A Culture of Person-Driven Care
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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.
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)

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)

Traditional System-Driven Approach vs. Person-Driven Approach
<table>
<thead>
<tr>
<th>System-Driven Approaches</th>
<th>Person-Driven Approaches</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disabilities, deficits, dysfunction, and problems drive treatment. Focus in on illness/functional impairment.</td>
<td>Interest, abilities, and personal choices define treatment/support options. Focus is on recovery/promoting health.</td>
</tr>
<tr>
<td>Clinical stability is the priority. Improvement in other life domains comes later, if ever.</td>
<td>Recovery, self-determination and community inclusion are viewed as fundamental. Quality of life is valued. Prioritization of all life domains based on personal choice.</td>
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**ADAPTED FROM TONDORA, MILLER, DAVIDSON (2012)**

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<td>Compliance with practitioner’s instructions and recommendations is expected/valued.</td>
<td>Active participation, choice and empowerment is vital</td>
</tr>
<tr>
<td>Medical record is restricted to practitioner (e.g., assessments and other documentation).</td>
<td>All parties have access to the same information and information is shared readily between them</td>
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<tr>
<td>Facility-based settings and professional supports.</td>
<td>Setting is flexible based on person’s preferences. Professional and natural supports are both valued</td>
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<td>Linear progress and movement through an established continuum of services is expected.</td>
<td>Person chooses from a flexible menu of services and supports and/or creates new support options with team.</td>
</tr>
<tr>
<td>Primary emphasis is on professional services.</td>
<td>Emphasis is on diverse supports (professional services, non-traditional services, and natural supports).</td>
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<tr>
<td>Avoidance of risk; protection of person and community.</td>
<td>Balance between risk and growth is sought.</td>
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**ADAPTED FROM TONDORA, MILLER, DAVIDSON (2012)**
Person-Driven Approach: A Path to Recovery

“Nothing about me without me”
(Valerie Billingham, 1998)

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.

Four Major Dimensions Supporting a Life of Recovery

- Health
- Home
- Purpose
- Community
<table>
<thead>
<tr>
<th>Hope</th>
<th>Person-Driven</th>
<th>Many Pathways</th>
<th>Holistic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respect</td>
<td>SAMHSA’s 10 Guiding Principles of Recovery</td>
<td>Peer Support</td>
<td></td>
</tr>
<tr>
<td>Strengths Responsibility</td>
<td>Address Trauma</td>
<td>Culture</td>
<td>Relational</td>
</tr>
</tbody>
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A Path to Recovery

Person-Driven Assessment

- 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
Person-Driven Assessment

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

Elements of Person-Driven Assessment

- 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

Elements of Person-Driven Assessment (cont.)

- 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
Person-Driven Assessment

- 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

Person-Driven Assessment

- 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

<table>
<thead>
<tr>
<th>TRADITIONAL ASSESSMENT</th>
<th>PERSON-DRIVEN ASSESSMENT</th>
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<tr>
<td>Problem-driven</td>
<td>Recovery-driven</td>
</tr>
<tr>
<td>Determine diagnosis</td>
<td>Personal preferences</td>
</tr>
<tr>
<td>Gather history</td>
<td>Future focused</td>
</tr>
<tr>
<td>Functional impairment</td>
<td>Strengths-based</td>
</tr>
<tr>
<td>Level of care determination</td>
<td>Quality of life</td>
</tr>
<tr>
<td></td>
<td>Prioritization of all life domains</td>
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</tbody>
</table>
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
Shared Decision-Making

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

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

- 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
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
Person-Driven Recovery Planning

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

Person-Driven Recovery Planning

- 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

Person-Driven Recovery Planning

Success Indicators
- 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
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

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

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
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

RECOVERY IS A JOURNEY
NOT A DESTINATION