

Self-Determination Guide



The ELARC Self-Determination Orientation Workbook was created through a collaboration of the Eastern Los Angeles Regional Center Self-Determination Local Volunteer Advisory Committee, regional center staff, and Helen Sanderson Associates. The content was adapted from materials from the Department of Developmental Services and Tri-Counties Regional Center. The Person Centered Planning module includes resources from the Learning Community for Person Centered Practices and Charting the Life Course from University of Missouri, Kansas City.

A heartfelt thanks to all contributors!



Support Authority Freedom Responsibility CONFIRMATION

Five Principles of Self-Determination

- 1 Freedom** You plan your own life and make your own decisions, just like people without disabilities are able to do.
- 2 Authority** You decide how money is spent for your services and supports.
- 3 Support** You pick the people and supports that help you live, work and play in your community.
- 4 Responsibility** To make decisions in your life, to be accountable for using public money and to accept your valued role in the community.
- 5 Confirmation** You are the most important person when making plans for your life. You are the decision maker about your services. Self-Determination means "Nothing about you without you."



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MODULE 1

Introduction



What Is Self-Determination?

Self-Determination is:

- Choice, Control and Responsibility
- Services and Supports that fit your life
- You get to decide how your budget is spent
- Lots of support
- Person Centered



Self-Determination is having a choice in all areas of your life including where you want to live, how you will spend your time each day and who you will spend your time with. It's about having hopes, dreams, and goals for the future and going after them. It's about being in control, making your own decisions, and spending money your way.

Notes:



History Of Self-Determination

Lanterman Act to Present

Lanterman Developmental Disabilities Services Act (the Lanterman Act) passed into law.

People with developmental disabilities and their families have a right to get the services and supports they need to live like people who don't have disabilities.

1969

1998

2000-2013

Pilot project extended.

The Self-Determination Law passed to pave the way to make Self-Determination available at all regional centers.

2013-2018

The Self-Determination Program waiver is approved by the Centers for Medicare and Medicaid Services (CMS) for an initial 3-year implementation period.

After the 3-year implementation period, the program would be available to ALL eligible individuals. 2,500 participants are selected October 1, 2018.

2018

2019

Self-determination is available to any person being served by a regional center over the age of 3 years, is eligible to participate in the self-determination program!

2021- July 1st, 2021

The Lanterman Act is amended.

A 2-year pilot project mandated to examine self determination. Five Regional Centers, of which **ELARC** was one, participate in the pilot. Guided by a Local Advisory Committee ELARC identified 32 individuals for the pilot.

State prepares to launch self-determination.



A second group of participants are selected on November 22, 2019.



What Will Be Different?

Notes:

Traditional Services:

- ✓ Person Centered Planning
- ✓ Individual Program Plan (IPP)
- ✓ Regional Center
- ✓ Vendored Providers

Self-Determination:

- ✓ Person Centered Planning
- ✓ Individual Program Plan (IPP)
- ✓ Regional Center
- ✓ Vendored or Non-vendor Providers
- ✓ Individual Budget
- ✓ Independent Facilitator
- ✓ Financial Management Service (FMS)



Rights Of Individuals With Developmental Disabilities



You have the right to wear your own clothes. You should be able to pick the clothes you wear.



You have the right to keep your own things in a private place that you can get into when you want.



You have the right to see your friends, family, girlfriends or boyfriends every day.



You have the right to use the telephone privately to make or get calls.



You have the right to have paper, stamps and envelopes for writing letters. You have the right to mail and get letters that are not opened.



You have the right to say "NO" to electric shock therapy.



You have the right to say "NO" to anybody trying to change the way you act by hurting you, scaring you or upsetting you.



You have the right to say "NO" to brain surgery that people want to do because of the way you act.



You have the right to choose how you want to spend your free time and who you spend it with.



You have the right to services that help you live, work and play in the most normal way possible.



You have the right to keep and spend your own money on the things that you want and to keep and use your own things.



You have the right to be treated well and with respect.



You have the right to spend time alone or alone with a friend.



You have the right to go to school.



You have the right to see a doctor as soon as you need to.



You have the right to be involved in a religion if you want to be.



You have the right to meet people and take part in your community activities.



You have the right to exercise and have fun.



You have the right to say "NO" to things that will put you in danger.



You have the right to make choices about where you live, who you live with, the way you spend your time and who you spend your time with.



You have the right to say "NO" to drugs, being tied or held down, or being forced to be alone unless it is necessary to protect you or someone else.



You may have other rights as provided by law or regulation.



Points To Remember

- 1** The Self-Determination Program is a voluntary program. It's your choice to be in the program or to leave the program.
- 2** If you decide to leave the Self-Determination Program, you won't have the opportunity to return to the program for 12 months.
- 3** If you move somewhere else in California, you can stay in the Self-Determination Program no matter which regional center you receive services from.
- 4** You must live in the community to be in the Self-Determination Program. For example, you cannot live in a licensed long-term health care facility or at a Developmental Center and be in the Self-Determination Program unless you've identified that you will be moving into the community within 90 days.

Notes:



My Notes & Next Steps

Support Authority
Freedom Responsibility
CONFIRMATION



MODULE 2

Roles & Responsibilities



Your Roles & Responsibilities

To be in the Self-Determination Program, you are agreeing to:

- ✓ Attend a Self-Determination Program orientation
- ✓ Developing a person-centered Individual Program Plan (IPP) with your planning team.
- ✓ Create a Spending Plan based on your Individual Budget.
- ✓ Use a Financial Management Service (FMS)



Notes:



Who Can You Ask To Support You On Your Journey To Self-Determination?

Anyone you choose! **It's your choice!**

Your Family, Friends & Circle of Support:

- People You Trust
- People Who Know You Best
- Friends and Family
- Teachers, Therapists and Coaches
- Your Service Coordinator
- Your Employer
- Your Independent Facilitator

Notes:



The Role Of The Regional Center & Your Service Coordinator

Your Service Coordinator from the Regional Center will:

- ✓ Help you develop your Individual Program Plan (IPP)
- ✓ Certify the amount agreed upon for your Individual Budget
- ✓ Help you understand what services are eligible for funding through the Self-Determination Program
- ✓ Guide you to make safe and healthy choices for your plan



Notes:



Service Coordinator Roles & Responsibilities In the Self-Determination Program

Core Responsibilities:

- May lead your Person-Centered Planning session
- Will help develop your Individual Program Plan (IPP)
- Certify the amount of your Individual Budget
- Ensure you are accessing “generic resources” available to you
- Help you understand what types of services are eligible for Self-Determination funding
- Help you figure out how to be healthy, safe and living to your full potential at home and in your community
- Monitor progress towards meeting your Individual Program Plan goals based on your input and service provider’s reports
- Confirm that the money from your Individual Budget is spent as approved in the Individual Program Plan

Can use Judgment & Creativity

- May help you identify possible resources and services in the community that are readily available for your purchase
- Will help you pursue “generic” services that are available to you if you need help with accessing them
- Will help you figure out your Individual Budget according to your needs
- Will be available to answer questions and serve as a guide to what’s positive and possible
- Will help you if your needs change and if you need an increase in your budget

Service Coordinator Limitations

- Unable to scout for new services in the community
- Unable to negotiate service rates for you
- Unable to write and submit reports that outline how your services were used and how your funds were spent
- Unable to recommend an Independent Facilitator



Independent Facilitator

What is an Independent Facilitator?

- ✓ It is someone you choose to help you implement your plan.
- ✓ This can be someone you trust, someone who knows you and your family the best, someone who can help you.
- ✓ Someone who can communicate with you in your preferred language and understands what is important to you.
- ✓ An Independent Facilitator can be a family member, a friend or even your service coordinator.
- ✓ Your Independent Facilitator will help you identify your needs and help you find resources and coordinate the supports needed.



Notes:

Do I have to use an Independent Facilitator?

No, it is your choice!!



Independent Facilitator

Do I pay an Independent Facilitator?

Independent Facilitators do not need to be paid, if they offer to volunteer their services. If you choose to pay your Independent Facilitator, that cost will come directly from your Individual Budget. Your Individual Budget cannot be increased to pay for an Independent Facilitator.

An Independent Facilitator can be paid if the participant is over 18, a parent may be a paid Independent Facilitator.

You can choose to have your regional center Service Coordinator help you as an Independent Facilitator and they would not be able to be paid. However, there will be limitations as to what they will be available to do in this role. Speak to your Service Coordinator about their availability to assist you as an Independent Facilitator.

An Independent Facilitator cannot be paid if . . .

- They are a person who is already providing you services.
- They are the parent of a person receiving services who is under 18.
- They are a conservator
- The person served is married, their spouse cannot be a paid Independent Facilitator.

Notes:



Independent Facilitator

What are the requirements of an Independent Facilitator?

- They must have completed training in the principles of Self-Determination and Person-Centered Planning.
- They cannot provide any other paid service to you.

How an Independent Facilitator CAN help you:

- Your Independent Facilitator will help you access resources including non- regional center funded services which would include public benefits, IHSS, etc.
- Your Independent Facilitator can help identify your needs and find options to meet those needs.
- Your Independent Facilitator can help you to make informed decisions regarding your individual budget.
- Your Independent Facilitator can help you locate and secure your services and supports to help you reach your goals identified in your Individual Program Plan within your community.
- Your Independent Facilitator can support and advocate for you during the person-centered planning process including the development of your Individual Program Plan.

Notes:



Choosing An Independent Facilitator

An Independent Facilitator needs to understand the principles of Self-Determination and how the program is different from the traditional regional center system.

Things to consider when looking for an Independent Facilitator:

- ✓ How much do they know about the Self-Determination Program?
- ✓ What experience do they have as an Independent Facilitator?
- ✓ What type of training have they had to become an Independent Facilitator?
- ✓ How many person-centered plans have they participated in?
- ✓ What is their experience working with the regional center and/or the school system?
- ✓ How well do they know your community?
- ✓ Are they aware of activities in your area that you might be interested in?
- ✓ Have they worked with children or adults?

Notes:



Possible Questions For Independent Facilitators



What kind of training have you received that qualifies you to be an Independent Facilitator?

How will you keep in touch with me and other members of my support team?

How would you go about helping me to find services to help me meet my goals?

How will you support me around things that are important to me?

How will you help me figure out my budget and spending plan?

Are you willing to adapt your services to meet my specific needs and preferences?

Can you advocate for me at my Individual Program Plan (IPP) and/ or my Individual Education Plan (IEP) meetings?

Are you willing to negotiate a price based on my specific needs?

Can you help me obtain generic resources such as Social Security Income (SSI) or In Home Support Services (IHSS)?

Given what you know about what I need, how much would you charge?

When are you available to start?

Notes:





Choosing Service Providers

WHAT DO YOU NEED?

- Someone who has a medical background?
- Someone who knows your language?
- Someone who drives?
- Someone who can support you with personal care?

WHAT DO YOU WANT?

- Someone who will not speak for you?
- Your privacy respected?
- Employees to not make personal phone calls or text while working for you?
- Someone who understands your culture?

Notes:





Hiring Service Providers In The Self-Determination Program

It is important to find people to help you who understand your needs, know your community, and with whom you are comfortable. You will need to interview and speak with people who you might hire to help you.

Here are some ideas to help you with finding, interviewing and selecting people to help you meet your goals and achieve your dreams.

1. If you need it, ask for help from people you trust.

2. There are many ways to find people to help you, such as:

- Ask people you trust for recommendations, like friends, your regional center service coordinator, people you know from self-advocacy or family support groups, therapists, teachers, and others.
- Put an ad online, in a local paper on social media or reach out to your support system.
Do not put your name, address, or phone number in the ad. It is best to receive applications by email.
- Ask for a resume and 2-3 references.
- Find an agency that can recommend workers and staff.



Hiring Service Providers In The Self-Determination Program

3. Once you have found people who you might be interested in hiring, schedule an interview. Some people like to interview potential staff on the phone first and then schedule another interview in person. For in-person interviews:

- Schedule the interview at a time and place where you feel comfortable.
- For your safety, have another person you trust with you at the interview.
- Think about what you want to know about the people you hire. Have your questions ready before the interview. See the attached pages for ideas for following questions. You can use some or all of these questions and come up with more questions that ask about your particular needs.
- Take notes on their answers.
- If you have more questions after the interview, call them and ask.

4. For people you want to hire, call their references. If possible, you might also ask people who are not on their reference list.

5. After you offer to hire someone, meet with them to sign two papers:

- Service Provider Agreement that lists how much they will be paid and when they will work.
- Community Inclusion Assessment Form, which makes sure that they understand you will make your own choices and be included in the community (HCBS Final Rule compliance).



Hiring Service Providers In The Self-Determination Program

6. If they are providing personal care, they must get a background check. You can also ask any other people you hire to get a background check. Your Financial Management Service will help you with this.

7. Check with your Financial Management Service agency to see what paperwork they will need.

8. Once their background check is approved and the regional center has signed the Community Inclusion form, the person can begin working for you.

9. If you choose the sole employer Financial Management Service model, remember to ask your Financial Management Service agency for help to make sure you are abiding by all laws and paying all taxes.





Possible Questions For Service Providers



These are questions for providers who DO NOT provide personal care or assistance in the home or community. Examples could be a speech therapist, gymnastics coach, computer teacher, or someone to help you make friends or have a relationship.

1. Tell me what you know about self-determination? You want to make sure they understand how self-determination is different from the traditional regional center system.

- It is based on your person-centered plan.
- You are in charge of who gets hired and supervising staff and agencies. Services must provide community inclusion.
- Bills go to a Financial Management Service provider.
- The service provider does not need to be a vendor or have a contract with the regional center.

2. What experience have you had providing this service?

3. What kind of qualifications do you have? (Licenses, credentials, certifications) Some providers might need to provide proof of certification to the Financial Management Service.

4. Have you had experience providing this service in a person-centered way? You direct how the service is provided to you.



Possible Questions For Service Providers



Notes:

- 5. How would you learn more about me to better work with me?
- 6. I have certain things that are really important to me, like _____. Are you willing to customize services to meet my specific needs and preferences?
- 7. How do you determine if people are happy with your services?
- 8. When and where are your services available?
- 9. How many hours are you available per week?
- 10. When would you be able to start?
- 11. How would I make changes in my services or schedule if I need to?
- 12. Are you willing to attend team or circle meetings to share information with other people who support me?

- 13. How will you keep in touch with me and other members of my support team?



Questions You **CANNOT** Ask During An Interview



California and federal laws tell us that there are questions that you are NOT allowed to ask during job interviews.

We want to make sure you follow the law when you are conducting interviews.

- You can't ask their age.
- You can't ask whether they are married or have children.
- You can't ask their gender.
- You can't ask about their sexual orientation.
- You can't ask if they are pregnant.
- You can't ask about their race.
- You can't ask about their religion.
- You can't ask if they have a criminal record.
- You can't ask what their previous salary was.

Notes:



Possible Questions For Agencies That Will Provide Staff



If you are thinking about hiring a company or agency who will provide you services and staff, you also may want to ask some of the following questions:

1. Tell me what you know about Self-Determination?

- You want to make sure they understand how Self-Determination is different from the traditional regional center system.
- It is based on your person-centered plan.
- You are in charge of who gets hired and supervising staff and agencies.
- Services must provide community inclusion.
- Bills go to a financial management service, not to the regional center.
- The service provider does not need to be a vendor or have a contract with the regional center. No reports need to be provided to the regional center.

2. Have you had experience providing this service in a person-centered way?

3. What kinds of qualifications does your agency have? (Licenses, credentials, certifications)

4. How will I choose who will work with me?



Possible Questions For Agencies That Will Provide Staff



5. Will I be able to choose what I do each day and who I spend my time with?
6. What kind of experience does your staff have?
7. What kind of training does your agency give to the people that will work with me?
8. How will you supervise the people that will work for me?
9. What is the average number of years your staff work at your agency?
10. Will your agency allow a different person to work with me?
11. How will you keep in touch with me and other members of my support team?
12. How will you check with me to make sure the services are working out for me?
13. What should I do if I have a problem or complaint?
14. Do you have any references you can provide?



Possible Questions To Ask References For People You Want To Hire



References are the people your potential service provider gives you to provide important information on their experience. In general, references will provide very positive things to say about the person you may want to hire. It is important to ask questions that might give you a complete picture about the person you want to hire. You can use all or some of these questions or come up with other questions on your own. Some of these questions may relate to you or the prospective service provider. Be sure to tell the potential worker that you will be calling their references.

1. My name is _____. You have been put down as a reference for_____ .

2. Is this a convenient time to talk?

3. This person has applied to be a _____ for me/my family member and I want to ask you some questions.

4. How do you know _____ ?

5. How long have you known _____ ?

6. What work did _____ do for you?



Possible Questions To Ask References For People You Want To Hire



7. What did you think of how _____ did their job?

8. Were there areas where _____ could have improved?

9. How many hours per week did they work for you?

10. Why did _____ leave the position?

11. How did _____ react in stressful situations?

12. _____ will need to be person-centered and follow the directions of a person with a disability/family member. Do you think that will work for _____ ?

13. If there was a disagreement with _____, how did they handle it?

14. Do you have any concerns about _____ ?



Self-Determination Program Service Provider/ Participant Agreement

EXAMPLE TEMPLATE

SELF-DETERMINATION SERVICE PARTICIPANT/SERVICE PROVIDER AGREEMENT

Participant Name: _____

Birthdate: _____ UCI Number: _____

Regional Center: _____ RC Phone: _____

RC Address: _____

Service Provider or Company Name: _____

Address: _____ Phone: _____

Agreed upon service(s): _____

Agreement start date: _____

Days and times of agreed schedule: _____ Hours per week: _____

Rate of pay: _____

The service provider and participant agree and acknowledge:

- To provide (hours/days) advance notice to cancel/reschedule appointments.
- Service provider agrees to accommodate changes in schedule if possible. If this is a permanent change, a new agreement should be created.
- Service provider agrees to provide a report of progress or a brief summary of services provided, if requested. The report or summary should be provided to the participant weekly/monthly/quarterly/every year (circle all that apply).
- When working with an agency or vendor for services, the participant has the right to choose which worker will provide services to them.
- Participant has the right to change service providers at any time.

This agreement will remain in effect until it is cancelled by the participant or the service provider. All parties understand that the participant has voluntarily enrolled in the Self-Determination Program and may decide to leave the program at any time. If the participant exits the Self-Determination Program, this agreement will end. Any changes to this agreement must be made in writing.

Participant Date

Service Provider/Company representative Date

Legal guardian/conservator (if applicable) Date

Received by: Regional Center Date: _____ Financial Management Service Date: _____



Financial Management Service (FMS) Agency

- ✓ Will help you pay for services and your employees
- ✓ You can choose your Financial Management Service agency
- ✓ It is the only required vendor for Self Determination
- ✓ You pay for the Financial Management Service out of your Individual Budget
- ✓ Financial Management Service agency provides forms and information for background checks
- ✓ Helps you manage your Spending Plan
- ✓ Gives you a monthly report about your Spending Plan

Notes:



Choosing The Right Financial Management Service Agency

WHAT DO YOU NEED?

Do you need help with employees?

Do you need more help or reminders on making sure you keep within your spending plan?

Do you just need them to pay the bills and send you statements?

Do you need to buy goods and supplies?



WHAT DO YOU WANT?

Full responsibility for your employees?

Help with the business of having employees?

Liability or no liability?

Notes:



Possible Questions For Financial Management Service (FMS) Agency

1. How much do you know about California's Self-Determination Program?

2. What experience have you had with being a Financial Management Service provider?

3. Which models of Financial Management Services do you provide? Bill Payer, Sole Employer, Co-Employer

4. How will you provide me the monthly expenditure reports so that I can keep track of my budget" Email? Text?

5. If I have a question about developing my Spending Plan, can you help me?



6. If you are a co-employer, what role will you play in the hiring of my workers?

- What if I want to hire someone that you don't like?
- Would you ever ask me to fire one of my workers and for what reason?

7. How will you get the time sheets from my workers?

8. If I am spending more than I should be in my spending plan, how will you tell me?

9. If I have questions, how will I get them answered?

10. What is your policy regarding returning phone calls or emails?

Notes:



My Notes & Next Steps

Support Authority
Freedom Responsibility
CONFIRMATION



MODULE 3

Person-Centered Planning



Person-Centered Planning & Your Individual Program Plan (IPP)

Your Person-Centered Plan will provide lots of information for your Individual Program Plan (IPP), including:

- ✓ Your goals
- ✓ The supports you need
- ✓ The services you need
- ✓ Who will provide those services
- ✓ Your Individual Budget and Spending Plan



Person-Centered Plan



Individual Program Plan (IPP)

Notes:



Person-Centered Planning

Through the Person-Centered Planning process you will:

- Identify your hopes and dreams.
- Identify what you like and what you are good at.
- Identify and set meaningful goals for your life.
- Choose who will provide services and support to help you meet your goals.



Notes:



Person-Centered Planning

- Does not happen just once.
- Helps you share your ideas in whatever way you communicate.
- Can happen where you feel comfortable.
- You can include other people you want to have present.
- Your planning process might be different than someone else's and that's okay.



Notes:



You Are The Expert On YOU



Think about things like:

- Where do you want to live?
- How do you want to spend each day?
- What kind of job would you like to have?
- Who are the important people in your life?
- What do you need to be healthy and safe?

Notes:



Dream About Your Future

- What are you good at?
- What are your hopes and dreams?
- What have you always wanted to do?
- What kind of person do you want to be?



Turn Dreams into Action

- All things are possible with the right support.
- Support can come from lots of people and places.

Notes:



Where To Start

- ✓ Think about who can help you — Who do you want on your planning team?
- ✓ Have a meeting- Meet with people on your team.
- ✓ Share your ideas with your team.
- ✓ Write your ideas down!



Notes:



Person-Centered Planning Is About YOU!

Notes:

YOU decide what is important **TO** you to feel fulfilled and happy.

YOU plan for what is important **FOR** you to be healthy, safe and comfortable in your community.

A One Page Profile can describe what is important to you and important for you.

It includes:

- ✓ What others like and admire about you...
- ✓ What is important to you...
- ✓ How to best support you...



Guidance For One Page Profiles

What is a one page profile? A one page profile is a starting point to summarize what we know matters to a person (what is important to) and how to support them well. The expert on the content of the one page profile is the person themselves and people who love and care most about them. It also shares what others appreciate about the person.

Why do we have them?

So that we know what is important to each of us and how to best support one another. We all have gifts and qualities, things that are important to us and we all require support that is individual to us.

What people like and admire about you...



What this section isn't

A list of accomplishments or awards - instead it is a summary of your positive characteristics.



What this section is

What is good about you? What do others value about you? What are the positive contributions that you make?

What is important to you...



What this section isn't

Simply a list of things you like - instead it is a summary of what really matters to you.



What this section is

A summary of what matters to you. This tells people what is important to you. What your hobbies, interests and passions are. Who is important to you and what makes a 'good' day for you.

How to best support you...



What this section isn't

A list of very general hints - instead it is the specific information that would be useful for other people to know about to make sure you feel supported.



What this section is

The specific information that would be useful for other people to know and do if they are to support you in the best possible way.



Guidance For One Page Profiles

Things to think about in general when developing one page profiles

Is the profile written in everyday language - not 'access the community' or other service speak? Does it use assertive language - "John must have a cup of hot chocolate, in a mug, each night before going to bed, usually around 10:45pm."?

How are they developed?

Developing a one-page profile can be something that you do with family, friends, manager, other team members or people who support you. You may wish to start developing your one-page profile on your own and ask others to get involved later.

How will this information be used?

Developing a one page profile is not just another paper exercise, but a way of getting to know more about you, so that we are able to work well with you.

Here are some ways you can use one page profiles:

- So we know what is important to and how best to support you.
- As a basis for learning what is working and not working for you and developing actions.
- For person-centered reviews.
- To find the best match when identifying people to support you. It's important to share relevant personal interests and hobbies to get the best match between what is important to you and the person providing the support.
- Within meetings to make sure we all know you really well and know what we need to know or do to support you.
- To value your unique contributions.

Your one page profile is fluid and can evolve as your interests and hobbies change.



How To Create A One Page Profile



How to Create a One Page Profile

A One Page Profile captures the basic but important information about a person. It is positively focused on the individual's core qualities and abilities. Create the One Page Profile with family, friends, and others that supports the individual. Personalize the One Page Profile with pictures, artwork, and colors to reflect the individual described. Complete the One Page Profile to the best of your ability, there is no right or wrong way to describe the individual.

NAME & DATE

Write down the name of the person the One Page Profile belongs to. Update the profile annually to see the changes and growth of the person every year!

PICTURE

Insert a current picture or use/draw a picture that represents the individual's personality.

WHAT PEOPLE LIKE & ADMIRE ABOUT ME

Include information about the person's strengths, abilities, and talents. Write down what others appreciate about the individual. Focus on the positive qualities and what the individual is good at!

WHAT IS IMPORTANT TO ME

List anything that is important to the individual in their own perspective. What hobbies or interests does the person like to do to make them happy. What particular routines are important to the individual. What are some of the things that should be avoided. Write down what really matters to the individual, even if others do not agree.

QUALITIES OF THOSE WHO BEST SUPPORT ME

In this section, include skills, personalities, and characteristics of those who can best support the individual. Think of the people who makes the individual happy, who the individual work well with and who help the individual have a good day. What are some adjectives to describe those supports the individual?

HOW TO SUPPORT ME TO STAY HAPPY

In this section, include things that are important for the individual. Ask yourself, what makes the individual feel better when he/she is stressed or unhappy. Think about the rituals and routines in different areas of the individual's life including living, health, behaviors, school/work, community and safety. Think of what others need to be mindful of.








**For assistance to create a One Page Profile
Please contact your Service Coordinator to setup a referral for a 1:1 Person Centered Planning appointment**

#18-706



My One Page Profile

My One Page Profile

<p>Name</p> <p>Date</p>		<p>Picture</p>
<p>What is Important to Me</p>	<p>What People Like and Admire About Me</p> 	
	<p> Qualities of Those Who Best Support Me</p>	
	<p>How to Support Me to Stay Happy</p>	
<p> Living Arrangement</p>	<p>Health</p> 	<p>Self Help/Personal Care</p>
<p>Education/Vocation</p>	<p>Effective Communication</p> 	<p>Community/Socialization</p> 

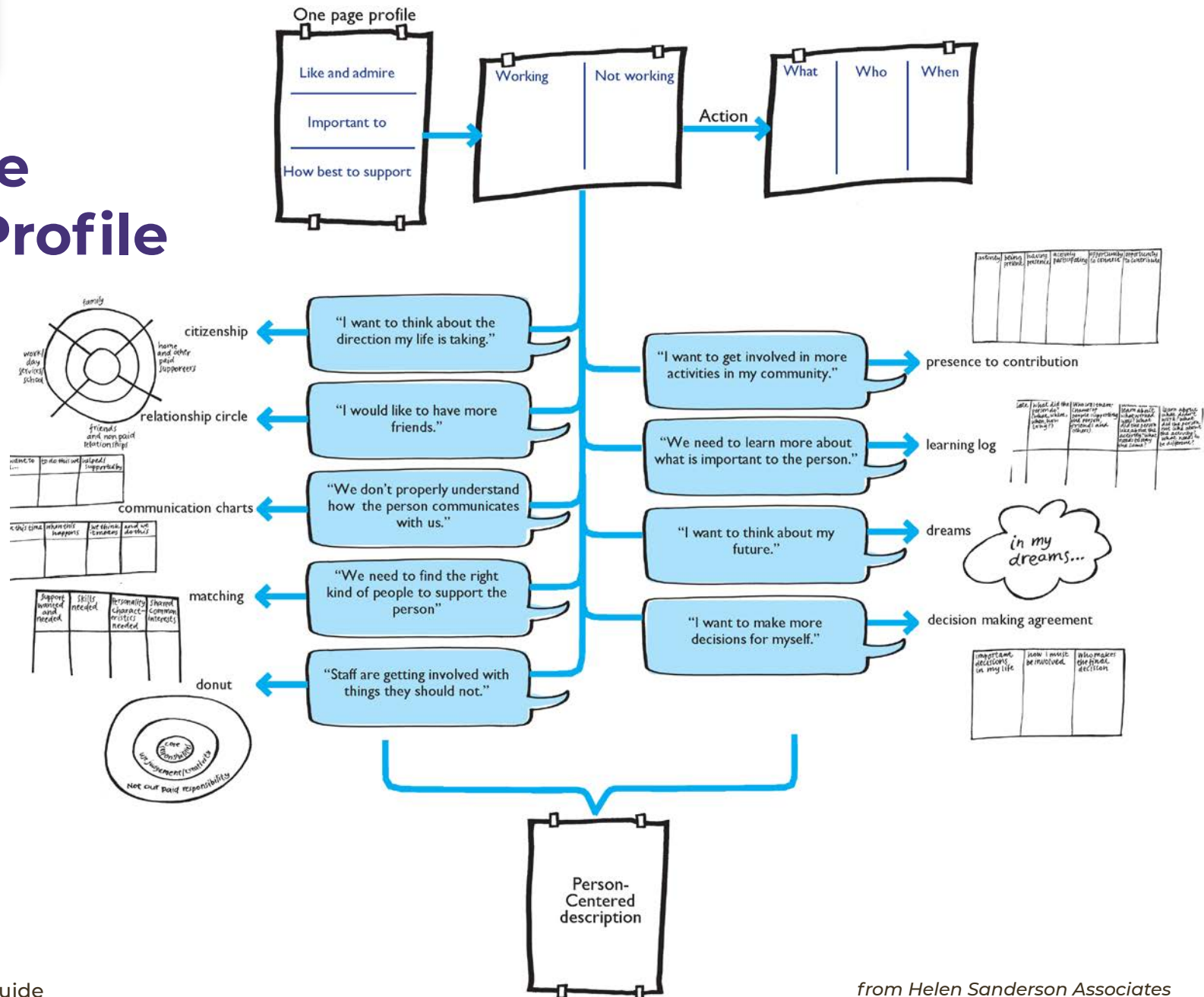
#18-706

ELARC: One Page Profile 8/2018



One Page Profile to a Person-Centered Description

My One Page Profile





Sofia's One Page Profile

All About Sofia!



What makes me happy...

- ⊙ Being in my pool
- ⊙ Watching videos on You Tube
- ⊙ Playing with Rocky
- ⊙ Designing pictures on my computer
- ⊙ Playing with my friends
- ⊙ Doing my art work
- ⊙ Summer Camp
- ⊙ Making new friends
- ⊙ Be accepted at school
- ⊙ Being independent

What people like and admire about me are...

- ✦ I am a good friend 
- ✦ I am creative
- ✦ I am a strong swimmer
- ✦ I take good care of our dog Rocky
- ✦ I'm a loving sister

How I want to be supported...

- ✦ Coordinate times with me for transportation so I can get to hang out with my friends after school and weekends Help me find summer camps to go to.
- ✦ At school, stay back and respect my personal space until I tell you I need help then come over to help me.
- ✦ I need a special computer and a mouse to do design on the computer.
- ✦ Be available to attend art classes with me.
- ✦ Help me find an electric wheelchair and learn how to use one.





Jason's One Page Profile

Jason's One Page Profile



The things people like and admire about me are...

- I love to work in the garden and be outdoors.
- I am a good singer
- I have many interests including hiking, video games, traveling and cooking
- I know a lot about different kinds of music and loves music! I am learning how to play guitar
- I am friendly and a good friend

What makes me happy...

- To have a job doing what he loves; working in a garden
- Singing; I enjoy singing at home and would like to explore joining a church choir
- Music; I love many different kinds of music and would like to learn how to play guitar
- To live in my own place close to my mom's house with support needed
- To continue to spend time with my friends
- To get around town when doing fun things with friends

How I like to be supported...

- Getting around town: To have transportation support to access my community when planning future activities with my friends
- Finding a job: To receive support to find a job in the area of gardening and to receive training and funds to purchase the garden tools I need
- Having my own home: To learn how to cook and do laundry before I move out on my own. Help with finding an apartment and receive support when I moves out so that I am successful
- Friends: help from others to figure out ways to have more friends who share in my same interests; i.e. hiking club, travel, video games, singing
- Be Healthy: help with finding a dietician to assist me to lose weight and remain healthy





How Can A One Page Profile Help?

A One Page Profile can...

- Be a quick effective introduction and a great way to share important information.
- Help you gather information to include in your Individual Program Plan.
- Clarify priorities.
- Provide instructions about how to care for someone.
- Help to find a good match for supports.
- Tell others what is important To and For you.
- Help others see your abilities not just your disability.

Notes:



Preparing For Your Person-Centered Plan

Tips to host your Person-Centered Plan Meeting:

Your person-centered plan must provide the following for you:

- Pick where and when to meet
- Pick who is invited
- Let you be the boss of your meeting
- Help you with what you need and want
- Give you the power to choose
- Talk about things that matter most to you
- Talk to you, not about you
- Respect your culture and use language that you understand

Tips to Develop your Person-Centered Plan:

- Think about the people, places and things that are important to you, your cultural background, and lifestyle preferences
- Think about your hopes, dreams and vision for the future
- If you are asking for help, tell people what language and or images you understand
- Think about what might be some meaningful goals for your life
- Develop a spending plan that helps you work towards your vision of the future and goals in your person-centered plan
- Clearly states who will provide services and supports to help you meet your goal
- Review your plan. You say when it is done.

Your plan will be reviewed and updated every 12 months in Self-Determination or when your situation or needs change or when you request a new plan.



Choosing A Person-Centered Plan Facilitator

Who can be a Person-Centered Plan facilitator?

- A person who is skilled in Person-Centered Planning, an Independent Facilitator or someone you know and are comfortable with who can help you plan.
- Your Individual Program Plan (IPP) must be developed utilizing a person-centered planning process.
- A list of Person-Centered Planners and Independent Facilitators who can assist with planning can be found here:
<https://www.elarc.org/home/showpublisheddocument/14956/637613404375300000>

Who pays for my Person-Centered Plan facilitator?

- Participants in Self-Determination may request person-centered planning services and utilize their budget to purchase planning supports.
- There are lots of resources on developing a Person-Centered Plan, it does not have to be a paid service.
- Your Independent Facilitator can provide this as part of your budget.

For more information go to:

<https://www.dds.ca.gov/initiatives/sdp/frequently-asked-questions/self-determination-program-frequently-asked-questions/>



Possible Questions To Ask When Selecting A Person-Centered Plan Facilitator:



How much do you know about California's Self-Determination program?

Have you had training to be a Person-Centered Plan facilitator? If so where, when and from whom did you receive training on Person-Centered Planning?

Which method or methods of Person-Centered Planning can you use/facilitate?

What experience have you had as a Person-Centered Plan facilitator?

Do you have any testimonials from individuals or families that you helped?

Have you created them for my age group, and/or in my preferred language?

Can you speak, read and write the plan in my preferred language?

How will you get to know and understand me?

I have certain things that are really important to me, are you willing to adapt your services to meet my specific needs and preferences?

How will you help me gather the people in my life who care about me and can support me?

How would you prepare me and my circle of support for my Person-Centered Plan?

How will my meeting be conducted? What role will I have?

How will we meet; virtually or in person?

Would you help me to create my plan only or are you able to help me find services or activities in my area that I might be interested in?

How well do you know my community?



Can you advocate for me at my IPP?

When would I receive a copy of my Person-Centered plan and my One Page Profile/Description? How will you send it? (i.e. mail, encrypted email, etc?)

What happens if I want to make changes in my plan or it does not reflect who I am?

How long will it take for the entire process?

Are you willing to negotiate a price based on my specific needs?

Given what you know about what I need, how much would you charge? How is payment arranged?

Do you have an agreement that includes: a statement what you will provide me, start date, the time period, payment schedule and right to termination?



Person-Centered Planning Methods

Overview

Person-Centered Thinking skills can allow for the discovery of information and learning about a person through facilitated conversation and can include but are not limited to the following skills: Important To and For a person, How to best support a person, One Page

Descriptions/Profiles, Relationship Map, Communication Chart, Matching Supports, 2 Minute Drill, Learning Log, 4+1, Donut, and Working not Working.

Eastern Los Angeles Regional Center offers training on Person-Centered Thinking for more information go to: <https://www.elarc.org/about-us/person-centered-thinking>

Essential Lifestyle Planning assumes that there are people who are knowledgeable and know the person, but doesn't assume that there is a committed group of people around the person. Essential lifestyle plans have 4 basic sections:

The administrative section (Who the plan belongs to, who was involved in producing it.)

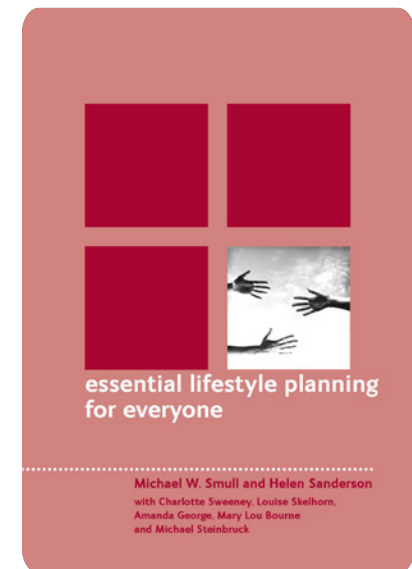
The person's section ("Good things about me." What is important to the person.)

The support section (Describes what support the person requires and what people who know and love the person believe are important for the person to be healthy and safe.)

The action plan (Reflects the discrepancy between what is described in the plan and what is happening in the person's life at the moment. Where something is important to the person and is not present in their life, an action is set to change this.)

Essential Lifestyle Planning was designed to be done inside and outside systems.

More Information: <https://allenshea.com/wp-content/uploads/2017/02/Essential-Lifestyle-Planning-for-Everyone.pdf>





Person-Centered Planning Methods

A Person-Centered Review is a person-centered/directed planning process that gathers together the people that are important in someone's life and uses person-centered thinking tools to explore what is happening from different perspectives including the person served, people important to them and other people they interact with. The goal is to come to

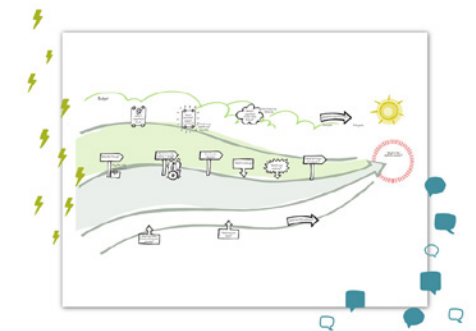
agreement on what actions might need to be implemented to create a better life and match the best supports to help achieve this.

- It focuses on what matters to the person, what support they need and what is working and not working in their life.
- The questions asked in this style of planning are: What is Important To the person now and in the future (i.e. immediate and in the long-term future. This can include his/her hopes, dreams, and aspirations for the future). What support and help does the person need to be healthy and safe based on what is important to him/her; It should not include things that the person can do for him/herself independently. Issues to work out and questions to answer. What is working not working from different perspectives from each person; and from this an action plan is developed.



Planning Live is an inclusive and engaging approach to Person-Centered planning that brings the people who are important to the planner together, in person or remotely, to listen to what is important to them and discuss a range of topics that culminates in a set of desired outcomes and a “perfect week” on which to base the planning of the person's support and spending plan if in Self-Determination.

- In situations where people live together and share a support team, Planning Live can take the form of a 2-day event, where all those involved will go through the process together, and develop a unique support plan for each person. When people cannot come together, Planning Live can be facilitated online with a planner and their invited guests using videoconferencing and interactive technology.



More information: <https://helensandersonassociates.com>

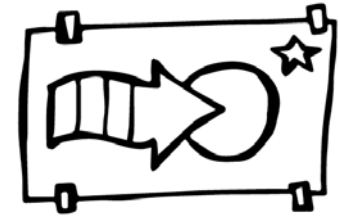


Person-Centered Planning Methods

PATH stands for Planning Alternative Tomorrow with Hope.

PATH is a group process for discovering a way to move toward a positive and possible goal, which is rooted in life purpose, by enrolling others, building strength and finding a workable strategy. It is a creative planning tool that starts with the end in mind.

- The work begins with a visioning process that focuses the person with whom planning is being done to identify their dreams and defining how they want to live at some point in the future. Then the planning process moves from the North Star backwards to an outcome of first (beginning) steps that are possible and positive.



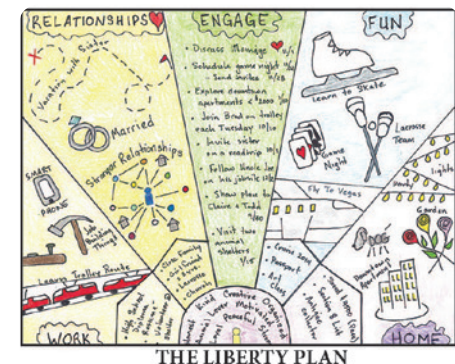
- This planning process is recorded primarily with graphics to represent the ideas shared and gathered. The questions asked in this style of planning are: What is your North Star? (i.e. ideals, values, passions, hopes, dreams) What is positive and possible to achieve within a time frame? What is happening now? Who to enroll? How to grow stronger? What are our next steps and strategies?
- This process is conducted by two facilitators, one to facilitate and one to record. Trust and confidentiality are two key issues that must be addressed and reinforced throughout this process.

More information: <https://inclusion.com/path-maps-and-person-centered-planning/>

Liberty Plan is a tailored process for cultivating possibilities in life categories that matter most to the person now. It is a chance to celebrate the person, reflect on what they want to accomplish and listen for what more the person wants to explore. It helps to engage the person in action. This planning process is recorded primarily with graphics to represent the ideas shared and gathered.

- The areas touched upon in this style of planning are: Celebrate (brag about yourself a bit), Reflect (review previous accomplishments), Listen (invite dreams, thoughts and plans to unfold), Engage (bring the future into now by creating an action plan).

More information: <https://www.lifeworks-sls.com/liberty-plan>





Person-Centered Planning Methods

MAPs stands for Making Action Plans. It is about mobilizing the circle of support that's around a person. A group of committed people who are willing to walk with the person and be with the person and typically are mostly not paid. MAPs is a way to mobilize that group and keep them mobilized and committed to continue to work towards a desirable future for that person.

- MAPs is a group process for clarifying gifts of the person, identifying meaningful contributions they can make or currently make, specifying the necessary conditions for contribution and making agreements that will develop opportunities for contribution.
- The categories covered: Hear the story, Honor the dream, Recognize the nightmare, Name the gifts, Say what it takes, Make Agreements, Celebrate.
- This planning process is recorded primarily with graphics to represent the ideas shared and gathered. This process is conducted by two facilitators, one to facilitate and one to record.



More information:

<https://helensandersonassociates.com/person-centered-approaches/maps/>



Resources For Person-Centered Thinking And Planning

Person-Centered Planning Video Clips:

Michael Smull on the evolution of person-centered thinking:

<https://www.youtube.com/watch?v=pYtDrbkZCps>

Michael Smull on what is meant by person-centered approaches, thinking and planning including PATH, MAPS Essential Lifestyle Planning?

<https://www.youtube.com/watch?v=tvANuym5VXY&t=70s>

Michael Smull conducting a person-centered planning meeting:

<https://www.youtube.com/watch?v=OQbs5JhKNXM>

Helen Sanderson describing the person-centered reviews process:

<https://youtu.be/YpRz-YEwkP8>

Julie Malette facilitating a person-centered review:

<https://www.youtube.com/watch?v=wxe-tB6wOz8>

Michael Smull Person-Centered Planning Session:

<https://www.youtube.com/watch?v=OQbs5JhKNXM>

What is Person-Centered Planning:

<https://www.youtube.com/watch?v=ECcH5SR4KzM>

5 Key parts in Person-Centered planning an easy read guide:

<https://www.youtube.com/watch?v=BSLRow7kkYs>

Beth Mount Person-Centered Planning:

<https://www.youtube.com/watch?app=desktop&v=2REk6fYDZ0Y>

Beth Mount Person-Centered vs System Centered:

<https://www.youtube.com/watch?v=y77y7XW8GtE\>



Resources For Person-Centered Thinking And Planning

One Page Profile Resources:

One page profile examples:

<https://onepageprofiles.wordpress.com/>

Getting Started with one page profiles:

<https://www.youtube.com/watch?v=ekEtStwHdhY>

One page profile templates:

<http://www.sheffkids.co.uk/adultssite/pages/onepageprofiletemplates.html>

Person-Centered Planning Resources:

Helen Sanderson Associates Planning Live:

<https://helensandersonassociates.com/person-centered-approaches/planning-live/>

Personal Futures Planning:

<http://tinyurl.com/jxe7s4l>

Allen and Shea website with a Personal Passport workbook:

<http://tinyurl.com/hvpsraj>

Person-Centered Planning: Pathways to Your Future – A toolkit for anyone interested in Person-Centered Planning, Sonoran University Center for Excellence in Disabilities, Department of Family & Community Medicine, University of Arizona – an overview of the person-centered planning process with tips for those in an individual's circle of support:

https://sonoranucedd.fcm.arizona.edu/sites/sonoranucedd.fcm.arizona.edu/files/publication/PCPToolkit_Final.pdf

Charting the Life Course:

<https://www.lifecoursetools.com/>

DDS' Individual Program Plan Resource Manual: A Person-Centered Approach:

<http://www.dds.ca.gov/RC/IPPPManual.cfm>



My Notes & Next Steps

Support Authority
Freedom Responsibility
CONFIRMATION



MODULE 4

My Individual Budget



My Individual Budget

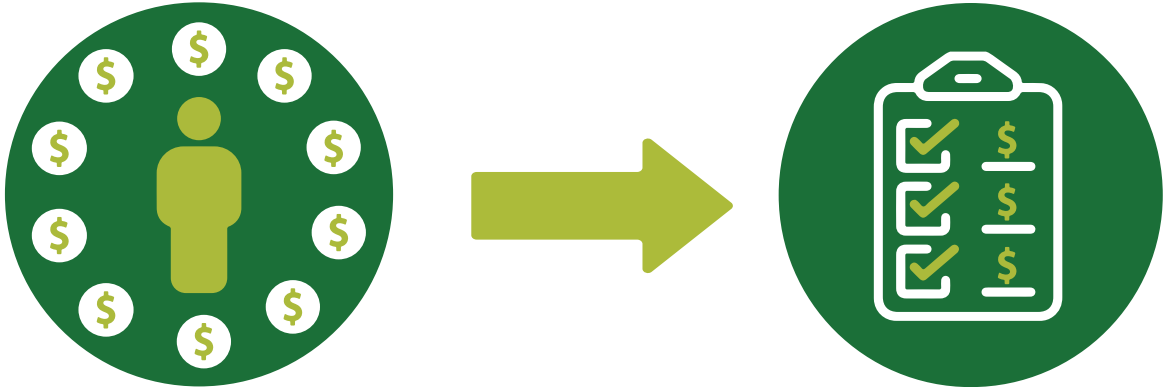
Two Important Terms

Individual Budget

The **total \$ amount** I can spend for the next 12 months

Spending Plan

How I spend my budget

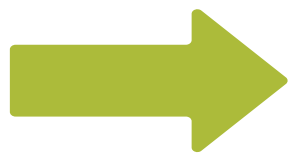


Notes:



How Is My Individual Budget Determined?

How much was spent on my services in the previous 12 months?



Notes:

Horizontal lines for taking notes.



Reasons Why My Individual Budget May Change

You have received less than 12 months of services.

Reasons for receiving less than 12 months of service could include:

- Illness
- Services started or ended within past 12 months
- Provider is not available or too far from my home
- Waiting for transportation
- Waiting for a provider to have an open spot
- No respite provider who could work the hours I needed

If you need additional services:

- My service coordinator will discuss with me at my Individual Program Plan meeting.
- My Individual Budget would change based on identified service need.
- The amount to add to my Individual Budget for these services will be determined based on the regional center average costs for similar services.



Reasons Why My Individual Budget May Change

Unmet Need

- Services in my Individual Program Plan were not used.
- There were needs not addressed in my Individual Program Plan.

OR

Change in Circumstance

- Life has changed, and so have my needs.

You will want to contact your Service Coordinator.

My Individual Budget **CANNOT** be increased...

- To pay for an Independent Facilitator (if I choose to hire one).
- To pay for the required Financial Management Service (FMS) agency.
- To pay for services or supports that I would not have been allowed under traditional services.



Reasons How My Individual Budget Can Change

At my Individual Program Plan I was “authorized” (or approved) to receive a certain amount of services.

Example:

Authorization for 30 hours of respite per month



In the past 12 months I used less services than I was “authorized” to use.

Example:

Used an average of 20 hours per month



The difference between “authorized” & used will be discussed with my service coordinator to determine if my budget should be changed.

Example:

Difference of 10 hours spent per month was not spent



How Will I Review My Individual Budget?

Step 1:

- The regional center has created a worksheet that will show what was spent in the last 12 months for all of my services.
- If a provider has not billed the regional center for some of my services, those estimated costs will be added in.
- If I had a one-time cost or a temporary service that is not anticipated to be needed in the next 12 months, it will be subtracted from the budget.

Step 2:

- Discuss with my planning team my needs.
- Money for my unmet or changed needs will be added as agreed.
- At my Individual Program Plan meeting, my service coordinator will discuss all of this with me and show me the budget worksheet.
- Costs for unmet or changed needs will be determined based on prior average costs for same or similar services.





Individual Budget Worksheet

My Individual Budget worksheet will show:

- Description of my services
- Service codes
- Amount the regional center spent in most recent 12 months
- Number of months a service was paid
- Comments, as needed
- Adjustments for additions or subtractions
- Signatures by me and my service coordinator.



Final Individual Budget

This is the amount I can spend in the Self-Determination Program over the next 12 months.

Notes:



Individual Budget Worksheet

EASTERN LOS ANGELES REGIONAL CENTER
 SELF-DETERMINATION PROGRAM
 WORKSHEET TO DETERMINE PARTICIPANT'S INDIVIDUAL BUDGET

DATE PREPARED	
Participant's Name:	
Participant's UCI#	

SECTION A: CURRENT SERVICES (To be completed by Finance staff.)

Service Description	Traditional Service Code	Amount Paid in 12 Month Period	Number of Months Paid	Notes
Subtotal Paid Current Services *		\$ -		
Add: Late Bills				
Subtract: One-Time Costs				
Total Paid Services & Late Bills		\$ -		

* Must match the most recent 12 months of actual POS expenditures per UFS report.

SECTION B: BUDGET ADJUSTMENTS (To be completed by SC with Participant per IPP meeting with cost data from finance staff.)

Service Description	Traditional Service Code	Amount to Adjust Budget for Next 12 Months	Number of Months Needed	Reason
Subtract: Services Ending				
Add: Unmet or Changed Needs				
Total Budget Adjustments		\$ -		

Note: The budget may not be increased for an independent facilitator or the FMS agency.

SECTION C: FINAL INDIVIDUAL BUDGET AMOUNT

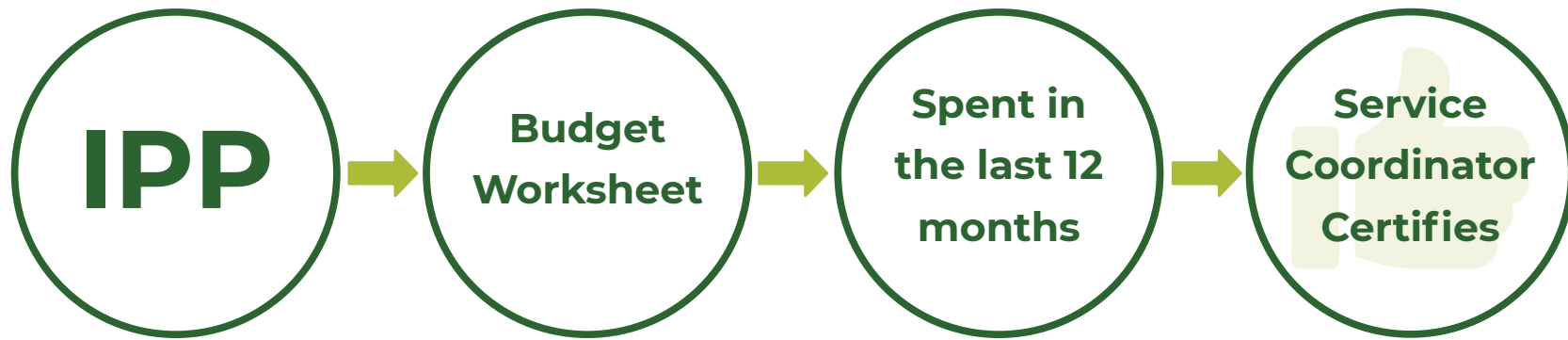
Participant's Total Individual Budget	\$ -
--	------

ELARC certifies that expenditures for the Individual Budget, including any adjustment, would have occurred regardless of the individual's participation in the Self-Determination Program.

_____ Participant Signature	_____ Date
_____ Service Coordinator's Signature	_____ Date
_____ Services & Supports Manager	_____ Date



Individual Budget Example 1 Jason



Individual Budget = \$63,100



Jason's One Page Profile




Jason's One Page Profile



The things people like and admire about me are...

- I love to work in the garden and be outdoors.
- I am a good singer
- I have many interests including hiking, video games, traveling and cooking
- I know a lot about different kinds of music and loves music! I am learning how to play guitar
- I am friendly and a good friend



What makes me happy...

- To have a job doing what he loves; working in a garden
- Singing; I enjoy singing at home and would like to explore joining a church choir
- Music; I love many different kinds of music and would like to learn how to play guitar
- To live in my own place close to my mom's house with support needed
- To continue to spend time with my friends
- To get around town when doing fun things with friends

How I like to be supported...

- Getting around town: To have transportation support to access my community when planning future activities with my friends
- Finding a job: To receive support to find a job in the area of gardening and to receive training and funds to purchase the garden tools I need
- Having my own home: To learn how to cook and do laundry before I move out on my own. Help with finding an apartment and receive support when I moves out so that I am successful
- Friends: help from others to figure out ways to have more friends who share in my same interests; i.e. hiking club, travel, video games, singing
- Be Healthy: help with finding a dietician to assist me to lose weight and remain healthy





Jason's Example Worksheet

EASTERN LOS ANGELES REGIONAL CENTER
 SELF-DETERMINATION PROGRAM
 WORKSHEET TO DETERMINE PARTICIPANT'S INDIVIDUAL BUDGET

DATE PREPARED	4/23/2019
Participant's Name:	Jason
Participant's UCI#	789123

SECTION A: CURRENT SERVICES (To be completed by Finance staff.)

Service Description	Traditional Service Code	Amount Paid in 12 Month Period	Number of Months Paid	Notes
Day Program	515	\$ 18,375.00	12	Attended 245 days
Personal Assistant	62	\$ 23,760.00	11	120 hrs per month
Independent Living Skills	520	\$ 18,805.00	11	Training
Subtotal Paid Current Services *		\$ 60,940.00		
Add: Late Bills				
Personal Assistant	62	\$ 2,160.00	1	1 month used but not yet paid
Subtract: One-Time Costs				
Total Paid Services & Late Bills		\$ 63,100.00		

* Must match the most recent 12 months of actual POS expenditures per UFS report.

SECTION B: BUDGET ADJUSTMENTS (To be completed by SC with Participant per IPP meeting with cost data from Finance staff.)

Service Description	Traditional Service Code	Amount to Adjust Budget for Next 12 Months	Number of Months Needed	Reason
Subtract: Services Ending				
Add: Unmet or Changed Needs				
Total Budget Adjustments		\$ -		

Note: The budget may not be increased for an independent facilitator or the FMS agency.

SECTION C: FINAL INDIVIDUAL BUDGET AMOUNT

Participant's Total Individual Budget	\$ 63,100.00
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ELARC certifies that expenditures for the Individual Budget, including any adjustment, would have occurred regardless of the individual's participation in the Self-Determination Program.

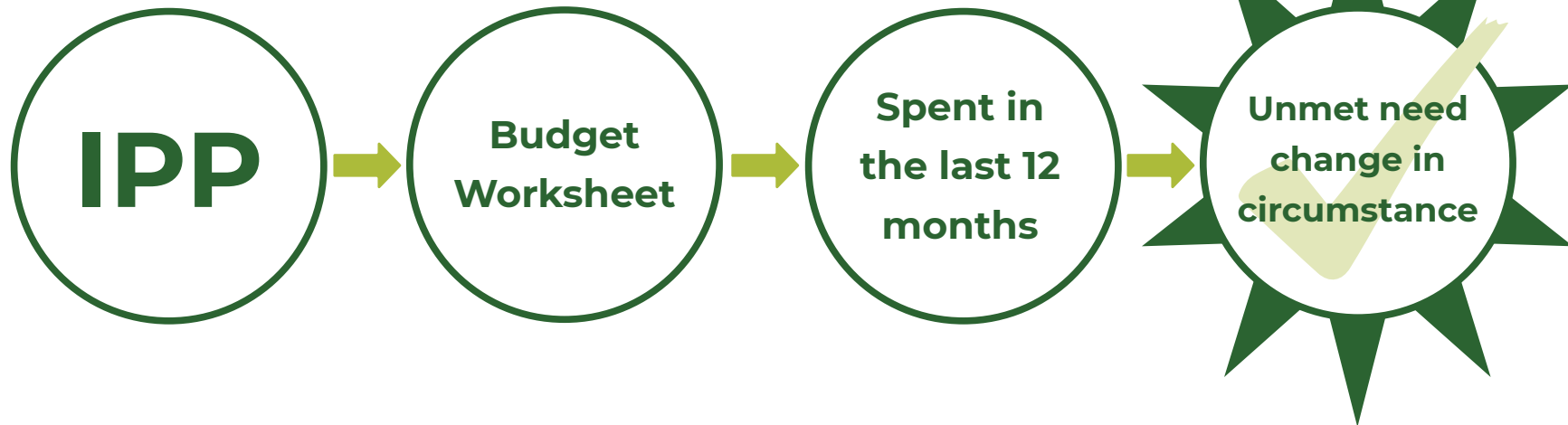
Participant Signature _____	Date _____
Service Coordinator's Signature _____	Date _____
Services & Supports Manager _____	Date _____



Individual Budget Example 2 Sofia



Change in Needs...



Adjustment to Individual Budget is needed.




Sofia's Example Worksheet



All About Sofia!



What people like and admire about me are...

- I am a good friend 
- I am creative
- I am a strong swimmer
- I take good care of our dog Rocky
- I'm a loving sister

What makes me happy...

- Being in my pool
- Watching videos on YouTube
- Playing with Rocky
- Designing pictures on my computer
- Playing with my friends
- Doing my art work
- Summer Camp
- Making new friends
- Be accepted at school
- Being independent 



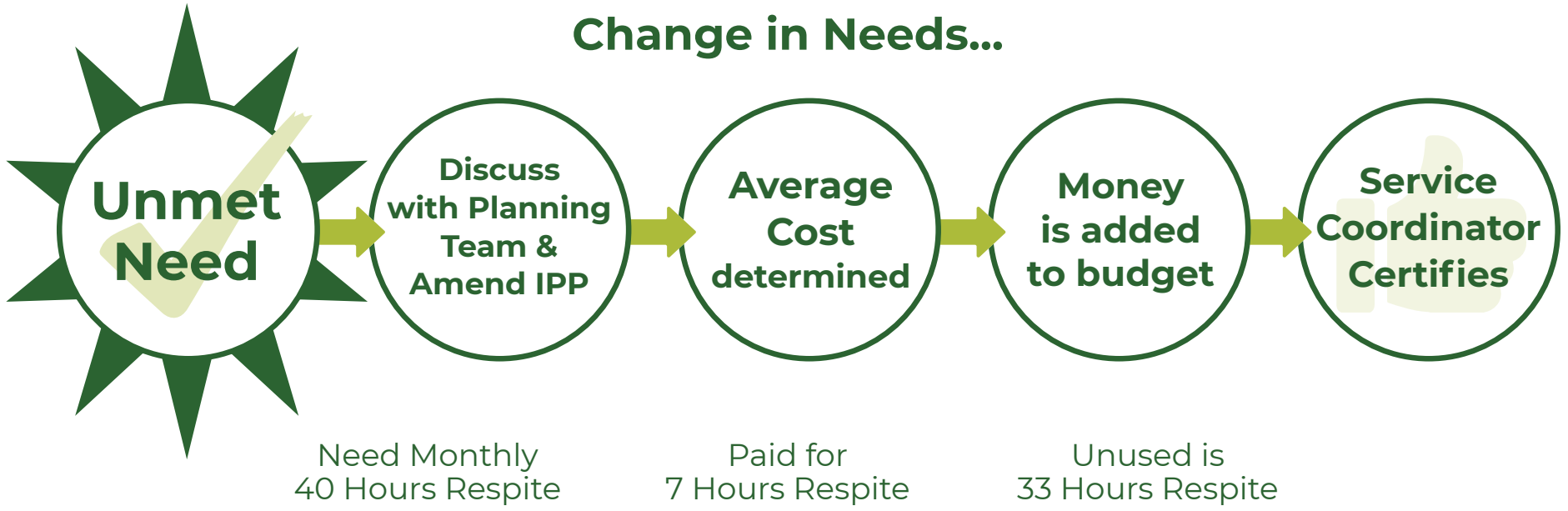
How I want to be supported...

- Coordinate times with me for transportation so I can get to hang out with my friends after school and weekends Help me find summer camps to go to.
- At school, stay back and respect my personal space until I tell you I need help then come over to help me.
- I need a special computer and a mouse to do design on the computer.
- Be available to attend art classes with me.
- Help me find an electric wheelchair and learn how to use one.



Individual Budget Example 2 Sofia

Change in Needs...



33 hours x \$25 per hour = \$825 per month x 12 months = \$9,900

Spent \$2,100	+	Unmet Need \$9,900	=	New Individual Budget \$12,000
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Sofia's Example Worksheet

EASTERN LOS ANGELES REGIONAL CENTER
SELF-DETERMINATION PROGRAM
WORKSHEET TO DETERMINE PARTICIPANT'S INDIVIDUAL BUDGET

DATE PREPARED	4/19/2019
Participant's Name:	Sofia
Participant's UCI#	123456

SECTION A: CURRENT SERVICES (To be completed by Finance staff.)

Service Description	Traditional Service Code	Amount Paid in 12 Month Period	Number of Months Paid	Notes
Respite	862	\$ 2,100.00	12	7 hrs per month used
Subtotal Paid Current Services *		\$ 2,100.00		
Add: Late Bills				
Subtract: One-Time Costs				
Total Paid Services & Late Bills		\$ 2,100.00		

* Must match the most recent 12 months of actual POS expenditures per UFS report.

SECTION B: BUDGET ADJUSTMENTS (To be completed by SC with Participant per IPP meeting with cost data from Finance staff.)

Service Description	Traditional Service Code	Amount to Adjust Budget for Next 12 Months	Number of Months Needed	Reason
Subtract: Services Ending				
Add: Unmet or Changed Needs				
Respite	862	\$ 9,900.00	12	33 hrs more per month needed
Total Budget Adjustments		\$ 9,900.00		

Note: The budget may not be increased for an independent facilitator or the FMS agency.

SECTION C: FINAL INDIVIDUAL BUDGET AMOUNT

Participant's Total Individual Budget	\$ 12,000.00
--	---------------------

ELARC certifies that expenditures for the Individual Budget, including any adjustment, would have occurred regardless of the individual's participation in the Self-Determination Program.

Participant Signature _____ Date _____

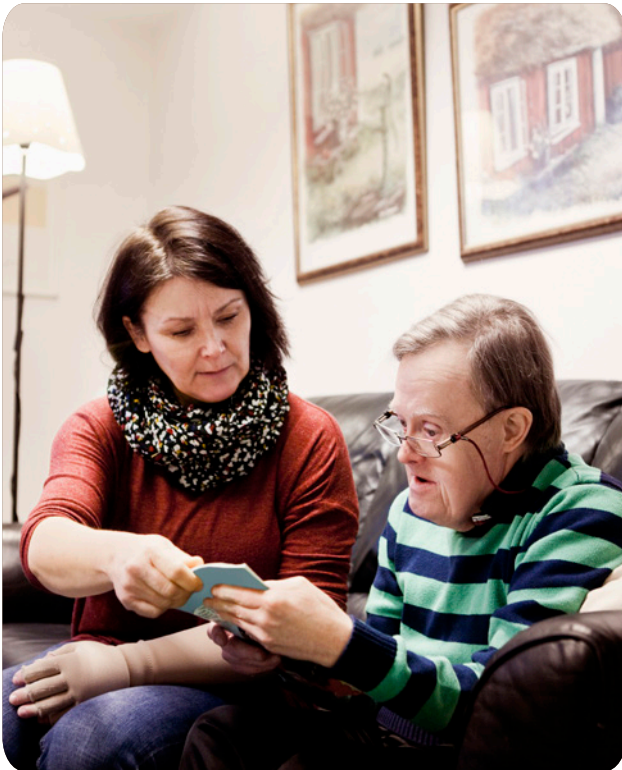
Service Coordinator's Signature _____ Date _____

Services & Supports Manager _____ Date _____



After My Individual Budget Is Finalized...

I will work with my service coordinator on my Spending Plan.



My Spending Plan Must:

- Show what services I plan on purchasing over the next 12 months.
- Include paying for my Financial Management Service (FMS) agency.
- Include paying for an Independent Facilitator (if I choose to hire one).

Notes:



My Notes & Next Steps

Support Authority
Freedom Responsibility
CONFIRMATION

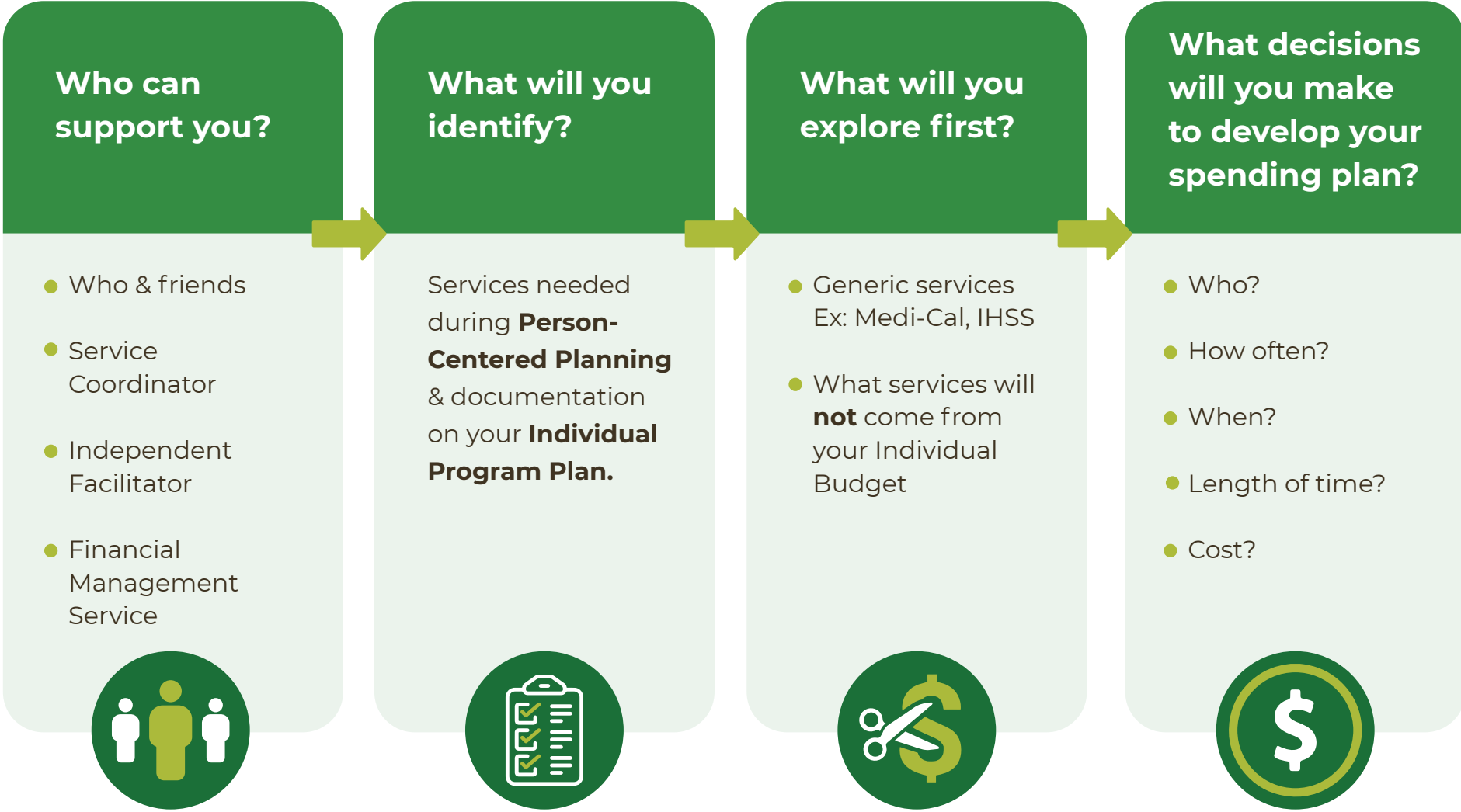


MODULE 5

My Services And Spending Plan



Developing Your Spending Plan





Services Covered In Your Spending Plan

The spending plan must meet the following criteria:

- Billable service
- Qualified provider
- Support choice and inclusion
- Can be vendored or non-vendored



Notes:



Services And Supports That CAN And CANNOT Be In Your Spending Plan

What services and supports CAN be in your spending plan?

- Living Arrangement Supports
- Employment
- Community Supports
- Health and Safety Supports

per HCBS waiver 1915©, WIC 4685.8



What services and supports CANNOT be in your spending plan?

- Generic resources
- Room and board
- Reimbursements
- Purchase or lease of a vehicle
- Regular upkeep and maintenance of vehicle
- Adaptation to vehicle for regular use
- General adaptations to home not related to disability
- Services that are diversional/recreational in nature



Generic Resources

What are Generic Resources?

What comes to mind when you think of the word “generic”?

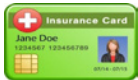
- Generic resources are public sources of funding that are required to pay for services.
- Generic resources can help you save money and help you with your budget planning.
- You must access these public sources first.

What are the legal requirements for accessing generic resources in Self Determination?

- The **SAME** requirement as in the traditional regional center system.
- According to the Lanterman Act, the regional center must exhaust all available generic resources before funding services.
- You may have to show a letter from the public source that states they cannot provide you a service or cannot provide the amount of service you need to maintain your independence.
 - **Can you think of a time you had to produce a letter to show you pursued a generic resource?**
(i.e. In-Home Support Services (IHSS) award letter to support the need for more personal assistance, a doctor’s note, a denial letter from your private health insurance, a denial letter from Dept. of Rehabilitation, etc.)



Generic Resources



Insurance or Medi-Cal

Medi-Cal / Medi-Care: may serve as a primary or secondary type of insurance, it could help pay for medical equipment, behavioral services, medication, diapers, or any other medical related expense.

Private insurance serves as the primary source of medical coverage. Some examples are: Blue Shield, Kaiser, Blue Cross, Anthem, these are common in California and may help pay for medical expenses and treatments.

www.medicare.gov

www.healthforcalifornia.com/covered-california/health-insurance-companies/medi-cal



Department of Social Services

Supplemental Security Income (SSI)/Social Security Administration (SSA): may assist with an income source if a child's family is low income OR if you're an adult and are unable to do work or do limited work. May provide income to help you with your groceries, living expenses, rent, and other personal expenses.

<https://www.cdss.ca.gov/>



Department of Rehabilitation

Department of Rehabilitation (DOR): provides support to help you prepare for work by assisting you through identifying the skills you need for employment, finding employment, and provide job coaching in the workplace to help you be successful.

<https://www.dor.ca.gov/>



In-Home Support Services

In-Home Support Services (IHSS): may provide funding to pay a personal assistant to help you take care of your daily needs which could include grocery shopping, doing your laundry, housekeeping in your home or apartment, taking you to your doctor's appointments, or someone to help keep you or your family member safe in the home or community.

<https://www.cdss.ca.gov/in-home-supportive-services>



Generic Resources



School District

School districts: your child from the age of 3-22 has the right to a free and public education

Services (CCS): children are eligible for CCS up to the age of 21, it may help pay physical and occupational therapies, medical equipment, and other medical necessities (i.e. such as a wheelchair, hooyer lift or ramp for your home)

Early and periodic screening, diagnosis and treatment (EPSDT): can detect delays, minimize impact of delays through early detection, nursing care, it can go beyond what Medi-Cal usually covers. For any child from 0-18 years of age.

What resources does your local community have?

Trusts (family): share with your Independent Facilitator or Service Coordinator a copy of your trust because there may be part of your trust to help you continue to live independently. You may want to maximize your trust benefits to ensure you are secured in one area and then you can focus on other parts of your independent living.

Transportation: Family, parents, school transportation to and from school, community transportation, buses.

CalABLE: Is a savings account that you can establish for you or your family member without affecting their public benefits (talk to your Independent Facilitator or service coordinator about CalABLE).

Some additional examples of generic resources are: city recreation departments, YMCA, public library (free internet access), local churches (community groups, music programs), local Family Resource Centers (support groups, trainings, libraries, holiday events, dances, opportunities to make friends and share your story with other parents), community colleges and universities (lots to explore in this area).



Generic Resources

Generic resources must be utilized first. This is the SAME requirement as in the traditional regional center system. According to the Lanterman Act, the regional center must exhaust all available generic resources before funding services in Self-Determination.

Why do you want to use generic resources?

- Helps you save money in your Spending Plan for other services & supports to help you live the independent life you want to live.

How do you find generic resources?

- Your service coordinator may help you explore and pursue generic resources you may qualify for. The regional center has a wealth of information about the availability of generic resources. **Ask you service coordinator!!**
- Your Independent Facilitator may help you discover and pursue generic resources you may qualify for.
- When identifying your Independent Facilitator, make sure they know the generic resources available to you and in your community, ask!!

Talk with your team if a generic resource does not meet your needs.



Self-Determination And The “Final Rule”



The Self-Determination Program is designed so that you are included in YOUR community.

- ✓ You make your own choices.
- ✓ You live in neighborhoods of your own choosing.
- ✓ You have the opportunity to work and volunteer.
- ✓ You are able to make friends with people with and without disabilities.

Notes:



Home And Community-Based Services (HCBS) Final Rule For Individuals And Families:

People with intellectual and developmental disabilities are provided many services because of the Lanterman Act. Many services people receive are paid for with state and federal money from the federal Centers for Medicare and Medicaid Services (CMS). Therefore, California must comply with what is called the Home and Community-Based Services (HCBS) Final Rule. This rule sets requirements for HCBS settings, which are places where people live or receive services. Each state has until March 2023 to help providers comply with the HCBS Final Rule.

The HCBS Final Rule Applies to:

- Residential and non-residential settings; including certified and licensed homes
- Day programs, and other day-type services
- Employment options and work programs

The HCBS Final Rule does NOT Apply to:

- Nursing homes
- Hospitals
- Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID)
- Institutions for mental diseases (IMD)

What is the Goal of the HCBS Final Rule?

To enhance the quality of services provided by:

- Maximizing opportunities and choices for individuals
- Promoting community integration by making sure individuals have full access to the community
- Making sure individuals have the opportunity to work and spend time with other people in their community who do not have disabilities
- Ensuring individual preferences are supported and rights are protected
- Establishing person-centered service planning requirements, which includes a process driven and directed by the individual to identify needed services and supports

All Settings

The Final Rule requires that you can:

- Spend time in, and being a part of, your community
- Work alongside people who do not have disabilities
- Have choices regarding services and supports, and who provides them
- Have control of your schedule and activities

Residential Settings (Provider Owned or Controlled)

In addition to the requirements applicable to all settings, the Final Rule requires that you have:

- Choice about your roommates
- Privacy in your room, including a lock on your door
- Control of your schedule and activities
- The ability to have visitors of your choosing, at any time
- Freedom to furnish and decorate your room
- A lease or other legal agreement, protecting you from eviction



Home And Community-Based Services (HCBS) Final Rule For Service Providers:

How will your service as a provider change?

If you are a service provider who provides services to multiple consumers in the same location, we have to make sure these services do not isolate individuals from the community. The Final Rule says that settings must be integrated and support full access to the community. As a provider, you may need to modify where and how your service is delivered to meet the HCBS Final Rule. Policies and program designs may need to be changed and training to your staff may be necessary to assure their understanding of the new expectations.

Assessing Provider Settings

All providers will soon be required to complete a self-assessment survey that will help determine whether or not a setting complies with the HCBS Final Rule or if modifications are needed. For settings that require changes, there will be time to develop transition plans. Training will be provided on the self-assessment process and expectations, and additional information will be posted on the DDS webpage.

Where can I find more information?

To ask a question, make a comment, or get more information about the HCBS Final Rule, email HCBSregs@dds.ca.gov. For more detailed information on the HCBS Final Rule and California's Statewide Transition Plan, please visit:
<http://www.dds.ca.gov/HCBS/>
<http://www.dhcs.ca.gov/services/ltc/Pages/HCBSStatewideTransitionPlan.aspx>
<https://www.medicaid.gov/medicaid/hcbs/index.html>

Centers for Medicare and Medicaid Services' (CMS Home & Community-Based Services (HCBS) Final Rule Requirements

The setting:

1. Is integrated in, and supports full access of individuals receiving Medicaid HCBS to the greater community to the same degree of access as individuals not receiving Medicaid HCBS.
2. Is selected by the individual from among setting options including non-disability-specific settings and an option for a private unit in a residential setting.
3. Ensures an individual's rights of privacy, dignity and respect, as well as freedom from coercion and restraint.
4. Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to: daily activities, physical environment, and with whom to interact.
5. Facilitates individual choice regarding services and supports, and who provides them.

In provider-owned or controlled residential settings:

6. The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services.
7. Each individual has privacy in their sleeping or living unit; including doors lockable by the individual, choice of a roommate if sharing a unit, and the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.
8. Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.
9. Individuals are able to have visitors of their choosing at any time.
10. The setting is physically accessible to the individual.



Setting Assessment And Process



1.

The provider will complete a self- assessment of the setting.

2.

The selected provider, the regional center and YOU will conduct an onsite assessment.

3.

If the provider passes you can use this service.

4.

If the provider does not pass, you can work with them towards change. If not, you can NOT have services in this setting.

5.

The Financial Management Service verifies the completion of the assessment process.

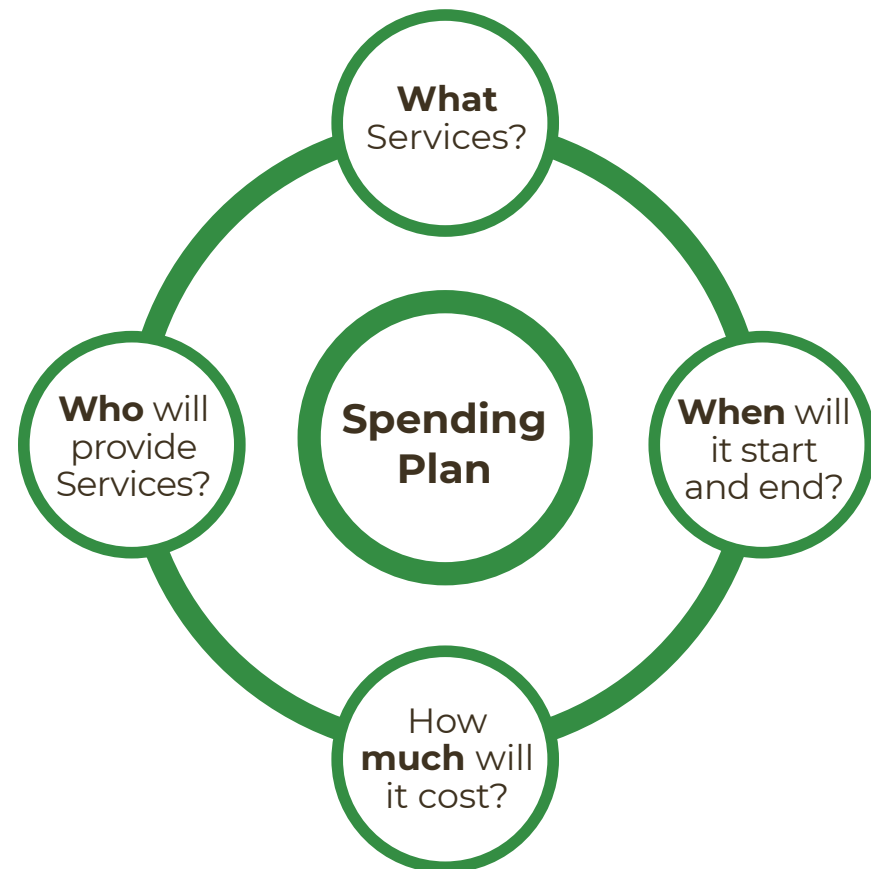
*Setting assessments are required when you're using a service with other individuals with developmental disabilities to ensure they meet the "Final Rule" requirement



Creating Your Spending Plan

You will work with your team to figure out:

- What services will support your needs?
- What category will each service fall under?
- Who will provide the service?
- How often will that service be provided?
- When will it start and end within the next 12 month period?
- How much will it cost?
- Your team will work with you to complete the Provider Agreement Assessment for each service.





Your Spending Plan In Three Budget Categories

Each service in your Spending Plan will be assigned a service code

Each service code belongs to one of these three budget categories

Living Arrangement

Supports in your home
i.e. respite or homemaker

Employment & Community Participation

Supports in your community
i.e. community integration
or individual training and education

Health & Safety

Services to help keep you healthy and safe
i.e. behavior intervention or nutritional consultation



Can You Move Funds Across Categories In Your Spending Plan?

If your needs change, you may talk to your service coordinator, Independent Facilitator, and Financial Management Service agency to discuss transferring funds across categories.

Spending Plan changes will need to be documented in your Individual Program Plan.

Allowable Spending Plan Changes:

Transferring up to 10% between categories
(approval not needed)

Transferring more than 10% between categories
(approval needed)

Notes:



Jason's Example Spending Plan

SELF-DETERMINATION PROGRAM

Jason's Spending Plan



Date Prepared	
Participant's Name	JASON
Participant's UCI#	

SPENDING PLAN

BUDGET CATEGORY	SERVICE	SERVICE CODE	FREQUENCY	AMOUNT
Living Arrangement	Community Living Supports	320	6 hours/week of home skills coaching for 12 months at \$27/hour including taxes	\$8,424
Living Arrangement	Financial Management Services (FMS)	316	Co-Employer Model @ \$165/month (7 services)	\$1,980
TOTAL FOR LIVING ARRANGEMENT CATEGORY				\$10,404
Employment & Community Participation	Employment Supports	335	40 hours/month for a gardening coach at the job site for 12 months at \$27/hour (including taxes & benefits)	\$12,960
Employment & Community Participation	Community Integration Supports	331	100/hours per month of staff support towards apartment, church, gym and during transportation to these activities for 12 months @ \$24/hour including taxes & benefits	\$28,800
Employment & Community Participation	Non-Medical Transportation	338	Uber, public transportation and ACCESS @ \$100/month	\$1,200
Employment & Community Participation	Community Integration Supports	331	12 hours/month of social coaching for 12 months at \$30/hour including taxes	\$4,320
Employment & Community Participation	Community Integration Supports	331	\$10/month to pay for YMCA gym membership for 12 months	\$120
Employment & Community Participation	Independent Facilitator	340	Facilitate PCP, Finding services	\$1,000
TOTAL FOR EMPLOYMENT & COMMUNITY PARTICIPATION CATEGORY				\$48,400
Health & Safety				
Health & Safety				
TOTAL FOR HEALTH AND SAFETY CATEGORY				\$0

TOTAL SPENDING PLAN AMOUNT	\$58,804
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Participant's Individual Budget Amount	\$63,100
---	-----------------

Parent/Legal Representative

Date

Service Coordinator

Date

Services and Supports Manager

Date



Financial Management Service Cost For Jason

5+

Number of Services Received

FMS Model	Number of Services	Max Rate Per Month
Financial Management Service as Bill Payer	1-3	\$50
	4-6	\$75
	7+	\$100
Financial Management Service as Bill Payer	1-2	\$110
	3-4	\$125
	5+	\$150
Participant & Financial Management Service as Co-Employers	1-2	\$125
	3-4	\$140
	5+	\$165

Notes:



Sofia's Example Spending Plan

SELF-DETERMINATION PROGRAM

Sofia's Spending Plan



Date Prepared	
Participant's Name	SOFIA
Participant's UCI#	

SPENDING PLAN

BUDGET CATEGORY	SERVICE	SERVICE CODE	FREQUENCY	AMOUNT
Living Arrangement	Respite Services Summer Camp	310 & 311	\$2000 to pay for Summer Camp	\$2,000
Living Arrangement	Financial Management Services (FMS)	315	Bill Payer Model @ \$75/month (4 services)	\$900
TOTAL FOR LIVING ARRANGEMENT CATEGORY				\$2,900
Employment & Community Participation	Community Integration Supports	331	Art Class	\$200
Employment & Community Participation	Community Integration Supports	331	5/hours a week of staff support after school and during art class 32 weeks/year @ \$20/hour	\$3,200
Employment & Community Participation	Community Integration Supports	331	20/hours a week of staff support in the summer 4 weeks @ \$20/hour	\$1,600
Employment & Community Participation	Independent Facilitator	340	Facilitate PCP, Access to IPP, IEP and Public Benefits Agencies	\$1,000
TOTAL FOR EMPLOYMENT & COMMUNITY PARTICIPATION CATEGORY				\$6,000
Health & Safety				
Health & Safety				
TOTAL FOR HEALTH AND SAFETY CATEGORY				\$0
TOTAL SPENDING PLAN AMOUNT				\$8,900
Participant's Individual Budget Amount				\$12,000

Parent/Legal Representative

Date

Service Coordinator

Date

Services and Supports Manager

Date



Financial Management Service Cost For Sofia

4-6

Number of Services Received

FMS Model	Number of Services	Max Rate Per Month
Financial Management Service as Bill Payer	1-3	\$50
	4-6	\$75
	7+	\$100
Financial Management Service as Bill Payer	1-2	\$110
	3-4	\$125
	5+	\$150
Participant & Financial Management Service as Co-Employers	1-2	\$125
	3-4	\$140
	5+	\$165

Notes:



Practice Creating Your Spending Plan



1. Think about one of your goals.
2. Think about how a service could help you reach that goal.
3. What category would that fall under?
4. How much might that service cost?
5. How often? Hour? Month? Year?
6. When will the service start and end?

Notes:



Practice Spending Plan

SELF-DETERMINATION PROGRAM

Date Prepared	
Participant's Name	
Participant's UCI#	

SPENDING PLAN PRACTICE

BUDGET CATEGORY	SERVICE	SERVICE CODE	FREQUENCY	AMOUNT
Living Arrangement				
TOTAL FOR LIVING ARRANGMENT CATEGORY				
Employment & Community Participation				
TOTAL FOR EMPLOYMENT & COMMUNITY PARTICIPATION CATEGORY				
Health & Safety				
TOTAL FOR HEALTH AND SAFETY CATEGORY				

TOTAL SPENDING PLAN AMOUNT	
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Participant's Individual Budget Amount	
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Self-Determination Program Service Codes By Budget Category

Budget Category	SDP Services	Service Code	Description/Providers
Living Arrangement (310 - 330)	Respite Services	310	Respite (Individual and Agency) In-home
		311	Respite Facility - Out-of-Home
	Live-In Caregiver	312	Live-In Caregiver
	Homemaker	313	Homemaker
	Housing Access Supports	314	Housing Access Supports
	Financial Management Service	315	FMS Fiscal Agent
		316	FMS Co-Employer
		317	FMS Fiscal/Employer Agent
	Community Living Supports	320	Community Living Supports (Individual & Agency)
321		Residential Facility	
Employment & Community Participation (331 - 355)	Community Integration Supports	331	Community Integration Supports
	Participant-Directed Goods & Services	333	Participant-Directed Goods and Services
	Individual Training and Education	334	Individual Training and Education
	Employment Supports	335	Employment Supports
	Technology Services	336	Technology Supports
	Transition/Set Up Expenses	337	Transition Set-Up Expenses
	Non-Medical Transportation	338	Non-Medical Transportation
	Prevocational Supports	339	Prevocational Supports
	Independent Facilitator	340	Independent Facilitator



Self-Determination Program Service Codes By Budget Category

Budget Category	SDP Services	Service Code	Description/Providers
Health and Safety (356 - 399)	Environmental Accessibility Adaptation	356	Environmental Accessibility
	Acupuncture Services	357	Acupuncture Services
	Personal Emergency Response Systems (PERS)	358	Personal Emergency Response Systems
	Home Health aide	359	Home Health Aide
	Communication Support	360	Communication Support
	Skilled Nursing	361	Skilled Nursing
	Nutritional Consultation	362	Nutritional Consultation
	Crisis Intervention & Supports	363	Crisis Intervention and Supports
	Behavioral Intervention Services	364	Behavioral Intervention Services
	Specialized Medical Equipment & Supplies	365	Specialized Medical Equipment and Supplies
	Family/Consumer Training	366	Family/Consumer Training
	Dental Services	367	Dental Services
	Lenses and Frames	368	Lenses and Frames
	Optometric-Optician Services	369	Optometric-Optician Services
	Psychology Services	370	Psychology Services
	Training & Counseling Services for Unpaid Caregivers	371	Training and Counseling Services for Unpaid Caregivers
	Speech - Hearing & Language	372	Speech - Hearing and Language
	Chiropractic Services	373	Chiropractor
	Massage Therapy	374	Massage Therapist
	Occupational Therapy	375	Occupational Therapy
Physical Therapy	376	Physical Therapy	
Vehicle Modifications & Adaptations	377	Vehicle Modifications and Adaptations	
Family Support Services	378	Child Day Care Facility	

Self-Determination Program Services Definitions

Living Arrangement – Community Living Supports

Community Living Supports are services that facilitate independence and promote community integration for participants, regardless of the community living arrangement. Services include support and assistance with socialization, personal skill development, community participation, recreation and leisure, and home and personal care, among others, as further described below. Payments for Community Living Supports do not include the cost for room and board.

Community Living Supports are provided to a participant in his/her home and community to achieve, improve, and/or maintain social and adaptive skills necessary to enable the participant to reside in the community and to participate as independently as possible. Services are provided in environments that support participant comfort, independence, preferences and the use of technology. The participant's choices are incorporated into the services and supports received. The participant has unrestricted access, and the participant's essential personal rights of privacy, dignity and respect, and freedom from coercion are protected.

The service settings are integrated in, and facilitate each participant's full access to the greater community, which includes opportunities for each participant to engage in community life, control personal resources, and receive services in the community.

The specific services provided to each participant will vary based on the individual, the individual's preferences and the community setting chosen. The specific types and mix of supports that an individual receives as well as any special provider qualifications shall be specified in the Individual Program Plan.

The following items describe the types of possible Community Living Supports:

1. Support with socialization includes development or maintenance of self-awareness and self-control, social responsiveness, social amenities, interpersonal skills, and personal relationships.
2. Support with personal skill development includes activities designed to improve the participant's own ability to accomplish activities of daily living, including eating, bathing, dressing, personal hygiene, mobility, and other essential activities.
3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
4. Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.
5. Facilitates individual choice regarding services and supports, and who provides them.

Self-Determination Program Services Definitions

In a provider-owned or controlled residential setting, in addition to the qualities specified above, the following additional conditions must be met:

The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity.

1. Each individual has privacy in their sleeping or living unit:
 - Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors.
 - Individuals sharing units have a choice of roommates in that setting.
 - Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.
2. Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.
3. Individuals are able to have visitors of their choosing at any time.
4. The setting is physically accessible to the individual.
5. The unit or dwelling may be shared by no more than four waiver participants.
6. Any modification of the additional conditions specified in items 1 through 4 above, must be supported by a specific assessed need and justified in the individual program plan (IPP). The following requirements must be documented in the (IPP):
 - Identify a specific and individualized assessed need.
 - Document the positive interventions and supports used prior to any modifications to the IPP.
 - Document less intrusive methods of meeting the need that have been tried but did not work.
 - Include a clear description of the condition that is directly proportionate to the specific assessed need.
 - Include regular collection and review of data to measure the ongoing effectiveness of the modification.
 - Include established time limits for periodic reviews to determine if the modification is still necessary or can be terminated.
 - Include the informed consent of the individual.
 - Include an assurance that interventions and supports will cause no harm to the individual.

Additionally, provider owned or leased facilities where these services are furnished must be compliant with the Americans with Disabilities Act. The method by which the costs of room and board are excluded from the payment for this service is specified in Appendix I-5.

Self-Determination Program Services Definitions

Financial Management Services

This service assists the family or participant to: (a) manage and direct the disbursement of funds contained in the participant's individual budget, and ensure that the participant has the financial resources to implement his or her Individual Program Plan (IPP) throughout the year; (b) facilitate the employment of service providers by the family or participant, as either the participant's fiscal agent or co-employer, by performing such employer responsibilities including, but not limited to, processing payroll, withholding federal, state, and local tax and making tax payments to appropriate tax authorities; and, (c) performing fiscal accounting and making expenditure reports to the participant or family and others as required.

This service includes the following activities to assist the participant in their role as either the employer or co-employer:

1. Assisting the participant in verifying worker's eligibility for employment and provider qualifications
2. Ensuring service providers employed by the participant meet criminal background checks as required and as requested by the participant.
3. Collecting and processing timesheets of workers.
4. Processing payroll, withholding, filing and payment of applicable federal, state and local employment-related taxes and insurance.
5. Tracking, preparing and distributing reports (e.g., expenditure) to appropriate individual(s)/entities.
6. Maintaining all source documentation related to the authorized service(s) and expenditures.
7. Maintaining a separate accounting for each participant's participant-directed funds.
8. Providing the participant and the regional center service coordinator with a monthly individual budget statement that describes the amount of funds allocated by budget category, the amount spent in the previous 30-day period, and the amount of funding that remains available under the participant's individual budget.
9. Ensuring payments do not exceed the amounts outlined in the participant's individual budget.
10. Fulfilling other FMS responsibilities as mandated by local, state and federal laws and regulations.

Homemaker

Services consisting of general household activities (meal preparation and routine household care) provided by an individual that has the requisite skills to perform homemaker duties specified in the participant's IPP when the individual regularly responsible for these activities is temporarily absent or unable to manage the home and care for him or herself or others in the home.

Self-Determination Program Services Definitions

Housing Access Services includes two components:

A. Individual Housing Transition Services. These services are:

1. Conducting a tenant screening and housing assessment that identifies the participant's preferences and barriers related to successful tenancy. The assessment may include collecting information on potential housing transition barriers, and identification of housing retention barriers.
2. Developing an individualized housing support plan based upon the housing assessment that addresses identified barriers, includes short and long-term measurable goals for each issue, establishes the participant's approach to meeting the goal, and identifies when other providers or services, both reimbursed and not reimbursed by Medicaid, may be required to meet the goal.
3. Assisting the individual with the housing application process. Assisting with the housing search process.
4. Assisting the individual with identifying resources to cover set-up fees for utilities or service access, including telephone, electricity, heating and water, and services necessary for the individual's health and safety, consisting of pest eradication and one-time cleaning prior to occupancy.
5. Assisting the individual with coordinating resources to identify and address conditions in the living environment prior to move-in that may compromise the safety of the consumer.
6. Assisting the individual with details of the move including communicating with the landlord to negotiate a move-in date, reading and understanding the terms of the lease, scheduling set-up of utilities and services, and arranging the move of consumers' belongings.
7. Developing a housing support crisis plan that includes prevention and early intervention services when housing is jeopardized.

B. Individual Housing & Tenancy Sustaining Services - This service is made available to support individuals to maintain tenancy once housing is secured. The availability of ongoing housing-related services in addition to other long term services and supports promotes housing success, fosters community integration and inclusion, and develops natural support networks. These tenancy support services are:

1. Providing the individual with early identification and intervention for behaviors that may jeopardize housing, such as late rental payment and other lease violations.
2. Providing the individual with education and training on the role, rights and responsibilities of the tenant and landlord.
3. Coaching the individual on developing and maintaining key relationships with landlords/property managers with a goal of fostering successful tenancy.
4. Assisting the individual in resolving disputes with landlords and/or neighbors to reduce risk of eviction or other adverse action.

Self-Determination Program Services Definitions

5. Providing the individual with advocacy and linkage with community resources to prevent eviction when housing is, or may potentially become jeopardized.
6. Assisting the individual with the housing recertification process.
7. Coordinating with the tenant to review, update and modify their housing support and crisis plan on a regular basis to reflect current needs and address existing or recurring housing retention barriers.
8. Providing the individual with continuous training in being a good tenant and lease compliance, including ongoing support with activities related to household management.

Housing Access Services do not include payment for room and board.

Persons receiving Health Homes or California Community Transitions services will not receive this service unless additional Housing Access through the waiver is necessary to maintain the consumers' health, safety and wellbeing in the home and/or community.

Live-In Caregiver

Live-in caregiver service provides the payment for the additional costs of rent and food that can be reasonably attributed to an unrelated live-in personal caregiver who resides in the same household as the participant. This payment is available only in the case of participants who receive personal care support and live in homes that they rent, lease, or own. A legal guardian may not furnish this service. The way the amount is paid is determined as specified in Appendix I-6. Payment is not made when the participant lives in the caregiver's home or in a residence that is owned or leased by the provider of Medicaid services.

Respite Services

Respite Services are provided to participants who require intermittent temporary supervision. The services are provided on a short-term basis because of the absence or need for relief of those persons who normally care for and/or supervise them and are non-medical in nature, with the exception of colostomy, ileostomy, catheter maintenance, and gastrostomy.

Respite can be any of the following:

1. Services provided by the hour on an episodic basis because of the absence of or need for relief for those persons normally providing the care to individuals.
2. Services provided by the day/overnight on a short-term basis because of the absence of or need for relief for those persons normally providing the care to individuals.
3. Services that attend to the participant's basic self-help needs and other activities of daily living, including interaction, socialization, and continuation of usual daily routines that would ordinarily be performed by those persons who normally care for and/or supervise them.



Self-Determination Program Services Definitions

Respite Services may be provided in the following locations:

- Private residence
- Residential facility approved by the State
- Other community settings that are not a private residence, such as:
 - Adult Family Home/Family Teaching Home
 - Certified Family Homes for Children
 - Adult Day Care Facility
 - Camp
 - Licensed Preschool
- FFP will not be claimed for respite services provided beyond 30 consecutive days in a facility.

Respite Services cannot be provided by the primary care provider or his/her spouse under this definition. Respite providers are required to develop and implement a back-up plan for times when they are scheduled, but are unable to come and provide the services.

Respite Services do not duplicate services provided under the Individuals with Disabilities Education Act (IDEA) of 2004. These services may only be provided when the care and supervision needs of a consumer exceed that of a person of the same age without developmental disabilities and will not be claimed for the cost of room and board except when provided as part of respite care furnished in a facility approved by the State that is not a private residence.

Employment and Community Participation – Community Integration Supports

This service is provided to participants tailored to their specific personal outcomes related to the acquisition, improvement and/or retention of skills and abilities to prepare and support the participant for community participation, interdependence, and independence.

This service supports the full access to engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving these services. In addition, this service assists the participant to learn the skills needed to participate in the community during integrated activities with individuals who are non-disabled.

The participant selects this service from among service options including non-disability specific settings. The service options are based on the participant's individualized needs and preferences. The participant receives this service in settings that are integrated in and supports full access to the greater community, and allows for participant comfort, interdependence, independence, preferences, and use of any technology. The participant's choices are incorporated into the services and supports and his/her essential personal rights of privacy, dignity and respect, and freedom from coercion are protected. The service settings must allow the participant to control personal resources and his/her schedule and activities. In addition, the settings must allow the participant to receive breaks in the same manner as a non-disabled individual.

Community Integration Supports are provided in the manner specified by the planning team to assist participants with acquisition, retention, or improvement in self-help, socialization and adaptive skills through therapeutic and/or physical activities to achieve the participant's personally defined outcomes. These services and supports may take place in a wide variety of community-based settings that promote community integration. These settings may include those nonresidential settings identified in Appendix C-5, but only if the setting is determined to meet the HCB settings requirements, using the process described in Appendix C-5. Services may be provided on a regularly scheduled basis, for one or more days per week. These services are not provided in the participant's residence.

Self-Determination Program Services Definitions

These services and supports enable the participant to attain or maintain his or her maximum functional level, interdependence, and independence, including the facilitation of connections to community events and activities. In addition, these services and supports may serve to reinforce skills or lessons taught in school, therapy, or other settings, enabling the participant to integrate into the community.

Services and supports to assist the participant to increase and improve self-help, socialization, community integration, and adaptive skills, may include:

- A.** Socialization and community awareness
- B.** Communication skills
- C.** Visual, auditory and tactile awareness, and perception experiences
- D.** Development of appropriate peer interactions and self-advocacy skills
- E.** Art and recreation programs
- F.** Continuing Education i.e., classes that help participants explore interests or improve academic skills or complete a high school equivalency (GED) diploma while in an inclusive setting
- G.** Senior and faith-based groups
- H.** Peer mentoring
- I.** Mobility services, i.e., the access and use of public transportation or other modes of transportation, including access to peer-to-peer ride sharing
- J.** Friendship and relationship building

Employment Supports

This service is provided to participants tailored to their specific personal outcomes related to the acquisition, improvement and/or retention of skills and abilities to prepare and support the participant for community participation, interdependence, independence, and/or community integrated work.

This service supports the full access of participants receiving services in the community to seek employment and work in competitive integrated settings.

Self-Determination Program Services Definitions

The participant selects this service from among service options including non-disability specific settings. The service options are based on the participant's individualized needs and preferences. The participant receives this service in settings that are integrated in and support full access to the greater community, and allows for participant comfort, interdependence, independence, preferences, and use of any technology. The participant's choices are incorporated into the services and supports and his/her essential personal rights of privacy, dignity and respect, and freedom from coercion are protected. The service settings must allow the participant to control personal resources. In addition, the settings must allow the participant to receive breaks in the same manner as a nondisabled individual.

Employment supports are individually designed and provided in the manner specified by the planning team to assist participants to gain and retain employment, including self-employment, in community integrated work environments to achieve the participant's personally defined outcomes. The intended outcome of this service is sustained paid employment at or above minimum wage in an integrated setting in the general workforce, in a job that meets personal career goals. This service does not include payment for supervision training, support and adaptations typically available to other workers without disabilities working in similar positions in the business. These services and supports also include activities related to job discovery, self-employment, and retirement.

The participant may receive any combination of Employment Supports, including:

- A.** Physical capacities development, i.e., health concerns
- B.** Psychomotor skills development
- C.** Interpersonal, communicative/social and adaptive skills development, e.g., responding appropriately to supervisors/coworkers
- D.** Work habits development, e.g., attendance and punctuality, focusing on tasks
- E.** Development of vocationally appropriate dress and grooming
- F.** Productive skills development, i.e., the achievement of productivity standards and quality results
- G.** Work-practices training, e.g., following directions, completing tasks
- H.** Work-related skills development, e.g., problem solving, path planning to future employment opportunities
- I.** Money management and income reporting skills
- J.** Development and use of natural job supports
- K.** Workforce integration techniques
- L.** Community integration development/relationship building

Self-Determination Program Services Definitions

- M.** Safety skills and training
- N.** Job discovery, job-seeking, and interviewing skills
- O.** Self-advocacy training, participant counseling, peer vocational counseling, career counseling, and peer club participation
- P.** Volunteerism to assist the person in identifying job or career interests
- Q.** Individualized assessment
- R.** Job analysis, job development and placement that produce an appropriate job match for the participant and employer
- S.** Direct supervision or training while the participant is engaged in integrated work
- T.** Job coaching provided on or off the worksite
- U.** Counseling with a participant/family and/or authorized representative to ensure support of the participant in job adjustment or planning for retirement
- V.** Counseling on benefits planning to ensure a consumer understands the relationship between earned income and receiving public benefits such as SSI, SSA, Medi-Cal, and PASS Plans
- W.** Consultation with employer's Human Relations staff
- X.** Assessment of need for technology and facilitating acquisition of communication aides and technology
- Y.** Job customization, e.g., modifications to work materials, procedures, and protocols
- Z.** Self-employment and business development, i.e., identification of potential business opportunities, business plan development, identification of needed supports, ongoing assistance and support

Transportation from the participant's residence to their place of employment is not a component of this service. The above described services and supports cannot be provided when available under a program funded under §110 of the Rehabilitation Act of 1973 (29 U.S.C. 730) or §602(16) and (17) of the Individuals with Disabilities Education Act (IDEA.) (20 U.S.C. 1401 (16 and 17)).

Self-Determination Program Services Definitions

Independent Facilitator

Independent Facilitator means a person, selected and directed by the participant, who is not otherwise providing services to the participant pursuant to his or her IPP. The service or function is intended to assist the participant to plan for and access services to implement needed services identified in the participant's IPP.

The services may include, but are not limited to:

1. Participate in the person-centered planning process.
2. Identify immediate and long-term needs, preferences, goals and objectives of the participant for developing the IPP.
3. Make informed decisions about the individual budget.
4. Develop options to meet the identified immediate and long-term needs and access community services and supports specified in the IPP.
5. Advocate on behalf of the participant in the person-centered planning process and development of the IPP, obtaining identified services and supports.

The participant/family may hire, or contract with an IF, and shall specify in the IPP the activities which the IF will conduct. A participant may elect to use his or her regional center service coordinator to fulfill the functions of an IF, instead of contracting with, or using the service of an independent facilitator. This service does not duplicate services provided by the participant's service coordinator.

Individual Training and Education

Individual Training and Education Services includes training programs, workshops and conferences that assist the participant in acquiring and building skills related to his or her responsibility as an employer, relationship building, problem solving and decision making. This service helps the participant acquire skills that facilitate the participant's self-advocacy skills, exercise the participant's human and civil rights, and exercise control and responsibility over their SDP services and supports.

This service includes enrollment fees, books and other resource/reference materials required for participation in the individual training and education, and transportation expenses, excluding airfare, that are necessary to enable participation in the individual training and education. This service does not include the cost of meals or overnight lodging. Individual Training and Education supports needs or goals identified in the participant's IPP.

This service is not provided when funding can be accessed through Public Education as required in IDEA (P.L. 105-17, the IDEA). Prior to accessing funding for this service, all other available and appropriate funding sources, including those offered by the Departments of Rehabilitation or Education must be explored and exhausted. These efforts must be documented in the participant's file.

This service does not duplicate the activities provided by the Independent Facilitator waiver service or Case Management. Neither case management nor the Independent Facilitator waiver service include the provision of training or the cost of enrollment fees. Furthermore, Independent Facilitator providers may not provide additional services to a participant. The Financial Management Services provider ensures compliance with this requirement.



Self-Determination Program Services Definitions

Non-Medical Transportation

Service offered in order to enable individuals served to gain access to the Self-Determination Program waiver and community services, employment, activities and resources, and participate in community life as specified by their Individual Program Plan. This service is offered in addition to medical transportation required under 42 CFR 431.53 and transportation services under the State plan, defined in 42 CFR 440.170(a) (if applicable), and shall not replace them. Transportation services under the waiver shall be offered in accordance with the individual's plan of care and shall include transportation aides and such other assistance as is necessary to assure the safe transport of the recipient. Private, specialized transportation will be provided to those individuals who cannot safely access and utilize public transportation services (when available). Whenever possible, the use of natural supports, such as family, neighbors, friends, or community agencies which can provide this service without charge will be utilized. All SDP participants will work with a regional center service coordinator and a Financial Management Services provider. Some will choose to also work with an Independent Facilitator. The SDP participant, and one or all of these entities will determine when the use of natural supports, such as family, neighbors, and friends have been exhausted and paid services begin.

Participant-Directed Goods and Services

Participant-Directed Goods and Services consist of services, equipment or supplies not otherwise provided through the SDP Waiver or through the Medicaid State plan that address an identified need in the IPP (including accommodating, improving and maintaining the participant's opportunities for full membership in the community) and meet the following requirements: the item or service would decrease the need for other Medicaid services; promote interdependence, and inclusion in the community; and increase the person's safety in the home environment; and the participant does not have the personal funds to purchase the item or service and the item or service is not available through another funding source. The participant-directed goods and services must be documented in the participant's Individual Program Plan and purchased from the participant's Individual Budget. Experimental or prohibited treatments are excluded.

Prevocational Supports

This service is provided to participants tailored to their specific personal outcomes related to the acquisition, improvement and/or retention of skills and abilities to support and prepare the participant for community participation, interdependence, independence, and/or community integrated work.

The participant selects this service from among service options including non-disability specific settings. The service options are based on the participant's individualized needs and preferences.

The participant receives this service in settings that are integrated in and support full access to the greater community, and allows for participant comfort, interdependence, independence, preferences, and use of any technology. The participant's choices are incorporated into the services and supports and his/her essential personal rights of privacy, dignity and respect, and freedom from coercion are protected. The service settings must allow the participant to control personal resources. In addition, the settings must allow the participant to receive breaks in the same manner as a non-disabled individual.

Prevocational supports are individually designed and provided in the manner specified by the planning team to assist participants to gain employment, including self-employment or volunteer work, in community integrated environments to achieve the participant's personally defined outcomes. These services and supports also include activities related to job discovery, self-employment, and retirement. The intended outcome of this service is to further habilitation goals that will lead to greater opportunities for competitive integrated employment and career advancement at or above minimum wage.



Self-Determination Program Services Definitions

The participant may receive any combination of Prevocational Supports, including:

- Physical capacities development, i.e., health concerns.
- Psychomotor skills development.
- Interpersonal, communicative/social and adaptive skills development, e.g., responding appropriately to supervisors/coworkers.
- Work habits development, e.g., attendance and punctuality, focusing on tasks.
- Development of vocationally appropriate dress and grooming.
- Productive skills development, i.e., the achievement of productivity standards and quality results.
- Work-practices training, e.g., following directions, completing tasks.
- Work-related skills development, e.g., problem solving, path planning to future employment opportunities.
- Money management and income reporting skills.
- Volunteerism to assist the person in identifying job or career interests.

Prevocational supports are designed to prepare individuals in non-job-task-specific strengths and skills that contribute towards obtaining a competitive and integrated employment, as opposed to vocational services whose sole purpose is to provide employment without habilitation goals geared towards skill building. Transportation from the participant's residence is not a component of this service. The above described services and supports cannot be provided when available under a program funded under §110 of the Rehabilitation Act of 1973 (29 U.S.C. 730) or §602(16) and (17) of the Individuals with Disabilities Education Act (IDEA.) (20 U.S.C. 1401 (16 and 17)).

Technology

Technology is an item, piece of equipment, or product system, whether acquired commercially, modified, or customized, that is used to promote community integration, independence, and increase, maintain, or improve functional capabilities of participants.

Allowable technology services, as specified in the participant's IPP include:

1. Evaluation of technology needs of a participant, including a functional evaluation of the impact of the provision of appropriate technology and appropriate services to the participant in the customary environment of the participant.
2. Purchasing, leasing, or otherwise providing for the acquisition of any technology device: cell phones (monthly bill, cell phone apps), iPads, tablets, and laptops. Service includes insurance and training on the use of any technology device.

Self-Determination Program Services Definitions

3. Selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing technology devices.
4. Training or technical assistance for the participant, or where appropriate, their family members, guardians, advocates, or authorized representatives of the participant.
5. Training or technical assistance for professionals or other individuals who provide services to, employ, or are otherwise substantially involved in the major life functions of participant.

Technology may only be purchased under the SDP Waiver if it is not available through the state plan.

Transition/Set Up Expenses: Other Services

Transition/Set Up Expenses are one-time, non-recurring set-up expenses to assist individuals who are transitioning from an institution to their own home in the community. These expenses fund some of the initial set-up costs that are associated with obtaining and securing an adequate living environment and address the individual's health and safety needs when he or she enters a new living environment. "Own home" is defined as any dwelling, including a house, apartment, condominium, trailer, or other lodging that is owned, leased, or rented by the individual.

This service includes necessary furnishings, household items and services that an individual needs for successful transition to community living and may include:

1. Security deposits that are required to obtain a lease on an apartment or home
2. Moving expenses
3. Health and safety assurances, such as pest eradication, allergen control or one-time cleaning prior to occupancy
4. Set up fees or non-refundable deposits for utilities (telephone, electricity, heating by gas)
5. Essential furnishings to occupy and use a community domicile, such as a bed, table, chairs, window blinds, eating utensils, food preparation items, etc.

These services exclude:

1. Items designed for diversionary/recreational/entertainment purposes, such as hobby supplies, television, cable TV access, or VCRs and DVDs.
2. Room and board, monthly rental or mortgage expense, regular utility charges, household appliances, and food.

Items purchased through this service are the property of the individual receiving the service and the individual takes the property with him/her in the event of a move to another residence. Some of these expenses may be incurred before the individual transitions from an institution to the community. In such cases, the Transition/Set Up expenses incurred while the person was institutionalized are not considered complete until the date the individual leaves the institution and is enrolled in the waiver. Transition/Set Up expenses included in the individual's plan of care may be furnished up to 180 days prior to the individual's discharge from an institution. However, such expenses will not be considered complete until the date the individual leaves the institution and is enrolled in the waiver.

Self-Determination Program Services Definitions

Health and Safety – Acupuncture Services

Acupuncture services are covered to prevent, modify, or alleviate the perception of severe, persistent chronic pain resulting from a generally recognized medical condition. Acupuncture is defined in the Business and Professions Code, Section 4927 as “the stimulation of a certain point or points on or near the surface of the body by the insertion of needles to prevent or modify the perception of pain or to normalize physiological functions, including pain control, for the treatment of certain diseases or dysfunctions of the body and includes the techniques of electroacupuncture, cupping, and moxibustion.” Acupuncture services (with or without electric stimulation of the needles) are limited to two services in any one calendar month, although additional services can be provided based upon medical necessity. All acupuncture services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Acupuncture services in this waiver are only provided to individuals age 21 and over and only when the limits of services furnished under the approved state plan are exhausted.

Behavioral Intervention Services

Behavior intervention services include the use and development of intensive behavioral intervention programs to improve the participant’s development and behavior tracking and analysis. The intervention programs are restricted to generally accepted, evidence-based, positive approaches. Depending on the participant’s needs, behavioral intervention services may be provided in multiple settings, including the participant’s home, workplace, etc. Behavioral intervention services are designed to assist individuals in acquiring, retaining and improving the self-help, socialization and adaptive skills necessary to reside successfully in home and community-based settings. Services may be provided to family members if they are for the benefit of the participant. Services for family members may include training and instruction about treatment regimens, including training on the use of medications, and risk management strategies to enable the family to support the participant.

The participation of parent(s) of minor children is critical to the success of a behavioral intervention plan. The person- centered planning team determines the extent of participation necessary to meet the individual’s needs. “Participation” includes the following meanings: Completion of group instruction on the basics of behavior intervention; Implementation of intervention strategies, according to the intervention plan; If needed, collection of data on behavioral strategies and submission of that data to the provider for incorporation into progress reports; Participation in any needed clinical meetings; provision of suggested nominal behavior modification materials or community involvement if a reward system is used. If the absence of sufficient participation prevents successful implementation of the behavioral plan, other services will be provided to meet the individual’s identified needs. This service in the HCBS Waiver is only provided to individuals age 21 and over. All medically necessary Behavioral Intervention Services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit.

Chiropractic Service

Chiropractic services include the manual manipulation of the spine to prevent, modify, or alleviate the perception of severe, persistent chronic pain resulting from a generally recognized medical condition. A chiropractor may use all necessary mechanical, hygienic, and sanitary measures incident to the care of the body, including, air, cold, diet, exercise, heat, light, massage, physical culture, rest, ultrasound, water, and physical therapy techniques in the course of chiropractic manipulations and/or adjustments. All medically necessary Chiropractic services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Chiropractic services in this waiver are only provided to individuals age 21 and over and only when the limits of services furnished under the approved state plan are exhausted.

Self-Determination Program Services Definitions

Communication Support

Communication support services includes communication aides necessary to facilitate and assist persons with hearing, speech, or vision impairment, including individuals who do not speak English as their primary language and who have a limited ability to read, write, speak or understand English (Limited English Proficient or LEP skills). The purpose of this service is to assist individuals to effectively communicate with service providers, family, friends, co-workers, and the general public.

The following are allowable communication aides, as specified in the participant's IPP:

1. Facilitators
2. Interpreters and interpreter services
3. Translators and translator services
4. Readers and reading services

This service also includes supports for the participant to use computer technology to assist in communication. Such supports include training in the use of the technology, assessment of need for ongoing training and support, and identification of resources for the support. This service is limited to personnel providing assistance and does not include the purchase of equipment or supplies. Communication support services include evaluation for, and training in the use of, communication aides, including for individuals with LEP skills, as specified in the participant's IPP.

Crisis Intervention and Support

Crisis Intervention and Support is a specialized service that provides short-term care and behavior intervention to provide relief and support of the caregiver and protection for the participant or others living with the participant. This service may include the use and development of intensive behavioral intervention programs to improve the participant's development and behavior tracking and analysis. This service is restricted to generally accepted, evidence-based, positive approaches.

This service is designed to assist participants in acquiring, retaining and improving the self-help, socialization and adaptive skills necessary to reside successfully in home and community-based settings. The service may be provided to family members if they are for the benefit of the participant. The service for family members may include training and instruction about treatment regimens, including training on the use of medications, and risk management strategies to enable the family to support the participant. The participation of parent(s) of minor children is critical to the success of a behavioral intervention program.

The person-centered planning team determines the extent of participation necessary to meet the participant's needs. Crisis Intervention and Support includes mobile crisis intervention in the participant's home, and/or community or where crisis intervention services are needed. Mobile crisis intervention means immediate therapeutic intervention on a 24-hour emergency basis to a participant exhibiting acute personal, social, and/or behavioral problems. Mobile crisis intervention provides immediate and time-limited professional assistance to a participant who is experiencing personal, social or behavioral problems which, if not ameliorated, will escalate and require that the participant be moved to a setting where additional services are available.

Self-Determination Program Services Definitions

As necessary, Crisis Intervention and Support is composed of the following participant-specific activities:

1. Assessment to determine the precipitating factors contributing to the crisis.
2. Development of an intervention plan in coordination with the planning team.
3. Consultation and staff training to the service provider as necessary to ensure successful implementation of the participant's specific intervention plan.
4. Collection of data on behavioral strategies and submission of that data to the caregiver or provider for incorporation into progress reports.
5. Participation in any needed clinical meetings.
6. Development and implementation of a transition plan to aid the participant in returning home if out-of-home crisis intervention was provided.
7. Ongoing technical assistance to the caregiver or provider in the implementation of the intervention plan developed for the participant.
8. Provision of recommendations to prevent or minimize future crisis situations in order to increase the likelihood of maintaining the participant in the community. incorporation into progress reports.

Dental Services

Dental services are defined in Title 22, California Code of Regulations, Section 51059 as professional services performed or provided by dentists including diagnosis and treatment of malposed human teeth, of disease or defects of the alveolar process, gums, jaws and associated structures; the use of drugs, anesthetics and physical evaluation; consultations; home, office and institutional calls.

All medically necessary dental services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Dental services in this waiver are only provided to individuals age 21 and over and only when the limits of dental services furnished under the approved state plan are exhausted. Dental services in the approved state plan are limited to \$1800 annually or by the amount that is determined medically necessary.

Environmental Accessibility Adaptations

Those physical adaptations to the participant's home, required by the individual's IPP, which are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home, and without which, the individual would be at risk for institutionalization. These services are allowed only when another entity (i.e. landlord) is not responsible for making the needed adaptation(s).

Such adaptations may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems which are necessary to accommodate the medical equipment and supplies which are necessary for the welfare of the individual. Provided that they are allowable, other environmental accessibility adaptations and repairs may be approved on a case-by-case basis as technology changes or as a participant's physical or environmental needs change.



Self-Determination Program Services Definitions

Environmental Accessibility Adaptations Cont.

Excluded are those adaptations or improvements to the home which are of general utility, and are not of direct medical or remedial benefit to the individual, such as carpeting, roof repair, central air conditioning, etc.. All services shall be provided in accordance with applicable State or local building codes.

- It may be necessary to make environmental modifications to an individual's home before he/she transitions from an institution to the community. Such modifications may be made while the person is institutionalized. Environmental modifications, included in the individual's plan of care, may be furnished up to 180 days prior to the individual's discharge from an institution. However, such modifications will not be considered complete until the date the individual leaves the institution and is enrolled in the waiver.

Family/Consumer Training

Family/consumer support and training services are provided, as needed, in conjunction with extended state plan services in this waiver. These services include training by licensed providers to maintain or enhance the long-term impact of treatment provided. This includes support or counseling for the consumer and/or family to ensure proper understanding of the treatment provided and what supports are needed in the recipient's home environment to enhance the treatments.

These services will be provided to individuals age 21 and older.

Family Support Services

Regularly provided care and supervision of children, for periods of less than 24 hours per day, while the parents/primary non-paid caregiver are out of the home.

This service is provided in the recipient's own home or in an approved out of home location to do all of the following:

1. Assist family members in maintaining the recipient at home
2. Provide appropriate care and supervision to protect the recipient's safety in the absence of family members
3. Relieve family members from the constantly demanding responsibility of caring for a recipient
4. Attend to the recipient's basic self-help needs and other activities of daily living, including interaction, socialization, and continuation of usual daily routines which would ordinarily be performed by family members.

Home Health Aide

Home health aide services defined in 42 CFR §440.70 are provided to individuals age 21 and over and only when the limits of home health aide services furnished under the approved State plan limits are exhausted. Home health aide services under the state plan are limited to the amount that is determined medically necessary. All medically necessary home health aide services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. The scope and nature of these services do not differ from home health aide services furnished under the State plan. Services are defined in the same manner as provided in the approved State plan. The provider qualifications specified in the State plan apply.

Self-Determination Program Services Definitions

Lenses and Frames

This service covers prescription lenses and frames for consumers over 21 as prescribed by a physician and only when the limits of prescription lenses and frames furnished under the approved state plan are exhausted. All medically necessary Prescription Lens/Frames for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Prescription Lens/Frames under the state plan are limited to beneficiaries under 21 years old and residents of a nursing home. The provider qualifications listed in the plan will apply, and are hereby incorporated into this waiver request by reference. Prescription lenses and frames will not supplant services available through the approved Medicaid State plan or the EPSDT benefit.

Massage Therapy

Massage Therapy is the scientific manipulation of the soft tissues of the body for the purpose of normalizing those tissues and consists of manual techniques that include applying fixed or movable pressure, holding, and/or causing movement of or to the body. Massage therapy would be provided to a participant as part of an effective continuum of care throughout the course of a medical condition.

Nutritional Consultation

Nutritional consultation includes the provision of consultation and assistance in planning to meet the nutritional and special dietary needs of participants. These services are consultative in nature and do not include specific planning and shopping for, or preparation of meals for participants.

Occupational Therapy

Occupational Therapy services are defined in Title 22, California Code of Regulations, Sections 51085, and 51309 as services designed to restore or improve a person's ability to undertake activities of daily living when those skills are impaired by developmental or psychosocial disabilities, physical illness or advanced age. Occupational therapy includes evaluation, treatment planning, treatment, instruction and consultative services.

All medically necessary occupational therapy services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Occupational therapy in this waiver is only provided to individuals age 21 and over and only when the limits of occupational therapy services furnished under the approved state plan are exhausted. Occupational therapy services in the approved state plan are limited to a maximum of two services in any one calendar month or any combination of two services per month from the following services: audiology, acupuncture, chiropractic, psychology, podiatry, and speech therapy or the amount determined medically necessary.

Optometric/Optician Services

Optometric/Optician Services are defined in Title 22, California Code of Regulations, Sections 51093 and 51090, respectively. Optometric services means any services an optometrist may perform under the laws of this state. Dispensing optician means an individual or firm which fills prescriptions of physicians for prescription lenses and kindred products and fits and adjusts such lenses and spectacle frames. A dispensing optician is also authorized to act on the advice, direction and responsibility of a physician or optometrist in connection with the fitting of a contact lens or contact lenses.

All medically necessary Optometric/Optician services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Optometric/Optician services in this waiver are only provided to individuals age 21 and over and only when the limits of Optometric/Optician services furnished under the approved state plan are exhausted. Optometric/Optician Services under the state plan are limited to one eye exam every 24 months, however, this limit can be exceeded based on medical necessity. The provider qualifications listed in the plan will apply, and are hereby incorporated into this request by reference.



Self-Determination Program Services Definitions

Lenses and Frames

This service covers prescription lenses and frames for consumers over 21 as prescribed by a physician and only when the limits of prescription lenses and frames furnished under the approved state plan are exhausted. All medically necessary Prescription Lens/Frames for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Prescription Lens/Frames under the state plan are limited to beneficiaries under 21 years old and residents of a nursing home. The provider qualifications listed in the plan will apply, and are hereby incorporated into this waiver request by reference. Prescription lenses and frames will not supplant services available through the approved Medicaid State plan or the EPSDT benefit.

Personal Emergency Response Systems (PERS)

PERS is a 24-hour emergency assistance service which enables the recipient to secure immediate assistance in the event of an emotional, physical, or environmental emergency. PERS are individually designed services to meet the needs and capabilities of the participant and includes training, installation, repair, maintenance, and response needs.

The allowable service includes the following:

1. 24-hour answering/paging
2. Beepers
3. Med-alert bracelets
4. Intercoms
5. Life-lines
6. Fire/safety devices, such as fire extinguishers and rope ladders
7. Monitoring services
8. Light fixture adaptations (blinking lights, etc.)
9. Telephone adaptive devices not available free of charge from the telephone company
10. Other devices/services designed for emergency assistance

PERS services are limited to those individuals who have no regular caregiver or companion for periods of time, and who would otherwise require a greater amount of routine supervision. By providing immediate access to assistance, PERS services prevent institutionalization of these individuals and allow them to remain in the community. All items shall meet applicable standards of manufacture, design, and installation. Repairs to and maintenance of such equipment shall be performed by the manufacturer's authorized dealers where possible.

Self-Determination Program Services Definitions

Physical Therapy

Physical Therapy services are defined in Title 22, California Code of Regulations, Sections 51081, and 51309 as services of any bodily condition by the use of physical, chemical, and or other properties of heat, light, water, electricity or sound, and by massage and active, resistive or passive exercise. Physical therapy includes evaluation, treatment planning, treatment, instruction, consultative services, and application of topical medications.

All medically necessary physical therapy services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Physical therapy in this waiver is only provided to individuals age 21 and over and only when the limits of physical therapy services furnished under the approved state plan are exhausted. Physical therapy services in the approved state plan are limited to six month treatments and may be renewed if determined medically necessary.

Psychology Services

Psychology Services are defined in Title 22, California Code of Regulations, Section 51099 as the services of a person trained in the assessment, treatment, prevention, and amelioration of emotional and mental health disorders.

All medically necessary psychology services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Psychology services in this waiver are only provided to individuals age 21 and over and only when the limits of psychology services furnished under the approved state plan are exhausted. The approved state plan limits this service to the amount that is medically necessary.

Skilled Nursing

Services listed in the plan of care which are within the scope of the State's Nurse Practice Act and are provided by a registered professional nurse, or licensed practical or vocational nurse under the supervision of a registered nurse, licensed to practice in the State.

Skilled nursing is only provided to individuals age 21 and over. All medically necessary skilled nursing services for children under the age of 21 are covered in the state plan pursuant to EPSDT benefit. Skilled nursing services will not supplant services available through the approved Medicaid State plan under the home health benefit or the EPSDT benefit.

Self-Determination Program Services Definitions

Specialized Medical Equipment and Supplies

Specialized medical equipment and supplies include: (a) devices, controls, or appliances, specified in the IPP, that enable participants to increase their ability to perform activities of daily living; (b) devices, controls, or appliances that enable the participant to perceive, control, or communicate with the environment in which they live; (c) items necessary for life support or to address physical conditions along with ancillary supplies and equipment necessary to the proper functioning of such items; (d) such other durable and non-durable medical equipment and supplies not available under the State plan that is necessary to address participant functional limitations; and, (e) necessary medical supplies not available under the State plan. The repair, maintenance, installation, and training in the care and use, of these items is also included. Items reimbursed with waiver funds are in addition to any medical equipment and supplies furnished under the State plan and exclude those items that are not of direct medical or remedial benefit to the participant. All items shall meet applicable standards of manufacture, design, and installation, and must meet Underwriter's Laboratory or Federal Communications

Commission codes, as applicable. Repairs to and maintenance of such equipment shall be performed by the manufacturer's authorized dealer where possible.

Speech, Hearing and Language Services

Speech, Hearing and Language services are defined in Title 22, California Code of Regulations, Sections 51096, 51098, and 51094.1 as speech pathology audiology services, and hearing aids, respectively. Speech pathology services means services for the purpose of identification, measurement and correction or modification of speech, voice or language disorders and conditions, and counseling related to such disorders and conditions. Audiological services means services for the measurement, appraisal, identification and counseling related to hearing and disorders of hearing; the modification of communicative disorders resulting from hearing loss affecting speech, language and auditory behavior; and the recommendation and evaluation of hearing aids. Hearing aid means any aid prescribed for the purpose of aiding or compensating for impaired human hearing loss.

All medically necessary speech, hearing and language services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Speech, hearing and language services in this waiver are only provided to individuals age 21 and over and only when the limits of speech, hearing and language services furnished under the approved state plan are exhausted. Speech, hearing and language services in the approved state plan are limited to two services in any one calendar month or any combination of two services per month; Hearing aid benefits are subject to a \$1,510 maximum cap per beneficiary per fiscal year or the amount determined medically necessary.

Training and Counseling Services for Unpaid Caregivers

Training and counseling services for individuals who provide unpaid support, training, companionship or supervision to participants. For purposes of this service, "individual" is defined as any person, family member, neighbor, friend, companion or co-worker who provides uncompensated care, training, guidance, companionship or support to a person served on the waiver. This service may not be provided to train paid caregivers. Training includes instruction about services and supports included in the IPP, use of equipment specified in the IPP, and updates as necessary to safely maintain the participant at home. Counseling must be aimed at assisting the unpaid caregiver in meeting the needs of the participant. All training for individuals who provide unpaid support to the participant must be included in the IPP. The service includes the cost of registration and training fees associated with formal instruction in areas relevant to participant needs identified in the IPP. The costs for travel, meals and overnight lodging to attend a training event or conference are not covered under this service definition. This service does not duplicate the services provided under the waiver service Family/Consumer Training.



Self-Determination Program Services Definitions

Vehicle Modifications and Adaptations

Vehicle adaptations are devices, controls, or services which enable participants to increase their independence, enable them to integrate more fully into the community, and to ensure their health and safety. The repair, maintenance, installation, and training in the care and use of these items are included. Vehicle adaptations must be performed by the adaptive equipment manufacturer's authorized dealer. Repairs to and maintenance of such equipment shall be performed by the manufacturer's authorized dealer where possible.

Vehicle adaptations include, but are not limited to, the following:

1. Door handle replacements
2. Door widening
3. Lifting devices
4. Wheelchair securing devices
5. Adapted seat devices
6. Adapted steering, acceleration, signaling, and braking devices
7. Handrails and grab bars

Adaptations to vehicles shall be included if, on an individual basis, the cost effectiveness of vehicle adaptations, relative to alternative transportation services, is established. Adaptations to vehicles are limited to vehicles owned by the recipient, or the recipient's family and do not include the purchase of the vehicle itself. The recipient's family includes the recipient's biological parents, adoptive parents, stepparents, siblings, children, spouse, domestic partner (in those jurisdictions in which domestic partners are legally recognized), or a person who is a legal representative of the recipient. Vehicle adaptations will only be provided when they are documented in the individual plan of care and when there is a written assessment by a licensed Physical Therapist or a registered Occupational Therapist. The vehicle may be owned by the participant or a family member with whom he or she lives or has consistent and ongoing contact, who provides primary long-term support to the participant, and who is not a paid provider of such services.



Self-Determination Program Maximum Financial Management Services (FMS) Rates

FMS Model	Number of Services	Max Rate Per Month
Financial Management Service as Bill Payer	1-3	\$50
	4-6	\$75
	7+	\$100
Financial Management Service as Bill Payer	1-2	\$110
	3-4	\$125
	5+	\$150
Participant & Financial Management Service as Co-Employers	1-2	\$125
	3-4	\$140
	5+	\$165

Note: If the Financial Management Service provides payments through more than one of the models above for a participant, then the maximum rate for that participant cannot exceed the highest cost model for the total number of services. For example, if a participant is using five services, and the Financial Management Service is a “bill payer” for two services and a “co- employer” for three services, the maximum rate charged to the participant cannot exceed \$165 per month. **In all cases, the participant and Financial Management Service can agree to rates lower than the maximum rates above.**



My Notes & Next Steps

Support Authority
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MODULE 6

Financial Management Services (FMS)



What Is A Financial Management Services (FMS) Agency?

- A Financial Management Services (FMS) agency is a business that helps the participants in the Self- Determination Program (SDP) to manage their Self- Determination Program budget and pay for services they need.
- This is a required service for the Self-Determination program.
- You choose a Financial Management Service agency to help you.
- Payment for the Financial Management Service agency comes from your spending plan.

Notes:



How Will The Financial Management Service Agency Help Me?

- ✓ Provides the forms and information for background checks on my employees
- ✓ Pays for the services I choose
- ✓ Helps me manage my Spending Plan
- ✓ Gives me a monthly report about my Spending Plan
- ✓ Makes sure labor and tax laws are followed



Notes:



About Background Checks

The people you hire to assist you with personal care services such as assistance with dressing, grooming, bathing or personal hygiene needs, are required to obtain a background check.

You or your Financial Management Service Provider may also request a background check for any other provider of services you hire, either through an agency or as an individual.

Background checks are not transferable, so even if someone has done a background check in the past, they will need to do it again to be part of the Self- Determination Program.

It is the responsibility of the person providing you the service to pay for the background check.

Your Financial Management Service agency will provide the forms and information necessary for the background check.

The results will be sent directly to the Department of Developmental Services, who are responsible for tracking the background check. They will then be sent to your Financial Management Service agency who will notify you.

Notes:



Choosing A Financial Management Service Agency

Think about what I need and what I want

What do I NEED?

- ✓ Do I need help with employees?
- ✓ Do I need more help or reminders to keep within my Spending Plan?
- ✓ Do I just need the Financial Management Service to pay the bills and send me statements?

What do I WANT?

Full responsibility for my employees?

OR

Help with the business requirements of having employees?

How can I find the right Financial Management Service agency for me?

- Ask others such as a family member, service coordinator or Independent Facilitator for their opinion to help select.
- Ask other Self-Determination Program participants for suggestions or references.
- Interview people at the Financial Management Service agency to get questions answered.



Possible Questions For Financial Management Service (FMS) Agencies

1. How much do you know about California's Self- Determination Program?
2. What experience have you had with being a Financial Management Service agency?
3. Which financial management service models do you provide? *Bill Payer, Sole Employer, Co-Employer*
4. How will you communicate with me?
5. If I have a question about developing my individual budget or spending plan, can you help me?
6. If you are a co-employer, what role will you play in the hiring of my workers?
What if I want to hire someone that you don't like? Would you ever ask me to fire one of my workers and for what reason?
7. How will you get the time sheets from my workers?
8. If I am spending more than I should be in my Spending Plan, how will you tell me?
9. How will you send me monthly reports on how I am spending my individual budget?
10. If I have questions, how will I get them answered?



There Are 3 Models Of Working With Your Financial Management Service Agency

Financial Management Service agency



You choose the one that works best for you.



You might Choose The Bill Payer Model If...

- ✓ I do NOT want to be the employer of my workers.
- ✓ The people who help me already work for an agency.
- ✓ I want the Financial Management Service agency to purchase items from a company for me.
- ✓ I want the Financial Management Service to pay the agency who provides my services.



In the Bill Payer model participants do not hire their own employees.

Notes:



You Might Choose The Sole Employer Model If...

- ✓ I **DO** want to be the employer of my workers.
- ✓ I am responsible for the necessary insurances related to employment.
- ✓ I want the Financial Management Service agency to pay my employees and other bills as I instruct them.
- ✓ I submit timesheets to the Financial Management Service agency.
- ✓ I want the Financial Management Service agency to check the background and qualifications of my employees.
- ✓ I agree to have the Financial Management Service agency assist me in following all applicable employment laws.



Notes:



You Might Choose The Co-Employer Model If...

✓ I want to **SHARE** being the employer of my workers.

The Financial Management Service agency will:

- ✓ Follow all applicable employment laws.
- ✓ Check background and qualifications.
- ✓ Handle and pay for necessary insurances related to employment.
- ✓ **SHARE** responsibility of being the employer.
- ✓ Pay employees and other service providers.



In the **Co-Employer model participants share responsibility for managing employees with the Financial Management Service agency.**

Notes:



Sofia's Family Chooses The Bill Payer Model



- ✓ Her services are all provided by agencies
- ✓ There are no employer/employee relationships

Type of Financial Management Service agency needed

**1
Bill Payer**

Notes:



Jason Chooses The Co-Employer Model



- ✓ Jason hires a local agency which staffs job coaches who specialize in his dream job, gardening.
- ✓ Jason finds, interviews, and hires a job coach, and the Financial Management Service agency will handle all the business and liability.
- ✓ Jason hires his neighbor to support him during his day, and the Financial Management Service agency will handle all the business and liability.

Notes:

Type of Financial Management Service agency needed

**3
Co-Employer**



“Number of Services” Determine The Financial Management Service Monthly Cost

Notes:

How does the Department of Disabilities define “Number of Services”?

“Number of services” is equal to the total number of services in my annual Self-Determination Program Spending Plan.



Financial Management Service Monthly Cost



Financial Management Service Cost

Bill Payer Model

4-6 Number of Services Received

FMS Model	Number of Services	Max Rate Per Month
Financial Management Service as Bill Payer	1-3	\$50
	4-6	\$75
	7+	\$100
Financial Management Service as Bill Payer	1-2	\$110
	3-4	\$125
	5+	\$150
Participant & Financial Management Service as Co-Employers	1-2	\$125
	3-4	\$140
	5+	\$165

Notes:



Financial Management Service Cost

Co-Employer Model More than 5 Services Received

FMS Model	Number of Services	Max Rate Per Month
Financial Management Service as Bill Payer	1-3	\$50
	4-6	\$75
	7+	\$100
Financial Management Service as Bill Payer	1-2	\$110
	3-4	\$125
	5+	\$150
Participant & Financial Management Service as Co-Employers	1-2	\$125
	3-4	\$140
	5+	\$165

Notes:



Some Important Information About Your Financial Management Service Costs



- The Department of Developmental Services sets the monthly rate for the Financial Management Service agency to provide their service.
- The rate does not cover wages, employment taxes, workers compensation, health care or other types of your insurance if I hire my own employees.
- The cost for your Financial Management Service will come out of your Spending Plan.

Notes:



Self-Determination Program Maximum Financial Management Services (FMS) Rates

FMS Model	Number of Services	Max Rate Per Month
Financial Management Service as Bill Payer	1-3	\$50
	4-6	\$75
	7+	\$100
Participant as Sole Employer	1-2	\$110
	3-4	\$125
	5+	\$150
Participant & Financial Management Service as Co-Employers	1-2	\$125
	3-4	\$140
	5+	\$165

Note: If the Financial Management Service provides payments through more than one of the models above for a participant, then the maximum rate for that participant cannot exceed the highest cost model for the total number of services. For example, if a participant is using five services, and the Financial Management Service is a “bill payer” for two services and a “co- employer” for three services, the maximum rate charged to the participant cannot exceed \$165 per month. **In all cases, the participant and Financial Management Service can agree to rates lower than the maximum rates above.**



Steps For Selecting Your Financial Management Service Agency

1. Review the services on your Spending Plan.
2. Will there be employees?
3. What do you want your relationship with the employees to be?
 - a. Will you be employing workers directly?
 - b. If yes, do you want all the responsibility and control? OR, do you want to share it with the Financial Management Service agency?
 - c. Will you only hire people who work for agencies?
 - d. Do you plan to only be purchasing items?
4. What type of Financial Management Service do you need?
 - a. Bill Payer
 - b. Sole Employer
 - c. Co-Employer
5. What would the Financial Management Service cost be based on the number of services you have in your Spending Plan and which type of Financial Management Service you want?



My Notes & Next Steps

Support Authority
Freedom Responsibility
CONFIRMATION



MODULE 7

Staying Safe In Your Community



Staying Safe



The first principle of
Self-Determination is

Freedom

With freedom comes
responsibility!

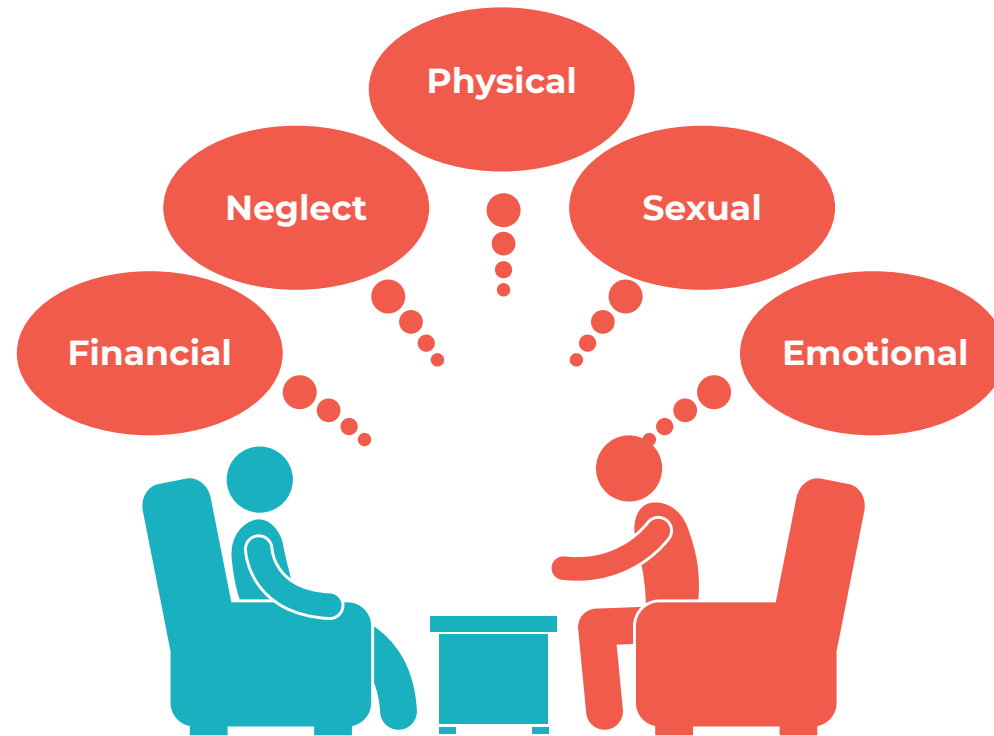
Notes:



There Are Many Different Kinds Of Abuse

You and your team need to:

- Learn about abuse.
- Learn how to know abuse is happening.
- What to do if you think it is happening.



Tell someone you trust!



Recognizing Physical Abuse & Neglect

Physical abuse and neglect might look like:

- Failure to provide basic physical needs: food, clothing, shelter, medical; or dental needs care
- Changed behavior, reluctance to share information openly
- Unexplained or unusual illnesses or injuries

Notes:



Healthy Relationships

- Provide a plan that includes social opportunities.
- If needed, get support and education on healthy relationships.
- Educate on abuse, consent, choice, and asking for help.



Notes:



Don't Ignore It

If someone hurts you or ignores you

If someone forces you to do something you don't want to do

If someone gets too close to you and you don't like it

If someone makes you feel uncomfortable

If someone takes things that belong to you

If someone touches you and it's not okay with you

It is NOT ok!





Reporting Abuse

Tell someone you TRUST:

- Family
- Friends
- People from your school
- People at work
- Your service coordinator
- Medical professionals



They will HELP:

- Make sure you are safe
- Report to the appropriate people:
 - ✓ Adult protective services
 - ✓ Child protective services
 - ✓ Local law enforcement
 - ✓ Your regional center





DDS SafetyNet Tip Sheet

How to Defend Yourself: Fighting Back!

Danger signs that you might be harmed or hurt:

- Someone grabs, holds, pushes, slaps or hits you.
- Someone touches or kissed you without you saying it's okay.
- Someone yells, puts you down, or says hurtful things to you.

Things that help:

- Make eye contact — Look the attacker directly in the eye to say you are not afraid!
- Breathe — Take a deep breath and calm yourself.
- Focus — Focus on what to do to get to safety.
- Get help — Call 911, report it to the police, talk to your supporters, and/or get help from an abuse prevention center. Keep seeking help until you are safe.

Defend yourself

Protect yourself when someone tries to hurt you. Here are some ways to defend yourself:

- Surprise your attacker — Don't be a quiet, passive victim. Surprise your attacker by making noise, saying "NO," and/or walking or running away.
- Give 100% effort — When you defend yourself, do one thing at a time and do it with 100% of everything you have whether you yell or run away.
- If all else fails, wait — Let the situation progress, plan, and wait for a chance to get to safety.
- As a last resort, defend yourself physically by fighting back — Use your body "defenders" — your elbow, your heel, your fist, your voice, and your head. A wheelchair or a cane can also be used as a defender.



DDS SafetyNet Tip Sheet

How to Defend Yourself: Fighting Back!

To get away quickly:

1. Aim for a place on the attacker's body that will hurt a lot.
2. Look for a place on the body you can reach.
3. Distract the attacker so you can get to safety.

When you defend yourself, do what you have to do to get to safety!

Some examples are included below:



Hit the attacker in between the ribs with your elbow.



Use your heel to stomp on top of the attacker's foot.



Use your fist to hit the attacker in the nose.



Use your knee to hit the attacker in the groin.



Use your heel to kick the attacker in the shin.



Use your wheelchair to hit the attacker's legs.



My Notes & Next Steps

Support Authority
Freedom Responsibility
CONFIRMATION



MODULE 8

My Next Steps



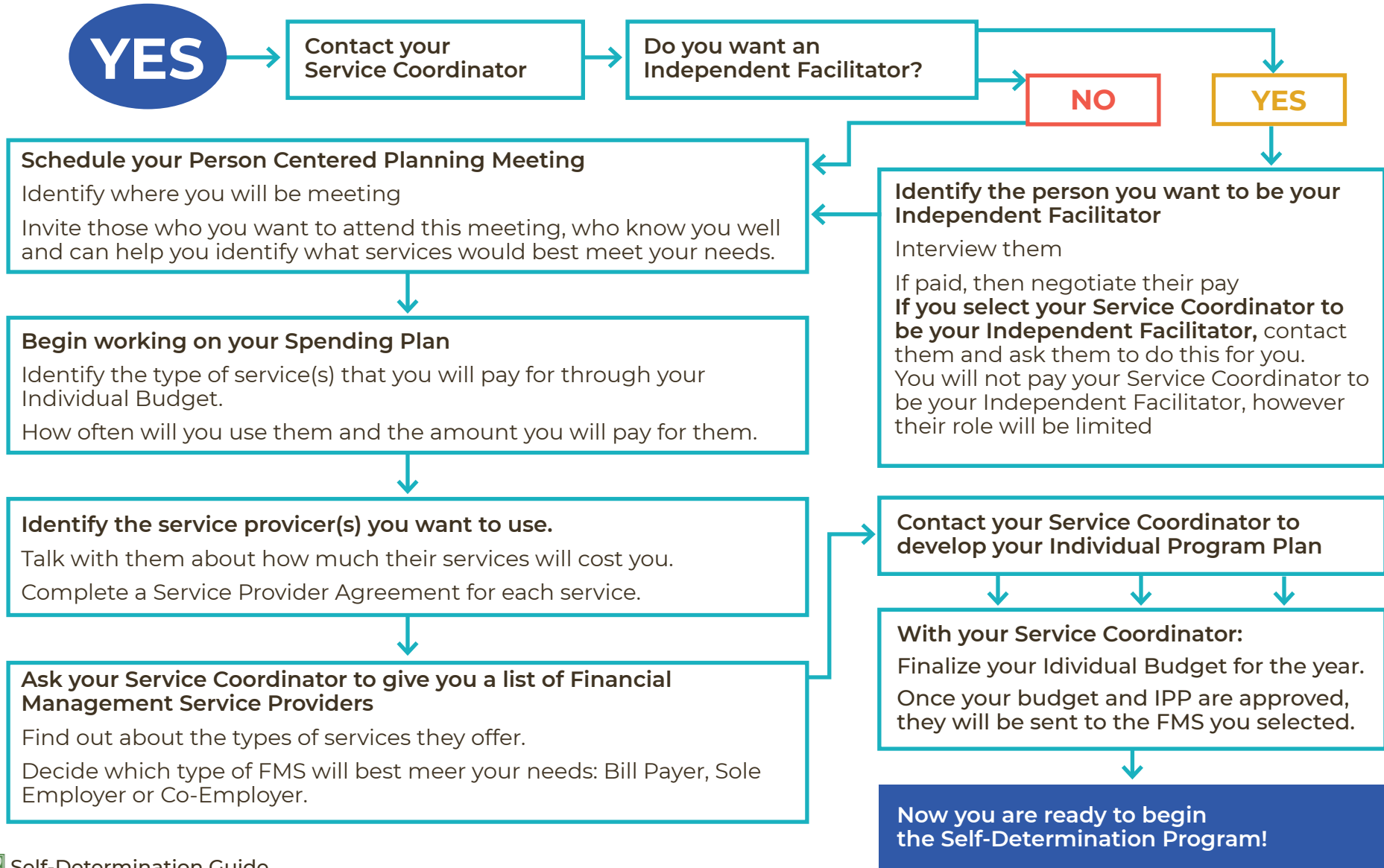
We Have Covered A Lot Of Information

- Principles of Self-Determination
- Roles and Responsibilities
- Person Centered Planning
- My Individual Budget
- My Services and Spending Plan
- Financial Management Service (FMS)
- Staying Safe in My Community

- ✓ Think about what you have learned and what questions you have.
- ✓ Think about what your next steps will be.
- ✓ Think about the people in your life who can help you get started.



Do You Want To Participate In The Self-Determination Program?





Do You Want To Participate In The Self-Determination Program?

NO

Contact your Service Coordinator

Notify them you have decided you do not want to participate in the Self-Determination Program at this time.

Your Service Coordinator will follow-up with a letter confirming you have been removed from the list.





Resources

Center for Self-Determination: self-determination.com

Updates on California's Self- Determination Program:

<https://dds.ca.gov/initiatives/sdp/>

ELARC: <https://www.elarc.org/consumers-families/self-determination>

Still have Questions:

Local Regional Center: info@elarc.org.

DDS Website: dds.ca.gov/sdp

DDS Email: sdp@dds.ca.gov

Notes:



Closing Thought

What is possible is up to YOU!

Make a plan that fits your life and helps you meet your life goals, with services from people you choose, in the community where you live and in places you want to be!



Notes:



My Notes & Next Steps

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EASTERN LOS ANGELES REGIONAL CENTER



<https://www.elarc.org/consumers-families/self-determination>