

ANALYTICAL SUMMARY

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Professional and Organizational Best Practice

ABSTRACT: By focusing on evidence-based practices this article asks us to pursue jointly what are best practices, who is a professional, and what does it mean to be an effective and efficient organization. Both professionals and organizations provide services and supports that enhance the personal well-being and personal growth of their clientele. In discussing professional and organizational practices, I will suggest that professional best practices begin with respect for the individual and embrace professional standards, professional ethics, evidence-based practices, and impact evaluation. Analogously, I will suggest that organization best practices begin with a commitment to being a values-based entity that is effective and efficient in the provision of services and supports. This organization commitment is reflected in best practices related to high performance teams, the supports paradigm, outcomes evaluation, and continuous quality improvement.

As depicted in Figure 1, the presentation will discuss each of these components of professional and organizational best practices. Additionally, I will suggest that through their reciprocal action, the best practices exhibited by professionals and organizations also create a cultural milieu that directly enhances not only the services and supports provided to the organization's clientele, but also directly impacts the personal well-being and growth of organization personnel, which in turn enhances their effectiveness and efficiency.

KEY WORDS: evidence-based practices; supports; high performance teams.

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Individual Support Plans: enhancing personal outcomes

ABSTRACT: For organizations providing supports to persons with intellectual disability it is their main task to enhance the quality of life of their clients. Individual Support Plans should be designed with this goal in mind. Consequently, important questions in writing an ISP are: 1) What does the person want?, and 2) Which support does the person need? The outcome should obviously be a good quality of life.

Furthermore we emphasize in our work the importance of evidence-based practices. Based on these starting points we propose the following guidelines for an ISP. An ISP should:

- Explore goals and personal perspectives: what does a person want in his life.
- Explore what support a person needs and wants: which supports are important for and which are important to the person.
- Formulate support strategies in answer to the personal goals, wants and needs.
- Monitor in dialogue with the person the process of support.
- Measure personal outcomes.
- Comprise an ongoing system of finetuning and adjusting.
- Use evidence based practices in doing so.
- Be transparent and comprehensible for the person.

Following these guidelines we developed an internet based ISP in which the eight QOL dimensions provide the framework for developing support strategies, the dialogue with the client is built into the system of supports, and evidence based instruments are used to measure support needs and personal outcomes.

KEY WORDS: evidence-based practices; quality of life; Individual Support Plans; personal outcomes.

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FEAPS, 50 years of union for people with intellectual disabilities and their families

ABSTRACT: The Spanish Confederation of Organizations for Persons with Intellectual Disability and Development has completed 50 years. Paradigmatic changes that have happened in these years are analyzed in the article. In short, how it has changed the

social perception and mental models in relation to people with intellectual disabilities, terminology, the exercise of citizenship, intervention models, the evolution of services, the role of families, the environment political and social and, in parallel, how it has evolved FEAPS and your project and what role and power of influence has had on the achievements and progress made since 1964.

KEY WORDS: History of intellectual disability; associations; social perception; citizenship; political and social impact; FEAPS.

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Concept of death in young people with intellectual disability: a contribution to the pedagogy on death

ABSTRACT: Despite being an essential human condition, death is an under-researched area in the effort to improve people with intellectual disabilities' life quality. In this article we describe the concept of death among young people with intellectual disabilities. A mixed research methodology that includes quantitative and qualitative approaches was employed, including both a questionnaire and a semi-structured interview. Results indicate that participants have difficulty understanding of biological dimensions of death. Moreover, it has been found that participants present a wide range of opinions, attitudes and beliefs about death. Conclusions reflect on implications of these results for a possible pedagogy on death in young adults that would include accompaniment during bereavement.

KEY WORDS: concept of death; intellectual disability; pedagogy on death; bereavement.

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Keys to Future in the Care and Support for People with Intellectual and Developmental Disabilities. What Tell us Science?

ABSTRACT: This article describes the contributions of a round table whose main purpose was to respond, by three experts, a series of topics, with the look anytime in the next ten years, such as: the evolution of the concepts of intelligence and adaptive behavior; the diagnostic evaluation of disability; the quality of life as a source of information to evaluate the policies, as well as the practices of the services; the conditions that must have a service to make it really a service focused on the person; services based in the community; the needs of supporting families; the role of the parents; either the own participation of persons with disabilities in the development of services.

The discussion was organized on the basis of three large blocks of content: diagnostic elements, constructs in the field of intellectual disabilities, and provision of support.

This article ends with a Decalogue of conclusions based on the arguments of the parties.

KEY WORDS: people with intellectual disabilities; intelligence; adaptive behavior; quality of life; diagnostic evaluation; self-determination; social inclusion; services focused on the person; families; training of professionals.

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