



# Person Centered Thinking, Planning, and Practice: The Federal Policy Context

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# Person-Centered Policy

Section 2402(a) of the Affordable Care Act requires the Secretary of Health and Human Services to ensure all states receiving federal funds:

- Develop service systems that are responsive to the needs and choices of beneficiaries receiving home and community-based services (HCBS) and community-based long-term services and supports (LTSS).
- Maximize independence and self-direction.
- Provide support coordination to assist with a community-based supported life.
- Achieve a more consistent and coordinated approach to administration of policies and procedures across programs.

# ACA Section 2402(a): Oversight and Assessment of the Administration of Home and Community Based Services

- [Section 2402\(a\) Guidance](#) issued by Secretary Sebelius on June 6, 2014
- Includes HHS-Wide Standards for
  - Person Centered Planning
  - Self-Direction
- **Person Centered Planning and Self Direction** standards must be implemented in all Department of Health and Human Services programs that fund HCBS.

## 2402(a) Across HHS

- CMS HCBS Final Rule
  - eLTSS ONC Project
- SAMHSA included in AOT Demonstration Program and Certified Community Behavioral Health Clinics
- ACL Person Centered Counseling Training Program: component of the ADRC No Wrong Door grant program.
- Quality
  - NQF HCBS group: PCP will be a significant area for measure development
  - NIDILRR RRTC on HCBS Outcomes

# Options Counseling vs. Person Centered Counseling

- Options Counseling is a Job Title/Category with practice standards for many people working in a State NWD System.
- Person Centered Counseling is a training program to impart person centered thinking, planning, and practice skills to people working in HCBS systems including Options Counselors and others in the State No Wrong Door System.



**CMS Final Rule Published January 26, 2014-  
Effective March 17, 2014**

Requires a person-centered service plan  
for each individual receiving Medicaid  
HCBS

# The Broad Context of Person-Centered Practice

- **Person-centered thinking** co-creates 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 receive services in a way that may help them achieve individual goals.

# Person-Centered Service Plans

- The person-centered planning process is driven by the individual
- Includes people chosen by the individual
- Provides necessary information and support to the individual to ensure that the individual directs the process to the maximum extent possible
- Is timely and occurs at times/locations of convenience to the individual



# Person Centered Service Plans will:

- Assist the person in achieving personally defined outcomes in the most integrated community setting,
- ensure delivery of services in a manner that reflects personal preferences and choices, and
- contribute to the assurance of health and welfare.

And that it:

- Reflects cultural considerations
- Uses plain language
- Includes strategies for solving disagreement
- Offers choices to the person regarding services and supports the person receives and from whom
- Provides a method to request updates

# The Plan

Identifies:

- the strengths,
- preferences,
- needs (clinical and support), and
- desired outcomes of the individual

The plan also includes risk factors and plans to minimize them

# Written Person-Centered Service Plan Documentation

- Written plan reflects -
  - Setting is chosen by the individual and is integrated in, and supports full access to the greater community
  - Opportunities to seek employment and work in competitive integrated settings
  - Opportunity to engage in community life, control personal resources, and receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS

# Person-Centered Service Planning Modification Requirements

- 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:
  - Identify a specific and individualized assessed need
  - Positive interventions and supports used prior to modification
  - Less intrusive methods tried
  - Describe the condition that is directly proportionate to the specified need

# Person-Centered Service Planning Modification Requirements, cont.

- Must be documented in 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
  - Assure interventions and supports will cause no harm

# **Quality Person-Centered Service Plans Will Ensure that Planning Leads to Important Individually Defined Outcomes**

- People have control over the lives they have chosen for themselves
- They are recognized and valued for their contributions (past, current, and potential) to their communities
- They live the lives they want

# **In Order to Meet the Criteria and the Intent of the Ruling, Person-Centered Service Planning 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 more or less discovery and planning in general depending on the person they are working with.

# How Can I&R Specialists Deliver & Implement Person-Centered Thinking, Planning and Practice?

- It requires ongoing goal of understanding and commitment to the person
- Many are already performing person centered thinking, planning, and practice activities, but, like any practice, there is always more to learn, develop, and apply.
- Successful implementation requires system-wide commitment (e.g. just training is not enough).



# Skills I&R Specialists Already Have

- Negotiation
- Dispute resolution
- Engagement
- Active Listening
- Strengths based thinking/positive attributes
- Empathy
- Individual and systems advocacy
- Cultural humility, competency
- Openness to learning
- Critical and creative thinking
- Team Building
- Customer service

# Core Strategies to Promote Moving Toward Person-Centered Systems

- Develop and promote a statewide vision & universal understanding of person-centeredness across all state agencies involved in LTSS
- Align practices, structures, and priorities for those who develop plans with the criteria for good person centered service plans
- Build quality measurement frameworks that link measurement to person-centered service plans
- Support service providers to build capacity to support more community-based options
- Devise reimbursement methodologies to incentivize meeting the spirit as well as the letter of the HCBS rule.