



Presents

# Charting the LifeCourse Series:

## A Framework for Creating the Life You Want (Part 2 of 5)

Session 2: Guardianship and Guardianship Alternatives

# **KY-SPIN**

## **(Special Parent Involvement Network)**

### **Parent Training & Information (PTI)**

### **Center**

Funded by the U.S. Dept. of Education under IDEA since 1988 when Kentucky first received a PTI. KY-SPIN Parent Center provides training, information and support for children and youth with all types of disabilities (birth through 26 years old), their parents, families, and professionals.



We do NOT:  
Act as Attorneys

We DO:



- ♥ Empower Families to Effectively Advocate for their Children
- ♥ Provide peer support to help families access needed information and resources

# Charting the LifeCourse



Tools to communicate needs and wants

Did you  
know?

## Regardless of Disability-

Once a child reaches the Age of Majority in Kentucky (18 years old), the parent is no longer their legal guardian and cannot make decisions on their behalf without their child's consent.

# Adult Guardianship





a legal tool that grants a parent or other adult the legal authority to make decisions for a legally disabled adult.



# Types of Guardianship

A **Guardian** has complete responsibility for the person including all financial affairs.

A **Limited Guardian** doesn't have all the legal powers and duties.

A **Conservator** has responsibility for the person's financial affairs.

A **Limited Conservator** has some responsibility for the person's financial affairs.



# Alternatives



# Guardianship Alternatives:

Supported  
Decision-  
Making

Using Charting the LifeCourse Tools

# CtLC Life Stages and Domains

## Life Stages



Prenatal & Infancy



Early Childhood



School Age



Transition to Adulthood



Adulthood



Aging

## Life Domains



Daily Life & Employment



Community Living



Healthy Living



Safety & Security



Social & Spirituality



Advocacy & Engagement

# Today's Focus



Transition to  
Adulthood



Adulthood



Aging



Daily Life & Employment



Community Living



Healthy Living



Safety & Security



Social & Spirituality



Advocacy & Engagement

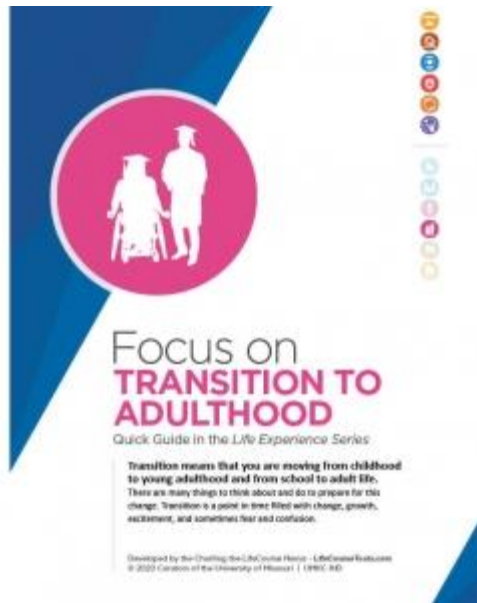
## Across All Domains

# Supported Decision Making

“A recognized alternative to Guardianship through which people with disabilities use friends, family members, and professionals to help them understand the situation and choices they face, so they can make their own decisions with the “need” for a guardian.” - Blanck & Martinis, 2015



# Guides Available



# Exploring Decision-Making



## CHARTING THE LIFECOURSE | EXPLORING DECISION-MAKING SUPPORTS

This tool was designed to assist individuals and supporters with exploring decision making support needs for each life domain.

Name of Individual: \_\_\_\_\_

Name of person completing this form: \_\_\_\_\_

Relationship to individual (circle one): Self Family Friend Guardian Other: \_\_\_\_\_

How long have you known the individual? \_\_\_\_\_

For each question below, mark the level of support you need when making and communicating decisions and choices in the Charting the LifeCourse life domains.



I can decide with no extra support



I need support with my decision



I need someone to decide for me



### Daily Life & Employment

Can I decide if or where I want to work?			
Can I look for and find a job? (read ads, apply, use personal contacts)			
Do I plan what my day will look like?			
Do I decide if I want to learn something new and how to best go about that?			
Can I make big decisions about money? (open bank account, make big purchases)			
Do I make everyday purchases? (food, personal items, recreation)			
Do I pay my bills on time? (rent, cell, electric, internet)			
Do I keep a budget so I know how much money I have to spend?			
Am I able to manage the eligibility benefits I receive?			
Do I make sure no one is taking my money or using it for themselves?			



### Healthy Living

Do I choose when to go to the doctor or dentist?			
Do I decide/direct what doctors, medical/health clinics, hospitals, specialists or other health care providers I use?			
Can I make health/medical choices for my day-to-day well-being? (check-ups, routine screening, working out, vitamins)			
Can I make medical choices in serious situations? (surgery, big injury)			
Can I make medical choices in an emergency?			
Can I take medications as directed or follow a prescribed diet?			
Do I know the reasons why I take my medication?			
Do I understand the consequences if I refuse medical treatment?			
Can I alert others and seek medical help for serious health problems?			
Do I make choices about birth control or pregnancy?			
Do I make choices about drugs or alcohol?			
Do I understand health consequences associated with choosing high risk behaviors? (substance abuse, overeating, high-risk sexual activities, etc.)			
Do I decide where, when, and what to eat?			
Do I understand the need for personal hygiene and dental care?			

Continue on back >



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# Personal Information and Levels of Support



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This tool was designed to assist individuals and supporters with exploring decision making support needs for each life domain.

Name of Individual:

Name of person completing this form:

Relationship to individual (circle one): ☐ Self ☐ Family ☐ Friend ☐ Guardian ☐ Other:

How long have you known the individual?

For each question below, mark the level of support you need when making and communicating decisions and choices in the Charting the LifeCourse life domains.



I can decide with no extra support



I need support with my decision



I need someone to decide for me



# Levels of Support

		
I can decide with no extra support	I need support with my decision	I need someone to decide for me



# Daily Life & Employment



## Daily Life & Employment



I can decide with no extra support



I need support with my decision



I need someone to decide for me

Can I decide if or where I want to work?			
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Do I make sure no one is taking my money or using it for themselves?			

# Healthy Living



## Healthy Living

	 I can decide with no extra support	 I need support with my decision	 I need someone to decide for me
Do I choose when to go to the doctor or dentist?			
Do I decide/direct what doctors, medical/health clinics, hospitals, specialists or other health care providers I use?			
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For each question below, mark the level of support you need when making and communicating decisions and choices in the Charting the LifeCourse life domains.



I can decide with no extra support



I need support with my decision



I need someone to decide for me



## Social & Spirituality

Do I choose where and when (and if) I want to practice my faith?			
Do I make choices about what to do and who to spend time with?			
Do I decide if I want to date, and choose who I want to date?			
Can I make decisions about marriage? (If I want to marry, and who)			
Can I make choices about sex, and do I understand consent and permission in regard to sexual relationships?			



## Safety & Security

Do I make choices that help me avoid common environmental dangers? (traffic, sharp objects, hot stove, poisonous products, etc.)			
Do I make plans in case of emergencies?			
Do I know and understand my rights?			
Do I recognize and get help if I am being treated badly? (physically, emotionally or sexually abused, or neglected)			
Do I know who to contact if I feel like I'm in danger, being exploited, or being treated unfairly? (police, attorney, trusted friend)			



## Community Living

Do I decide where I live and who I live with?			
Do I make safe choices around my home? (turning off stove, having fire alarms, locking doors)			
Do I decide about how I keep my home or room clean and livable?			
Do I make choices about going places I travel to often? (work, bank, stores, church, friends' home)			
Do I make choices about going places I don't travel to often? (doctor appointments, special events)			
Do I decide how to get to the places I want or need to go? (walk, ask a friend for a ride, bus, cab, car service)			
Do I decide and direct what kinds of support I need or want and choose who provides those supports?			



## Advocacy & Engagement

Do I decide who I want to represent my interests and support me?			
Do I choose whether to vote and who I vote for?			
Do I understand consequences of making decisions that will result in me committing a crime?			
Do I tell people what I want and don't want? (verbally, by sign, device), and tell people how I make choices?			
Do I agree to and sign contracts and other formal agreements, such as powers of attorney?			
Do I decide who I want information shared with? (family, friends etc.)			



# CtLC Portfolio for Supported Decision-Making

**INTEGRATED SUPPORTS STAR | SUPPORTED DECISION-MAKING**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

**WHAT DO OTHERS THINK IS IMPORTANT FOR ME WHEN MAKING CHOICES AND DECISIONS?**

**WHAT IS IMPORTANT TO ME WHEN MAKING CHOICES AND DECISIONS?**

**WHAT SUPPORTS DO I NEED TO HELP ME WITH MAKING CHOICES AND DECISIONS?**

What are supports that work well for me and what does not?

How do I learn best?

What helps me stay motivated?

What is the best way to encourage me?

Personal Strengths & Assets for Supported Decision-Making

Community Resources for Supported Decision-Making

Supports necessary for supported decision-making

Supports necessary for supported decision-making

www.LIFECOURSETOOLS.com

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**LIFE TRAJECTORY | SUPPORTED DECISION-MAKING**

**Past Life Experiences**

What has been UNEXPECTED (the cause and my options)?

What has helped me COMMUNICATE my preferences, choices, and decisions?

What has helped me FOLLOW THROUGH on my choices and decisions?

What were past barriers that made it hard for me to understand, communicate, or follow through with my choices and decisions?

**Moving Forward**

What do I need now to help me UNDERSTAND the cause and my options?

What do I need now to help me COMMUNICATE my preferences, choices, and decisions?

What do I need to help me FOLLOW THROUGH on my choices and decisions?

What needs to happen to avoid barriers that make it hard for me to understand, communicate, or follow through with my choices and decisions?

**Vision for What I Want**

What decisions and choices do I want to make myself or with help from my supporters?

My vision for a good life

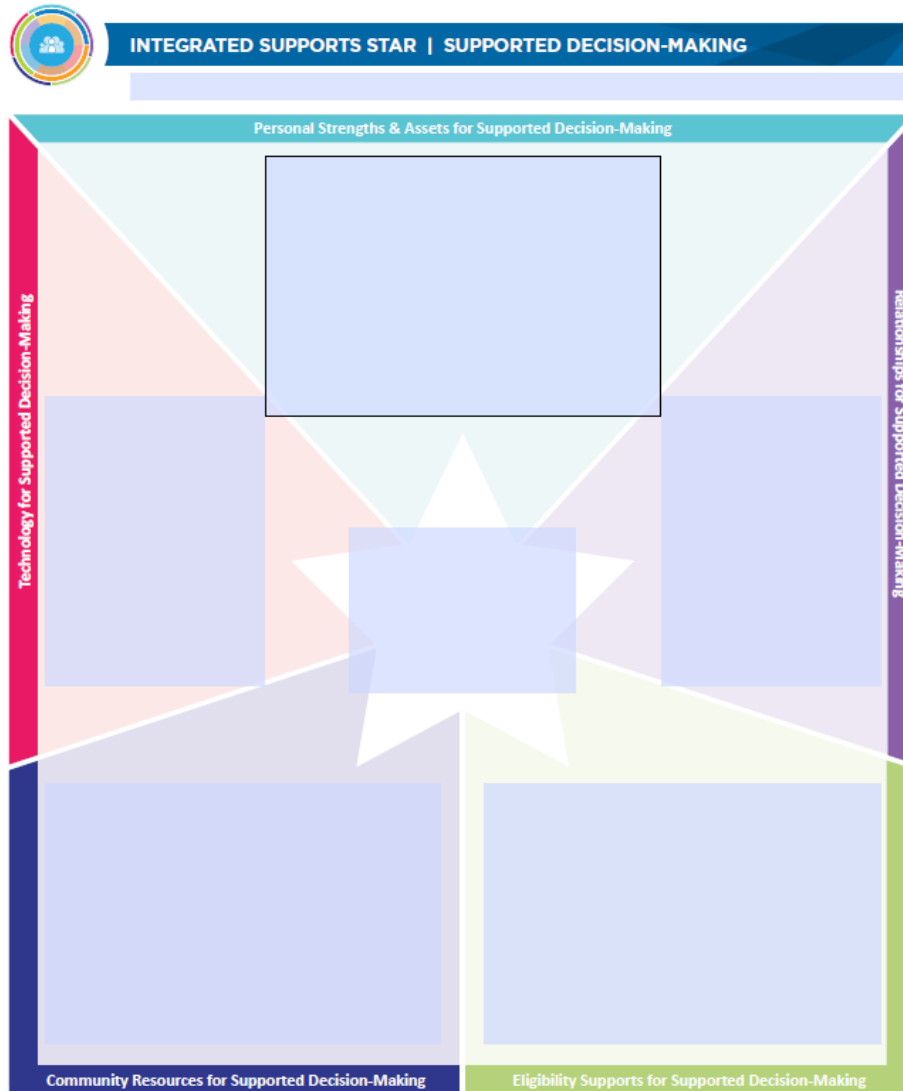
**What I Don't Want**

What decisions and choices do I NOT want someone else making for me or without my input or approval?

Not a good life

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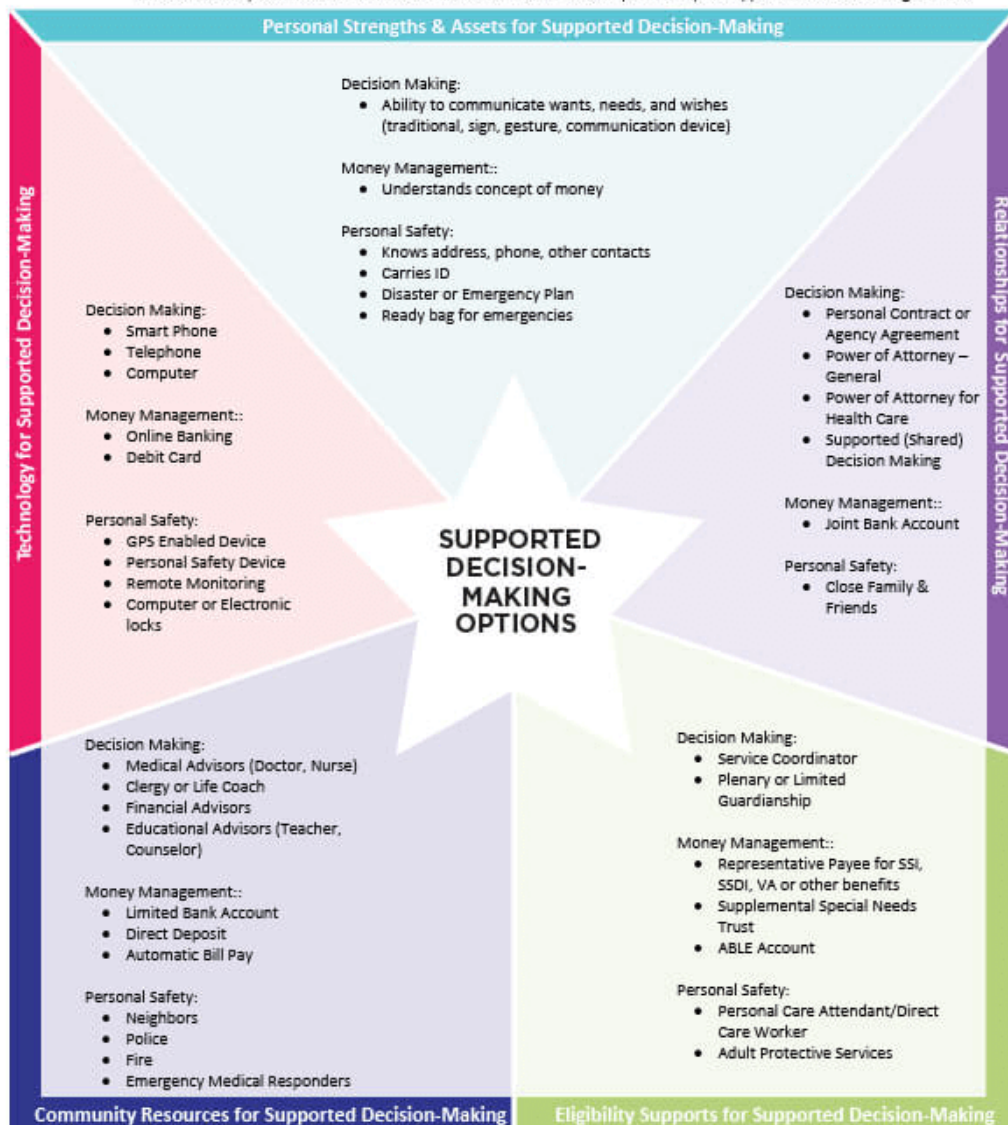
# Integrated Supports Star





## INTEGRATED SUPPORTS STAR | SUPPORTED DECISION-MAKING

Using a combination of lots of different kinds of support helps to plot a trajectory toward an inclusive, quality, community life. This star will help families and individuals think about how to work in partnership to support their vision for a good life.





NAME:

DATE:

WHAT DO OTHERS THINK IS IMPORTANT FOR ME WHEN MAKING CHOICES AND DECISIONS?

WHAT IS IMPORTANT TO ME WHEN MAKING CHOICES AND DECISIONS?

WHAT SUPPORTS DO I NEED TO HELP ME WITH MAKING CHOICES AND DECISIONS?

*What are supports that work well for me and what does not?*

*How do I learn best?*

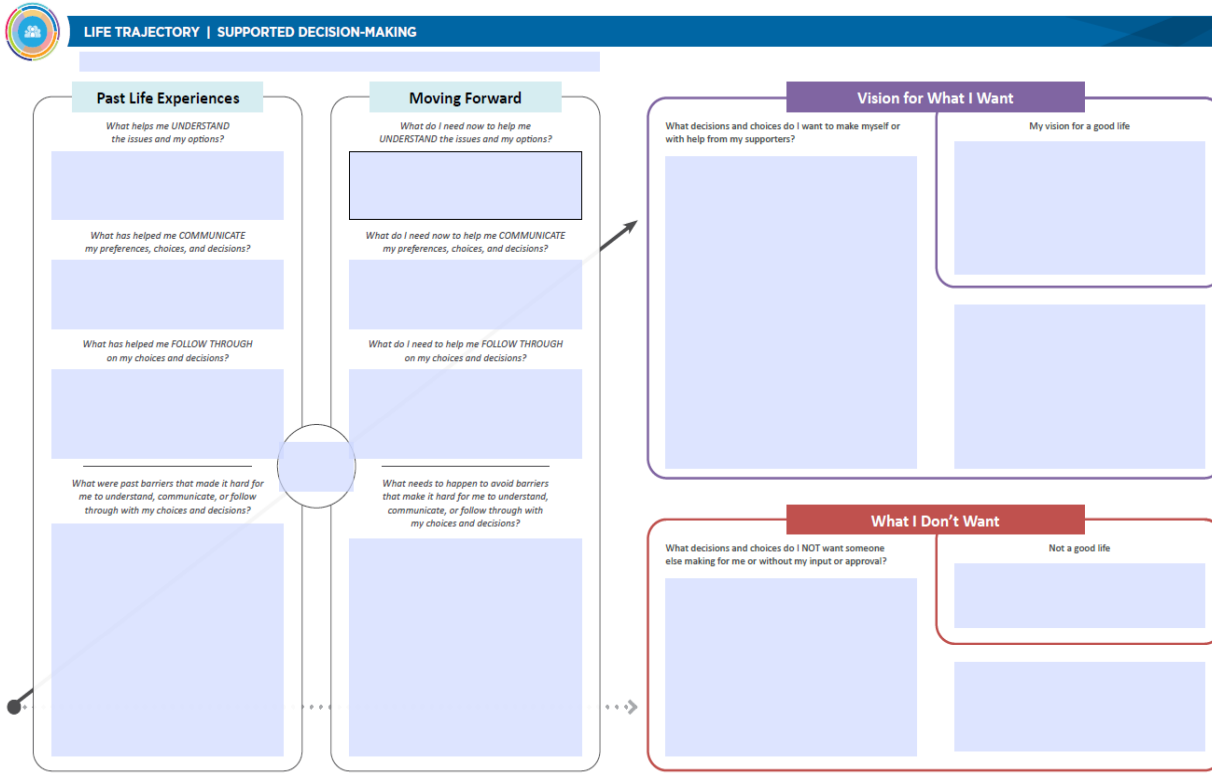
*What helps me stay motivated?*

*What is the best way to encourage me?*





# Life Trajectory | Supported Decision-Making



The worksheet is titled "LIFE TRAJECTORY | SUPPORTED DECISION-MAKING" and features a circular logo with icons representing various life aspects. It is divided into four main sections: "Past Life Experiences", "Moving Forward", "Vision for What I Want", and "What I Don't Want". Each section contains specific prompts and large text boxes for responses. Arrows indicate a flow from "Past Life Experiences" to "Moving Forward", and from "Moving Forward" to "Vision for What I Want".

**Past Life Experiences**

What helps me UNDERSTAND the issues and my options?

What has helped me COMMUNICATE my preferences, choices, and decisions?

What has helped me FOLLOW THROUGH on my choices and decisions?

What were past barriers that made it hard for me to understand, communicate, or follow through with my choices and decisions?

**Moving Forward**

What do I need now to help me UNDERSTAND the issues and my options?

What do I need now to help me COMMUNICATE my preferences, choices, and decisions?

What do I need to help me FOLLOW THROUGH on my choices and decisions?

What needs to happen to avoid barriers that make it hard for me to understand, communicate, or follow through with my choices and decisions?

**Vision for What I Want**

What decisions and choices do I want to make myself or with help from my supporters?

My vision for a good life

**What I Don't Want**

What decisions and choices do I NOT want someone else making for me or without my input or approval?

Not a good life



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### Past Life Experiences

What helps me UNDERSTAND  
the issues and my options?

What has helped me COMMUNICATE  
my preferences, choices, and decisions?

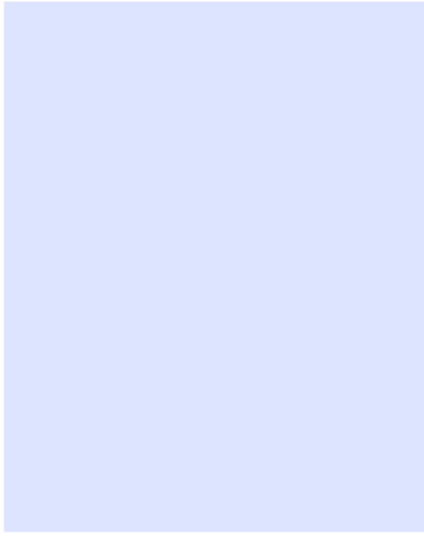
What has helped me FOLLOW THROUGH  
on my choices and decisions?

What were past barriers that made it hard for  
me to understand, communicate, or follow  
through with my choices and decisions?

- *What helps me UNDERSTAND the issues and my options?*
- *What has helped me COMMUNICATE my preferences, choices, and decisions?*
- *What has helped me FOLLOW THROUGH on my choices and decisions?*
- *What were past barriers that made it hard for me to understand, communicate, or follow through with my choices and decisions?*

## Vision for What I Want

What decisions and choices do I want to make myself or with help from my supporters?



My vision for a good life



## What I Don't Want

What decisions and choices do I NOT want someone else making for me or without my input or approval?



Not a good life



# Additional Resource

## Supported Decision-Making Agreement

*This agreement must be read out loud or otherwise communicated to all parties to the agreement in the presence of either a notary or two witnesses. The form of communication shall be appropriate to the needs and preferences of the person with a disability.*

My name is: \_\_\_\_\_

I want to have people I trust help me make decisions. The people who will help me are called **supporters**.

**My supporters are not allowed to make choices for me.** I will make my own choices, with support. I am called the **decider**.

This agreement can be changed at any time. I can change it by crossing out words and writing my initials next to the changes. Or I can change it by writing new information on another piece of paper, signing that paper, and attaching it to this agreement.

## Supporters

### Supporter #1

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**I want this person to help me with these choices:** *(check as many boxes as you want)*

#### Personal Care:

- ☐ Making choices about food
- ☐ Making choices about clothing
- ☐ Taking care of personal hygiene (showering, bathing)
- ☐ Remembering to take medicine

#### Staying Safe:

- ☐ Making safe choices around the house (for example, fire alarms, turning stove off)
- ☐ Understanding and getting help if I am being treated badly (abused)
- ☐ Making choices about alcohol and drugs

#### Home, Work, and Friends:

- ☐ Making choices about where I live and who I live with
- ☐ Making choices about where I work or what activities to go to
- ☐ Choosing what to do in my free time
- ☐ Finding support services, hiring and firing staff

#### Health Choices:

- ☐ Choosing when to go to the doctor or dentist
- ☐ Making medical choices for everyday things (for example, check-ups, small injury, taking aspirin)
- ☐ Making choices about major medical care (for example, big injuries, surgery)
- ☐ Making choices about medical care in emergencies

#### Partners:

- ☐ Making choices about dating, sex, birth control, and pregnancy
- ☐ Making choices about marriage

#### Money:

- ☐ Paying the bills on time and keeping a budget
- ☐ Keeping track of my money and making sure no one steals my money
- ☐ Making big decisions about money (for example, opening a bank account, signing a lease)

Other: (write any other areas where you want support):

- ☐ \_\_\_\_\_

# Please Remember...

- ▶ Independence, respect, and equality are values important to all people.
- ▶ These values help define the concepts of independence and freedom as well as the right to make decisions for one's self.
- ▶ Because these rights are so valued in our society and are something that most of us would value for ourselves, the “least restrictive alternative” should always be considered before taking away a person's civil and legal rights to make decisions for him or herself.

# Least Restrictive Alternative

The **least restrictive alternative** is an option, which allows a person to keep independence, freedom and the right to make decisions for one's self as much as possible while providing only the level of protection and supervision that is necessary.

Some examples may include: representative payee for certain government benefit checks, joint bank accounts or advance directives for health c

# In Conclusion

- ▶ Help determine the need for a guardian and/or supports for an adult with an intellectual disability
- ▶ Provides individual with a tool to communicate their wants, the things they don't want as well as their vision for a good life
- ▶ An agreement that communicates who will assist in specific life domains



# References:

<https://www.lifecoursetools.com>

<https://tcdd.texas.gov/resources/guardianship-alternatives>

<https://www.stablekentucky.com>

<https://kyspin.com>

<https://www.kyguardianship.org/>

<http://supporteddecisionmaking.org/>

Stella's Story: <https://youtu.be/hbDjso6utCw>

# Handouts:

- [CtLC SDM Options](#)
- [Focus on Adulthood QuickGuide \(CtLC\)](#)
- [Focus on Aging QuickGuide \(CtLC\)](#)
- [Transition-to-Adulthood QuickGuide \(CtLC\)](#)
- [Supported Decision Making Agreement Template](#)
- [CtLC Portfolio Healthy Living](#)
- [CtLC Portfolio Supported Decision-Making](#)
- [CtLC Integrated-Support StarterStar](#)
- [Supported Decision Making](#)
- [CtLC Exploring Decision Making Supports](#)

“KY-SPIN’s Tuesday Tips” webinars  
will be every Tuesday at 11:00 am. (EST)  
They will include latest information and  
guidance. Topics will vary...

Join us every Thursday for additional webinars  
on a variety of topics!

For most up-to-date information/resources for  
individuals with disabilities, their families and  
professionals during COVID-19,  
please visit our [webpage](#)

We also will have our [KY-SPIN eNews](#) that goes  
out on a regular basis to our listserv.



# If you have questions...



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