Title: Transfer Planning Conference

I. Purpose: The purpose of this policy shall be to standardized planning requirements so as to assure a successful transition during a change in services.

II. Policy: It shall be the policy of the Division of Developmental Disabilities Services (DDDS) that transition planning occur within 15-30 calendar days prior to a planned change in services.

III. Application
DDDS Stockley Center
DDDS Community Services
DDDS Contracted Agency or Individual

IV. Definitions
A. Clinical Consultative Services- Behavioral and Nursing services that are approved by DDDS and identified billable services. Services include but are not limited to monitoring, assessment, behavioral/health care plan development, coordination and training.
B. Individual Plan of Protection- (IPOP) A form designed to identify and document the various types and levels (degrees of) of support that an individual needs, throughout his/her day.
C. Services- Includes clinical consultative services (defined above), the residential service provider, residential service location, day service provider, day service location and employment type.
D. Team- Consists of the Individual, DDDS Case Manager/Social Worker, Agency Program Coordinator, Employment/Day Services Representatives, Clinical Consultative/Clinical Support Staff, Family, Friends, Advocates, Paid Staff.
E. Transferring Entity- The agency Program Coordinator, DDDS Case Manager (for Shared Living or Stockley Center) or Family Support Specialists assigned to the person who is planning a change in services.
F. Transfer Planning Conference- (TPC) A meeting with an individual receiving services and his/her transferring and receiving interdisciplinary teams in preparation for a change in services, including Clinical Consultation, Residential Service Provider, residential location, day services provider, day service location and employment services.
G. Transfer Planning Conference Summary- The document that identifies the support needs of an individual and the names of the person(s) responsible to complete each task, so as to serve as a roadmap for a smooth transition.
V. Standards

Transitioning from or Within Family Support
A. The Family Support Specialist (FSS) shall schedule and facilitate the Transfer Planning Conference (TPC) within 15-30 calendar days prior to a change in services (i.e., moving to residential services or starting or changing a day/work services).
B. All team members shall be invited to participate in the Transfer Planning Conference Meeting.
C. The Family Support Specialist shall make provisions for all interested invitees to participate in the meeting, whether in person or via other mode of communications (i.e., telecommunications, video conferencing, etc.)
D. The Family Support Specialist shall document transition action steps on the TPC Summary accordingly, and make it available to the receiving team within 5 calendar days after the TPC meeting. The TPC Summary and signature page shall be scanned into the individual’s electronic record, if applicable.

Transitioning Services within Non-Family Support
E. The DDDS Case Manager shall schedule and facilitate the Transfer Planning Conference within 15-30 calendar days prior to the individual’s change in services.
F. All team members shall be invited to participate in the Transfer Planning Conference Meeting.
G. The DDDS Case Manager shall make provisions for all interested invitees to participate in the meeting, whether in person or via other mode of communications (i.e., telecommunications, video conferencing, etc.)
H. The DDDS Case Manager shall document transition action steps in the TPC Summary accordingly, and make it available to the receiving team within 5 calendar days after the TPC meeting. The TPC Summary and signature page shall be scanned into the individual’s electronic record.

VI. Procedures

<table>
<thead>
<tr>
<th>Transitioning Services from or Within Family Support</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Family Support Specialist</strong></td>
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<tr>
<td>1. Schedules and facilitates TPC within 15-30 calendar days prior to change in services.</td>
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<tr>
<td>2. Documents transition action steps on TPC Summary.</td>
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<tr>
<td>3. Makes completed TPC Summary available to receiving team within 5 calendar days after the TPC meeting.</td>
</tr>
<tr>
<td>4. Scans TPC Summary and signature page into the ELP section of the individual’s electronic record, if applicable, within 5 calendar days after the TPC meeting.</td>
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<tr>
<th>Transitioning Services Within Non-Family Support</th>
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<tbody>
<tr>
<td><strong>DDDS Case Manager</strong></td>
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<tr>
<td>5. Schedules and facilitates TPC within 15-30 calendar days prior to change in services.</td>
</tr>
</tbody>
</table>
6. Documents transition action steps on TPC Summary.

7. Makes completed TPC Summary available to receiving team within 5 calendar days after the TPC.

8. Scans TPC Summary and signature page into the ELP section of the individual’s electronic record within 5 calendar days after the TPC meeting.

VII. References
   A. Level of Supports (Identification of) Policy

VIII. Exhibits
   A. Transfer Planning Conference Summary
The person receiving services and his/her Team reviewed the following and determined if further evaluation or action is needed at this time. If action to be taken, please comment by whom and by when in the appropriate space provided.

### A. Waivered Services
- **RN Consultant**
- **Behavioral Consultation**
- **Residential**
- **Day/Employment**

Action to be taken by whom and by when?

### B. Communication
- **Evaluation**
- **Training for staff and support persons**
- **Behavior as communication**
- **Behavioral Components**
- **Facilitated communication**
- **Picture exchange programs**
- **Primary language other than English**
- **Sign Language**
- **Communication table**
- **Manual communication**
- **Visual-gesture communication**
- **Other**

Action to be taken by whom and by when?

### C. Community Activities
- **Meeting friends**
- **Including friends**
- **Leisure activities**
- **Natural Supports**
- **Social opportunities/events**
- **Vacation**
- **Classes/educational experiences**
- **Clubs & other social civic organizations**
- **Volunteer opportunities**
- **Church/other places of worship**
- **Recreation**
- **Other**

Action to be taken by whom and by when?

### D. Day/Evening Services

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**Transfer Planning Conference Policy**
<table>
<thead>
<tr>
<th><strong>DIVISON OF DEVELOPMENTAL DISABILITIES SERVICES</strong></th>
<th><strong>TRANSFER PLANNING SUMMARY</strong></th>
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<tbody>
<tr>
<td>☐ Center based day program</td>
<td>☐ Retirement Day Program</td>
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<tr>
<td>☐ Community based day program</td>
<td>☐ Efforts toward employability</td>
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<tr>
<td>☐ Home based day program</td>
<td>☐ Adult Education/Other classes</td>
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</tbody>
</table>

Action to be taken by whom and by when?

### E. Education

| ☐ Private School | ☐ Graduation/or Date Leaving school | ☐ Transition Plan |
| ☐ Public School | ☐ Other |

Action to be taken by whom and by when?

### F. Environmental Modification/Adaptive Equipment

| ☐ Any piece of equipment that will enhance activities of daily living | ☐ Special Glasses | ☐ Equipment repairs and upgrades |
| ☐ Adaptive equipment/technology | ☐ Communication Board | ☐ Communication equipment or resources |
| ☐ Interim plan for times electronic Equipment is down | ☐ Environmental modifications or special accommodations | ☐ Other |

Action to be taken by whom and by when?

### G. Evaluation and Treatment Services

| ☐ Crisis Services | ☐ Therapies (occupational therapy, physical therapy, speech therapy) | ☐ Psychiatric |
| ☐ Medical | ☐ Counseling | ☐ Psychological |
| ☐ Physical | ☐ Medications | ☐ Vision |
| ☐ Specialized medical services/home health | ☐ Nutrition | ☐ Safety and positioning devices |
| ☐ Dental | ☐ Hearing | ☐ Other |

Action to be taken by whom and by when?
### H. Financial
- Adequacy of personal financial resources
- Money Management
- Representative Payee
- Similar programs
- Personal spending money
- Accessing federal/state/local Assistance programs
- Contingency funds
- Family Support funds
- Other Financial resources
- IRWE (impairment related work expenses)
- PASS (plan for achieving self-support)
- Burial Trust
- Other

Action to be taken by whom and by when?

### I. Legal/Regulatory
- Advanced directives
- DNR (do not resuscitate) order
- Knowledge of rights
- Power of Attorney (POA)
- Responsibility
- Behavior Plan and approval process
- Law enforcement involvement
- Restraints
- Restrictions
- Violation of Rights
- Evaluation for guardianship determination
- Guardianship
- Pending grievances or unresolved issues
- Other

Action to be taken by whom and by when?

### J. Personal Supports
- Family
- Friends
- Correspondent
- Involvement with unpaid support
- Neighbors
- Clothing
- Pets
- Making decisions and choices (clothing, food, recreations, etc.)
- Sexuality
- Voting
- Spirituality
- Consumer wishes/dreams
- Funeral Planning
- Self-advocacy education/training
- Vacation
- Other

Action to be taken by whom and by when?
### K. Residential

- Expertise of Staff
- Special staffing requirements
- Staffing/supervision
- Household safety

- Provision of services as budgeted/planned
- Harmony of environment
- Cleanliness (person/property)
- Compatibility of house mates
- Need for adaptive equipment
- Personal living space
- Respite
- Other

**Action to be taken by whom and by when?**

### L. Safety

- Medical administration
- Training for self-administration
- Personal Identification
- Personal safety
- Special supervision needs

- Access to emergency assistance
- Emergency evacuation
- Safety
- Emergency information
- Screenings/immunizations
- Safety accommodations
- Medical/physical supports for appointments
- Street/community
- Vulnerability to victimization
- Other

**Action to be taken by whom and by when?**

### M. Skill Building

- Accessing community services

- Toward more independence/self advocacy
- Other

**Action to be taken by whom and by when?**

### N. Surrogate

- Decision making

- Guardianship
- Other

**Action to be taken by whom and by when?**
## O. Transportation

- Community Activities
- Program Services
- To work
- Wheelchair safety
- Church
- Recreation
- Visiting family/friends
- For using transportation safely
- Independent use of transportation
- Other

Action to be taken by whom and by when?

## P. Work

- Job assessment
- Vocational rehabilitation referral
- Enclave
- Job in the community with/without job coaching
- Sheltered employment
- Pay/rate of pay
- Real work for real pay in integrated setting
- Relationships with co-workers
- Other

Action to be taken by whom and by when?

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**Mark Your Calendar now. ELP is scheduled for:**

**Date:**

**Time:**

**Location:**
<table>
<thead>
<tr>
<th>Signature of those Attending</th>
<th>Please PRINT Name</th>
<th>Relationship to Person</th>
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Meeting Location: ____________________________

Sr. Social Worker/Case Manager, Transferring Team
Sr. Social Worker/Case Manager, Receiving Team