



## “(Re)Defining Person-Centered Planning in Mental Health Systems”

Summary of a webinar from June 20, 2023

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### Introduction

This webinar is about how “person-centered” can sometimes be a buzzword. Many service plans are called “person-centered.” While plans may be called “person-centered,” plans may not be truly person-centered. In this webinar, the panelists speak about:

1. What person-centered planning should mean
2. What it is like when services are not person-centered
3. How person-centered planning looks in action

### Personal Stories

Lionel talked about true person-centered planning. A person should be able to make their own decisions. Other people should not decide for them. The person should guide the conversation. This allows for communication and understanding. People should know what choices are available.

Sera said person-centered planning today looks like it did 20 years ago. Person-centered planning does not address culture. When person-centered planning doesn't address culture, it leaves people out. One example is information translated into other languages. It isn't enough to just translate information. The information also needs to be informed by the person's culture. Sera believes person-centered planning should address culture.

Andy provided peer support at a provider agency. He said there is no clear definition of person-centeredness. This leads to different interpretations of person-centered planning. Providers can then call themselves “person-centered” without being person-centered. This causes harm.

Ebony said we must look at the whole person in person-centered planning. A person may turn down services, which is their choice. People understand their own unique situation. They know what is best for them. Ebony said there is a need to partner across systems. This will help support the whole person.

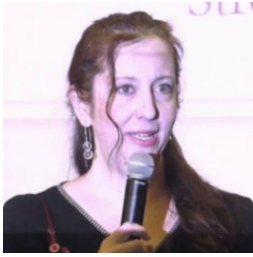
Thomas shared his experience working in an agency. The agency said they were going to do person-centered meetings. The meetings did not ask what the person wanted. Instead, the meetings questioned people about their behavior. People were upset and harmed at these meetings. Thomas said the harm must be recognized. Only then can we move to a person-centered approach.



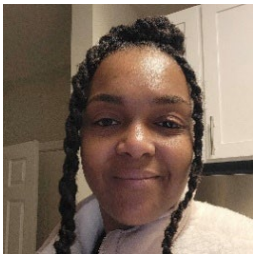
NCAPPS

## National Center on Advancing Person-Centered Practices and Systems

The speakers on this webinar were:



**Sera Davidow** is a filmmaker, activist, and mother of two. As a survivor of physical, sexual, and emotional abuse, she has faced many challenges throughout her own healing process. At present, she spends much of her time working with the Wildflower Alliance, a peer-to-peer and training organization that was recognized in 2021 by the World Health Organization as providing exemplary, rights-based crisis alternatives. Learn more about her work in a 2018 Sun Magazine article: <https://tinyurl.com/OpenMindSD>



**Ebony Flint** is a Policy Analyst at the Human Services Research Institute and a Certified Peer Specialist. She is also a part-time trainer and group facilitator with the Wildflower Alliance and founded “A Tribe Called Black.” Throughout all she does, Ebony infuses knowledge gained from her own experiences as a survivor of trauma and the psychiatric system, as someone with invisible physical disabilities, and as the mother of an autistic child.



**Lionel Frechette** (they/them) is a Deaf, multiply disabled queer person with 16 years of living with extreme states and 6 years of both working within the mental health system in different capacities and receiving services, bringing their personal experience and person-centered ethics to the table. Their ultimate dream is to create equity through diverse spaces and strengthen allyship across communities.



**Andy Beresky** works for the Wildflower Alliance supporting and advocating for folks who have struggles around their substance use. In the past, he's worked at Afiya, the peer-run respite in Massachusetts, and as a director of peer support for a clinical provider agency. Working within the mental health system has only strengthened his belief that people receiving services have the fundamental right to have their voices and choices reflected in every stage of their treatment planning and service delivery, as well as information and access to alternative healing modalities.



**Thomas Brown** is an advocate who spends much his time working with Mental Health Legal Advisers Committee using lived experience to leverage critical issues in the state legislature related to mental health. Thomas worked in a community mental health agency for over thirteen years, and in a crisis stabilization unit for two years. It is the harm and human rights abuses he witnessed in these spaces that informs much of his advocacy work. Thomas trains law enforcement and department of corrections staff on trauma through the Crisis Intervention Training.

*NCAPPS is an initiative from the Administration for Community Living and the Centers for Medicare & Medicaid Services to help States, Tribes, and Territories to implement person-centered practices. NCAPPS webinars are open to the public, and are geared toward human services administrators, providers, and people who use long-term services and supports. All NCAPPS webinars will be recorded and archived at <https://ncapps.acl.gov>.*