

Support Planning Professionals Learning Community (SPP LC)

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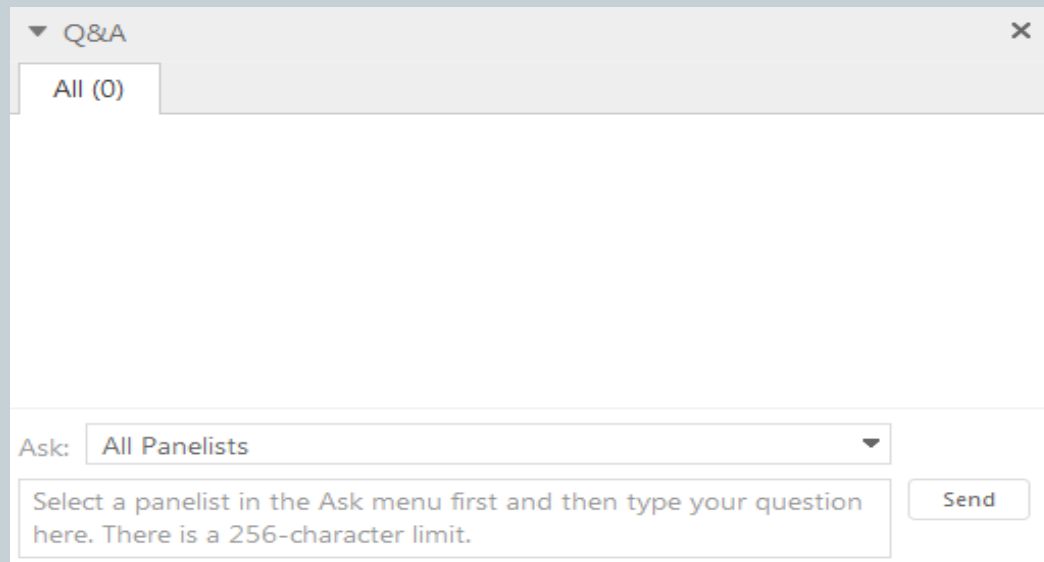
MAY 25, 2016

MINNESOTA DEPARTMENT OF HUMAN SERVICES

Welcome

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To ask a question during the presentation use the Q&A Panel in WebEx



The screenshot shows a window titled "Q&A" with a close button (X) in the top right corner. Below the title bar is a tab labeled "All (0)". The main area of the window is empty. At the bottom, there is a section labeled "Ask:" with a dropdown menu currently set to "All Panelists". Below the dropdown is a text input field with the placeholder text: "Select a panelist in the Ask menu first and then type your question here. There is a 256-character limit." To the right of the text input field is a "Send" button.

Select “All Panelists”, type your question, and click Send.

Bulletin Update

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Bulletin #3 – Lead Agency Requirements for Person-Centered Principles and Practice – Part 3

- Methodology for monitoring compliance to the Person-Centered, Informed Choice and Transition Protocol

Person-Centered Practices Webpage

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- FAQ's
- Links
- Ongoing updates

Future Events

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Monthly webinar announcement

My Move Plan Summary

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- Now a required document
- Will be published on Edocs soon

New My Move Plan Summary

7

Long-term services and supports

My Move Plan Summary

Instructions

The support planner and the person who is moving complete the My Move Plan Summary together.

When completing the form, follow these required steps:

1. Complete all the required fields (noted by the asterisks)
2. Include the person's signature at the end
3. Include (a minimum) of two signatures from professionals – if applicable
4. Attach a copy of the person's medication schedule
5. Attach a copy of the person's back-up or crisis plan
6. Provide a copy to the person and his/her service providers
7. Keep a copy in the person's case file

Case manager responsibilities

When a person who receives waiver services decides to move or has moved, the case manager is responsible to evaluate the person's needs, update the support plan as needed and communicate information to others involved.

If the My Move Plan Summary was not completed, please indicate why:

- o Case manager was not aware of the move.
[text box to add explanation]
- o The person declined to have the case manager complete a move plan summary.
[text box to add explanation]
- o Other
[text box to add explanation]

My information

*First Name _____ *MI _____ *Last Name _____

Is your case manager aware of your move? [Y/N radio button]
Do you agree to participate in the development of this transition plan (and therefore, to create a move plan with your support planner)? [Y/N radio button] – if no, why?

My goals

Where do you want to live?		
*What address are you moving to?	Move date	
What are the important things that you want the people who support you to know?		
Who are the important people in your life?		
NAME	RELATIONSHIP TO YOU	CONTACT INFORMATION (email or phone)

My supports

*How will you get to your new place? Who will take you and when?
What will you need help with to set up your new home? Who will help you with this?
Where are your belongings now?
*Date and time your belongings will arrive
*Who will deliver your belongings?
Who do you call if your belongings don't arrive?
*If you take medications, will you need help with them? (e.g., setting them up, ordering, picking them up, etc.)

My follow-up supports

*Date and time someone will check with you to see if you are okay after you get to your new home	Who is the person who will check on you once you settle in?	How do you contact them if needed?		
*Do you have upcoming appointments? [YES/NO RADIO BUTTON]				
If yes, what dates and times are your appointments and who they are with?				
DATE	TIME	PERSON/PROVIDER	LOCATION	HOW WILL YOU GET THERE?
*Who is on your support team?				
NAME	RELATIONSHIP TO YOU	HOW WHAT IS HIS/HER CONTACT INFO?		

My plan

Where is your plan? (meaning: Who has a copy of it?) _____

Who else has a copy of your plan? _____

Signatures

*Person moving:	NAME	Signature	Date
* Check here if this planning session happened over the telephone (and therefore will not have the person's signature)			
Planning at guardian:	NAME	Signature	Date
Current case manager:	NAME	Signature	Date
New case manager:	NAME	Signature	Date
Current provider:	NAME	Signature	Date
New provider (if applicable):	NAME	Signature	Date

Mental Health Updates

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LARONE GREER

Questions: Use Q&A Panel and send to "All Panelists"

2016

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**May is
Mental Health
Awareness Month**



STATE of MINNESOTA

Proclamation

- WHEREAS: In Minnesota, there are approximately 109,000 children who need treatment for serious emotional disturbances; and
WHEREAS: More than 224,000 Minnesota adults have serious mental illness; and
WHEREAS: Untreated mental illness can lead to unnecessary disability, unemployment, challenges in school, substance abuse, homelessness, incarceration, and suicide; and
WHEREAS: The economic cost of untreated mental illness is staggering, costing the United States more than 100 billion dollars each year; and
WHEREAS: A continuum of care is needed so that people receive the right mental health services at the right time; and
WHEREAS: With early and effective treatment, individuals with mental illness can recover and lead full, productive lives.

NOW, THEREFORE, I, MARK DAYTON, Governor of Minnesota, do hereby proclaim the month of May 2015, as:

MENTAL HEALTH MONTH

in the State of Minnesota.



IN WITNESS WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Minnesota to be affixed at the State Capitol this 20th day of April.

Mark Dayton
GOVERNOR

Steve Pimmon
SECRETARY OF STATE

May Mental Health Awareness Month 2016

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- Each year millions of Americans face the reality of living with a mental health condition.
- 1 in 4 Americans will be affected by a mental health condition in their lifetime and every American is affected or impacted through their friends and family. Take action today to help others as we fight stigma, provide support, educate the public and advocate for equal care.

Self Care for All

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DANCE IT OUT
GO FOR A WALK
TALK ABOUT IT
BREATHE
GO TO BED EARLIER
FOCUS ON WHAT YOU
CAN CONTROL
REMINISCE ABOUT
GOOD TIMES
ASK FOR A HUG
LOOK FOR OPPORTUNITIES
IN LIFE'S OPPORTUNITIES
SMILE

REDUCE
STRESS

www.healthdigeZt.com

Don't forget to share! Follow us on twitter [@healthdigeZt](https://twitter.com/healthdigeZt)

MAY 2016

“ Believe you can and you're halfway there.

-Theodore Roosevelt”

SUN

MON

TUE

WED

THU

FRI

SAT

1

Track gratitude and achievement with a Journal - include 3 things you were grateful for and 3 things you were able to accomplish each day.

2

Start your day with a cup of coffee. Coffee consumption is linked to lower rates of depression. If you can't drink coffee because of the caffeine, try another good-for-you drink like green tea.

3

Set up a summer get away. It could be camping with friends or a trip to the tropics. The act of planning a vacation and having something to look forward to can boost your overall happiness for up to 8 weeks!

4

Work your strengths. Do something you're good at to build self-confidence, then tackle a tougher task. You've got this!

5

Keep it cool for a good night's sleep. The optimal temperature for sleep is between 60° and 67° Fahrenheit.

6

"You don't have to see the whole staircase, just take the first step."
-Martin Luther King Jr.

Think of something in your life you want to improve, and figure out what you can do to take a step in the right direction.

7

Experiment with a new recipe, write a poem, paint or try a Pinterest project. Creative expression and overall well-being are linked.

Building and Developing Relationships with Cultural Influences

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- Racial or Ethnic Self Identification
- Experience of Cultural Bias as a Stressor
- Immigration History and Status
- Level of Acculturation
- Social Orientation
- Verbal Communication Style
- Spiritual Beliefs
- Health beliefs and engagement in culturally specific social events, gatherings and activities

Guardianship/Conservatorship in Minnesota

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BENJAMIN ASHLEY-WURTMANN

Person – Centeredness & Guardianship/Conservatorship

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- As Minnesota pursues our Olmstead/integration goals, Guardianship/Conservatorship pose unique challenges
 - Communication around service planning
 - Concerns around liability with community placements
 - Fundamentally different from how we treat anyone else who makes “bad choices” for themselves
- Working Interdisciplinary Network of Guardianship Stakeholders (WINGS-MN)
 - National model for continuous improvement, reduction in incidence
 - Based out of ongoing conversations in Minnesota
 - Partnership with advocates, providers, DHS, Judicial Branch, more

What does Minnesota Law currently require?

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- May not be used just because a person has a disability.
 - The person is incapacitated and the persons needs cannot be met with less restrictive means (§ 524.5-310)
- Even then, the person retains rights
 - Only those powers necessitated by the person's limitations and demonstrated needs (§ 524.5-310)
 - Wherever feasible, orders must encourage maximum self-reliance and independence. (§ 524.5-310)
 - The person's currently and previously expressed preferences must be given due consideration (§ 524.5-120)

What outcomes do we see?

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- A vast majority of orders are plenary. (Teaster, Wood, Lawrence, & Schmidt, 2007).
- Persons denied self-determination experience significant harms.
 - Experience “low self-esteem, passivity, and feelings of inadequacy and incompetency,” decreasing their ability to function (Winick, 1995, p. 21).
 - Between matched groups of elderly persons, intensive protection and intervention resulted in increased institutionalization and mortality. (Wright, 2004, p. 77).
 - Women with developmental disabilities exercising more self-determination are less likely to be abused. (Khemka, Hickson, and Reynolds, 2005)

What outcomes do we see?

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- Continued reports of waiver services or placement admissions requiring guardianship
- Orders for guardianship based on diagnosis or impairment alone
- Regional variations in frequency or scope of orders
- Lack of comprehensive data to track or improve outcomes
- Once a guardian is appointed, they are incentivized to be risk-averse, selecting more institutional levels of care

Action Plan from WINGS-MN

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- Training opportunities, particularly for lay/family guardians.
 - Online Training
 - 4th District Classroom Training
- Change in Court Forms
 - What have you tried? Why didn't it work?
- Resources and Conversation
 - Ongoing planning and work groups
 - Resources from Jonathan Martinis

What can we do right now?

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- Ask questions about strengths and vulnerabilities
 - Does the proposed solution properly address the concern?
 - Is there a controversy? Is there another valid authority?
 - What assessments have been made? What don't we know yet?
- Ask questions about desires, goals, and values
 - A history and pattern of choices is invaluable in establishing supportive decision making
 - Ties into statutory protections in MN (§ 524.5-120)
- What decisions can the person make?
 - Nobody has 100% or universal competence.
 - Always relative to the situation at hand.

References

- Khemka I, Hickson L, Reynolds G. Evaluation of a decision-making curriculum designed to empower women with mental retardation to resist abuse. *Am J Ment Retard*. 2005;110(3):193-204.
- Teaster, Wood, Lawrence & Schmidt, “Wards of the State: A National Study of Public Guardianship,” 37 (1) *Stetson Law Review* 193-241 (Fall 2007).
- Winick, B. (1995). The side effects of incompetency labeling and the implications for mental health law. *Psychology, Public Policy and Law*, 1(1), 6–42.
- Wright, J. Protecting Who from What, and Why, and How: A Proposal for an Integrative Approach to Adult Protective Proceedings, 12 *The Elder Law Journal* 53 (2004).

Questions?

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Questions: Use Q&A Panel and send to "All Panelists"

Person Centered Practices and Mental Health

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BENJAMIN ASHLEY-WURTMANN

Person Centered Practices and MH

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- You have to be a person to participate in person-centered care.
 - Where does your sense of personhood come from?
- Recognize trauma from being “in the system”
 - Paperwork
 - Proving a level of need
 - Timeliness
 - Identification based on “can’ts”
 - Loss of housing, family, self-determination
- Mistakes and their afterlives.

Person Centered Approaches and Mental Health

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Power over approach

- Didn't work, practically or clinically.
- Cemented a single mistake as framework.
- Prioritized the convenience of the system, but stressful for *everyone* involved.
- Appeal to authority/bluffing



Power with approach

- Reimagining “resistance”
- Identifying circle of support
- Seeking shared objectives/handling disagreement



Person Centered Practices Common Elements: Growing in Relationships (Part 5 of 5)

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BETSY GADBOIS – DIRECTOR OF PERSON CENTERED
PRACTICES OWAKIHI INC.
STACY DANOV PHD LP

5 Valued Experiences/common elements

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- 1. Growing in relationships**
2. Contributing
3. Making choices
4. Being treated with dignity and respect and having a valued social role
5. Sharing ordinary places and activities

Each Valued Experience is related to one another

Its all about Relationships



From 245D

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- 245D.07 Service Delivery and Planning
- identifies and supports what is important to the person as well as what is important for the person, including preferences for when, how, and by whom direct support is given.
- ...opportunities for self sufficiency as well as developing and maintaining social relationships and natural supports

Important To:

1

What is important to a person includes those things in life which help us to be satisfied, content, comforted, fulfilled, and happy. It includes:

- **People to be with /relationships**
- Status and control
- Things to do and Places to go
- Rituals or routines
- Rhythm or pace of life
- Things to have

Important For:

2

- **Issues of health:**
 - Prevention of illness
 - Treatment of illness / medical conditions
 - Promotion of wellness (e.g.: diet, exercise)
- **Issues of safety:**
 - Environment
 - Well being ---- physical and emotional
 - Free from Fear

Important For:

3

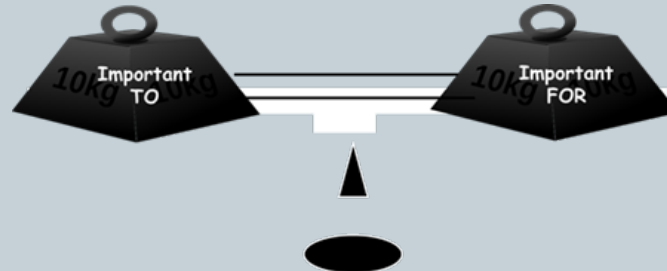
- What others see as necessary to help the person:
 - Be valued
 - Be a contributing member of their community



Review: Person Centered Practices

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- Person Centered Practices
 - POWER WITH, SUPPORTING, FOCUS ON STRENGTHS, EXPRESS PREFERENCES AND CHOICE, HAVING POSITIVE CONTROL OVER LIFE



Why do we do this

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- People want other people in their life. They want to belong and to feel love.
- People with disabilities have very few friends and experience loneliness
- People that have friendships are happier and healthier
- Having friends creates balance in the lives of the people we support
- Relationships with non paid people gives power and control to the people we serve
- Staff are happier with their jobs when they are helping others develop relationships
- When people have relationships they grow and change
- The community is missing out if we there is not an opportunity to relate with the people we support.

Learning from Person Centered Planning

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What do people want

- I just want to have friends – actually can you help me get a girlfriend?
- I want a wife and a family, I want to belong to someone and I want someone to belong to me.
- I want friends and I want them to hang out at my house
- I want to join a motorcycle club, that would be cool and I would be cool!
- I would like a job driving a limo, I could take them where they want to go and they could talk to me.
- I want to help others, I can mow grass and shovel snow

Learning from Person Centered Planning

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- I would like to see my high school friends
- I would like a husband, a baby, good friends, a dog, a cat and to see my mom and dad.
- I want to go to school because that's where the other kids are
- I want friends that can come to my house play games with me and go to Buffalo Wild Wings
- I want friends that can come over and cook gazpacho with me and go places with me.
- I want my son to belong. I want him to be with people that think he is awesome!

Barriers

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- Most people we serve live in the service system
- True relationships come with risk – we are afraid of litigation
- We are in the middle of a staffing shortage – it is difficult to find staff
- Our staffing patterns don't support relationship development
- Providers often make it difficult to have a relationship with someone we serve

Change

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We have to change the way we think about the work that we do.

- We have to see relationships as the key to creating meaningful lives with the people we serve.
- What if our job was to enable people to have interactions that lead to relationships?

How would the Direct Support Professionals job look different?

How do we make friends?

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- Think about the important relationships in your life
 - Where did you meet those people?
 - Did someone introduce you?
 - Did you share a common interest?



How do we make friends?

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Most relationships happen over time

- We have similar interests
- We see the same people in the same places over time.

When this happens there is a chance for meaningful interactions, contributions and reciprocity.

Stories of Success

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- Working in the deli in the grocery store
- Being a member of the Chamber of Commerce
- Joining the Lions club
- Supporting a relationship with a past staff person

So important

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Ask

Quote

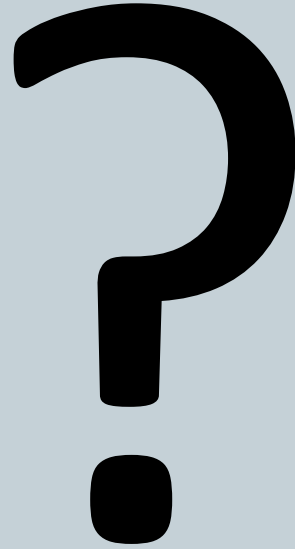
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Wherever we are,
it is our friends
that make our world.

Henry Drummond

Questions, Feedback, Comments?

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Questions: Use Q&A Panel and send to "All Panelists"

Where to Find Help Now?

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- Bulletins

- http://www.dhs.state.mn.us/main/id_000305

- Lead Agency Review Website

- <http://www.minnesotahcbs.info/>

- E-List Announcements

- http://www.dhs.state.mn.us/main/id_000677#

- CBSM Main Page

- http://www.dhs.state.mn.us/main/id_000402

Survey

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Please take a moment to let us know your thoughts.

- Take our [Survey](#):

<http://surveys.dhs.state.mn.us/snapwebhost/s.asp?k=146411941217>

Meeting Wrap

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Audio from today's session will be available beginning tomorrow morning by dialing:

855-859-2056

Conference ID:

16073694

If you have questions following the session, email to DSD.responsecenter@state.mn.us

Meeting Wrap

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Thank you for attending!