

# MY PERSONAL OUTCOMES WORKBOOK

**My Name:**

**My Key Worker's Name:**

**Date started:**



# Guidelines for using this Workbook

## Purpose

The purpose of the Workbook is to gather information about the important things in the life of the person that you are supporting and to explore their hopes and dreams for the future. The most natural way to gather this information is in the form of a conversation with the person themselves and with the people that know them best. The Workbook covers all twenty one Personal Outcome Measures® (POMs) which are contained in five factors (My Human Security, My Community, My Relationships, My Choices and My Goals) which examine people's personal quality of life and the extent to which their supports and services are person centred. Hopes and dreams are non-prescriptive, they have no norms and are uniquely defined by each individual. Therefore, individualised supports must be in place to facilitate their achievement. Personal Outcomes Measures® enables us to identify the person's unique priorities, to see them in new and different ways and subsequently develop their person centred plan.

Each of the twenty one Personal Outcome Measures® is accompanied by a series of questions in the Workbook to guide your conversation(s) with the person supported and with those who know them best. The questions are designed to ascertain whether the particular outcome is present for the individual and if individualised supports are in place. Once completed, the Workbook is held in the person's Personal Outcomes folder (also known as their Individual Plan folder). It should be updated annually and a new Workbook completed every two years.

## Using the Workbook

When using this Workbook please refer to *CQL Personal Outcome Measures®: Measuring Personal Quality of Life* (available from QED). Some individuals may wish to complete the Workbook themselves...in discussion with their key-worker or another staff member. Others will need varying levels of support to complete it. For people who communicate without words and are unable to speak for themselves, the information gathering is carried out with staff and family members who know them best. The individual should always be present for these conversations and much can be learnt through their non-verbal communications.

When the Workbook is being completed, it is important to facilitate an information gathering process with as many people as possible. This is always with the consent of the individual. It is always important to consult with the people that know the person best and to complete the **Follow up questions for those who know the person best** section of each of the 21 Outcome Measures. Remember that different people may be able to contribute information and insights that nobody else has about the individual. Any additional information (e.g. from family members, volunteer, staff members, friends) should be included in the relevant page at the back of the Workbook.

The information gathered in the Workbook should encourage us to reflect on the way in which services are being delivered, to think 'outside the box' and to look for new and improved ways in which supports can be individualised. **Even the smallest of changes in a person's life can hugely influence their experiences and the choices that are available to them. This in turn, may result in a significant improvement in their overall quality of life.**

### Please Note:

Research completed by the Council on Quality and Leadership (CQL) has identified a number of Outcomes called **Gateway Outcomes**. When supported, these have an increased, positive impact on a person's overall quality of life. These six Outcomes are:

<b>My Human Security</b>	<b>Outcome 5: People exercise rights</b>
	<b>Outcome 6: People are treated fairly</b>
<b>My Community</b>	<b>Outcome 10: People interact with other members of the community</b>
<b>My Relationships</b>	<b>Outcome 13: People have friends</b>
<b>My Choices</b>	<b>Outcome 17: People choose where and with whom they live</b>
	<b>Outcome 19: People choose services</b>

## PERSONAL OUTCOME MEASURES® (POM)

(5 Factors and 21 Outcome Measures)



### MY HUMAN SECURITY

1. People are safe
2. People are free from abuse and neglect
3. People have the best possible health
4. People experience continuity and security
5. People exercise rights
6. People are treated fairly
7. People are respected



### MY COMMUNITY

8. People use their environments
9. People live in integrated environments
10. People interact with other members of the community
11. People participate in the life of the community



### MY RELATIONSHIPS

12. People are connected to natural support networks
13. People have friends
14. People have intimate relationships
15. People decide when to share personal information
16. People perform different social roles



### MY CHOICES

17. People choose where and with whom they live
18. People choose where they work
19. People choose services



### MY GOALS

20. People choose personal goals
21. People realise personal goals



## MY HUMAN SECURITY Factor 1

1. People are safe
2. People are free from abuse and neglect
3. People have the best possible health
4. People experience continuity and security
5. People exercise rights
6. People are treated fairly
7. People are respected

Human security indicators are essential non-negotiable human and civil rights. While this includes a wide range of rights, from the right to access to one's possessions to the right to be treated fairly, there is also a requirement for freedom from physical or mental harm, including abuse neglect and mistreatment. People supported have a right to dignity and respect, social stability, continuity and security. People must have sufficient resources to meet their basic needs as well as person-centred services.

### 1. People are safe



1. Do you feel safe at home, at work, in your day service and / or in your community? **YES** **NO**  
If **NO**.....please explain:

---

---

2. If you did not feel safe.....what would you do and what help would you need?

---

---

3. What would you do in an emergency at home, at work, in your day service or in your community (e.g in a fire, an accident, a power cut)?

---

---

4. Is there anywhere that you do not feel safe and if so....what kind of things are you concerned about?

---

---

5. Would you take a lift from someone you don't know? **YES** **NO**

Comment: \_\_\_\_\_

**Follow up questions for those who know the person best:**

- a) Does the person know what to do in emergencies? **YES NO**  
If **NO**...what's being done to ensure their safety – particularly in places where they spend most of their time (e.g. fire drills, evacuation procedures)?

---

---

- b) How does the organisation identify safety issues for individuals at work, in their home and in the community – at home, work and in the community?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

## 2. People are free from abuse and neglect



*(Some people supported may have personal experience of some form of abuse. Preface these questions by telling the person that they don't have to answer if they don't want to...as they are private questions. If they make an allegation follow the safeguarding procedures)*

- a) Do you have any complaints about how you are treated by anyone? Has anyone ever hurt you or upset you in any way (e.g. hitting, bullying, shouting,)? **YES NO**  
If **YES**... what did you do and did you get the help you needed (e.g. counselling, support from social work)?

---

---

- b) Do you know understand what abuse / exploitation / neglect / mistreatment is? **YES NO**

Who helps you to understand these?

---

- c) Have you any worries .....Who can you talk to if you are hurt, upset or somebody did something that you didn't like?

---

---

**Follow up questions for those who know the person best:**

a) Has there ever been any allegation(s) of abuse, neglect, exploitation and/or mistreatment by or on behalf of the person? **YES** **NO**

If **YES** ...what has been done to support the person?

---

---

b) Does the person understand the meaning of abuse, neglect, exploitation and / or mistreatment?  
**YES** **NO**

How do you know this? What is the greatest area of risk for this person?

---

---

d) What information and education does the service provide them with regarding abuse, neglect, exploitation and / or mistreatment (e.g. how to make a complaint, feeling safe, RSE training)?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

**3. People have the best possible health**



1. What does being healthy mean to you (e.g. exercise / diet / medication)?

---

---

2. What concerns (if any) do you have about your health (physical and mental) and who do you discuss these with?

---

---

3. What do you do to stay healthy and how are you supported to do this?

---

---

4. What health specialists do you see (e.g. optician / dentist etc)...do you see them as much as you need to?

---

---

5. Do you take any medication? **YES** **NO**

If **YES**....what is it for and how does it help? Do you take your own medication?

---

---

**Follow up questions for those who know the person best:**

a) What is the person's definition of best possible health?

---

---

b) What health specialists (if any) does the person see? What annual check-ups do they get?

---

---

c) How is the person supported to explore their own healthcare needs and to self-manage their health (e.g. preventative healthcare, make their own appointments, self-medicate, be pro-active about their health)?

---

---

d) How does the service support the person to respond to their changing healthcare needs and preferences?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

## 4. People experience continuity and security



1. What changes have occurred in your life at home or in the service(s) you use in the last couple of years (e.g. staff changes, new housemates, new home)? Who was responsible for those changes?

---

---

2. Do these changes bother you in any way? **YES** **No** If YES ....how do they bother you?

---

---

3. How are you supported to be involved in any decisions about changes that affect you?

---

---

4. Do you have access to your own money? **YES** **NO**

5. Where does your money come from and do you have enough money?

---

---

6. Have you done anything to plan for the future and to protect your belongings (e.g. will / insurance / end of life / retirement plan)?

---

---

7. Have you any worries about the future or any changes that might happen?

---

---

**Follow up questions for those who know the person best:**

a) What is necessary for the person to experience continuity and security in their life and how do you know this?

---

---



b) How is the person supported to manage changes in their life (e.g. transition plans, discussions with the person / their family, providing options)?

---

---

c) How does the service ensure that the person's personal resources are protected?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

## 5. People exercise rights



1. What do you know about your rights as a citizen (e.g. as an employee/ as a person using services / your Disability Allowance / to have an Independent Advocate)?

---

---

2. How are you supported to understand your rights and entitlements?

---

---

3. Which of the following rights do you exercise? (Please tick)

The right to: Complain	YES	NO
Express your sexuality	YES	NO
Choose your own clothes and home décor	YES	NO
Access your personal possessions	YES	NO
Fair wages	YES	NO
Voice an opinion / say what you think	YES	NO
Vote	YES	NO
Practice your religion	YES	NO
Privacy when you want it	YES	NO
Freedom from coercion and restraint	YES	NO
Have access to, and control of, your money	YES	NO
Make personal decisions	YES	NO
Choose your daily routine	YES	NO
Freedom of movement	YES	NO
Access to food	YES	NO

Have visitors YES NO  
Stay home alone YES NO

4. What rights are most important to you and if you don't exercise any of your rights – why not (e.g. you don't want to, somebody is preventing you)?

---

---

**Follow up questions for those who know the person best:**

a) What rights are important to the person? How do you know this?

---

---

b) What supports does the person need to understand and exercise their rights? Where can they get information about their rights?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

**6. People are treated fairly**



1. Are there times when you are / were treated unfairly? YES NO  
If YES – when is / was this?

---

---

2. Are there any restrictions in place for you (check Individual Rights Assessment – Personal Profile)?  
YES NO  
If YES – what are they?

---

---

Do you know why they are in place? YES NO

3. What help are you getting to reduce / eliminate these restrictions?

---

---

4. Who can you talk to you if you feel you are being treated unfairly?

---

5. Do you know how to make a complaint?                      **YES**        **NO**

6. Have you ever been treated unfairly and made a complaint?    **YES**    **NO**

If **YES**.... how was it dealt with (e.g. was it investigated, were you happy with the outcome)?

---

---

**Follow up questions for those who know the person best:**

a) If the person has rights restrictions in place, has due process been followed?    **YES**    **NO**

b) What supports are in place to reduce / remove the restriction(s)?

---

---

c) What procedures are in place to address any concerns that the person might have? Are these consistent with due process principles?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

## 7. People are respected



1. Do you feel important?                      **YES**        **NO**

2. Are you treated with respect where you live, where you work and in the community e.g. do people listen to you / ask for your opinion / give you choices / call you the name you choose?                      **YES**    **NO**

3. If you were not treated well in the past – what did you do about this and were you happy with the outcome?

---

---

4. How are you supported to be involved in challenging and interesting activities at work, at home and / or in your day service? Would you like to try new things...and if so ...what?

---

---

**Follow up questions for those who know the person best:**

a) What's important to the person regarding respect?

---

---

b) How does the organisation act to ensure that interactions with the person are respectful?

---

---

c) How to you promote the person's abilities rather than their differences?

---

---

d) What supports are provided to enhance their self-image? How have their supports been personalised?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?



## MY COMMUNITY Factor 2

- 8. People use their environments
- 9. People live in integrated environments
- 10. People interact with other members of the community
- 11. People participate in the life of the community

People with intellectual disabilities have a right to be part of the community and to access and interact with the world around them. People should receive services in the most integrated settings possible. Too often, where the people we support live, work and spend their leisure time is determined by where supports are located. They must have the same opportunities to access their environment as other citizens, with community inclusion being the ultimate goal. Our environment includes the places where we live, work and spend time. Full access and use of these environments support a variety of experiences and activities.

### 8. People use their environments



1. Can you get around your (physical) environment as much as you want (e.g, home, transport, community)?

---



---

2. What appliances in do you use in your home / at work / in your day service (e.g cooker, microwave, kettle, washing machine, computer, telephone)?

---



---

3. Can you use them as much as you want?                      **YES**    **NO**  
If **NO**.... please explain

---



---

4. Is there anything you can't do / access when using your own environment (in the kitchen, bedroom, bathroom, day service etc.) because you need particular equipment and / or modifications that aren't available to you? (e.g. lack of assistive technology, relevant adaptations, policies and protocols) **YES**   **NO**  
If **YES**.....please explain.

---



---

5. Is transport (public or organisational) available to support you to access your environment when you want to socialise, participate in your community etc?   **YES**    **NO**

6. Do you have a key to your home / room?   **YES**    **NO**

7. Is there anything you would like more access to in your environment? **YES** **NO**  
If **YES** – what / where?

---

---

**Follow up questions for those who know the person best:**

a) Is there anything the person can't do because of a lack of resources and / or specific modifications?  
**YES** **NO**  
If **YES**...please explain.

---

---

b) What adaptations have been made to support the person to have maximum access to their environment (e.g. assistive technology, mobility aids etc)?

---

---

c) In relation to this outcome - how are barriers for the person highlighted and addressed?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

## 9. People live in integrated environments



1. Where do you live and work / access your day service? Do other people supported live and work there as well?

---

---

2. Where do you go to have fun? Are these places where other people in the community (without disabilities) would go?

---

---

3. Is there anything about your environment that you would like to change?

---

---

**Follow up questions for those who know the person best:**

a) What does integration mean to / for the person?

---

---

b) What supports are provided to encourage integration (e.g. in community education programmes, work, social activities and / or leisure activities)?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

**10. People interact with other members of the community**



1. Who do you know in the community and what kind of interactions do you have with them (e.g. ordering / paying for food in a restaurant, visiting / talking to neighbours)?

---

---

2. If you work – what level of social contact do you have with your co-workers (e.g. work breaks, lunches, do you go to work parties)?

---

---

3. Would you like to spend more time interacting with people in your community? **YES NO**  
If YES ....How could you do this?

---

---

**Follow up questions for those who know the person best:**

- a) Do you know the extent of the person's level of interaction with the community?    **YES**    **NO**
- b) How is the person supported to have opportunities to meet and interact with others in the community? -

---

---

- c) Are the type and frequency of their interactions satisfactory to the person – how do you know this?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

**11. People participate in the life of the community**



1. What kind of things do you like to do in your community (e.g. shopping, eating out, pub, hairdresser, cinema, theatre, church, music sessions)?

---

---

2. How do you know what is going on in your community (e.g. community newsletters, the local papers) ...who decides where you go?

---

---

3. Would you like to be more involved in your local community...and if so...how?

---

---

**Follow up questions for those who know the person best:**

- a) What does the person like doing in their community and how do you know this?

---

---



b) What access to information about options for community participation are provided?

---

---

c) How are they encouraged and supported to be more involved?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?



### **MY RELATIONSHIPS Factor 3**

- 12. People are connected to natural support networks**
- 13. People have friends**
- 14. People have intimate relationships**
- 15. People decide when to share personal information**
- 16. People perform different social roles**

**Relationships, be they with biological or chosen family, friends or romantic partners produce a sense of belonging and provide a sense of security for people. Relationships are personally defined ranging from who one chooses to share information with to a deep level of familiarity and intimacy. Relationships create links to the greater world and help people supported to develop and maintain social roles. Social capital – the impact of social ties and relationships, promotes personal outcomes.**

### **12. People are connected to natural support networks**



1. Who are the people in your life that you are close to (e.g. that you want to talk to when you are happy or upset about something)?

---

2. How do you maintain contact with your family / close friends (e.g. cards, skype, phone calls, family events)?

---

---

3. Do you have enough contact with your family and close friends ....would you like more...is there anyone that you would like to make contact with?

---

---

**Follow up questions for those who know the person best:**

a) What do you know about the person's natural support network (family members and very close friends) and how do you know this?

---

---

b) What supports are provided to maintain contact with people in their support network and how are barriers to this overcome?

---

---

c) What efforts are being made to expand the person's natural support network?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

**13. People have friends**



*(N.B. Friends are people apart from family members and staff).*

1. What does having a friend mean to you?

---

---

2. Who are your friends and how do you spend time with them?

---

---

3. Would you like to have more friends or see more of the friends that you have? **YES** **NO**  
If **YES** - how could you make new friends and what supports would you need to do this

---

---

**Follow up questions for those who know the person best:**

a) Who are the person's friends and how often do they see them?

---

---

b) Is this enough for them – would they like to spend more time with their friends?

---

---

c) How is the person supported to maintain existing friendships and what opportunities are provided to support them to develop new ones?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

**14. People have intimate relationships**



1. Is there someone in your life that you feel especially close to? **YES** **NO**

Is this enough for you? **YES** **NO**

If **NO** ...how could you be supported to have more intimate relationships in your life?

---

---

2. If you are really excited, happy worried or upset about something...who is the first person that you would contact or tell?

---

---

3. How would you describe what you want in an intimate or close relationship?

---

---

**Follow up questions for those who know the person best:**

a) How is the person's desire for intimacy determined? Do they have enough intimacy in their lives?

---

---

b) How is the person supported to develop and maintain intimate relationships?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

**15. People decide when to share personal information**



1. Do you know what personal information / files the organisation has about you? **YES** **NO**

2. Has anybody talked to you about your files / explained what is in them? **YES** **NO**  
If **NO**...would you like someone to do this? **YES** **NO**

3. Do staff ask for your permission when they give out information about you? **YES** **NO**

4. What concerns (if any) do you have about your personal information?

---

---

**Follow up questions for those who know the person best:**

a) What's in place in the organisation to respect how a person's personal information is shared as well as their right to confidentiality?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

## 16. People perform different social roles



1. What kind of involvement(s) have you in your local community (e.g. social groups / clubs, volunteer, community groups)?

---

---

2. Would you be missed if you did not go to these? **YES** **NO**

3. Would you like to have more social roles? **YES** **NO**

4. How are you supported to find out about opportunities (e.g. clubs, groups, community organisations) to enable you to develop different social roles in your community?

---

---

5. What do you need to develop and maintain more social roles (e.g. godparent, church committee, craft group, volunteering)?

---

---

### Follow up questions for those who know the person best:

a) What social roles does the person have and would they like more? How do you know this?

---

---

b) Have you identified any other social roles for the person – how do you know what they want?

---

---

c) What supports and opportunities has the person been provided with to develop more social roles?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?



### MY CHOICES Factor 4

- 17. People choose where and with whom they live
- 18. People choose where they work
- 19. People choose services

Choice is the ability to make decisions that affect one’s life and community. Central to choice are self-determination, participation and autonomy. Organisations must learn about and accommodate people’s preferences so they can get what they want and need. The person supported should be the key decision maker and their individual characteristics and choices are the priorities. The role of the organisation is to assist in matching what the person wants with what is available and, when choices are limited, to find the best possible option for that person.

### 17. People choose where and with whom they live



1. Where do you live and was this your choice?

---

---

2. Do you live with other people?      **YES**      **NO**  
If **YES**....did you choose who you wanted to live with?      **YES**      **NO**

3. Is there anything you would like to change about where you live / who you live with now?      **YES**      **NO**  
If **YES**.....what would this be?

---

---

4. If you could live anywhere – where would it be and what supports would you need to do this?

---

---

**Follow up questions for those who know the person best:**

a) Do you know where and with whom the person wants to live.....how was this identified?

---

---

b) How have they been supported and what options have they been presented with to make informed decisions about where and with whom they want to live?

---

---

c) How were the person's preferences used to select this home?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

**18. People choose where they work**



1. Describe your work/ day service? (Please be specific e.g. fulltime / part-time, paid / unpaid etc)

---

---

2. Was this your choice ...can you do something different if you want to? Please explain.

---

---

3. If you could have any job in the world – what would this be?

---

---

4. What opportunities do you have to experience different options? (including generic, community-based work / day activities)?

---

---

**Follow up questions for those who know the person best:**

a) How has the organisation assessed what the person wants, and has the potential, to do?

---

---

b) How is the person provided with a variety of work / day service experiences and options?

---

---

c) What barriers are in place to achieving this outcome and what is being done to address those barriers?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

**19. People choose services**



1. What services are you currently receiving and .....where and from whom do you receive them?

Service	Provider(s)	Where?
Residential		
Day		
Employment		
Leisure / fun		
Medical professional		
Multidisciplinary		
Financial		
Hairdresser		

2. Who decided what services you should receive and how were you included in the decision(s)?

---

---



3. Do you have enough services?      **YES**      **NO**

If **NO**...what additional services do you need and what supports do you need to get these?

---

---

**Follow up questions for those who know the person best:**

a) How are services identified for the person?

---

---

b) How are they included in this – particularly if their ability to make decisions is considered to be limited?

---

---

c) What options were / are presented to them?

---

---

d) How does the organisation honour their choices about services?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?



## MY GOALS Factor 5

20. People choose personal goals

21. People realise personal goals

Goals reflect aims for the future including direction, hopes and dreams. While goals do not need to be realistic or achievable, they do need to be person-centred. Organisations need to support people to have experiences and opportunities that help them reach personal milestones. When we have a variety of experiences and chances to try different things, our options and choices increase and our hopes and dreams for the future are enriched.

### 20. People choose personal goals



1. What hopes and dreams do you have for your future life (e.g. in relation to your lifestyle, your accommodation, your health and your finances)?

---

---

2. How are you supported to explore possibilities and identify exciting hopes and dreams? Who do you talk to about this?

---

---

#### Follow up questions for those who know the person best:

a) What are the person’s hopes and dreams and how were they identified?

---

---

b) What supports are provided to the person to enable them to achieve their hopes and dreams - how do you know if these supports are effective?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?

## 21. People realise personal goals



1. What have you achieved that in the past year or two that you are really proud of?

---

---

2. How did you celebrate this?

---

---

**Follow up questions for those who know the person best:**

a) What achievements are important to the person ..... how do you know this?

---

---

b) How is the person supported to realise their hopes and dreams and to celebrate their achievements?

---

---

Do you need any more support / help with this (outcome)? If YES what support / help do you need?



## **My Vision**

My vision is what I really want my life to look like in the future. It comes from my hopes and dreams and encourages me to explore the possibilities for my life. My vision will guide me to take action, look for change and make the right choices to support me to have my best possible life. (It can be presented here in words and / or in pictures).

**SUMMARY OF MY PRIORITY OUTCOMES**  
**...my hopes and dreams for the year \_\_\_\_\_**

Following the information gathering process...these are the areas ... my hopes and dreams... that I want to work on. They should be brought to my Individual Planning (IP) Meeting to be broken down into SMART action steps.



No	Outcome No.	My Hopes and Dreams (Description)