



# Person-Centered Planning and Practice

Web Meeting 4

*September 6, 2019*

# Welcome

# Helpful Tips for CenturyLink Platform

- Google Chrome is the preferred web browser.
- Participants have the option to listen to webinars either by phone or through their computer.
- CenturyLink is compatible with screen readers (e.g., JAWS).
- To dial in, call 1-800-768-2983.
  - ▣ When prompted for access code dial **5148141**.
  - ▣ If not speaking please mute your line \*6 (\*7 to unmute).

# Joining a Web Meeting

## Dial-in

- Audio (listening and speaking capabilities)
- No visual

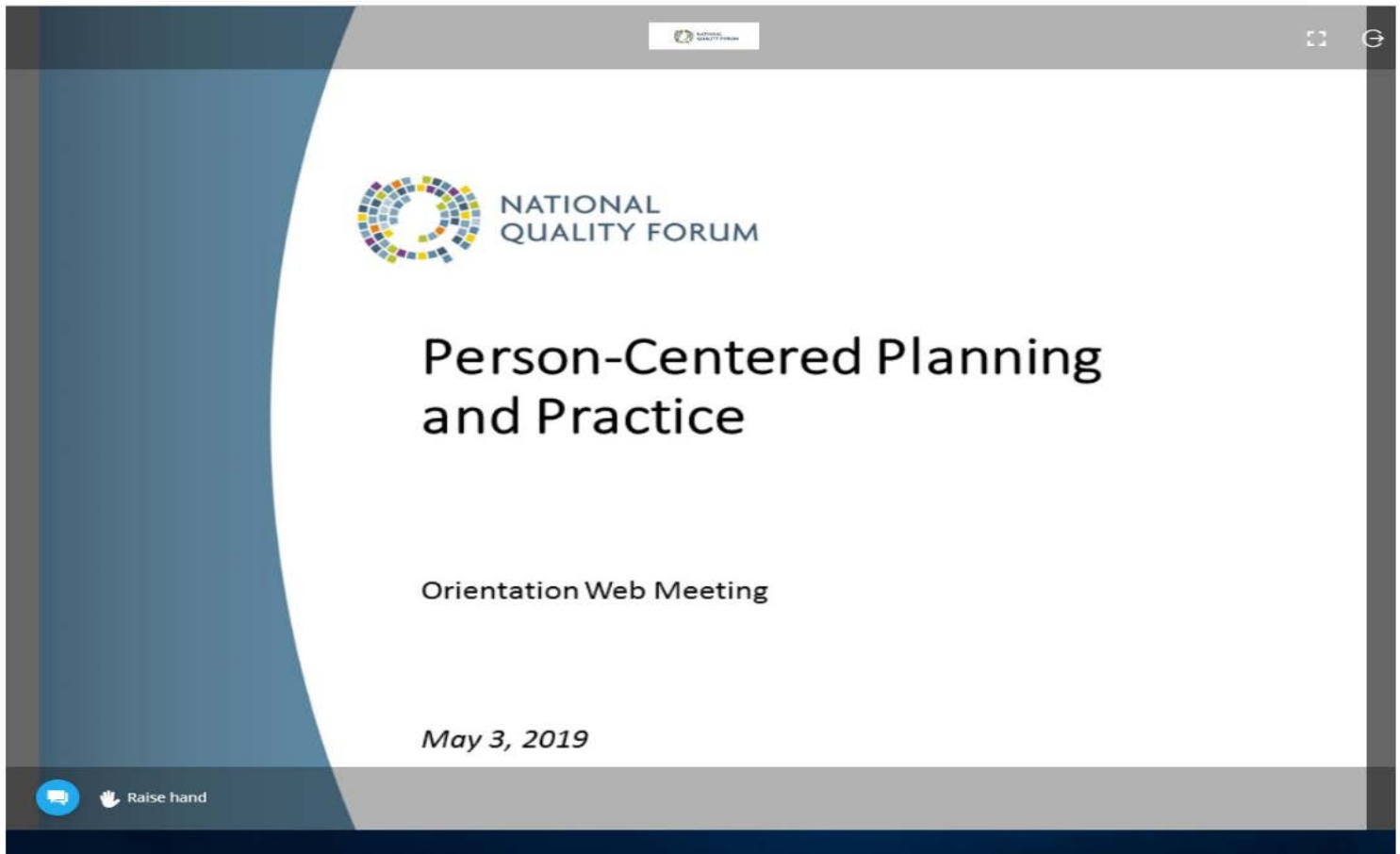
## Web

- Visual (chat function available)
- Audio (listening function only, does not allow speaking capabilities)

## Dial-in & Web

- Visual (chat function available)
- Audio (listening and speaking capabilities)

# Locating Chat and Raise Hand Functions



Chat/Comment  
Button



Raise Hand feature

# CenturyLink Features: Chat/Comment Function

← Chat

Q&A

NATIONAL QUALITY FORUM

Person-Centered Planning and Practice

Orientation Web Meeting

May 3, 2019

Chat with presenter

Hello, looking forward to this webinar

Send

Q&A

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Chat with presenter

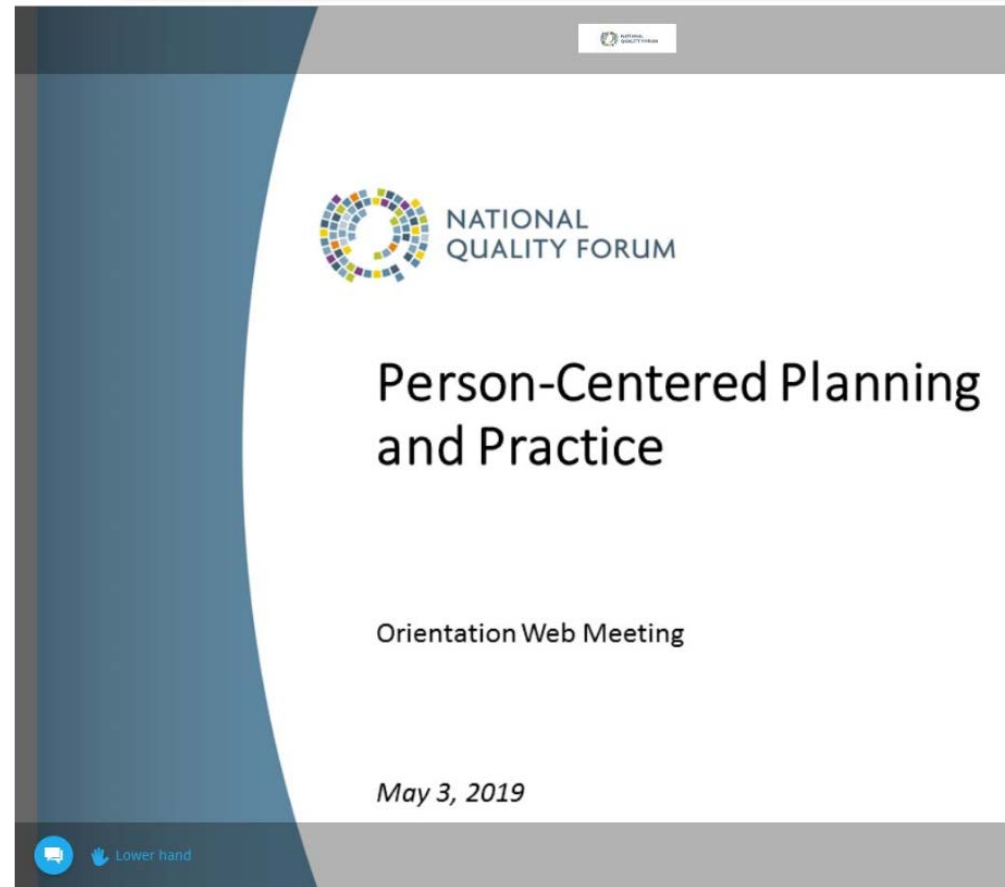
Type your question

Send

Raise hand

# CenturyLink Features: Hand Raising — Participant View

- When the “raise hand” feature is engaged, text color changes from white to blue.
- When the raise hand feature is engaged, text changes from “raise hand” to “lower hand”



# Discussion Guidelines

- Be respectful towards all opinions expressed
- Allow all opinions to be expressed
- Keep comments concise and focused
- Please refrain from duplicating comments and paraphrase when needed
- Indicate agreement without repeating what has already been said
- Avoid dominating a discussion and allow others to contribute



# NQF Project Team

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

# Person-Centered Committee

**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**

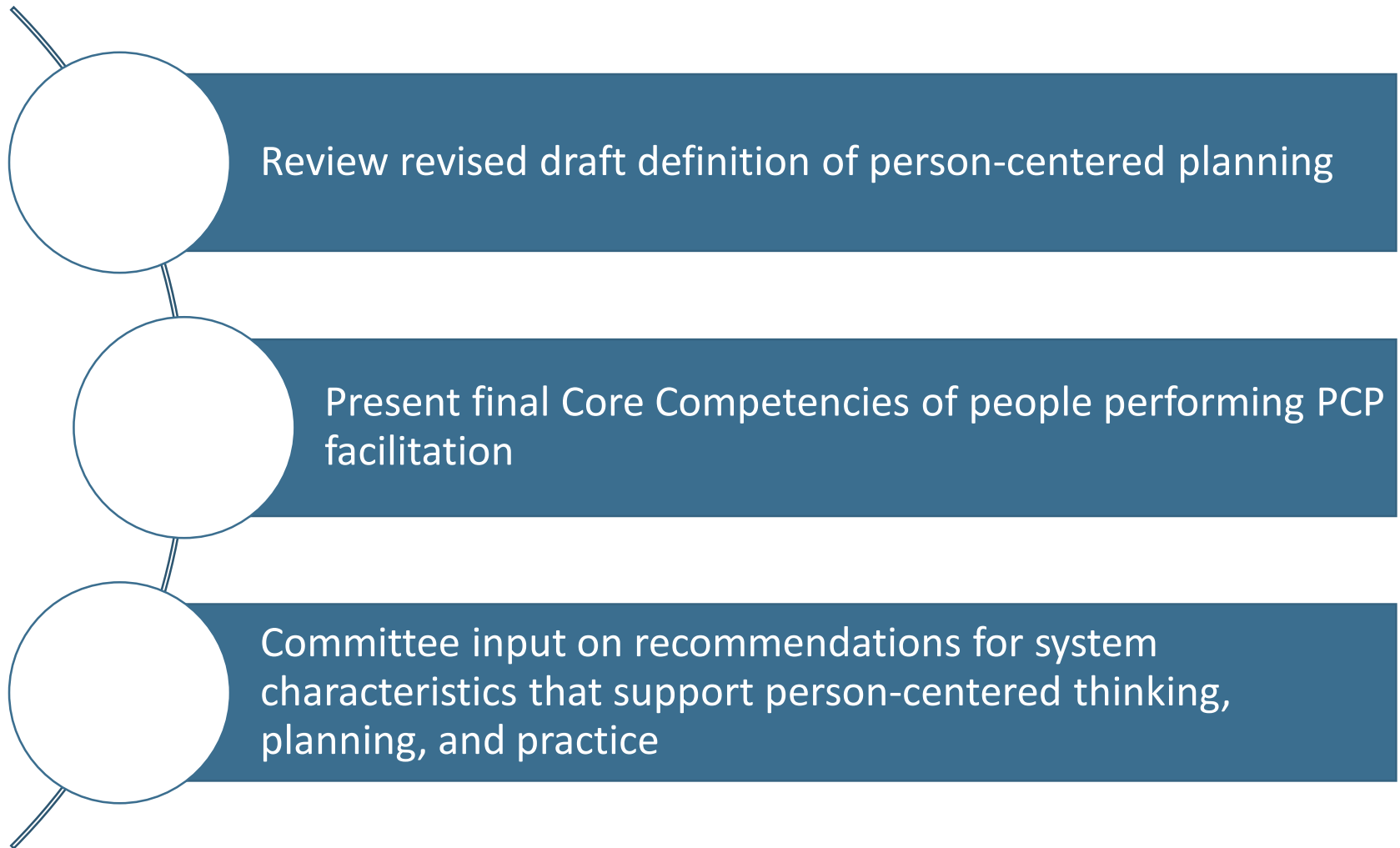
- Daniel Fisher, MD, PhD
- Mathew McCollough
- Pam Montana, MSPM
- Penny Shaw, PhD

# Role of Liaison and Committee Member

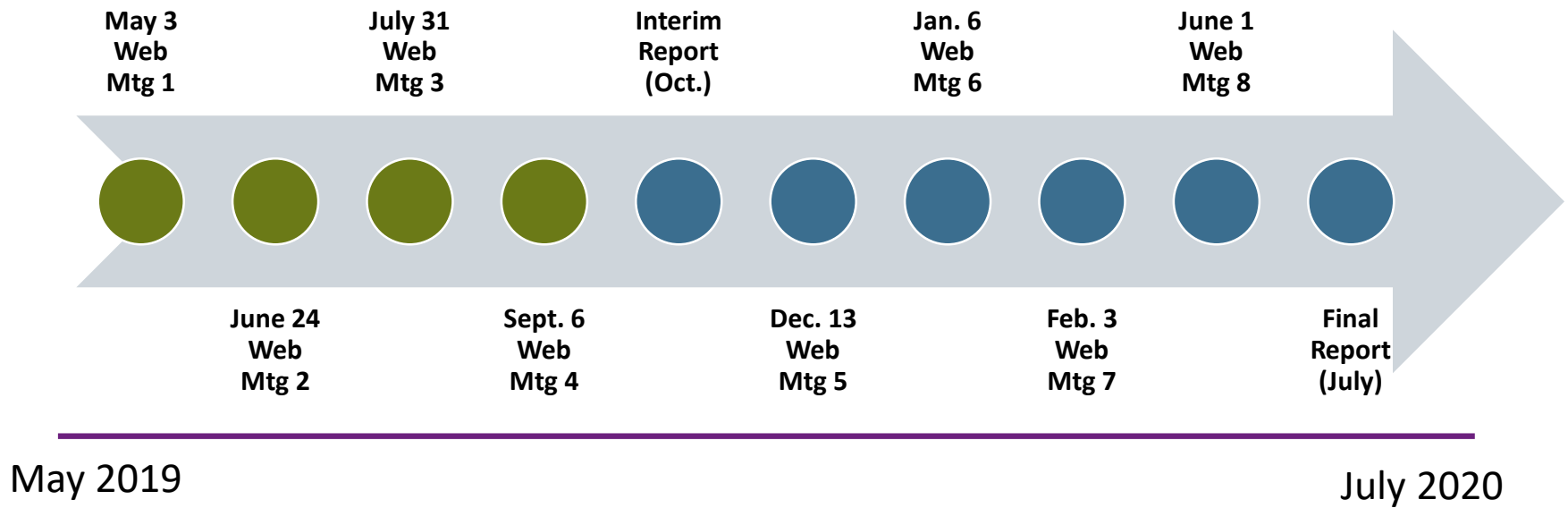
- People have expressed concern over the roles of the members and liaisons in terms of the report finalization.
- NQF worked closely with federal partners to ensure all members and liaisons feel that they have equitable roles.
- Amended process of final report
  - ▣ *Staff will ask for any concluding comment to strengthen the report from each Committee and Liaison member's perspective.*
  - ▣ *During this time the Committee members and liaisons will sign-off on the report.*
  - ▣ *Through this process we will get direct actionable feedback.*

# Meeting Objectives

# Meeting Objectives



# Project Timeline



# 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;
- Conduct scan that includes historical development of person-centered planning in LTSS systems;
- Develop a conceptual framework for PCP measurement; and
- Create a research agenda for future PCP research.

# Upcoming Web Meetings Goals

Date	Objectives
Web Meeting 5 December 13, 2019	<ul style="list-style-type: none"><li>• Adjudicate public comments on interim report</li></ul>
Web Meeting 6 January 6, 2020	<ul style="list-style-type: none"><li>• Review draft PCP measurement framework</li></ul>
Web Meeting 7 February 3, 2020	<ul style="list-style-type: none"><li>• Finalize PCP measurement framework</li><li>• Provide input on PCP research agenda</li></ul>
Web Meeting 8 June 1, 2020	<ul style="list-style-type: none"><li>• Adjudicate public comments on draft final report</li></ul>



# Interim Report

The interim report will include:

- Draft definition of person-centered planning
- Draft core competencies of people performing PCP
- Recommendations on systems characteristics that support person-centered thinking, planning, and practice

# Public Comment Interim Report

- The interim report will be posted for a 30-day public comment November 1 – December 2, 2019.
- Committee members are encouraged to hold listening sessions with advocacy groups as well as send the draft report to their networks for comment.
  - ▣ *Staff will develop a question guide to assist with listening sessions.*
- Committee members will be able to comment on the interim report on the Committee SharePoint site during the public commenting period.
- During the December 13 web meeting, the Committee will adjudicate comments on the report as well as report out on their listening sessions.

# Liaisons Leverage Networks

- In addition to providing written comments on the reports, the Committee liaisons were appointed to leverage their advocacy networks and report back to the Committee.
- During public commenting, the liaisons will be encouraged to reach out to their advocacy networks and solicit input from them outside of the NQF processes.
- Liaisons will then report back verbally to the Committee on a webinar following public commenting.

# Committee Q&A: Agenda, Slides, and Materials

- Do Committee members have any questions on the materials to be discussed during this meeting?

# Recap from Previous Meeting

# Summary of Previous Meeting

- Welcomed liaisons to the Committee
- Discussed potential solutions on how to address Committee concerns including:
  - *Setting time aside at the beginning of each call for general questions and comments*
  - *Enlist members to engage in listening sessions to get feedback on draft report*
  - *Ask members to send the draft report to their respective networks for comments*
  - *Structure Committee feedback questions in a way that encourages broader feedback*
- Received Committee feedback on refined core competencies of people performing PCP
- Members discussed identified additional sources for PCP performance measures
- Members recommended approaches on how to conduct historical review of PCP within long-term service and supports (LTSS)

# Draft Definition of Person-Centered Planning

# Purpose of Draft PCP Definition

- The purpose of this definition is to inform the development of competencies for practice as well as for making recommendations on systems and organizational characteristics that support person-centered thinking, planning, and practices.
- This was accomplished by expanding the consensus-based PCP definition developed by the NQF HCBS Quality Committee that focused on measure development.
  - ▣ *Drew upon several PCP definitions from multiple sources*
  - ▣ *NQF staff synthesized common themes and drew on PCP Committee feedback and revisions*



# Definition Development 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*
- Committee provided input
  - ▣ *Presented to the Committee on May 3 for feedback and refinement*

# Working Definition of Person-Centered Planning

Person-centered planning is a facilitated, individual-directed, positive approach to the planning, and coordination of a person's services and supports based on individual aspirations, needs, preferences, and values. The goal of person-centered planning is to create a plan that would optimize the person's self-defined quality of life, choice and control, and self-determination through meaningful exploration and discovery of unique preferences and needs and wants in areas including but not limited to health and well-being, relationships, safety, communication, residence, technology, community, resources, and assistance. The person must be empowered to make informed choices that lead to the development, implementation, and maintenance of a flexible service plan for paid and unpaid services and supports.

# Committee Discussion

- What further refinements should be made to the PCP definition to ensure that it will provide the best guidance to the federal government, state government, and other stakeholders toward a standardized understanding of PCP?

# Final Core Competencies for PCP Facilitation

# Person-Centered Planning Competencies: Foundational Skills

- Self-awareness: (e.g., cultural assumptions, psychological development and temperament, personality dynamics, prejudices)
- Group power dynamics (family, systems, broader social/cultural dynamics)
- Understanding of approaches to generate purpose and meaning in life
- Strengths based thinking/positive attributes
- Empathy/emotional intelligence
- Individual and systems advocacy
- Navigate the complexity of choice
- Cultural humility, competency
- Openness to learning
- Critical and creative thinking
- Qualitative/inductive research methods

# Person-Centered Planning Competencies: Foundational Skills (continued)

- Supported decision making based on individual's needs [**and desires**] Informed decision making
- Training and support for staff
- [**Ability to have planning driven by the person through**] self-direction and self-determination, [**including allowing consumers to initiate.**]
- Effective freedom, i.e. factors that effectuate the successful implementation of an individual's freedoms and choices
- [**Training for individuals to know how to lead their own meetings**]
- [**Create a culture of high expectations**]
- [**Recognition of the person within the context of family and the community**]

\*Updates from last meeting are in red and enclosed in square brackets.

# Person-Centered Planning Competencies: Relational and Communication Skills

- Negotiation
- Dispute resolution
- Engagement skills
- Active/reflective listening
- Team building
- [**Person-centered**] approach
- Identify individual's personal strengths [**and support needs**]
- Empathetic listening
- [**Independent facilitation**]
- [**Motivational interviewing**]

\*Updates from last meeting are in red and enclosed in square brackets.

# Person-Centered Planning Competencies: Philosophy

- Effective Freedom
- Recovery (e.g., from serious mental illness or substance use disorder)
- Empowerment
- Dignity of Risk
- [Technological solutions]

\*Updates from last meeting are in red and enclosed in square brackets.



# Person-Centered Planning Competencies: Resource Knowledge

- LTSS and larger healthcare system
- Safety net providers
- Community assets/resources
- Populations and subgroups
- Legal issues: (e.g. legal representation, protective services, advance care planning, decision support)
- Local advocacy groups and individuals
- Gaps in services and supports
- [Service load or service coordination management]
- [Mandatory] training and support for staff related to available resources
- Identifying process elements and experts [to support PCP]
- Identifying content elements and experts [to support PCP]

\*Updates from last meeting are in red and enclosed in square brackets.

# Person-Centered Planning Competencies: Policy and Regulatory Context

- Human rights [**and responsibilities**]
- Olmstead
- Americans with Disabilities Act
- Independent living philosophy
- Social model of disability
- [**CMS Home and Community-Based Services Final Rule**]
- [**Individuals with Disabilities Education Act (IDEA)**]
- [**The Older Americans Act** ]
- [**Final Rule 45 CFR Parts 1321 and 1324 State Long-Term Care Ombudsman**]
- [**Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities**]
- [**42 CFR 483.21 – Comprehensive person-centered care planning**]

**\*Updates from last meeting are in red and marked with an asterisk.**

# Discussion Questions

- What further refinements should be made to the PCP core competencies to provide the best guidance to the federal government, state governments, and other stakeholders toward a standardized understanding of PCP core competencies?

# Draft Recommendations for System Characteristics that Support Person-Centered Thinking, Planning, and Practice

# Purpose of Recommendations

- State programs continue to struggle to implement person-centered thinking, planning, and practices in HCBS and other LTSS settings.
- HHS is consistently approached by state program officials for technical assistance related to some aspect of person-centered thinking, planning, and practice implementation—including how to reconfigure systems to support person-centered planning and service delivery.
- Committee recommendations may be a resource for HHS as it provides technical assistance to states implementing person-centered thinking, planning, and practice

# Draft System Recommendations: Processes

- Funding: example Money Follows the Person (MFP) and Balancing Incentive Program (BIP)
- Preferentially increasing use of HCBS in lieu of use of institutionally based services
- Develop and raise awareness of options for persons
- Strengthening Medicaid program's HCBS and other LTSS settings capabilities and capacity
- Quality assurance processes for HCBS and other LTSS settings
- Streamlining program and connections to other agencies and resources

# Draft System Recommendations: Processes

- Workforce development, training, and retraining
- Conflict free language use
- Recruiting and retaining direct care workers
- Supporting overburdened unpaid caregivers
- Coordinated communication between relevant state agency leadership
- Employ beneficiary consultants
- Conduct beneficiary focus groups
- Identify and address barriers to PCP participation, i.e., transportation
- Programs should focus on individual's home, community settings, and institutional settings
- Focus on self-directed HCBS

# Draft System Recommendations: Processes

- Engaging persons and all stakeholders early and frequently
- Minimize staffing turnover
- Provide respite care for unpaid caregivers
- Increase pay and training for direct service workers
- Include funding for testing of innovative approaches
- Invest in administrative capacity
- Build and sustain consumer buy-in and engagement
- Cultivate executive and legislative leadership
- Support and facilitate comprehensive consumer engagement



# Draft System Recommendations: Infrastructure

- Capacity to facilitate and deliver PCP-focused HCBS & other LTSS
- Responsive to consumer problems and complaints
- Ease of access to information for consumers
- Build culture of commitment to PCP from the top down
- Increasing use of HCBS
- Implementing a “No Wrong Door” policy/system-single entry system
- Conflict free case management

# Draft System Recommendations: Infrastructure

- Affordable housing
- Services and infrastructure expansion and maintenance
- Sustainability of program (Medicaid, LTSS, PCP facilitation)
- Streamlining program and connections to other agencies and resources
- Identify and address barriers to participation, i.e., transportation

# Draft System Recommendations: Data

- Create uniform data set
- Collect data and assess outcomes of PCP within HCBS & other LTSS settings
- Create accountability for measurement outcomes
- Assessment utilizing a standardized assessment tool
- Assess persons regularly
- Assess caregivers regularly

# Draft System Recommendations: Data

- Monitor impact of program changes
- Leverage existing systems infrastructure
- Eliminate duplication
- Invest in administrative capacity

# Draft System Recommendations: Resources

- Communication and Education to connect to Beneficiaries
- Communication and Education to connect to Stakeholders and Providers
- Communication and Education to connect to Caregivers
- Ease of access to information for consumers
- Quality assurance processes for HCBS and other LTSS
- Continuous improvement of HCBS and other LTSS
- Care management resources
- Streamlining program and connections to other agencies and resources

# Draft System Recommendations: Resources (continued)

- Expand counseling and other behavioral health support services
- Implement “community first” LTSS
- Expand free resources, i.e. website, call center, e-mail, online chat, community workers
- Train specialists for “warm transfer” to trained experts
- Referral systems for persons, family members and caregivers
- Offer caregiver educational programs
- Build lasting partnerships between government and private sector entities related to PCP

# Draft System Recommendations: Resources (continued)

- Retain administrative champions
- Invest in administrative capacity
- Build and sustain beneficiary buy-in and engagement
- Cultivate executive and legislative leadership

# Discussion Questions

*Note: The discussion will go through each systems recommendations by each category.*

- Are all the main categories captured? What is missing?
- Are all characteristics captured? What should be added to each main category?



# Public Comments

# Next Steps

# Interim Report

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# Committee Web Meeting Schedule

Timing	Web Meeting	Description
<b>December 13, 2019</b> 1:00 pm – 3:30 pm ET	Web Meeting 5	Adjudicate public comments received on the interim report and introduce the framework approach and development process.
<b>January 6, 2020</b> 1:00 pm – 3:30 pm ET	Web Meeting 6	Review and gather input on the draft measurement framework.
<b>February 3, 2020</b> 12:30 pm – 3:00 pm ET	Web Meeting 7	Finalize the draft measurement framework prior to public comment, and gather Committee input on the PCP research agenda.
<b>June 1, 2020</b> 1:00 pm – 3:30 pm ET	Web Meeting 8	Review public comments received on the draft comprehensive report.

# Next Steps

- NQF will use Committee recommendations to:
  - ▣ *Refine the final list of core competencies for performing PCP facilitation*
  - ▣ *Make recommendations for Systems Characteristics that Support Person-Centered Thinking, Planning, and Practice*
- Committee will convene meeting 5 on **December 13, 2019** where NQF staff will;
  - ▣ *Present the final list core competencies of people performing PCP facilitations*
  - ▣ *Gather Committee input on draft recommendations for system characteristics that support person-centered thinking, planning, and practice.*

# Contacts

- Project email: [pcplanning@qualityforum.org](mailto:pcplanning@qualityforum.org)
- Phone: 202-783-1300
- Project page:  
[http://www.qualityforum.org/Person\\_Centered\\_Planning\\_and\\_Practice.aspx](http://www.qualityforum.org/Person_Centered_Planning_and_Practice.aspx)
- SharePoint:  
<http://share.qualityforum.org/Projects/PersonCenteredPlanningandPractice/SitePages/Home.aspx>
- Project alert subscription:  
<http://nqf.informz.net/NQF/profile.asp?fid=2509>

***Thank you for participating!***