



**Division of Developmental Disabilities
RUBRIC FOR PCP PLAN REVIEW**

If any of the following are not met during a plan review, the plan should be returned for revisions.

MET	NOT MET (Return for Revisions)
<input type="checkbox"/> Plan is consistent throughout and demonstrates alignment between goals and services.	<input type="checkbox"/> Plan is inconsistent and is not aligned.
<input type="checkbox"/> Plan has Valid Signature attachment and if LG signature is present, paperwork is included.	<input type="checkbox"/> Plan does not include Valid Signature attachment.
<input type="checkbox"/> Plan is signed before or within the month of the plan start date.	<input type="checkbox"/> Plan is not signed before or within the month of the plan start date.
<input type="checkbox"/> Plan dates are equal to one year, including amendments.	<input type="checkbox"/> Plan dates do not equal one year.
<input type="checkbox"/> If Applicable, a Behavior Support Plan is included. (Tier E)	<input type="checkbox"/> Behavior Support Plan is not included and provider has been identified. <i>(If a provider has not yet been identified, there may not be a BSP)</i>
<input type="checkbox"/> If Behavior Support Plan is included and has restrictions, it was reviewed and approved by HRC.	<input type="checkbox"/> Behavior Support Plan is included, has restrictions and has not been reviewed by HRC.
<input type="checkbox"/> Goods and Services request form is included as attachment if applicable.	<input type="checkbox"/> Goods and Services are requested in planned services however no request was submitted.
<input type="checkbox"/> If participant remains in school funded services, this is reflective in the plan.	<input type="checkbox"/> School funded services are not reflected, and participant is under 22 years of age and still receiving school-funded services.
<input type="checkbox"/> Nursing Care Plan is on file if applicable (Tier D)	<input type="checkbox"/> Nursing Care Plan is not included.
<input type="checkbox"/> Goals reflect definitive outcomes.	<input type="checkbox"/> Services are listed as Goals.

Areas that score a 1 during plan review will be reviewed with the case management agency during the regular quality meetings.

	3 Exceeds Requirements	2 Meets Requirements	1 Improvement Needed
Important FOR the Individual	<input type="checkbox"/> What is important FOR the person is included in a positive manner and aids in the customization of supports they receive	<input type="checkbox"/> What is important FOR the person is included in a tactful manner and informs the customized supports they receive	<input type="checkbox"/> What is important FOR the person is not included or is the sole focus used to customize supports
Important TO the individual	<input type="checkbox"/> Things that are important TO the individual are the driving force of the customized supports and services the individual is receiving via their ISP	<input type="checkbox"/> Things that are important TO the individual are addressed in the plan and inform customized supports they receive	<input type="checkbox"/> Things that are important TO the individual are not included, nor used to customize supports

	3 Exceeds Requirements	2 Meets Requirements	1 Improvement Needed
Dignity of Risk	<input type="checkbox"/> Plans to address risk are presented in a manner that promotes the individual's dignity of risk and include additional resources to reduce risk/ promote autonomy (assistive technology, home modifications, etc.,)	<input type="checkbox"/> Plans to address risk are presented in a manner that promotes the individual's autonomy, and are clearly defined	<input type="checkbox"/> Plans restrict risk, lack mitigation strategies, or prioritize safeguarding over the rights of individual to independent decision-making
Transportation	<input type="checkbox"/> Transportation decisions are led by the individual in a fully informed manner, including how the person will get to/from work and other activities	<input type="checkbox"/> Transportation is addressed and planned for in a customized manner, reflecting informed choice	<input type="checkbox"/> Transportation is not addressed or is addressed solely by agency provision/control of transportation
Strengths	<input type="checkbox"/> The individual's strengths are celebrated	<input type="checkbox"/> The individual's strengths are predominantly represented	<input type="checkbox"/> The individual's strengths are minimally or not represented
Barriers	<input type="checkbox"/> Barriers are respectfully identified with involvement and participation of the individual, and addressed in a manner that empowers the individual	<input type="checkbox"/> Barriers are respectfully identified and appropriately addressed	<input type="checkbox"/> Barriers are predominantly represented and/or not appropriately addressed
Needs	<input type="checkbox"/> The individual is involved in addressing their needs in a way that is meaningful to them	<input type="checkbox"/> The individual is involved in addressing their needs	<input type="checkbox"/> The individual is not involved in plans to address their needs
Meaningful	<input type="checkbox"/> All activities are related to the individual's interests, preferences, strengths, and needs – encouraging ongoing exploration of these factors	<input type="checkbox"/> All activities are related to the individual's interests, preferences, strengths, and needs	<input type="checkbox"/> Activities primarily focus on the individual's perceived needs or opportunities that are already available
Vocational	<input type="checkbox"/> Vocational interests, intentions, and goals are clearly addressed, customized employment options are noted and/or details can be found regarding career growth suggestions or opportunities	<input type="checkbox"/> Vocational interests, intentions, and goal(s) are clearly addressed, as well as opportunities used to inform decisions about employment	<input type="checkbox"/> Vocational interests, intentions, and goal(s) are not addressed, and/or opportunities used to inform decisions about employment are not present

	3 Exceeds Requirements	2 Meets Requirements	1 Improvement Needed
Achievement	<input type="checkbox"/> SMART format is used with detailed action steps that promote the individual's achievement	<input type="checkbox"/> Goals and objectives are defined in a manner that is clear and can be measured for progress and goal achievement	<input type="checkbox"/> Goals and objectives are unclear and cannot be measured
Responsible Parties	<input type="checkbox"/> The plan thoughtfully details the responsible parties for each step of each goal and outcome and plans for follow up	<input type="checkbox"/> The plan details the responsible parties for each goal and plans for follow up	<input type="checkbox"/> Responsible parties are not included in the plan
Skill Development	<input type="checkbox"/> Areas of needed or desired skill development are addressed, and skills the individual has acquired and wants to use are detailed	<input type="checkbox"/> Areas of needed or desired skill development are addressed, and/or skills the individual has acquired and wants to use are detailed	<input type="checkbox"/> Areas of needed or desired skill development are not identified or addressed

Notes: