Person-Centered Thinking

INTEGRATED HEALTH HOME

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## This training is a collaborative effort between the Managed Care Organizations and Iowa Medicaid

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### Logistics

- ► Mute your line
- ▶ Do not put this training on hold
- Attendance and engagement are expected
- ► Type questions as you like in the chat and they will be addressed at the end of the training.



# Why to provide Person-Centered Care Coordination

We act on what is important to a person because it:





### What is Person-Centered Thinking?

- ► Taking time to discover the members preferences, goals, and needs.
- ► Challenges traditional approach
- ► Attempts to end control of members lives and put them in the driver's seat
- ▶ Dignity is at the core of the process
- ► Respects that the person has their own vision for their life.



#### Traditional Care vs. Person-Centered Care

#### **Traditional Care**

**Deficit Based** 

Focused on fixing problems

Professional make decisions

Control: is with professionals

Goals decided for

Stabilization is result

Fit person and treatment into program

#### **Person-Centered**

Strength-based

Focused on supporting in learning skills

Person makes decisions

Control: partnership/shared decision making

Driven by individual's goals

Quality of life

Individualized programming



### What is Person-Centered Thinking?



- ➤ A deliberate method to see the whole person.
- ► Focus should not be "fixing what is wrong"
- ► All people have gifts to share
- ► A set of skills that result in teams keeping the focus on the person.
- No room for agency issues/turf wars
- ▶ Discover, describe and assure the desired life of the person being supported.

# Principles of Person- Centered Thinking

- ▶ Person is a partner in their own health care, and the health and wellbeing of the person is the focus of care
- ► Incorporate the person's family knowledge, values, beliefs and cultural backgrounds into the planning and delivery of care
- ▶ Being enabling where systems and services are oriented towards supporting persons to recognize and build upon their own strengths, preferences and goals, to achieve their full potential.
- Supports the person to make informed decisions about, and successfully manage, their own health and social care at the level they choose, including choices about when to let others act on their behalf.



# Principles of Person- Centered Thinking

- ► Collaboration between the person, their family and staff to influence policy and service design and development and be partners in evaluation.
- ► Achieving a person-centered **CULTURE** requires a change in behavior and mindset supported by a system that puts the person at its heart.
- ► A whole system approach that values people, innovation, learning and teamwork throughout the organization.
- ▶ Demonstrates appreciation and respect for the unique contribution that people make regardless of position or status.



## Person-Centered Thinking

Key Values	
Self-Determination	Employment
Community	Strengths-Based Practices
Self Advocacy	Natural Supports
Supported Decision Making	Cultural Humility
Choice and Risk	The Power of Language
Empowerment	



# Implement Person-Centered thinking

Care Coordinator should ask person: where, when and who; regarding any meetings that needs to take place.

Care Coordinator reflects cultural considerations of the individual and provides information in plain language and in a manner that is accessible

Care Coordinator should empower member to lead the meeting or choose a delegate that is present.

Care Coordinator should ensure the member is given the opportunity to share their feedback, thoughts, opinions on each section of the plan.

Care Coordinator should confirm with member they agree to any changes or updates that the team is discussing.

## PCSP Implementation

▶ Person-centered service plan must reflect the services and supports that are important for the individual to meet the needs identified through an assessment of functional need, as well as what is important to the individual regarding preferences for the delivery of such services and supports.



# Vital to success with Person-Centered thinking



At no point should decisions be made that are primarily:

- To punish
- For staff convenience
- To benefit the agency
- Or in place of necessary treatment



## Person first language

- Helps us focus on the person
  - Not the diagnosis
  - Not the negative behavior
  - Not the barriers
- ► Incorporate it
  - Speak it
  - Write it
  - Model it



## Person first language

- ▶ Use the members preferred name
- ▶ If diagnosis needs to be used, that should come last
  - Person with Schizophrenia diagnosis
  - Sally has a Schizophrenia
  - Tommy uses a wheelchair



What is **IMPORTANT TO** a person includes what results in feeling satisfied, content, comforted, fulfilled, and happy.

What others see as necessary to help the person are things <a href="MPORTANT FOR">IMPORTANT FOR</a> a person.

- Relationships (People to be with)
- ► Status and control (valued role)
- ▶ Rituals & routines (cultural and personal)
- ► Rhythm or pace of life
- ▶ Things to do and places to go (something to look forward to)
- ► Things to have

- ► Be valued (social rules, laws)
- ► Be a contributing member of their community (functional skills, citizenship)
- ► Issues of health
- ▶ Prevention of illness
- ► Treatment of illness/medical conditions
- ▶ Promotion of wellness (diet, exercise, sobriety)
- ► Issues of safety



## What's Important TO vs FOR the Member



Important to and for by Michael Smull

Michael Smull. helen sanderson associates (March 18.2011) Important to and For (Video File) Retrieved from https://www.youtube.com/watch?v=VDqERIxM4HM Important To Important For Tool



### **Best Practice**



**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 reason to value.



**Person-centered planning** is a way to assist people who need HCBS and supports to construct and describe what they want and need to bring purpose 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.



### **Tools**

- ► MAPS (Making Action Plans)
- ► PATH (Planning Alternative Tomorrow with Hope)
- ► Essential Lifestyle Planning

- ► Wellness Recovery Action Plan (WRAP)
- ► Relationship Maps
- ► Routines & Rituals
- ► Good Day/Bad Day
- ▶ Learning Log



### Sources

- ► Molina Healthcare Person Centered Training
- ► <u>Person Centered Planning | The Learning Community for Person</u> Centered Practices
- ► Title 42 of the CFR -- Public Health
  - 42 CFR §435.905(b)
  - 42 CFR §441.301(c)(1)
  - 42 CFR §441.301(c)(2)
  - 42 CFR §441.725(a)
  - 42 CFR §441.540(a)

