

**A Culture of  
Person-Driven Care**

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**CENTER FOR  
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*at Case Western Reserve University*



A partnership between the Jack, Joseph and Morton Mandel School of Applied Social Sciences & Department of Psychiatry at the Case Western Reserve School of Medicine

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**Learning Objectives**

1. Contrast a traditional system approach versus a person-driven approach to care.
2. Explain SAMHSA's 10 Guiding Principles of Recovery.
3. Describe elements of person-driven assessment.
4. Discuss Shared-Decision Making as a key process in person-driven recovery planning.

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## Traditional System-Driven Approach

- Disabilities, deficits, dysfunction, and problems drive treatment. Focus in on illness/functional impairment.
- Clinical stability is the priority. (Improvement in other life domains comes later, if ever)
- Compliance with practitioner's instructions and recommendations is expected/valued
- Medical record is restricted to practitioners (e.g., assessments and other documentation)

Adapted from Tondora, Miller, Davidson (2012)

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## Traditional System-Driven Approach (cont.)

- Facility-based settings and professional supports
- Linear progress and movement through an established continuum of services is expected
- Primary emphasis is on professional services
- Avoidance of risk; protection of person and community

Adapted from Tondora, Miller, Davidson (2012)

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## Traditional System-Driven Approach vs. Person-Driven Approach

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<b>System-Driven Approaches</b>	<b>Person-Driven Approaches</b>
Disabilities, deficits, dysfunction, and problems drive treatment. Focus in on illness/functional impairment.	Interest, abilities, and personal choices define treatment/support options. Focus is on recovery/promoting health.
Clinical stability is the priority. (Improvement in other life domains comes later, if ever).	Recovery, self-determination and community inclusion are viewed as fundamental. Quality of life is valued. Prioritization of all life domains based on personal choice.

ADAPTED FROM TONDORA, MILLER, DAVIDSON (2012)

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<b>System-Driven Approaches</b>	<b>Person-Driven Approaches</b>
Compliance with practitioner's instructions and recommendations is expected/valued.	Active participation, choice and empowerment is vital
Medical record is restricted to practitioner (e.g., assessments and other documentation).	All parties have access to the same information and information is shared readily between them
Facility-based settings and professional supports.	Setting is flexible based on person's preferences. Professional and natural supports are both valued

ADAPTED FROM TONDORA, MILLER, DAVIDSON (2012)

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<b>System-Driven Approaches</b>	<b>Person-Driven Approaches</b>
Linear progress and movement through an established continuum of services is expected.	Person chooses from a flexible menu of services and supports and/or creates new support options with team.
Primary emphasis is on professional services.	Emphasis is on diverse supports (professional services, non-traditional services, and natural supports).
Avoidance of risk; protection of person and community.	Balance between risk and growth is sought.

ADAPTED FROM TONDORA, MILLER, DAVIDSON (2012)

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## Person-Driven Approach: A Path to Recovery

“Nothing about me without me”

(Valerie Billingham, 1998)

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## What is Recovery?

*SAMHSA working definition of recovery:*

A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

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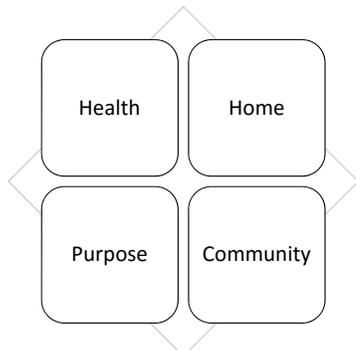
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## Four Major Dimensions Supporting a Life of Recovery



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Hope	Person-Driven	Many Pathways	Holistic
Respect	SAMHSA's 10 Guiding Principles of Recovery		Peer Support
Strengths Responsibility	Address Trauma	Culture	Relational

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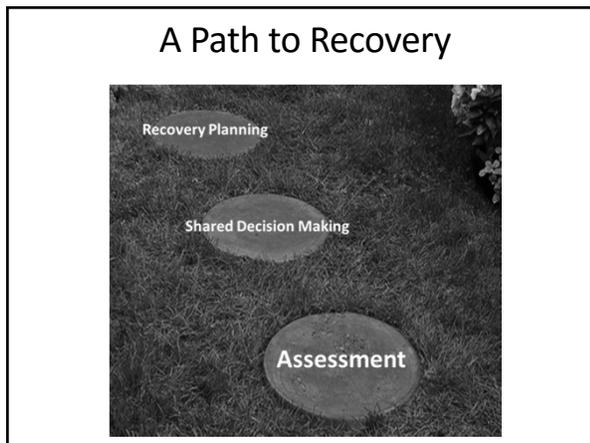
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**Person-Driven *Assessment***

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- Purpose: To gather information
- Essential first step in shared decision making and creating a recovery plan
- The plan is only as good as the assessment
- Identifying the unique attributes and needs of individuals and families is the essence of being person-centered

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**Person-Driven Assessment**

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- Guides the process of planning and implementing person-centered supports
- Purpose is to deepen and broaden understanding of the person

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**Elements of Person-Driven Assessment**

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- Engage the person – Explore the person’s desired goals and preferences
- Screen for co-occurring conditions (mental health, substance-related, and other physical health conditions)
- Identify strengths, attributes, skills and resources
- Determine supports and barriers to person’s desired goals and preferences

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**Elements of Person-Driven Assessment (cont.)**

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- Identify cultural and communication needs and supports
- Identify challenges and areas of focus for treatment
- Determine diagnoses
- Establish the level of care
- Discuss with person their readiness for change
- Identify potential natural supports for recovery
- Guide development of initial recovery plan

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### Person-Driven Assessment

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- Informal discussions with people often reveal more information about the person's goals and preferences
- It is common for people to share more about themselves (after the initial assessment) as the relationship develops and they discover more about themselves

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### Person-Driven Assessment

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- A continuous process as people change through life experiences, events and learning
- Important for provider to keep up with those changes and adjust accordingly
- Assessment is a process not an event

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TRADITIONAL ASSESSMENT	PERSON-DRIVEN ASSESSMENT
<ul style="list-style-type: none"> <li>• Problem-driven</li> <li>• Determine diagnosis</li> <li>• Gather history</li> <li>• Functional impairment</li> <li>• Level of care determination</li> </ul>	<ul style="list-style-type: none"> <li>• Recovery-driven</li> <li>• Personal preferences</li> <li>• Future focused</li> <li>• Strengths-based</li> <li>• Quality of life</li> <li>• Prioritization of all life domains</li> </ul>

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**Person-Driven Assessment**  
combined with  
**Shared Decision-Making**  
guides the **Recovery Planning**  
process

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## Shared Decision-Making

Shared decision-making is the foundation of person-driven recovery planning

Leads to:

- Improved wellness outcomes
- Better engagement in services
- Increased treatment adherence
- Receipt of a higher quality of care
- Less medical errors

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## Shared Decision-Making

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Process between the person and provider that is:

- Interactive
- Collaborative
- Guides the course of care and recovery

Includes the person's freedom to choose among alternatives, including doing nothing

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## Shared Decision-Making

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Skills critical to Shared Decision-Making:

- Engaging
- Agenda setting/mapping
- Reflective listening
- Exploring the advantages and disadvantages of various treatment options
- Establishing a mutually agreed upon Recovery Plan

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## Barriers to Shared Decision-Making

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- Beliefs that individuals lack the capacity to make informed decisions
- Provider discomfort with shared power (shift in role)
- Individuals may lack confidence in their ability to direct their own care
- Public fear and prejudice

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## SAMHSA Shared Decision Making in Mental Health



<http://media.samhsa.gov/consumersurvivor/sdm/StartHere.html>

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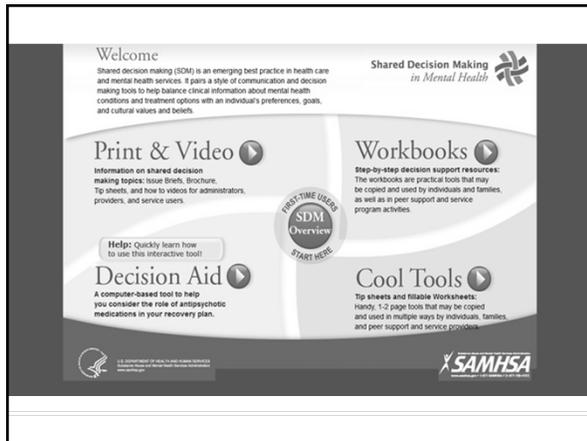
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## Person-Driven Recovery Planning

- Keeps the focus on the person as the key decision-maker in their own life
- Based on the person's preferences
- Includes what matters most to the person
- Developed by the team: person, members of their support system, provider, others in their network and community

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## Person-Driven Recovery Planning

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The Recovery Plan:

- Goal: Person identifies “meaningful life in the community”
- Person-first language
- Developed collaboratively
- Self-directed action steps (build upon person’s strengths)
- Includes interventions beyond paid professional services

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## Person-Driven Recovery Planning

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- Is flexible and responsive to the person’s changing interests and priorities
- Engages the person in his/her own recovery
- Emphasis placed on the *person* actively defining his/her own recovery path
- Leads to important life changes for the person as goals are realized and new goals emerge

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## Person-Driven Recovery Planning Success Indicators

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- Planning is person-driven
- Plan identifies and integrates natural supports *and* paid services
- Informal community resources are used
- Planning is responsive to changing priorities, opportunities and needs
- Planning and funding are connected to outcomes and supports, not programs

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## Formal Reassessment

- A formal and comprehensive reassessment should occur at least annually
  - Including a systematic review of all *Elements of Person Driven Assessment*
- Briefer, focused and more frequent reassessment is indicated for inpatient and residential settings
- Quarterly recovery plan reviews are often considered the maximum amount of time to evaluate progress and conduct reassessment

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## Formal Reassessment

- Organizations often struggle to conduct formal, regular, periodic reassessment of individuals
- It is common for organizations to report they do ongoing assessment of the individuals needs and progress towards goals
- In reality, there is often a lack of documentation in the individuals record to reflect regular, ongoing assessment/reassessment

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## Formal Reassessment

- Funding and regulatory agencies often specify criteria for reassessment
- There is significant variance among organizations regarding practice guidelines for reassessment
- It is common for current service plans to be based on old and outdated assessments

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## Person-Driven (Re)Assessment Success Indicators

- People feel welcomed and heard
- People have the authority to plan and pursue their own vision
- Assessment of needs is fair and accurate
- Identify personally defined quality of life

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RECOVERY IS A JOURNEY  
NOT A DESTINATION

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## Contact Us

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