Great Lakes ATTC

Presents

Person Centered Planning: A Focus on Client Engagement, Retention, and Recovery

Presenter

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The Person Centered Approach

An approach to mental health, addictions and co-occurring disorders treatment and recovery in which the client is the director of his or her plan.

Old Approach

Counselor

Client

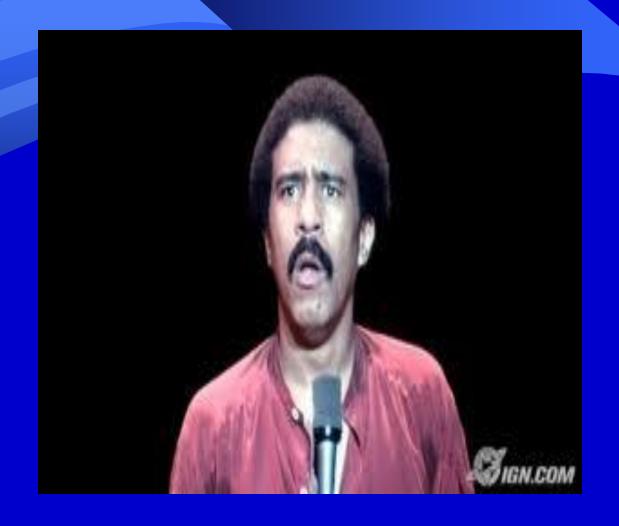
Person Centered Approach

Counselor

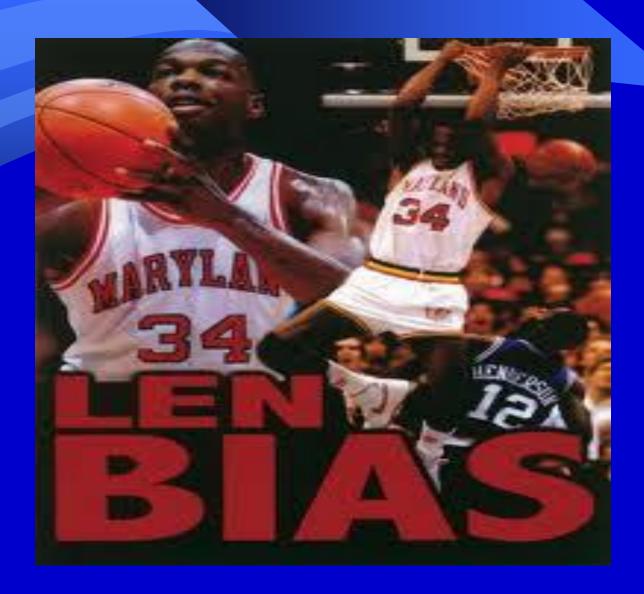
Client

Events that triggered the Substance Use Disorders Person Centered Recovery Movement





Richard Pryor



Prison Increase

1985 – 400,000 inmates

1995 – 1 million

2005 – 2 million

Today – 2.4 million

Methamphetamine Crisis

Limitations of the Acute Care Model

- Difficulty with attraction
- Short duration
- High drop out rates
- High administrative discharge rates
- Long waiting lists
- High relapse rates
- Increased stigma
- High imprisonment rates

Events that triggered the Person Centered Mental Health Recovery Movement

Events That Led to the Person Centered Movement

- In the 1980's there were many clients who did not respond well to traditional mental health treatment. These clients were chronically homeless and chemically dependent.
- Audits by the federal government revealed that mental health treatment was ineffective.
- Closing of state hospitals.
- Former mental health consumers emerging as leaders in the field

Tenets of Person Centered Recovery

The Tenets of the Person Centered Recovery Include (SAMHSA, 2004)

The client has ownership of his/her life and is therefore the director of his/her plan.

 Clients have a greater investment in the change process if they choose their own path.

The Tenets of the Person Centered Recovery Continued

- Family and friends who believe in the client can be great sources of support.
- Services are geared toward helping the client achieve a desired future and a meaningful life.
- The client is approached as a capable human being who is full of strengths.

The Tenets of the Person Centered Recovery Continued

- What the client has learned from previous experiences should be included in the plan.
- Helpers work to view the situation from the client's perspective.
- Wellness strategies chosen by the client are used.

The Tenets of the Person Centered Recovery Continued

- Service planning should include the client's entire life.
- The helpers strive to understand the client's uniqueness, hopes, wishes, dreams, and aspirations.
- The client is the hero in the planning process.

Person Centered Planning

Make the client the hero

Four Factors that Lead to Client Engagement

- Model
- Counselor hopefulness
- Therapeutic relationship
- Client factors

Source: The Heroic Client

Extra Therapeutic Factors

- Success prior to mental illness or substance use
- Positive vision for the future
- A good education
- Reading comprehension
- Employability

Extra Therapeutic Factors Continued

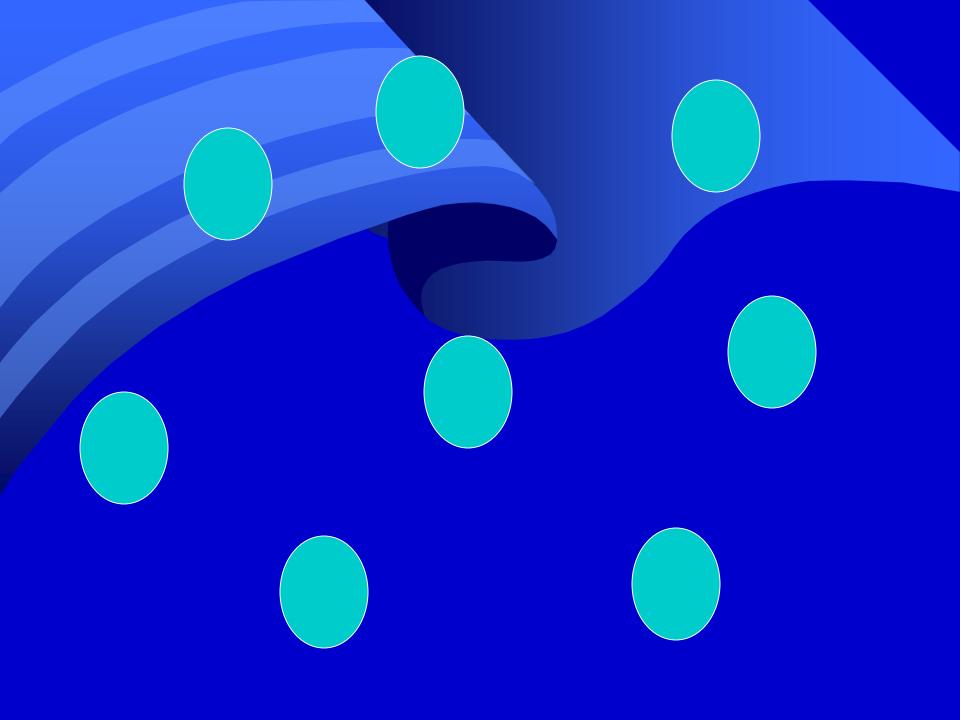
- Hope
- Internal resilience
- Love
- The family name

Extra Therapeutic Factors Continued

"A praying grandmother"

Leadership

Cultural pride



Personal Recovery Plan for Substance Use Disorders

Step 1. List three reasons how your life will be better by cutting down or stopping using substances. Consider how recovery may help you achieve your personal recovery goals.

- 1.
- 2.
- 3.

Personal Recovery Goal

- 1. This is my goal regarding substance use.
- 2. These are the reasons for my goal.

A

B

C

D

3. The steps I plan to take to achieve my goals.

A

B

 ${\cal C}$

D

Personal Recovery Plan for SUD Continued

Step 2. Identify friends in recovery. Write down at least one person who supports you in your goal of recovery.

<u>Name</u>

Phone #

Personal Recovery Plan for SUD Continued

Step 3. Consider going to support groups like AA, NA, and DDA.

Have you ever gone to any?

Do you think it would be helpful to attend?

Would you like an escort?

Meeting location - date/times:

Which of the following are important to you in selecting a recovery support group?

(Check all that apply)

<u>People who:</u>

Have experience with my primary drug Are the same gender Are close to my age Share my ethnic, cultural background Share my view on religion, spirituality, secularity Share my sexual orientation

Important to me Continued

(Check all that apply)

People who:

 Smoke tobacco
 Do not smoke tobacco

Have tolerant attitudes toward medication prescribed for addiction or mental illness

Have prior experience in the criminal justice

system

____ Do not have prior experience in the criminal justice system

Important to me Continued

(Check all that apply)

People who:

Have approximately the same income level
Have had severe alcohol/drug problems
Have had mild to moderate alcohol/drug
problems
Share my goal of complete abstinence
Share of my goal of moderate use

Personal Recovery Plan for SUD Continued

Step 4. Identify one to three "high risk" situations that can lead to unwanted use of alcohol or drugs. Consider situations in which you have used substances in the past, such as experiencing cravings, people offering you substances, being pressured to use, feeling bad, having nothing to do.

- 1.
- 2.
- 3.

Personal Recovery Plan for SUD Continued

Step 5. Make a plan for how to deal with each "high risk" substance use situations. For each "high risk" situation, identify one or two ways of dealing with it. Consider activities and skills that will help you not use.

High Risk Situation #1:

Plan for dealing with it:

Personal Recovery Plan for SUD Continued High Risk Situation #2:

Plan for dealing with it:

High Risk Situation #3:

Plan for dealing with it:

Personal Recovery Plan for SUD Continued

Step 6. Identify what you like about using substances? Think about the last time you used – how did you see it as helping you, or what led to it occurring? Did it help you feel better, have something to look forward to, deal with symptoms such as voices, depression or anxiety?

Personal Recovery Plan for SUD Continued

Step 7. Find new ways of getting your needs met. Consider the ways substances have met the needs you identified in Step 6. For each one think of at least one new strategy for getting that need met.

Need 1:

Identify another strategy for meeting this need:

Need 2:

Identify another strategy for meeting this need:

Need 3:

Identify another strategy for meeting this need:

Step 8. Develop a plan for what to do if you are just about to use or have just used. It is possible that you could have a slip or relapse, and if you do it doesn't mean that you did all this work for nothing. For some people, relapse can be a learning experience on the road to recovery from addiction. If you have a slip or relapse, you can go over this recovery plan to determine what changes need to be made.

If you have had relapses in the past, what have been the factors that led up to them?

What could you do right <u>before</u> using that might help you not pick up, or what could you do right <u>after</u> using to keep a slip from turning in to a binge?

What would you like me and the team to do to help you? What role can we play in supporting you right before or after you use?

You are in control of your recovery destiny. We will walk along side you to support your recovery. You have every right to be hopeful that recovery is possible.

We will work together on this personal recovery plan.

Member Signature
Staff Signature

Mental Health Recovery Planning: The Whole Person Model

Areas of	I am not	I am moderately	I am very	What do
My Life	satisfied	satisfied	satisfied	I want in
				this area
				(future hopes)?
Friendships				
Family Relationships				
Intimate Relationships				

Areas of	I am not	I am moderately	I am very	What do	
My Life	satisfied	satisfied	satisfied	I want in	
				this area	
				(future hopes)?	
Living Situation					
Transportation					
Finances					

Areas of	I am not	I am moderately	I am very	What do	
My Life	satisfied	satisfied	satisfied	I want in	
				this area	
				(future hopes)?	
Work (paid or unpaid)					
Education					
Religion Spirituality					

Areas of My Life	I am not satisfied	I am moderately satisfied	I am very satisfied	What do I want in this area (future hopes)?
Health (sleep, diet, exercise, etc.)				
Use of Alcohol and Drugs				

Areas of	I am not	I am moderately	I am very	What do
My Life	satisfied	satisfied	satisfied	I want in
				this area
				(future hopes)?
Mental Health (depression, anxiety, hallucinations, etc.)				
Creative Expression (painting, poetry, etc.)				

Areas of My Life	I am not satisfied	I am moderately satisfied	I am very satisfied	What do I want in this area (future hopes)?
Fun Activities For Leisure				
Belonging to a Community				

Life Plan Exercise

The field of addictions and mental health treatment are both moving towards recovery plans and life plans. These are steps beyond treatment plans. Completing a life plan can be more inspiring to clients than simply completing their treatment plan. The life plan speaks to what would make a client content, happy, and filled with purpose. To ensure that counselors do not get in the way of this process, it is helpful for them to complete life plans themselves. An inspired and purpose-filled counselor is more likely to inspire his or her client. Please respond to the questions below concerning your life plan.

My mission statement

Unfinished business

- A. 3 unfinished projects left incomplete, which I plan to complete
- B. 3 relationships neglected by me, which I plan to invest more in
- C. 3 self improvement goals I set in the past, which I plan to achieve

Plans for future growth

- A. Social growth (short-term/long-term)
- B. Spiritual growth (short-term/long-term)
- C. Physical growth (short-term/long-term)
- D. Mental growth (short-term/long-term)
- E. Emotional growth (short-term/long-term)

My happiness plan

Using these 3 quotes as a guide, develop a happiness plan:

"Most people are as happy as they make up their minds to be." — Abraham Lincoln

"Happiness is a moment-by-moment decision.

The happiest people are the ones who have the happiest moments." — Dali Lama

"The present moment is always okay." In Search of Excellence

Role plan - List your 7 most important roles and what you would like to accomplish in each role.

A.

B.

C.

D.

E.

F.

G.

<u>Legacy plan</u>

- A. The legacy I would like to leave my family
- B. The legacy I would like to leave my community
- C. The legacy I would like to leave the world

Professional contributions plan

3 contributions I would like to make to my chosen field of study

Wish list (Bucket list) — Write 10 items for each areas listed below

- A. What I want to learn
- B. Where I want to go
- C. What I want to see
- D. Who I want to become