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If an event is cancelled or postponed, registrants will be given the option of canceling their registration, receiving a full refund, applying their registration payment to another event, or attending the event if the event is rescheduled.

To receive a full refund, cancellations must be made in writing seven (7) days prior to the event. Cancellations received within six (6) days of the event are not eligible for a refund.



INSTITUTE ON DISABILITY / UCED
56 Old Suncook Road, Suite 2
Concord, NH 03301

808290



www.iod.unh.edu



INSTITUTE ON DISABILITY / UCED
A University Center for Excellence on Disability



Person-Centered Planning for Older Adults

*Facilitation Skills Training
in Consumer-Directed Life Planning*

DATES & LOCATIONS:

Thursday, November 5, 2009
Courtyard Marriott, Lebanon, NH

Friday, November 20, 2009
Lake Opechee Inn, Lakeport, NH

Thursday, March 11, 2010
SERESC, Bedford, NH

Thursday, March 25, 2010
Sheraton, Portsmouth, NH

TIME: 9am – 4pm
(Registration begins at 8:30)

REGISTRATION FEE: \$25

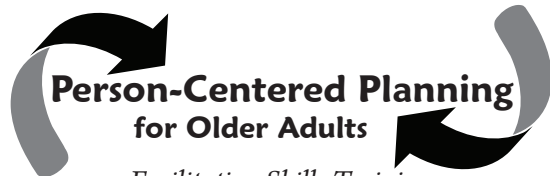
WORKSHOP INSTRUCTORS:

Susan Fox, M.Ed., MA
Patty Cotton, M.Ed.



UNIVERSITY
of NEW HAMPSHIRE

Available in alternative formats upon request



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REGISTRATION FEE: \$25

- Includes continental breakfast, lunch, and workshop materials.
- Approved for 6.0 Category 1 NH NASW Continuing Education Units.

DESCRIPTION:

Person-centered planning is a unique, individually-focused approach to planning for persons who are in need of services and supports. This workshop offers an introduction to person-centered planning, including an overview of a person-centered system of care. Information on how to facilitate person-centered planning meetings and tools to use in the planning process, specifically focused on planning with older adults, will also be presented.

This workshop is supported in part through a Person-Centered Planning Grant from the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services: CFDA 93.779.

WHO SHOULD ATTEND:

Case managers, social workers, nurses, long term care specialists, clinicians, family members, and others involved in planning with older adults.

ABOUT THE INSTRUCTORS:

Susan Fox, M.Ed., MA, is currently a project director at the UNH Institute on Disability leading NH's work to prevent unnecessary institutionalization and to support all citizens to live within their home communities through the Real Choice System Transformation Grant in collaboration with the NH Bureau of Elderly and Adult Services. Prior to this, she served for five years as the State Director of the Division of Developmental Services. Including her years working in special education and community services management, she has been active in regional and statewide initiatives involving persons with disabilities for over 30 years.

Patty Cotton, M.Ed., is the director of Innovation Facilitators (IF), a network of experienced trainers and facilitators who have organized to support the evolution of person-centered planning. Patty works jointly with the Institute on Disability and the Browne Center for experiential learning at UNH to establish IF as a centralized resource for person-centered planning for people with disabilities, older adults, and families. Patty has coordinated numerous federally funded projects with a particular focus on model demonstration and system-change in adult services. She has extensive background in process facilitation, service brokering, and the development of natural support strategies.

Registration Form

Person-Centered Planning for Older Adults

TIME: 9am – 4pm, registration at 8:30am

REGISTRATION FEE: \$25

PLEASE SELECT DATE(S):

- 11/5/09 Lebanon 3/11/10 Bedford
 11/20/09 Lakeport 3/25/10 Portsmouth

NAME: _____

EMPLOYER/ORGANIZATION: _____

TITLE / POSITION: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

THIS ADDRESS IS MY: HOME WORK

DAYTIME PHONE: _____

E-MAIL ADDRESS: _____

AN E-MAIL CONFIRMATION WILL BE SENT PRIOR TO THE EVENT

PLEASE SELECT METHOD OF PAYMENT:

CHECK #: _____ PURCHASE ORDER #: _____

CHECKS CAN BE MADE PAYABLE TO THE UNIVERSITY OF NH

VISA/MC #: _____

EXP. DATE: _____ TOTAL AMOUNT: \$ _____

**I UNDERSTAND AND AGREE TO THE EVENT POLICIES ON
THE REVERSE (SIGNATURE REQUIRED)**

SIGNATURE: _____

PLEASE NOTE ANY DIETARY/ACCESSIBILITY ACCOMMODATIONS HERE:

***PAYMENT MUST BE RECEIVED PRIOR TO PARTICIPATION.**

4 Easy Ways to Register!

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mail: **Institute on Disability**
56 Old Suncook Road, Suite 2
Concord, NH 03301



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