

# FORMAT & INSTRUCTIONS

## Introduction

In the two previous sections, person-centered planning in California was described as a mandatory and value-based planning system. This section describes the components of the standard process and format for person-centered individual program planning. This section also contains instructions for conducting person-centered individual program planning. *All regional centers must use this format in compliance with these instructions.*<sup>1</sup> *The person-centered approach to assessment and individual program planning described below will be used when developing IPPs for all regional center consumers, and all residents of state developmental centers.*<sup>2</sup>

Every consumer over the age of three will have a person-centered IPP that contains all of the components shown in this section. Some consumers may have other individual plans in addition to the person-centered IPP.

These additional plans are sometimes necessary to comply with the statutes or regulations of funding or monitoring agencies other than the Department of Developmental Services. For example:

- Consumers in some health licensed facilities will also have Individual Habilitation Plans;<sup>3</sup>

---

1. Welfare & Institutions Code Section 4646.5(c)(2)  
2. Welfare & Institutions Code Sections 4646(c) & 4646.5(c)(2), and William Coffelt, et al., v. Department of Developmental Services, et al., Final Settlement, pages 26 & 27.  
3. While these plans are called Individual Habilitation Plans in California, to differentiate them from our IPPs, they are called Individual Program Plans in the Federal regulations governing Intermediate Care Facilities for individuals with mental retardation (Title 42, Code of Federal Regulations, Section 483.440(c)(1) Standard: Individual Program Plan)

- consumers involved in some work programs will also have a work-related plan;<sup>4</sup>
- some children with serious medical problems, who are living in community care facilities, will also have a separate plan that addresses their medical problems.<sup>5</sup>
- Children below the age of three years old are required to have Individualized Family Service Plans (IFSPs), instead of IPPs.<sup>6</sup> These family-centered plans that are focused both on the needs of infants and toddlers with developmental disabilities, and the corresponding needs of their families. When toddlers with developmental disabilities reach the age of three, they (and their families) are transitioned into the person-centered IPP process.

The person-centered IPP that is described below is focused on beneficial outcomes for the consumer and family. The additional, or supplementary, plans that some consumers must have to receive certain types of services are usually focused on procedures and serve as detailed instructions for professional service providers.

Because each effort to engage in person-centered planning is as unique as the consumer that is the focus of the plan, this process and format and its instructions are intentionally designed to be very flexible. There are currently more than 125,000 consumers in the developmental services system in California. Each consumer is entitled to a person-centered approach to planning for her or his preferred future.

---

4. These are called "Individualized Written Rehabilitation Programs" (IWRPs) and are required by Title 29, United States Code, Section 102

5. These are called "Individual Health Care Plans" (IHCPs) and are required by Welfare & Institutions Code Section 17710(d) & 17731(c)(1)

6. Welfare & Institutions Code Section 95020(a)

The headings in *bold italic type* at the left margin in the subsection entitled "IPP Development" represent the mandatory components, which each regional center's planning process must include. The headings in *bold italic type* in the subsection entitled "Content of the written IPP" is the information required to be in the written IPP document.

The text under each heading constitutes the instructions and considerations for engaging in a person-centered planning process, and completing written IPPs in a manner that conforms to statute. As in the previous two sections, *text in italics* denote the mandatory features of the instructions. Use of the words shall, will or must also indicate mandatory language. References to the statutory authority for these instructions are found in the footnotes.

## IPP Development

### *Person-centered IPPs*

*An IPP describes the needs, preferences and choices of the individual and family. It is developed through a process of individualized needs determination, and embodies an approach centered on the person and family.*<sup>7</sup> Any person who is eligible for regional center services shall have an IPP.<sup>8</sup> The IPP process uses person-centered methods<sup>9</sup> to assist individuals with developmental disabilities and their families to obtain the services and supports needed to build their capacities and capabilities. Person-centered methods provide individuals with developmental disabilities and their families with opportunities to choose where and with whom they live, with whom they socialize, how they spend their time, what jobs they have, and other aspects of their daily lives.

---

7. Welfare & Institutions Code Sections 4646(b)& 4646.5 (c)(1)

8. Welfare & Institutions Code Section 4646(c)

9. Welfare & Institutions Code Section 4646(a)

After all appropriate options for meeting each individual program plan objective have been considered by the planning team, the IPP should describe the specific responsibilities and timelines, by which future changes will be made. This should be done for each objective. The IPP is not static, but changes as new opportunities or obstacles arise.

### ***Consumer choice***

*Consumers must be informed of their right to make the choices recorded in their IPPs.<sup>10</sup> Those choices include, but are not limited to, where and with whom they live, their relationships with people in the community, the way they spend their time, including education, employment, leisure, and the pursuit of their personal futures. All public or private agencies receiving state funds for the purpose of serving persons with developmental disabilities, including, but not limited to, regional centers, shall respect the choices made by consumers.<sup>11</sup>*

Everyone needs to know what the options are before they can make a meaningful choice. *To aid consumers and families in making the choices related to their IPPs, all publicly funded agencies shall provide relevant information in an understandable form.<sup>12</sup>* For example, information can be provided in consumer forums on specific topics or areas of interest. Visual and experiential information can also be provided by facilitating consumer visits to different types of living arrangements or job possibilities.

---

10. As specified in Section 1 of this manual, the term consumer includes the consumer, and where appropriate the authorized representatives of the consumer, including the consumer's parents, guardian or conservator. Conservators generally have limitations on their authority to make decisions and choices on behalf of the consumer. For more information on the role of conservators, get the pamphlet by Sterling L. Ross Jr., *Guardianship, Conservatorship, Trusts and Wills for Families with Mentally Retarded or Other Disabled Family Members*, available through Protection & Advocacy, (800)952-5746.

11. Welfare & Institutions Code Sections 4502(j) & 4502.1

12. Welfare & Institutions Code Sections 4502(j) & 4502.1

Making choices among several attractive options is a learned skill. Some consumers will be able to do this more easily than others. When making or expressing choices is difficult, facilitation and/or self-advocacy training may be necessary to ensure meaningful participation in the person-centered planning process.

Choosing between attractive and undesirable options is not difficult for most consumers. Even for those consumers who have difficulty articulating their choices verbally, repeated attempts to avoid an option when it is presented can provide a clear indication that the option is not attractive to them.

Personal preferences and cultural background can also affect the ability of some consumers and families to express their choices in a manner that is easily understood. *Those who present options for consumers and families to choose among, must present them in a way that reflects awareness of, and sensitivity to, their lifestyle and cultural background.*<sup>13</sup>

In a few instances, consumers and families will insist on making choices that other members of the planning team consider to be unsafe or harmful. If these choices would constitute criminal conduct, or would present an immediate threat of serious bodily injury, team members will take the same steps available to any citizen in similar circumstances, take those actions required of professionals by law or regulation, or other actions consistent with professional ethics.

---

13. Welfare & Institutions Code Section 4646.5(a)(1)

Michael Smull, in his book entitled *Supporting People with Severe Reputations in the Community* (1992) has this to say about the role of consumer choice in a person-centered planning system:

"In the current system of service, complete control over all essential choices is in the hands of professionals. The outcome of this planning process is to rebalance the locus of control. The service system must continue to assure reasonable protection of the individual while supporting substantial freedom. Control is shared through collaboration. People who cannot articulate where they would wish to live or who they wish to live with can tell us of their preferences through their behavior. Those who tell us what they think we want to hear can learn to put forward their own wishes. We will need to assist these individuals to discover what their informed choices are. They will need encouragement and careful exposure to relevant life experiences. We have found that as people gain power over their lives, they often need less control or protection.

Neither the process nor the outcome eliminates the need for skilled professionals. People will still need support for their behavioral, psychiatric, and medical needs. People will still want to learn new skills and will need good teachers. We are not discarding all of our professional skills, we are simply putting them in their proper position. Our skills should be used to help people in achieving the lifestyles of their own choosing. They (our skills or influence) should not determine that lifestyle.

The greatest challenge for all of us in supporting people with disabilities is finding the balance for each individual. A balance is needed between:

- Freedom of choice and the safety and health of the individual;
- Personal liberty and the expectations of society to conform to social norms; and
- Encouraging individuals while avoiding coercion.

Because the balance achieved needs to take into account the circumstances, the core values, and the complexities of each individual, it is different for each individual. These are the same issues that we wrestle with for ourselves and our loved ones. This is why we focus on the ambiguous issues of lifestyle choices. This is why we do not stop with the traditional information such as deficits in adaptive behavior, cognitive disabilities, psychiatric diagnosis, medical issues, and behavioral problems." (Part I, Pages 3 & 4)

There are a small number of consumers who have little or no capacity to make these choices, and who have no legally authorized representative to make them on their behalf. The director of a regional center (or designee) may give consent on behalf of the consumer where it is necessary to authorize essential medical, dental, or surgical treatment.<sup>14</sup>

## *The Planning Team*

Person-centered planning is done by a planning team. A planning team is a group of individuals who are focusing their attention and efforts on building a preferred future for one member of the team, the consumer. The consumer is an equal with the other members of this team. This team is involved with the life of the consumer and family on an ongoing basis. It should not be thought of as a team that meets only when a written IPP is due.

This team meets to share what they know about the life patterns, interests, and preferences of the person and family. The informal discussions of a planning team identify the strengths and abilities of the individual and family, as well as the problems and challenges they experience. Where the individual or family needs help in solving problems, or overcoming challenges, the team chooses a course of action that will promote the desired outcome.

*The planning team (at a minimum) consists of the parents or legally appointed guardian of a minor consumer or the legally appointed conservator of an adult consumer, and one or more regional center representatives.<sup>15 16 17</sup> Planning teams conducting person-centered individual program plan reviews within the state developmental centers shall include a regional center representative who must participate in these reviews at least once every three years.<sup>18</sup> When invited by the consumer the planning team may also include other persons, including service providers.<sup>19</sup>*

---

15. Welfare & Institutions Code Section 4512(j)

16. The planning teams for minor children with special health care needs who are living in licensed community care facilities will also include those members required by Welfare & Institutions Code sections 17710(d) & 17731 (c)(1)

17. Planning for infants and toddlers under the age of three will include those participants required by Welfare & Institutions Code Section 95001.

18. Welfare & Institutions Code Section 4646.5(b) State developmental centers are licensed health facilities. As noted earlier (page 3-2), they are also required to engage in a different, but compatible, individual planning process by Title 42, Code of Federal Regulations, Section 486.440. This process results in Individual Habilitation Plans. These plans must be prepared at more frequent intervals, and do not require the participation of a regional center representative.

19. Welfare & Institutions Code Section 4646(e) & 4512 (j)

*The consumer shall have the opportunity to actively participate in the development of the IPP.*<sup>20</sup> Planning conferences are conducted in the primary language of the consumer. For participants whose primary language is other than that used by the consumer, active participation will require that a translator or interpreter is available.

Ethnic and cultural preferences may also influence the selection of planning team members. *The planning team must include those who can ensure that relevant information is provided in an understandable form.*<sup>21</sup>

Consumers may invite any interested person to participate on the planning team. Friends, neighbors and advocates can provide invaluable information to the team. They can also be productive participants on the planning team.

It may help to facilitate the consumer identifying a list of individuals that she or he may want to join the planning team. This list may include parents, providers, pastors, counselors, friends, neighbors, and others.

Providers of services and supports can also be members of the planning team. Those providers who have daily contact with the consumer can provide information that is particularly valuable. These providers may facilitate, but should avoid dominating or controlling the discussions of the planning team. The decisions of the planning team are to be made jointly with the consumer.

The preferences, communication style, primary language and cultural background of the consumer and family are important considerations for deciding who will be on the planning team. The team should be designed to promote the free flow of communication. *Decisions must be made jointly.*<sup>22</sup> Many consumers can learn to facilitate this process, others will

---

20. Welfare & Institutions Code Section 4646(b)

21. Welfare & Institutions Code Section 4502.1

22. Welfare & Institutions Code Section 4646(d)



need to have people on the team who can facilitate the process.

The regional center is responsible for sending written invitations to the members of the planning team to attend planning conferences, if the consumer requests written notice.<sup>23</sup> These notices, or invitations, must be mailed at least 30 days before the date scheduled for the conference.

The location, time, date, duration and type of team discussions should be consistent with the preferences of the consumer and family, and promote the free flow of communication. For example, some consumers may have a limited tolerance for sitting in meetings, and may need a series of shorter meetings to promote full discussion. Others may prefer phone conferences. Informal settings, such as a restaurant, barbecue, or picnic, may be preferred by others.

### ***Time and duration requirements***

*A planning team must be assembled, and a person-centered IPP completed within 60 days of the completion of an intake and assessment process that results in a finding that a consumer is eligible for regional center services.<sup>24</sup> At the request of the consumer, a parent or other family member (or other authorized representative) designated by the consumer, will receive written notice from the regional center, at least 30 days in advance, of all meetings to develop or revise the consumer's IPP.<sup>25</sup> The planning team will review and modify the IPP as necessary in response to the consumer's achievements or changing needs, but not less often than once every three years.<sup>26 27</sup> If the consumer requests an IPP review, the review shall be conducted within 30 days after the request is submitted.<sup>28</sup>*

---

23. Welfare & Institutions Code Section 4646(e)

24. Welfare & Institutions Code Section 4646(c)

25. Welfare & Institutions Code Sections 4646(e) & 4710

26. Welfare & Institutions Code Section 4646.5(b)

27. For consumers living in licensed health facilities, IPPs must be scheduled by the facility at least annually (Title 42, Code of Federal Regulations, Section 483.440[f] Standard: Program Monitoring and Change, W258[2]).

28. Welfare & Institutions Code Section 4646.5(b)

As discussed earlier, it may be necessary to conduct more than one meeting to complete a planning conference. This may be necessary when more information is needed for the consumer or family to make an informed choice.

A series of brief meetings may also be necessary to keep the length of any one meeting within the limits of tolerance of a consumer. Finally, a planning team may not be able to reach a joint decision on one or more issues without seeking further information or review. *If an agreement cannot be reached at the first meeting, a second meeting must be held within 15 days of the first meeting. Disagreement with portions of the IPP shall not prohibit implementation of agreed upon services and supports. In the case of a disagreement, the consumer or family shall be provided a written notice of fair hearing rights within five days.*<sup>29</sup>

### ***Preparing for a planning conference***

The following information will help the team set a positive tone for the planning conference. Participants may also find it helpful to refer to sections four and five of this manual, which contain examples of, and stories illustrating, person-centered planning.

- Be positive. Every individual is unique, valuable and deserving of your respect.
- Develop a team spirit. A team works better when its members are able to trust everyone to be loyal and committed.
- Talk with each other frequently between planning conferences. The planning conference is a time to present ideas that have already been discussed.

---

29. Welfare & Institutional Code Section 4646 (f) & 4710(b)

- Encourage consumers to come to the planning conference with well-prepared statements of hopes, dreams and preferences. Some people bring a written statement, others bring audio or video tapes that illustrate their hopes dreams, and preferences.<sup>30</sup>
- Some consumers find rehearsing what they want to say at the planning conference helpful.<sup>31</sup>
- Make sure that everyone on the team has had a chance to read and understand any professional assessments that may influence the choices and decisions that are going to be made during the conference.
- Encourage each other to speak freely. There should be no penalty for saying what you think.
- Be specific about the changes and actions you feel are necessary. Explore several different ways to solve the identified problems.
- Build trust with each other. Do not intrude while others are talking. Do not try to control each other. Do not force your needs and insights into the foreground.<sup>32</sup>

### ***Assessment***

*Assessment is a required part of the person-centered planning process.*<sup>33</sup>  
The purpose of assessments is to help the team understand the needs, preferences and choices of the consumer and family. Assessments provide information that helps the consumer and family to define a preferred

---

30. Capitol People First and Protection & Advocacy, Inc.(1994). *Your IPP: It's not just a piece of paper*. Sacramento, CA.

31. Capitol People First and Protection & Advocacy, Inc.(1994). *Your IPP: It's not just a piece of paper*. Sacramento, CA.

32. Adapted from Heider, 1985.

33. Welfare & Institutions Code Section 4646.5(a)

future, and to choose the best way to get there. In a person-centered planning system, assessments are not used to determine how "disabled" a consumer is or to determine whether the preferred future defined by the consumer and family is appropriate.

Assessment is an ongoing process. When the planning team shares what they know about the life patterns, interests, and preferences of the person and family, they are conducting an assessment. The informal discussions of the planning team which identify the strengths and abilities of the individual and family, as well as the problems and challenges they experience, are the primary form of assessment in the person-centered process.

*When the planning team decides it is necessary, professional assessments will be conducted.<sup>34</sup> Professional assessments shall be conducted by qualified individuals and performed in natural environments whenever possible.<sup>35 36</sup> If the consumer, or the family of a minor, agrees, the team will review the consumer's general health status. This includes a discussion of current medications, their side effects, and the date of the last medication review.<sup>37</sup> Assessments should be conducted in the primary language of the consumer if feasible, and if not, then an interpreter must be present to assist in the assessment process.*

---

34. If the consumer or family believes that a professional assessment is necessary, and a regional center representative on the planning team refuses to have the assessment completed, the consumer or family may appeal the refusal using the procedures in Welfare & Institutions Code Section 4700 et seq.

35. Welfare & Institutions Code Section 4646.5(a)(1)

36. Consumers living in licensed health facilities must have a comprehensive functional assessment prior to their admissions conferences (Title 42, Code of Federal Regulations Section 483.440[c] Standard: Individual Program Plan, W210 & W211)

37. Welfare & Institutions Code Section 4646.5(a)(5)

*Assessments shall reflect awareness of, and sensitivity to, the lifestyle and cultural background of the consumer and the family.<sup>38</sup> Assessment is a required part of the person-centered planning process.<sup>39</sup>*

*Assessments shall determine<sup>40</sup> the consumer's:*

- *life goals*
- *strengths and capabilities*
- *preferences, including preferred*
  - ◆ *persons and groups to relate to*
  - ◆ *community activities*
  - ◆ *living arrangement*
  - ◆ *employment or school placement*
  - ◆ *leisure activities*
- *needs for supported living and other supports<sup>41</sup>*
- *barriers to fulfillment of life goals or preferences*
- *concerns or problems*

*For children with developmental disabilities, the assessment should include a review of the strengths, preferences and needs of the child and family unit as a whole.<sup>42</sup> When children with developmental disabilities live with their families, the assessment shall include a determination of the family's current needs and the supports necessary to maintain the child in the home.<sup>43 44 45</sup>*

---

38. Welfare & Institutions Code Section 4646.5(a)(1)

39. Welfare & Institutions Code Section 4646.5(a)

40. Welfare & Institutions Code Sections 4646.5(a)(1) & 4512(b)

41. Welfare & Institutions Code Section 4689(c)

42. Welfare & Institutions Code Section 4646.5(a)(1)

43. Welfare & Institutions Code Section 4685(c)(2)

44. Assessments for children with special health needs who live in a licensed community care facility will be conducted in compliance with Welfare & Institutions Code Sections 11710 & 11731(c)(1)

45. Assessments for infants and toddlers below the age of three will be conducted in compliance with Welfare & Institutions Code Sections 95014(a)(1) & 95016(a)

## **Conducting a planning conference**

### ***Planning conferences***

Planning conferences are meetings of the planning team. One of the purposes of these meetings is to bring all the members of the planning team together in the same room for face-to-face discussions. *Since person-centered IPPs are the product of joint decisions made (at a minimum) by the consumer and service coordinator, both the consumer and service coordinator must be present at these conferences*, unless the consumer refuses to attend.<sup>46</sup> If the consumer refuses to attend the planning conference prior to the conference, the service coordinator should review, with the consumer, the issues to be discussed in a manner the consumer finds acceptable.

Planning conferences are generally held as face-to-face meetings, but may be conducted by phone, or through a series of interviews with the members of the planning team, with the agreement of all members of the planning team.

Another purpose of planning conferences is to compile and record the information necessary for achieving the preferred future of the consumer and family. The written record of the information exchanged at a planning conference and the decisions and choices that were made at the conference is the written form of the IPP.

A planning conference and the written IPP that is produced from it provide a picture of the progress that has been made toward achieving the preferred future (and what remains to be achieved) at a given point in time. While planning conferences and written IPPs are important, person-centered planning is more than a series of meetings that produce documents.

### ***Risk Assessment (Revised July 1, 2001)***

During the individual program plan meetings, the planning team considers the goals of the consumer and the services and supports needed to achieve those goals. During these discussions, the team should consider whether there are any current or potential health and safety risks to the individual that would affect their desired life and living arrangement. Focusing on the individual's goals, resources, and desires, the planning team can decide how to best manage these risks—in a manner consistent with the individual's desired lifestyle and best interests.

To help planning teams assess risks, and develop strategies to manage them, the service coordinator should review all special incident reports, and other pertinent records, since the last planning team meeting. The Department will make available a special incident database that will help planning teams identify trends or patterns that should be reviewed and discussed during the meeting. The Department will also provide information about best practices for reducing the most common risks. This information will help planning teams identify potential ways to manage risks.

---

46. Welfare & Institutions Code Section 4646(d)

### *Scheduling the conference.*

- While there is no required time limit for planning conferences, they should be scheduled to allow enough time for thorough discussion of all issues. *If agreement cannot be reached at the first meeting, a second meeting must be held within 15 days.*<sup>47</sup>
- *Planning conferences must be held at least every three years,*<sup>48 49</sup> but can be requested by the consumer or family at any time. Any major life change should trigger a planning conference. Major life changes include significant changes in health condition, moving from one place to another, loss of a person who is deeply involved in support, loss of a job, change of school, etc.
- The consumer's service coordinator is responsible for scheduling planning conferences, but any member of the team can help with
- scheduling. *When a consumer or family requests a review of the IPP, the consumer's service coordinator is responsible for scheduling the review within 30 days of the request.*<sup>50</sup>
- The date, time and location of the planning conference should be convenient to all team members.
- *If requested by the consumer, a designated representative shall receive written notice of all meetings to develop or revise the IPP.*<sup>51</sup>
- The location of the planning conference should be comfortable and easily accessible to all members of the team, with particular attention being paid to the needs of the consumer and family.

---

47. Welfare & Institutions Code Section 4646.5(f)

48. Welfare & Institutions Code Section 4646.5(b)

49. For consumers living in licensed health facilities, such as the state developmental centers, IHPs must be scheduled by the facility staff, at least annually (Title 42, Code of Federal Regulations, 483.440[f] Standard: Program Monitoring and Change, W258[2]).

50. Welfare & Institutions Code Section 4646.5(b)

51. Welfare & Institutions Code Section 4646(e)

### ***Setting the ground rules***

Diversity in culture, language, ethnicity and lifestyle is the norm in California. Productive communication among the members of the planning team requires sensitivity to this diversity. Further, *awareness of, and sensitivity to the lifestyle and cultural background of consumers and families, as well as respect for their right to make choices, is a required feature of person-centered planning.*<sup>52</sup> Therefore, ground rules for discussion among team members during planning conferences must be established.

These are some suggested ground rules:

- Discussions are positive in tone, focusing on the capacities and capabilities of the consumer and family.
- The decisions and choices made at the planning conference are made by the team as a whole, with deference to the wishes and preferences of the consumer and family.
- Discussions will be non-judgmental and open-ended. Team members agree to share ideas and viewpoints freely, but also agree not to argue. Team members agree to listen to and consider the ideas of everyone on the team.
- The discussions of what the consumer wants to do now, is able to do now, and wants to do in the future, provide the focus of attention and effort for the team.
- There is nothing carved in stone that says that everything that needs to be accomplished at this conference must be accomplished in a single meeting. If further information is needed, or someone has to leave the meeting, the conference can be continued later with another meeting. *If*

---

52. Welfare & Institutions Code Sections 4502.1 & 4646.5(a)(1)



*agreement cannot be reached at the meeting, a second meeting must be scheduled within 15 days. Additional meeting may be held if the team agrees.*<sup>53</sup>

- Active involvement and discussion by consumers and families are promoted by creating a comfortable, friendly and encouraging atmosphere during the meeting.

### ***Discussion pattern***

Each planning team will adopt a pattern of discussion that suits their needs and preferences. Some things however, need to be discussed at a planning conference. They are shown below in *italics*, within a common pattern of discussion, but they don't necessarily need to be discussed in the order they are listed below.

- It is often useful to have one of the team members keep notes so that later, the planned actions can be related to goals and objectives, which are in turn related to the statement of a preferred future. Many people prefer to have notes taken on a large chart pad so they are easily read by all team members. Others are happy to use note paper and read from the relevant notes when questions rise.
- A general discussion of hopes, dreams (or nightmares) and preferences leads to statements of a preferred future for the consumer. These are statements of what the consumer would do and be under the best possible circumstances.
- With the preferred future in mind, the team discusses the current situation. By encouraging open and frank descriptions of how things are going, and by listening carefully to each other, the team gradually develops a complete picture of what is happening and whether the consumer and family feel they are going in the right direction. These discussions constitute an informal *assessment of the life goals*,

---

53. Welfare & Institutions Code Sections 4646.5(f)

*capabilities and strengths, preferences, barriers, and concerns or problems of the consumer,*<sup>54</sup> and how those relate to the consumer's preferred future and desired outcomes.

- A series of goals will emerge from the statements of preferred future and descriptions of the current situation. *Goals are broad statements about where the consumer would like to live, what kind of job the consumer would like to have, what recreational activities the consumer would like to engage in, and so on.*<sup>55</sup> These are outcome statements. Goals are usually statements of what the consumer would like to change, but can also be statements of what the consumer wants to keep in his or her life. The achievement of some goals may take several years.

The following IPP goals, listed in the Lanterman Act, provide general guidance for this part of the team discussions:

- Increased independence<sup>56</sup>  
Example: I will use public transportation.  
Example: I will live in my own apartment.
- Increased productivity<sup>57</sup>  
Example: I will get a job.  
Example: I will get my high school diploma.
- Increased participation in community activities (community integration)<sup>58</sup>  
Example: I will join the health club.  
Example: I will go to church.

---

54. Welfare & Institutions Code Section 4646.5(a)(1)

55. Welfare & Institutions Code Sections 4502(j) & 4646.5(a)(2)

56. Welfare & Institutions Code Sections 4646(a) & 4648(a)(1)

57. Welfare & Institutions Code Section 4646(a)

58. Welfare & Institutions Code Sections 4646(a) & 4648(a)(1)

- Achievement of a pattern of daily activities that approximates that available to the non-disabled peers of the consumer<sup>59</sup>
  - Example: I will set my daily schedule.
  - Example: I will handle my own finances.
  
- Assurance of a stable and healthy living environment in a residence of the consumer's choice<sup>60</sup>
  - Example: John (a minor child) will be supported to live in a foster family home.
  - Example: I will move from the State Developmental Center to an apartment with a paid roommate.
  
- Increased opportunity for the consumer to develop stable and nurturing interpersonal relationships<sup>61</sup>
  - Example: I want to visit my family.
  - Example: I will have more friends.
  
- Maximized control over choices and decisions that affect daily life<sup>62 63</sup>
  - Example: I will choose my own toiletries.
  - Example: I will hire my own support staff.
  
- Development of unpaid natural supports<sup>64</sup>
  - Example: My sister will take me shopping.
  - Example: My neighbor will teach me to ride the bus.

---

59. Welfare & Institutions Code Section 4501

60. Welfare & Institutions Code Sections 4646(a) & 4689

61. Welfare & Institutions Code Sections 4646.5(a)(2) & 4648(a)(1)

62. Control over these choices and decisions require protection of the civil, legal, and service rights of the person with developmental disabilities. Self-advocacy, or assisted advocacy, is sometimes necessary to protect those rights and thereby ensure maximum control over these choices and decisions. Welfare & Institutions Code Section 4648(b)

63. Welfare & Institutions Code Sections 4503(i), 4646.5(a)(2), 4648(a)(1)

64. Welfare & Institutions Code Section 4648(a)(13)(C)

- Development of a circle of support<sup>65</sup>  
Example: I will invite family and friends to a circle of support meeting.  
Example: My service coordinator will support me in developing a circle of support.
- Maintenance of a family's ability to care for their child with developmental disability in the family's home<sup>66</sup>  
Example: We will receive increased respite hours.  
Example: I will go to an after-school program at my school.
- Objectives are milestones on the path to achieving the consumer's goals. Objectives are specific, time-limited activities for implementing goals. Objectives shall be stated in terms that allow measurement of progress toward the desired outcomes, or monitoring of service delivery.<sup>67</sup>

A simple example of the difference between objectives and goals would be that one of the consumer's goals is to have a job in one of several restaurants closer to home. One objective might be to pick-up, fill out and return one job application at a nearby restaurant each week for the next six weeks. Submitting the job applications will not ensure that the goal of getting a job closer to home is achieved, but it is a concrete and understandable step in the process, and is a reasonable objective.

- Additionally, planning team members make commitments to assign or undertake specific activities, within a set time frame, to assist the consumer in moving from one milestone, or objective, to the next. These are commitments made by the members of the planning team, to engage in specific activities within the times agreed to. This is the "who does what by when" information that helps the planning team to maintain its focus and ensure accountability for the agreements made.

---

65. Welfare & Institutions Code Section 4512(b) & (f)

66. Welfare & Institutions Code Sections 4646.5(a)(3), 4648(a)(1) & 4685

67. Welfare & Institutions Code Section 4646.5(a)(2)

An example of a specific commitment for the objective above might be for one of the other members of the planning team to agree to meet the consumer every Tuesday after work for the next six weeks to walk around the neighborhood with him while he picks up applications and help him fill them out.

- In many instances, the achievement of goals and objectives will require some level of service or support. Some services and supports may be provided by friends, neighbors or a circle of support, at no cost, and as part of a natural relationship. Other services and supports are available through publicly funded agencies that serve all citizens. Services and supports that have been designed specifically to meet the needs of persons with developmental disabilities<sup>68</sup> are available through the regional center or developmental center.

*When discussing necessary services and supports, the team shall consider all appropriate options for meeting each IPP objective.*<sup>69</sup> Team members should consider how services and supports can be arranged to achieve the goals and objectives agreed to by the team. Discussion should also include which services and supports can be gained through natural and generic sources, as well as those which can be purchased by the regional center.

These service and support options may include, but are not limited to:<sup>70</sup>

- adaptive equipment and supplies
- advocacy
- advocacy assistance or facilitation
- assessment

---

68. Welfare & Institutions Code Section 4512(b)

69. Welfare & Institutions Code Section 4512(b)

70. Welfare & Institutions Code Sections 4512(b), 4648, 4685, 4687, 4688 & 4689(c)

- assistance in finding, modifying and maintaining a home
- behavior modification
- behavior training
- camping
- childcare
- community integration services
- community residential placement
- community support facilitation
- counseling for the consumer's family
- counseling for the consumer
- daily living skills training
- day care
- development and provision of a 24-hour emergency response system
- development of unpaid natural supports
- diagnosis
- diapers
- domiciliary care
- education
- emergency and crisis intervention
- emergency housing
- emergency relief for personal care attendants
- evaluation

- facilitated circles of support
- facilitation with a facilitator of the consumer's choosing
- facilitation including outreach and education
- financial assistance
- follow-along services
- foster family placement
- habilitation
- home location assistance
- homemaker services
- identification of circles of support
- infant stimulation programs
- information and referral services
- mental health services
- occupational therapy
- paid neighbors
- paid roommates
- parent training
- peer advocates
- personal care or assistance
- physical therapy
- protection of civil, service and legal rights
- protective services

- provision of circles of support
- recreation
- recruiting, hiring and training personal care attendants
- respite
- respite for personal care attendants
- self-advocacy training
- sexuality training
- sheltered employment
- short term out-of-home care
- social services
- social skills training
- sociolegal services
- special living arrangements
- specialized dental care
- specialized medical care
- speech therapy
- support services for consumers in homes they own or lease
- supported employment
- supported living arrangements
- technical assistance
- training



- transportation services
- travel training
- treatment
- vouchered services
  
- services and supports that are necessary for families to maintain their children with developmental disabilities at home, when living at home is in the best interest of the child<sup>71</sup>
- If a child must live out of the family home, the regional center will make every effort to place the child in a living situation as near to the family home as possible, as well as discuss a plan to reunify the child with the family.<sup>72</sup>
- services and supports needed to maintain and strengthen the family unit, where one or both parents is an individual with developmental disabilities<sup>73</sup>
- other service and support options which would result in greater self-sufficiency for the consumer and cost-effectiveness to the state.<sup>74</sup>
- Team discussions are usually concluded with a discussion of when the next conference should be scheduled. While planning conferences must be held at least once every three years, it is up to the team to decide how often they must meet. The preferences and needs of the consumer and family should guide the team's choice of the appropriate time for the next meeting.

---

71. Welfare & Institutions Code Section 4685(c)(2)

72. Welfare & Institutions Code Section 4685.1(a) & (b)

73. Welfare & Institutions Code Section 4687(f)

74. Welfare & Institutions Code Section 4648(a)(11)

## Content of the written IPP

After the team has completed its discussions, a written record of the decisions and choices made is prepared. This is the written form of the IPP that reflects the decisions and choices made during the planning conference. The written IPP should be viewed as a picture of the planning effort at a point in time. At a minimum, each written IPP must contain the ***bold, italicized*** components.

### ***Goals***

*A written IPP contains statements of goals based on the required assessment.*<sup>75</sup>

### ***Objectives***

*A written IPP also contains objectives for achieving the stated goals.*<sup>76</sup> IPP objectives must be specific, time-limited, stated in measurable terms, and related to the individual's goals and needs. An objective is measurable if it is written in a way that allows the planning team to determine if every service and/or support specified in the objective has been delivered in a manner that is satisfactory to the consumer<sup>77</sup>.

Objectives must be stated in terms of what benefit the consumer will derive, and not in terms of what procedures service providers will use.

---

<sup>75</sup> Welfare & Institutions Code Sections 4646.5(a)(1) & (2)

<sup>76</sup> Welfare & Institutions Code Section 4646.5(a)(2)

<sup>77</sup> Welfare & Institutions Code Sections 4646.5(a)(2) & (5)

### ***Family plan component***

*A written IPP for a consumer who is a minor and is living at home must include a family plan component describing those services and supports necessary to successfully maintain the child with developmental disabilities at home.<sup>78</sup> Regional centers shall consider every possible way to assist families in maintaining their children at home (when living at home is in the best interest of the child) before considering out-of-home placement.<sup>79</sup> If an out-of-home placement is necessary, the regional center will make every effort to find a living situation as close to the family home as possible. If this is not possible the regional center will develop a plan to return the minor to, or in a living situation near, the family home.<sup>80</sup>*

### ***Schedule of Services and Supports***

*When the decisions and choices made during the planning conference include provision of services and supports, a summary, called a schedule of services and supports, is prepared.<sup>81</sup> The services and supports that are scheduled must be related to the achievement of the goals and objectives described in the IPP.*

*The written schedule of services and supports shall identify the provider (or providers) responsible for attaining each objective including, but not limited to<sup>82</sup>*

- natural supports
- generic service agencies
- contracted providers
- regional center vendors

---

78. Welfare & Institutions Code Section 4685(c)(2)

79. Welfare & Institutions Code Section 4685(c)(2)

80. Welfare & Institutions Code Section 4685(c)(2)

81. Welfare & Institutions Code Section 4646.5(a)(4)

82. Welfare & Institutions Code Section 4646.5(a)(4)

At the end of the planning conference, each member of the planning team should be given an opportunity to review what was agreed to. While handwritten IPPs are permitted, they are usually typed some time after the planning conference to make them easier to read. When the written IPP is typed after the planning conference, the typed IPP should be distributed to the members of the planning conference within 45 days after the planning conference.

*Whether handwritten or typed, the final IPP must be prepared in a form that is understandable to the consumer and family.<sup>83</sup> If the consumer or family needs interpretation or translation services to fully participate in the development of the IPP, or to understand the written IPP, the regional center shall provide translation or interpretation services as appropriate.<sup>84</sup>*

*If the regional center administration decides at a later date (and without the consent of the consumer) to reduce, terminate, or change the services (currently being delivered) that are listed in this schedule, the regional center must notify the consumer by certified mail at least 30 days before taking the action.<sup>85</sup> If the consumer or family files an appeal of this decision within 10 days, the services will be continued during the appeal procedure.<sup>86</sup>*

---

83. Welfare & Institutions Code Section 4502.1 and California Code of Regulations, Title 22, Sections 98210(a) & 98211(c)

84. California Code of Regulations, Title 22, Sections 98210(a), (c), (d) & 98211(c)

85. Welfare & Institutions Code Section 4710(a)

86. Welfare & Institutions Code Section 4715(a)

*If the regional center administration decides at a later date (and without the consent of the consumer) to reduce, terminate, or change the services that are listed in this schedule, but have not yet been purchased, the regional center must notify the consumer by certified mail at least 5 days before taking the action.<sup>87</sup> If the consumer believes that this action is illegal, discriminatory, or not in his or her best interest, the consumer may request a fair hearing.<sup>88</sup>*

### ***Review Schedule***

*The IPP shall contain a schedule of regular periodic review and reevaluation to find out whether planned services have been provided; objectives have been met within the times specified; and consumers and families are satisfied with the IPP and its implementation.<sup>89</sup>*

*When there is a plan to move a minor child into or near their family's home, the plan will be updated every six months, or as agreed to by the parents or guardians.<sup>90</sup>*

---

87. Welfare & Institutions Code Section 4710(b)

88. Welfare & Institutions Code Section 4710.5

89. Welfare & Institutions Code Sections 4646.5(a)(5) & 4750

90. Welfare & Institutions Code Section 4685.1(b)

## ***IPP Implementation***

### ***The scope of services and supports purchased by regional centers***

*In order to achieve the stated objectives of a consumer's IPP, the regional center shall conduct a variety of activities.<sup>91</sup> These activities may include purchasing services and supports (through vendorization or a contract) for a consumer from any individual or agency which the regional center and consumer agree will best accomplish all or any part of the consumer's IPP.<sup>92</sup>*

*A regional center must identify and pursue all possible sources of funding for consumers receiving regional center services including:<sup>93</sup>*

- *Governmental or other entities or programs required to provide or pay the cost of providing services, including Medi-Cal, Medicare, the Civilian Health and Medical Program for Uniform Services, school districts, and federal supplementary security income and the state supplementary program.<sup>94</sup>*
- *Private entities to the maximum extent they are liable for the cost of services, aid, insurance, or medical assistance to the consumer.<sup>95</sup>*

---

91. Welfare & Institutions Code Section 4648

92. Welfare & Institutions Code Section 4648(a)(3)

93. Welfare & Institutions Code Section 4659(a)

94. Welfare & Institutions Code Section 4659(a)(1)

95. Welfare & Institutions Code Section 4659(a)(2)

- *Parental support - regional centers shall not use purchase of service funds to purchase services for a minor child without first taking into account, when identifying the minor child's service needs, the family's responsibility for providing similar services to a minor child without disabilities.<sup>96</sup> For example, when purchasing or providing a voucher for day care services for parents who are caring for children at home, the regional center may pay only the cost of the day care services that exceeds the cost of providing services to a child without disabilities unless the family can demonstrate a financial need, or when doing so will enable the child to remain in the family home.<sup>97</sup>*

*Regional center funds shall not be used to supplant the budget of any agency which has a legal responsibility to serve all the members of the general public and is receiving public funds for providing those services.<sup>98</sup> Further, services selected by the regional center must reflect the cost-effective use of public resources.<sup>99</sup> As defined in regulation, cost-effectiveness means obtaining the optimum results for the expenditure.<sup>100</sup>*

*In implementing IPPs, regional centers shall first consider services and supports in natural community, home, work, and recreational settings. Services and supports shall be flexible and individually tailored to the consumer and, where appropriate, his or her family.<sup>101</sup>*

---

96. Welfare & Institutions Code Section 4659(c) & California Code of Regulations, Title 17, Section 54326(c)(1). Note that in such instances, the regional center must provide for exceptions, based on family need or hardship.

97. Welfare & Institutions Code Section 4685(c)(6)

98. Welfare & Institutions Code Sections 4648(a)(8)

99. Welfare & Institutions Code Section 4646(a)

100. California Code of Regulations, Title 17, section 58501(a)(6)

101. Welfare & Institutions Code Section 4648(a)(2)

Regional centers are obligated to find innovative and economical methods of achieving the objectives in consumers' IPPs.<sup>102</sup> For example, a regional center may issue a voucher for services and supports provided to a consumer or family.<sup>103</sup> Community support may also be provided to assist consumers to fully participate in community and civic life. This support may include programs, services, work opportunities, business, and activities available to persons without disabilities. This shall include any of the following:<sup>104</sup>

- outreach and education programs and services within the community,<sup>105</sup> including assistance in identifying and building circles of support within the community<sup>106</sup>
- supports to consumers to enable them to more fully participate in the community<sup>107</sup>
- developing unpaid natural supports when possible<sup>108</sup>
- *if facilitation requiring the services of an individual is specified in the IPP, the facilitator shall be of the consumer's choosing*<sup>109</sup>

---

102. Welfare & Institutions Code Section 4651

103. Welfare & Institutions Code Section 4648(a)(4)

104. Welfare & Institutions Code Section 4648(a)(13)

105. Welfare & Institutions Code Section 4648(a)(13)(A)

106. Welfare & Institutions Code Section 4648(c)

107. Welfare & Institutions Code Section 4648(a)(13)(B)

108. Welfare & Institutions Code Section 4648(a)(13)(C)

109. Welfare & Institutions Code Section 4648(a)(12)



## *Considerations for selecting providers*

*The regional center and consumer, and family, when appropriate, shall consider all of the following when selecting a provider of consumer services and supports:*<sup>110</sup>

- *the consumer's choice of providers*<sup>111</sup>
- *a provider's ability to deliver services and supports that can accomplish all or part of the consumer's IPP*<sup>112</sup>
- *a provider's success in achieving the objectives in the IPP*<sup>113</sup>
- *where appropriate, possession of a license permitting the provision of the services needed, or accreditation that assures the quality of the services, or professional certification*<sup>114</sup>
- *the cost of providing the services or supports of comparable quality by different providers, if available*<sup>115</sup>
- *the eligibility of the consumer for the same, or similar, services and supports from any publicly funded agency that has a legal responsibility to serve all members of the general public*<sup>116</sup>
- *the cost-effective use of public resources*<sup>117</sup>
- *the desire of the consumer to receive necessary services and supports without having to move elsewhere*<sup>118</sup>

---

110. Welfare & Institutions Code Section 4648(a)(6)

111. Welfare & Institutions Code Section 4648(a)(6)(E)

112. Welfare & Institutions Code Sections 4648(a)(6)(A) & 4512(b)

113. Welfare & Institutions Code Section 4648(a)(6)(B)

114. Welfare & Institutions Code Section 4648(a)(6)(C)

115. Welfare & Institutions Code Section 4648(a)(6)(D)

116. Welfare & Institutions Code Section 4648(a)(8) & 4659

117. Welfare & Institutions Code Section 4646(a)

118. Welfare & Institutions Code Section 4689(a)(2)

- *If the team is considering the appropriateness of having the consumer move to a more restrictive environment, crisis services must be sought in an effort to prevent disrupting a person's living arrangement. If crisis intervention has been unsuccessful, emergency housing in the person's home community must be sought. If dislocation cannot be avoided, the consumer's goals and objectives must reflect that every effort is being made to return the person to the living arrangement he or she chooses, with all necessary supports, as soon as possible.*<sup>119</sup>
- *When the regional center first becomes aware that a family is considering out-of-home placement, the regional center shall meet with the family to discuss the situation and the family's current needs, solicit from the family what supports would be necessary to maintain the child in the home, and utilize creative and innovative ways of meeting the family's needs and providing adequate supports to keep the family together, if possible.*<sup>120</sup>

*When an existing IPP is being updated, the following shall be determined before a service or support previously selected is renewed or continued:*<sup>121</sup>

- *the consumer is satisfied with the service or support,*
- *the planning team agrees that the planned services and supports have been provided, and reasonable progress toward achievement of the planned objectives has been made, and*

---

119. Welfare & Institutions Code Section 4648(a)(10)

120. Welfare & Institutions Code Section 4685(c)(2)

121. Welfare & Institutions Code Section 4648(a)(7)

- *when there is a plan to move a minor child into or near their family's home, the plan will be updated every six months, or as agreed to by the parents or guardians.*<sup>122</sup>

### ***Monitoring***

*Each consumer shall have a designated service coordinator who is responsible for providing or ensuring that needed services and supports are available to the consumer.*<sup>123</sup> *The consumer's service coordinator shall monitor the implementation of the IPP to ascertain that objectives are met.*<sup>124</sup>

---

122. Welfare & Institutions Code Section 4685.1(b)

123. Welfare & Institutions Code Sections 4640.7(b) & 4689(e)

124. Welfare & Institutions Code Section 4647(a)