



Older people and people with disabilities can, in Michigan, be in charge of making the decisions affecting their lives

PERSON-CENTERED

very day we make choices in our lives that we hope will make our lives more satisfying in some way. We decide where and how to live, what kind of work to do, what food to eat, what activities we will participate in, and with whom. Older people and people with disabilities need to make the same kinds of choices. However, if they are dependent on a public system for the services and supports they need, in the past they were not given the power to make these choices. Traditionally, decisions have been made for them by professionals who decide what they need and what "slots" are available to fit these needs.

In the past five years, however, self-determination with person-centered planning has been

mandated in Michigan by MCL 330.1700(g). This may cause the most significant change in the delivery of services to individuals with disabilities in many years. This is a process *By Kathleen Harris* designed to shift power in negotiating the mental health system from the professional to the individual receiving services. The process begins with an initial planning meeting in which the individual decides who will attend the meeting, and what will and will not be discussed. The most important issues in the person's life are addressed, including relationships, hopes and dreams, and barriers to realizing those dreams. Then a plan to find the supports to make the life they want is outlined, including who is responsible for making what happen, and when. Examples of the requests older people might make to live the lives they want could include having help bathing every morning, receiving meals on wheels because they can no longer cook, getting transported to their church on Sunday, and needing a way to visit their grandchildren regularly.

PLANNING

The person-centered process emphasizes the individual's strengths and abilities, rather than limitations. It focuses on what is most important to have a life the individual considers worth living, rather than what professionals consider is "best for them." It recognizes that what is most important in our lives in not necessarily what has typically been offered in human service systems. Person-centered planning is a movement away from traditional services. If safety or health concerns are raised, those issues are discussed and included in the plan and process.

If the person is not able to participate in the decision-making process because of a severe disability, those who are closest to them share information to determine what the person's preferences are. This means the family, personal assistants, direct-care staff, or anyone who spends the most time with the person and knows them best. Person-centered planning assumes that all people, no matter what their disability, have preferences that should be honored and respected. Facial expressions, gestures, moods, and many other behaviors can indicate preferences of an individual, what seems to make them happy or sad, and can be used to determine the kind of life they should be supported to live.

Person-centered planning was written into law in Michigan in 1996. It is specifically defined as "a process of planning for and sup-

Fast Facts:

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In many situations, self-determination means that the people both direct the services they receive and are given control of the funds to purchase them through fiscal intermediaries.

Attorneys who understand person-centered planning can advocate the process for their clients.

porting an individual that honors the individual's preferences, choices and abilities." MCL 330.1700(g). Thus, all people who receive services from Michigan's mental health system have a legal right to person-centered planning. It is also becoming the accepted planning tool for services for older individuals. One of the guiding principles of Michigan's Long Term Care Work Group Report and Recommendations, June, 2000, reads: "Offer choices that emphasize the consumer's dignity, independence, and quality of life and truly reflect the principles of person-centered planning."

Thus, the person-centered planning process is recognized as essential to guide services for individuals with long-term care needs and their families.

In many community mental health programs, self-determination means that not only do the people direct the services they receive, but also they are given control of the funds to purchase them through fiscal intermediaries. In this way, they truly do control their own lives.

For attorneys who represent individuals with disabilities, it is important to understand what person-centered planning really means so they can advocate this process for their clients. Many times, what passes for personcentered planning is really just another version of the same old traditional service model. Individuals are not really afforded choices, but are given limited options within the system without consideration of the kind of life the person really desires. Since the process is mandated by the mental health code, clients receiving services from the mental health system can appeal the lack of person-centered planning or the written outcome if they do not agree with it. Appeals are afforded through Medicaid hearings, the local county community mental health program, and the county's Office of Recipient Rights.

When people direct their own services and control the funds used to buy them, it gives real meaning to the term "self-determination." Attorneys can advocate for individuals to attain the kind of person-centered planning and self-determination that makes each individual's life meaningful. •

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