

Introduction

What is the Personalized Supports Initiative?

On October 31, 2009, the Province deposited a regulatory change for CLBC eligibility criteria – making a distinct new group of adults eligible to receive supports from CLBC.

CLBC has introduced the Personalized Supports Initiative (PSI) to provide services and supports which is separate from the existing CLBC services and focuses on adults who have both significant limitations in adaptive functioning and either a diagnosis of Fetal Alcohol Spectrum Disorder (FASD) or a Pervasive Developmental Disorder (PDD).

Between 2009/10 and 2011/12, \$23.2 million is targeted for this new population and will be managed separately from other CLBC programs. The PSI will not affect the supports available for people eligible for services under the current DSM-IV eligibility criteria.

Who should apply for the Personalized Supports Initiative?

Adults who are not eligible for CLBC's developmental disability services under the existing criteria and have significant challenges with day-to-day living (adaptive functioning) and a confirmed diagnosis of FASD or PDD may apply. Youth may apply when they are over the age of 16 to receive supports when they become 19 years of age.

What does the Personalized Supports Initiative do?

The PSI provides an individualised and personalized approach to meeting the needs of eligible adults by coordinating existing community supports to help people to maintain or increase their independence. PSI augments, rather than replaces, existing support. Where necessary, PSI will provide funding for supports such as supported living, respite, employment support, skill development, homemaker support, and development of support networks.

How does the Personalized Supports Initiative work?

Individuals or their family may apply by contacting a facilitator responsible for PSI at a CLBC office in their region. The facilitator will confirm eligibility, assess the individual's needs, and work with them and their support network to create an individual plan. The facilitator will coordinate the supports needed with other agencies or community members. Where community supports are unavailable, the facilitator may assist the family in obtaining individualized funding or contract with a community agency to provide the supports required.

Eligibility Criteria

Starting February 1, 2010, facilitators responsible for PSI supports will review requests from new applicants and from people who have previously been unable to access supports through CLBC. Applicants will be requested to ensure assessments are accompanied by an Assessment Summary Form completed by a qualifying practitioner. This form will be available on CLBC's website at www.communitylivingbc.ca, under What We Do > Personalized Supports Initiative.

The diagnosis of FASD must be made by a registered practitioner and a medical practitioner in accordance with current Canadian Guidelines¹. The diagnosis of PDD must be made by a registered practitioner, psychiatrist, or paediatrician using criteria of DSM-IV for Pervasive Development Disorder.

Assessment of social-adaptive functioning must also be completed by a registered psychologist, psychological associate or psychologist certified by the British Columbia Association of School Psychologists using one of the following:

- (a) the Scales of Independent Behaviour, Revised, published by Riverside Publishing Co. in 1996
- (b) the Vineland Adaptive Behaviour Scales, Second Edition, published by American Guidance Services Publishing in 2005
- (c) the Adaptive Behaviour Assessment System, Second Edition, published by The Psychological Corporation in 2003

To be eligible under the new criteria, the assessor is requested to attest that the individual has significant limitations in adaptive functioning that are not primarily due to sensory deficits (e.g. impaired vision or hearing) mental health problems, environmental deprivation, physical health problems, cultural factors, ESL, or socio-economic factors. The term "significant limitations" is defined in the regulations as having a global composite score of three standard deviations below the mean.

¹ "Fetal alcohol spectrum disorder: Canadian guidelines for diagnosis" by A.E. Chudley, J Conry, J.L. Cook, C. Loock, T Rosales and N. LeBlanc, published in the Canadian Medical Association Journal, Volume 172 (5 Supplement), pages S1- S21 in 2005.