

3 Things That Help

A quick, person-led snapshot for everyday support and shift handoffs.

Name / initials: _____ **Date:** _____ **Review date:** _____

Made with: ☐ Person ☐ Supporter ☐ Together

My communication: _____

1

EASIER

What makes a daily routine or task easier?

What helps me: _____

When it matters: _____

What staff can do: _____

How we know it helps: _____

e.g., Show the next step before a transition.

2

CALMER

What helps me feel comfortable, safe or settled?

What helps me: _____

When it matters: _____

What staff can do: _____

How we know it helps: _____

e.g., Give me quiet space and time to respond.

3

MORE SUCCESSFUL

What helps me participate or reach my goals?

What helps me: _____

When it matters: _____

What staff can do: _____

How we know it helps: _____

e.g., Let me try first; demonstrate only if I ask.

In my own words / using my preferred communication: _____

One thing to avoid (optional): _____

Use It, Check It, Update It

Short instructions for owners, DSPs, case managers and trusted supporters.

ASK THE PERSON FIRST

- Invite the person to tell, show, point, type, sign or use AAC to share what helps.
- Do not assume that quietness, compliance or staff convenience means success.

CHOOSE THREE USEFUL ACTIONS

- Pick one concrete idea for each area: easier, calmer and more successful.
- Write exactly what helpers should do and when, not just "be patient."

KEEP THE PERSON'S VOICE CLEAR

- Record the person's words or communication separately from staff observations.
- If an idea is staff-observed, label it as an observation to confirm with the person.

USE IN REAL WORK

- Review with authorized incoming staff and new supporters as appropriate.
- Keep it with approved resident records; never post private details publicly.

REVISIT AND CHECK

- Ask whether each strategy still helps; update after meaningful changes and at routine reviews.
- Use the official support plan and required safety procedures; raise conflicts with the team.

Important: This is a quick-reference aid, not an ISP, behavior plan, or clinical assessment. Follow the person's current approved plan and your organization's privacy procedures.