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BRIEF REPORT: Planning Practices in Ontario's Developmental Services Agencies

Abstract

Planning that is based on what is important to the individual has become common practice across service sectors, though much variability exists in how that planning is done. This study aimed to better understand planning practices in Ontario's developmental services agencies. An online survey of 156 agencies conducted during the autumn of 2011 revealed that a variety of planning-related tools are used, including some developed by the agencies. Further, most agencies tended to use a blended approach, in that they used several tools or aspects of several tools when planning for a single individual. The findings suggest that in Ontario, planning approaches are often individualized and developed or adapted by the agencies.

Since the groundbreaking works of Wolfensberger (1972), the right of persons with intellectual and developmental disabilities (IDD) to make their own choices has been recognized (Stalker & Harris, 1998). Person-centred planning (PCP), or planning that is based on what is important to individuals, is widely accepted in the field.

The term PCP is used to describe a process that supports persons with IDD to identify what is important to them and empowers them to plan for the future (Rasheed, Fore, & Miller, 2006). To assist in the implementation of person-centred planning practices, a number of techniques (or tools) have been developed. Eleven somewhat inter-related tools emerged between 1979 and 1992, a time span considered to be PCP's formative period (O'Brien & O'Brien, 2000); very few tools have emerged since then. While PCP appears to be a ubiquitous method used for assisting persons with IDD and their families to plan a better quality of life, little is known how developmental services agencies in the province are implementing this method in the province.

This study aimed to describe planning practices in Ontario's developmental services agencies. The objectives were to identify what planning tools were being used in the province, and how these were being used. Differences in planning practices were also examined by geographic region, agency size, and accreditation status. As the Ministry of Community and Social Services (MCSS) has funded demonstration projects related to planning and is developing guidelines to assist in planning, the results of this study may serve as a baseline for monitoring the implementation of future Ministry directives.

Method

Ethics approval for this study was provided by the Research Ethics Boards at Lakehead University (Thunder Bay, ON) and Queen's University (Kingston, ON).

Procedure

All agencies funded by the MCSS that primarily provided services to adults with IDD were invited to take part in an online survey (n = 216) hosted at SurveyMonkey.com; a link to the survey was provided and could be accessed after consenting to participate. The survey took about one hour to complete. Data collection took place over four months in the autumn of 2011.

Participants

A total of 156 agencies returned a completed survey, yielding a response rate of 72.2%. The geographic region of agencies was based on the location of the nine regional MCSS offices (www.mcss.gov.on.ca/en/mcss/regionalMap/regional.aspx); to maximize statistical power, these were further divided into four regions, based on the location of the four community networks of specialized care (www.community-networks.ca) including: Northern (i.e., north and north east), Southern (i.e., south west, south east, and Hamilton-Niagara), Eastern (i.e., east), and Central (i.e., central west, central east, and Toronto). Most agencies were located in the Southern (43.0%) and Central (33.0%) regions of the province, though the Northern (14.0%) and Eastern (10.0%) regions were also represented.

Measure

The survey was designed by the researchers to collect information about agencies' general planning practices. The survey also included questions related to agency characteristics (e.g., geographic region, accreditation status, and types of services provided). Information on the size of agencies was obtained through the MCSS Service Management Information System (SMIS) (MCSS, Personal communication, January 14, 2011). To maximize statistical power, the size of agencies was coded as small/medium (fewer than 100 employees) or large (100 or more employees).

The survey contained a list of 12 known (or formal) planning tools (see O'Brien and O'Brien (2000) for a description of eleven of these, and The Council on Quality and Leadership in Supports for People with Disabilities (1999) for information on the *Personal Outcome Measures* tool); participants indicated which were used in their agencies (from never to always). Participants also identified other formal planning tools used not already listed and the frequency of their use. In both cases, responses were dichotomized into 1=Used and 0=Not used. Agencies were also asked (yes/no) if they used a "home-grown" tool – i.e., a planning tool created within their agency (which typically is not published or widely available).

The "planning approach" was operationalized based on how the agencies used formal and home-grown tools. A blended approach was one in which multiple tools (formal or home-grown) or certain aspects of multiple tools were used in planning with a single individual.

Analyses

Univariate statistics were used to describe agencies and planning practices. Chi-square analyses were used to examine differences based on region, size, and accreditation status. All analyses were conducted using SAS 9.1.

Results

Agency Characteristics

Information on agency characteristics is presented in Table 1. Just over 70.0% of agencies were small to medium in size, and one third were accredited. Most provided residential and day supports; more than half provided PCP, training and skill development, respite, employment services, administration of direct funding, and dual diagnosis services; and between one quarter and one half provided family support and behavioural services. There were no significant differences in the services provided by region, size, or accreditation status (data not shown).

Table 1. Characteristics of Participating Agencies (n = 156)

Characteristics	%	(n)
Size of agency[1]		
Small/medium (1-99 employees)	70.2	(106)
Large (100+ employees)	29.8	(45)
Currently certified by an accreditation body	28.2	(44)
Types of services provided[2]		
Residential and day supports	71.1	(111)
Employment services	53.8	(84)
Training and skill development	57.0	(89)
Parenting supports to adults with IDD	17.3	(27)
Respite	54.5	(85)
Family support	43.6	(68)
Adult protective services	14.1	(22)
Behavioural support	38.5	(60)
Clinical supports	21.8	(34)
Dual diagnosis	52.6	(82)
Person-centered/directed planning services	77.6	(121)
Administration of direct funding	53.8	(84)

[1]   Based on 151 of 156 agencies due to missing data
[2]   Services are not mutually exclusive.

Planning Tools

Figure 1 shows the extent to which the different planning tools were used by participating agencies. Note that the responses are not mutually exclusive – an agency may use several tools. The most frequently used tools included *Personal Outcome Measures*, *Getting to Know You*, and *Essential Lifestyle Planning*, all of which were used by more than one third of participating agencies. *Planning Alternative Tomorrows with Hope* and *McGill Action Planning System* were used by over one quarter of agencies. Approximately 26.7% used a single formal tool for all planning and 51.9% used two or more formal tools; 21.4% did not use any of the formal tools listed. No significant differences existed in the use of various formal tools or the number of formal tools used by region, size, or accreditation status (data not shown).

Approximately 74.3% of agencies also used a tool not listed in the survey, where half used another formal tool (for example, Helen Sanderson Associates (2012): *Person-Centred Thinking Tools*), and half used a home-grown tool. Use of home-grown tools differed by region only ($X^2 = 9.6$, *df =3, p = .02*); home-grown tools were used more often in the Southern (74.6%) and Northern (68.2%) regions than in the Central (50.0%) or Eastern (46.7%) regions.

Approximately 51.3% of agencies indicated that they exclusively used formal tools and 12.8% exclusively used a home-grown tool; 31.4% used both formal and home-grown tools. No differences existed by region, size, or accreditation status (data not shown).

Overall, 78.0% indicated they blended several tools or aspects of tools in planning, while 22.0% stated that they never blended planning approaches. This was found to be true even when formal (90.7%) or home-grown (73.7%) tools were exclusively used. There were no significant differences in blended approaches by region, size, or accreditation status (data not shown).

Figure 1. Use of planning tools by participating agencies
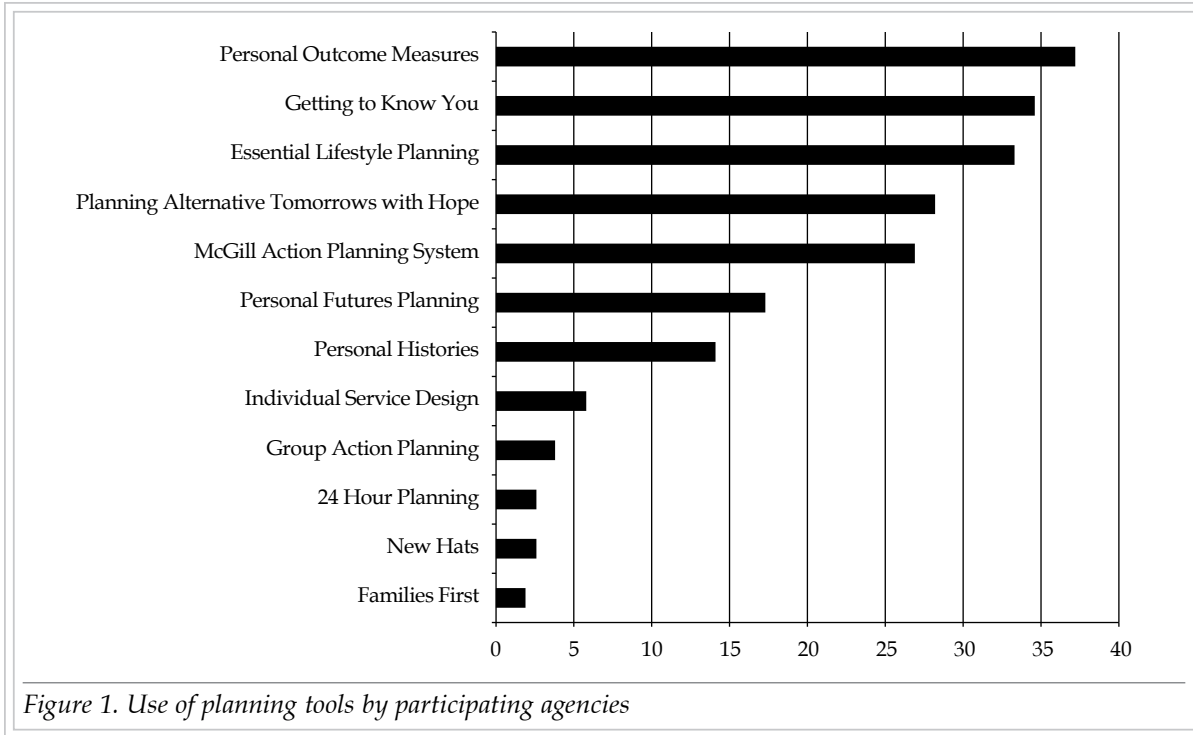
Discussion

This study is part of a larger effort to describe planning practices in Ontario's developmental services sector (see www.mapsresearch.ca). The results highlight the broad range of approaches used by agencies to support persons with IDD and their families in planning – from well-established and new formal tools to home-grown tools developed within the agency. In fact, approximately 37.2% of participating agencies have developed their own planning tool.

There are a number of formal tools that do not appear to be much in use in the province (i.e., five tools were used by fewer than ten agencies) (see Fig. 1). No single tool was used by everyone – the most frequently endorsed tools were used by less than half of agencies, indicating that there is no one tool that is "the" solution to all planning. This finding was not surprising, given that each tool was developed with a specific purpose, rather than to be the sole planning solution for all people in all circumstances (Kinsella, 2000).

Further highlighting the sensitivity of agencies to the unique planning needs of individuals, most used a blended approach to planning:

agencies incorporated several tools or aspects from several tools in their approach to planning for a single individual. It appears that agencies have a "tool box" approach to planning – they have multiple tools at their disposal, and make use of the ones that best fit the unique needs of each person with IDD and their planning team. The evolving, grass-roots nature of planning in Ontario's agencies is a key finding from this study. That this is true regardless of region, size, or accreditation status is another.

The large sample size and excellent response rate are significant strengths of this study. However, findings are limited in that the survey was based on a single perspective (i.e., one key informant per agency), focussed on general planning practices (e.g., could not provide detailed examples on how tools were used and blended), and relied on quantitative data (e.g., rated frequency of use). The survey was also unable to address some of the more complex aspects of planning, including the nature of the relationships between persons on the planning team and team functioning; opportunities for meaningful choice within planning; and community capacity to support persons with IDD to achieve their goals. In order to better understand the planning landscape in Ontario's

developmental service system, in-depth case studies are currently being conducted with entire planning teams (including persons with IDD, natural supports, independent planners/facilitators, and developmental services staff). This work, in addition to offering insight into the perspectives of all members of the planning team, may also help to highlight best practices that best support persons with IDD in achieving their goals.

Acknowledgements

Key Messages From This Article

People with disabilities: There are a lot of different ways that staff in agencies help you plan for your life. They try to make sure that they are helping you in the way that works best for you.

Professionals and policymakers: This study is part of a larger study that describes planning practices in Ontario's developmental services agencies. A key finding is that a large proportion of agencies use a combination of formal and home-grown tools, and frequently blend them together, indicating that the planning process includes individualized, evolving, agency-specific, grass-roots efforts and approaches.

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