



Office for People With Developmental Disabilities



Care Manager & Provider Information Session

Info Session Updates

2nd and 4th Wednesdays of Each Month at Noon

- Session 5 – April 24, 2019
 - Self-Directed Services: Development of Life Plans and Staff Action Plans
 - Recording and presentation posted on the OPWDD website
- **Session 6 – May 8, 2019**
 - **I AM Assessment Tool Demonstration**
- Session 7 – May 22, 2019
 - Staff Action Plan Training

For viewing of or registration for the Care Manager and Provider Info sessions go to the OPWDD website at:

https://opwdd.ny.gov/providers_staff/care_coordination_organizations/msc_webinars



Care Manager and Provider Information Sessions

I AM Assessment Tool Demonstration

Division of Person-Centered Supports
OPWDD



The I AM Assessment Tool

The I AM Assessment Tool was selected by all of the Care Coordination Organization (CCOs) for use as part of the required person-centered planning comprehensive assessment process to inform the Life Plan.

I AM Assessment Tool Demonstration

- Tri-County Care CCO is providing an I AM Assessment tool demonstration to assist stakeholders in understanding how the I AM tool informs the draft Life Plan as a starting point in the person-centered planning discussions.
 - CCOs might have different practices in how the I AM tool is implemented.



I AM to Life Plan

I AM: Information Sources

Care Managers should gather information from every member of that individual's circle of support and available documents associated with that individual, when completing the I AM Assessment, including:



- ✓ The Individual
- ✓ Family or advocate/Legal Guardian
- ✓ Major Providers(DSP's, other support staff)
- ✓ Teachers
- ✓ Nurses, Therapists
- ✓ Prior ISP
- ✓ Behavior Management Plan, Fire Safety Plan, etc.

I AM: What?

What is required to be completed in the I AM Assessment?



- The Life Plan must reflect at least three (3) personal goals, of which two (2) must be POM directed; therefore, that must be reflected in the assessment.
- The Life Plan must include all safeguards because this is the overarching document for individual's safeguards.
- The Safeguards must include information on the Individual's Safety Plan which goes into detail about the individual's ability to call for help during an emergency and their ability to evacuate during an emergency.

I AM: When?

When is the I AM completed and how much time does it take to be completed?



- The Life Plan is to be initiated within 60 days prior to the Life Plan meeting.
- The time to complete an assessment varies depending on the Care Manager, CCO processes, etc.
- The assessment can be completed in a meeting format or overtime by gathering information from various Plan Team members and documents.
 - This would be determined by the availability & preference of the individual and/or their family/advocates.

I AM: How?

How is the I AM assessment deployed to various individuals with different capacities of communicating?



- Individuals that are able to express their wants and needs can communicate effectively to the Care Manager what their Life Plan should include and who should be included in the process.
- For individuals who are unable to communicate their wants and needs efficiently, the Care Manager will collaborate with the individual's family/advocate and or providers involved in their life to gather information on what the individual is already involved in and enjoys to help develop the Life Plan.

I AM: Why?



- It is important ask “why” to any goals and suggestions made, this will assist you to see the bigger picture of the individual’s actual dreams.
- Personal Outcome Measured goals should really focus on what this person would like to achieve in the near future.

Think:

- *When I was younger, what did I say I want to be and do when I grow up?*
- *What are those things now?*

I AM: Personal Outcome Measures (POMS)

- Personal Outcome Measures(POMS) are a powerful tool, developed by “The Council on Quality and Leadership” to ensure supports and services are truly person-centered. 21 indicators are used to understand the presence, importance and achievement of outcomes, involving choice, health, safety, social capital, relationships, rights, goals, dreams, employment and more.
- The insight gained can then be used to inform a person-centered Life Plan, and at an aggregate level, influence an organization’s strategic plan. For decades, they have been an effective data set for valid and reliable measurement of individual quality of life.

I AM: POMS

- The I AM assessment is a tool that incorporates these 21 indicators to help develop the a Person Centered Life Plan.
- The 21 Personal Outcome Measures are Standard and the wording for those measures **cannot** be changed when completing a Life Plan.



My Human Security

Non-negotiable human and civil rights

1. People are safe
2. People are free from abuse and neglect
3. People have the best possible health
4. People experience continuity and security
5. People exercise rights
6. People are treated fairly
7. People are respected



My Community

Access to be in, a part of, and with community

8. People use their environments
9. People live in integrated environments
10. People interact with other members of the community
11. People participate in the life of the community



My Relationships

Social support, intimacy, familiarity, and belonging

12. People are connected to natural support networks
13. People have friends
14. People have intimate relationships
15. People decide when to share personal information
16. People perform different social roles



My Choices

Decisions about ones' life and community

17. People choose where and with whom they live
18. People choose where they work
19. People choose services



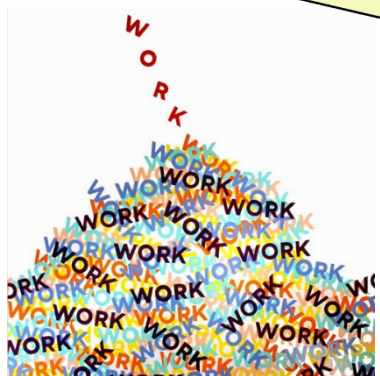
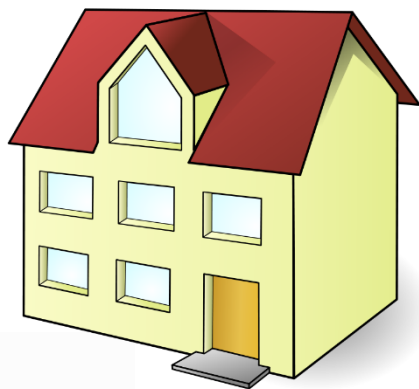
My Goals

Dreams and aspirations for the future

20. People choose personal goals
21. People realize personal goals

I AM: POMS

Personal Outcome Measured goals are developed from 4 different sections in the I AM Assessment.



Where I Live

Where I Work

Where I Learn

My Happiness



Goals/Supports

Flashback:

- **Goals** are created when you **Teach** a person a skill to help them achieve a desired outcome that they set for themselves.
- **Supports** are created when you **Provide** assistance to the person to maintain a skill or maintain what they already have.

Section II Goals/Supports vs. Section III Goals/Supports

Section II: Contains the POM's which focus on

- **Goals:** What the individual's dreams, goals/personal achievements they would like to accomplish in the next year.
- **Supports:** The activities that they may already be involved in that they really enjoy and would like to continue to be supported in enjoying them.

Section II Goals/Supports vs. Section III Goals/Supports

Section III: Contains INDIVIDUAL SAFEGUARDS/
INDIVIDUAL PLAN OF PROTECTION (IPOP)

- **Goals:** What the individual needs to learn in order to achieve their overall outcomes. (ie.-Teach ADL Skills, Teach Safety Skills, Tie Laces, etc.)
- **Supports:** Identify areas where I need continued support to maintain or improve what I already achieved, ie.- Work skills, diet, Provide reminders to brush hair or teeth.

I AM: Where I Live

- An individual can like where they live and still look to improve or change their living situation, as we all do.
- If an individual would like to change their living arrangements the Care Manager would select “Yes” and a drop down will open asking how soon is this change is wanted.



I like where I live

- ☒ Yes
☐ No

My initial evacuation and assistance priority is:

- ☐ High
☐ Medium
☒ Low

I want to improve/change my living situation

- ☒ Yes
☐ No

I would like this improvement/change

- ☐ ASAP
☐ In 1 year
☐ In 3 years
☐ In the future

I AM: Where I Live

- Care Manager must determine if an individual would like to change their living situation within a year or sooner
- A drop down becomes available to select a POM connected goal because this is a desired achievement to be met.
- Otherwise if this is something the individual wants to focus on in the next 2 or more years, the drop down will not be available because the I AM and Life Plan focuses on what's **more important** to the individual **right now**, the **Life Plan year**.

I would like this improvement/change

- ☐ ASAP
- ☒ In 1 year
- ☐ In 3 years
- ☐ In the future

I would like this living situation improvement/change

- ☐ I want to live in a different neighborhood
- ☐ I want to live in a home that is accessible
- ☐ I want my own room
- ☐ I want to live more independently in the community
- ☐ I want to live less independently, I need more help
- ☐ I want to live with friends
- ☐ I want to feel safe where I live
- ☐ I want to live in a house which is clean and in good repair
- ☐ I want to explore available housing options
- ☐ Other

I AM: Where I Work

I want to improve or maintain my work skills

☒ Yes

☐ No

In order to improve my work skills

- ☐ Teach work skills
- ☐ Teach work habits
- ☐ Provide an assessment of work skills
- ☐ Teach travel training
- ☐ Teach safety skills
- ☐ Teach social skills
- ☐ Other

- If an individual already has a job, whether it be Competitive employment, SEMP, or Pre-Voc, then Care Manager will select yes for this option, as the person may need to improve or maintain their current work skills.
- Note that anything selected here would be on the Life Plan under **Section III: INDIVIDUAL SAFEGUARDS/IPOP**, the individual needs support with something that they **already have** and enjoy.

I AM: Where I Work

I want to change my work situation

- ☒ Yes
☐ No

I would like to change this

- ☒ ASAP
☐ Within 1 year
☐ In 3 years
☐ In the future

Desired work situation

- ☐ A different provider
☐ A real job
☐ To earn more money
☐ To retire
☐ To work with people I know
☐ To volunteer
☐ To go to a place that can meet my medical needs
☐ To explore available options
☐ I want integrated work
☐ I want to work less hours
☐ Other

- If an individual would like to change their working situation in the next year or sooner then a drop down becomes available to select a POM connected goal because this is a desired achievement to be met.
 - ✓ In this case anything selected here would be on the Life Plan under **Section II**.
- If the person wants a change in the next 2 or more years, the drop down will not be available.
- Again the I AM/Life Plan is a living document. They both will change as the person changes.

I AM: Where I Work

Goal in Section II

- ✓ Wants a job (Unemployed)
- ✓ Wants a new job/SEMP provider
- ✓ Wants more money
- ✓ Wants to retire, etc.



VS

Goal in Section III

- ✓ Has a job they like
- ✓ Wants to maintain work skills
- ✓ Wants to improve work skills



I AM: Where I Learn



I want to change my school situation

- ☒ Yes
☐ No

I want this change

- ☒ ASAP
☐ Within 1 year
☐ In 3 years
☐ In the future

Goals for School

- ☐ I want to join an after school program
☐ I want to go to College
☐ I want to take a class
☐ Other

When making a POM connected goal for “Where I Learn” the same rules apply as it did in the 2 previous sections.



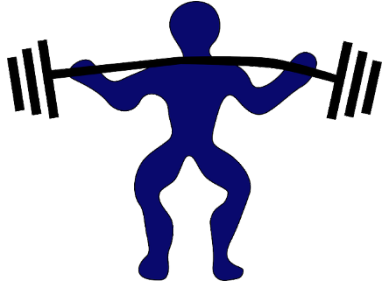
I AM: My Happiness



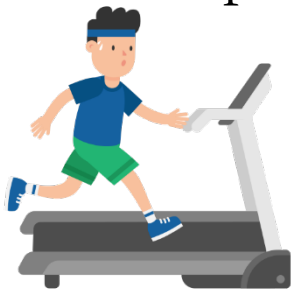
- The Care Manager is able to plug in POM connected goals that **the individual** would like to work on or achieve outside of the other 3 sections(Where I Live, Work, Learn).
 - Get a girlfriend,
 - Go out more,
 - Go on vacation,
 - Spend more time with family,
 - Buy/drive a car,
 - Be a self advocate,
 - Lose weight to look differently, etc.



I AM: Looks vs. Health



If an individual wants to partake in exercise to enhance their physical look and appearance, then it would show up in Section II of the Life Plan, they are trying to achieve a particular appearance.



If an individual participates in an exercise routine for health/medical purposes such as improving their health, doctors orders, then it would show up in Section III of the Life Plan since they need support to stay healthy.



I AM: Safeguards/IPOP



- All safeguards must be included when completing the I AM assessment because the Life Plan is the overarching document for the individual's safeguards.
- Information on safeguards should be collected by Care Manager by retrieving information directly from Plan Team members and/or documents that include this information.
- An individual's safeguards may vary depending on the environment that they are in and some of this information may be different for each provider.

I AM: Safeguards/IPOP



- The I AM Assessment only reflects the individual's general safeguard needs; therefore, additional customizations can be done in the Life Plan after the completion of the I Am Assessment by the Care Manager.

I AM: Supervision

Supervision

Clark KentID: 54321

Supervision

My Health - Review of Preventative Services

My Health - History and Current Conditions

My Health - Medications

My Health - Goals and Actions

My Health - An Overview

My Nutrition

My Vision

I can be left home alone
☐ Yes
☐ No

I need supervision in the community
☐ Yes
☐ No

I need supervision during the night
☐ Yes
☐ No

The 3 major areas covered in Supervision at:

- Home
- Community
- Overnight supervision

I AM: Supervision

- If the person can be left home alone then the technology provides a selection for the Duration a person can be left at home.
- Even a selection of Unlimited Supervision would show up on the Life Plan.

I can be left home alone

Unlimited

I can be left home alone

☒ Yes

☐ No

Duration

☐ Up to 15 minutes

☐ Up to 1 hour

☐ Up to 4 hours

☐ Up to 8 hours

☐ Overnight

☒ Unlimited

☐ Other

I AM: Supervision

I can be left home alone

☐ Yes

☒ No

I need supervision at home

☒ Yes

☐ No

Provide the following supervision

☐ 1 to 1 at all times

☐ Eyes on at all times

☐ Frequent Checks (less than 30 minutes)

☐ Occasional checks (more than 30 minutes)

☐ Complete these checks with charting (Chart 20)

☐ Other

- When “No” is selected, the next question asks if Supervision is needed at home.
- Clicking “Yes” allows for another drop down to be displayed on what type of Supervision is needed for home.
- The overarching Supervision would be selected determined on the persons overall needs.

I AM: Supervision Language

I can be left home alone

☐ Yes

☒ No

I need supervision at home

☒ Yes

☐ No

Provide the following supervision

☐ 1 to 1 at all times

☐ Eyes on at all times

☐ Frequent Checks (less than 30 minutes)

☐ Occasional checks (more than 30 minutes)

☐ Complete these checks with charting (Chart 20)

☐ Other

What does it mean?

- ✓ **1 to 1 at all times:** Indicates that this individual needs a support staff providing close supervision to them at all times.
- ✓ **Eyes on at all times:** Indicates that the individual needs Line of Sight supervision.
- ✓ **Frequent Checks:** Check them within 30 mins.
- ✓ **Occasional Checks:** Check them after 30 mins.

I AM: Supervision

I need supervision in the community

☒ Yes

☐ No

Provide the following supervision

- ☐ 1 to 1 at all times
- ☐ Eyes on at all times
- ☐ Provide supervision in unfamiliar places
- ☐ Frequent Checks (less than 30 minutes)
- ☐ Occasional checks (more than 30 minutes)
- ☐ Complete these checks with charting (Chart 20)
- ☐ I can be left in a vehicle without supervision for up to 10 minutes
- ☐ I can never be left in an unattended vehicle
- ☐ Other

- The same options are available for Supervision in the Community, with the addition of supervision in a vehicle.

I AM: Supervision

I need supervision during the night

☒ Yes

☐ No

Provide the following supervision

- ☐ Complete checks twice a night
- ☐ Complete check every two hours
- ☐ Complete checks every hour
- ☐ Complete checks every 30 minutes
- ☐ Complete checks every fifteen minutes
- ☐ Complete these checks with charting (Chart 6)
- ☐ Use a night monitor: Visual
- ☐ Use a night monitor: Auditory
- ☐ Use a night monitor: Drop mat
- ☐ 1:1 supervision during the night
- ☐ Night light
- ☐ Responsible adult present
- ☐ Other

- If the individual needs supervision during the night, there are multiple options depending on the individuals needs.

I AM: Safeguards/IPOP

Section III of the Life Plan will include other Safeguards and supports needed to achieve their personal outcomes overall. These again can be in the form of a Goal(G) or a Support(S). The following categories are found in Section III of the Life Plan:



- ✓ Nutrition(as previously mentioned)
- ✓ Vision
- ✓ Mobility
- ✓ Toileting
- ✓ Personal Hygiene
- ✓ Daily Living
- ✓ Durable Medical Equipment
- ✓ Safety Plans

I AM: Evacuation

Evacuate in an emergency

- ☐ Independent
- ☐ One verbal prompt to exit
- ☐ Continuous Verbal prompting to exit
- ☐ Physical assistance to exit
- ☐ Physically remove
- ☐ Use wheelchair to exit
- ☐ Assist to remain in safe place
- ☐ Complete fire drills with charting as required
- ☐ Other need
- ☐ DME/POS to alert: Bed Shaker
- ☐ DME/POS to alert: Strobe Light
- ☐ DME/POS to alert: Bed Shaker and Strobe Light
- ☐ DME/POS to alert: Other

SECTION III

- The Care Manager will indicate what level of support the individual generally needs in the event of an emergency such as a fire and indicate DME's necessary to support that individual during an emergency.

I AM: Call for help

Call for help

- ☐ Independent without back-up plan
- ☐ Independently implements back up-plan
- ☐ Needs assistance with implementing back-up plan
- ☐ Provide back-up plan Task
- ☐ Independent with DME/POS: Alert Button
- ☐ Independent with DME/POS: Special Phone
- ☐ Independent with DME/POS: Other [Free Text]
- ☐ Needs DME/POS: Alert Button
- ☐ Needs DME/POS: Special Phone
- ☐ Needs DME/POS: Other [Free Text]
- ☐ Cannot call for help without assistance
- ☐ Other

SECTION III

- The Care Manager must indicate whether or not the individual is able to call emergency services in the event of an emergency.
- Safeguards must be in place for any individual living in a certified setting, such as an IRA, that requires a back-up plan or necessary DME and it must be indicated in their Staff Action Plan.
- For individuals living in a natural support setting(with family, independently, etc.), the Care Manager will need to develop a Safety plan for this individual.



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Thank you – Questions?

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