##  Name:

**Date of Completion:**

***Person-Centered Planning Tool (PCPT)\****

### The Person-Centered Planning Tool (PCPT) is a mandatory discovery tool used to guide the person centered planning process and to assist in the development of an individual’s Service Plan.

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| **Name** | **Phone/Email** | **Role/Relationship** |
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| **What do you and others like or admire about you?**This section reflects your positive qualities and includes likes, goals, aspirations, etc.(iRecord: Strengths & Qualities) |
| **Categories / Dropdowns in this section*** Like about self
* Others like about you
* Achievements
* Things you do well

**Sample Questions:*** What do you like about yourself?
* What do people like and admire about you?
* What are your positive qualities?
* What are your proudest achievements?
* What are some things you do well?
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(iRecord: Relationships)

**Family**

**Supporters at home and in the community**

**Supporters at work, school, day program?**

**Friends**

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| **What is important to you?**This section describes what is important to you, including: routines, relationships, places to go, things to do, etc.(iRecord: Important to You) |
| **Categories / Dropdowns in this section*** Personal Preferences/Routines
* Place to Go
* Interests
* Things to Do
* People to See / Relationships
* Recreational Pursuits
* Dislikes
* Pets
* Other

**Sample Questions:*** What do your routines look like?
* Where do you like to go?
* What are some of the things you like to do?
* Who are the people you like to see?
* What are your likes and dislikes?
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| *.* **What are your long-term hopes and dreams?**This section captures information about your long-term hopes and dreams.(iRecord: Hopes & Dreams) |
| **Categories / Dropdowns in this section*** Short-term Hopes and Dreams
* Long-term Hopes and Dreams

**Sample Questions:*** What are some of your goals to achieve in the next month, 6 months, year, and/or ten years?
* Where do you dream of living?
* What new things would you like to learn?
* Is there anywhere you’d like to travel?
* What is your dream job?
* Are there groups or activities you’d like to join?
* What kind of relationships do you want in your life?
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| What do others need to do to support you? This section describes what others need to know and do to support you at home, work or in the community.(iRecord: Support Settings) |
| **Categories / Dropdowns in this section**Support needs in the following areas:* Community
* Home
* Work

Sample Questions:In what areas of your life do you need/use assistance?How do you like/need to be supported in this area? |  |
| What are some of your community experiences?This section describes what things you have done and your interactions with others while in the community? (iRecord: Community Integration) |
| **Categories / Dropdowns in this section*** Previous / Current Experiences
* Extent of Interaction with Community

**Sample Questions:*** What has been your experience in the community?
* What things do you like to do?
* Do you like big crowds or prefer small crowds?
* Do you work better alone or interacting with others?
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| **What are the characteristics of the people who support you best?**This section includes personality characteristics that you would like to see present in the individuals that support you.(iRecord: Supporter Qualities) |
| **Categories / Dropdowns in this section*** Characteristics of Supporters
* Other

**Sample Questions:**It’s important to be supported by someone that is a good match for your need, prefer, enjoy, and appreciate.* What characteristics do you appreciate in others?
* What characteristics tend to bother you in others?
* What interests would you hope to share with someone you spend time with?
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| **What do caregivers/providers need to know about how you communicate?**This sections captures information about how you communicate: It includes information about how you communicate non-verbally, including how you let others know if you are happy, sad, excited, or angry, and if you disagree, understand, or want to go somewhere.(iRecord: Communication Styles) |
| **Categories / Dropdowns in this section**Read/WriteExpress emotionExpress illness, pain, discomfortExpress wants/needs/choicesExpress understandingExpress lack of desire/interestOther**Sample Questions:*** What language do you speak?
* Do you read/write?
* How do you communicate verbally and/ or nonverbally? Think about the following:
	+ Express Emotion
	+ Express illness, Pain, Discomfort
	+ Express wants/needs/choices
	+ Express understanding
	+ Express lack of desire/interest
* Do you communicate using technology?
* Do you read or write? To what extent?
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