

THE QUALITY NEWS

"No work is insignificant. All labor that uplifts humanity has dignity and importance and should be undertaken with painstaking excellence"

- Martin Luther King, Jr. -

Volume 3; Issue 7 January 2013

Person Centered Planning & Thinking

What does a Person Centered Thinking Coach Do?

Person Centered Thinking Coaches enable individuals and groups to think in new ways and to use new tools that they might not have used otherwise. Who are they 'coaching'? They are coaching all of us because until we are ALL Coaches we are all 'Learners'. A Coach teaches and reinforces the use of PCT Tools until they fit naturally into the way the people being *coached* think and act.

They do this by:

- Providing instruction and explanation
- Demonstrating
- Observing,
- Questioning
- Providing Feedback

Coaches also need to think about:

- How they motivate people to make changes
- Helping individuals & groups find their own solutions to during thinking & planning
- Helping with goal setting
- Making sure people learn the skills & tools and begin to apply them independently

In order to be a Coach, it is necessary to know and understand how the PCT tools work and to embody the values of PCT. It is also necessary to be able to explain the skills to other people and support them while they learn to use the tools effectively in their everyday work.

The role of the Coach is to help the Learner understand the tools and skills through three different stages: **Cognitive, Associative and Autonomous**. During the *Cognitive* stage, the Coach will demonstrate and explain the skills first by explaining and demonstrating how different tools are used, then by observing, giving feedback, reinforcement and helping the Learners stay motivated. The next phase, *Associative* is where the Coach provides feedback and reinforcement, reminding the person/group to practice by using the approaches of observation, motivation, discussion & using the skills on others. This is the phase where the Learner practices the skills. The third stage is *Autonomous*. The Learner begins to use the skills automatically and intuitively. The Learner is now in a position to become a Coach themselves. The Coach is also learning from the Learners at every stage, learning from what is working and what is not working for the Learners and using this to adapt their own approach.

Coaches are each of us – they are people with ideas, commitment and energy that can lead change and we are always learning!



1. Report Quality of Care & Support
2. Monitor Quality
3. Manage Risk & Compliance

Therap Tips!

General Event Reports (GERS)

To continue on the agency's endeavor of achieving quality, Therap has an internal incident reporting application. Agency employees use Therap to create internal General Event Reports (GER). Therap maintains copies of all of the incidents and allows our agency the capability of creating reports that show trends in the agency's incident reporting, such as an increase/decrease in medication errors or safety issues.

General Event Reports are documents that report something *unusual* but may not be reportable to DDD. For example, a GER will be evidence in the event of a "near miss" which could be for instance water discovered on a floor, yet no one has slipped in the water yet. Other examples of GER's are: discovery of a small bruise; an individual's lunch that is missing; an individual fell with out injury. GER's are also the catalyst for developing a DDD Unusual Incident Report (UIR), as the GER document is the initial reporting element. Once a GER is reported and reviewed the appropriate administrator, will then review the document and determine that the information is reportable and will generate an UIR to submit to DDD.

- Documenting GER's are critical and a vital part of all employees of the agency. Some key things to remember when documenting GERS:
- Remember—GER's are ONLY for Individuals and Programmatic (Not to record Staff Injuries);
- Include the FULL NAMES of ALL Individuals Involved;
- Include the Full names of staff, family or others who were present or witnessed event;
- Nothing is too small to document as a GER;
- Tell the full story (for example if you are documenting a Medication Error—State what occurred and why—do not just list the name of the medication—State exactly what happened.)
- Each action must have ownership—For example—911 was called. *State who called 911.*

THE KEY IS TO TELL A COMPLETE STORY, STATE THE FACTS and BE CONSISTENT!

Do you have a Therap tip or question? We want to hear from you! Email your tips or questions to: lisal@thearcofsomerset.org

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