



Towards Person Centered Housing Services in Europe

# **Pack on Assessment of Individual Needs and Rights**



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## IO2- Pack on Assessment of Individual Needs and Rights

### Table of Contents

1. Introduction	3
1.1. Aim of the TopHouse Individual Needs and Rights Assessment (THINA) tool	4
1.2. Introduction to how to use THINA	5
2. Background	7
2.1. United Nations Convention on Rights of Persons with Disabilities (UNCRPD)	7
2.2. Integrated Housing & Support	8
2.3. Person Centered Approaches for Housing	10
2.4. Co-production and housing	11
3. THINA	12
3.1. Legal rights of services	12
3.2. Values connected to rights of service users	14
3.3. Assessment for better understanding of who You are as a person and what You need.	14
3.4. Combine the three elements in THINA – Identity - Rights – Support (PCA)	18
3.5. The importance of involving service users and responding to users complaints	22
3.6. Equal opportunities and Diversity in the assessment process	22
3.7. Individual needs assessment in conjunction with allocation and support assessment	24
4. Key success factors to put THINA into practice	25
4.1. Analysis of the professional competence at individual frontline staff level	25
4.2. Analysis of the professional competence at individual managerial staff level	26
4.3. Analysis of professional competence at organizational level	27
6. References	47
7. Annexes	48

## 1. Introduction

Current European Social Policies of inclusion play an important role in the change of demands of support to persons with disability. The higher demands are connected to the competence of the professionals and to the quality of housing services. Higher quality demands are also expected from the beneficiaries themselves. Especially for example from youngsters with disability, who never have lived in an institution and have been included all their lives in the society. Into this background the professionals need increased knowledge of the quality of support and to support persons with high support needs in an included life situation.

**First** of all, this means an obligation to redefine support/supporting services in an inclusive service setting. In addition, this requires developing an assessment tool, which fits with the new demands. This because the professional's expertise and specialization of support is placed in a new context, using new knowledge and approaches, which is specific influenced by following three quality aspects:

- The Person-centered approach (PCA)
- The Community based settings (inclusion) and
- The Implementation of UNCRPD (see figure 1.)

**Secondly** this means for professionals to redefine and create a new content in *their role as supporters*. To change the contents of the support influenced by the traditional institutional culture and segregating attitudes to an active, open minded support directly connected to the persons themselves.

**Thirdly** the professionals will work in/with a range of different sectors as for example housing services, social care, different ordinary sectors in the society and local authorities whilst the user participation rise (inclusion).

**Fourth** the strong guidance of the UNCRPD in daily life situations insist to find processes and ways to implement the Rights.

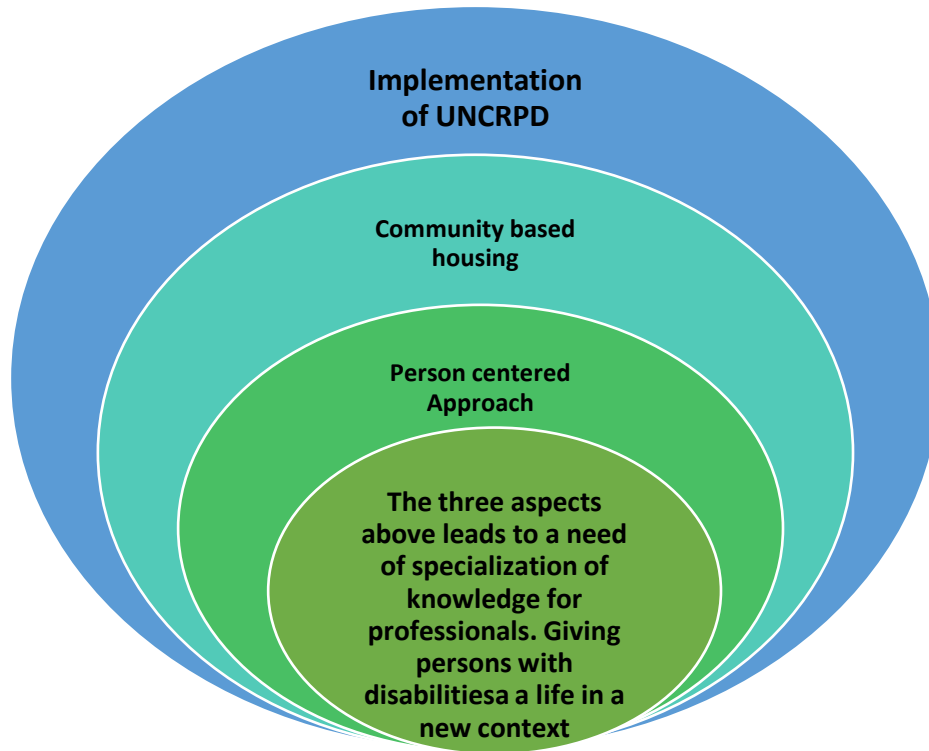


Figure 1

And as a consequence of these, a new assessment tool is needed to assess the quality development and effects of the support.

### 1.1. Aim of the TopHouse Individual Needs and Rights Assessment (THINA) tool

Professionals are often ill prepared in terms of tools to meet the range of challenging demands. Both when it's a question of new ways of working and new forms of support. This means that adequate training and available tools are needed. TopHouse project will in cooperation with partners in Europe focus on training.

The main objective of TopHouse (TH) is to define and redefine and formally establish the competence of professionals in processes of assessment, housing and support/care provision (AHS). Current policies have produced huge demands on social housing. *"It faces a perfect storm of higher demand for trained professionals trained in housing and support services. The greater expectations from users and more complex needs as institutional care slowly erodes means changes. Allocation & assessment systems are frequently ill-suited to deal with the current range of people with disability&/mental health rehabber"* (project plan page 30), now needed a place to live a normal and inclusive life in society. TH partners recognize that in Member States (MS), staff are often ill-equipped in terms of training& tools to meet the

range & scale of demand. To help professionals to a better job and persons with disability to a better wellbeing TH will provide training and tools, which will reflect modern values and person-centred approaches.

One of the tools in TH is TopHouse Individual Needs Assessment (THINA), which is included in “Pack on Assessment of Individual Needs and Rights” (project plan page 46). THINA can cover all persons involved in AHS, but explicitly reflect UNCRPD (UN Convention of Rights of Persons with Disability) and Person-centred Approach. Many assessment systems of needs already exist, but do not usually reflect on UNCRPD principles, on person-centred approach and values. Mostly assessment tools are focusing on physical, mental and intellectual functional-levels. THINA assessment tool has taken another dimension of the human being- the personal identity. The reason for this is the influence of UNCRPD and the respect for equal position of persons with disabilities in society, seen as everybody else.

## **1.2. Introduction to how to use THINA**

The content in THINA aim to be used in different services, of different professionals and include the beneficiaries. That is why THINA assessment tool search for a flexible and simple form, which can be adapted to different persons, situations, places and levels of services. To reach this, the professionals need to be trained to deeper understanding of their new role, work in a Right directed way, be committed and have a better understanding of the aims of the support.

THINA includes three cross-sections:

1. UNCRPD is one of the main factors in THINA. The assessment of implementation of rights in the person’s life and housing services is strongly connected to the assessment process.
2. Person-centred approach, which is in THINA defined as a deeper understanding of the meaning of the person’s identity. And this is influencing to the person’s wellbeing and development.
3. User involvement is built “inside” THINA via a constructive approach, which means the people’s lives are in movement via people’s participation and empowerment in the process. In the assessment the subjective experience is essential. The main point is to strengthen the users influence and as a result of this, increase the understanding of the upcoming current assessed topics. The user’s story/narration and assessment are strongly linked together.



needs. The assessment focus on, if the person with disabilities' needs are supported by what he/she gets from the professionals.

To take in consideration the aims of THINA, is to search for the contents, which should be assessed. This development work is important because the assessment need to be:

- understandable,
- concrete for users and professional and
- clarifies current situation and the next steps for support and service quality development.

THINA tool is to be used

- on regular basis
- in a systematical way and
- can give information of three levels (personal, system/managing and organizational level), but specific concentrate on the personal level.

To use THINA the professionals needs to be open to discover and change the “traditional” habits and routines, be brave to use self-critical aspects with the intension to improve and avoid resistance to change. The redefinition of support and support services require changes of professional’s roles, way of work and call for continuity of development. This means to move from traditional, often influenced of institutional culture and “solely” practical support into support with attributes of personal and rights-based support. A central question is *who will be the assessor?* In the line with a Person-centered approach in the first place it’s the person with disability him/herself. The redefinition of support according to THINA assessment tool and assessment aims, THINA will be used and describe in the concrete daily life situation of the beneficiaries/users.

## 2. Background

### 2.1. United Nations Convention on Rights of Persons with Disabilities (UNCRPD)

Finland signed the UNCRPD 2007 and ratified the Convention 2016. In this period Finland have adopted the laws in line with UNCRPD. The collaboration between governments and NGOs is a strong and appreciated tradition to adapt the laws and implement the Rights, which brings an added value in Finland and actually in

all the Nordic countries. At the national level, a focal point will be designated, and a coordination mechanism established for the implementation of the Convention.

The Government adopted its second National Action Plan on Fundamental and Human Rights for 2017–2019 on 16 February 2017. The objective of the Action Plan is to promote the obligation of the public authority to guarantee the observance of basic rights and liberties and human rights.

The four focus areas of the Action Plan on Fundamental and Human Rights for 2017–2019 are: fundamental and human rights of education, equality, the right to self-determination as well as fundamental rights and digitalisation. The Action Plan includes, amongst others, the following concrete projects aiming at promoting and protecting the rights of persons with disabilities:

1. **Overall reform of disability services legislation:** The present Disability Services Act and the Act on Intellectual Disabilities will be amended and consolidated into an act on special services provided on the basis of disability. The realisation of human rights of persons with disabilities and user-orientation will be strengthened, and persons with disabilities will be provided with the possibility of making their own choices. The work is still ongoing.
2. **Strengthening the right to self-determination of social welfare** known as the Act on the Right to Self-Determination, the RSD Act). Ministry of Social Affairs and Health is continuing the work of the legislation and will send it to the Parliament in autumn 2018.
3. **Promoting the equality of persons with intellectual disabilities in housing:** The realisation of equality will be investigated in respect of government-funded housing projects intended for persons with intellectual disabilities. This work is still ongoing.

## 2.2. Integrated Housing & Support

From a historical perspective person with disabilities have been excluded from society, something which is still a challenge today. Finland have, however, over the last decades introduced significant improvements for persons with disabilities. The attitude towards persons with disabilities has improved towards inclusive housing services added with the personal assistant system. And the disability policies nowadays support the community base services and support the same basic rights as for the rest of the population.



The Finnish government did the first principal decision to *decrease* the places in the institutions 2010 over a period of 2010-2015. The second decision (2012) to *close* the institutions was based on the UNCRPD. The implementation of the rights is an important part of the work concerning improvements within the housing sector. The Government supports housing production for special groups via ARA (The Housing Finance and Development Centre of Finland) and offers special criteria for the quality of housing. Such as persons with disabilities and for homeless persons, with interest subsidies for loans taken out to finance the construction, renovation and acquisition of rental dwellings, and with state grants up to 50 % of the investment, depending on the needed support (Act on Interest Subsidy for Rental Housing Loans and Right of Occupancy Housing Loans, 604/2001, and Act on Subsidies for Improving the Housing Conditions of Special Groups, 1281/2004). Lately, the focus of the financing of housing production for persons with disabilities has been in utilizing the ordinary housing stock (Jukka Kumpuvuori).<sup>1</sup>

The implementation of the UNCRPD and disability policy are described as being guiding principles to services for persons with disabilities. Training, development projects and disability studies are ongoing important tools for professionals to understand the redefined “support of inclusion”. In an Inclusive situation the professionals work in a range of different sectors as for example housing services, social care and local authorities. In Finland the user’s participation is crucial. But still the obstacles are many.

Just now the responsibility for planning of housing or housing services lies on the municipal councils. The production of housing and services can be achieved by the municipal authorities themselves, the joint municipal authorities, private companies, organizations or NGOs. The goal is to create several forms of own apartments were everybody else live, apartment housing groups and new types of living conditions. Professionals support services is included. The beneficiaries/users receive support from a personal need, still mostly based on the disability. This is good but seems to be not good enough. Especially when we talk of PCA. For persons needed high level of support, the state financed housing units are limited to 15 apartments (persons) often spitted to several houses on the same plot. But Finland meet challenges.

The goal is inclusion and to change the relation between collective/group and personal/individual contents, which means stronger emphasis on personal choices, decision making and indecency. Inclusion leads to increasing space for persons and demand of stronger inclination for services to adapt to personal/individual needs and rights.

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<sup>1</sup> Jukka Kumpuvuori

The risk for influence of the institutional culture and risk for reinstitutionalization is still existing. There is a risk that the institutional culture will encroach upon housing planning, services and upon the daily life for persons with disabilities. This often added with generalization and categorization of person's needs and rights and this has not or should not have any more legitimacy in inclusive services anymore.

A consequence of Inclusion is demands of changes on the professional's quality of competence. This means that there is still a rather long way to go, to fill the gap between the goals of inclusion and the real daily situation because of the above-mentioned risks and obstacles in housing services. The risk that professionals still handle the personal daily life situations influenced by segregating factors instead of the person-centered way. In this changing process we need tools in the daily work to adapt inclusion, but also tools for assessment of professional's support.

The Finnish Government give the direction, but the focus on implementation of inclusive housing and the person-centered approach need more developmental actions. It is a question about knowledge, but also on professional's values, actions and arguments. In the development process the implementation of UNCRPD in concrete terms and person-centered approach, can turn into a conflict if professionals insist to "more traditional" ambitions. This can create interest disagreements for example how to "handle" the beneficiary's/user's wellbeing. The process is anyway in Finland moving towards a right based and inclusive housing services, where new tools of implementation of Rights and tools of assessment, are more than welcome.

### **2.3. Person Centered Approaches for Housing**

In Finland already in 1990<sup>th</sup> started the first steps to train professionals in Person Centered planning (PCP John O'Brien). And the understanding of person-centered planning opened doors for persons with disabilities. Not only to be noticed as disabled, but also as a person. Unfortunately, the implementation is slow. Person centered approach (PCA) is understood as a broader challenge. To find various ways towards a valued position for persons with disability in different sectors in the society. The definition of persons with disability is redefined to emphasize the personal qualifications and not out from diagnoses.

This leads also to the requirement of professionals to get underpinning knowledge of what abilities is needed for a person-centered approach. Aspa Foundation 2015 included the person-centered approach in their strategy for 2016-2020. The process of implementation was supported by:

- a **training program** for all 350 staff members in the housing sector and professionals in managerial level and by
- the project “Personal Daily Life”, to create a Person-Centered Daily Life-**concept** for Aspa Foundation and professionals in Aspa housing services.

The evaluation of the effects and supported material was created in 2017. This to guaranty the continuity after the projects was finished. 100 users living in Aspa-homes was included in the project. Included to tell of the personal priorities they wanted to change in their daily lives and what effects the person-centered approach gave. The “Personal daily life”-project is a good example how the process from rights to reality can be implemented.

Person Centered Approach support the implementation of UNCRPD from three aspects:

- the professionals support focus on the person as he/she is and not on the disability
- the serious attention of beneficiaries/users personal participation with their own description of views, needs, rights and abilities etc. and
- to create a social and service environment connected to the person-centered approach

We are not there yet in Finland, but the process to go in this direction is crucial. An overall knowledge of the Person-centered Approach is settled, but professionals in all levels still need tools to concrete actions in the service. It is obvious that this implementation and action of how to handle person-centered approach and implementation of rights opens the need of an assessment tool as THINA.

## 2.4. Co-production and housing

The Co-production of housing services in general in Finland are in several different structures. Co-production of housing can be built between different actors. To build the houses can be done by an organization for ex. by Aspa and the services is arranged by the municipality. The co-production can also be between the private sector and the municipalities or be a cooperation between different municipalities. The connected services needed for the users in housing services – like healthcare, education or leisure time activities, can be co-produced services between the housing service for the user and the sectors in the society (for example the health care center for every-one, the education in the ordinary vocational school, sports club, photo course)

Co-production is important also in the development process of THINA –tool. The first phase of the Erasmus+ TopHouse project is supported by a certain development process. The process will include four co-production parts.

Cooperation between	Aim
1. Background work. To found out the current situation of assessment tools. To discuss with experts in the field and collect good practices from project partners.	To collect underpinning knowledge of the current situation of the field of assessment tools/ measurements.
2. Stakeholder consultation seminar with experts from organizations, agencies, research network and service providers, social vocational schools, disabled persons themselves and Aspa Foundation	To collect expertise, experiences and raise awareness of TopHouse and THINA. To discuss the contents and aspects of THINA, TH and the adaptation locally. To promote the rights on the service sector. And to find more partners especially in the education and training institutions.
3. Cooperation between the staff in the housing services, the users / the persons who live in Aspa-homes and other housing services and the TH project (THINA). For example, four Aspa-homes with staff and users will be included.	To include users/beneficiaries in an early stage in the development process of TH and THINA. To collect the user's opinions during the development process.
4. Cooperation between Aspa education (of UNCRPD and how to increase the participation of users in the housing services) and TH/THINA. Education is for staff and users from several housing services in Finland. Users and staff are participating in the same course. The education includes 2x2 days.	To deliver information of TopHouse and THINA and focus on the UNCRPD implementation and the person-centered approach to be adapted to the housing services.

This process will clarify the contents of THINA – tool and will continue to development of details in the framework.

### 3. THINA

#### 3.1. Legal rights of services

Housing services are provided for persons who, for special reasons, need help or support with organizing housing or their living conditions. Services provided at home take precedence over services requiring

moving and covering both housing and services (Housing services under Section 21 of the Social Welfare Act (30.12.2014/1301)

Secondly the provision of housing for persons with disabilities is provided in special legislation. Section 8 of the Services and Assistance for the Disabled Act (1987/380) defines sheltered housing as a service that a municipality is required to engage in by law. Under Section 2 of the Act on Special Care for People with Intellectual Disabilities (519/1977), special care covers services such as provision of housing. Both acts secure for people with disabilities the kind of housing they necessarily need because of their disability. Just now these two Acts will in the near future become one Act with the goal to have all persons with disability in the same legislation<sup>2</sup>. The intension is also to assess out from the personal need and how the disability limits the persons functionality and not out from the diagnose. This will give a lot more flexibility to access the service the person needs in different life situations. It gives also opportunities to develop support for inclusive settings out from PCA.

In the first place Finland offers in the disability field the mainstream services, but if the person with disability needs more support the services, based on an individual plan, is available:

(Disability Service Act 380/1989):

- service housing (a flat with services, supported housing in flats built, together to a larger unit),
- housing renovation- to make the flat accessible
- personal assistance,
- transportation services,
- day centre activity and support for ordinary work and employment.

The law concerning equality (Non-Discrimination Act 1.1.2015) main aim is to strengthen the equality and prevent discrimination. This applies to all public and private activities (like service provision). This is important for persons with disabilities, to defend their rights. Even if Finland have the guarantees in the legislation the development work in service quality needs to be considered.

In the discussions in the TH Finnish Consultation expert seminar was pointing out, that the goals in the laws is supporting TH Training, supporting the change (=paradigm change of the professional's role and quality of support) and THINA-assessment tool. Finland ratified the UNCRPD, when the legislation was in line with

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<sup>2</sup> Jukka Kumpuvuori

the rights and the consequence of this is that actions should be taken for changes in concrete terms. Many stakeholders need to be included.

### **3.2. Values connected to rights of service users**

Values in the first place are base for our actions. What we think is important? How we act and choose to do. Values influence to what we are motivated and what we want to take responsibility for. The values connected to rights of the service users, is equality, respect and to have a human value. When we investigate more in detail the concrete life situations for users, we can discover infractions of these values. Both in how persons with disability are treated and how services are realized.

Equality does not mean that you need to get exactly the same as others. It means to have the same opportunities as others and that the equal opportunities is viewed (“filtered”) through your own personal opinion and life. To categorizes and generalizes persons with disability is to put the persons own identity aside. For example, the social categories and/or generalization is not self-chosen and is therefore a type of discrimination. Often the categories in field of disabilities are diffuse. Again, the categories include more traditional attitudes, institutional culture, stereotypes and assumptions, then of the person themselves. In connection to the service users the ethical considerations are central. In “Personal Daily Life –concept” the first step, in the housing services, is to get an insight of the connection of values and the concrete situations. Persons with disability have in many life stories told about such infractions of the values. The second step concerning values, in the concept, is to strengthen the values (equality, respect and human value) consequently in the support situations.

### **3.3. Assessment for better understanding of who You are as a person and what You need.**

First what have been recognized based on surveys and current assessment tools (measurements) is, that these tools measure the disability functional level and the focus on the disability. Secondly the focus is on what practical support is needed because of the disability. Support for hygiene, get food, clean the house etc. which compensate the disability. And this is also important, but THINA assessment tool will focus on the person ahead of the disability. The question will be “Who you are? Not “what disability do you have?”

THINA -tool will be based on the user’s own narration/story. The interest of information for the assessment are the subjective experiences. The handling, where the person with disability and professional picks up the topics from the persons narration/story and-

- place them in the framework of the five identity aspects,

- make a connection to the articles in CRPD and
- assess the level of the support quality.

This process will be a structured process, with prepared measuring tools and questions. The aim is to get an assessment in quantities' and qualitative terms, which gives added information to the assessment. When this is repeated regularly as a part of the work in services it will clarify the weaknesses and strengths, put focus on specific support needs and give information for example to needed documents for the service provider. THINA-tool is aimed to be used systematically included in the service. THINA-tool can be compared to many other "routines" done in the services (housing services). Probably, the service needs to redefine systems, tasks and activities.

THINA- tool demand the professionals to the **importance of a qualified interaction** based on equality, respect and inclusion. The traditional role of the professionals as a "excessive career", "decisionmaker" or controller of person with disability lives, belongs to the weaknesses in the interaction. Negative attitudes focus only on the *disability* or the *diagnose* or a mindset, where the user represent a group which, he or she have not chosen, is separating the user from the own identity. These and similar factors are decreasing the understanding, who the person with disabilities is and/or want to become. The awareness of the responsibility of a valuable and redefined, when its needed, interaction is important. The valuable interaction arises from the CRPD and person-centred approach. This important for all, but specific for the persons, who need a lot support or need a personal assistant in the assessment process. THINA is focused, in the assessment process of the support on the person's identity aspects. The focus of the identity aspects is a way to understand the contents of rights and how the person is experiencing them. Later on, relevant examples will be presented. In THINA the users themselves formulate the narration/story in their own way. The assessment focuses of the information in the story/ narration on five different identity aspects:

1. Me – who I am and want to become
2. Me and my close relationships
3. Me and my social services
4. Me and citizenship
5. Me and my future

Through assessment of these identity aspects related to rights we get valued information of needs and the level of support. This framework contributes to assess the support of the professionals of for example self-determination, equal opportunities and respect for independence. The qualification of the support is identity-based. The role of the person with disability is in the centre. This intends to, that the person with

disability is the one who assesses his/her own situation. An assessment exclusively “from outside” should be eliminated. Persons who need a lot support, can have a confiding support person, but the same goal remains.

The above assessed quality of support is on the personal level. But implementation of CRPD and assessment of support quality can also be connected to the service system, such as routines, separate staff meetings, lists of sleeping times or activities with no connection to the persons themselves. By assessing the implementation of rights and the support of identity connected to inclusion into the society, even wider perspectives arise. In the assessment process these levels are not excluded (for example environmental conditions) and can appear in the personal stories/narrations. For example, there can be situations, when the person with disability and professionals are aware of the user’s daily life needs, but they are squeezed between the demands in the concrete situation and the limitations in the service system or society.

The identity of Persons with disabilities has been out of focus for a too long time. Reason for this is the segregation of persons with disabilities, the support quality has been (and still is) legitimized by varying routines and procedures. The diffuse composition of persons with disabilities, as a result of stereotypes, has led to that the identity of the person has been disregarded. Comments like “He is like a child” indicate such a behaviour. Or, questions such as: “Oh, did you do really this by yourself?” when a person with disability handled something simple, easy daily life issue independently. It is an unnecessary exaggeration to treat these persons like “Superhumans”.. This “good-girl/boy atmosphere” is still existing and will be discovered using the THINA-tool. Another view is that assessment tools have detected mostly functional limitations. This type of assessment is also needed, but the THINA assessment tool has another dimension. The dimension to find the person behind the disability and assess the support for his/her identity.

Already mentioned above the five identity aspects in THINA.

1. Me – who I am and want to become
2. Me and my close relationships
3. Me and my social services
4. Me and citizenship
5. Me and my future

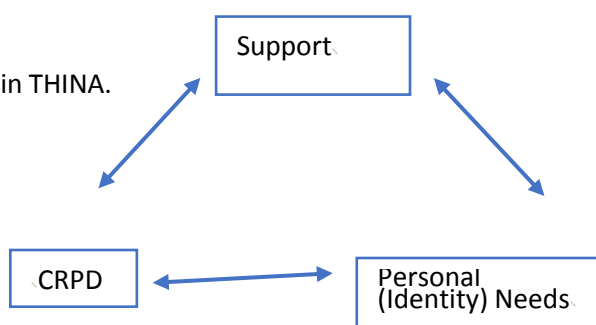


Figure 3



The aim is to collect direct information from the person with disability. The own views of him/her and his/her story connected to identity. These aspects are identified as follows:

### **Me- identity aspect**

Keywords as self-awareness, possibilities to self-realization, independency, emotional wellbeing etc. define person's identity. The identity is the person's perception of who he/she is and who they want to become.

### **Me and my close relationships**

Me and my close relationships are people, who the person with disability feel nearness and trust with. Friends, relatives or professionals can be defined as close relationships.

### **Me and my social services**

Me and my social services are defined as the people who the person with disability point out as contacts who are arranging social services and activities. Social contacts play a role in supporting and organising tasks around the person's needs. The social services are more formal or can be described as an acquaintance and hence differ from close relationships. Social contacts organising services can be for example the employer, service provider, social officers, professionals, leaders of leisure time activities.

### **Me and citizenship**

Persons with disabilities right to be an active citizen means to have or get the right to full and effective participation and inclusion in the community. Active citizenship means people getting involved in their local communities at all levels. Active citizenship can be that the person with disability is or want to be included in actions in the neighbourhood, local community or politics in the society.

### **Me and my future**

Persons with disabilities, as everyone else, need plans, information and/or concrete experiences for the future. To have the opportunity to create the own future from the own "inner" needs and wishes, is important

**The Implementation of UNCRPD and The Person-centered approach (PCA)** are connected to the personal identity and identity development. We all can notice, that the UNCRPD is not connected to diagnoses, group-thinking or to what the person cannot do, which is very common treatment of disability questions.

UNCRPD demand a certain quality of support to reach personal -wellbeing for persons with disability. It needs a *new professional role (New professional profile) constructed* on certain values (see above), a clear

right directed support and that the legitimacy for the support actions lie on underpinning knowledge and competence of UNCRPD and PCA. This legitimacy is among other things shown in actions, communication/interaction and attitudes/values. It is not a discussion of intentions it's a question to turn over to actions.

The service structures can create obstacles for identity development (for example institutions, big housing units, segregating environments for persons with disability). Services and service structures need to involve the personal identity, give the own life space, inclusive alternative roles (new roles) and create a private life. By this we reach to openminded knowledge-based actions, the quality support and self-insurance systems in the services (like THINA).

To understand me, as a person (who I am and who I want to be) does not need such support, which put the disability in the center. It does not either need complicated administrated routines, procedures and rules which some-one else have done for the user without asking the user him/herself.

To put the identity of persons with disabilities and the person him/herself in the center and use THINA as an assessment tool -assess needs and rights from an identity point of view- the identification will be more specific and concrete. To open doors for inclusion and acceptance in a diversity point of view, which does not only give an acceptance for persons with disability, but also a deeper understanding for challenges we face in this new framework of support.

### **3.4. Combine the three elements in THINA – Identity - Rights – Support (PCA)**

THINA -tool assesses the implementation of rights and quality of the support connected to the five identity aspects. It is crucial to fully understand what the five identity aspects mean. Every aspect is representing certain CRPD articles and are defined as follows. The combination of articles in CRPD and identity aspects in the figure can be used in a flexible way or create, when needed, new combinations. But figure 3 is a good start into the assessment to understand the general and basic framework (Figure 4).

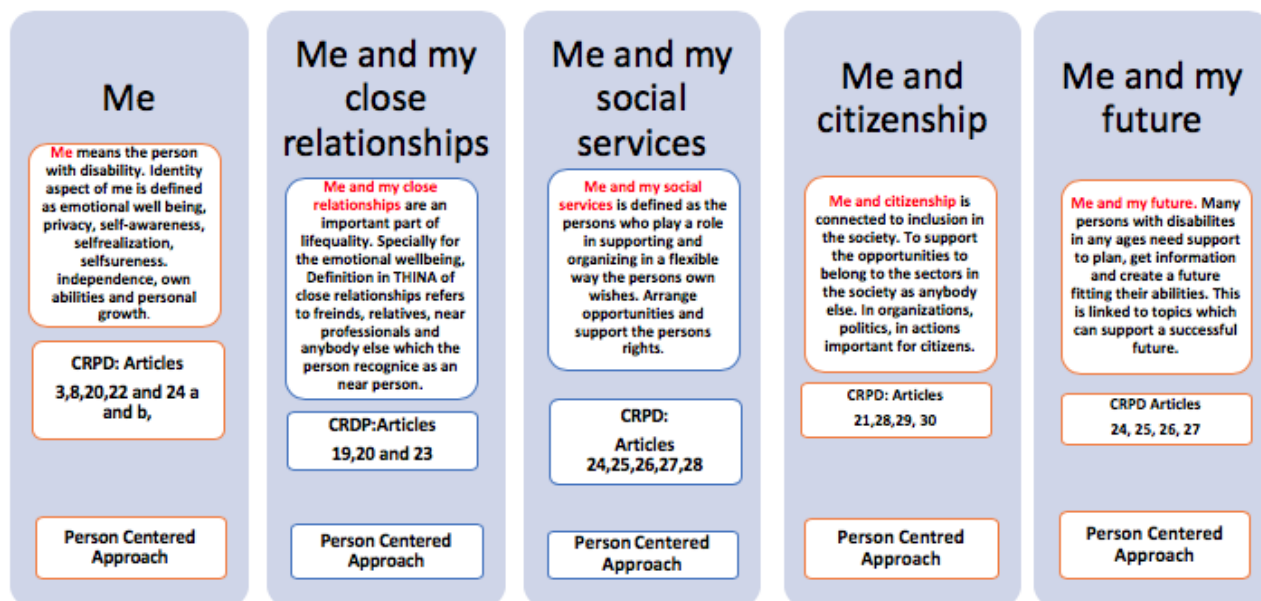


Figure 4: The articles listed in Figure 4 above are just for reference and can be changed or moved if needed - depending on different individual personal stories.

To recognise the individual needs based on rights, is an important way to limit the assessment topics. THINA does not focus on practical needs like for example washing, cleaning or making food. The assessment framework is focusing, as already have been told, on the persons with disabilities identity. Persons with disabilities need space and place for their “real” experienced identity. The understanding for ex. “Who I am” and “who I want to become” needs to be one part of the assessment. The creation of identity is an inner human and an inclusive process in the persons’ own environment. Therefore, an own personal formulated description of important own topics in the persons with disabilities life becomes significant in THINA. This means that the assessment of the support needs to focus on the person’s identity, not on diagnose, not on the deviation, not on the role as a service receiver or a person, who expects to over-adapt to systems around him or her. This means that the persons with disabilities need varying support with “strong footprints” formed by CRPD. See figure 3

THINA assess the support of five aspects of identity (figure 4):

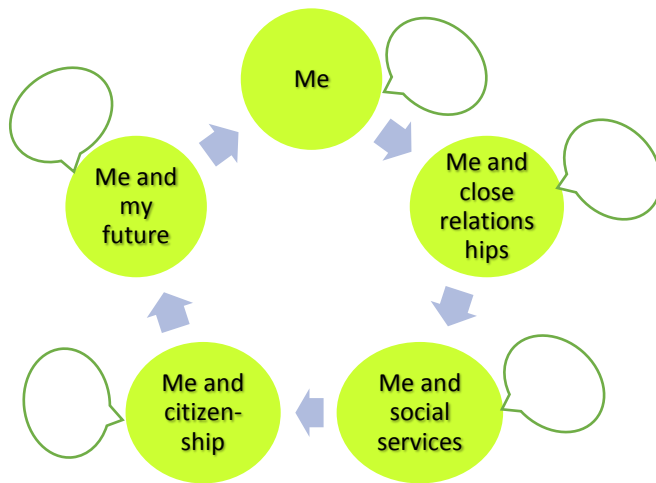


Figure 5

**ADVICE:** All five identity aspects do not need to be assessed at the same time. Use THINA continuously.

**ADVICE:** First things first: read the CRPD (also the easy reading version)

**ADVICE:** In THINA you need to deal with rulings/conclusions which can create some unsureness. In the first place Keep to the

person’s own experienced version. And better to be brave and not give up, even if you cannot get a 100%

guaranty for doing it in the right way. This because, when You deal with the person’s story and rights, the steps and

“footprints” will be the right direction.

To be in line with the aims of the THINA - tool, it is both the persons with disabilities views and the respect for it, which counts.

All identity-aspects cannot be handled at the same time. It is necessary to choose one which fits best with the person’s own opinions. The person with disability tells his or her narration/story. It is important to use different communication alternatives. “Telling” does not only mean spoken words. As a result, the demand for removing barriers has grown. Persons with disabilities are nowadays more aware, know about their rights and their personal opinions. This means also that the role of professionals is changing and need to follow this development. Therefore, the importance of assessment has increased.

**Start** the assessment with **reading** the CRPD (or read the Easy reading version). Get a picture of the specific articles connected to the identity aspects. In this way You are prepared to make connections between the persons with disabilities story and the articles. It is clear that the THINA assessment –tool uses the story as a base for the assessing.

Connected to this part You will find the first THINA form (1.)

**Then connect** the articles / rights to the person’s story in cooperation with the person him/herself. After this fill in the second THINA - form. The form transfers the rights to the person’s personal identity- topics. You need to “translate” corresponding articles to the topics and requirement in the story. This because You need to become aware of the concrete needs based on rights including the personal views. As we know now that the topics in the narration/story are based on the rights and the concrete topics and needs of the person, they can be listed in the following forms of the assessment of the quality of the support. The assessment will be presented in both quantitative and qualitative terms.

The THINA assessment tool aims to be easy. The reason for this is the adaptation to the daily life. Keeping it simple increases the possibility for regular use. At the same time the professionals and users of the services must be aware that time and action are required to follow the process. In short, THINA calls for **reading, connecting and summarising**. Partly it calls for analysing what could be connected to what, but in these cases, it leaves room for making a choice. “I would like to go to the photo course but did not get any help”- a simple wish. Article 19 of participation is the connection. The assessment will tell if this has been supported and the level of the quality of the support. One question which can come up is why this connection must be established. Some professionals say – we are doing this already. The connection to CRPD articles in the assessment is important because it guarantees the implementation of rights. The risk is that without this part the support becomes indefinite and the service quality becomes fragmented and unsure.

The assessment will contain information about the implementation of rights and regarding the support or lack of support for persons with disabilities concerning their own personal topics. The last part of THINA contents a summary of the results on quality and quantity facts<sup>3</sup>.

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<sup>3</sup> Later, when THINA-tool will be used by professionals, is needed to consider the GDPR (General Data Protection Regulation).

### **3.5. The importance of involving service users and responding to users' complaints**

Inclusion is the main reason for a need to change the professional's contents in the support in daily in their work. An important part of this is that the service users are included. In the history it was other people, who did the decisions. Unfortunately, this is existing today in various forms. The normalization phase used the social model to point out the importance to "live like others" and/or to be "as normal as possible". This, among other things, developed the environment for persons with disability, changed the service structure, make it possible to move out to the society and to be involved. Present goals and the ideology support citizenship for persons with disabilities. And as a result of this, the citizenship, has influenced positive into the involvement of the service user. For example, increased their roles in the society.

In an early process of expansion of THINA the service user is and will be involved. Aspa Foundation is cooperating with Aspa Service and Aspa homes will be included in the process. Users are invited to give ideas, comments, aspects etc. to the development of THINA assessment tool. These opinions will be described and taken in consideration. The process of user involvement has already started in Aspa homes. But will need other ways to increase the involvement.

THINA assessment tool will in all circumstances involve service users. THINA is also an assessment tool, which is meant for persons who have higher support needs.

This will need added competence for professionals, for example of communication alternatives, adaptation of THINA to easy language and concrete terms, as well as observation methods.

### **3.6. Equal opportunities and Diversity in the assessment process**

The equal opportunities and diversity in the assessment process need to "download " the process to every one of the persons with disability to be involved and fully respected as they are. Equality means that the persons story, which is the base of information for assessment, is taken seriously. As every body else describing their life and daily life the same opportunity goes for persons with disabilities. For the process has been created forms to be used in the assessment process and collect the results of the personal needs. To guarantee this cooperation between the user /person with disability and the professional THINA- tool is not using interviews in the process. The collection of information of needs based on personal identity aspects and rights is based on discussions and cooperation on the upcoming topics. The risk with interviews is that it will be too controlled or governed by the person(s) who has created the questions. A respectful

cooperation and discussion also release resources, inspires and invites to new views. To keep the process in the framework of THINA the tool delivers five forms to be used during the assessment

The general assessment process, which is connected to all identity aspects is the following:

- In cooperation with the person with disabilities choose one of the five identity – aspects
- Start the discussion and the person tells her/his story/narration. You can support by raising questions.
- Make notes of the story/narration or write it down as it is told. Take responsibility of the qualified interaction and use adapted communication alternatives, pictures, photos, easy reading text, drawings etc.
- Establish in cooperation with the person with disabilities the connection between the contents in articles of rights and topics in the person’s story – transformation from rights over to personal “daily-terms” (from rights to reality). This part is important, so we get a better understanding of the personal needs based on rights and assess the support for these topics.
- The details of the personal (individual) needs (=personal topics) picked from the story/narration and the support level will be collected via assessment forms.

As a start A. - Read the CRPD rights (or Human rights in general) connected to the identity aspect

As a start B. – The user /person with disability tells her or his story out from one of the identity-aspect

**The assessment forms will be presented in five documents. The assessment is done in cooperation with the person him/herself. The forms you will find as an attachment in this document**

**- Form 1. Space for notes regarding the story/narration**

**- Form 2. Connection Form:** Form for the connection of Needs with Rights described by the person with disability in the personal story/narration. This is the process to move from rights to personal daily concrete terms.

**- Form 3. For the assessment of implementation** of rights. This is the process to assess the personal level.

**- Form 4. For the assessment of the quality of the support**

**- Form 5 Summary of the assessment results in quantities and qualitative terms**

The forms are in two different types – depending on the user/person with disabilities.

1. the ordinary forms and 2. the easy evaluation (assessment) forms

Both types of forms are designed to be later transferred into electronic versions. The Electronic Easy Evaluation (EEE-version) is a new way to bring THINA into a modern form of assessment. The aim is to reach and disseminate to a larger number of persons with disabilities and professionals. EEE-version will also ensure the availability of THINA to everyone.

### **3.7. Individual needs assessment in conjunction with allocation and support assessment**

Supported housing is provided for persons who need support for independent living or for moving on to live independently. Housing support services include social counselling and other social services.

Service housing with part-time assistance is provided for persons who need suitable housing and care and attention. Service housing with 24-hour assistance is provided for people who need more care and assistance. Service housing refers to accommodation and services provided in sheltered flats. The services provided according to person's needs, are: care and assistance, activities promoting and maintaining functional capacity, meals, care of clothing, help with personal hygiene care, cleaning services and services *promoting participation and social interaction*. Service housing with 24 hours assistance services are provided around the clock according to person's needs. In service provision, care must be *taken to ensure that users right to privacy and participation is respected* and that they are provided with the appropriate rehabilitation and health care services.

However, those persons who lack dwelling and are assigned institutional care are regarded as homeless. In 2010 and 2012, the Finnish Government issued resolutions on securing housing and services for people with intellectual disabilities. According to these resolutions, persons with intellectual disabilities have a right to housing similar to that of other municipal residents. Society must offer them the opportunity to live in individual housing, rather than in institutions or their childhood homes. This also requires that municipalities have individual services to replace institutional care. The municipality social service department together with the person with disability and relatives makes an individual service plan. Every person with disability including persons with intellectual disabilities gets according to this plan services and housing services. Persons with disability are under special legislation (see above) and they are provided housing in either housing units/flats/group homes.

But again, this is a challenge to get it done in practice, so all partners are satisfied. But to "go back" to the institution is not a solution. And referring to deinstitutionalization the objective is that no persons with



intellectual disabilities will be living in institutions by year 2020. To get this done all regions have provided a deinstitutionalization plan. Based on these resolutions, the Government launched a programme to provide housing and services for the intellectually disabled persons (KEHAS) for years 2010-2015 with the aim to enable individual housing arrangements for persons with intellectual disabilities. Consequently, there has been a reduction of institutional care and an increase in housing services. But now (2018) the reduction of institutions goes to slow. To reach the goal Finland have started a new process and ask for commitments from all regions.

The focus on accessibility has increased. Moreover, state renovation grants are awarded for the installation of lifts in older multi-storey residential buildings and, on social grounds, for repairs and renovations of the homes of persons with disabilities (Act 1087/2016, not available in English).

#### **4. Key success factors to put THINA into practice**

The key success with THINA-tool is to assess support quality, Which is needed for persons own identity, personal life situation and the implementation of the rights. This will lead to a chain of clarifications of weaknesses and strengths, existing possibilities and obstacles and increase awareness of the present situation. The assessment will be done at first hand by the users themselves and secondly if needed by the professionals and relatives.

The success factor to put THINA (THINA-framework) in practices is that the analysis will be in three levels (see below a, b and c). If all levels support the same direction towards implementation of Rights and PCA in practice the service quality will higher and the users personal wellbeing will increase.

##### **4.1. Analysis of the professional competence at individual frontline staff level**

The framework of THINA will give the contents and direction. The framework will support the user themselves to make the priorities of the five identity/ identity development factors. Of course in an ordinary daily life situation the framework “ME:s” are adapted in a flexible way. The assessment of the professional support to the user’s personal priorities will open up for:

- the assessment by the users (do they get the support from the professionals to the priorities they have, described in concrete terms – see the framework ME:s)

- the assessment of the professional’s support will use self-assessment, to analyses their support/work (based on what service users have explained they need) and make decisions about what they need to do to improve.
- the assessment will identify the support contents and assess its connections to the five identity aspects.

In short terms:

1. What do I need and what do I have right to as a user and
2. What do professionals support stand for and what is the quality of the support?

THINA tool give answers to four questions, which leads to success factors:

Question	Success factors
What will be redefined?	Redefinition of assessment in THINA is: <ul style="list-style-type: none"> <li>○ assessment of quality of support based on implementation of UNCRPD (compare to the present situation)</li> </ul>
What will the contents (topics) be, which will be assessed in the framework of UNCRPD and PCA?	To use THINA -tool give a better understanding of the quality of support based on the five identity-aspects, implementation of CRPD and PCA .
Who will assess who in the context of Housing services?	It is obvious that the users/ the person themselves assess the support they get for their needs of implementation of rights (example independent living, to make choices and private life – all connected to the person’s identity and identity development).
What service quality development is reflecting in THINA?	The development from Exclusion to Inclusion, from institutions to community-based settings and from excluded roles as seen as only “disabled person”, “eternal child” etc. to included person with equal roles and rights in the society, seen as a citizen

#### 4.2. Analysis of the professional competence at individual managerial staff level

Above is already mentioned the staff self-assessment and this needs to be supported by the housing-service manager.

The same THINA framework applies to the manager, but from another view. From the system point of view. First to analyses how the housing service systems (rules, routines, meetings, decision making systems, time schedules, values etc.) and UNCRPD as well as the person- centered approach support, go the same direction. If not, something needs to be changed /developed. Otherwise there is a risk that staff become squished between the systems and the users personal support-wishes/demands and the service quality will lower.

To refer at managerial staff level is to analyze the responsibility of the contents in THINA assessment framework, do self-investigation and search for underpinning knowledge and give opportunities to training in these topics.

### **4.3. Analysis of professional competence at organizational level**

These three levels of work and assessment of the effects are like a chain, which base (for all of them) is in concrete situations in the daily life, All these small daily situations tells us “something” of the level of service quality. When these daily life situations is connected, looked into with the same “glasses” (UNCRPD and PCA), investigated through the organizational point of view, we can clarify how successful the organization is. The strategies, plans, resources, decisions, etc. are representing the organization and the question is, how representative are these or are they representing something else or a different “world” then right- based, personal daily life in the housing services. Or is there existing through all three levels a commitment to clear quality in line connected to the contents of THINA-framework. The analysis can also describe the commitment level in the organization (for example) to involve service users in the organization. To be involved for example in meetings, plans, decisions, developing housing services etc. By the assessment can a more clear picture be described and find ways to higher service quality as well as the users wellbeing.



## 5. Attachments – the forms to THINA tool

General questions to professionals. Measured in five levels based on your self-evaluation from 5-1 (5 is Yes, very rigorously/every day- 1 is not at all).

	Yes, very rigorously 5	Yes, I read them 4	I have read them partly 3	I have seen and heard about them, but not read them 2	I have not read them at all 1	Comments:
Have You read the United Nations Convention on the Rights of Persons with Disabilities (CRPD)?						
	Yes every day	Yes rather often	Only now and then	Very seldom	Not at all	
Have You used Rights (CRPD) in Your work?						
	Yes every day	Yes rather often	Only now and then	Very seldom	Not at all	
Have You used some other document of Human rights in your work?						Which one?
Summary:						

### Form 1. Space for the notes of the Personal story/narration about Identity-aspect Me.

<p>NOTES: What are the needs the person tells in the story?</p> <p>Notes written in cooperation with the person him/herself.</p>	<b>The Personal Story</b>	
	Name of the storyteller:	Name of the professional:
	Date:	

### Form 2. Connection Form of Identity-aspect Me

The connection between the personal needs, described by the person with disability, in the personal story/narration. What do I need? What is my Rights? This is the process of transformation from of rights to personal daily concrete terms.

<b>NEEDS</b>	To be connected	<b>RIGHTS</b>
Personal Needs obtained from the story		Personal Rights obtained from the story

Results: Needs

### Form 3. Assessment of the implementation: Implementation of Rights connected to the personal needs of Identity-aspect Me

To assess the implementation of rights, picked from the personal story. Please, place a value, fully implemented =2, partly implemented=1 and not implemented=0 in the field which describes the status best! This need to be done together with the person him/her self. Discuss the contents and then assess.



Summary						

**Form 5. Assessment summary of the Forms 1-4 for identity -aspect Me**

**Persons name:**

**Professionals name:**

**Date of Assessment:**

List of personal Rights		List of personal Rights	
<b>Assessment of implementation of rights</b>	<b>Fully implemented</b>	<b>Partly implemented</b>	<b>Not implemented</b>
<b>Summary of the assessment of implementation (2-0)</b>			
<b>Assessment of quality of support</b>	<b>Fully supported</b>	<b>Partly supported</b>	<b>Not supported</b>
<b>Summary of the quality of support (2-0)</b>			
<b>Total summary</b>			

**Form 5. Assessment summary of the Forms 1-4 of the identity-aspect Me– assessment of the quality of implementation of rights and support. The answers can be done in cooperation with the person.**

1. The service user has certain personal rights <sup>4</sup> :	
1.1. Describe in general what Your opinion is of implementation of personal rights?	
1.2. Describe the possibilities in Your work to	

<sup>4</sup> Persona Rights means the rights which has been picked up from the story



	implement personal rights!	
1.3.	Describe the obstacles in Your work to implement the rights!	
2.	The user has certain personal needs (here connected to the identity aspects:	
2.1.	Describe the support of identity needs in Your own work.	
2.2.	What has been the result of this support?	
2.3.	What are the obstacles for to support needs concerning identity – aspects?	

The Personal Story	
Name of the storyteller:	Name of the professional:
Date:	

NOTES: What are the needs the person tells in the story?

Notes written in cooperation with the person him/herself.

**Form 1. Space for the notes of the Personal story/narration about Identity-aspect Me and my close relationships**

**Form 2. Connection Form of Identity-aspect Me and my close relationships**

The connection between the personal needs, described by the person with disability, in the personal story/narration. What do I need? What is my Rights? This is the process of transformation from of rights to personal daily concrete terms.

<b>NEEDS</b>	To be connected	<b>RIGHTS</b>
Personal Needs obtained from the story		Personal Rights obtained from the story


Results: Needs

**Form 3. Assessment of the implementation: Implementation of Rights connected to the personal needs of Identity-aspect Me and my close relationships**

To assess the implementation of rights, picked from the personal story. Please, place a value, fully implemented =2, partly implemented=1 and not implemented=0 in the field which describes the status best! This need to be done together with the person him/her self. Discuss the contents and then assess.

List here the articles (also keywords are ok), from form 2, which are linked to the personal story. List of NEEDS	List of the articles/rights in Easy version Connected RIGHTS	It is fully implemented = 2	It is partly implemented =1	It is not implemented at all = 0	Notes: Why? Why not? Barriers? Possibilities?
<b>Summary</b>					

**Form 4. Assessment of the quality of support, Identity-aspect Me and my close relationships**

What quality of support do I get to the needs?

The assessment of the quality of support. Please, place a value, fully supported =2, partly supported=1 and not supported =0 in the field which describes the status best!

The list of NEEDS	Fully supported = 2	Partly supported = 1	Not supported =0	Fully supported - in what way?	Partly supported – Why?	Not supported – Why?
List of personal Rights						
Assessment of implementation of rights						
Summary of the assessment of implementation (2-0)						
Assessment of quality of support						
Summary of the quality of support (2-0)						
Total summary						
Summary						

**Form 5. Assessment summary of the Forms 1-4 of identity aspect Me and my close relationships**



Persons name:  
of Assessment:

Professionals name:

Date

**Form 5. Assessment summary of the Forms 1-4 of the identity-aspect Me and close relationships – assessment of the quality of implementation of rights and support. The answers can be done in cooperation with the person.**

2. The service user has certain personal rights: <sup>5</sup>	
2.4. Describe in general what Your opinion is of implementation of personal rights?	
2.5. Describe the possibilities in Your work to implement personal rights!	
2.6. Describe the obstacles in Your work to implement the rights!	
3. The user has certain personal needs (here connected to the identity aspects:	
3.1. Describe the support of identity needs in Your own work.	
3.2. What has been the result of this support?	
3.3. What are the obstacles for to support needs concerning identity – aspects?	

**Form 1. Space for the notes of the Personal story/narration about Identity-aspect Me and social contacts**

**Form 2. Connection Form of Identity-aspect Me and social contacts**

The connection between the personal needs, described by the person with disability, in the personal

<b>The Personal Story</b>		<p>NOTES: What are the needs the person tells in the story?</p> <p>Notes written in cooperation with the person him/herself.</p>
Name of the storyteller:	Name of the professional:	
Date:		

<sup>5</sup> Personal Rights means the rights which has been picked up in the story

story/narration. What do I need? What is my Rights? This is the process of transformation from of rights to personal daily concrete terms.

<b>NEEDS</b>	To be connected	<b>RIGHTS</b>
<b>Personal Needs obtained from the story</b>		<b>Personal Rights obtained from the story</b>

Results: Needs

**Form 3. Assessment of the implementation: Implementation of Rights connected to the personal needs of Identity-aspect Me and social contacts**

To assess the implementation of rights, picked from the personal story. Please, place a value, fully implemented =2, partly implemented=1 and not implemented=0 in the field which describes the status best! This need to be done together with the person him/her self. Discuss the contents and then assess.

List here the articles (also keywords are ok), from form 2, which are linked to the personal story. List	List of the articles/rights in Easy version	It is fully implemented = 2	It is partly implemented =1	It is not implemented at all = 0	Notes: Why? Why not? Barriers? Possibilities?
	Connected RIGHTS				

of NEEDS					
<b>Summary</b>					

**Form 4. Assessment of the quality of support, Identity-aspect Me and social contacts**

What quality of support do I get to the needs?

The assessment of the quality of support. Please, place a value, fully supported =2, partly supported=1 and not supported =0 in the field which describes the status best!

<b>The list of NEEDS</b>	Fully supported = 2	Partly supported = 1	Not supported =0	Fully supported - in what way?	Partly supported – Why?	Not supported – Why?
<b>Summary</b>						

**Form 5. Assessment summary of the Forms 1-4 of Me and social contacts**

**Persons name:**

**Professionals name:**

**Date of Assesmnet:**

List of personal Rights	List of personal Rights

The Personal Story	
Name of the storyteller:	Name of the professional:
Date:	

NOTES: What are the needs the person tells in the story?

Notes written in cooperation with the person him/herself.

Assessment of implementation of rights	Fully implemented	Partly implemented	Not implemented
Summary of the assessment of implementation (2-0)			
Assessment of quality of support	Fully supported	Partly supported	Not supported
Summary of the quality of support (2-0)			
Total summary			

**Form 5. Assessment summary of the Forms 1-4 of the identity-aspect Me and social contacts– assessment of the quality of implementation of rights and support. The answers can be done in cooperation with the person.**

3. The service user has certain personal rights <sup>6</sup> :	
3.4. Describe in general what Your opinion is of implementation of personal rights?	
3.5. Describe the possibilities in Your work to implement personal rights!	

<sup>6</sup> Personal Rights means the rights which has been picked up in the story

3.6.	Describe the obstacles in Your work to implement the rights!	
4.	The user has certain personal needs (here connected to the identity aspects:	
4.1.	Describe the support of identity needs in Your own work.	
4.2.	What has been the result of this support?	
4.3.	What are the obstacles for to support needs concerning identity – aspects?	

**Form 1. Space for the notes of the Personal story/narration about Identity-aspect Me and citizenship.**

**Form 2. Connection Form of Identity-aspect Me and citizenship.**

The connection between the personal needs, described by the person with disability, in the personal story/narration. What do I need? What are my rights? This is the process of transformation from of rights to personal daily concrete terms.

<b>NEEDS</b>	<b>To be connected</b>	<b>RIGHTS</b>
<b>Personal Needs obtained from the story</b>		<b>Personal Rights obtained from the story</b>

Results: Needs



**Form 3. Assessment of the implementation: Implementation of Rights connected to the personal needs of Identity-aspect Me and citizenship.**

To assess the implementation of rights, picked from the personal story. Please, place a value, fully implemented =2, partly implemented=1 and not implemented=0 in the field which describes the status best! This need to be done together with the person him/her self. Discuss the contents and then assess.

List here the articles (also keywords are ok), from form 2, which are linked to the personal story. List of NEEDS	List of the articles/rights in Easy version	It is fully implemented = 2	It is partly implemented =1	It is not implemented at all = 0	Notes: Why? Why not? Barriers? Possibilities?
	Connected RIGHTS				
<b>Summary</b>					

**Form 4. Assessment of the quality of support, Identity-aspect Me and citizenship.**

What quality of support do I get to the needs?

The assessment of the quality of support. Please, place a value, fully supported =2, partly supported=1 and not supported =0 in the field which describes the status best!

The list of NEEDS	Fully supported = 2	Partly supported = 1	Not supported =0	Fully supported - in what way?	Partly supported – Why?	Not supported – Why?

Summary				

NOTES: What are the needs the person tells in the story?

Notes written in cooperation with the person him/herself.

**Form 5. Assessment summary of the Forms 1-4 of identity aspect Me and citizenship.**

**Persons name:**

**Professionals name:**

**Date of Assessment:**

List of personal Rights		List of personal Rights	
Assessment of implementation of rights	Fully implemented	Partly implemented	Not implemented
Summary of the assessment of implementation (2-0)			
Assessment of quality of support	Fully supported	Partly supported	Not supported
Summary of the quality of support (2-0)			
Total summary			

**Form 5. Assessment summary of the Forms 1-4 of the identity-aspect Me and citizenship– assessment of the quality of implementation of rights and support. The answers can be done in cooperation with the person.**

4. The service user has certain personal right <sup>7</sup> s:	
4.4. Describe in general what Your opinion is of implementation of personal rights?	
4.5. Describe the possibilities in Your work to	

<sup>7</sup> Personal Rights means the rights which has been picked up in the story

	implement personal rights!	
4.6.	Describe the obstacles in Your work to implement the rights!	
5.	The user has certain personal needs (here connected to the identity aspects:	
5.1.	Describe the support of identity needs in Your own work.	
5.2.	What has been the result of this support?	
5.3.	What are the obstacles for to support needs concerning identity – aspects?	

**Form 1. Space for the notes of the Personal story/narration about Identity-aspect Me and my future**

**Form 2. Connection Form of Identity-aspect Me and my future**

The connection between the personal needs, described by the person with disability, in the personal story/narration. What do I need? What is my Rights? This is the process of transformation from of rights to personal daily concrete terms.

<b>NEEDS</b>	<b>To be connected</b>	<b>RIGHTS</b>
<b>Personal Needs obtained from the story</b>		<b>Personal Rights obtained from the story</b>

Results: Needs

**Form 3. Assessment of the implementation: Implementation of Rights connected to the personal needs of Identity-aspect Me **and my future****

To assess the implementation of rights, picked from the personal story. Please, place a value, fully implemented =2, partly implemented=1 and not implemented=0 in the field which describes the status best! This need to be done together with the person him/her self. Discuss the contents and then assess.

List here the articles (also keywords are ok), from form 2, which are linked to the personal story. List of NEEDS	List of the articles/rights in Easy version  Connected RIGHTS	It is fully implemented = 2	It is partly implemented =1	It is not implemented at all = 0	Notes: Why? Why not? Barriers? Possibilities?
<b>Summary</b>					

**Form 4. Assessment of the quality of support, Identity-aspect Me **and my future****

What quality of support do I get to the needs?

The assessment of the quality of support. Please, place a value, fully supported =2, partly supported=1 and not supported =0 in the field which describes the status best!

The list of NEEDS	Fully supported = 2	Partly supported = 1	Not supported =0	Fully supported - in what way?	Partly supported - Why?	Not supported - Why?

Summary						

**Form 5. Assessment summary of the Forms 1-4 of the identity-aspect Me and my future**

Persons name:

Professionals name:

Date of Assessment:

List of personal Rights		List of personal Rights	
Assessment of implementation of rights	Fully implemented	Partly implemented	Not implemented
Summary of the assessment of implementation (2-0)			
Assessment of quality of support	Fully supported	Partly supported	Not supported
Summary of the quality of support (2-0)			
Total summary in numbers			

**Form 5. Assessment summary of the Forms 1-4 of the identity-aspect Me and my future – assessment of the quality of implementation of rights and support. The answers can be done in cooperation with the person.**

5. The service user has certain personal rights: <sup>8</sup>	
5.4. Describe in general what Your opinion is of implementation of personal rights?	

Questions	Answers
5.5. Describe the possibilities in Your work to implement personal rights!	
5.6. Describe the obstacles in Your work to implement the rights!	
6. The user has certain personal needs (here connected to the identity aspects:	
6.1. Describe the support of identity needs in Your own work.	
6.2. What has been the result of this support?	
6.3. What are the obstacles for to support needs concerning identity – aspects?	

<sup>8</sup> Persona Rights means the rights which has been picked up in the story

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## 7. Annexes

### **Statistics**

**The National Institute for Health and Welfare (THL)** promotes research and development on the independent living of people with disabilities and barrier-free planning, as well as on various services, such as personal assistant, housing, and assistive devices. THL also keeps statistics on disability issues.

The statistical report *Institutional care and housing services on social care 2015* was published in Finnish on 14<sup>th</sup> February 2017.

*According to the aforementioned report, in the year 2015 the number of clients receiving institutional care and housing services under the Act on Special Care for People with Intellectual Disabilities are as follows:*

<i>Institutional care:</i>	1093 (2017 ca 900)
<i>Service housing with 24-hour assistance for persons with intellectual disabilities:</i>	7728
<i>Service housing with part-time assistance for persons with intellectual disabilities:</i>	2006
<i>Supported housing for persons with intellectual disabilities:</i>	1548

Compared to previous years the number of persons in institutional care has decreased and persons in service or supported housing have increased.

There are approximately 6 700 homeless one-person households and 325 homeless families in Finland. Contrary to all the other EU member states, homelessness has decreased in Finland in recent years despite the economic recession and social pressures. This is achieved through consistent partnership between central and local government, private enterprise and organizations.

### **Oversight**

**The National Supervisory Authority on Welfare and Health (Valvira) and Regional State Administrative Agencies** supervise service provision and quality in institutional care and other services.

**The Parliamentary Ombudsman of Finland** provides oversight to ensure that public authorities and officials observe the law and fulfil their duties in the discharge of their functions. The Ombudsman carries out inspections at offices and institutions. This enables him to oversee for example the treatment of persons



confined to institutions. The tasks of the Ombudsman are defined in the Constitution and in the Parliamentary Ombudsman Act (197/2002). Also the Chancellor of Justice supervises the lawfulness of acts by authorities. The Non-Discrimination Ombudsman monitors the prohibition to discriminate in housing for example on the ground of disability.

**The Convention on the Rights of Persons with Disabilities and its Optional Protocol** took effect in Finland in June 2016. To comply with the requirements of Article 33 of the Convention, Finland has developed structures for implementing the Convention and monitoring the implementation. The national focal points under the Convention are the Ministry for Foreign Affairs and the Ministry of Social Affairs and Health. A new Advisory Board for the Rights of Persons with Disabilities was appointed in January 2017. It replaces the earlier National Council on Disability. The Advisory Board operates as a coordination mechanism under the Convention. Its members represent ministries, persons with disabilities or their family members, regional and local government, and labour market organisations. The term of the first Advisory Board will expire in April 2019. The national human rights institution, consisting of the Human Rights Centre, its **Human Rights Delegation and the Parliamentary Ombudsman**, is an autonomous and independent structure that works to promote, protect and monitor the national implementation of the Convention. In June 2016 a human rights committee of persons with disabilities was established as a permanent division under the Human Rights Delegation for the inclusion and participation of these persons and their representative organisations.

**The Housing Finance and Development Centre of Finland (ARA)** awards the above-mentioned interest subsidies and grants for construction, renovation and acquisition of rental dwellings for special groups as well as grants for the installation of lifts for repairs and renovations of the homes of older people and people with disabilities. Special attention is paid to monitoring of the quality of housing and level of housing expenses.



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