Person-Centered Planning

June 28, 2016
What is Person-Centered Planning?

- Person-centered planning is a **process** by which an individual, with assistance, identifies and **documents** their preferences, strengths, capacities, and needs in order to develop short-term objectives and action steps to ensure personal outcomes are achieved within the most integrated setting by using identified supports and services.

- This is a living definition and may continue to evolve.
Graphic Representation of a Person-Centered Plan

Person-Centered Plan

- Person’s Strengths
- Person’s Capacities
- Person’s Preferences & Outcomes
- Person’s Needs
- Supports
- Services
- Action Steps
  - Short Term Objectives
The Broad Context of Person-Centered Practices

- **Person-centered thinking** helps to establish the means for a person to live a life that they and the people who care about them have good reasons to value.

- **Person-centered planning** is a way to assist people needing HCBS services and supports to construct and describe what they want and need to bring purpose and meaning to their life.

- **Person-centered practice** is the alignment of service resources that give people access to the full benefits of community living and ensure they receive services in a way that may help them achieve individual goals and outcomes.
Home and Community Based Services Settings

- 2014 Final HCBS settings rule applies to:
  - 1915(c) waivers (HCS, TxHmL, DBMD, CLASS, MDCP, YES)
  - 1915(i) state plan services (HCBS Adult Mental Health)
  - 1915(k) state plan services (Community First Choice)
  - 1115 (STAR+PLUS), (STAR+Kids)
  - HCBS delivered through STAR Health
- Person-centered practices in ICF and nursing facilities, and home health services through other regulations
Person-Centered Planning

• Home and Community Based Services (HCBS) settings rule requires all HCBS to be delivered through a person-centered service planning framework.

• While the state has up to five years to transition into compliance, Community First Choice and HCBS Adult Mental Health had to be compliant upon rollout.


• http://www.hhsc.state.tx.us/medicaid/hcbs/index.shtml
Person-Centered Planning

• A person-centered plan (PCP):
  • Identifies the strengths, preferences, needs (clinical and support), goals and outcomes of an individual
  • Involves what is important to the person in addition to what is important for the person
  • Touches on non-clinical areas including relationships, community life inclusion, competitive employment, finances, wellness, education and other areas, to the same degree of access as individuals not receiving HCBS
Person-Centered Planning

• Driven by the individual and reflects his/her perspective
• Includes people chosen by the individual
• Conducted at a time and place convenient to the individual
• Reviewed, revised annually with a functional need assessment, when circumstances or needs change, and at request of the individual
Person-Centered Planning

• Process must incorporate:
  • Plain language
  • Cultural considerations
  • Strategies for solving disagreement within the planning process
  • Choice regarding services and providers
  • A way for individuals to request an update
  • Risk factors and mitigation strategies
  • Signed documentation, with copies for the individual and representatives
Person-Centered Planning

• Final service plan must reflect:
  • Individual chosen setting and setting integrated in and supports access to the community
  • Opportunities to seek competitive employment and work in integrated settings
  • Opportunities to engage in community life, control personal resources, and receive services in the community to the same degree of access as individuals not receiving HCBS
Person-Centered Planning

• Plan must reflect
  • Individual’s strengths and preferences
  • Clinical and support needs
  • Goals and desired outcomes, as defined by the individual
  • Services, including self-directed services
  • Providers of services and supports, including unpaid natural supports
Person-Centered Planning

- Plan must
  - Be understandable to the individual and the individuals important in supporting him or her
  - Be written in plain language in a manner that is accessible to the individual and those who have limited English proficiency
  - Identify the individual and/or entity responsible for monitoring the plan
  - Prevent the provision of unnecessary or inappropriate services and supports
Person-Centered Planning

• Plan must reflect
  • Risk factors and mitigation strategies
  • Backup plans
  • Individualized modifications to settings requirements
  • Important individuals
  • Responsible individuals
  • Informed consent
  • Signatures of individual and providers
  • Service authorizations
Person-Centered Planning

• Any modifications to the HCBS settings requirements needed by an individual must be supported by a specific assessed need and justified in the person-centered plan.

• The following must be documented in the plan:
  • Identification of a specific and individualized assessed need
  • Positive interventions and supports used prior to modification
  • Less intrusive methods tried
  • Description of the condition that is directly proportionate to the specified need
Person-Centered Planning

• Modifications must be documented in the plan:
  • Regular collection and review of data to review effectiveness
  • Established time limits for periodic review to determine if modification is still needed
  • Informed consent of the individual
  • Assurance interventions and supports will cause no harm
The Learning Community’s person-centered thinking two-day face-to-face training is approved to meet the requirements of the HCBS and Community First Choice rule.

Other training viable with HHSC approval.

More extensive training vs. introductory training according to role in service planning:

- More extensive training required for LIDDA service coordinators, managed care organization service coordinators, and CLASS and DBMD case managers
- Introductory training required for other participants in service planning including nurses, direct care staff
The Learning Community

The Learning Community’s web address:
http://www.learningcommunity.us/
Please click on the States below to locate trainers in your area. If you do not find anyone listed in the state you select, please contact Michael Smull for assistance.
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Trainer: Person Centered Thinking Skills/ Essential Lifestyle Planning; Families Planning Together; Person Centered Thinking Skills (1 page profile)  
Mentor Trainer: Person Centered Thinking Skills/ Essential Lifestyle Planning  
Current Focus Areas: Children/Young people in transition; Developmental disabilities/intellectual disabilities/ learning disabilities; Families

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Person-Centered Planning
Systemic Changes

- A person-centered system requires:
  - The time needed to learn what is important to the person and to support the person in having control over the process and content
  - The skills that underlie strengths-based assessment, development, writing and implementing the plan
  - Structures that support development and implementation
  - The skills and professional latitude to conduct discovery and planning dependent on the person they are working with
Common Concerns & Barriers

- Misunderstandings of the process
- Lack of sufficient ingredients to the process
- Failure to integrate person-centered planning into existing team culture and process
- Unwillingness on the part of professionals to relinquish power to the consumer
- Lack of social and service resources
- Inadequate facilitation
Implementation of PCP Leads to Meaningful Outcomes

• Emerging research shows PCP has a significant IMPACT on OUTCOMES
  • Greater engagement in services
  • Reduced no-show rates/improved medication adherence (Stanhope et. al, 2013)
  • Improved relationships between staff and persons served; more individual involvement in planning; more individualized plans (Lodge, Kaufmann, Stevens-Manser, 2015)
  • Significant improvements in wide range of clinical and recovery outcomes (Tondora et. al, in press)
  • Found employment 53% more often than those that did not participate in person-centered planning (Croke and Thompson, 2011)
Implementation of PCP Leads to Meaningful Outcomes

• Decrease in crisis events and high-intensity service use:
  • reduced emergency room visits
  • inpatient days
  • risk-related behaviors (self harm and harm toward others)
Tools and Resources Cited

• CT Department of Mental Health and Addiction Services

• New York Office of Mental Health, PCRP Resource Page
  https://www.omh.ny.gov/omhweb/pros/Person_Centered_Workbook/

• New York Care Coordination Program
  http://www.carecoordination.org/transformation-initiatives.aspx
Tools and Resources Cited

• Getting in the Driver’s Seat of Your Treatment and Your Life: Preparing for Your Plan (English & Spanish avail)

• Person-Centered Care Questionnaire: Tondora & Miller 2009
Questions

• Person-centered planning training workgroup with HHSC/DADS will consider ideas and proposals

• Minimum criteria for training programs and list of approved trainings in next several weeks

• Questions or concerns can be sent to HCBS mailbox at Medicaid_HCBS_Rule@hhsc.state.tx.us