

PARTICIPANT GOAL SETTING IN CASH & COUNSELING

Purpose:

There are three major objectives of the Participant Goal Setting (PGS) process:

- (1) To develop a structured process to ensure that the participants' goals are clearly articulated and that the spending plan reflects the needs and wishes of the participants.
- (2) To assure and improve quality at the individual level. In collecting information about goals and outcomes, counselors¹ would be in position to assist participants in addressing problems in the implementation of the spending plan.
- (3) To use data collected for quality improvement at the program level. For example, if a number of participants were having problems with finding adequate back-up support, the solution could involve an organizational response.

Background:

Participants in Cash and Counseling make decisions about how to allocate program funds for services and supports. Each program, based on whether they are offering participants both hiring and budget authority, has a process for determining the amount of dollars available to support the plan, with the participant choosing how to allocate those funds. To make these choices, the participant identifies: 1) his or her goals; 2) the type of long-term support needed; and 3) the way he or she would like to accomplish these goals. The participant may complete the goal setting and planning processes on his or her own, with the assistance of family and or friends, or with help from a counselor working on behalf of the program. In some circumstances, a representative will make these allocation decisions on behalf of the participant. In Cash and Counseling, decisions about how to use funds are approved by either counselor or another program staff member. The counselor's role is to assure that the spending plan follows program guidelines, but the participant designs his/her spending plan with available budget allocation.

Process for Participant Goal Setting:

When enrolling in the program, participants learn about their opportunity to develop a spending plan for services and supports. Information about the planning

¹Each state may have a name other than Counselor such as support broker, resource consultant, or case manager. It will be up to the program to decide what name to place in the document

process is provided in writing, and in conversation. The participant completes the PGS form on his/her own or with family members with a review by the counselor, or waits to complete the form with the counselor. The PGS instrument includes information about goals, questions about how the program can influence these goals, and questions about what aspects of services and supports are most important to the participant. The object of the PGS instrument and the process itself is to link participant goals to services and supports. After a specified period of time—3 or 6 months—a follow-up is conducted to assess program success in meeting the participant’s needs and goals. Follow-up questions ask if the participant’s needs and goals have been achieved and if not, why.

Approach

The draft of the PGS instrument and follow-up was reviewed by national experts in self direction and the 15 Cash and Counseling states participating in the national replication project. Once we had a working final draft of the PGS and PGS-follow-up, we asked for state programs to volunteer to use the instrument with their Cash and Counseling programs. Three states volunteered to participate in the process, Minnesota, Vermont, and Florida.

Each site was asked to use the PGS instrument at the point when an individual agrees to participate in the self-direction option with at least 10 participants. The PGS follow-up tool was to be used 3 or 6 months after enrollment. During the pilot phase we completed phone interviews with staff including program managers or counselors from all three sites. In addition, we made site visits to Vermont and Florida where we also interviewed participants and caregivers. The following description highlights the input that we received from each of the states. Minnesota was not able to pilot test the instrument because they were unable to recruit case managers to volunteer for the pilot test. Changes to the final PGS were made as a result of the pilot experience in Vermont and Florida.

Findings

Participant Goal Setting Instrument

The PGS tool allows states to make adjustments based on their own program goals. One state requested that we change specific terms on the PGS document before pre-testing. Instead of PGS Instrument, the staff asked that the name be changed to Personal Preferences. Since this site never tested the changes we did not incorporate this change in the final version. Second, staff at all three sites updated Section 2 of the PGS, “How Can I Make the Program Work for Me”, to reflect the different services and supports that each of their programs offered. In addition, staff had the flexibility to change the examples that were provided in the PGS to detail how specific populations could use the Cash and Counseling services to meet participants’ needs and wants. For instance, the pilot test included examples about visiting family and friends and remaining independent. For the pre-test, however, no states chose to change the examples.

The two states that were able to pre-test the instrument implemented the survey somewhat differently. In one program, individuals were mailed the examples in Section 2 first, not the entire document. The counselors in the state were concerned that the additional documentation would add more confusion to the already challenging enrollment process. Staff gathered most of the PGS information from the participants at the face-to-face interview.

The other site used the PGS instrument as a mandatory document that needed to be filled out prior to enrollment. In the majority of cases, participants filled the document out themselves or with the help of an authorized representative. Counselors had little to no involvement in assisting with filling out the tool. Either way of presenting the document is adequate as long as the goals expressed by the participants are then incorporated into the spending plan.

There were several areas of concern identified by staff involved in the pilot test. Staff at both pre-test sites indicated that asking questions about a good day and about the participant's personal goals were redundant. According to the program staff, participants were repeating the same items in the -Good Day Section- as they did on the Personal Goals section. Some participants even went so far as to refuse to fill out the --Good day Section. One participant who refused to complete the good day section reported "a good day for me is when I hear the door open in the morning and I know that my worker has arrived". The second point made was that participants did not like filling out the good day section because they wanted to focus on the specific services and supports that they needed. An issue that might have contributed to this reaction was that many participants were coming from programs where only instrumental services were available. There was just no room to think more broadly in the traditional programs. Some participants found the good day section helpful, but even these respondents indicated that there was overlap between the good day and goals development sections. Participant and staff comments led us to drop the good day section and incorporate some of its language into the goals section.

Program staff was particularly positive about the examples section of the instrument. Providing clear, useful, and pragmatic examples about how funds could be used to address a particular participant goal was viewed as a really important contribution of the instrument.

Finally, participants who reviewed the document overwhelmingly stated that they liked it and thought that it was useful. Participants were asked to review the document. Two had used the document prior to enrollment others reviewed the document for the first time at the interview. Each respondent thought that the tool was or would be helpful to themselves or others to identify what is important to them prior to developing a spending plan.

Follow-up Instrument

The follow-up instrument allows programs to use the PGS instrument for individual and programmatic improvement. Pre-testing the document revealed how the document could be useful at the programmatic level. One program had all participants fill out the PGS tool and performed the follow-up assessments on more than 100 participants. Results indicated that the vast majority of participants reported having their goals met. Areas of concern identified by participants included problems with individual workers and financial management issues. Again program staff could use the data to rectify individual issues and to examine quality concerns across the program.

Similar to the PGS, the follow-up tool is viewed as one that may be modified to meet individual or program specific goals. The instrument can include standard questions addressing whether goals were met or to assess impact of the program. The state program can also add different topics that might be of importance. For example, Florida added questions about their program's website.

Finally, it was clear at both sites that questions about social networking such as amount of contact or discussions with family and friends per month did not seem to fit into the follow-up survey. Staff even mentioned that participants or family members seemed to act as if their privacy was being invaded. For the final tool, we removed the six questions from the follow-up tool.

Participant Goal Setting

(Program's name) gives you the resources to buy things to help you meet your personal care needs, or to hire people who will help you take care of your daily needs. The resources (Program's name) can provide are limited, so it is important to use them in ways that will help you the most.

This worksheet will help you to answer the following questions:

- What are my personal goals?
- What goods, services, and supports are available to me through the program?
- What services and supports will I need to ensure that I am getting what is important to me?

You may fill out the following worksheet yourself or with help from your family and friends. Your counselor can also help.

Section 1: Personal Goals

(Program's name) is designed to help you get what is important to you. Your spending plan addresses your needs but will also reflect your wants and--more importantly--your personal goals.

Here are some examples of personal goals:

- To continue living independently
- To spend more time with family and friends
- To make my life easier by purchasing equipment
- To modify my home so I feel more secure
- To feel safe when walking around in my home
- To go where I want to go, when I want
- To take steps to be more healthy
- To choose a worker that I know and trust

Please list your most important personal goals.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

If you have additional goals, please write them on the back of this page.

Section 2:

How Can I Make the Program Work for Me?

(Program Name) gives you choice over how you use your budget to meet your needs. Below is a list of the unique features² of the program that will give you added flexibility over how you set up your services and supports.

- You can hire individuals, including family members, to provide personal assistance
- You can buy services from a home care provider or temporary help agencies
- You can spend some of your budget on home modifications and/or equipment not currently paid for by other program resources
- You can purchase supplies and equipment that help you at home, but are not currently paid for by other program resources; you can use your budget to pay for repairs to adaptive equipment
- You can save for a special purchase that you cannot afford in one monthly budget; you can also use savings for your emergency back-up plan
- You can buy services or products that support your ability to live as independently as possible

² List of services taken from Rhode Island PersonalChoices Manual. Each state should adapt this page to highlight the services or supports that are available to participants.

Examples

Here are a few examples of how participants could use the program's services and supports to address their needs.

Example #1:

It is important to Mrs. Smith to spend more time with family and friends. She makes this her #1 goal. Mrs. Smith chooses to use her resources in three ways to meet her goal. The first is to purchase homemaking services. She will spend \$30.00 once a week to have a worker help with cleaning for 3 hours so that she can feel comfortable having visitors over. Second, Mrs. Smith would like to have her family over for a meal once a month. She would like a worker to help her for 2 hours at \$10.00 an hour to prepare that meal. Finally, Mrs. Smith is really close to her youngest daughter and her newest granddaughter and would like to have transportation to visit them once a week. She would like to pay a worker \$10.00 an hour for 2 hours to drive her to visit her daughter and granddaughter once a week.

Example #2:

It is important to Mr. Richards to work; he enjoys his job and the time he spends with friends at his office. Currently, he gets transportation to work 2 days per week from family and friends, and works at home the rest of the time. He would like to go to his job 4 days a week, but doesn't want to ask his family or friends to provide the additional transportation. This is Mr. Richard's #1 goal. In order to meet his goal he plans to use \$50.00 a week to hire a personal assistant to get him to and from work the additional two times per week.

Example #3:

It is important to Ms. Marlowe to feel more independent and safer at home. She makes this her #1 goal. Ms. Marlowe is finding it increasingly difficult to cook on her own. She gets some help with meals during the day, but would like to be able to cook for herself more often. She plans to set aside \$30.00 of her resources for the next 3 months to buy a microwave, which is easier for her to use and makes her feel more comfortable than using her gas

stove. In the traditional program, Ms. Marlowe would have had to buy this item “out-of-pocket”, which would have been impossible due to her financial situation.

Example #4:

It is important to Mrs. Collins that she stays independent as long as possible. This is becoming a challenge due to her poor health. After enrolling in (Program Name), she makes remaining independent at home her #1 goal. First, she is using \$400.00 of her budget to hire someone she knows and trusts to provide her with 40 hours of personal assistance during the week; her daughter who has a full time job helps her on the weekend. Second, Mrs. Collins will use \$100.00 of the resources provided by (program name) to buy over-the-counter medications and health care supplies not covered by other programs. Finally, she wants to save \$25.00 a month over the next few months to get a new washer and dryer. Right now her daughter has to take her wash to the Laundromat on the weekends, and it takes away from the time they can spend together.

Section 3:

Spending Plan Worksheet

Finally, it's time to decide how you will use the funds in your budget to develop a spending plan that meets your goals.

You alone, or you and your counselor, together, may work on the spending plan to identify the type and amount of the supports and services that you need. Remember that you may add goals or address other needs that are not specified in the sections above. If you are not sure whether a specific service is covered, just ask your counselor. Again, you can write down additional goals that you might not have listed above.

An example of addressing Personal Goals

Personal Goal	Services and supports to reach your goal
I want to spend more time with family and friends.	<p>I will use homemaker hours once a week so that I can feel comfortable having visitors.</p> <p>I would like my worker to help me prepare a meal for my family at my home once a month.</p> <p>I would like transportation to visit my daughter across town once a week.</p>

Personal Goal #1	Services and supports to reach your goal
Personal Goal #2	Services and supports to reach your goal

Personal Goal #3	Services and supports to reach your goal
Personal Goal #4	Services and supports to reach your goal

Personal Goal #5	Services and supports to reach your goal
Personal Goal #6	Services and supports to reach your goal

PGS Goals Follow-up Instrument

You listed a series of goals for (Program's Name)'s services when you enrolled. In the following pages, we would like to ask you about your progress towards these goals. Please circle the correct answer and add any comments.

List of Goals

Goal #1: Initially you identified (Goal #1 from PGS instrument) as a goal.

Have you met this goal? (Insert goal for participant here)

☐ Yes

☐ No

If no, why not?

Goal #2: Initially you identified (Goal #1 from PGS instrument) as a goal.

Have you met this goal? (Insert goal for participant here)

☐ Yes

☐ No

If no, why not?

Goal #3: Initially you identified (Goal #1 from PGS instrument) as a goal.

Have you met this goal? (Insert goal for participant here)

☐ Yes

☐ No

If no, why not?

Goal #4: Initially you identified (Goal #1 from PGS instrument) as a goal.

Have you met goal #4? (Insert goal for participant here)

☐ Yes

☐ No

If no, why not?

Do you want to modify any of the current goals?

☐ Yes

☐ No

If yes, what do you want to change?

Now that you have been in this program for a few months, we want to find out how well it fits with what you really want.

Evaluation of Workers

1. How many paid workers do you have now? _____

What are their relationships to you? (check all that apply)

_____ Relative(s)

_____ Friend(s)

_____ Neighbor(s)

_____ Participant did not know before hiring

2. Do you know who will be helping you each day?

☐ Yes

☐ No

If no, is that a problem for you?

3. Is the work done the way you want it to be done?

☐ Yes

☐ No

What would you like to be done differently?

4. If you want to, can you easily make a change in the day (or time of day) you do things?

☐ Yes

☐ No

Is that much of a problem for you?

5. Do you have any complaints about how you are being treated by your worker?

☐ Yes

☐ No

What don't you like about your treatment?

6. Who would you tell if your worker hurt you or did something that you didn't like?

Who _____ What is their relationship to you? _____

7. Are you satisfied with the relationship you have with your worker(s)?

☐ Yes

☐ No

8. Is being able to pay your worker important to you?

☐ Yes

☐ No

9. Is your home kept the way you want?

☐ Yes

☐ No

What would you like done differently?

10. Are your belongings respected?

☐ Yes

☐ No

Can you tell me about some of the problems?

Is there anything we can do about that?

11. Do you feel safe in your home?

☐ Yes

☐ No

What feels unsafe?

Can we do anything about that?

12. Do you know what to do if you want to change something about the help you are receiving?

☐ Yes

☐ No

Evaluation of Consumer Supports

13. Do you receive the information you need from the program?

☐ Yes

☐ No

What information would you like?

14. Is there anything you would like to change about the help you are getting from
-- name of fiscal intermediary agency?

☐ Yes

☐ No

What would you like to change?

15. Is your counselor providing the right amount of help to you—not too much or
not too little?

☐ Yes

☐ No

If not enough help, what do you need more help with?

Could you do more for yourself now?

What would you like to change?

Overall Program Evaluation

1. Has the program made a difference in your life?

☐ Yes

☐ No

Can you describe the difference?

Did something stand in the way of getting what you wanted?

2. What do you like about being in the program?

3. Do you have enough help to do the things that are important to you?

☐ Yes

☐ No

What would you like more help with?

4. Do you use the New CDC+ Website ?

☐ Yes

☐ No

5. What do you like about the site?

6. Would you recommend this program to a friend?

☐ Yes

☐ No

Cover Letter

Dear --participant name--,

As a participant in [Program Name] one of the steps that you will go through is deciding how to spend the resources available to you. To do this, the program requests that you complete a spending plan that will help you make such decisions as: What help do you need? Who do you want to hire? How many hours will you need? How much you will pay your helper? The spending plan can also include other items that you may need to remain in your home, such as buying a microwave, or ordering bathroom equipment or medical supplies.

To help you with your spending plan, we have included the Participant Goal Setting instrument. This planning form came about after talking with people who were in a program just like this one. The form includes questions that people told us were important in helping them work through their spending plans.

We hope that you will find this form useful as you think about how you will spend money in the program. Some people will do this on their own, others with family or friends, and others with their counselor (or appropriate title). You may find some questions helpful and others not as helpful. That's OK. We think you should use what you want from this form. The goal is for you to have a spending plan that works for you.

If you have any questions about this form, the spending plan or the program, please feel free to contact me at (appropriate contact info here).

Sincerely