury due to blow to chest (in John's Safety Plan) is considered life-threatening. The frequency of this happening is very low. His current supports are working; however, due to the severity of this and despite those support, others in the community are unpredictable and this may happen, most likely as an accident, with the supports in place.
<b>Fire Evacuation Safety</b>	<input type="checkbox"/>	Safety Plan at PDQ & Q Services
<b>Household Chemical Safety</b>	<input type="checkbox"/>	Safety Plan at PDQ & Q Services: all chemicals are locked up and John is supervised when he uses harmful chemicals

<b>Vehicle Safety</b>	<input type="checkbox"/>	Safety Plan at PDQ & Q Services: John is supported by staff when around vehicles. He will hold staff's hand and stay close.
<b>Potential for Financial Abuse</b>	<input type="checkbox"/>	Financial Plan (PDQ), John also has a Rep Payee

Does John's plan include the use of safeguarding interventions?

- ☒ No    ☐ Yes, attach a completed IBL form authorizing the use of safeguarding intervention(s).

Does John's plan include the use of safeguarding equipment that meet the threshold of restraints?

- ☒ No    ☐ Yes, attach a completed IBL form authorizing the use of safeguarding equipment.

Are any individually-based limitations on HCBS residential setting protections **accepted**?

- ☒ No    ☐ Yes, attach a completed IBL form.

Are any individually-based limitations on HCBS residential setting protections **proposed** but not accepted?

- ☒ No    ☐ Yes, attach a completed IBL form.

Does John have a nursing care plan?

- ☐ No    ☐ Needed    ☒ Yes, it is found at:

Home: In Medical section of John's record book

Work: Medical file: RN consult

#### **Back-up plans (*in the event that primary support is not available*):**

Home: Call mom (Nancy) anytime John's primary support provider is unavailable short or long term. Nancy's number is 541-555-1592. If something happened and the provider that supports John with residential services is no longer able to do business, John's mom would provide support to him until another group home can be found.

Work/school/day supports: Call group home, 541-555-9907, if home unavailable, call Nancy (mom)

Other: If Nancy or group home are unavailable (after 15 minutes unless emergency), Fran (family friend) can be called at 541-555-1593

## **Differences**

**Note any differences between the contents of this plan and what John wants:**

☒ No known differences

**Note any differences between the contents of this plan and what any other ISP contributor wants:**

John wishes one of his roommates would move out. He likes where he lives but not living with this person. John's Person Centered

information explains this issue in a little more depth. John has been given opportunities to move, but he doesn't want to move. He wants the other person to move. At this time, that is not an option. John did not want to talk about this at his ISP meeting, so it was not added to the agenda, but the people working with John will continue to provide him with opportunities to effectively communicate his feelings, socialize in the home as comfortably as possible with this person, give him information about his rights, and look for opportunities to resolve this disagreement. Until then, it remains unresolved.

## Legal relationships

Type of legal relationship	Name(s)
<b>Health Care Representative:</b> Appointment date: <u>Feb 9, 2017</u> <input checked="" type="radio"/> Self-appointed <input type="radio"/> ISP Team appointed	Nancy Smith
<b>Representative Payee:</b>	Nancy Smith

## Acknowledgments

The person John has the right to make an informed choice about where to live and receive services, to choose which services to use, and to select from available providers to deliver those services in a non-disability specific and community-based service setting.

### Describe the supports John needs to understand his rights or to understand this plan, if any:

John's providers and his mom (and dad, too) will help him understand his plan and support him to advocate for what he wants and needs in his life to be happy and healthy.

Did the SC/PA offer options about available case management providers?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Describe the options offered about settings where John can live and receive supports. This must include non-disability specific options. Services Coordinator told John that he has the right to receive services in the available setting of his choosing. SC gave John a list of all the support settings available in Oregon, including Foster, a different 24-Residential group-home, Supported Living (both provider owned and own home options), and the option to live in an In-Home setting. SC explained what each of these setting were so that John could make an informed choice. SC told John that she can help them look into specific homes within each setting option if/when they want additional information.	

Describe the options offered about settings where John can receive employment or day services. This must include non-disability specific, community-based options. John Employment Path--Facility to meet him employment desired outcomes. After talking with his SC he decided to also use Employment Path—Community to get more community based employment experiences. SC added this to his ISP. See ISP employment desired outcomes and chosen services section for more details.	<input type="checkbox"/> Not applicable
Did the SC/PA review the services available to John?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Does this ISP reflect the services John chooses and the outcomes John wants to work toward?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Did the SC/PA offer options about available providers to deliver chosen services?	<input checked="" type="radio"/> Yes <input type="radio"/> No
If John's family provides supports, does this ISP reflect what is needed for the family to effectively provide supports?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A
Has John been provided information about the planning process and how to request changes and updates to the ISP?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was John given the opportunity to choose the location of his ISP meeting?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was John given the opportunity to choose who participated in his ISP development?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Did John receive notification of his DHS rights?	<input checked="" type="radio"/> Yes <input type="radio"/> No

ISP team — does this ISP reflect...	
<b>Independence:</b> Having control and choice over one's own life.	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Integration:</b> Living near and using the same community resources and participating in the same activities as, and together with, people without disabilities.	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Productivity:</b> Engaging in contributions to a household or community; or engaging in income-producing work that is measured through improvements in income level, employment status, or job advancement.	<input checked="" type="radio"/> Yes <input type="radio"/> No

## Agreement to this plan

These people agree to this plan and associated documents as reflecting John's strengths and preferences, support needs as identified by an assessment, and the services and supports that will assist John to achieve his identified desired outcomes.

- **Services coordinator/personal agent/ODDS residential specialist:** Ensure the plan meets John's current service needs and complies with requirements for the chosen service setting(s) and associated funding.
- **Providers:** Agree to implement and provide the supports that have been designated as their responsibility in this ISP. A signed Provider Service Agreement may be used instead of a signature on this page.

Name	Relationship to John	Present at meeting?	Signature	Date	Comments
John Smith	Person receiving services	<input checked="" type="checkbox"/>			
Carrie Jones	Services Coordinator	<input checked="" type="checkbox"/>			
Michelle Manor	House Manager	<input checked="" type="checkbox"/>			
Nancy Smith	Mom	<input checked="" type="checkbox"/>			
Mark Smith	Dad	<input type="checkbox"/>			provided info over phone
Ingrid Moore	Employment Coordinator	<input type="checkbox"/>			provided info over phone

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.





## Provider Risk Management Strategies

Person's name: John Smith

Provider/Site Name: PDQ Residential Services /Lynn Street

List risks identified on the ISP Risk Management Plan or Service Agreement and what support document(s) are in place to address each risk.

Risk	Title of document	Document date	Where kept
Dehydration	Dehydration Protocol	1/15/15	Training Medical Book
Other Serious Health or Medical Issue: Congestive Heart Failure	Health/Medical Problem List	1/15/15	Training Medical Book
Injury due to falling Injury due to blow to chest Fire Evacuation Safety Household Chemical Safety Vehicle Safety	Safety Plan	1/17/16	Training File Safety Section
Potential for Financial Abuse	Financial Plan	7/29/16	Training File Support Docs

Does this person have a Nursing Care Plan at this location? ☐ No ☒ Yes, where found: Home: In medical section under Nursing Plan

## Provider Risk Management Strategies

Person's name: John Smith

Provider/Site Name: Q Services Inc

List risks identified on the ISP Risk Management Plan or Service Agreement and what support document(s) are in place to address each risk.

Risk	Title of document	Document date	Where kept
Dehydration	Dehydration Protocol	1/15/15	Training file Support Doc section
Other Serious Health or Medical Issues: Congestive Heart Failure	Health/Medical Problem List	1/15/15	Training file Support Doc section
Injury due to Falling Injury due to blow to chest Fire Evacuation Safety Household Chemical Safety Vehicle Safety New tool use	Safety Plan	1/17/15	Training File

Does this person have a Nursing Care Plan at this location? ☐ No ☒ Yes, where found: Work: Medical section-RN consult

## Action Plan

Person Receiving Services: John Smith

Action Plan for: Home

Date: 8/19/16

**Desired Outcome:** John maintains his robust social life, doing the things he enjoys with people he has fun with and cares about.

Measurable steps that will be taken to reach the desired outcome	Where will it happen	Who is responsible	How often or date due	Where to record	Notes
A: Support John to contact friends and family as he requests (help John dial the phone by letting him know if he has dialed correctly).	At home	DSP and John	3-4 times a week.	Checklist with who he called	
B: Support John with rides as needed. Know John's regular scheduled activities (Church every Wednesday, Movies with Phil).	Around town	DSP and John	At least 1 time a week	Activity Log	
C: If John wants to do something additional, he will let staff know a day in advance. Staff will check in with John each day to see if he has an interest in something outside his regular schedule and encourage John to be proactive about letting them know what things he might like to do.	At home	DSP and John	John will continue to work on this as needed	Activity Log with progress note	
D: Support John to look into new activities by asking SC for resources, looking online, connecting with others who might know about activities happening in Springfield and looking for activities in the local paper. If John finds an activity he would like to take part in, support him to call, sign up, or register for activities as needed.	At home and at work	DSP and Staff At work with Employment Supervisor	1-2 times per week (at work 1 time per month)	Home: Progress Notes Work: Task list	