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# Person-Centered Planning and Practice Committee

## Web Meeting 8 – Final Meeting

*June 1, 2020*

*1:00 – 3:30pm ET*

# Welcome



## Housekeeping

- Google Chrome is the preferred web browser.
- To dial in, call 1-800-768-2983
  - ▣ When prompted for the access code dial 5148141
  - ▣ If not speaking, please mute your line \*6 and \*7 to unmute

## NQF Project Team

- Samuel Stolpe, PharmD, MPH, Senior Director
- Kate Buchanan, MPH, Senior Project Manager
- Yvonne Kalumo-Banda, MSc, Project Manager
- Teja Vemuganti, MPH, Project Analyst



## Project Partners

- Administration for Community Living
  - ▣ Shawn Terrell
- Centers for Medicare and Medicaid Services
  - ▣ Noni Bodkin
  - ▣ Ellen Blackwell
  - ▣ Sophia Chan
  - ▣ Amanda Hill

## Committee Members and Liaisons

- **Gretchen Napier MSHA, CMC - Co-chair**
- **Cheryl Phillips, MD, AGSF - Co-chair**

### Members

- Glenda Armstrong, BSN, RN
- Pearl Barnett, MPA
- Sally Burton-Hoyle, MS, EdD
- Amber Carey-Navarrete
- Bruce Chernof, MD
- Bevin Croft, MPP, PhD
- Amber Decker, FPA
- 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

### Liaisons

- Daniel Fisher, MD, PhD
- Mathew McCollough
- Pam Montana, MSPM
- Penny Shaw, PhD

# Meeting Objectives



## Meeting Objectives

- Overview of project and comments received
- Review and adjudication public comments on draft final report
- Gather final feedback from Committee to improve final report



# Overview of Draft Final Report Comments



## Project Goals

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



## Draft Final Report Content

- The draft Final Report consisted of five core sections that aligned with the five goals of the project
- Committee members and the public were invited to comment on the Committee's work
- Report posted for 35-day public comment period: April 9– May 15, 2020

## Overview of Public Comments

- NQF and the Committee solicited public comments through written comments submitted through the NQF website, fillable pdf emailed to the project box, and direct emails to the project team inbox.
  - ▣ 130 comments
  - ▣ 63 organizations
- Further, NQF requested feedback from Committee members and liaisons
  - ▣ 9 Committee members and liaisons commented

# Commenting Themes and Committee Adjudication



## Public Comment Themes

- Suggestion to include nuances associated with facilitators working for service providers
- Suggestion to include additional quality measures and indicators
- Suggestion that “first-person language” may not always be appropriate for the person-centered plan
- Suggestion to include day-to-day caregiver needs of family and friends in the plan for persons with increasing dependence



## Additional Issues from Public Comment

- Role of facilitation and coordination should be clarified
- Outcomes of PCP Effectiveness research to include person's perceptions of desired community inclusion, choice, and control
- Recommendation that "service planning" should be removed
- Recommendation that "focus person" be removed



## Public Comment Theme: Facilitators Working for Service Providers

- There are many nuances associated with providers of services performing PCP facilitation roles. There are clear rules against it in some instances, but almost no way to feasibly avoid it in others
- Proposed approach
  - ▣ Remove the following from the definition of PCP: “The person facilitating your planning process or assisting you in developing your own plan should not work for any agency that also could provide supports to you.”
  - ▣ Additional language in the introduction to the core competencies that references the anchoring principle of the facilitator as an advocate and the need to avoid conflict of interest (COI)





## Proposed Changes to Text

### From the section titled “Facilitator Role” (changes in *italics*)

- ... The planning process is severely challenged without the knowledge skills and abilities necessary to advocate and support empowerment in a manner free from conflicts of interest. *Conflicts of interest are important to avoid in order to optimize the advocacy and empowerment role of the facilitator. In practice, this principle may become nuanced. For example, CMS regulations for Medicaid HCBS 1915(c) waivers introduce restrictions such that “providers of HCBS for the individual ... must not ... develop the person-centered service plan, except when the State demonstrates that the only willing and qualified entity to provide ... person-centered service plans ... also provides HCBS.” Conflicts of interest can be both overt and subtle. It is important for facilitators to disclose any known conflicts of interest to ensure that the person can make informed decisions about their services and supports.*



## Public Comment Theme: Additional Quality Measures

- Commenters noted that the environmental scan returned few PCP-specific results
- Commenters have noted additional measures
  - ▣ FASI measures
  - ▣ NCQA Goal Attainment (SCAN Foundation)
  - ▣ University of Minnesota HCBS Outcomes Measures
- Commenters and Committee has identified additional sources of PCP-specific indicators (measure concepts)
  - ▣ National Core Indicators
  - ▣ NCI Aging and Disabilities Indicators
  - ▣ Personal Outcome Measures from Council on Quality and Leadership
  - ▣ NCAPPS Indicators



## Public Comment Theme: Paid vs. Unpaid Facilitator Measurement

- Commenters noted that the facilitation measurement domain is not clear if it is for paid or unpaid facilitators, but seems geared toward paid facilitators
- Proposed changes: additional clarity that not all measures are useful outside of accountability applications
- Proposed changes in italics: “Facilitators of PCP will not always be paid professionals, and may be individuals who are close to the person, or may be the person. *Because of this, many measures included in this domain may not be applicable to every facilitator; many of the measurement concepts for facilitation are especially practical in accountability applications for paid professionals.*”



## Public Comment Theme: Plan Written in First-person Language

- Commenters have suggested that “first-person language” may not always be appropriate for the person-centered plan.
- Direct quote from one commenter:

“This seems to contradict current best practice. In an article written by Michael W. Smull in December, 2004 we are advised that there are only 3 circumstances when person centered plans should be written in First Person language:

  1. When the person actually wrote the plan or when you are quoting the person AND you are comfortable the person meant what they said.
  2. When the person actively edited the plan with the plan writer and clearly approved AND understood what was said and how it was said
  3. When the person primarily communicates with her or his behavior (and not with words) only if
    - The people who know and care about the person are ABSOLUTELY sure this is what the person would say if they could tell you
    - The plan writer is comfortable that these are people who are close enough to the person and spend enough time with the person to TRULY know
    - What is written will be tested (and changed) by on-going listening to the person’s behavior.”



## Proposed Changes to Text

- The plan is written in the person's own words, using first-person language *when it is appropriate to do so* and the person's preferred name. *The plan should indicate if someone assisted in writing the plan and who that person is.*
- Include citation here to Michael Smull's article.



## **Public Comment Theme: Caregivers' needs included in plan for persons with increasing dependence**

- Commenters noted that principles of family-centered planning are not included
- Commenters agreed with Committee that “even in the later stages of the disease, people with dementia often have consistent views about their care though they may no longer be able to remember or articulate their preferences” but expressed concern that deepening levels of dependence during cognitive decline are not
- Proposed staff approach: include practical and person-centered planning specific recommendations to address this concern



## Proposed Changes to Text

### Participant Stakeholder Engagement: Nothing About Us Without Us

- Ongoing structures and processes supporting the engagement of participants and their allies is essential to supporting the transformation of systems to become more person-centered. Systems need to develop policies and procedures such as participant advisory councils, participant review, and comment periods on program and policy changes. *Systems also must consider how to engage with day-to-day unpaid support providers such as family and friends.*



## Proposed Changes to Text

### PPerson-Centered Service Planning and Monitoring

- The person-centered plan monitoring process should ensure that service plans address the needs and preferences of the person; supports are implemented as identified and authorized; reasonable risk is accepted and includes steps for mitigation; and any modifications to a person's preferences are identified and include data collection reviews to test the effectiveness of the modifications. *The plan monitoring process may become nuanced in some cases, such as with increasing dependence due to things such as cognitive decline or dementia. When this occurs, persons are increasingly more dependent on others to help them acquire and achieve quality care. Care planning should balance the individual's views with the needs of the family that is tasked with providing support according to family centered practice and planning models. As providers strive to consider the person in the context of their familial supports, the system can more effectively care for people by accounting for the needs of the people tasked with day-to-day support. In these stages of care, plan monitoring must include identifying and documenting family and friend caregivers, account for the caregivers' needs, and include those needs in the individual's plan.*





## Other Public Comment: Role of facilitation and coordination should be clarified

- Role of facilitation and coordination should be clarified
- Direct quote from commenter: “Facilitation vs. Coordination: In addition to considering how the facilitator requirements would be applied across LTSS settings, we recommend further clarification as to the role of the facilitator identified in the definition. References to facilitator throughout the report seem to have at least two different meanings or be used interchangeably between leading/managing the planning meetings and overseeing the planning and implementation process.”



## Other Public Comment: the term “service plan” should be removed

- Recommendation that “service plan” should be removed.
- Direct quote from commenter: “Please remove any verbiage that says person centered service plan or service planning. This was clarified by CMS in the initial comment period to mean the same as a Person Centered Care Plan. We need standard verbiage to guide our state regulators...”



## Other Public Comment: the term “focus person” should be removed

- Recommendation that “focus person” be removed
- Direct quote from commenter: “I would like the phrase “focus person” removed. As a person with a disability, I hat[e] the phrase focus person it makes me feel like I am at the meeting in the corner while everyone else plans my life. Please use where appropriate “the person” or “the person directing the plan”. ”



## **Other Public Comment: Expand the Outcomes of PCP Effectiveness Research**

- Outcomes of PCP Effectiveness research to include person's perceptions of desired community inclusion, choice, and control
- Staff propose to simply broaden the language of the text



## Proposed Changes to Text

### Outcomes from PCP

The Committee considered the continued evaluation of the impact of PCP as a high priority. In particular, well-funded studies that evaluate the impact of PCP using empirical analysis in relation to key outcomes, both observed and person-reported, should be conducted.

The observed outcomes *will vary by population studied, but may* include:

....

Person-reported outcomes *will vary by population studied, but may* include:

....

- *Person's perceptions of desired community inclusion, choice, and control*
- Satisfaction with the planning process, including a qualitative analysis of the critical elements to person satisfaction with PCP process

# Additional Committee Feedback



## **Additional Committee Member and Liaison Feedback**

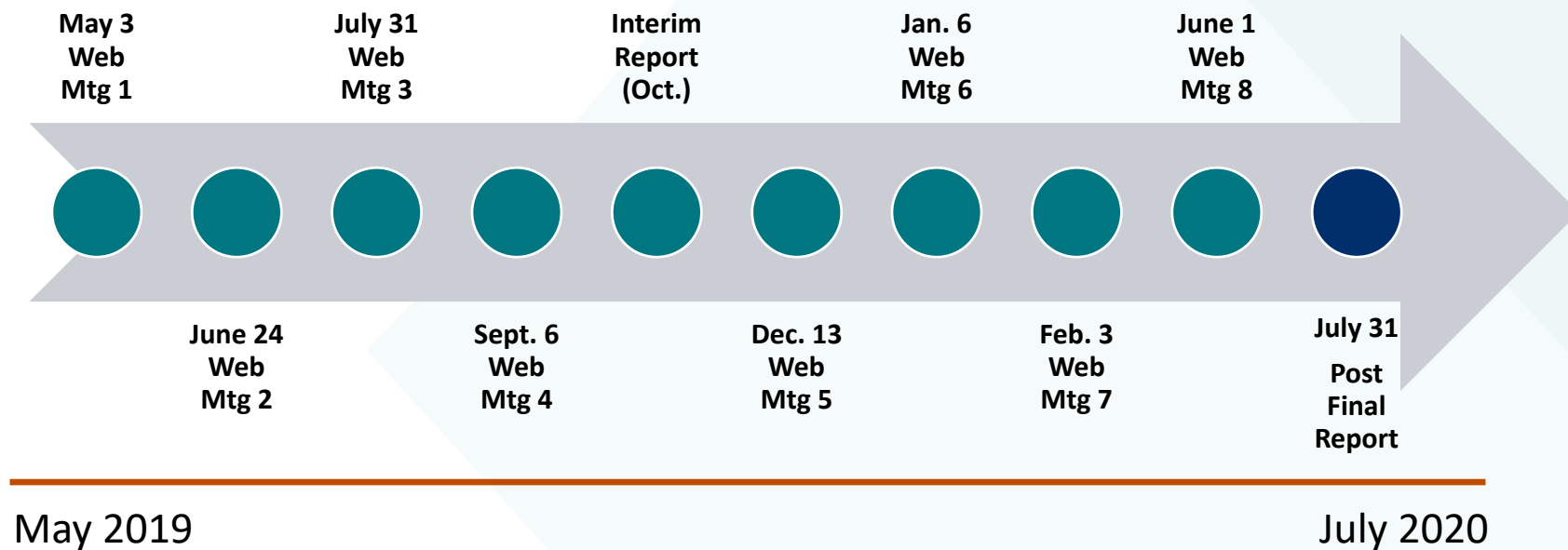
- As this is the last meeting to discuss the Committee's work, do members have anything else that they would like to bring up for consideration?

# Public Comments



# Next Steps

## Project Timeline



## Next Steps

- Committee recommendations and public comments will be reflected in the Final Report.
- Final Report will be released on **July 31, 2020** will include:
  - ▣ Definition of PCP
  - ▣ Set of core competencies of people performing PCP facilitation
  - ▣ Recommendations to HHS for systems characteristics that support person-centered thinking, planning, and practice
  - ▣ Framework for PCP measure development
  - ▣ Research agenda for PCP
  - ▣ Results of the environmental scan



## Contacts

- Project email: [pcplanning@qualityforum.org](mailto:pcplanning@qualityforum.org)
- Phone: 202-783-1300
- For more information on the Committee's work, please visit our project page:  
[http://www.qualityforum.org/Person\\_Centered\\_Planning\\_and\\_Practice.aspx](http://www.qualityforum.org/Person_Centered_Planning_and_Practice.aspx)
- For Committee members and liaisons to access materials, visit SharePoint:  
<http://share.qualityforum.org/Projects/PersonCenteredPlanningandPractice/SitePages/Home.aspx>
- To receive regular updates on this and other NQF projects, sign up for a project alert subscription:  
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# THANK YOU

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