

Aging Transition - Planning For the Future

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This document was written with the knowledge that we, as caregivers, need to have our documents in order while preparing and protecting the future life of our loved one with a disability (son, daughter or family member) when we are no longer here. It is a very difficult task. It can be made easier by talking about it and sharing the information with those who are important in our loved one's life.

It is advisable that you capture all your information in one place. Make sure you record and document significant changes in your loved one's Individual Support Plan (ISP). Purchase a notebook or tablet where you can record all of your information. Make sure your children or family members know where that notebook is when it is needed. Talk about it with them.

Planning now can help make the transition for your loved one to move smoothly to a life in the community when you are no longer able to provide for their care. It can provide direction to others when you are no longer here. Following and implementing the outline in this document can provide you with a sense of security in knowing that plans are in place and will give you the satisfaction in knowing you have made the best plans possible and they are known to those who succeed you. Most often, those who will assume the role of caregiver are unfamiliar with the many necessities and resources available to help them.

Beginning the process.

There are many planning tools that were developed by families for families as well as professionals organizations who are helping to create a vision and strategy to implement an *Everyday Life* for your loved one. You may know them by names such as, Essential Lifestyle Planning, Making Action Plans (MAPS), Positive Approaches, LifeCourse Tools, etc. to name a few. We are encouraging the use of a personal planning tool to assist in developing a rich and positive outcome for your family member. It will provide a solid starting point that you can use to provide a springboard for completing the following information. It is this Vision and suggested strategies that you want passed on to your successors who'll provide your loved one's support in the future. The tools provide a concise look at the vision, current support (both paid and natural), and strategies for developing and maintaining that path. From here, you can then expand in more detail the specifics regarding your loved one's support for each of the life domains.

How You Will Be Using Your Planning Tools:

- Create and maintain an updated version of your loved one's vision tool or Individual Support Plan (ISP) for an Everyday Life and what are the desired experiences to achieve those goals.
- Update the ISP with outcomes consistent with your loved one's path and Vision.

ISP - Using Your Son or Daughters Individual Support Plan as a Living Document

The ISP is a critical document for planning the future and for obtaining services. It does more than just look at what the individual is interested in doing or would prefer. It sets goals or outcome statements. Then it looks at what actions are needed to make those interests and preferences happen.

The ISP takes on the importance of a primary document for requesting services. It lays out the services being requested and provides the justification for those services. If you do not provide adequate justification for service in the ISP it will result in denial of that service.

So what makes the ISP so important? It puts in writing the plan to support the needs and desired outcomes and dreams of the person. It makes sure that those needs are assessed and that they are met. It is viewed as an agreement between a person and the Administrative Entity (AE)/County. It shows that important information in the ISP is accurate, comprehensive and upto-date.

This is an ideal time for people to get together and discuss what is important to the person and what supports or services need to be put in place. It is time for you, your son or daughter, family and friends, employer, coworkers, teachers, supports coordinators, advocates, direct care professionals, and the providers of services - all the people who are important to the person. This is a time when real discussion can take place and plans for the future can be can be laid out and set in place. The individual support plan is an absolute springboard for needed discussions, solid foundations and an opportunity for growth.

Additional Considerations

Some legal documents are necessary to guarantee that your successors have the authority and resources to support your loved one throughout the lifespan with their decisions for the Everyday Life you've prepared above. In the following pages you can list or reference any or all legal documents. For example: Who will function as your successors for the below, if applicable, and how is their successor determined?

- a) Name of Attorney or Legal Representative
- b) Insurance Policy
- c) Last Will and Testament both yours and your loved one's.
- d) Special Needs Trust, Trustees and guidelines
- e) Power of Attorney
- f) Guardianship
- g) Living Will and/or Medical Directives
- h) Representative Payee
- i) Common Law or Managing Employer
- i) Microboard

Caring About and Caring For

After your vision for a good life for your loved one, the next important step is to document who cares about and cares for your loved one now and after you're incapable.

Caring About – These are the people who demonstrate affection and interest and/or who provide guidance and self-esteem for your loved one. It's people who have deep understanding and knowledge about your loved one and people who have a long term commitment to your loved one's well-being.

Examples might be employer, friend, relative, and of course primary caregivers.

Caring For - The people who provide the direct support for your loved one's activities or needs. It's people who might provide material or financial support or people who advocate for your loved one. It could be the people who provide inclusion opportunities for your loved one.

Examples: Direct Support Professional (DSP,) Employer, Support Coordinator (SC), Support Broker, community leaders.

Some may function as both, such as primary caregivers. Some, like a DSP or employer, may begin interaction with your loved one only to provide a service (caring for) but overtime could develop into someone committed and cares about your loved one's long term well being.

On the next 2 pages list the people who care about and care for your loved one. On the first page use the 2nd column to enter the name(s) of those who currently care about that aspect of your loved one's life. In the next column list who will care about that aspect when you are no longer capable. Do the same on the next page regarding who now cares for, provides a service, and who will care for when you're incapable.

	Who cares about this now:	Who will care about this when I'm incapable:
Affection and Self- Esteem: People who can have a mutual relationship; celebrate birthdays and holidays; honor family culture and traditions.		•
Repository of knowledge: People who know the history and the vision for the future; knows what the person wants and needs to be successful, healthy and happy.		
Lifetime commitment: People who will be there for the long haul; Who will be in the person's life long term.		

	Who cares for this	Who will care for this
(Ass)	now:	when I'm incapable:
Provider of Day to		•
Day Care:		
Making sure the		
person's needs are		
met for food, shelter,		
comfort, medical		
care, and quality of		
life.		
Material and Financial		
Needs:		
Providing for OR		
helping manage,		
money, property,		
other things needed to		
accomplish daily		
activities and needs.		
Facilitator of		
Inclusion:		
Helping create and		
maintain friendships,		
community		
connections and		
opportunities for life		
experiences.		
Advocate for		
Support:		
Speaking up and		
supporting the person		
to speak up for their,		
rights, needs, and		
good life.		

Life Categories

LifeCourse Tools uses the term Life Domains to categorize the different aspects and experiences of life that we all consider as we age and grow. As we plan for our loved one's care after we're gone, we need to plan the support necessary to maintain and grow our loved one's experiences and goals for each life domain or category. The categories (domains) are: Daily Life and Employment, Community Living, Social and Spirituality, Healthy Living, Safety and Security, Citizenship and Advocacy, and Supports and Services.

The following pages list the life categories with space to inventory and plan the support of your loved one with a disability. Plan as if you'll be incapable tomorrow of providing your role; then update periodically when significant changes occur.

You may find some responses belong in multiple categories. It doesn't matter where you place the response. What matters is that you've captured at least once the idea, plan, or support need for your loved one somewhere in the document.

Each category will have the following sections:

- Considerations or Things to Think About
- What does your loved one have now
- What does your loved one want that he or she doesn't have now
- List references or pertinent documents and their location (ISP, Vision Tool, etc.)

Daily Life and Employment - Have Now

Describe your loved one's current daily life, routines, and/or employment.Considerations:

- A. Where does your loved one work or go to school?
- B. What is your loved one's daily routine?
- C. What current hobbies or interests does your loved one participate in?
- D. What are your loved one's hygiene, food prep, and daily chore skills?
- E. What transportation is required for your loved one's daily life?
- F. What technology does your loved one use in their daily life

G. What are some daily stress	ors or phoble	as <i>:</i> 	 	

Daily Life and Employment - Want to Have

Describe what you want for your loved one's current daily life, routines, and/or employment in the future.

- A. Where does your loved one want to work or go to school?
- B. What does your loved one want for a daily routine?
- C. What new current hobbies or interests does your loved one want?
- D. What are your expectations for your loved one's hygiene, food prep, and daily chore skills?
- E. What transportation will be required for your loved one's daily life?
- F. What technology does your loved one want or strive to use in their daily life
- G. Any new stressors or phobias expected? Lastly, list any specific documentation attached, referenced, or file location of legal documents that support aspects of your loved one's life for this category.

Community Living - Have Now

	derations:	ity living arrangemen	ns.	
	Where does your loved one live	e now?		
B.	Does your loved one own or re	nt a home?		
C.	What income supports the livin	g arrangements?		
	How is the home maintained?	in the second		
	What transportation is present		no?	
г.	What friends or family currently	r iive witti your loved oi	1 0 ?	

Community Living - Want to Have

Describe your loved one's <u>future</u> goals and aspirations for community living arrangements:

- A. Where does your loved one want to live when you're no longer here?
- B. What are some of the options for community living your loved one and you are considering e.g. own, rent, supported living, group home, shared living, etc.?
- C. Have you prioritized the options and made them known in the ISP and/or Support Broker?
- D. How will the options be paid for?
- E. Describe the level of support needed for the planned options?
- F. How will the living arrangement be maintained?

tly, list any specific docu t support aspects of you ng.	r loved one's		ation of legal docume

Social and Spirituality - Have Now

Describe your loved one's current social and spirituality:

- A. Does your loved one attend religious services? If so, when and where?
- B. Does your loved one have friends or family they like to visit or do things with?
- C. Does your loved one date and with whom?
- D. What does your loved one do for recreation or personal time with others?
- E. What are the community social events, clubs, or organizations your loved one likes to attend?
- F. Does your loved one attend social skills classes?

G. What transportation is	needed for t	the above?		

Social and Spirituality - Want to Have

Describe your loved one's future goals and aspirations for social and spirituality: Considerations:

- A. Does your loved one want to attend religious services in the future? If so, when and where?
- B. What friends or family would your loved one like to visit or do things with?
- C. Will your loved one date and do you know with whom?
- D. What does your loved one aspire to for recreation or personal time with others?
- E. What community social events, clubs, or organizations will your loved one like to attend in the future?
- F. Does your loved one want to attend social skills classes? G. What transportation will be needed for your loved one's social and spiritual future goals? Lastly, list any specific documentation attached, referenced, or file location of legal documents that support aspects of your loved one's life for social and spirituality.

Healthy Living - Have Now

Describe your loved one's current healthy living activities, habits, and needs.

- A. What are your loved one's current choices of diet and exercise?
- B. Who are your loved one's doctors, dentists, specialists, etc.?
- C. What are your loved one's medications?
- D. What are the medical directives?
- E. Describe visual or Hearing impairment?
- F. How does your loved one communicate such as speech, gestures, sign language, iPad, or other device?
- G. What are your loved one's sleep habits or needs?
- H. What is your loved one's ability with hygiene such as toileting, feeding, bathing, hair, teeth, etc.?
- I. Does your loved one have allergies? Describe.J. What technology or devices support your loved one's health?

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Healthy Living - Want to Have

Describe your loved one's future goals for healthy living.

- A. What are your loved one's desired goals for diet and exercise?
- B. Are there future plans to add or change doctors, dentists, specialists, etc.?
- C. Are there future plans to add, try, or change medications for your loved one?
- D. What are future plans to update medical directives?

y, list any specific	attached, refe s's life for healt	ocation of legal de	ocum

Safety and Security - Have Now

Describe your loved one's current safety and security needs.

- A. Who handles your loved one's finances?
- B. What are your loved one's income, assets (bank accounts, trusts, ABLE, SSI), and liabilities?
- C. Where are your loved one's legal documents kept such as social security card, state ID, birth certificate, Passport, Power of Attorney etc.?
- D. Can your loved one tell you their name and address?
- E. Does your loved one know the names of family members?
- F. Is your loved one safe at home or in the community; by his or herself or with support?
- G. What if any devices are used to increase safety such as GPS, phone, monitors, etc.?
- H. Can your loved one call for help or escape a fire?

Does your loved one	e require full o	r limited guar	dianship?	
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Safety and Security - Want to Have

Describe your loved one's future goals for safety and security needs.Considerations:

- A. What adds or changes do you anticipate for your loved one's income, assets (bank accounts, trusts, ABLE, SSI), and liabilities?
- B. What changes to your loved one's support is necessary so he or she is safe at home or the community?
- C. What future documents does your loved one want or need such as state id, passport, and driver's license?
- D. What if any devices are you planning to use in the future to increase safety such as GPS, phone, monitors, etc.?
- E. What added safety measure does your loved one need to develop e.g. calling for help, emergency exit, identification info, etc?

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stly, list any specific documenta t support aspects of your loved			tion of legal docur	ne

Citizenship and Advocacy - Have Now

Describe your loved one's current citizenship and advocacy.

- A. Is your loved one registered to vote and where?
- B. Does your loved one belong to advocacy or community action groups?

D. <i>Doε</i>	es your loved or es your loved or hens, or library'	ne volunteer for	er representative? community service	s such as fi	re department, soup
			7		

Citizenship and Advocacy - Want to Have

Describe your loved one's future goals for citizenship and advocacy.Considerations:

- A. If not already, does your loved one want to register to vote? If so, where?
- B. Does your loved one want to belong to advocacy or community action groups?

C. Does your loved one have a goal to visit h D. Does your loved one in the future want to fire department, soup kitchens, or library?	volunteer for community services such
tly, list any specific documentation attached, refer t support aspects of your loved one's citizenship a	The state of the s

Supports and Services - Have Now

Describe your loved one's current supports and services.

- A. Who currently can be called upon to provide family support such as extended family, neighbors, or community groups?
- B. What federal, state, or local government organizations currently provide support such as DHS, Medicare or Medicaid?
- C. Who currently provides family support for guidance, information, and respite?
- D. Who provides your loved one's peer support?
- E. What paid services is your loved one receiving?
- F. What services are they eligible for?

Supports and Services - Want to Have

Describe your future goals for supports and services.

- A. Who can be called upon in the future to provide family support such as extended family, neighbors, or community groups?
- B. What federal, state, or local government organizations can provide support in the future such as DHS, Medicare or Medicaid?
- C. What future paid services should be planned for?

tly, list any specific o	attached, reference's supports and se	ion of legal docum

Resources:

- **1.** Checklist for My Family A Guide to My History, Financial Plans and Final Wishes. Author, Sally Balch Hurme. AARP.org/Bookstore.
- 2. Mapping the Future A Workbook to Prepare For The Future of Your Loved One With Special Needs Contact the Advocacy Alliance for a free copy at 1-877-315-6855
- **3.** Family Health Information Recording System (FAMILY-HIRS). Philadelphia Coordinated Health Care, PMHCC, www.pchc.org
- **4.** Charting the LifeCourse Missouri Family to Family, UMKC-IHD, UCEDD, http://www.lifecoursetools.com/planning/