

INSTRUCTIONS: Independent Living Plan (OM-ILP)

PURPOSE: To document the achievement of goals agreed upon between the Consumer and Staff Member.

PERSONNEL RESPONSIBLE: Consumers, IL Specialists/Special Program Counselors (except ILS and EBS which use their own forms), Core/Special Program/Branch Coordinators, Administrative Support Staff

INSTRUCTIONS:

1. During the Intake process, but not later than one week after each Consumer file is opened for service, the responsible Staff Member **AND** the Consumer will complete an Independent Living Plan (OM-ILP) and an Independent Living Plan Review Signature Page (OM-ILPRSP) for each Concern Area that the Consumer requires.
2. Goals will be reasonable and established with the full support and participation of the Consumer. During the service period of the Consumer, these goals may be modified or dropped if they are not possible to achieve.
3. As the Intake is being completed, the Staff Member will print/type the Consumer's name at the top of the Independent Living Plan. The development of the goal and the action steps to achieve it may be worked out on the ILP Action Worksheet (OM-ILPAW) which follows. Although the form may be useful, it is not mandatory.
4. When the goals are agreed upon, the Goal Code (from the bottom of the page) will be printed/typed in the left-hand column of the form under "Goal Code/#." The Goal Code Number is found of the MIS-IL Goal Index For Independent Living (Tab A) and should match the Goal Code (i.e, if the Goal Code is CM, COMMUNICATION, the Goal Code Number should be CM---). The date of the agreement for that goal will be printed/typed in the column, "Date Defined."
5. As a goal is achieved "A" or dropped "D," an "A" or "D" will be printed/typed in the third column with the date of that action in the fourth column.
6. If the lines become filled on the first page, a second page will be started with the second page filed on top of the first.
7. A copy of the Independent Living Plan will be ut off on the last workday of each month and given to the Program/Branch Coordinator. The Program/Branch Coordinator will submit these copies to Data Entry (on Oahu) or postmark to HCIL (Branch) not later than the fifth workday of the following month. These pages will be kept alphabetically by Consumer by the Staff Member.
8. On the reverse side of the Indepndent Living Plan is the REVIEW SIGNATURE PAGE:
 - a. The IL Specialist/Special Program Counselor will print or type the date the plan is initiated in the first column on the left-hand side.

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b. When the goals to be achieved have been agreed upon by both the Consumer and the IL Specialist/Special Program Counselor, the Consumer and the Staff Member will sign in their appropriate blocks at the top of the form.

2. As often as necessary but at least once a month (depending on the goals established), the Consumer and the ILS Specialist/Special Program Counselor will review the goals established to determine if they are still on track, modify or eliminate those goals that require it, and put the date of the review on the next line of the "PLAN REVIEW DATE" column. Then the Consumer and the Staff Member will both sign to the right of the date in their blocks.

3. If the review section becomes filled, a new page will be added behind this initial page.

4. When all of the goals have been achieved, the date will be typed/printed in the "DATE COMPLETED" column of the form (4th row from the top) and the Consumer and Staff Member will sign in their blocks to the right of the date.

INDEPENDENT LIVING PLAN ACTION WORKSHEET

Consumer Name: _____

Staff Name: _____

GOAL CODE #	ACTION STEPS	START DATE	REVIEW DATE	RESPONSIBLE PERSON

OM-ILPAW

R: 06/03/98

INSTRUCTIONS: Independent Living Plan Action Worksheet (OM-ILPAW)

PURPOSE: To draft objectives and the action steps required to achieve those objectives as agreed

upon between the Consumer and Staff Member.

PERSONNEL RESPONSIBLE: Consumers, Staff Members,
IL Specialists/Special Program Counselors (except ILS and EBS which use their own forms),
Administrative Support Staff

INSTRUCTIONS:

1. As the Independent Living Plan is developed, it may be useful to use this form as a worksheet. It is not a mandatory form; but, if it is used, it will be filed in the Consumer's file as a backup for the Independent Living Plan.
2. The Staff Member will print/type the Consumer's name and their name at the top of the page.
3. After working with the Consumer during the Intake process, some goals should become evident in order to satisfactorily sever the Consumer. As the goals become evident, print or type them in the first column of the form. As each goal is refined, some thought should be given to the various steps needed to achieve that goal. Those steps - in order of priority - should be printed/typed in the "Action Steps" column. The date that each step is started will be printed/typed in the "Start Date" column, and date for review (at least within the month) will be printed/typed in the "Review Date" column. The individual/agency responsible for completing that step will be printed/typed in the "Responsible Person" column.
4. As this page becomes filled, a new page will be started and placed on top the first page. These forms may be kept at the Staff Member's work station during the development process, but will be turned in to the Administrative Staff for filing as the pages are filled.