Person Centered Planning

Basic

St. Clair County
Community Mental Health
www.scccmh.org
Providing Opportunities for Health, Wellness, & Connection

1

Objective

Through Person Centered Planning, individuals served through CMH will identify their hopes, dreams and plans for the future. An Individual Plan of Service (IPOS) will be developed through this process.

This course will provide an overview of the Person Centered Planning process, including:
• Values, Principles and Responsibility
• Roles of the participants
• Relationship between IPOS document and the PCP process

2

Person Centered Planning (PCP) has been required by the Mental Health Code since 1996.

PCP as defined by the Mental Health Code, means a process for planning and supporting the individual receiving services that builds upon the individuals capacity to engage in activities that promote community life and that honors the individuals preferences, choices and abilities. MHC 330.1700(g)

3

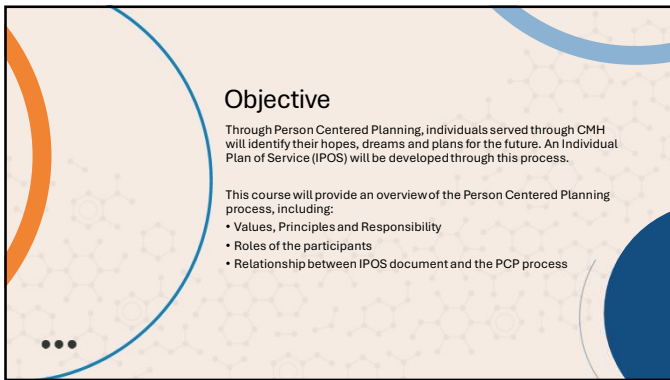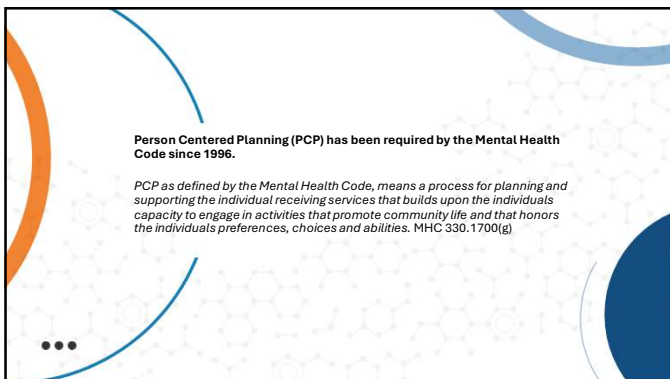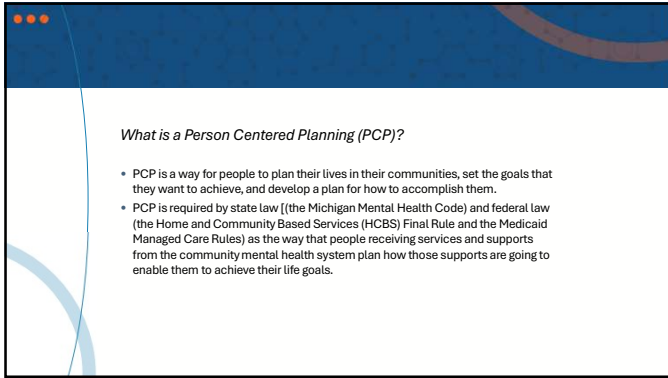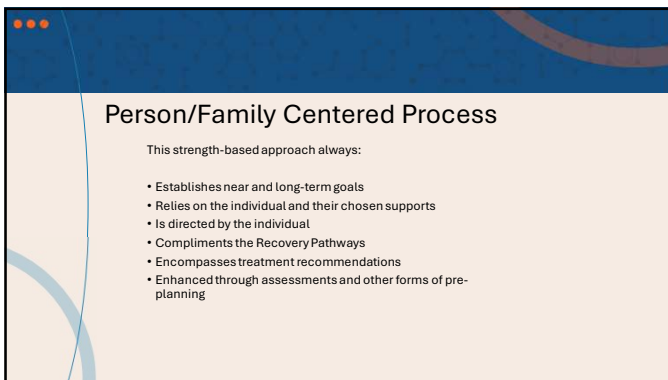### What is a Person Centered Planning (PCP)?

- PCP is a way for people to plan their lives in their communities, set the goals that they want to achieve, and develop a plan for how to accomplish them.
- PCP is required by state law [(the Michigan Mental Health Code) and federal law (the Home and Community Based Services (HCBS) Final Rule and the Medicaid Managed Care Rules) as the way that people receiving services and supports from the community mental health system plan how those supports are going to enable them to achieve their life goals.
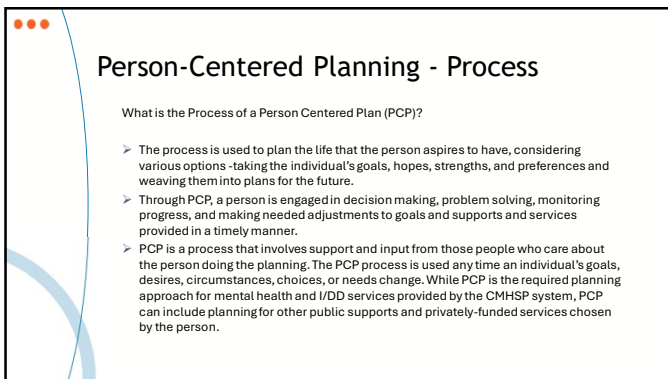
4

Person/Family Centered Process

This strength-based approach always:

- Establishes near and long-term goals
- Relies on the individual and their chosen supports
- Is directed by the individual
- Compliments the Recovery Pathways
- Encompasses treatment recommendations
- Enhanced through assessments and other forms of pre-planning

5

Person-Centered Planning - Process

What is the Process of a Person Centered Plan (PCP)?

- ➢ The process is used to plan the life that the person aspires to have, considering various options -taking the individual's goals, hopes, strengths, and preferences and weaving them into plans for the future.
- ➢ Through PCP, a person is engaged in decision making, problem solving, monitoring progress, and making needed adjustments to goals and supports and services provided in a timely manner.
- ➢ PCP is a process that involves support and input from those people who care about the person doing the planning. The PCP process is used any time an individual's goals, desires, circumstances, choices, or needs change. While PCP is the required planning approach for mental health and I/DD services provided by the CMHSP system, PCP can include planning for other public supports and privately-funded services chosen by the person.

6

Person Centered Planning – HCBS Final Rule

The HCBS (Home- and Community-Based Services) Final Rule

The HCBS Final Rule requires that Medicaid-funded services and supports be integrated in and support full access to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community to the same degree of access as individuals not receiving such services and supports. The HCBS Final Rule also requires that PCP be used to identify and reflect choice of services and supports funded by the mental health system.

7

Person Centered Planning for Children

Circumstances where involvement of a minor's family may not be appropriate:

- The minor is 14 years of age or older and has requested services without the knowledge or consent of parents, guardian or person in loco parentis within the restrictions stated in the Code.

- The minor is emancipated.

- The inclusion of the parent(s) or significant family members would constitute a substantial risk of physical or emotional harm to the minor or substantial disruption of the planning process. Justification of the exclusion of parents shall be documented in the clinical record.

8

Person Centered Planning Values and Principles

Person-centered planning is a highly individualized process designed to respond to the expressed needs/desires of the individual.

- Every individual is presumed competent to direct the planning process, achieve their goals and outcomes, and build a meaningful life in the community. They have strengths, can express preferences, and can make choices.
- The individual's choices and preferences are honored and considered, if not always implemented.

9

Person Centered Planning Values and Principles

Person-centered planning is a highly individualized process designed to respond to the expressed needs/desires of the individual. (Continued)

- Every individual contributes to their community and has the ability to choose how supports and services enable them to meaningfully participate and contribute.
- Through the person-centered planning process, an individual maximizes independence, creates community connections, and works towards achieving their chosen outcomes.
- An individual's cultural background is recognized and valued in the person-centered planning process.

10

Pre-Planning

The following items are addressed through pre-planning with sufficient time to take all necessary/preferred actions.

- Dreams, goals, desires, and any topics which he/she would like to talk about.
- Topics he/she does not want discussed at the meeting.
- Whom to invite.
- Where and when the meeting will be held.
- Who will facilitate this.
- Who will record.
- Format or tools chosen to be used for recording.

11

Who can be a Facilitator?

Who can be an Independent Facilitator?
- An advocate
- Someone you trust
- Someone who puts your needs FIRST
- Someone other than your Case Manager, or Supports Coordinator
- A member of your family

Any person you want, can choose to help you at no charge, or you can facilitate your own PCP. However, to be paid through Medicaid, the facilitator must be free of any financial interest in the outcome of the supports and services outlined in the PCP and be trained to be an Independent Facilitator.

12

Exploring Independent Facilitators

Exploring Independent Facilitators

An Independent Facilitator is an individual who facilitates the Person-Centered Planning (PCP) process in collaboration with the person.

In Michigan, individuals' receiving support through the Community Mental Health Service Provider (CMHSP) have a right to choose an independent or external facilitator for their PCP. The terms independent and external mean that the facilitator is independent of or external from the CMHSP. It means that the person has no financial interest in the outcome of the supports and services outlined in the PCP.

13

Exploring Independent Facilitators

CMHSP's are required to have contracts with enough independent facilitators to ensure availability and choice of people to meet their needs. Independent facilitators must not have any other role within the CMHSP.

The Medicaid Provider Manual (MPM) permits billing for independent facilitation as one aspect of coverage called "Treatment Planning." This is billed to Medicaid under code H0032. Using an independent facilitator is valuable in many different circumstances, not just when there is disagreement or conflict.

14

Exploring Independent Facilitators

The CMHSP must make available a choice of at least two independent facilitators to individuals interested in using independent facilitation.

The facilitator is chosen by the individual and serves as the individual's guide throughout the process, making sure that their hopes, interests, desires, preferences and concerns are heard and addressed.

The facilitator helps the individual with the pre-planning activities and co-leads any PCP meeting(s) with the individual.
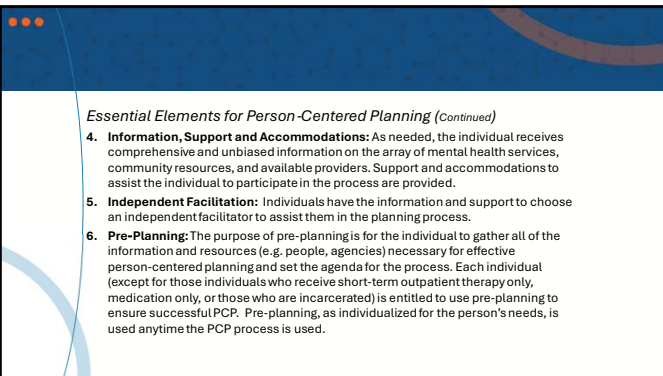
15

Elements of PCP

Essential Elements for Person-Centered Planning

1. **Person-Directed:** The individual directs the planning process (with necessary supports and accommodations) and decides when and where planning meetings are held, what is discussed, and who is invited.

2. **Person-Centered:** The planning process focuses on the individual, not the system or the individual's family, guardian, or friends. The individual's goals, interests, desires, and preferences are identified with an optimistic view of the future and plans for a satisfying life. The planning process is used whenever the individual wants or needs it, rather than viewed as an annual event.

3. **Outcome-Based:** Outcomes in pursuit of the individual's preferences and goals are identified as well as services and supports that enable the individual to achieve his or her goals, plans, and desires and any training needed for the providers of those services and supports. The way for measuring progress toward achievement of outcomes is identified.
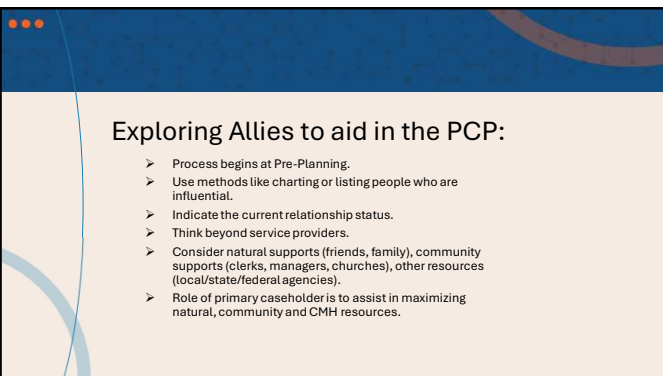
16

Essential Elements for Person-Centered Planning (Continued)

4. **Information, Support and Accommodations:** As needed, the individual receives comprehensive and unbiased information on the array of mental health services, community resources, and available providers. Support and accommodations to assist the individual to participate in the process are provided.

5. **Independent Facilitation:** Individuals have the information and support to choose an independent facilitator to assist them in the planning process.

6. **Pre-Planning:** The purpose of pre-planning is for the individual to gather all of the information and resources (e.g. people, agencies) necessary for effective person-centered planning and set the agenda for the process. Each individual (except for those individuals who receive short-term outpatient therapy only, medication only, or those who are incarcerated) is entitled to use pre-planning to ensure successful PCP. Pre-planning, as individualized for the person's needs, is used anytime the PCP process is used.

17

Exploring Allies to aid in the PCP:

➢ Process begins at Pre-Planning.
➢ Use methods like charting or listing people who are influential.
➢ Indicate the current relationship status.
➢ Think beyond service providers.
➢ Consider natural supports (friends, family), community supports (clerks, managers, churches), other resources (local/state/federal agencies).
➢ Role of primary caseholder is to assist in maximizing natural, community and CMH resources.

18

Recording the Meeting

Recording options are endless and much like PCP should be individualized.

Examples of method options include:
- Charts, markers, drawings
- Table top charts and markers
- Secretary style note taker
- Prepared index card topics
- Technology-computer for collaborative documentation

19

Strategies to Assist in PCP

There are endless strategies to assist an individual to understand PCP.
Here are a few suggestions:
- Spend time with the individual
- Foster power sharing
- Evoke the person's experiences
- Support autonomy
- MAPS - The McGill Action Planning System (MAPS) is a planning process that helps create a roadmap for a student's success by bringing together key people in the student's life. The process is centered on the student, their gifts, and their relationships with others.
- PATH - Planning Alternative Tomorrows with Hope, (PATH), is a participatory planning process which places people at the center, allowing participants to develop a vision and a means to accomplish it via graphic facilitation of ideas.
- PFP - Personal Futures Planning (PFP) focuses on what an individual CAN do, rather than what she cannot do. PFP uses discussions with the family and people at the center of the individual's life to drive the planning, rather than relying on written reports by professionals.
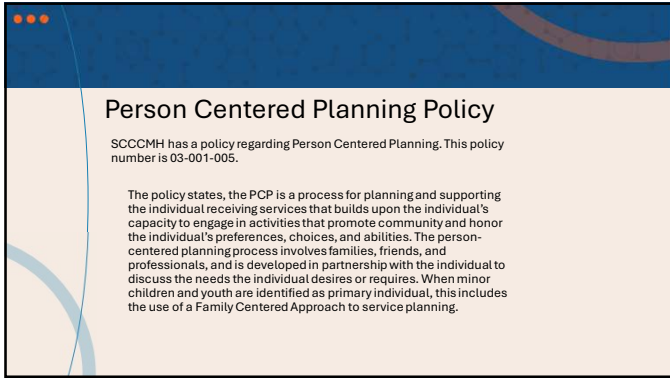
20

Barriers to Consider

Individuals may encounter various barriers that can affect achieving their dreams and goals and may require others to mention for discussion.

Some include:
- Communication
- Mobility
- Transportation
- Vulnerability
- Financial Security
- Lack of personal responsibility
- Lack of allies
- Social Acceptance
- Privacy

21

Person Centered Planning Policy

SCCCMH has a policy regarding Person Centered Planning. This policy number is 03-001-005.

The policy states, the PCP is a process for planning and supporting the individual receiving services that builds upon the individual's capacity to engage in activities that promote community and honor the individual's preferences, choices, and abilities. The person-centered planning process involves families, friends, and professionals, and is developed in partnership with the individual to discuss the needs the individual desires or requires. When minor children and youth are identified as primary individual, this includes the use of a Family Centered Approach to service planning.
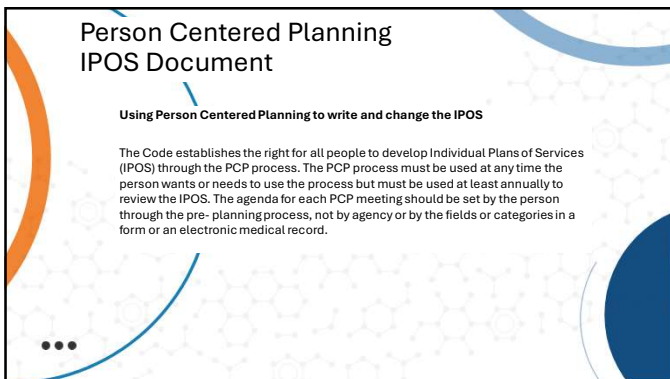
22

Agency Standards

❖ **Individual Awareness/Knowledge:** information is understandable and accessible.
❖ **Person Centered Culture:** Policy, training and supports are available
❖ **Training:** all staff are provided with PCP philosophy training and direct care staff are trained on the written plan when directly involved.
❖ **Roles and Responsibility:** The plan indicates, specifically who will be responsible for each item identified whether individual, natural or paid support.
❖ **Quality Management:** Best practices, training and satisfaction measured to ensure consistency and achievement.
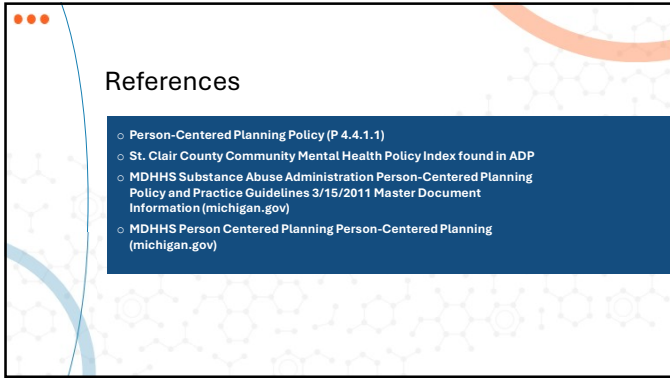
23

Person Centered Planning IPOS Document

Using Person Centered Planning to write and change the IPOS

The Code establishes the right for all people to develop Individual Plans of Services (IPOS) through the PCP process. The PCP process must be used at any time the person wants or needs to use the process but must be used at least annually to review the IPOS. The agenda for each PCP meeting should be set by the person through the pre- planning process, not by agency or by the fields or categories in a form or an electronic medical record.
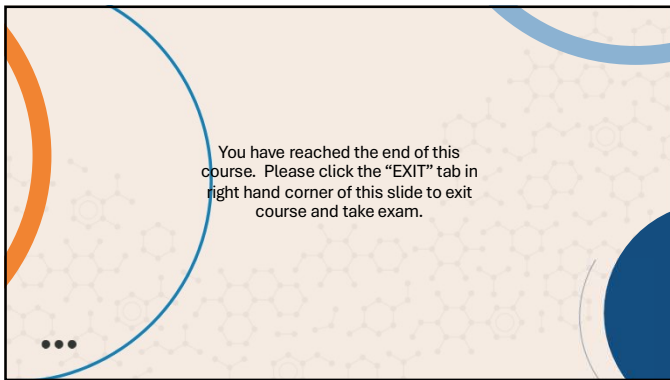
24

References

- Person-Centered Planning Policy (P 4.4.1.1)
- St. Clair County Community Mental Health Policy Index found in ADP
- MDHHS Substance Abuse Administration Person-Centered Planning Policy and Practice Guidelines 3/15/2011 Master Document Information (michigan.gov)
- MDHHS Person Centered Planning Person-Centered Planning (michigan.gov)

25

You have reached the end of this course. Please click the "EXIT" tab in right hand corner of this slide to exit course and take exam.

26