

Person-Centered and Futures Planning



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What are they?



- Person-Centered Planning
 - A way of understanding who someone is and what their lives look like
- Futures Planning
 - A way of asking what the person's future will look like

Who is involved?



- Target person
 - in my work, a person with a developmental disability
- People important to the target person
 - Immediate and extended family
 - Friends of the target person and friends of their family
- A facilitator
 - Trained in the facilitation process
 - Neutral, third party
- Typically takes 12-15 hours in total

Parts of person-centered planning



- Themes
- History
 - What has happened to this person and their family since the target person was born?
- Places
 - In a typical week or month, where does this person go in their local community?
- People
 - Who are the people in this person's life?
 - How often do they see these people?
 - How many of the folks in the persons life are paid to be there?

Parts of person-centered planning



- Choices
 - What choices does this person make for themselves and what choices do others make for them?
- Strengths and Weaknesses
 - What is this person really good at and what are they not so good at?
- Likes and Dislikes
 - What does this person like and what do they dislike?
- Hopes and Fears
 - What does this person (and their family) hope for their future and what do they fear about their future?

Parts of person-centered planning



- Respect
 - What things does the person do that cause them to lose the respect of others, and what things do they do that cause them to gain the respect of others?

Themes example – 9-year-old lower skilled youngster



- Frank has had frequent interaction with intervention services starting at a very young age.
- Frank interacts much more with intervention adults than anyone else in his life.
- Frank’s family values other people (who work with Frank) who demonstrate that they are supportive and genuinely like Frank.
- Mom and Dad are realistic about the type of support Frank needs.
- It took a while to pair down the services that Frank was receiving.
- Time was lost due to 2 years of medical concerns
- Most of the places that Frank goes on a regular basis relate to some form of therapeutic intervention.

Themes example – 9-year-old lower skilled youngster



- Within the last 6 months, Frank has become easier to be around and more interested in things outside the house. He is more tolerant of crowds and Mom and Dad predict that this will allow him to go more places in the future.
- The majority of the people in Frank’s life are paid to be there.
- Frank does not have a lot of family in his life.
- Frank learning to behave in socially appropriate ways will increase the number of places Frank can go and the number of socially significant people he will likely contact and/or form a relationship with.
- Frank needs to learn to be easier to bring to places.
- Frank likes a wide variety of things.
- The things Frank enjoys as leisure activities is broadening (within the last 6 months).

Themes example – 9-year-old lower skilled youngster



- Most of the things Frank dislikes, other people can help him avoid.
- Most hopes and fears are related to Frank’s ability to be independent across multiple domains and natural environments/ settings.
- Now is a good time for service providers (ORL and others) to shift/ transfer some of the instructional control and technologies to Mom and Dad.
- Frank is good at giving interventionists clear feedback when something is not working.

Themes example – 17-year-old highly skilled individual



- If Doug experiences increase success early on, very likely to like the activity
- Doug when faced w/ something that plays against his strengths, he will attempt to the thing through capitalizing on his strengths
- Doug has problems NOT accepting things that he is not responsible for and trouble accepting responsibility for what he is responsible for
- Often, there is a disconnect between what Doug says he wants and his willingness to engage in the process needed to accomplish his stated goal
- Doug makes a lot of choices for himself and that are VERY appropriate when compared to his typically developing peers
- Doug's team needs to discuss and review the choices Doug makes and consequences around those
- Doug has many strengths that indicate he has great potential
- Lot of polarity- experience of events, double-edged sword
- Doug tends to approach things in a rather analytical manner
- Within Doug's family, expectations are or are perceived to be very high
- Doug currently lacks the persistence to complete most even moderately difficult tasks and that this is NOT related to motivation

Themes (2)



- Since Doug's diagnosis, his weekly life has been very scheduled/structured
- The variety of recreational or social activities Doug participates in is less (lower) than that of typically-developing people his age
- Doug interacts very little w/ others (including family) beyond a structured purpose-driven context
- Doug has a very appropriate # of acquaintances and no friends
 - Doug is fine with this
 - Others are worried/saddened by that
- Others feel that Doug has sent them mixed messages about the strength of his desires to develop friendships
- Doug tends not to trust the truth the statement of others and instead searches for ulterior motive
- Doug's family tends to experience major life events as both +/- in a highly emotional way
- Doug's family's life centered around his needs for the first 7 years after his diagnosis
- Since his birth, Doug has experienced a rather high rate of change in terms of locations

Futures Planning



- Given everything the group learned through the person-centered planning process...
- Select a timeframe in the future
 - Not too soon and not too far away
- Ask what the person's life will look like...

Futures Planning



- Where will they live?
- Where will they work?
- What will their social life look like?
- What will their recreational life look like?

- Then...set 1-2 intermittent time frames that break down what the target person needs to know to accomplish the future they are their families want
- Professionals join the team at this point, but not before

Frank at age 13



- **Living:**
- Frank will live at home with Mom and Indy in a house with a bigger yard. He will handle all of his self-care routines.
- **Health:**
- Frank will tolerate health and dental procedures. He will be able to report basic body states.
- **Education/Intervention:**
- Frank will attend (public) school at least 5 days a week for half days. He will have basic reading skills and participate in basic functional science instruction.
- **Social Relationships:**
- Frank will be able to participate in organized group activities with his peers. He will spend (and enjoy spending) time with unpaid people.
- **Communication:**
- Frank will make more detailed requests and his requests will align with his desires. He will be a better listener and will communicate with a wider variety of people. Frank will also use a cell phone.
- **Community:**
- Frank will independently complete basic shopping. He will have improved pedestrian safety skills and stay within appropriate boundaries while visiting community locations.

Frank at age 11



- Living:
- Frank will have an expanded leisure skill repertoire and have better backyard safety skills.
- Health:
- Frank will have improved resilience (not escaping), he will tolerate non-preferred tasks for longer periods of time, and tolerate new locations (less preferred). Frank will be able to swallow pills and independently take supplements. He will report body states that are clearly known to those around him (being hot/cold, hurt, etc.).
- Personal Routines:
- Frank will be compliant with care routines. He will be able to sequence events and follow complex, multi-step directions. His whole body strength and endurance will be significantly improved. He will coordinate his eyes and other body parts. Frank will have improved personal responsibility (carry device).

Frank at age 11



- Education/Intervention:
- Frank will attend school 2-3 days a week for half days (starting when he is 11). He will be able to demonstrate his reading and general comprehension and be able to learn new skills in a group of three (or more).
- Social Relationships:
- Frank will have sampled a wide range of leisure activities. He will have basic turn taking skills. Frank will reliably report his likes and dislikes across activities, people, and locations. He will have places that he goes that are non-intervention related and will behave more appropriately in public. Frank will engage in basic interverbal exchanges (answering personal and basic questions).
- Communication:
- Frank will have a significantly improved vocabulary. He will reliably respond to the requests of others and reliably mediate the tacts of others. Frank will reliably interact with community members (in known, preferred locations).
- Community:
- Frank will pay for things he is purchasing. He will identify who to ask when help is needed. Frank will have “stranger danger” and parking lot safety skills and will be able to identify boundaries in a community setting.

Additional Resources



- Possible providers/funders:
 - DDA
 - ARC
 - Private provider
 - Partnership for Action, Voices for Empowerment (PAVE)
 - www.mylifeplan.guide
- More information:
 - PACER's National Parent Center on Transition and Employment
 - National Center on Secondary Education and Training
 - Parent Companion First Five Years