**Topiclist –Making Choices paper Support Staff**

1. Can you introduce yourself? Who are you and what are your main duties?  
   a. **Prompts:** What are important core values in the work you perform?
2. What choices are made by residents?  
   a. **Prompts:** Are there any policies that guide you in how to handle choice making process? How do residents feel about making their own choices? And how do you support that process?
3. Can you tell us something about the way you support the residents?  
   a. **Prompts:** How would you describe this support style? Are there more support styles that you use? Can you tell me how you apply these styles?
4. Many observations indicated that autonomy, the choices residents make for themselves, is important in providing care to residents. How do you support residents’ autonomy? Do you have any examples of this?   
   a. **Prompts:** How do you determine how much support you give a resident? Do you have examples of this? In what ways do you do this? What does that do to the resident? When do you limit a resident's autonomy? Do you have examples of this? In what ways do you do this? How do you determine when a residents' autonomy needs to be restricted? What do you find difficult/beautiful about this process? What helps you in this process? (Are there certain guidelines that people use?). How do residents feel about making their own decisions? Choices? How do you support that process?
5. When important choices must be made, what does that process generally look like? How is determined how best to involve the resident in making a decision?
6. To what extent is there room for residents to practice their own special hobbies/ habits/ behaviors?  
   a. **Prompts:** where is the line between what can/can't be done? What is considered harmful? How does this relate to the norms and values of members of the support staff?
7. What can you say about the way residents make their own decisions?
8. What role do fixed patterns play in the care you provide?
9. I have noticed that a lot of effort is put into keeping residents calm. Whereby risks and emotions are restricted. Do you recognize this?   
   a. **Prompts:** Also in the personal plans of residents much attention seems to be paid to risk-avoiding behavior.
10. Residents also meet regularly in groups. How are rules, such as the coffee rules, set up?   
    a.**Prompts:** Are there things you notice when residents meet in groups? How do you ensure that everyone can have their own and safe place in the group?
11. The care plans I read actually stated everywhere "given this person's intellectual disability, no further development is possible". What is meant by this?   
    a. **Prompts:** What do you mean by development?
12. This care facility falls under "living in the neighborhood." What exactly does this principle entail? And how do you view this principle? And what do you think of the way this is being put into practice now? How do you see the future of living in the neighborhood?   
    a. **Prompts:** Living in the neighborhood as a principle is not actually addressed in the first-degree strategy either. How can that be?
13. How would you describe your team?  
    a. **Prompts:** How is the atmosphere in the team? What is easy/difficult about working in this team? What are your pitfalls? Do you give feedback on each other's work? How do you do that? What do you wish for the team?
14. Suppose you could wish for something to make the care of these residents even better. What would you wish for?
15. We have now discussed a lot of topics related to making choices. Is there another topic that needs to be discussed?