Training Future Professionals on Person-Centered Planning and Participant Direction

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Welcome & Introductions

Today's Presenters

Dr. Kevin Mahoney



Dr. Doreen Higgins



About You

County/Tribal ADRC
Long-term Care Facility
Health Care/Medical Providers
Human Services Departments
Adult Protective Services
Agencies Serving Individuals
with Disabilities/ILC
Managed Care Organizations
Other

Partnerships Project Background and Overview

- New York Community Trust in conjunction with the Council on Social Work Education Gero-Ed Center
- Prepares BSW and MSW students with PC/PD competencies
- Targets Aging and Disability Resource Centers (ADRCs) and social work programs in Administration for Community Living's eight Enhanced ADRC Options Counseling states and New York City
 - Connecticut, Maryland, Massachusetts, New Hampshire, Oregon, Vermont, Washington, Wisconsin
- Builds upon GeroRich Programs and Gero-Ed Center's successful utilization of planned change model of curricular and organizational change



Project Goals

- Prepare future social workers with competency based learning to implement and evaluate PC and PD long-term services and supports within the Aging and Disability Network.
- Create partnerships between social work programs and ADRCs/VNSNY partners to promote student internships, continuing education and other training activities.

- Develop students as leaders in aging and disability practice.
- Infuse curriculum with PC/PD content.
- Identify additional resources to sustain and expand these partnerships.
- Provide stipends for students in ADRC internships.

What We Will Cover

- Larger Context: The Aging of America
- Changing World of Professional Practice in Aging-related Services
- Partnerships Project Overview, Goals and Outcomes
- What is Person-Centered Practice and Participant Direction (PC/PD)

- PC/PD Approaches to Professional Practice
- Self-Awareness
- Importance of Partnerships
- Consumer as Expert
- Person-Centered Communication
- Partnership Project Successes

Today's Session



- Understand importance of training future PC/PD service delivery.
- Learn about the Partnerships Project and ADRC collaboration efforts which prepare students for PC/PD practice.
- Understand PC/PD philosophy and practice within the network of community-based long-term services and supports.
- Identify PC/PD approaches and skills for professional practice to enhance self-determination and positive outcomes.

The Larger Context: The Aging of America Sets the Stage



- * We are a population getting older and living longer
- Long-term care needs will continue to grow as population ages
- Preferences for community-based living will continue to drive service delivery
- * The provision of Person-centered practice and Participant-directed services will serve to enhance quality of life and improve effectiveness of services and supports

The Larger Context: The Changing World of Practice

- Affordable Care Act, Section 2402a Facilitate PC/PD
 - ► HHS is to ensure that states develop service systems that are person-centered and <u>responsive to the needs and choices of beneficiaries</u> including their desire for self-direction
 - Section 3506 Facilitate Shared Decision Making
 - ▶ DHHS is required to establish a program that develops, tests, and disseminates certificated patient decision aids

The Changing World of Practice

- ▶ Affordable Care Act
 - ▶ Section 2703 Medical (Health) Home Expansion
 - Coordinated care to ensure access to a multi-disciplinary array of services to treat the "whole" person" from a person-centered perspective
 - Section 2405 Aging and Disability Resource Center Expansion
 - ▶ Single integrated entry point for both persons with disabilities and older adults: PD programs to be in every community (Community Living Connections)

The Changing World of Practice

- Veteran-Directed Home and Community Based Services
- ▶ Federal Long-term Care Commission 2013
 - Participant-directed LTSS (PD-LTSS) is an option that would facilitate successful rebalancing efforts
- Increasing numbers of people of all ages want options of choice and control
 - Autonomy central to sense of self
 - Growing diversity of American population
 - ▶ One size does not fit all





Why Person-centered Planning?

At the heart of health reform and the ACA

Positive influence on quality of fife

Levels the playing field

Fosters selfdetermination



Improves effectiveness of services and supports

Employs an empowerment perspective

Why Participant Direction?

Increasing numbers of people of all ages want this option

Growing diversity of the American population; one size does not fit all

Evidence-based approaches

Research shows benefits for participants, their families, and their workers "Among a representative group of AARP members over the age of 50, 75% preferred managing services for themselves over receiving care from an agency."

PC/PD Cross-cuts a Variety of Populations and Practice Settings

Developmental Disabilities

- Self-Determination
- Individual/Family-Directed
- Centers for Independent Living

Mental Health

Recovery

Medical

- Informed Consent/Decision Making
- Shared or Participatory Decision Making

Aging and Disability

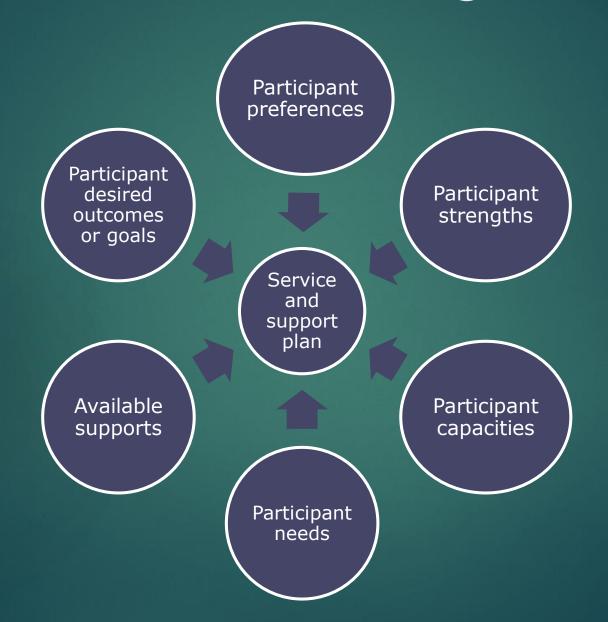
- Person-Centered
- Consumer-Directed

Person-Centered Planning & Participant-Directed Services

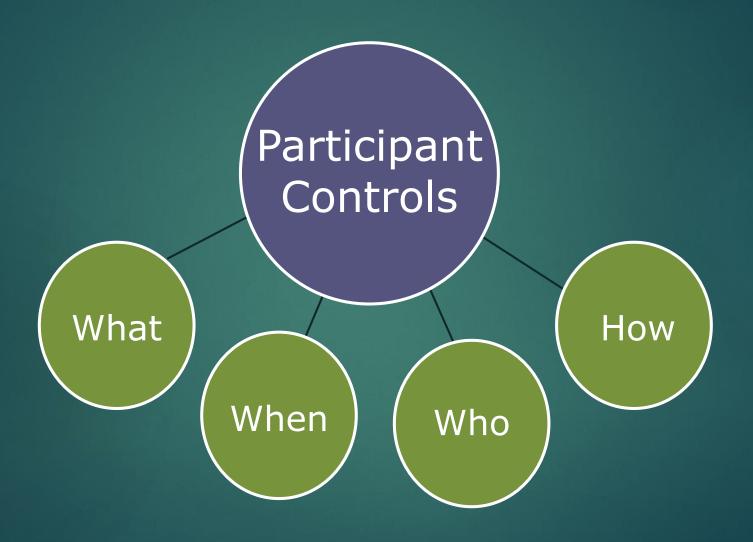
Person-Centered Planning

- ► First implemented with adults with disabilities
- Values of community inclusion, dignity, respect for self-determination
- Individual is at center of planning process
- Plan reflects on what is most important to the person
- Holistic focus
- Emphasis on strengths, preferences, goals, needs, and desired outcomes

Person-Centered Planning



Participant Direction



Traditional versus PD Services

Traditional

Workers recruited and report to agency Case Program managers and determine agency needs & set tasks services Participant Worker Agency training specifies required salary and by benefits agency Normal work hour schedule

Participant-Directed



Shift in Responsibility for Risks



Participant is responsible for decision-making, safety, and adequacy of services

Participants have the opportunity to learn from their mistakes

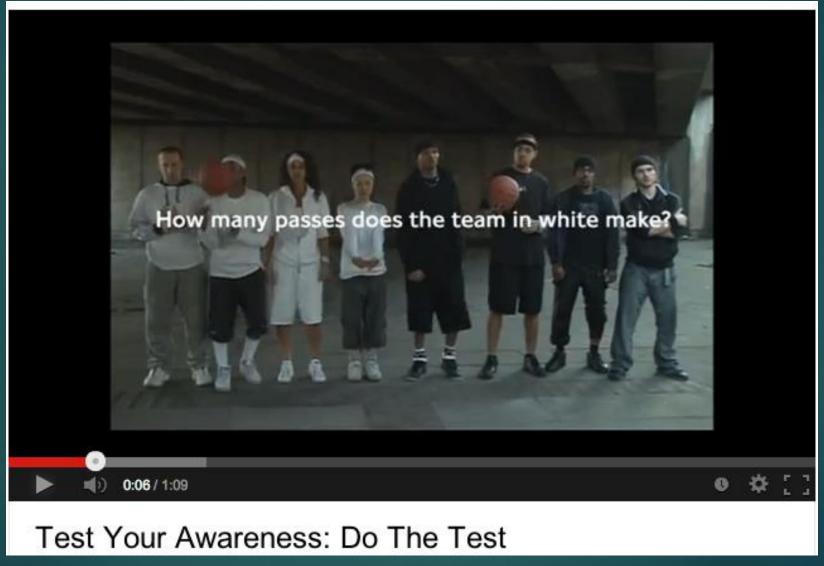
Effectiveness and quality are measured by the participant



PC/PD Approach: A Paradigm Shift



Exercises for Paradigm Shift

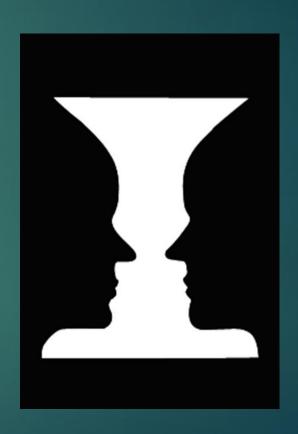


https://www.youtube.com/watch?v=KB_ITKZm1Ts

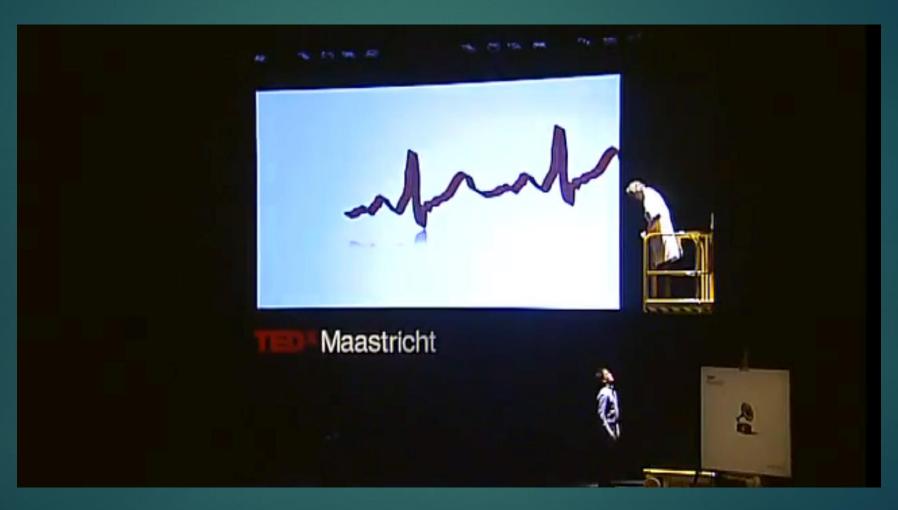
The Paradigm Shift from "Expert" to Coach and Trainer

What is a Paradigm Shift?

- "One conceptual world view is replaced by another"
 (Thomas Kuhn, 1962)
- A change from one way of thinking to another



"From God to Guide"



https://www.youtube.com/watch?v=LnDWt10Maf8

Knowledge, Values and Skills for Professional Practice

- Dignity & Worth of the Person
- Importance of Relationships
- Belief in the Individual's Ability to Change
- Self-determination
- Uniqueness of the Individual
- Non-judgmental Approach
- Integrity
- Competence

Professional Practice and PC/PD

- Examination of own assumptions
- Relationships matter
- "Start where the client is at"
- Consumer as expert on their needs, wants, life plans
- Person-first language and examples
- Rights to self-determination
- Self-determination presumes knowledge of choices



Self-Awareness: Examination of Assumptions and Beliefs

- Your assumptions and beliefs about older people and people with disabilities provide underpinnings for practice.
- Self-reflection and education on myths and stereotypes are essential to good practice.
- ▶ Biases and deep-seated beliefs may not be conscious.



"If you want to help others, it is important to know yourself, so be sure you are able and willing to do some introspection."

Margo Gordon, Professor Emerita, University of Kansas

Myths and Stereotypes

Common Ableism & Ageism Stereotypes

- Illness/Institutions
- Mental Decline
- Uselessness
- Isolation
- Poverty
- Mental Health/Depression
- Sexless/Ugly
- Older people become more childlike as they age

Practice Challenges

- Ageism
- Ableism
- Uselessness
- Dependency
- Loss
- Sex/Physical Intimacy

Person-Centered Communication

Person-first Language

- Person first language affirms individual humanity
- Discriminatory and labeling language is hurtful, upsetting and can even be illegal
- A person is not a diagnosis, illness, or condition
- Recognize the person first

Examples:

- "A person with bi-polar disorder" versus "She/he is bi-polar."
- "Person with paraplegia" versus "a paraplegic"
- "Brain injury" versus "brain damaged"
- "Person with Alzheimer's" versus "Alzheimer's victim"

Person-Centered Communication and Skills

- Avoid jargon and 'psychobabble'
- Employ active listening skills
- Use open ended questions to elicit conversation
- Pay attention to your presence of self: "Be with" the person
- Use of gestures and body posture should demonstrate interest in the consumer's story



- Remember that relationships are important to the change process but take time to develop
- Taking time to know and to understand the consumer is essential to PC/PD practice
- Get to know consumers, their beliefs, values, cultural practices and preferences

Partnerships Project Successes

- Recognition of the importance of collaborations among Aging and Disability Network partners and academic institutions in preparation of students.
- Accomplishment and pride of connection with a nationwide movement in PC/PD practice via ADRC partnerships & curricular infusion.
- Needs, wishes, desires and dreams of older people and individuals with disabilities are respected and realized.
- Development of a deep appreciation by students for work with older people and individuals with disabilities
- ► Employment opportunities: Partnerships Project students at UW Green Bay were offered (and accepted) employment at the ADRC which hosted their internship upon graduation in May of 2015.

What Students Say...

"As a result of this project, I have significantly increased my includes it with disabilities. This includes knowledge of older adults and strengthning persons with disabilities and strengthning persons. Before beginning a first-hand look at particular beginning persons. Before ady knew included the second productions. Before ady knew in a field placement, I already with these these populations. Before ady knew in a desire to work with these my field placement, I already with the sire is and individuals. Now, that desire is individuals. Now, the knowledge and I am individuals. Now, the knowledge and I am individuals are the strengthened by the knowledge chosen the experience I have chosen the confident that I have chosen the right path."

"Between observing ADRC staff members and working with consumers myself, taking a personcentered approach with consumers has become more natural as I find myself employing such principles almost unconsciously by now."

"Throughout my time in the social work program, I have become familiar with the NASW Code of Ethics and the values of the social work profession. These concepts have been intertwined in class lectures, papers, and projects over the past two years. However, it was not until my field placement began at the ADRC that I was able to practice and live so many of these values in a professional setting. Values such as self-determination, service, social justice, and the worth of each person are embedded in the ADRC mission and services. Because of this, I was able to develop a deep understanding of the profession, both cognitively and experientially. "

What Students Say...

"In terms of personcentered and participantdirected practice, every
directed and participantstaff member did a great
staff member did a grea

"The opportunity to interact with members of the agency's target population on a daily basis helped me strengthen my direct practice skills as a social worker. I style regarding various skills such as a social worker. I engagement and assessment. Not only while working with consumers, but I centered approach."

"The overall experience at the ADRC has been rewarding, as well as eventful. I feel the work done at the ADRC is satisfying for me, and I am eager to make a difference in the community."

THANK YOU