Person-Centered Planning

Centers for Medicare and Medicaid Services' Definition

A Closer Look

at the Centers for Medicare and Medicaid Services' Definition of Person-Centered Planning

Person-centered planning reaches beyond service planning to help friends and supporters understand an individual's needs and preferences and plan for a positive future. It is not a new idea; it has been around for almost 20 years. The Centers for Medicare and Medicaid Services (CMS), the federal Medicaid agency, has highlighted person-centered planning and is promoting its use through Home and Community Based Services Waivers. CMS describes person-centered planning this way:

"Person-centered planning is a process, directed by the family or the individual with long term care needs, intended to identify the strengths, capacities, preferences, needs and desired outcomes of the individual. The family or individual directs the family or person-centered planning process. The process includes participants freely chosen by the family or individual who are able to serve as important contributors. The family or participants in the person-centered planning process enables and assists the individual to identify and access a personalized mix of paid and non-paid services and supports that will assist him/her to achieve personally-defined outcomes in the most inclusive community setting. The individual identifies planning goals to achieve these personal outcomes in collaboration with those that the individual has identified, including medical and professional staff. The identified personally-defined outcomes and the training supports, therapies, treatments, and or other services the individual is to receive to achieve those outcomes becomes part of the plan of care."

CMS' definition of person-centered planning is a good starting place for individuals, their family members, and supporters to begin to understand person-centered planning and its benefits.

Person-Centered Principles
John O'Brien
and Connie Lyle

Community presence: the sharing of the ordinary places that define community life.

Choice: the experience of autonomy both in small, everyday matters (e.g., what to eat or what to wear) and in large, life-defining matters (e.g., with whom to live or what sort of work to do).

Competence: the opportunity to perform functional and meaningful activities with whatever level or type of assistance is required.

Respect: a valued place among a network of people and valued roles in community life.

Community participation: the experience of being part of a growing network of personal relationships that include close friends.

A Closer Look... (continued)

"Person-centered planning is a process..."

Person-centered planning is not a one-time event. It is an ongoing activity that allows people who care about an individual to listen, to learn, and to lend support to that person. The process is interactive and lifelong. While a written plan may be a product of the planning process, the plan is only as good as the effort that goes into listening to the individual, learning what is important to and for the individual, and lending time and energy to support the individual on an everyday basis.

"...directed by the family or the individual..."

In person-centered planning, the person who is to be supported and his or her family controls the process rather than case managers, agencies, or service providers. It is not an activity organized by staff to assist in getting the plan of care written. The presence of the individual and/or their family member(s) at a planning meeting and their participation in needs assessments or preference inventories, while a good thing, is not person-centered planning. The individual and his or her family actively direct the process. Many individuals may find that being at the center of the planning process is difficult at first because their experiences have not provided them with opportunities to "run the show" when it comes to expressing how they want their lives to look. Many family members who have experience in planning for their own daily lives may not feel very skilled at helping a family member translate needs and preferences into supports and services that are complicated by rules and regulations, and are sometimes in short supply. Thus case managers and other providers are essential in helping individuals and families take leadership roles in directing the planning process.

Like many things that we do in life, person-centered planning gets better with practice. Initial attempts may feel awkward or even unsuccessful, but time and effort pay off. The inexperience that we feel in doing this type of planning is the very reason that person-centered planning is often a "facilitated process", meaning that the different tools available to be used in person-centered planning come with instructions and a person trained in walking us through the process.

"...intended to identify the strengths, capacities, preferences, needs and desired outcomes of the individual..."

Looking at how an individual can live a life filled with choices, connections, and contributions requires a shift in our usual thinking away from a deficit and needs based model. We are so focused on needs, slots and programs that we often do not see giftedness and strengths. We are not used to asking for and following the directions of the person and those who know him/her best.

"Traditional forms of planning are based on the ideal of the developmental model...emphasizing the deficits and needs of people, overwhelming people with endless program goals and objectives, and assigning responsibility for decision-making to professionals. Traditional planning often reinforces the status quo of organizations by focusing solely on accomplishments that are possible within existing programs and structures" (John O'Brien and Connie Lyle O'Brien). Person-centered planning helps us to focus on a person and in so doing make room for a new way of thinking that makes us listen and learn about the abilities of individuals. After learning how a person wants to live, we can then develop an understanding of how the person's disabilities challenge that vision, and work together to identify and provide needed supports.

"...The process includes participants freely chosen by the family or individual who are able to serve as important contributors..."

Person-centered planning encourages the participation of family, friends, professionals and community members in the process of listening to and discovering the goals, preferences, gifts, and potential contributions of the individual. There is no set number of people who must be part of a person-centered planning team. However, since helping an individual become better connected to his or her community is a key part of person -centered planning, those who know and care about the person are encouraged to enroll and lend their support, resources, creativity, and problem solving skills. It is not just the writing of a plan, but also the means to make it happen, that is critical to successful planning.

"...The family or participants in the person-centered planning process enables and assists the individual to identify and access a personalized mix of paid and non-paid services and supports that will assist him/her to achieve personally-defined outcomes in the most inclusive community setting..."

Successful person-centered planning is directed at a larger picture-- exploring and defining how an individual wants his or her life to be. While it may include Medicaid waiver and/or other publicly funded services it is more comprehensive and holistic than just service planning. The process can begin at any time in an individual's life, and, because it is a process, it reflects changes as the individual's experiences change. CMS rightly draws the connection to the wider community where natural supports exist for all of us.

"...The individual identifies planning goals to achieve these personal outcomes..."

Perhaps the reason that person-centered planning can be such a natural fit with service planning is that they are both goal oriented processes. The major difference with person-centered planning is that the outcomes of the plan are defined by the individual and those who know and love him or her best. While goals established through the person-centered planning process may include the development of skills, the identification of those skills is driven by what the individual says he or she wants to accomplish.

"...in collaboration with those that the individual has identified, including medical and professional staff..."

CMS points out that the selection of the members of the planning team is based on whom the individual wants. One of the major problems of our current community based services is that they do not support individuals in making meaningful community connections. As a result, many individuals who do not have family members also do not have friends and community relationships to support them in this planning process. While this may make the challenge greater it also argues for the importance of person-centered planning.

"...The identified personally-defined outcomes and the training supports, therapies, treatments, and or other services the individual is to receive to achieve those outcomes becomes part of the plan of care."

Life planning and service planning come together in person-centered planning. Focusing on the "person" in person-centered planning ensures that the individual, his or her family, and other supporters move beyond program planning for the individual and look at the whole picture of the individual's life. Goals, objectives, therapies, treatments, and other services become means to an end, a present and a future defined by the individual and those who know him or her best. As one self-advocate sums it up, "*My parents always had a dream for my brothers and sisters for when they grew up, but nobody had a dream for me, so I never had a dream for myself. You can never have a good life if nobody ever has a dream for you, unless you learn to have a dream for yourself"* (Connie Martinez).

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