NATIONAL QUALITY FORUM

Person-Centered Planning and Practice

Orientation Web Meeting

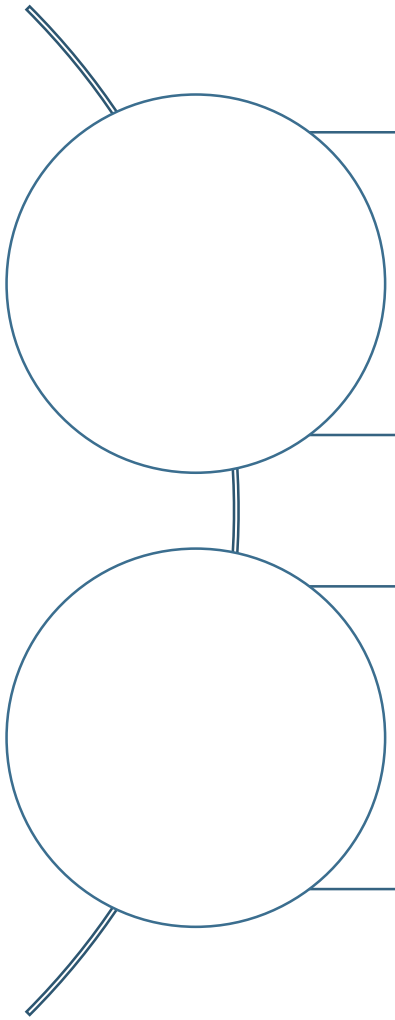
May 3, 2019

Welcome

NQF Project Team

- Sam Stolpe, PharmD, MPH, Senior Director
- Debjani Mukherjee, MPH, Senior Director
- Kate Buchanan, MPH, Senior Project Manager
- Yvonne Kalumo-Banda, MSc, Project Manager
- Jordan Hirsch, MPH, Project Analyst

Meeting Objectives



Provide an overview of project scope and Committee charge

Review and input on draft operational definition of person-centered planning

Disclosure of Interests and Introductions

Person-Centered Committee Members

- **Gretchen Napier MSHA, CMC** - Co-chair
- **Cheryl Phillips, MD, AGSF** - Co-chair
- Glenda Armstrong, BSN, RN
- Pearl Barnett, MPA
- Sally Burton-Hoyle, MS, EdD
- Amber Carey-Navarrete
- Bruch Chernof, MD
- Bevin Croft, MPP, PhD
- Amber Decker
- Gail Fanjoy, MS
- Susan Fegen, LVN, PCTCMT, PCTCT
- Sara Link, MS
- Joseph Macbeth
- Denise Myler
- Melissa Nelson
- Patricia Nobbie, PhD
- Kate Norby
- Ann O'Hare, MD, MA
- Leolinda Parlin, BA
- Richard Petty, MBA
- Mia Phifer, MSJ
- Michael Smull
- Dori Tempio, MS
- Janis Tondora, PsyD
- Maggie Winston

Overview of NQF

The National Quality Forum: A Unique Role

- NQF was created in 1999 by a coalition of public- and private-sector leaders after the President's Advisory Commission on Consumer Protection and Quality in the Healthcare Industry concluded that an organization like NQF was needed to promote and ensure patient protections and healthcare quality through measurement and public reporting.
- **Mission**: The trusted voice driving measurable health improvements
- **Vision**: Every person experiences high-value care and optimal health outcomes
- **Values**: Collaboration, Leadership, Passion, Excellence, Integrity

NQF Activities in Multiple Measurement Areas

- Performance Measure Endorsement
  - *600+ NQF-endorsed measures across multiple clinical areas*
  - *15 empaneled standing expert committees*
- Measure Applications Partnership (MAP)
  - *Advises HHS on selecting measures for 20+ federal programs*
- National Quality Partners
  - *Convenes stakeholders around critical health and healthcare topics*
- Measurement Science
  - *Convenes private and public sector leaders to reach consensus on complex issues in healthcare performance measurement*
- Measure Incubator
  - *Facilitates efficient measure development and testing through collaboration and partnership*

Background

Background

American Taxpayer Relief Act (2012) authorized Commission on Long-Term Care: Report to Congress*

- Findings
  - *$130 billion/year for long-term services and supports (LTSS)*
  - *Expect dramatic LTSS growth in next 20 years*
- Recommendations
  - *Improved focus on quality in LTSS*
  - *Particular attention to home and community-based services (HCBS)*

*Commission on Long-Term Care, Report to the Congress. September 2013. http://www.medicareadvocacy.org/wp-content/uploads/2014/01/Commission-on-Long-Term-Care-Final-Report-9-18-13-00042470.pdf

2014 NQF HCBS Report

- HHS awarded a Task Order to NQF to convene a multistakeholder Committee
  - *Identify home and community-based services (HCBS) measurement gaps*
  - *Prioritize measurement opportunities*
- The 2014 Committee identified 11 domains for measure development, including person-centered planning and practice.

Current Person-Centered Planning and Practice Landscape

- States struggle to implement person-centered planning (PCP)
- Requests for federal assistance from states:
  - *Operational definitions*
  - *How to reconfigure systems to support PCP*
  - *How to structure payment for PCP*
  - *How to select and implement quality measures to effectively evaluate the impact of PCP*

Future Need

- 21 million Americans expected to require LTSS and PCP
- In 2012, KFF estimated that:
  - *Of Americans 65+, 70% will use LTSS*
  - *Americans who are 85+ are 4x as likely to need LTSS than those ages 65-84*

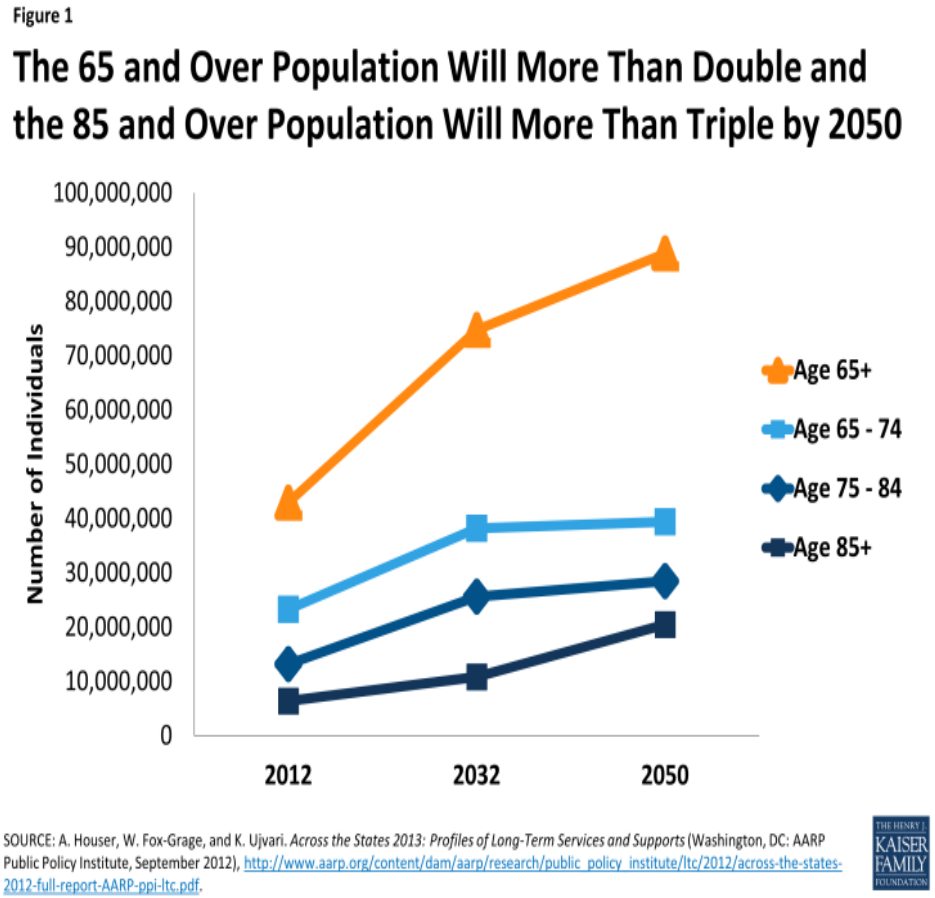


Figure 1: https://kaiserfamilyfoundation.files.wordpress.com/2015/05/8617-02-figure-1.png

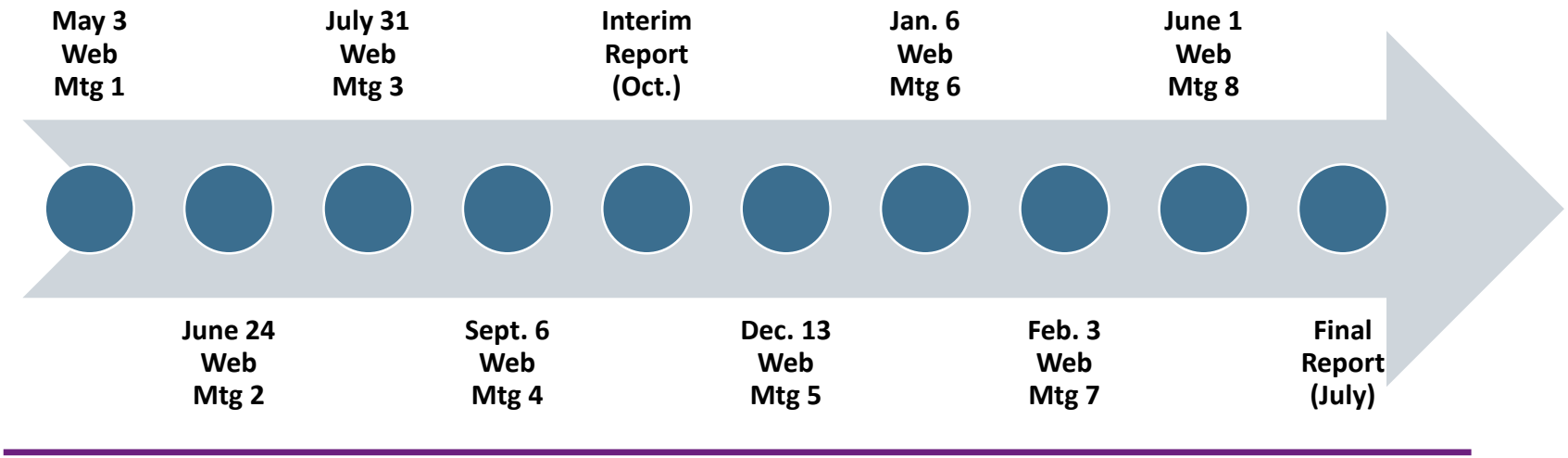
Committee Charge

Person-Centered Planning and Practice Committee Charge

In the course of eight web meetings, the Committee will:

- Refine the current definition(s) for person-centered planning (PCP);
- Develop a set of core competencies for performing PCP facilitation;
- Make recommendations to the Department of Health and Human Services (HHS) on systems characteristics that support PCP;
- Develop a conceptual framework for PCP measurement; and
- Create a research agenda for future PCP research.

Project Timeline



May 2019

July 2020

Comprehensive Report

- The culmination of the project is a comprehensive report providing recommendations to HHS on the following:
  - *Person-centered planning (PCP) definition*
  - *Core competencies of people performing PCP facilitation*
  - *Recommendations for systems characteristics that support PCP*
  - *Framework for PCP measure development*
  - *Environmental scan and brief historical development of PCP in LTSS systems*
  - *Research agenda for PCP*
- Prior to finalization, the report will be posted for a 30-day public comment period

Draft Definition of Person-Centered Planning

Research Process

- NQF staff reviewed current definitions of PCP
  - *2014 NQF HCBS report*
  - *Final HCBS rule*
  - *Federal guidance*
- Then conducted a literature search
  - *Peer-reviewed articles*
  - *Grey literature*
  - *State Medicaid*

HCBS Final Rule

"To fully meet individual needs and ensure meaningful access to their surrounding community, systems that deliver HCBS must be based upon a strong foundation of person-centered planning and approaches to service delivery. Thus, we proposed to require such a process be used in the development of the individualized person-centered service plan for all individuals to be served by section 1915(i) of the Act benefit. We proposed certain requirements for developing the person-centered service plan, but noted that the degree to which the process achieves the goal of person-centeredness can only be known with appropriate quality monitoring by the state, which should include substantial feedback provided by individuals who received or are receiving services."

-Medicaid Program; State Plan Home and Community-Based Services, 5-Year Period for Waivers, Provider Payment Reassignment, and Home and Community-Based Setting Requirements for Community First Choice and HCBS Waivers (Jan. 2014)

NQF HCBS Committee Definition

" [A]n approach to assessment, planning, and coordination of services and supports that is focused on the individual's goals, needs, preferences, and values. The person directs the development of the plan, which describes the life they want to live in the community. Services and supports are coordinated across providers and systems to carry out the plan and ensure fidelity with the person's expressed goals, needs, preferences, and values."

-Quality in Home and Community-Based Services to Support Community Living: Addressing Gaps in Performance Measurement (Sept. 2016)

Administration for Community Living Definition

"Person-centered planning (PCP) allows individuals to be engaged in the decision making process about their options, preferences, values, and financial resources. Individuals in need of services or who are planning for the future have access to one-one-counseling in a variety of settings, including within the home, community residence, acute care hospital, school settings, or several other settings based on the individual's needs. PCP is a valuable tool for the aging and disability networks that can improve access to care through streamlined partnerships, technology, and resources that put the focus on the needs of people and their caregivers.

The PCP approach identifies the person's strengths, goals, preferences, needs, and desired outcomes. The role of staff, family, and other team members is to enable and assist the person to identify and access a unique mix of paid and unpaid services to meet their needs, and to provide support during planning and implementation.

When done thoughtfully, PCP creates a space of empowerment—a level playing field—that allows for consideration of personal preferences as well as health and safety needs, without unnecessarily restricting freedoms. The best person-centered planning helps people to live better lives, with support to do the things most important to them."

- https://acl.gov/programs/consumer-control/person-centered-planning

State Definition – Minnesota

"Person-centered practices are based on the fundamental principle that government and service providers must listen to people about what is important to them to create or maintain a life they enjoy in the community.

When a person-centered approach is used, support and service planning is not driven by professional opinion or limited service options. Instead, planning looks at services and supports in the context of what it takes for a person to have the life they want. The person along with his/her support team identifies effective support and services that will help the person live, learn, work, and participate in preferred communities on his/her own terms.

These practices encourage professionals to see people as unique and whole individuals with potential and gifts to share. Using these practices, professionals and informal support people learn what is important to each person and what contributes to each person's quality of life. "Person-centered" services are an alternative to "system-centered" or "professionally-driven" approaches."

MN DHS

State Definition – California

"Person-centered planning, for the purposes of this manual, is an approach to determining, planning for and working toward the preferred future of a person with developmental disabilities (a consumer) and her or his family. The preferred future is what the person and family want to do in the future based on their strengths, capabilities, preferences, lifestyle and cultural background. Person-centered planning is a framework for planning and making decisions. It is not a collection of methods or procedures. Person-centered planning is based on an awareness of, and sensitivity to, the lifestyle and cultural background of the consumer and family."

CA DDS

Literature Search Results

- NQF Staff identified 31 peer-reviewed articles on person-centered planning
- Reviewed eight state Medicaid programs
  - *CA, CO, DC, MN, OR, PA, WA, WI*
- Utilized resources from several federal agencies including ACL and CMS
- Grey literature search identified numerous publications from nonprofits engaged in PCP work and policy organizations
  - *Includes AARP, Justice in Aging, and SCAN Foundation*

Components of the Draft Definition of Person-Centered Planning

Staff identified six components critical to the definition of person-centered planning

- Purpose
- Plan
- Factors
- Providers
- Resource allocation
- Access

Purpose of Person-Centered Planning

- Goals of the Individual/consumer/patient
- Patient/individual/consumer focused decisions
- Determine legal needs (protection/guardians/family court)
- Determine advocacy needs and availability

Person-Centered Plan

- Assessment of needs and likes and dislikes
- Functional/financial/health/mobility/social needs
- Creation of a plan that is suitable based on the patient's goals and needs
- Coordination of care and services necessary to promote living in the community
- Written and shared
- Informed Consent
- Consider individual's strengths and weaknesses
- Backup plans

Person-Centeredness Factors

- Consideration of values
- Consider cultural competency/perspectives
- Patient/consumer/individual:
  - *Preferences*
  - *Needs*
    - Social and companionship
    - Spiritual
    - Financial
  - *Goals*
- Patient/consumer/individual directed

Person-Centeredness Factors

Other Hallmarks

- Empowerment
- Interactive and collaborative
- Honor and dignity
- Self-determination
- Relationship focused
- Patient/individual/person directed process (rituals, routines, pace of life)
- Language
- Employment opportunities
- Personal resource control
- Personality dynamics based

Person-Centered Providers (Paid and Unpaid)

- Family/guardians/legal authorities
- Clinical providers
- Nonclinical providers
- Safety net providers
- Support service staff
- Companions
- Patient/individual representatives
- Community workers

Person-Centered Planning Resource Allocation

- Financial
- Physical
- Housing
- Community assets
- Other

Access Considerations in Person-Centered Planning

- Transportation
- Social events/community engagement
- Groceries/food
- Supports and services (paid and unpaid)

Additional Considerations for Person-Centered Planning Definition

In addition to the six components of a person-centered planning definition, staff identified two important considerations for person-centered planning

- 1915 (i) and 1915(c) Waiver Programs
- Nuances of state LTSS programs
  - *Services covered/provided by the state*

Draft definition of Person-Centered Planning

Person-centered planning (PCP) is an approach to facilitating the assessment, planning, and coordination of an individual's services and supports that is focused on the individual's goals, needs, preferences and values. The goal of PCP is to optimize the individual's quality of life through consideration of personal preferences, health and safety needs, as well as resource allocation including access to services that facilitate HCBS. Within PCP, the individual must be empowered to make informed choices that lead to the development, implementation, and maintenance of a written service plan for both paid and unpaid services and supports.

Plan

Person-Centeredness Factors

Providers

Purpose

Resource Allocation

Access

Committee Discussion

- Is the definition as presented a comprehensive representation of person-centered planning?
- What person-centered planning promoting characteristics are missing from the draft definition?
- How can the definition for person-centered planning be further clarified and simplified?

Public Comment

Next Steps

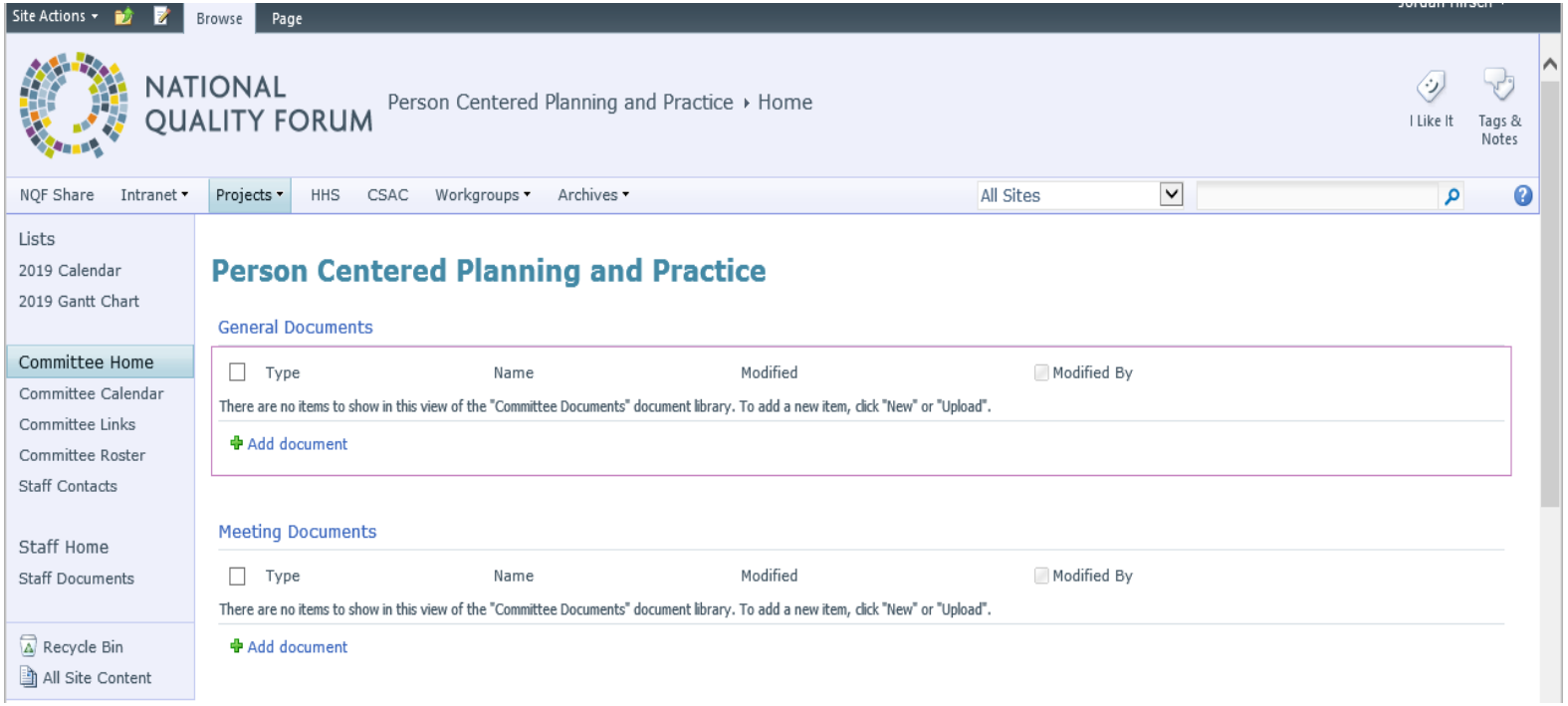
SharePoint Overview

http://share.qualityforum.org/Projects/PersonCenteredPlanningandPractice/SitePages/Home.aspx

- Accessing SharePoint
- Meeting and Call Documents
- Committee Roster and Biographies
- Calendar of Meetings

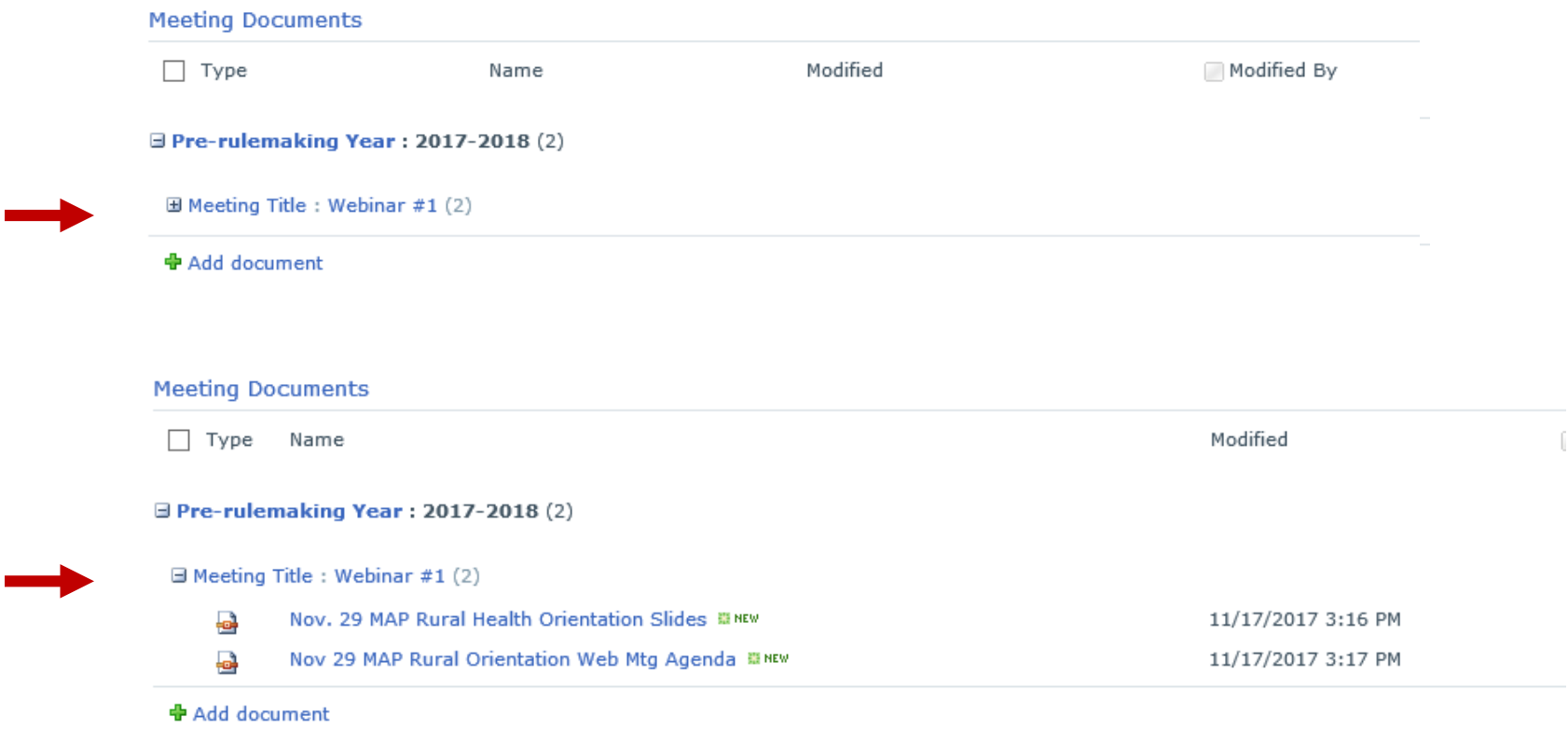
SharePoint Overview

- Screen shot of SharePoint Homepage



SharePoint Overview

- **Please keep in mind: (+) and (-) symbols**



Committee Web Meeting Schedule

Date	Objectives
May 3, 2019 1:00 pm – 3:30 pm ET	• Provide input on person-centered planning definition
June 24, 2019 2:00 pm – 4:30 pm ET	• Review environmental scan of PCP in LTSS
July, 31, 2019 2:30 pm – 5:00 pm ET	• Provide feedback on competencies of people performing PCP
September 6, 2019 1:00 pm – 3:30 pm ET	• Finalize core competencies for people performing PCP • Provide draft recommendations on systematic recommendations to support PCP
December 13, 2019 1:00 pm – 3:30 pm ET	• Adjudicate public comments on interim report
January 6, 2020 1:00 pm – 3:30 pm ET	• Review draft PCP measurement framework
February 3, 2020 12:30 pm – 3:00 pm ET	• Finalize PCP measurement framework • Provide input on PCP research agenda
June 1, 2020 1:00 pm – 3:30 pm ET	• Adjudicate public comments on draft final report

Next Steps

- NQF staff will incorporate feedback on PCP definition
- NQF staff will conduct an environmental scan of core competencies for performing PCP facilitation
- Committee will convene meeting 2 on **June 24 (2:00-4:30 pm ET)** where NQF staff will present initial environmental scan findings and obtain input on the environmental scan scope and approach.

Contacts

- Project email: pcplanning@qualityforum.org
- Phone: 202-783-1300
- SharePoint: http://share.qualityforum.org/Projects/PersonCenteredPlanningandPractice/SitePages/Home.aspx

Thank You for Participating!