APPENDIX A

Portland State University

OPTIONS COUNSELING IN OREGON

PROFESSIONAL STANDARDS AND TOOLS TO SUPPORT OPTIONS COUNSELING

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PART I

OREGON PROFESSIONAL STANDARDS FOR OPTIONS COUNSELORS

Oregon received a grant from the Administration on Aging (now the Administration for Community Living) in 2010 to participate in the development of standards for options counseling. Oregon focused on developing professional standards by conducting a systematic job analysis to identify core job tasks and associated job requirements (i.e., knowledge, skills, abilities, and other traits). The job analysis was conducted by Portland State University's Institute on Aging. We built on the core competencies, or job clusters, that had been defined previously by the AoA. These were:

- Determine the need for Options Counseling
- Assess needs, values, and preferences
- Understand public and private sector resources
- Demonstrate respect for self determination
- Encourage a future orientation
- Follow-up

The job analysis followed procedures described by Brannick, Levine, and Morgesen (2007)[1], and Gatewood, Feild, and Barrick (2008)[2]. This included structured interviews, focus groups, and surveys all conducted with subject matter experts (SMEs). The steps followed were:

- Three SME groups were convened: two consisting of options counselors and one of supervisors of options counselors.
- Structured focus groups were conducted with SMEs to obtain detailed information about a) job tasks and b) job requirements (knowledge, skills, abilities, other traits—KSAOs) associated with each of six competency areas listed above.
- Surveys were conducted with the original SME groups, national experts, and others who completed OC training in Oregon. Survey participants were asked to prioritize the tasks and KSAOs for OCs that had been identified through the SME focus groups in terms of criticality. Participants were also asked to indicate which job requirements needed to be present at the time of hire and what could be trained after hire. Tasks and KSAOs where there was disagreement among SMEs (high standard deviation) or low mean ratings were eliminated.

[1] Brannic, M. T., Levine, E. L., & Morgeson, F. P. (2007). *Job and work analysis: Methods, research and applications for human resource management.* (2nd Edition). Sage Publications: New York.

[2] Gatewood, R. D., Feild, H. S., Barrick, M. (2008). *Human resource selection.* South-Western Cengage Learning: United States.

- A follow-up survey was conducted and participants were asked to match critical tasks with specific KSAOs.

What follows are the professional standards comprised of critical job tasks, minimum job qualifications, job requirements, and other traits identified as necessary to perform the options counseling job. These professional standards were used to revise the options counseling curriculum and to develop human resources tools to support options counseling. Tools include a generic OC position description, hiring tools (e.g., job interview questions and guide), performance appraisal tools and guide, and resources to address performance issues. The development of each tool is described in Part II.

CRITICAL OPTIONS COUNSELING JOB TASKS

I. Determine the need for Options Counseling

1. Gather information from consumers, family members, and others that the consumer would like involved using informal, conversational approaches.
2. Gather information from consumers about their wants, preferences, goals, and willingness to engage in options counseling.
3. Evaluate information gathered to determine whether criteria for options counseling are met (e.g., The presenting issue or concern is not resolved with a single conversation or exchange; consumer needs assistance to think through the situation or to contact professionals or other agencies; a family meeting (can include friends, professionals from other agencies) and/or in-home visit is needed to gather more complete information about needs, values, and preferences and/or to support consumer decision-making.

II. Assess needs, values, and preferences

1. Meet with consumers (by phone or in person) to learn more about their situations and the issues confronting them (e.g., day-to-day routines to determine how they are currently managing; preferences about where to live, their visions for the future, their feelings related to independence and using services).
2. Arrange and conduct meeting with the consumer and with family members or other parties they would like to have present (such as close friend, pastor, neighbor) as needed to facilitate assessment of consumer needs.
3. Identify existing consumer resources (e.g., including financial, family and other natural support, housing environmental safety).
4. Identify the consumer's preferred approach to making decisions to ensure that assessments and action plans will reflect this preference.
5. Determine consumer's level knowledge about options.
6. Document the consumers' and OCs' perspectives of needs, values, and preferences.
7. Identify key decision makers (e.g., consumer, family, or other support person).

8. Learn about specific consumer disabilities (e.g., Lewy Body Dementia) to better understand consumer needs.

III. Understand public and private sector resources

1. Identify local resources available to address unmet needs of adults and people with disabilities at all income levels using the ADRC database, consulting with colleagues and community partners.
2. Increase OCs' own knowledge of local and regional private and public sector resources to assure the full range of options are offered to consumers.
3. Provide and review written information (e.g., brochures, applications, contact information, websites) to consumers, family members and/or other support persons about relevant aging and disability services.
4. Increase knowledge of agency and community healthy living, fall prevention, and wellness programs.
5. Facilitate access to services (e.g., help consumers complete applications, make initial calls to services as needed).
6. Participate in updating the ADRC resource data base by identifying gaps in services, contributing updated information about resources, and providing feedback to IT.
7. Attend training on public and private resources to increase and maintain knowledge and skills using in-service, workshop, and webinar training opportunities.
8. Build relationships with community partners to better understand services available and to share information about ADRC services using opportunities for networking and continuing education.

IV. Demonstrate respect for self determination

1. Listen to consumers and families and recognize their unique needs and circumstances.
2. Explain pros and cons of various options to consumers and support persons to facilitate decision making.
3. Support and advocate for consumer decisions about services and supports even if decisions do not seem appropriate according to one's professional training.
4. Develop action plans with consumers that support their decisions.
5. Record action plans, documenting needs, values, and preferences and the roles and responsibilities agreed to by consumers, support persons, OC, and others.
6. Explain the role of options counselor to consumers and support persons to set clear expectations and to emphasize to all participants the role of the consumer as decision maker.
7. Set ground rules for family meetings and emphasizing consumer direction.

V. Encourage a future orientation

1. Ask consumers for permission to call back and see how action plans are working.

2. Assess consumer readiness for discussing future plans.
3. Work with consumers and support persons to identify possible events or conditions that will trigger additional planning and/or other actions to help consumers and support persons think beyond the current situation.
4. Provide healthy living and disease prevention information and encourage future contact with the ADRC.
5. Leave contact information (business cards and other print material) with consumers and support persons to encourage further contact with the OC if additional questions or needs emerge.

VI. Follow up

1. Call consumers or support persons according to the agreed upon, individualized time frame to determine how well the action plan is working.
2. Revise action plans as needed to meet consumer needs, preferences, and values using assessment and communication skills; arrange additional services (e.g., family meeting, new referrals) identified through follow up to assist consumers to receive needed and preferred services using knowledge of public and private resources.
3. Document information from the follow up calls.

MINIMUM JOB QUALIFICATIONS FOR OPTIONS COUNSELING

- 2-4 years of college or equivalent experience (e.g., 2 years related experience for each year of college).
- 3-5 years of experience working with senior and/or people with disabilities.
- Specialized training in options counseling within six months of hire.

OPTIONS COUNSELING JOB REQUIREMENTS:
CRITICAL KNOWLEDGE, SKILLS, ABILITIES, & OTHER TRAITS

Knowledge about disabilities and aging: How disabilities affect function and daily life, basic understanding of chronic illnesses and disabilities and associated, expected trajectories.

Knowledge about practice standards to support consumer direction: Principles of consumer direction, person-centered planning, person-centered thinking; balancing consumer direction and risk.

Knowledge about resources – what they are & how to access: Knowledge about private and public resources, eligibility criteria for public & private resources, how to seek out resources (e.g., databases, websites, networking).

Knowledge about agency policies, rules, guidelines, protocols: Criteria for options counseling; agency protocols (e.g., for documentation, holding family meetings, making referrals).

Writing skills: Writing action plans and other documents.

Oral communication skills: Skilled in active listening, motivational interviewing, presenting information clearly to consumers and other support persons. Understand when and how to match information appropriately to consumer needs, preferences, and capacity.

Cultural competence: Ability to interact in respectful, culturally appropriate ways. Identify consumers' strengths and challenges. Awareness of individual differences within and across cultural groups. Self-awareness of one's own cultural competence.

Ability to facilitate family meetings: Open and receptive; ability to encourage sharing of concerns, empowering participants to take part in planning, ability to model consumer direction and decision support.

Interpersonal skills: Openness, creativity, work as a team member, flexibility, curiosity, ability to build rapport, ability to work with people in crisis.

Assessment skills—gathering information in support of OC: Assess (i.e., "discover") needs, values, preferences, strengths, challenges; determine how clients manage day-to-day activities; individualize approach to gathering information, using more formal assessment tools selectively and as appropriate.

Critical thinking & judgment: Determine whether OC is needed, whether to hold a family meeting, which resources are appropriate, whether consumers and support persons are able to follow through on action plans, when to follow up, when services beyond OC are needed (e.g., case management).

Observational skills: Ability to determine through observation consumer capabilities, living environment, strengths and vulnerabilities.

Time management skills: Ability to multitask and prioritize time effectively.

Computer skills: Ability to use computer to locate resources; document OC activities; and communicate with peers, consumers, and family members, and other support persons.

OPTIONS COUNSELOR WORK STYLES AND OTHER REQUIRED TRAITS

This job requires:

1. Being honest and ethical.
2. Being reliable, responsible, and dependable, and fulfilling obligations.
3. Being sensitive to others' needs and feelings and being understanding and helpful on the job.
4. Displaying a good-natured, cooperative attitude.
5. Willingness to offer opinions and suggestions for improving OC services.

6. Accepting criticism and dealing calmly and effectively with high stress situations.
7. Willingness to take on responsibilities and challenges.
8. Maintaining composure, keeping emotions in check, controlling anger, and avoiding aggressive behavior, even in very difficult situations.
9. Being open to change (positive or negative) and to considerable variety in the workplace.
10. Being a change agent to assist the agency in developing the ADRC and options counseling services.
11. Being careful about detail and thorough in completing work tasks.
12. Persistence in the face of obstacles.
13. Preferring to work with others rather than alone, and being personally connected with others on the job.
14. Analyzing information and using logic to address work-related issues and problems.
15. Job requires creativity and alternative thinking to develop new ideas for, and answers to, work-related problems.

OREGON STANDARDS FOR SUPERVISORS OF OPTIONS COUNSELORS

The 2010 grant from the Administration on Aging (now the Administration for Community Living) was also used to develop standards for options counseling supervisors. A systematic process was used and included input from OCs, review of the O*Net database, and a series of focus groups with subject matter experts (SME) comprised of OC supervisors and managers of the ADRC pilot programs. The SMEs who participated had also been involved in developing the OC professional standards.

Information from OCs was obtained during OC training and through surveys following training. During training participants were asked to identify the ways that their organizations could support their work. Spoken comments were recorded by the research team during the training and written comments were captured through evaluation forms completed by participants at the end of training. Several comments included information specific to supervisory support.

In addition, we used O*NET – a database developed and maintained by the Department of Labor and is a major source of occupational information, including hundreds of standardized and occupation-specific descriptors – to obtain information about the possible tasks and KSAOs associated with the job of Options Counselor Supervisors. After reviewing several occupations with supervisory responsibilities, the occupation "Social and Community Services Manager" was selected for review. Elements of the job that were judged by the research team to be relevant to OC supervisors were extracted from the occupational description. These were put into survey format with items categorized by tasks, KSAs, work context, and work styles. Each item was rated in terms of whether it was a core function for OC supervisors, a general supervisory function not specific to OC, or not relevant. The SMEs completed the survey at the beginning of the first focus group. The group discussed their responses and in the process they also generated other items based on their experiences as options counseling supervisors.

Data from the OCs, the surveys, and the first focus group discussion were used to develop a second list of tasks and KSAOs. All survey items identified as core to OC supervision were included as were the additional items generated through discussion. A second focus group was held with the same SMEs for further discussion of the list. Those elements determined to be specific to OC supervision after the second focus group were used to draft the professional OC supervisory standards. After review by the research team, the standards were distributed to the SMEs. Revisions were made based on their feedback. Below are the final critical job tasks and job requirements (i.e., knowledge, skills, abilities, and work styles) determined through this process.

OPTIONS COUNSELOR SUPERVISOR CRITICAL JOB TASKS

I. Provide guidance, support, and oversight to options counselors to ensure that they:

1. Are meeting Oregon Options Counseling standards (i.e., determine the need for options counseling; assess needs, values, and preferences; understand public and private resources; support of self-determination; encourage future orientation; follow-up).
2. Are knowledgeable about services and resources.
3. Are using their role and time effectively and in alignment with consumer-specific needs and situations.
4. Understand reporting requirements and are using the ADRC database to document decision support activities and follow up with consumers.

II. Monitor and evaluate OC activities and provide training and support as needed through:

1. Observations of OC work
2. Consumer and family feedback
3. Feedback from others

III. Provide guidance and support to options counselors through regular supervisory sessions which may include:

1. Helping options counselors think critically and problem solve about specific issues they or consumers are facing and support options counselors as they consider appropriate resources for consumers and provide consumers decision support based on consumer needs, values, and preferences.
2. Assisting options counselors to use logic and reasoning to identify strengths and weakness of alternative solutions, conclusions, or approaches to problems.
3. Participating in staffing discussions.
4. Scheduling the work of options counselors.
5. Helping options counselors recognize and think reflectively about their own biases and reactions and how these impact relationships with, and service delivery for consumers.
6. Giving effective feedback about options counseling performance.

IV. Identify the educational needs of options counselors based on options counselor professional standards, supporting formal educational or training programs or classes for OCs, and teaching or instructing others about OC services. Support training of options counselors by:

1. Providing time for options counselors to attend training.
2. Providing on-the-job training and coaching as needed to supplement and/or reinforce options counseling training.
3. Participating in evaluating all levels of options counseling training.
4. Helping options counselors develop professional development goals and plans.

V. Review, verify, and analyze information from the ADRC Call Modules and CARETool to choose the best solutions and solve problems related to OC services (e.g., to ensure records are complete, action plans are individualized, OCs are following up with consumers).

VI. Develop and maintain constructive and collaborative working relationships with options counselors.

VII. Encourage and build mutual trust, respect, and cooperation among team members that promotes an overall positive work environment that includes:

1. High morale
2. Cultural competency
3. Teamwork

VIII. Provide supervisory support and assistance to help workers manage personal issues that affect their work.

IX. Provide information related to OC services to supervisors, peers, and subordinates, and other agency personnel by telephone, in written form, e-mail, or in person.

X. Practice professional self-development such as:

1. Develop specific goals and plans related to one's own professional development and growth.
2. Keep up-to-date technically and apply new knowledge to the job, including training options counselors as appropriate.

XI. Use relevant information and individual judgment to determine whether events or processes related to OC services comply with laws, regulations, or standards governing options counseling.

XII. Enter, transcribe, record, store, or maintain information related to options counseling in written or electronic form.

XIII. Prepare and maintain records and reports, such as budgets, personnel records, or training manuals.

XIV. Participate in building and managing the infrastructure to support options counseling, including tasks such as:

1. Recruit, interview, hire, and promote options counselors.
2. Participating in marketing and outreach by speaking to community groups and other service organizations to explain OC program purposes, programs, and policies.
3. Establish and oversee administrative procedures to support OC services.
4. Plan and administer budgets for OC services.

5. Participate in determining organizational policies regarding OC services (e.g., eligibility, program requirements, program benefits, organizational and systems design policies).

OPTIONS COUNSELING SUPERVISOR JOB REQUIREMENTS

Knowledge

1. Knowledge of options counseling professional standards and the options counseling job.
2. Knowledge of principles, methods, and procedures for assessment of and providing decision support for consumers with physical and/or cognitive disabilities.
3. Knowledge of strength-based and person-centered supervision and practice principles.
4. Knowledge of how culture influences workforce development and service delivery with consumers.
5. Knowledge of leadership and management principles involved in human services program management and delivery.

Skills/Abilities

1. Engage in active listening skills with a wide range of people (e.g., options counselors, consumers, community partners) to understand information and ideas presented through spoken words and sentences and to use this information to support options counseling practices.
2. Clear, direct oral communication skills, including abilities to:
    a. Explain roles and responsibilities of options counselors, including areas of difference and areas of overlap with other roles (e.g., Information and Referral, Information and Assistance, Case Management).
    b. Advocate for options counselors within the agency.
    c. Explain ADRC and options counseling-related federal, state, and county regulations and policies.
3. Skills in guiding options counselors, including:
    a. Set expectations for the options counselor role.
    b. Foster critical thinking and problem solving skills of options counselors, focusing on serving consumers and families.
    c. Select and use appropriate training/instructional methods and procedures when on-the-job training for options counselors is needed (e.g., aware and able to respond to "teachable moments").
4. Ability to model the practices that options counselors are to perform to meet the values and standards of options counseling and to create a supportive work environment.
5. Clear, direct writing skills in providing feedback and guidance to options counselors through email, policies and procedures, and written performance reviews.
6. Skills in planning and managing one's own time.
7. Ability to work with staff to manage staff time and resources.
8. Skills in implementing HR rules, such as hiring, providing orientation, assessing performance, documenting, and developing corrective action plans for staff.
9. Ability to reflect critically about one's own reactions to staff and consumers.

OPTIONS COUNSELING SUPERVISOR WORK STYLES AND OTHER REQUIRED TRAITS

This job requires:

1. Being honest and ethical.
2. Being reliable, responsible, and dependable, and fulfilling obligations.
3. Being sensitive to others' needs and feelings and being understanding and helpful on the job.
4. Displaying a good-natured, cooperative attitude.
5. Willingness to lead, take charge, and offer opinions and direction.
6. Accepting criticism and dealing calmly and effectively with high stress situations.
7. Willingness to take on responsibilities and challenges.
8. Maintaining composure, keeping emotions in check, controlling anger, and avoiding aggressive behavior, even in very difficult situations.
9. Being open to change (positive or negative) and to considerable variety in the workplace.
10. Being a change agent to assist the agency in developing the ADRC and options counseling services.
11. Being careful about detail and thorough in completing work tasks.
12. Persistence in the face of obstacles.
13. Preferring to work with others rather than alone, and being personally connected with others on the job.
14. Analyzing information and using logic to address work-related issues and problems.
15. Job requires creativity and alternative thinking to develop new ideas for and answers to work-related problems.
16. View the options counselor as one of the supervisor's customers.

CONSUMER-BASED STANDARDS FOR ADRCS

Assessing consumer satisfaction with services, including options counseling (OC), has been a major component in the development of the ADRC. Open-ended interviews were conducted with consumers of OC Consumers to identify their reasons for contacting the ADRC and to learn about their experiences with the agency. Using the professional OC standards and results from the initial consumer surveys, a comprehensive consumer satisfaction telephone survey was developed to determine how well information and assistance and OCs were addressing consumer-defined needs. The survey was conducted with 247 consumers and family members between October 2011 and March 2012. More information about the results of the survey is presented in White, Elliott, Carder, and Luhr (2012)[3].

As the professional OC standards and the consumer satisfaction surveys were being developed, ADRC work groups were thinking about ADRC standards from the perspectives of consumers. Specifically, the workgroups considered what consumers might expect in the areas of the website, location and hours of operation, the call center, information and assistance, options counseling, and public programs and assistance. We made sure that the consumer satisfaction survey addressed all of these areas.

Results from the consumer satisfaction survey were shared with the Advisory Council as well as with agency staff involved with ADRC development. Through discussion with these groups, performance metrics were established. These metrics will help ADRCs to improve practice and are considered to be reasonable benchmarks. The consumer-based standards are presented in Table 1.

[3] White, D. L., Elliott, S., Carder, P., & Luhr, G. (2012).

Table 1. Consumer-based Standards for ADRCs

Consumer Expectations	ADRC Standards	Performance Metrics
ADRC Website Consumers expect: • Ready access to the information they are looking for • Accurate, objective and unbiased information	• Ensure that the website is easy to navigate. • Ensure that the resource database includes information about the range of providers, programs, and services available in local service areas, including those available to private payers. • Ensure that the information in the database is accurate.	Less than 15% of total web site surveys state that the web site is hard to navigate. Less than 15% of total web site surveys state that the information in the database was incomplete, inaccurate, or out-of-date.
ADRC Physical Location, Hours of Service Consumers expect: • A physical location that is welcoming and accessible • Services that are available at times that are convenient for the public	• Ensure that the ADRC main location or branch location(s) are clearly identifiable, easy to find, and readily accessible to the public. • Ensure that ADRC services are available through the lunch hour and at other times that are most convenient for the public. • Ensure that ADRC staff has private office space or timely access to private meeting spaces. • Ensure that ADRC staff follows agency protocols for safety.	For those who go to the ADRC building: • 90% will report it is somewhat or very easy to find • 85% will report that it was convenient to go to the ADRC • 40% will report that they waited less than 5 minutes to see someone • No more than 10% will report waiting more than 20 minutes to see someone • Fewer than 10% will report it took "much too long" to see someone.
ADRC Call Center Consumers expect: • Timely response to phone calls and phone messages	• Use a 1-800 number with voice mail that is available 24/7 and accessible from all telecommunication devices. • Ensure that phone calls are answered by a live person during normal business hours, M-F. • Ensure that phone messages are responded to within 24 hours during a normal work week. • Provide guidance for accessing services – including instructions on automated/voice mail systems about type of information to leave (e.g., reasons for the call, urgency) and when caller can expect a return call.	Of the people who leave a message, 85% will get a call back within 24 hours based on the normal work week. No more than 15% of callers will report waiting "much too long" to receive a call back after leaving a message.

Consumer Expectations	ADRC Standards	Performance Metrics

Information, Referral and Assistance
 	
Consumers expect:
• Accurate and easy-to-use information, referrals and assistance from staff who are knowledgeable about a wide range of services
• Information and assistance that is personalized for them and their special circumstances
• Immediate help in a crisis situation
	• Ensure that 50% of staff that provide I&R/A services are CIRS-A certified.
	• Ensure that new hires begin a training process for the CIRS-A certification no later than a year of their hire date.
	• Ensure that I&R/A staff demonstrate the knowledge, skills and abilities to:
	  ○ Triage individuals who appear to be in a crisis situation and apply protocols for referring them to the appropriate service provider.
	  ○ Identify consumers' needs and preferences.
	  ○ Facilitate consumers' understanding of public and private resources.
	  ○ Consumers identified as needing a follow-up receive a follow-up.
	  ○ Make an initial determination if a consumer is likely to meet criteria for public programs and assistance.
	  ▪ Make an informed decision about referrals.
	  ○ Use interviewing methods such as "Teach Back" to assess consumers' understanding of how to access services and supports.
	  ○ Identify potential Options Counseling consumers.
	• Ensure that the process and timing of services are clearly explained
		85% will report that the ADRC staff person was somewhat or very knowledgeable.
		
		Of those receiving written materials, 90% will report they are relevant to their concerns.
		
		85% will report that ADRC staff were good or excellent at explaining how to get the help and information needed
		
		80% will report that the ADRC staff were good or excellent in helping to understand the service system.
		
		No more than 20% will report having to wait "much too long" to receive needed services.
		
		<u>*Crisis definition – AIRS Standards</u>
		The I&R service shall be prepared to assess and meet the immediate, short-term needs of inquirers who are experiencing a crisis and contact the I&R service for assistance. Included is assistance for individuals threatening suicide, homicide or assault; suicide survivors; victims of domestic abuse or other forms of violence, child abuse/neglect or elder/dependent adult abuse/neglect; sexual assault survivors; runaway youth; people experiencing a psychiatric emergency; chemically dependent people in crisis; survivors of a traumatic death; and others in distress.

Consumer Expectations	ADRC Standards	Performance Metrics
		90% of consumers identified as needing follow up by the ADRC were followed up with by ADRC staff.

Options Counseling
 	
Consumers expect:
 	
• Assistance in exploring the service options that are available to them, weighing the pros and cons, and getting connected with the services they choose
• Receiving this assistance over the phone, at an office visit, or during a home visit
• Assistance that is personalized for them and their special circumstances
	• Ensure that 100% of staff that provide options counseling have completed Oregon's Options Counseling curriculum.
	• Ensure that new hires begin Oregon's Options Counseling curriculum within six months to one year of their hire date.
	• Ensure that 100% of Options Counseling supervisors have completed OC 101 and 202.
	• Ensure that Options Counseling staff have the knowledge, skills and abilities to:
	  ○ Evaluate whether or not the consumer meets the criteria for Options Counseling (e.g., their presenting issue or concern is not resolved with a single conversation or exchange, they need more time to think through their situation, a family meeting would be helpful, etc.)
	  ○ Identify the consumer's strengths, values, needs and preferences
	  ○ Help the consumer understand the public and private sector resources that are available to meet their needs
	  ○ Help the consumer develop an action plan, service plan, or "next steps" that respects their right to self-determination and empowers them to be self-advocates
	  ○ Make sure that services the individual needs are started
	  ○ Follow-up and provide on-going assistance as needed
		90% of consumers who received Options Counseling report they were given the information they needed.
		
		90% of consumers reported they were treated with respect, felt the Options Counselor listened to their opinions and understood their specific circumstances,
		
		80% of consumers reported the options counselor helped them explore the choice available to them and their family members.
		
		75% of consumers report they have better understanding about their options after working with the options counselor.
		
		80% of consumers rate the options counselor as good or excellent in supporting them in their decision.
		
		70% of consumers report that the options counselor helped them to develop an action plan listing goals and next steps.
		
		80% of consumers report their situation is stable or improved following options counseling.
		
		Specifically 80% of consumers will report:

Consumer Expectations	ADRC Standards	Performance Metrics
	• Ensure same options counselor works consistently with consumers throughout the entire options counseling process as local resources allow. • Follow agency protocols for home visit safety	• Having enough support to meet needs and preferences • being safer • being more independent 70% of consumers will report: • living in a place they most desire • making the most of personal money and resources
Public-programs and assistance Consumers expect: • Information about public programs and assistance that they may qualify for • Guidance in navigating the application processes for public programs and assistance	Ensure that staff are available who can reliably: • Determine if the consumer meets or is likely to meet programmatic and financial eligibility requirements. • Assist the consumer in completing the application process, if requested. • Follow up with consumers to make sure they get the services they are eligible for. • Follow up with providers listed on action plan to make sure consumers get the services they are eligible for.	No more than 25% of consumers will report still having concerns the ADRC has not addressed 80% of consumers, who are eligible and/or choose specific services, will obtain those services. 80% of those receiving services will report that services are helpful or very helpful. No more than 20% of those receiving services will report they had to wait "much too long" for services to begin. 90% of consumers identified as needing follow up by the ADRC received a follow-up.

OREGON AGING AND DISABILITY RESOURCE CENTER (ADRC) PROGRAMS

SERVICE DELIVERY DESIGN STANDARDS FOR OPTIONS COUNSELING

The following program standards were developed in conjunction with the Options Counseling grant program to support options counseling through the Oregon ADRC. Under the leadership of the Administration on Aging (now Administration for Community Living), the program office and grantees met via teleconference to discuss service delivery design standards necessary to support options counseling. As the national office developed national standards, each state developed in parallel, program standards that were specific to their needs. The professional OC and OC supervisory standards described earlier in this manual helped to inform the development of the design standards. Other programmatic elements of ADRC development contributed as well, including those focused on marketing, information technology, and quality improvement activities. Below is the summary of the resulting standards specific to Oregon ADRCs. Specific references are made to the professional standards where appropriate.

SERVICE DEFINITION

Definition. Options Counseling (OC) is an interactive decision-support process whereby individuals, family members, caregivers and/or significant others are supported in their deliberations to make informed long-term support choices related to the individual's preferences, strengths, needed services, values and unique circumstances.

Target population. Includes, but is not limited to, Seniors, people with physical disabilities, adults 18 and older, families and caregivers. Emphasis is given to individuals transitioning from hospitals, skilled nursing facilities, and those at high risk for institutionalization.

CONTINUOUS QUALITY IMPROVEMENT, EVALUATION AND OUTCOMES

Documentation. At a minimum, documentation of OC services will include consumer demographic information, risk assessment, and the OC process (e.g., determination of need for OC services, consumer preferences and values, options considered, action plan, and follow-up)

IT System. Secure information system to document, track, and generate reports chronicling the process and outcomes of options counseling.

Quality Assurance/Quality Improvement Plan. At a minimum, the ADRC will gather data to monitor consumer outcomes, including consumer satisfaction with services. Data will be used to identify gaps in services and to improve services.

SERVICE DESIGN

Marketing/Outreach. Includes multi-media campaigns to ensure that consumers and all statewide and community partners know about OC services and how to access them.

Accessing OC services. ADRCs provide a single entry point for accessing services, including OC. ADRC staff are knowledgeable about criteria for OC services and help consumers connect with an Options Counselor when they met these criteria (e.g., issue is not resolved with single conversation or caller cannot articulate needs, other family or friends need to be involved, consumer needs decision support, a home visit is needed). (See OR Standards for Options Counselors, *I. Determine the Need for Options Counseling).*

Delivery Setting/Mode. Consumer ease and comfort are the primary determinates of OC setting and may include phone, e-mail, video conferencing, or consumer home. Consumer home is the optimal setting.

Personal Interview. OCs have conversations with consumers to learn more about their situations and their concerns. They learn about consumer strengths and resources as well as their disabilities and challenges. They also determine risk for out-of-home placement and conduct formal assessment as needed. (See OR Standards for Options Counselors, *II. Assess Needs, Values, and Preferences.)*

Decision Support. Options Counselors gather information about public and private services that can assist consumers address their needs in accordance to their values and preferences. OCs present pros and cons of each option, answer questions, and facilitate consumer decision making. (See OR Standards for OCs, *II. Assess Needs, Values, and Preferences, III. Understand Public and Private Sector Resources, and IV. Demonstrate Respect for Self Determination.)*

Action Plan. OCs collaborate with consumers to develop an action plan based on consumer needs, values, preferences; consumer resources (e.g., family support, housing, income); and community resources. OCs support and advocate for consumer decisions. OCs also encourage consumers to plan for their futures. (See OR Standards for OCs, *II. Demonstrate Respect for Self Determination,* and *V. Encourage a Future Orientation.)*

Community Support Options. OCs assist consumers in getting the services they need by being knowledgeable about the range of public and private resources in the community, assisting consumers with applications for services, and making contacts with service

agencies on their behalf. (See OR Standards for OCs, *III. Understanding Public and Private Sector Resources.)*

Follow-up. OCs follow-up with consumers to determine how the action plan is working and whether additional services are needed. (See OR Standards for OCs, *VI. Follow-Up.)*

PARTNERSHIPS

Partnerships are the foundation of successful ADRCs. Memoranda of Understanding will be in place outlining roles, strategies for meeting ADRC goals, communication, and staff training. Partnerships will include, but not be limited to, AARP, SHIBA, Easter Seals, SILC, 2-1-1, and local organizations that provide services within the Area Agency on Aging service areas.

STAFFING

Staffing Structure. The minimum job qualifications include 2-4 years of college or equivalent experience, 3-5 years working with seniors and/or people with disabilities, and specialized training in Options Counseling (see below).

Staff Education/Training. Within six months of hire, OCs will begin and within one year complete a series of three workshops provided through State Unit on Aging. OCs will participate in continuing education programs for in-depth training on topics such as physical and emotional aspects of aging and disabilities, decision support strategies such as person-centered planning and motivational interviewing, and information on public and private resources.

Supervisor/Manager Training.
Supervisors of OCs will complete two workshops, the introductory OC workshop and one specifically addressing skills and abilities related to supervision.

PART II

TOOLS TO SUPPORT OPTIONS COUNSELING

OPTIONS COUNSELING CURRICULUM

DEVELOPMENT OF OPTIONS COUNSELING AND OPTIONS COUNSELING SUPERVISOR CURRICULUM

The curriculum was developed by the Portland State University's Center for the Improvement of Child and Family Services. The goals of the options counseling curriculum were to enable ADRC staff and supervisors to:

1. Understand the value of Options Counseling (OC) for Oregonians seeking information about long-term care services and supports.
2. Define the purpose of Options Counseling and distinguish it from other forms of education about long-term care services and supports, or case management.
3. Understand and demonstrate the core competencies required for effective Options Counseling.
4. Practice appropriate Options Counseling skills in a variety of scenarios that represent long-term care needs in both aging and disabled populations (content targeting options counselors).
5. Observe staff performance in the delivery of Options Counseling and support them in skill development (content targeting supervisors).

Curriculum development was informed by the multiple materials developed by other established ADRCs as well as through experience with strength-based service delivery models. A series of three workshops was developed for options counselors and those who supported options counselors. The first workshop (Options Counseling 101) provides an overview of key concepts so that all have the same understanding about options counseling. This was particularly important in the initial development of the ADRCs because standards for OC had not yet been developed and agencies were exploring which staff would most likely be assuming those roles. The result was a group with a mix of different job titles (e.g., I&R, case manager) and levels of experience. Even as ADRCs move toward recruiting staff with case management experience into options counseling positions, this initial overview of OC and OC standards remains an important part of the curriculum. Supervisors are invited to participate in the first workshop so that all staff have a common language related to options counseling.

Options Counseling 102 and 103 focus on skill building and supervisors do not attend these sessions. Throughout the curriculum, adult learning principles are incorporated into the training to ensure that content is relevant to the job, the presentation of information is interactive, and participants have opportunities to practice skills. A period of at least 4 weeks is scheduled between sessions 102 and 103 so that participants have real world opportunities to practice skills. The purpose of Options Counseling 103 is to reinforce skills and learning, add new content, and foster a learning community. It provides opportunities for participants to reflect on their experiences and identify successes, emerging issues, and additional areas for professional growth and development related to Options Counseling.

A separate session (Options Counseling 202) has been developed for options counseling supervisors. Supervisory and organizational support is crucial for any worker, but especially in a newly developing job. The focus of this curriculum is on methods and skills to support options counselors and help them to grow professionally.

The initial curriculum was beta tested, refined and then delivered a second time prior to the development of the Professional Standards presented in Part I. Based on workshop evaluation data from OC and supervisor trainees, consumer feedback, and the new OC Standards, the curriculum has continued to be refined. Below is a summary of content covered in each of the sessions. Participants consistently give high ratings to the curriculum.

CURRICULUM CONTENT

Options Counseling 101 – Introduction to Options Counseling (8 hours)
This workshop is offered to both options counselors and options counselor supervisors. Content includes:

- Definitions of options counseling
- History and context of the development of ADRCs
- Options counseling in Oregon
- Values and principles
- Core competencies

Options Counseling 102 – The Art of Options Counseling (8 hours)
This session is for options counselors and focuses on skill building, particularly in areas of:

- Communication
- Assessment
- Documentation

Options Counseling 103 – Advanced Options Counseling (8 hours)
This session for options counselors is offered approximately one month after Options Counseling 102. The timing provides new options counselors opportunities to gain some experience doing options counseling before the final session. Their experiences help to

inform the discussion and skill building activities. The focus of the session is on advanced options counseling skill development in:

- Understanding change and motivation
- Decision making support
- Problem solving
- Facilitation of family meeting

Options Counseling 202 – for Supervisors of Options Counselors (16 hours)

- Application of the 3 elements of Human Service Supervision in Options Counseling: administrative, supportive, educational
- The role of supervisor in implementing options counseling

Options Counseling – Train-the-Trainer (16 hours)

For purposes of sustainability and for expanding the number of trained options counselors and supervisors throughout Oregon, The Center for the Improvement of Child and Family services and the ADRC program staff developed a train-the-trainer program. Those who complete the training can provide OC 101-103 in their agencies. Content covered in this program includes:

- Role of the trainer
- Training Practice – best practices
- Adult Learning Principles & Learning Styles
- Communication Skills
- Know the Options Counseling Training material
- Basic Principles –
    - Cultural Awareness
    - Person Centered/Directed Philosophy

DHS OPTIONS COUNSELOR POSITION DESCRIPTION

The Oregon Department of Human Resources used the attached position description (based directly on the professional standards for options counselors) to classify the position for options counselors. It is classified at the level of a case manager.

The pilot sites for the ADRC develop their own position descriptions prior to the development of the standards, but consistent with them, and in accordance to their local collective bargaining agreements.

Click here to link to instructions **All positions in DHS require a Criminal Background Check and, an Abuse/Neglect Check. Fingerprints may be required.**

STATE OF OREGON — DHS

POSITION DESCRIPTION

Position Revised Date:

This position is:

☒ Classified
☐ Unclassified
☐ Executive Service
☐ Mgmt Svc – Supervisory
☐ Mgmt Svc – Managerial
☐ Mgmt Svc - Confidential

Agency: Department of Human Services

Division:

☒ New ☐ Revised

SECTION 1. POSITION INFORMATION

a. Classification _____ **b.** Classification No: _____

c. Effective Date: _____ **d.** Position No: _____

e. Working Title: Options Counselor **f.** Agency No: 10000

g. Section Title: _____

h. Employee Name: _____

i. Work Location (City – _____

j. Supervisor Name: _____

k. Position: ☒ Permanent ☐ Seasonal ☐ Limited Duration ☐ Academic Year

☒ Full-Time ☐ Part-Time ☐ Intermittent ☐ Job Share

l. FLSA: ☐ Exempt ☐ Non-Exempt

If Exempt: ☐ Executive ☒ Professional ☐ Administrative

m. Eligible for Overtime: ☐ Yes ☐ No

SECTION 2. PROGRAM AND POSITION INFORMATION

a. Describe the program in which this position exists. Include program purpose, who's affected, size, and scope. Include relationship to agency mission.

The legislature created the Department of Human Services (DHS) in 1971 by bringing together the state's principal human services agencies. The department, with more than 9,400 positions and a budget of more than $9.3 billion, administers more than 250 programs.

The DHS mission is "Assisting people to become independent, healthy and safe." The department's work is organized around four broad goals: People are healthy, people are safe, people are living as independently as possible, and people are able to support themselves and their families. Each goal is supported by specific measurable outcomes.

This approach – stating goals, measuring results, and reporting progress to the public – reflects the department's commitment to better outcomes for clients and communities.

Because many clients have multiple needs, the department is integrating services, seeking to bring a broad range of supports within easy reach of each client or family. This approach, recognized as pioneering in the nation, requires close collaboration among staff within the department and with local governments, service providers and other partners.

The Aging and Disability Resource Connection (ADRC) is a program of the State of Oregon, Department of Human Services: Senior and Disabilities Division and the State Unit on Aging. ADRCs are part of the Aging Network administered by the Administration on Aging through the State of Oregon. ADRCs integrate senior and disability service systems so that consumers can have their needs met in one place. They are designed to streamline access to services and act as a clearing house of information on long-term supports and services in the community. ADRCs serve older adults and adults with disabilities through a variety of services including information and referral, information and assistance, and options counseling. Options counseling supports informed long-term care decision making through assistance provided to individuals and families to help them understand their strengths, needs, preferences and unique situations, and translates this knowledge into possible support strategies, plans and tactics based upon the choice available within the community.

b. Describe the primary purpose of this position, and how it functions within this program. Complete this statement. The primary purpose of this position is to:

Options counselors provide a key service for ADRCs. Their work focuses on six areas of responsibility:

1. Determine the need for options counseling: Options counselors talk with consumers, family members or other providers to identify unmet needs and evaluate that information to determine if criteria for options counseling is met.
2. Assess needs, values & preferences of consumers for long-term services and supports: through conversation, options counselors learn about consumers and their day-to-day routines, what is important to them, consumers' preferences for services and location of services and their

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preferred method of decision making. Family meetings may be held as part of this process. Use of standard assessments may be required.

3. Understand public & private resources: Identify local resources (both public and private) for older adults and people with disabilities. Options counselors keep current on resources in their communities and contribute to maintaining the ADRC resource data base by sharing information.
4. Demonstrate respect for self-determination: ADRCs support consumer self-determination by empowering consumers and providing information needed to make informed decisions
5. Encourage future orientation: Options counselors work with consumers, family, and others to consider possible events or circumstances that would trigger additional OC services or help plan beyond the current situation.
6. Follow-up: options counselors contact consumers according the agreed upon, individualized timeframe to determine how well the action plan is working, provide additional OC and/or arrange additional services as needed .

Options counselors document their work with consumers on the ADRC CARETool module and through action plans created with consumers.

SECTION 3. DESCRIPTION OF DUTIES

List the major duties of the position. State the percentage of time for each duty. Mark "N" for new duties, "R" for revised duties or "NC" for no change in duties. Indicate whether the duty is an "Essential" (E) or "Non-Essential" (NE) function.

% of Time	N/R/NC	E/NE	DUTIES
Note: *If additional rows of the below table are needed, place curser at end of a row (outside table) and hit "Enter".*			
10%	N	E	**I. Determine the need for Options Counseling** • Gather information from consumers, family members, and others that the consumer would like involved using informal, conversational approaches • Gather information from consumers about their wants, preferences, goals, and willingness to engage in options counseling • Evaluate information gathered to determine whether criteria for options counseling are met (e.g., The presenting issue or concern is not resolved with a single conversation or exchange; consumer needs assistance to think through the situation or to contact professionals or other agencies; a family meeting (can include friends, professionals from other agencies) and/or in-home visit is needed to gather more complete information about needs, values, and preferences and/or to support consumer decision-making.

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% of Time	N/R/NC	E/NE	DUTIES
25%	N	E	**II. Assess needs, values, and preferences** • Meet with consumers (by phone or in person) to learn more about their situations and the issues confronting them (e.g., day-to-day routines to determine how they are currently managing; preferences about where to live, their visions for the future, their feelings related to independence and using services). • Arrange and conduct meeting with the consumer and with family members or other parties they would like to have present (such as close friend, pastor, neighbor) as needed to facilitate assessment of consumer needs • Identify existing consumer resources (e.g., including financial, family and other natural support, housing environmental safety). • Identify the consumer's preferred approach to making decisions to ensure that assessments and action plans will reflect this preference. • Determine consumer's level knowledge about options. • Document the consumers' and OCs' perspectives of needs, values, and preferences. • Identify key decision makers (e.g., consumer, family, or other support person). • Learn about specific consumer disabilities (e.g., Lewy Body Dementia) to better understand consumer needs.
20%	N	E	**III. Understand public and private sector resources** • Identify local resources available to address unmet needs of adults and people with disabilities at all income levels using the ADRC database, consulting with colleagues and community partners. • Increase OCs' own knowledge of local and regional private and public sector resources to assure the full range of options are offered to consumers • Provide and review written information (e.g., brochures, applications, contact information, websites) to consumers, family members and/or other support persons about relevant aging and disability services. • Increase knowledge of agency and community healthy living, fall prevention, and wellness programs. • Facilitate access to services (e.g., help consumers complete applications, make initial calls to services as needed) • Participate in updating the ADRC resource data base by identifying gaps in services, contributing updated information about resources, and providing feedback to

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% of Time	N/R/NC	E/NE	DUTIES
			IT. • Attend training on public and private resources to increase and maintain knowledge and skills using in-service, workshop, and webinar training opportunities. • Build relationships with community partners to better understand services available and to share information about ADRC services using opportunities for networking and continuing education.
25%	N	E	**VII. Demonstrate respect for self determination** • Listen to consumers and families and recognize their unique needs and circumstances. • Explain pros and cons of various options to consumers and support persons to facilitate decision making. • Support and advocate for consumer decisions about services and supports even if decisions do not seem appropriate according to one's professional training. • Develop action plans with consumers that support their decisions. • Record action plans, documenting needs, values, and preferences and the roles and responsibilities agreed to by consumers, support persons, OC, and others. • Explain the role of options counselor to consumers and support persons to set clear expectations and to emphasize to all participants the role of the consumer as decision maker. • Set ground rules for family meetings and emphasizing consumer direction.
10%	N	E	**VIII. Encourage a future orientation** • Ask consumers for permission to call back and see how action plans are working. • Assess consumer readiness for discussing future plans. • Work with consumers and support persons to identify possible events or conditions that will trigger additional planning and/or other actions to help consumers and support persons think beyond the current situation. • Provide healthy living and disease prevention information and encourage future contact with the ADRC. • Leave contact information (business cards and other print material) with consumers and support persons to encourage further contact with the OC if additional questions or needs emerge.

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% of Time	N/R/NC	E/NE	DUTIES
10%	N	E	**IX. Follow up** • Call consumers or support persons according to the agreed upon, individualized timeframe to determine how well the action plan is working. • Revise action plans as needed to meet consumer needs, preferences, and values using assessment and communication skills; arrange additional services (e.g., family meeting, new referrals) identified through follow up to assist consumers to receive needed and preferred services using knowledge of public and private resources. • Document information from the follow up calls.

SECTION 4. WORKING CONDITIONS

Describe any on-going working conditions. Include any physical, sensory, and environmental demands. State the frequency of exposure to these conditions.

Must make home visits. Must have valid driver's license and an acceptable driving record.

SECTION 5. GUIDELINES

a. List any established guidelines used in this position, such as state or federal laws or regulations, policies, manuals, or desk procedures.

The list of duties reflect the Oregon Standards developed for options counselors. Federal guidelines for options counselors are being developed.

b. How are these guidelines used?

They will be used to provide a common practices across states. With the Oregon standards, they will be used to develop and revise training for options counselors and for service delivery design.

SECTION 6. WORK CONTACTS

With whom, outside of co-workers in this work unit, must the employee in this position regularly come in contact?

Who Contacted	How	Purpose	How Often?
Note: If additional rows of the below table are needed, place curser at end of a row (outside table) and hit "Enter".			

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Consumers	Telephone or in-person meetings; email	Determine need, provide information and decision support, develop plans, follow up to see how services and plans are working.	Daily
Family members and others important to consumers	Telephone or in-person meetings; email	Determine consumer and family need, provide information, engage in family meetings, follow up.	Several times a week
Other service providers, voluntary organizations, benefit services	Telephone or networking meetings; email	To learn more about public and private resources that benefit clients, To support consumers in securing services To receive client referrals	Several times a week

SECTION 7. POSITION-RELATED DECISION MAKING

Describe the typical decisions of this position. Explain the direct effect of these decisions.

1. Decisions whether someone is or is not appropriate for options counseling. This matches consumer need to the appropriate service.
2. Decisions about making a home visit. Home visits can provide important information about how the consumer is functioning and provide insights needed for complete assessments.
3. Decisions about whether to hold a family meeting. Family meetings may be necessary to help support consumers in directing their own lives and helping to resolve conflicting views about what is best for consumers.
4. Decisions about services to recommend to consumers as well as decisions about how best to explain services, including pros and cons, to consumers. This includes making decisions about how much information a consumer can absorb.
5. Decisions about when to make referrals to other services and how much assistance the consumer needs in connecting to another service provider.
6. Decisions about when to check back with consumers to determine how services are working or whether needs have changed.
7. Decisions when to seek guidance from other options counselors or supervisors so that consumers receive the support they need.

SECTION 8. REVIEW OF WORK

Who reviews the work of the position?

Classification Title	Position Number	How	How Often	Purpose of Review
Note: If additional rows of the below table are needed, place curser at end of a row (outside table) and hit "Enter"				
?? Supervisor		Supervisory sessions that include feedback, helping		Provide support and guidance;

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/Manager		the OC to brainstorm solutions.		supplement OC training

SECTION 9. OVERSIGHT FUNCTIONS

a. How many employees are directly supervised by this position? 0

How many employees are supervised through a subordinate supervisor? 0

b. Which of the following activities does this position do?

- ☒ Plan work
- ☐ Assigns work
- ☐ Approves work
- ☐ Responds to grievances
- ☐ Disciplines and rewards
- ☒ Coordinates schedules
- ☐ Hires and discharges
- ☐ Recommends hiring
- ☒ Gives input for performance evaluations
- ☐ Prepares & signs performance evaluations

SECTION 10. ADDITIONAL POSITION-RELATED INFORMATION

ADDITIONAL REQUIREMENTS: List any knowledge and skills needed at time of hire that are not already required in the classification specification.

All positions in DHS require a Criminal Background Check and an Abuse/Neglect Check. Fingerprints may be required.

Basic knowledge about disabilities and aging. How disabilities affect function and daily life, basic understanding of chronic illnesses and disabilities and associated, expected trajectories.

Basic knowledge about practice standards to support consumer direction. Principles of consumer direction, person-centered planning, person-centered thinking; balancing consumer direction and risk.

Writing skills. Writing action plans and other documents.

Oral communication skills. Skilled in active listening, motivational interviewing, presenting information clearly to consumers and other support persons. Understand when and how to match information appropriately to consumer needs, preferences, and capacity.

Cultural competence. Ability to interact in respectful, culturally appropriate ways. Identify consumers' strengths and challenges. Awareness of individual differences within and across cultural groups. Self-awareness of one's own cultural competence.

Interpersonal skills Openness, creativity, work as a team member, flexibility, curiosity, ability to build rapport, ability to work with people in crisis.

Assessment skills—gathering information in support of OC Assess (i.e., "discover") needs, values, preferences, strengths, challenges; determine how clients manage day-to-day activities; individualize approach to gathering information, using more formal assessment tools selectively and as appropriate.

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Critical thinking & judgment. Determine whether OC is needed, whether to hold a family meeting, which resources are appropriate, whether consumers and support persons are able to follow through on action plans, when to follow up, when services beyond OC are needed (e.g., case management).

Observational skills. Ability to determine through observation consumer capabilities, living environment, strengths and vulnerabilities.

Time Management skills. Ability to multitask and prioritize time effectively.

Computer Skills. Ability to use computer to locate information, document consumer data.

Minimum Job Qualifications:

- 2-4 years of college or equivalent experience (e.g., 2 years related experience for each year of college)
- 3-5 years of experience working with senior and/or people with disabilities
- Specialized training in options counseling within six months of hire

BUDGET AUTHORITY: If this position has authority to commit agency operating money, indicate the following:

Note: If additional rows of the below table are needed, place curser at end of a row (outside table) and hit "Enter".

Operating Area	Biennial Amount ($00000.00)	Fund Type

SECTION 11. ORGANIZATIONAL CHART

Attach a current organizational chart. Be sure the following information is shown on the chart for each position: classification title, classification number, salary range, employee name and position number.

SECTION 12. SIGNATURES

Employee Signature	Date	Supervisor Signature	Date
Appointing Authority Signature	Date		

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SELECTING OPTIONS COUNSELORS IN OREGON:

INTERVIEW QUESTIONS AND GUIDELINES

A critical component of the development of ADRCs involves selecting the right staff to fill options counseling (OC) roles.[4] Using professional standards (Part I, A.) and the resulting job description (Part II, B), we developed interview questions and guidelines to help agencies match applicants to the job. These structured interview questions were grounded in actual consumer and staff experiences with options counseling. Twenty consumers were interviewed about their experiences, including their reasons for being in contact with the ADRC. Focus groups were held with OC staff and notes were taken during discussion about OC experiences during training activities, including challenges they faced.

Below is a pool of questions that can be used in interviewing applicants for options counseling jobs. Two types of interview questions are included. These are situational and behavioral questions.[5] Situational interview questions are future oriented and allow applicants to describe what they *would do* under specific circumstances. In addition, the questions themselves convey information about what options counseling entails. These questions help interviewers to gain insight about what knowledge, skills, and abilities the applicant brings to the job. Second, behavioral questions focus on past work experiences. Responses from applicants to these types of provide interviewers insight into ways the applicant has *approached problems in the past*, the consequences of those behaviors, and what the person has learned in the process. Both types of questions have demonstrated validity.

Interview questions focused on the traits the subject matter experts felt should be present at time of hire (e.g., critical thinking skills, basic knowledge of aging and disability services). Therefore, with each question there is a list of the options counseling task areas represented by the question as well as the knowledge, skills, abilities, and other traits to be demonstrated through applicant responses. A series of things to listen for during the interview are provided to guide the interviewer in evaluating responses. These are grouped as "weak answers," "mid-level answers," and "strong answers." The subject matter expert group comprised of OC supervisors provided consultation and feedback in the development of questions and the categories of answers.

The following guidelines should be followed to ensure best practices in interviewing and selecting the best candidates for the job of options counselor:

1. Use the same set of questions for all applicants for the same position.

[4] Brannick et al., (2007)
[5] Gatewood et al., (2008)

2. When choosing from this pool of interview questions, more questions are better, but work within time constraints. Be sure to choose questions that cover the range of situations encountered by the options counselor in your organization.
3. Have multiple interviewers and use the same interviewers for all candidates if possible.
4. If appropriate - for certain types of questions - allow the interviewee to see the questions for about 30 minutes to prepare their answer. This allows interviewers to see how well they answer questions with a few minutes of thought.
5. Do not help the interviewee to answer the question other than to explain to them what the question means – in a real world situation they won't have you there to help them.
6. Interviewers need to listen much more than they talk; keep your own comments brief.
7. Interviewers should take detailed notes during the interview and independently rate each interviewee *immediately* after the interview. Do not rate them all at once, because research shows that interviewers mix up who said what.
8. Provide interview training to interviewers. This usually involves having the interviewers go over the interview questions and answers. It might also involve rating a mock interviewee on audio.

INTERVIEW QUESTIONS FOR OPTIONS COUNSELING APPLICANTS

Situational *(Future-oriented questions that ask applicants what they would do in certain circumstances.)*

1. You receive a call from a caregiver whose wife has dementia, Parkinson's, and multiple other chronic illnesses and disabilities. He desires to keep his wife at home and comfortable as long as possible, and wants to know that his caregiving practices are the best they can be. What kind of information would you want to have to determine whether options counseling is needed for this family?

2. An adult child who lives in Colorado contacts the ADRC because she has concerns about her widowed mother and her ability to stay in her home. Her mother has had multiple falls and is increasingly forgetful. No other family lives in the area. How would you learn more about the situations to assess the needs of this older woman? How about her values and preferences regarding her living situation?

3. A hospital social worker contacts the ADRC about an older man who is living below the poverty line and has no health insurance nor is he receiving any formal services. He is being discharged back to his small studio apartment, where he has lived in for several years. You find the man to be cheerful and engaging. He acknowledges a drinking problem and that he hates to fill out paperwork. How do you go about helping him?

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4. You learn of a middle-aged woman with a history of mental illness. She has lived successfully on her own for many years. Her father manages her finances and is supportive of her independence. He and others are concerned, however, that her living situation is increasingly stressful due to unreasonable demands by the landlord and the general neglect of the property, which poses several safety risks.

5. You receive a call from a daughter-in-law who is concerned about her in-laws and the strain that caregiving is placing on her husband, his sister, and their whole family. You meet with the older couple who are adamant that they are functioning very well and intend to stay in their home. You see that their home is very cluttered and that the woman has difficulty moving around the house and the man seems somewhat disoriented. What do you do next?

6. An older man living on his own had a stroke which completely paralyzed him on one side. He was in need of assistance with ADL's, since he is unable to get down to the floor, or get up. Although he wanted to remain in his apartment, living independently, he was afraid he would have to move into a nursing facility. Through the help of the OC, he received multiple services and is thrilled to be living successfully at home—he even is able to get out and about in the community. What are some possible solutions that the OC might have identified and implemented to help him be successful?

7. Suppose you have a client who is not eligible for Medicaid or any of the services you feel would be beneficial to him because he has too much income. At the same time, he cannot afford the private services you think he needs. What would you do next?

<u>Behavioral</u> *(Past-oriented questions that allow applicants to describe how they have handled situations related to OC skills in the past.)*

8. Describe a time that you felt a client was making a poor decision that would likely result in a bad outcome, such as a serious injury from fall, compromised nutritional status, or isolation. How did you deal with this concern? What was the outcome? How satisfied were you with the outcome? What would you do differently if you were to encounter a similar situation today?

9. Describe a situation when you worked with family members and clients who had very different views about what the older person or a person with a disability should do. How did you handle this disagreement? What was the outcome? What worked well? What did not work well? What would you do in a similar situation?

10. You have been working in [name of agency or name of service responsibilities]. Suppose you have an options counseling consumer and you feel that this person could benefit from this service. How would you describe this service to the consumer? How would you explain the process for getting the service? How would you present the pros and cons for using the service?

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11. Think about a time you had to be creative or "think outside the box" to find a service needed by one of your clients. How did you go about trying to figure out what the person needed? How did you track down or locate the service? What did you learn from this experience?

12. Describe a situation when you had to work with professionals outside of your agency to help a client. What type of provider did you work with? What did you bring to the situation and what do this (or these) other professional(s) bring? What went well? What did not go well? What did you learn? How does this experience influence your work with other agency professionals now?

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INTERVIEW QUESTIONS WITH SOME POSSIBLE RATING SCALES

Situational

1. *You receive a call from a caregiver whose wife has dementia, Parkinson's, and multiple other chronic illnesses and disabilities. He desires to keep his wife at home and comfortable as long as possible, and wants to know that his caregiving practices are the best they can be. What kind of information would you want to have to determine whether options counseling is needed for this family?*

   Tasks areas: Determining the need for options counseling; assessing needs, values, preferences, understanding resources

   KSAOs of interest (prior to hire): knowledge about vulnerable populations, knowledge about practice standards related to consumer direction, assessment skills, oral communication, interpersonal, critical thinking & judgment, observation skills

   Considerations:

   Weak answer:

   a. Answer is general and does not indicate any knowledge about Parkinson's Disease, Dementia, or caregiving strain.
   b. Does not have good understanding of assessment process particularly from point of view of the consumer

   Mid-level answers (some strengths, some weaknesses):

   c. Answer indicates knowledge of about the chronic illnesses and caregiver issues, but focuses on use of standard assessment tools or identifying solutions for family without indicating need to gather additional information, including from the consumer.
   d. Focuses primarily on caregiver or care receiver, but not both

   Strong answer:

   e. Emphasizes need to gather additional information, specifically focusing on perceived needs of both caregiver and care receiver;
   f. May refer to assessment tools as part of this process, but emphasizes "discovery" of consumer values and preferences as well as objective needs, and learning what has been working well for the consumer.
   g. Applicant does not discount consumer input because of dementia.
   h. Discusses home visit and the kinds of things they would look for (including adaptive equipment and home modifications, where concerns are, what services are being used).
   i. Identifying financial and personal resources.
   j. Answers are focused on consumer-perceived needs and values; consistent with active listening skills.

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2. *An adult child who lives in another state and time zone contacts the ADRC because she has concerns about her widowed mother and her ability to stay in her home. Her mother has had multiple falls and is increasingly forgetful. No other family lives in the area. How would you learn more about the situations to assess the needs of this older woman? How about her values and preferences regarding her living situation?*

   Task areas: Determining the need for Options Counseling, Assessing needs, values, and preferences, understanding public and private resources

   KSAOs of interest (needed prior to hire): Knowledge about vulnerable populations (falls, dementia), knowledge of consumer direction practice and resources, oral communication, interpersonal skills, assessment, critical thinking and judgment, observation

   Considerations

   Weak answer:

   a. Answer is general and does not indicate any knowledge about Dementia, issues related to falls, or long distance caregiving.
   b. Does not have good understanding of assessment process particularly from point of view of the consumer.
   c. States specific solution for the situation without discussion of gathering additional information.

   Mid-level answers:

   d. Answer indicates knowledge of about the chronic illnesses and caregiver issues, but focuses on use of standard assessment tools or identifying solutions for family without indicating need to gather additional information, including from the consumer.
   e. Describes interventions (e.g., home modifications) to prevent falls
   f. Focuses primarily on caregiver or care receiver, but not both.

   Strong answer:

   g. Emphasizes need to gather additional information, specifically focusing on perceived needs of both caregiver and care receiver;
   h. May refer to assessment tools as part of this process, but emphasizes "discovery" of consumer values and preferences as well as objective needs, and learning what has been working well for the consumer.
   i. Discusses need to obtain thorough physical and cognitive exam to understand reasons for falls
   j. Applicant does not discount consumer input because of dementia.
   k. Discusses home visit and the kinds of things they would look for (including ways to reduce falls risk, adaptive equipment and home modifications, where concerns are, what services are being used).
   l. Well versed in falls prevention practices
   m. Talks about Identifying financial and personal resources.
   n. Answers are focused on consumer-perceived needs and values; consistent with active listening skills.

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3. *A hospital social worker contacts the ADRC about an older man who is living below the poverty line and has no health insurance nor is he receiving any formal services. He is being discharged back to his small studio apartment, where he has lived in for several years. You find the man to be cheerful and engaging. He acknowledges a drinking problem and that he hates to fill out paperwork. How do you go about helping him?*

   Task areas: Assessing needs, values, and preferences; understanding public and private sector resources; demonstrate respect for self determination, encourage a future orientation

   KSAOs of interest (needed before hire): Knowledge about vulnerable populations (e.g., substance abuse), knowledge of consumer direction practice and resources (e.g., treating consumer with respect), oral communication, interpersonal skills, assessment, critical thinking and judgment, observation

   Considerations:

   Weak answer:

   a. Answer is general and does not indicate any knowledge about substance abuse or how to help someone access health services (e.g., enroll in the Oregon Health Plan, Medicaid).
   b. Does not have good understanding of assessment process particularly from point of view of the consumer
   c. Provides solution to problem without discussing how to engage the consumer in developing the solution

   Mid-level answers:

   d. Answer indicates knowledge of about substance abuse and the social system, but does not emphasize the need for the consumer to direct the process.

   Strong answer:

   e. Emphasizes need to gather additional information, specifically focusing on perceived needs of the consumer;
   f. Talks about helping the consumer complete the necessary paper work to obtain services.
   g. Applicant is non judgmental about alcoholism; refers to motivational interviewing to explore consumer interest in life style change.
   h. Discusses home visit and the kinds of things they would look for
   i. Identifies financial and personal resources.
   j. Answers are focused on consumer-perceived needs and values; consistent with active listening skills.

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4. *You learn of a middle-aged woman with a history of mental illness. She has lived successfully on her own for many years. Her father manages her finances and is supportive of her independence. He and others are concerned, however, that her living situation is increasingly stressful due to unreasonable demands by the landlord and the general neglect of the property, which poses several safety risks.*

   Task areas: Assessing needs, values, and preferences; understanding public and private sector resources; demonstrate respect for self determination, encourage a future orientation

   KSAOs of interest (needed before hire): Knowledge about vulnerable populations (e.g., mental illness), knowledge of consumer direction practice and resources (e.g., treating consumer with respect), oral communication, interpersonal skills, assessment, critical thinking and judgment, observation

   Considerations:

   Weak answer:

   a. Answer is general and does not indicate any knowledge about mental illness or how to help someone access social or legal services (e.g., regarding landlord responsibilities).
   b. Does not have good understanding of assessment process particularly from point of view of the consumer
   c. Provides solution to problem without discussing how to engage the consumer in developing the solution

   Mid-level answers:

   d. Answer indicates knowledge of mental illness and the social system, but does not emphasize the need for the consumer to direct the process.
   e. Talks about engaging the father, but does not attend to consumer direction

   Strong answer:

   f. Emphasizes need to gather additional information, specifically focusing on perceived needs of the consumer;
   g. Talks about helping the consumer think through housing options.
   h. Applicant is non judgmental about mental illness
   i. Discusses home visit and the kinds of things they would look for
   j. Identifies financial and personal resources.
   k. Answers are focused on consumer-perceived needs and values; consistent with active listening skills.

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5. *You receive a call from a daughter-in-law who is concerned about her in-laws and the strain that caregiving is placing on her husband, his sister, and their whole family. You meet with the older couple who are adamant that they are functioning very well and intend to stay in their home. You see that their home is very cluttered and that the woman has difficulty moving around the house and the man seems somewhat disoriented. What do you do next?*

   Task areas: Assessing needs, values, and preferences; understanding public and private sector resources; demonstrate respect for self determination, encourage a future orientation,

   KSAOs of interest (needed before hire): Knowledge about vulnerable populations, knowledge of consumer direction practice and resources (e.g., treating consumer with respect), oral communication, interpersonal skills, assessment, critical thinking and judgment, observation, motivational interviewing, ability to facilitate family meetings.

   Considerations:

   Weak answer:

   a. Answer is general and does not indicate any knowledge about working with families.
   b. Does not have good understanding of assessment process particularly from point of view of the consumer
   c. Provides solution to problem without discussing how to engage the consumer in developing the solution

   Mid-level answers:

   d. Answer indicates knowledge of about substance abuse and the social system, but does not emphasize the need for the consumer to direct the process.

   Strong answer:

   e. Emphasizes need to gather additional information, specifically focusing on perceived needs and values of the consumer;
   f. Talks about helping the consumer through motivational interviewing, modeling self-determination and decision support for the family.
   g. Applicant is non judgmental about consumer or family concerns/values.
   h. Discusses home visit and the kinds of things they would look for
   i. Identifies financial and personal resources.
   j. Answers are focused on consumer-perceived needs and values; consistent with active listening skills.

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6. *A man in his early 60s living on his own had a stroke which completely paralyzed him on one side. He was in need of assistance with ADL's and housekeeping, since he is unable to get down to the floor, or get up. Although he wanted to remain in his apartment, living independently, he was afraid he would have to move into a nursing facility. Through the help of the OC, he received multiple services and is thrilled to be living successfully at home—he even is able to get out and about in the community. What are some possible solutions that the OC might have identified and implemented to help him be successful?*

   Task areas: Assessing needs, values, and preferences; understanding public and private sector resources; demonstrate respect for self determination, encourage a future orientation,

   KSAOs of interest (needed before hire): Knowledge about vulnerable populations, knowledge of consumer direction practice and resources (e.g., home modifications, transportation services, assistive devices, home care & housekeeping services), oral communication, interpersonal skills, assessment, critical thinking and judgment, observation.

   Considerations:

   Weak answer:

   a. Answer is general and does not indicate any knowledge about living after a stroke or adapting the physical environment to support persons with disabilities
   b. Does not have good understanding of assessment process particularly from point of view of the consumer
   c. Provides solution to the problem without discussing how to engage the consumer in developing the solution

   Mid-level answers:

   d. Answer indicates some knowledge about stoke,
   e. Indicates knowledge about adapting environments and supportive services, but does not emphasize the need for the consumer to direct the process.
   f. Does not discuss in an informed way how to identify needed resources and strengths of the consumer (e.g., motivated consumer, social networks, family involvement).

   Strong answer:

   g. Emphasizes need to gather additional information, especially about what is important to the consumer.
   h. Describes in an informed way how they would find housekeeping, home modification services, adaptive devices, transportation services
   i. Discusses home visit and the kinds of things to look for to learn how best to support the consumer
   j. Identifies financial and personal resources as areas needing to be explored.

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k. Answers are focused on consumer-perceived needs and values; consistent with active listening skills.

7. *Suppose you have a client who is not eligible for Medicaid or any of the services you feel would be beneficial to him because he has too much income. At the same time, he cannot afford the private services you think he needs. What would you do next?*

   Task areas: understanding public and private sector resources; demonstrate respect for self-determination, encourage a future orientation,

   KSAOs of interest (needed before hire): Knowledge about vulnerable populations, Understanding of public/private resources,

   Considerations:

   Weak answer:

   a. Answer is general and does not indicate any knowledge about private services
   b. Provides solution to the problem without discussing how to engage the consumer in developing the solution

   Mid-level answers:

   c. Answer indicates some knowledge about private resources, but may rely on single, typically source (e.g., ADRC database) for identifying them.
   d. Does not discuss in an informed way how to identify needed resources and strengths of the consumer.

   Strong answer:

   e. Emphasizes need to gather additional information, especially about what is important to the consumer, and gather ideas from the consumer.
   f. Describes in an informed way how they would find be a "detective" to identify private, nontraditional types of services.
   g. Identifies financial and personal resources as areas needing to be explored.

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Behavioral

8. *Describe a time that you felt a client was making a poor decision that would likely result in a bad outcome, such as a serious injury from fall, compromised nutritional status, or isolation. How did you deal with this concern? What was the outcome? How satisfied were you with the outcome? What would you do differently if you were to encounter a similar situation today?*

   Task areas: Demonstrating respect for self-determination; encouraging future orientation

   KSAOs of interest (needed before hire): Motivational interviewing, supporting self-determination

   Considerations:

   Weak Answer:

   a. Respondent claims to have never had this happen or cannot think of an example or can talk a client into doing things "the right way".
   b. Answer focuses on the attitudes or limitations of client.

   Mid-level Answer:

   a. The respondent has a good example, but fails to articulate their role in the situation
   b. The answer is unclear as to how they would respond differently

   Strong Answer:

   a. Time is taken to formulate response
   b. Able to articulate the bad outcome and how they responded
   c. Able to critically approach their own reaction, and provide a range of alternative actions

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9. *Describe a situation when you worked with family members and clients who had very different views about what the older person or a person with a disability should do. How did you handle this disagreement? What was the outcome? What worked well? What did not work well? What would you do in a similar situation?*

Task areas:

KSAOs of interest (needed before hire): facilitating family meeting, interpersonal skills, motivational interviewing, modeling 'self-determination'

Considerations:

Weak Answer:

a. Immediately delegated the issue to a co-worker
b. Cannot formulate a situation or claims to never had this happen
c. Response is negative and refers to the family as "difficult"

Mid-level Answer:

a. No experience with elderly or disabled, but has a personal or other experience that is similar and tries to analyze it in the same manner
b. Answer is one-sided, discusses what worked well or what did not, not both
c. Answer is one-sided, displays sympathy for consumer or family member but not both

Strong Answer:

a. Answer reflects a neutral position and gathering information from all sides of the disagreement
b. Suggests an awareness of their own limitations and knew when to ask for help
c. Answer exhibits an analytical/systematic process
d. Exhibits extensive experience with families

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10. *You have been working in [name of agency or name of service responsibilities]. Suppose you are an options counselor and are working with a consumer and you feel that this person could benefit from this service [provided by the agency or program where you worked]. How would you describe this service to the consumer? How would you explain the process for getting the service? How would you present the pros and cons for using the service?*

Task areas: Respect for self-determination, understanding resources

KSAOs of interest (needed before hire): Oral communication skills (e.g., describes service clearly without use of jargon), knowledge about practice standards to support consumer direction (e.g., clearly lays out pros and cons in non-directing way)

Considerations:

Weak Answer:

a. Unable to describe service, the process to acquire service, or the pros/cons of service
b. Advised strongly for the client to take a specific action
c. Refers to client in a patronizing way

Mid-level Answer:

a. Able to articulate service well but jargon may conceal meaning from general public
b. Answer is one-sided, all pros or cons but not both

Strong Answer:

a. Able to describe service without jargon (describe agencies or services without acronyms,
b. Provides a balanced description of pros and cons of service
c. Allows for client to make a choice

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11. *Think about a time you had to be creative or "think outside the box" to find a service needed by one of your clients. How did you go about trying to figure out what the person needed? How did you track down or locate the service? What did you learn from this experience?*

Task areas: Assessment, Understanding resources

KSAOs of interest (needed before hire): Interpersonal skills (openness, creativity, curiosity, ability to work with people in crisis), knowledge about resources (how to seek out resources)

Considerations:

Weak Answer:

a. Did not try to figure out needs and alternative services
b. Immediately delegates to a co-worker without attempting to address the issue

Mid-level Answer:

a. Appropriately delegates a case that is out of their "scope", (e.g. need veteran benefits or other benefits counselor)
b. Reflective about process, but hard to provide an example of something specific
c. Talks about well-known resources

Strong Answer:

a. Demonstrates a systematic process of identification
b. Able to articulate alternative actions for the future, demonstrates a learning process
c. Talks about resources that might not be on a typical resource list

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12. *Describe a situation when you had to work with professionals outside of your agency to help a client. What type of provider did you work with? What did you bring to the situation and what do this (or these) other professional(s) bring? What went well? What did not go well? What did you learn? How does this experience influence your work with other agency professionals now?*

    Task areas: Understanding resources

    KSAOs of interest (needed before hire): Interpersonal skills, critical thinking and judgment, assessment skills

Considerations:

Weak Answer:

a. Cannot think or refuses to provide an example
b. Entirely blames outside professional, if experience is poor, or demonstrates a negative bias towards a particular profession
c. Has little or nothing to say about working with outside professionals

Mid-level Answer:

a. Example is hypothetical, for lack of an actual experience, but earnestly tries to answer question
b. Talks about working with someone, but seems appears to be pretty limited in their interactions or understanding of potential

Strong Answer:

a. A balanced response illustrating the situation from both sides without judgment
b. Ably articulates the roles of each party in assisting the client
c. Able to articulate what they learned in the process
d. Can address how the collaboration helped the consumer

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MANUAL FOR COMPLETING OPTIONS COUNSELOR AND OPTION COUNSELING SUPERVISOR PERFORMANCE APPRAISALS

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INTRODUCTION

The performance appraisal for the Options Counseling program is designed to support and promote organizational effectiveness through improving performance of the Options Counselor and the Options Counseling Supervisor. Guion (2011) and Henderson (1984) were used in the development of the tools.[6] [7] This appraisal process described here uses the simple adjective rating scale, a method that lists a number of traits. In this case, these are the tasks required for the job and are listed in the professional standards presented in Part I (A & B) of this manual. A four-point "PINGS" rating scale is used: **P**oor-**I**mprovement **N**eeded-**G**ood-**S**uperior. This process is intended to create a clear dialogue, be easy to understand and analyze, and require minimal training to administer. Above all, this performance appraisal process is designed to be constructive in its results and minimal in the time burden. As with all other components of this manual, these tools were reviewed by options counselor supervisors, a key subject matter expert group.

This approach to performance appraisal is intended to be a supportive process, not just another survey. The appraisal system focuses on the future, not just judging the past. It provides a way for assessing strengths in service provision and identifying areas that could use improvement, from the point of view of the subject of the appraisal and their supervisor. The overall focus is not on micro-managing, but on improving the skills and knowledge of Options Counselors and their supervisors as these new positions develop their unique roles within the ADRC of Oregon.

Note: If any of these procedures are found to conflict with the Collective Bargaining Agreements, the Collective Bargaining Agreement will take precedence. The following pages are a detailed set of instructions including the performance appraisal forms, suggestions for managing the overall process, and examples of summary forms.

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[6] Guion, R. M. (2011). *Assessment, measurement, and prediction for personnel decisions*. New York: Taylor & Francis Group.

[7] Henderson, R. I. (1984). *Performance appraisal*. Reston, VA: Reston Pub. Co.

PERFORMANCE APPRAISAL FOR OPTIONS COUNSELORS

It is important that the performance appraisal be done fairly and objectively. It is also crucial that the options counselor (OC) is fully involved and feels listened to; time should be dedicated to focus on the OC's specific motivational needs.

The following is a step by guide to the performance appraisal process.

An example of a process for evaluating Options Counselors is as follows:

Step 1: Upon hiring, the new options counsel is provided a copy of the OC standards, performance appraisal form, and orientation to resources and problem-solving processes.

Step 2: Annually from the hire date, the OC and their supervisor fill out the appraisal forms.

Step 3: The OC returns the completed form to the supervisor. A meeting is arranged to discuss performance.

Step 4: Prior to meeting, the supervisor reviews their own responses about the OC and compares them to the OC responses. Areas where there are discrepancies should be highlighted for discussion at the meeting. Areas where the OC scores 'poor' or 'improvement needed', the supervisor should consult the improvement resources database and to identify educational materials for performance improvement.

A motivational performance appraisal meeting is:

- A fair and objective review,
- A two-way discussion,
- helps the OC feel her/his viewpoint is listened to and valued,
- about the OCs professional development and job satisfaction as well as performance,
- A chance to review the OC's work objectives, and
- Results in a clear plan of action.

<u>To the OC Supervisor</u>:

- Look at what would motivate you in a performance appraisal meeting; if it motivates you it will probably motivate your OCs.
- Think about your OC's motivation needs. For example, do you know if this particular employee wants and needs to hear a significant amount of

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praise? Or do they like to spend time exploring their career development options? Or do they prefer to focus on reviewing objectives?

- Craft the performance appraisal meeting agenda to ensure the motivational needs are met.
- Send a reminder of the meeting along with the proposed agenda roughly one week prior to the meeting.

To the OC: (The OC should be undergoing preparations as well)

- What will need to happen for you to find the performance appraisal meeting we are planning really motivational?
- What would you like to be on the meeting agenda to discuss? Write these down and take them to the meeting.

Step 5: Conducting the Meeting

The meeting should take place on neutral territory, like a conference room, preferably away from the day-to-day work areas.

The following is an example of an agenda for the meeting (try to save two hours):

- Welcome (any additions to agenda, housekeeping issues to get out of the way, provide confidentiality guideline and objectives for the meeting).
- Review strengths and where improvement maybe needed (as highlighted on form).
- To fully engage the OC, supervisors should begin by asking OCs about their perceptions of their performance. They can even choose whether to talk about improvement points first or areas that are the strongest.
- Discuss and agree on a continuing education plan to improve skills (even if the individual scores no "P-IN" ratings, areas where they would like to learn more should be identified and resources provided).
- Discuss job satisfaction.
- Review and summarize the meeting and agree to the next steps.

This should be a two way discussion with the supervisor providing their perspective, but allowing the OC to drive the discussion. The discussion should be as balanced as possible between strengths and improvement areas.

- Strengths discussion: The OC should understand their strengths as an individual and how they contribute to the team.
- Improvement discussion: Any discrepancies between the forms should be highlighted and discussed. Context might be provided by the OC, which gives greater insight into why some areas are weaker than others.
- Active improvement should be engaged, not merely an instruction to do better next time. Materials and resources from the performance appraisal database should be provided and an expectation is to be set that there will be time provided for continued learning to take place.

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- The OC should be aware of the big picture, why these skills are important, what it looks like when it's done right, and how it affects the team and those served when it's not done appropriately.

Step 6: Follow-up

Each OC should be encouraged to keep a continuing education journal where they keep track of websites, manuals, webinars, trainings that they participate in to keep learning and improvement performance. Table 1 provides an example of what an improvement journal may look like.

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Table 1: OC Improvement Journal

Improvement Activity	**Date**	**Time**	**Application to OC Standards**	**Was it valuable?**	**Did it highlight any other resources that others might find useful?**
Watched motivational interviewing webinar	*1/31/11*	*1 hour*	*Assessing needs, values, and preferences*	*Yes, it was a god introduction and refresher*	*There are four webinars in this series*
Read 'And the Journey Continues' manual	*6/12/12*	*30 minutes*	*Demonstrate respect for self-determination*	*Somewhat, I've had an influx on Hispanic clients and it helped me understand where sensitivity can matter most in talking with family. The manual was a little long to take in…*	*No*
Etc…					

The next section includes the form that is to be filled out by the OC and OC supervisor.

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SAMPLE PERFORMANCE APPRAISAL FORM

PERFORMANCE APPRAISAL FOR THE POSITION OF OPTIONS COUNSELOR FOR THE OREGON ADRC[8]

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[8] Note: this is a sample form to be adapted to the agency's needs. Options Counselors should not be rated on any dimensions that are not relevant to their particular position. In other words, this is a comprehensive rating form, but OC jobs may vary based on specific duties.

Option Counselor's Name:

Location:

Date of form completion:

Site Supervisor's Name:

Site Supervisor's Title:

Rating period from: **to:**

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DIRECTIONS:

Rate the option counselor's performance using the four-point scale listed below. Circle the most appropriate value on the scale on the left side of the item to be rated.

If an item does not apply or you do not have enough information to assign a rating, then select NA.

Room for comments is provided at the end of this form. Please document any comments you may have relevant to the option counselor's performance.

You are expected to comment on any area in which the options counselor's performance was either poor or in need of improvement.

Definitions of rating values:

> **Poor (P):** The counselor's practice so deviated from the usual or customary ethical or professional standards of practice that it was judged to be harmful or potentially harmful to the client or the client's well-being.
>
> **Improvement Needed (IN):** The counselor's performance shows a need for remediation or additional training.
>
> **Good (G):** The counselor was able to demonstrate a satisfactory degree of competence in performing a given task or skill.
>
> **Superior (S):** The counselor is proficient and shows a high degree of expertise in performing a given task or skill.

Performance Appraisal for: _____

Determines the need for Options Counseling						
P	IN	G	S	NA	1.	Gathers information using informal, conversational approaches.
P	IN	G	S	NA	2.	Gathers information about wants, preferences, goals, and willingness to engage in options counseling.
P	IN	G	S	NA	3.	Evaluates information gathered to determine whether criteria for options counseling are met and/or in-home visit was needed to gather more complete information about needs, values, and preferences and/or to support consumer decision-making.
Assesses needs, values, and preferences						
P	IN	G	S	NA	4.	Meets with consumers to learn more about their situations and the issues confronting them.
P	IN	G	S	NA	5.	Arranges and conducts meetings with the consumer and family members as needed to facilitate assessment of consumer needs
P	IN	G	S	NA	6.	Identifies existing consumer resources.
P	IN	G	S	NA	7.	Identifies the consumer's preferred approach to making decisions to ensure that assessments and action plans will reflect this preference.
P	IN	G	S	NA	8.	Determines consumer's level knowledge about options.
P	IN	G	S	NA	9.	Documents the consumers' and OCs' perspectives of needs, values, and preferences.
P	IN	G	S	NA	10.	Identifies key decision makers (e.g., consumer, family, or other support person).
P	IN	G	S	NA	11.	Learns about specific consumer disabilities (e.g., Lewy Body Dementia) to better understand consumer needs.
Understands public and private sector resources						
P	IN	G	S	NA	12.	Identifies local resources available to address unmet needs of adults and people with disabilities at all income levels using the ADRC database, consulting with colleagues and community partners.
P	IN	G	S	NA	13.	Increases OCs' own knowledge of local and regional private and public sector resources to assure the full range of options are offered to consumers
P	IN	G	S	NA	14.	Provides and reviews written information to consumers, family members and/or other support persons about relevant aging and disability services.
P	IN	G	S	NA	15.	Increases knowledge of agency and community healthy living, fall prevention, and wellness programs.
P	IN	G	S	NA	16.	Facilitates access to services (e.g., help consumers complete applications, make initial calls to services as needed)
P	IN	G	S	NA	17.	Participates in updating the ADRC resource data base by identifying gaps in services, contributing updated information about resources, and providing feedback to IT.
P	IN	G	S	NA	18.	Attends trainings on public and private resources to increase and maintain knowledge and skills using in-service, workshop, and webinar training opportunities.

P	IN	G	S	NA	19. Builds relationships with community partners in order to better understand services available and to share information about ADRC services using opportunities for networking and continuing education.
Demonstrates respect for self determination					
P	IN	G	S	NA	20. Listens to consumers and families and recognize their unique needs and circumstances.
P	IN	G	S	NA	21. Explains pros and cons of various options to consumers and support persons to facilitate decision making.
P	IN	G	S	NA	22. Supports and advocated for consumer decisions about services and supports even if decisions do not seem appropriate according to one's professional training.
P	IN	G	S	NA	23. Develops action plans with consumers that support their decisions.
P	IN	G	S	NA	24. Records action plans, documented needs, values, and preferences and the roles and responsibilities agreed to by consumers, support persons, OC, and others.
P	IN	G	S	NA	25. Explains the role of options counselor to consumers and support persons to set clear expectations and to emphasize to all participants the role of the consumer as decision maker.
P	IN	G	S	NA	26. Sets ground rules for family meetings and emphasizing consumer direction.
Encourages a future orientation					
P	IN	G	S	NA	27. Asks consumers for permission to call back and see how action plans are working.
P	IN	G	S	NA	28. Assesses consumer readiness for discussing future plans.
P	IN	G	S	NA	29. Works with consumers and support persons to identify possible events or conditions that will trigger additional planning and/or other actions to help consumers and support persons think beyond the current situation.
P	IN	G	S	NA	30. Provides healthy living and disease prevention information and encourage future contact with the ADRC.
P	IN	G	S	NA	31. Offers contact information (business cards and other print material) with consumers and support persons to encourage further contact with the OC if additional questions or needs emerge.
Follow up					
P	IN	G	S	NA	32. Calls consumers or support persons according to the agreed upon, individualized timeframe to determine how well the action plan is working.
P	IN	G	S	NA	33. Revises action plans as needed to meet consumer needs, preferences, and values using assessment and communication skills; arrange additional services (e.g., family meeting, new referrals) identified through follow up to assist consumers to receive needed and preferred services using knowledge of public

	and private resources.
P IN G S NA	34. Documents information from the follow up calls.

Supervisor Comments:

OC Comments:

The counselor's signature indicates that this evaluation has been discussed with the counselor. It does not necessarily mean that the counselor agrees with the evaluation.

_____

Supervisor's Signature Date

_____

Option Counselor's Signature Date

PERFORMANCE APPRAISAL SUMMARY SHEET

The supervisor should review the forms item by item.

In the "P-IN" column:

- Mark the box if the ratings are in the P-IN category and require resources for improvement.

In the "Agree or Disagree" column of this summary sheet enter the following:

- A: Agree: Supervisor and OC rated the OC the same
- +: Disagree: Supervisor rated the OC higher than the OC rated themselves
- -: Disagree: Supervisor rated the OC lower than the OC rated themselves

It is up to the supervisor's discretion to determine priorities for discussion and improvement.

Table 2 provides an example of how to fill out a summary form.

TABLE 2: EXAMPLE FOR COMPLETING SUMMARY FORM

P-IN	Agree or Disagree	Determine the need for Options Counseling
*	A	1. Gathers information using informal, conversational approaches
	+	2. Gathers information about wants, preferences, goals, and willingness to engage in options counseling
*	-	3. Evaluates information gathered to determine whether criteria for options counseling are met and/or in-home visit was needed to gather more complete information about needs, values, and preferences and/or to support consumer decision-making.

Performance Appraisal summary for _____

P-IN	Agree or Disagree	Determine the need for Options Counseling
		1. Gathers information using informal, conversational approaches
		2. Gathers information about wants, preferences, goals, and willingness to engage in options counseling
		3. Evaluates information gathered to determine whether criteria for options counseling are met and/or in-home visit was needed to gather more complete information about needs, values, and preferences and/or to support consumer decision-making.
P-IN	**Agree or Disagree**	**Assess needs, values, and preferences**
		4. Meets with consumers to learn more about their situations and the issues confronting them.
		5. Arranges and conducts meetings with the consumer and family members as needed to facilitate assessment of consumer needs
		6. Identifies existing consumer resources.
		7. Identifies the consumer's preferred approach to making decisions to ensure that assessments and action plans will reflect this preference.
		8. Determines consumer's level knowledge about options.
		9. Documents the consumers' and OCs' perspectives of needs, values, and preferences.
		10. Identifies key decision makers (e.g., consumer, family, or other support person).
		11. Learns about specific consumer disabilities (e.g., Lewy Body Dementia) to better understand consumer needs.
P-IN	**Agree or Disagree**	**Understand public and private sector resources**
		12. Identifies local resources available to address unmet needs of adults and people with disabilities at all income levels using the ADRC database, consulting with colleagues and community partners.
		13. Increases OCs' own knowledge of local and regional private and public sector resources to assure the full range of options are offered to consumers
		14. Provides and reviews written information to consumers, family members and/or other support persons about relevant aging and disability services.
		15. Increases knowledge of agency and community healthy living, fall prevention, and wellness programs.
		16. Facilitates access to services (e.g., help consumers

		complete applications, make initial calls to services as needed)
		17. Participates in updating the ADRC resource data base by identifying gaps in services, contributing updated information about resources, and providing feedback to IT.
		18. Attends trainings on public and private resources to increase and maintain knowledge and skills using in-service, workshop, and webinar training opportunities.
		19. Builds relationships with community partners in order to better understand services available and to share information about ADRC services using opportunities for networking and continuing education.
P-IN	**Agree or Disagree**	**Demonstrate respect for self determination**
		20. Listens to consumers and families and recognize their unique needs and circumstances.
		21. Explains pros and cons of various options to consumers and support persons to facilitate decision making.
		22. Supports and advocated for consumer decisions about services and supports even if decisions do not seem appropriate according to one's professional training.
		23. Develops action plans with consumers that support their decisions.
		24. Records action plans, documented needs, values, and preferences and the roles and responsibilities agreed to by consumers, support persons, OC, and others.
		25. Explains the role of options counselor to consumers and support persons to set clear expectations and to emphasize to all participants the role of the consumer as decision maker.
		26. Sets ground rules for family meetings and emphasizing consumer direction.
P-IN	**Agree or Disagree**	**Encourage a future orientation**
		27. Asks consumers for permission to call back and see how action plans are working.
		28. Assesses consumer readiness for discussing future plans.
		29. Works with consumers and support persons to identify possible events or conditions that will trigger additional planning and/or other actions to help consumers and support persons think beyond the current situation.
		30. Provides healthy living and disease prevention information and encourage future contact with the ADRC.
		31. Offers contact information (business cards and other print material) with consumers and support persons to encourage further contact with the OC if additional questions or needs emerge.
P-IN	**Agree or Disagree**	**Follow up**
		32. Calls consumers or support persons according to the agreed

	upon, individualized timeframe to determine how well the action plan is working.
33.	Revises action plans as needed to meet consumer needs, preferences, and values using assessment and communication skills; arrange additional services (e.g., family meeting, new referrals) identified through follow up to assist consumers to receive needed and preferred services using knowledge of public and private resources.
34.	Documents information from the follow up calls.

PERFORMANCE APPRAISAL FOR OPTIONS COUNSELING SUPERVISORS

Unlike OC appraisals, supervisors may not be directly supervised by the individual responsible for evaluating their performance. Thus, the self-appraisal by the supervisor takes on greater significance and there must be transparency regarding the origins of information for the supervisor's evaluation.

The individual who is responsible for conducting the performance appraisal for the OC Supervisor's should request each OC working under that supervisor to fill out an appraisal of the OC supervisor's performance, or get an aggregate report from the web survey of only the responses from the OCs in that supervisors district. This part of the process must be completely anonymous, and the forms/report should go from the individual conducting the appraisal to the OCs. At no time should the OC supervisor come into contact with these appraisals. The individual conducting the appraisal will summarize and aggregate the information for the meeting with the OC Supervisor.

It is important that for the review of supervisor performance is fair and objective. The OC supervisor must be fully involved and listened to. The key point is to incorporate into the meeting agenda some time and space for focusing on the supervisor's specific needs.

An example of a process for evaluating Options Counseling Supervisors is as follows:

Step 1: Options Counseling Supervisors (OCS) are provided a copy of the standards, performance appraisal form, orientation to resources, decision-making hierarchies and problem-solving processes.

Step 2: Annually from the start date, the OCS, their supervising administrator, and the OCs who work under the OCS fill out the appraisal forms. If preferred, data is acquired from the web survey of OCs.

Step 3: The completed forms or aggregate report from the web survey are returned to the supervising administrator, for summarizing. A meeting is arranged to discuss performance. Every effort is made to allow two hours for meeting to conduct the meeting face-to-face. The administrator should travel to the site of the OCS office to gain greater context to the OCS' and ADRC work environment.

Step 4: Prior to the meeting, the supervising administrator reviews their own responses, the responses of the OCs working under the OCS. The responses are compared and areas where there are discrepancies should be highlighted for discussion at the meeting. Areas where the OCS scores 'poor' or

'improvement needed,' will instigate the OCS to conduct a self-study and review of resources from the skill improvement database.

A motivational performance appraisal meeting is:

- A fair and objective review,
- A two-way discussion,
- helps the OC feel her/his viewpoint is listened to and valued,
- about the OCs professional development and job satisfaction as well as performance,
- A chance to review the OC's work objectives, and
- Results in a clear plan of action.

To the Supervising Administrator:

- Look at what would motivate you in a performance appraisal meeting; if it motivates you it will probably motivate your OCS.
- Think about the OCS' motivational needs. For example, do you know if this particular employee wants and needs to hear a significant amount of praise? Or do they like to spend time exploring their career development options? Or do they prefer to focus on reviewing objectives?
- Craft the performance appraisal meeting agenda to ensure the motivational needs are met.
- Send a reminder of the meeting along with the proposed agenda should be sent roughly one week prior to the meeting.

To the OCS:

- What will need to happen for you to find the performance appraisal meeting we are planning really motivational?
- What would like to be on the meeting agenda to discuss? The OCS should write these down and bring them to the meeting.

Step 5: Conducting the Meeting

Every effort should be made for this meeting to be conducted at the OCS' office. The meeting should take place on neutral territory, like a conference room, preferably away from the day-to-day areas.

The meeting should begin with asking the OCS about her/his perceptions of their performance. They can even choose whether to talk about improvement points first or areas that are the strongest.

The following is an example of an agenda for the meeting (try to save 2-hours):

- Welcome (any additions to agenda, housekeeping issues to get out of the way, provide confidentiality guideline and objectives for the meeting)

- Review of strengths and where improvement maybe needed (as highlighted on the form)
- Discuss and agree on a continuing education plan to improve skills. Even if the individual scores no "P-IN" ratings, ask OCS to identify areas where they would like to learn more and provide resources.
- Discuss job satisfaction
- Review and summarize the meeting and agree to the next steps

The discussion should be as balanced as possible between strengths and improvement areas.

- Strengths discussion: The OCS should understand their strengths as an individual, how they contribute to the team, and how their leadership style is perceived by those that work for them.
- Improvement discussion: Any discrepancies between the forms should be highlighted and discussed. Context might be provided by the OCS, which gives greater insight into why some areas are weaker than others.

Active improvement should be engaged, not merely an instruction to do better next time. Materials and resources from the performance appraisal database should be provided and an expectation is to be set that there will be time provided for continued learning to take place.

Step 6: Follow-up

Each OCS should be encouraged to keep a continuing education journal where they keep track of websites, manuals, webinars, trainings that they participate in to keep learning and improvement performance. Supervisors should be aware of resources that may benefit the OCs as well. Table 2 provides an example of what an improvement journal may look like.

TABLE 2: OC IMPROVEMENT JOURNAL

Improvement Activity	**Date**	**Time**	**Application to OCS Standards**	**Was it valuable?**	**Did it highlight any other resources that others might find useful?**
Read: Facilitation: Catalyst for Group Problem Solving. By John Keltner	*1/31/12*	*30 min*	*Encourage and build mutual trust, respect, and cooperation among team members that promotes an overall positive*	*Provided ideas to work through some team stress that has been developing, will try techniques at the next staff meeting*	• *Anderson, J. D. (1985). Working with groups: Little-known facts that challenge well-known myths. Small Group Behavior 16(3), 267ff.* • *Coch, L., & French, J.R.P. (1948). Overcoming*

			work environment		*resistance to change. Human Relations, 1, 512-532.*
Shadowed an OC	*8/12/12*	*1 day*	*Monitor and evaluate OC activities and provide training and support as needed.*	*Enlightening to some of the issues that have been arising, it gave me some ideas of how we might reorganize the work day in order to create more adequate time for OC activities*	• *The OC and I were able to think of many ideas to bring to the group.*
Etc…					

The next section includes the form that is to be filled out by the OCS and OCS supervising administrator.

SAMPLE PERFORMANCE APPRAISAL FORM:

OPTIONS COUNSELING SUPERVISOR

Supervisor:

Location:

Date:

Conductor of the appraisal:

Rating period from: **to:**

Directions
Rate the supervisor's performance using the four-point scale listed below. Do so by circling the most appropriate value on the scale on the left side of the item to be rated.

If an item does not apply or you do not have enough information to assign a rating, then select N/A.

Room for comments is provided at the end of this form. Please document any comments you may have relevant to the option counselor's performance.

You are expected to comment on any area in which the counselor's performance was either poor or in need of improvement.

Definitions of rating values

> **Poor (P):** The supervisor's practice so deviated from the usual or customary ethical or professional standards of practice that it was judged to be harmful or potentially harmful to the client or the client's well-being.
>
> **Improvement Needed (IN):** The supervisor's performance shows a need for remediation or additional training.
>
> **Good (G):** The supervisor was able to demonstrate a satisfactory degree of competence in performing a given task or skill.
>
> **Superior (S):** The supervisor is proficient and shows a high degree of expertise in performing a given task or skill.

Performance Appraisal for: _____

Provide guidance, support, and oversight to options counselors to ensure that they:	
P IN G S NA	1. Are meeting Oregon Options Counseling standards (i.e., determine the need for options counseling; assess needs, values, and preferences; understand public and private resources; support of self-determination; encourage future orientation; follow-up).
P IN G S NA	2. Are knowledgeable about services and resources.
P IN G S NA	3. Are using their role and time effectively and in alignment with client-specific needs and situations.
P IN G S NA	4. Understand reporting requirements and are using the ADRC database to document decision support activities and follow up with consumers.
Monitor and evaluate OC activities and provide training and support as needed through:	
P IN G S NA	5. Observations of OC work
P IN G S NA	6. Consumer and family feedback
P IN G S NA	7. Feedback from others
Providing guidance and support to options counselors through regular supervisory sessions which may include	
P IN G S NA	8. Helping options counselors think critically and problem solve about specific issues they or consumers are facing and support options counselors as they consider appropriate resources for consumers and provide consumers decision support based on consumer needs, values, and preferences.
P IN G S NA	9. Assisting options counselors to use logic and reasoning to identify strengths and weakness of alternative solutions, conclusions, or approaches to problems.
P IN G S NA	10. Participating in staffing discussions.
P IN G S NA	11. Helping options counselors develop professional development goals and plans.
P IN G S NA	12. Scheduling the work of options counselors.

P IN G S NA	13. Helping options counselors recognize and think reflectively about their own biases and reactions and how these include relationships with and service delivery for consumers.
P IN G S NA	14. Giving effective feedback about options counseling performance
P IN G S NA	15. Helping options counselors think critically and problem solve about specific issues they or consumers are facing and support options counselors as they consider appropriate resources for consumers and provide consumers decision support based on consumer needs, values, and preferences.
P IN G S NA	16. Giving effective feedback about options counseling performance
Identify the educational needs of options counselors based on options counselor professional standards, supporting formal educational or training programs or classes for OCs, and teaching or instructing others about OC services. Support training of options counselors by:	
P IN G S NA	17. Providing time for options counselors to attend training.
P IN G S NA	18. Providing on-the-job training and coaching as needed to supplement and/or reinforce options counseling training.
P IN G S NA	19. Participating in evaluating all levels of options counseling training.
Review, verify, and analyze information from the ADRC database to choose the best solutions and solve problems related to OC services.	
P IN G S NA	20. Regularly demonstrates the ability to review, verify, and analyze information from the ADRC database
P IN G S NA	21. Provides the best problem solutions from the information gathered from the ADRC database
Develop and maintain constructive and collaborative working relationships with options counselors	
P IN G S NA	22. Maintains constructive and collaborative working relationships with options counselors
Encourage and build mutual trust, respect, and cooperation among team members that promotes an overall positive work environment that includes:	
P IN G S NA	23. High morale
P IN G S NA	24. Cultural competency
P IN G S NA	25. Teamwork
Provides supervisory support and assistance to help workers manage personal issues that affect their work.	

P	IN	G	S	NA	26. Demonstrates appropriate support to assist workers to manage personal issues
Provide information related to OC services to supervisors, peers, and subordinates, and other agency personnel by telephone, in written form, e-mail, or in person					
P	IN	G	S	NA	27. Facilitates information sharing regarding option counseling activities using an appropriate means of communication (e.g. telephone, written, email, or in person)
Develop specific goals and plans related to one's own professional development and growth					
P	IN	G	S	NA	28. Develops specific goals related to one's own professional development and growth
Keep up-to-date technically and apply new knowledge to the job, including training options counselors as appropriate					
P	IN	G	S	NA	29. Demonstrates and interest to keep technically up-to-date
P	IN	G	S	NA	30. Applies new knowledge to their job through training opportunities for options counselors
Use relevant information and individual judgment to determine whether events or processes related to OC services comply with laws, regulations, or standards governing options counseling.					
P	IN	G	S	NA	31. Evaluates the processes related to options counseling to comply with laws, regulations, and standards.
Enter, transcribe, record, store, or maintain information related to options counseling in written or electronic form; prepares and maintains records and reports, such as budgets, personnel records, or training manuals.					
P	IN	G	S	NA	32. Develops and maintains records related to options counseling
P	IN	G	S	NA	33. Prepares records and reports related to budgets, personnel records, and training manuals
Participate in building and managing the infrastructure to support options counseling, including tasks such as:					
P	IN	G	S	NA	34. Recruits, interviews, hires, and promotes options counselors
P	IN	G	S	NA	35. Participates in marketing and outreach by speaking to community groups and other service organizations to explain OC program purposes, programs, and policies
P	IN	G	S	NA	36. Establishes and oversees administrative procedures to support OC services
P	IN	G	S	NA	37. Plans and administers budgets for OC services
P	IN	G	S	NA	38. Participates in determining organizational policies regarding OC services (e.g., eligibility, program requirements, program benefits, organizational

and systems design policies)

Appraiser's Comments:

Supervisor Comments:

_____

Supervisor's Signature Date

_____

Appraiser's Signature Date

The supervisor's signature indicates that this evaluation has been discussed with the counselor. It does not necessarily mean that the counselor agrees with the evaluation.

PERFORMANCE APPRAISAL SUMMARY SHEET:

The supervising administrator should review the forms item by item.

The average response from the Options Counselors should be identified by a circle

The response from the supervising administrator should be identified by an underscore

The response from the OCS's self-report should be identified by bolding **P** or using a square

Areas that need discussion and continued learning discussion should be highlighted.

It is up to the supervising administrator's discretion to set the priorities for discussion and improvement. Table 3 is an example of filling out the summary form.

Table 3: Summary form example

Provide guidance, support, and oversight to options counselors to ensure that they:					
P	**IN**	G	S	NA	1. Are meeting Oregon Options Counseling standards (i.e., determine the need for options counseling; assess needs, values, and preferences; understand public and private resources; support of self-determination; encourage future orientation; follow-up).
P	IN	G	**S**	NA	2. Are knowledgeable about services and resources.
P	IN	**G**	S	NA	3. Are using their role and time effectively and in alignment with client-specific needs and situations.
P	IN	**G**	S	NA	4. Understand reporting requirements and are using the ADRC database to document decision support activities and follow up with consumers.

Performance Summary for: _____

Provide guidance, support, and oversight to options counselors to ensure that they:	
P IN G S NA	1. Are meeting Oregon Options Counseling standards (i.e., determine the need for options counseling; assess needs, values, and preferences; understand public and private resources; support of self-determination; encourage future orientation; follow-up).
P IN G S NA	2. Are knowledgeable about services and resources.
P IN G S NA	3. Are using their role and time effectively and in alignment with client-specific needs and situations.
P IN G S NA	4. Understand reporting requirements and are using the ADRC database to document decision support activities and follow up with consumers.
Monitor and evaluate OC activities and provide training and support as needed through:	
P IN G S NA	5. Observations of OC work
P IN G S NA	6. Consumer and family feedback
P IN G S NA	7. Feedback from others
Providing guidance and support to options counselors through regular supervisory sessions which may include	
P IN G S NA	8. Helping options counselors think critically and problem solve about specific issues they or consumers are facing and support options counselors as they consider appropriate resources for consumers and provide consumers decision support based on consumer needs, values, and preferences.
P IN G S NA	9. Assisting options counselors to use logic and reasoning to identify strengths and weakness of alternative solutions, conclusions, or approaches to problems.
P IN G S NA	10. Participating in staffing discussions.
P IN G S NA	11. Helping options counselors develop professional development goals and plans.
P IN G S NA	12. Scheduling the work of options counselors.
P IN G S NA	13. Helping options counselors recognize and think reflectively about their own biases and reactions and how these include relationships with and service delivery for consumers.
P IN G S NA	14. Giving effective feedback about options counseling performance

P IN G S NA	15. Helping options counselors think critically and problem solve about specific issues they or consumers are facing and support options counselors as they consider appropriate resources for consumers and provide consumers decision support based on consumer needs, values, and preferences.
P IN G S NA	16. Giving effective feedback about options counseling performance
Identify the educational needs of options counselors based on options counselor professional standards, supporting formal educational or training programs or classes for OCs, and teaching or instructing others about OC services. Support training of options counselors by:	
P IN G S NA	17. Providing time for options counselors to attend training.
P IN G S NA	18. Providing on-the-job training and coaching as needed to supplement and/or reinforce options counseling training.
P IN G S NA	19. Participating in evaluating all levels of options counseling training.
Review, verify, and analyze information from the ADRC database to choose the best solutions and solve problems related to OC services.	
P IN G S NA	20. Regularly demonstrates the ability to review, verify, and analyze information from the ADRC database
P IN G S NA	21. Provides the best problem solutions from the information gathered from the ADRC database
Develop and maintain constructive and collaborative working relationships with options counselors	
P IN G S NA	22. Maintains constructive and collaborative working relationships with options counselors
Encourage and build mutual trust, respect, and cooperation among team members that promotes an overall positive work environment that includes:	
P IN G S NA	23. High morale
P IN G S NA	24. Cultural competency
P IN G S NA	25. Teamwork
Provides supervisory support and assistance to help workers manage personal issues that affect their work.	
P IN G S NA	26. Demonstrates appropriate support to assist workers to manage personal issues
Provide information related to OC services to supervisors, peers, and subordinates, and other agency personnel by telephone, in written form, e-mail, or in person	
P IN G S NA	27. Facilitates information sharing regarding option counseling activities using an appropriate means of communication (e.g. telephone, written, email, or in

					person)
Develop specific goals and plans related to one's own professional development and growth					
P	IN	G	S	NA	28. Develops specific goals related to one's own professional development and growth
Keep up-to-date technically and apply new knowledge to the job, including training options counselors as appropriate					
P	IN	G	S	NA	29. Demonstrates and interest to keep technically up-to-date
P	IN	G	S	NA	30. Applies new knowledge to their job through training opportunities for options counselors
Use relevant information and individual judgment to determine whether events or processes related to OC services comply with laws, regulations, or standards governing options counseling.					
P	IN	G	S	NA	31. Evaluates the processes related to options counseling to comply with laws, regulations, and standards.
Enter, transcribe, record, store, or maintain information related to options counseling in written or electronic form; prepares and maintains records and reports, such as budgets, personnel records, or training manuals.					
P	IN	G	S	NA	32. Develops and maintains records related to options counseling.
P	IN	G	S	NA	33. Prepares records and reports related to budgets, personnel records, and training manuals
Participate in building and managing the infrastructure to support options counseling, including tasks such as:					
P	IN	G	S	NA	34. Recruits, interviews, hires, and promotes options counselors
P	IN	G	S	NA	35. Participates in marketing and outreach by speaking to community groups and other service organizations to explain OC program purposes, programs, and policies
P	IN	G	S	NA	36. Establishes and oversees administrative procedures to support OC services
P	IN	G	S	NA	37. Plans and administers budgets for OC services
P	IN	G	S	NA	38. Participates in determining organizational policies regarding OC services (e.g., eligibility, program requirements, program benefits, organizational and systems design policies)

RESOURCES FOR SKILL AND SERVICE IMPROVEMENT

The following are a list of resources that can be used for professional development by both options counselors and option counselor supervisors. They are easily accessible and at no cost to the user. Ultimately, these resources will be available in a database searchable by key words. Users are encouraged to add to the database.

Title Active Listening
Author Michigan Office of Services to the Aging
Date 2008
Organization Michigan Office of Services to the Aging
Keywords Active Listening; Person-Centered Care;
Web Address http://www.michigan.gov/miseniors/0,1607,7-234-49992_49993-191431--,00.h
Suggested Use OC; OCS

Title ADRC Options Counseling Training Course
Author Oregon
Date 2012
Organization Oregon ADRC
Keywords ADRC
Web Address NA
Suggested Use OC; OCS

Title Aging and Disability Resource Center: Technical Assistance Exchange
Author ADRC TAE
Date 2011
Organization ADRC TAE
Keywords Resources
Web Address http://www.adrc-tae.org/tiki-index.php?page=HomePage
Suggested Use OC; OCS

Title And the Journey Continues…
Author Goode, T.
Date 2007
Organization National Center for Cultural Competence Georgetown University
Keywords Cultural Competence
Web Address
http://www.cdphe.state.co.us/ps/hcp/form/resources/HCPculturalcomp.pdf
Suggested Use OC; OCS

Title Assistive Technology for People with Dementia and their Caregivers at Home:

Author O'Keeffee, J.; Maier, J.; Freiman, M.
Date 2010
Organization RTI International
Keywords Alzheimer's; Caregiver; Dementia; Technology
Web Address http://www.adrc-tae.org/tiki-download_file.php?fileId=29750
Suggested Use OC

Title Brief Case for Work Shadowing
Author Lawrence, S.
Date 2010
Organization Department of Education, Queensland, Australia
Keywords Shadowing
Web Address vetpd.qld.gov.au/resources/pdf/tla/brief-case-work-shadowing.pdf
Suggested Use OCS
Title Compendium of Evidence Based Alzheimer's Disease Interventions
Author Freiman, M.; Brown, D.; Maier, J.; Walsh, E.; Wiener. J.
Date 2010
Organization RTI International
Keywords Alzheimer's; Intervention; Caregiver; Dementia
Web Address http://www.adrc-tae.org/tiki-download_file.php?fileId=29752
Suggested Use OCS; OC

Title Core Curriculum in Ethnogeriatrics, 2nd Ed.
Author Yeo, G. (Ed.)
Date 2000
Organization Stanford University
Keywords Cultural Competence; Geriatrics
Web Address http://www.stanford.edu/group/ethnoger
Suggested Use OCS; OC

Title Creating an Action Plan
Author Center for Democracy and Citizenship
Date 2004
Organization Center for Democracy and Citizenship
Keywords Action Plan;
Web Address
http://www.augsburg.edu/cdc/publicachievement/pdf/Coaches/Creating%20th
Suggested Use OC; OCS

Title Creating Successful Aging and Disability Partnerships
Author National Council on Independent Living
Date 2011
Organization National Council on Independent Living
Keywords Disability
Web Address http://ncil.org/training/adrc2011materials.html
Suggested Use OC; OCS

Title Cultural and Linguistic Competence Family Organization Assessment Instrument
Author Goode, T,; Jackson, W.; Bronheim, S.; Dunne, C,; & Lorenzo-Hubert, I
Date 2010
Organization National Center for Cultural Competence
Keywords Cultural Competence; Linguistic Competence; Family; Organization
Web Address
http://www11.georgetown.edu/research/gucchd/nccc/documents/FIMR_Asses
Suggested Use OC; OCS

Title Dementia Capability Toolkit
Author Gould, E.; Yuen, P.
Date 2011
Organization RTI International
Keywords Alzheimer's; Dementia
Web Address
http://www.hcbs.org/moreInfo.php/nb/doc/3756/Dementia_Capability_Toolkit
Suggested Use OC; OCS

Title Developing and Implementing Self-Direction Programs and Policies
Author O'Keefe, J.
Date 2009
Organization Robert Wood Johnson Foundation
Keywords Self-direction; Peer Support; Quality
Web Address http://www.bc.edu/content/dam/files/schools/gssw_sites/nrcpds/cc-00.pdf
Suggested Use OCS

Title Disability Etiquette
Author United Spinal Association
Date 2011
Organization United Spinal Association
Keywords Disabilities; all ages
Web Address http://www.unitedspinal.org/pdf/DisabilityEtiquette.pdf
Suggested Use OC

Title Effective Interaction: Communicating With and About People with Disabilities in
Author U.S. Department of Labor
Date 2011
Organization U.S. Department of Labor
Keywords Disabilities; Communication
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Suggested Use OC; OCS

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Author Eldercare Mediators

Date 2012
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Author Blakeway, C.
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Organization Lewin Group
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Author Isaksen, S.G.
Date 1992
Organization Center for Studies in Creativity, State University College at Buffalo
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Author Keltner, J.
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Author Family Caregiving Alliance
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Author Cooke, R.
Date 2011
Organization Access to Justice Foundation
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Author Minnesota Board on Aging
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Organization Minnesota Board on Aging, Family Caregiver Resources
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Author Folkemer, D.; Coleman, B.
Date 2006
Organization National Conference on State Legislatures; AARP
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Author NY Connects
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Author Tilly, J.; Wiener, J.; Gould, E.; O'Keeffe, J.
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Author Centers for Medicare and Medicaid
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Author Wisconsin ADRC; Debra Murray, PhD
Date 2011
Organization Wisconsin Office for Resource Center Development
Keywords Motivational Interviewing;
Web Address
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Author Murray, D.
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Author Murray, D.
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Keywords Home Modification
Web Address http://www.usc.edu/dept/gero/nrcshhm/index.htm
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Author
Date 2012
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Keywords OC Training
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Author Centers for Medicare and Medicaid; US Department of Health and Human Servic
Date 2002
Organization US Department of Health and Human Services
Keywords Financial Planning; Insurance; LTC;
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Author Public Health Foundation
Date 2012
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Author Technical Assistance Collaborative
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Organization Prevention Center of Excellence
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Author Management Sciences for Health
Date 1998
Organization United Nations Children's Fund; The Manager's Electronic Resource Center
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Author Lipson, D.
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Organization Motivational Interviewing Network of National Trainers
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Author Dreyer, L.
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Organization Oregon ADRC
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Author VA Puget Sound Health Care System
Date 2010
Organization Veterans Affairs

Keywords Participant Directed; Self-determination; Person-centered; Veterans
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Author National Association of State Units on Aging
Date 2003
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Keywords Older Americans Act; Vision; LTSS;
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