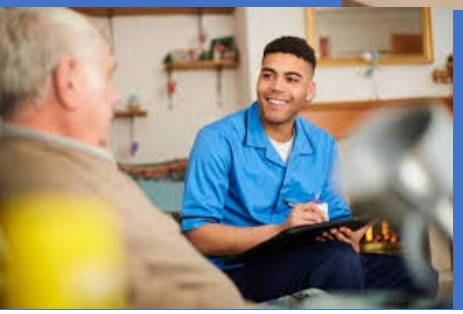




Person-Centered Practice in your role as Project Director

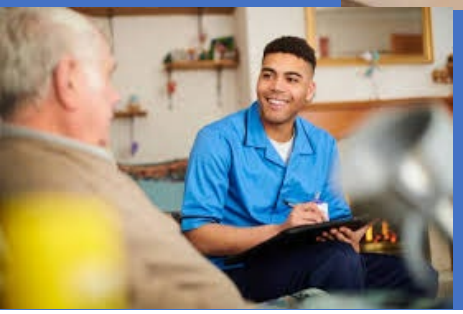
Shefy Simon,

Project Officer



Arriving in the current moment





Person-Centered Practice in your role as Project Director

Shefy Simon,

Project Officer

Person-Centered Practice in your role as Project Director



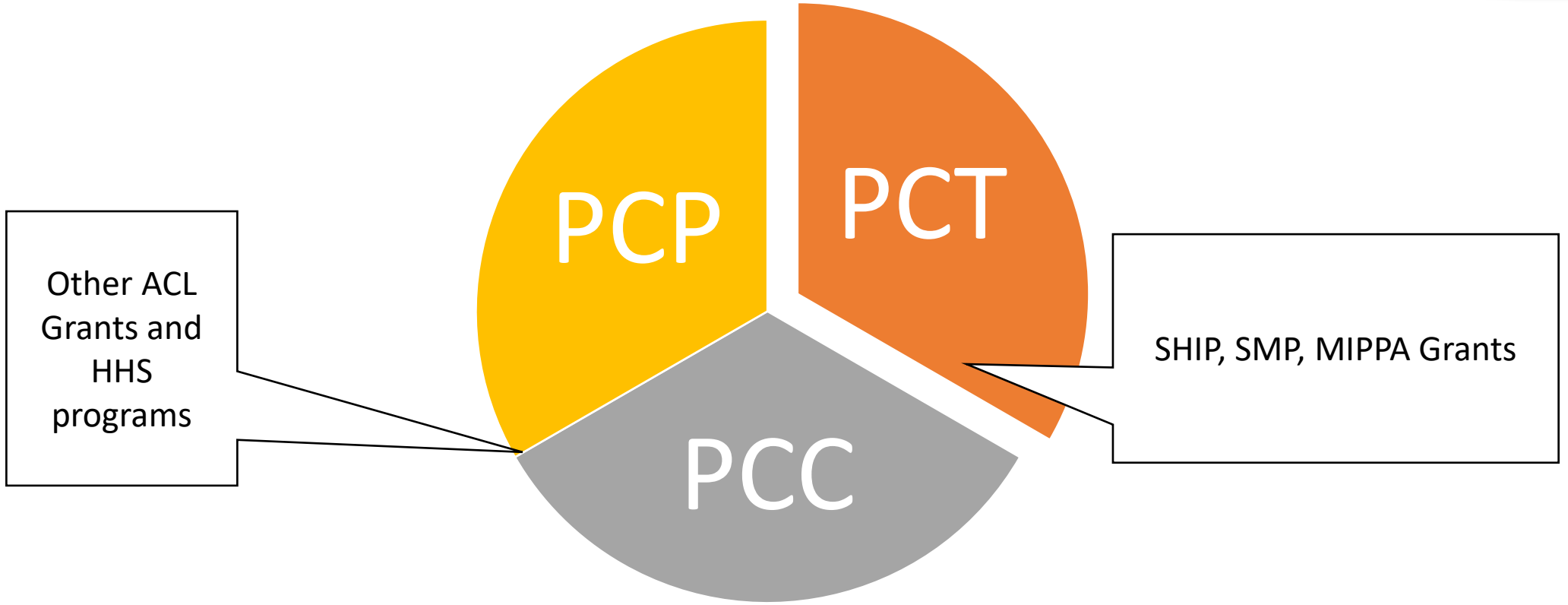
Agenda

- What Is Person Centered Practice?
  - Applications to your grant work
  - Resources and Toolkit
- Relationship Map
- De-escalation
  - Group Activity

Person Centered Practice (General Definition)

- Person-centered practice, supported by the Administration for Community Living (ACL), is a framework where older adults and people with disabilities direct their own lives, services, and supports. It emphasizes identifying strengths, needs, and goals to achieve a personally defined "good life" and is often trauma-informed.[2]

Person-Centered Work and Your Grant

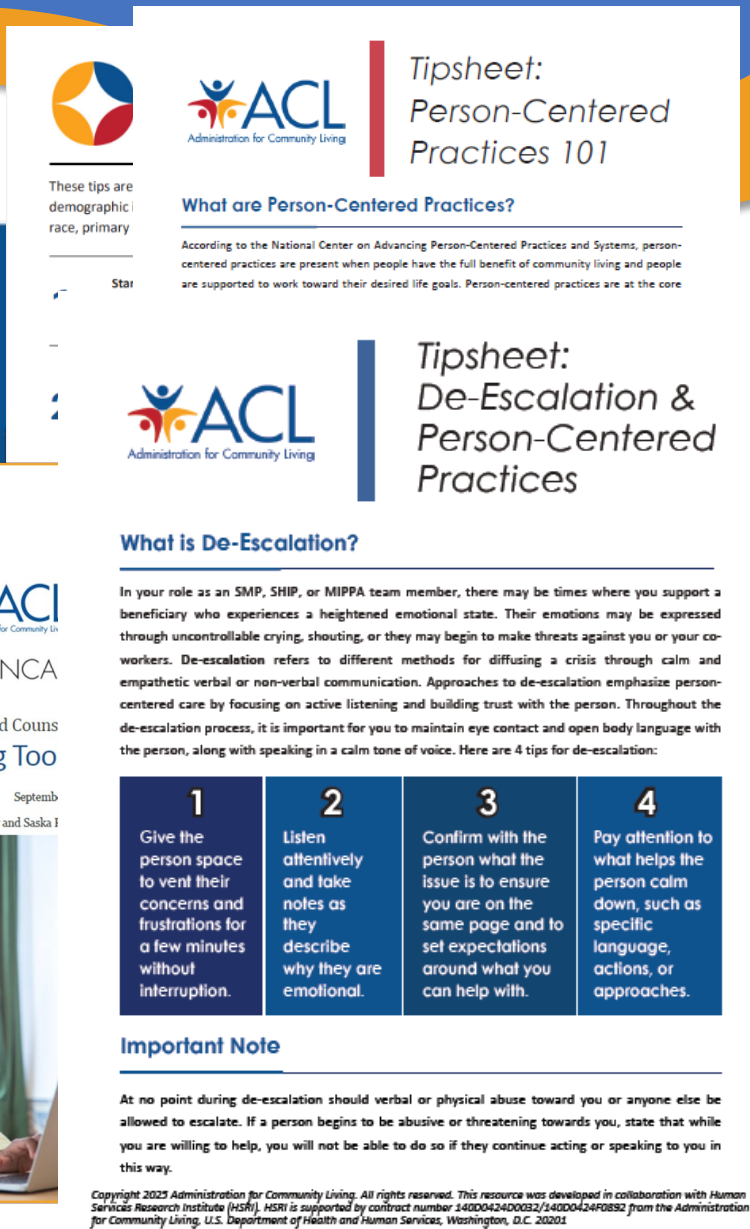


Using PCT Resources

PCT Resources (found in TA/resource libraries)

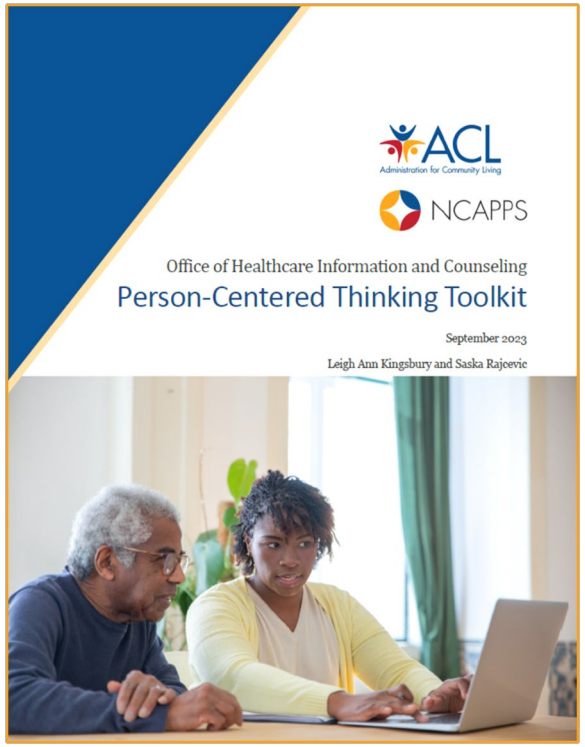
- Person Centered Thinking (PCT) Toolkit
- Cultural Humility (A Quick Reference Guide For SMP, SHIP, and MIPPA Grantees)
- Tips for SMP, SHIP, and MIPPA Grantees: Asking Demographic Questions
- Data Driven Strategy Toolkit
- Cultural Humility: A National Environmental Scan for the Office of Healthcare Information and Counseling
- Tipsheet: Practicing Practicing Person-Centered Care Under Pressure
- Tipsheet: De-escalation & Person Centered Practices
- Tipsheet: Person Centered Practices 101





Person-Centered Thinking (PCT) Toolkit

- WHAT: **Person-Centered Thinking (PCT) Toolkit.**
- BY: The PCT toolkit was developed by the National Center on Advancing Person-Centered Practices and Systems (NCAPPS) with support from ACL and a workgroup of SHIP, MIPPA, and SMP team members.
- WHY: To strengthen existing person-centered practices by:
  - providing an overview of person-centered thinking,
  - prompting self-reflection exercises,
  - listing actionable ideas for how team members can implement person-centered practices in their day-to-day work, and
  - outlining a variety of person-centered tools and resources for use.
- WHO: All SHIP/MIPPA/SMP Team Members but also can be used widely in the aging and disability network
- WHERE: Sent via listserv but also found in our TA/resource libraries



Thank you to our 2023 PCT Workgroup:

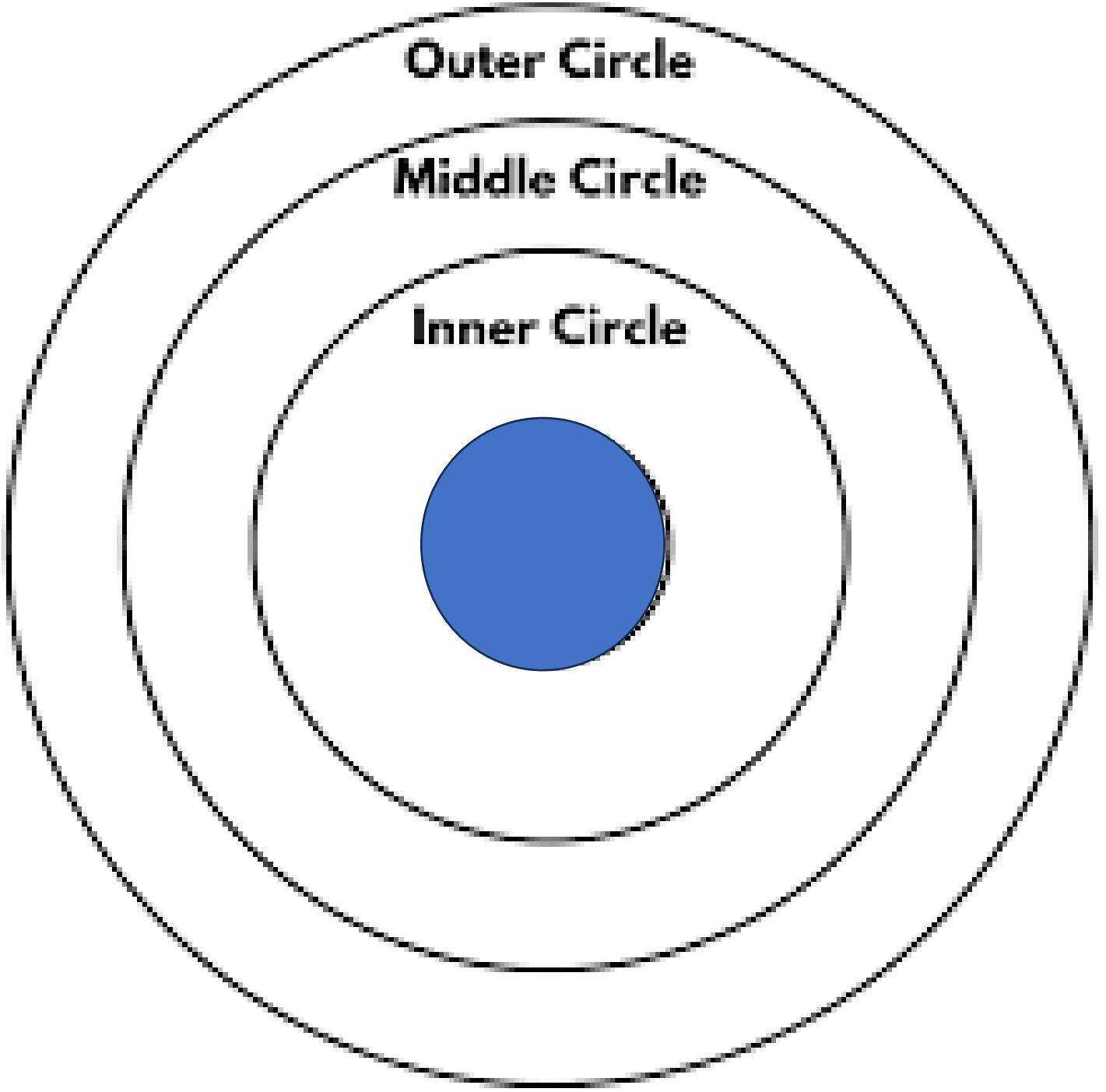
- Dana Norwood, Alaska SMP/SHIP/MIPPA
- Cielo Kenngott, Arizona SHIP/MIPPA
- Todd Johnston, Connecticut SHIP/MIPPA
- Isabella Campusano, Florida SMP
- Carol Warzecha, Michigan SMP/SHIP/MIPPA
- Ray Walker, Oklahoma SMP/SHIP/MIPPA
- Darren Hotton, Utah SMP/SHIP/MIPPA
- Mari DeLeon, Virginia SMP
- Jasmine Ward, Washington SMP/SHIP/MIPPA



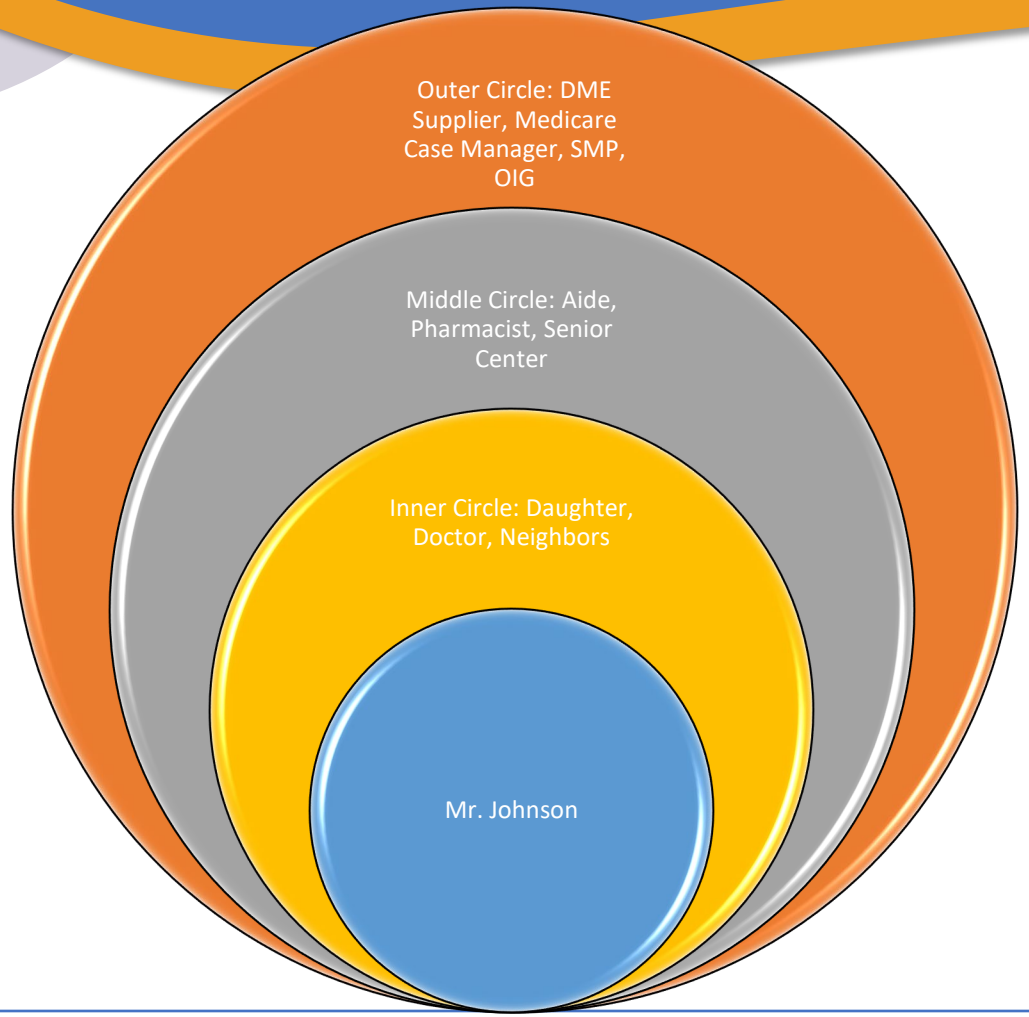
PCT Relationship Map

Relationship Map

- Take a few minutes, and open up your packets. Begin on page one and complete a Relationship Map of the scenario on the page.



Applying Relationship Maps for Medicare Fraud Cases



1. Start with the person:
- - Trust & privacy matter

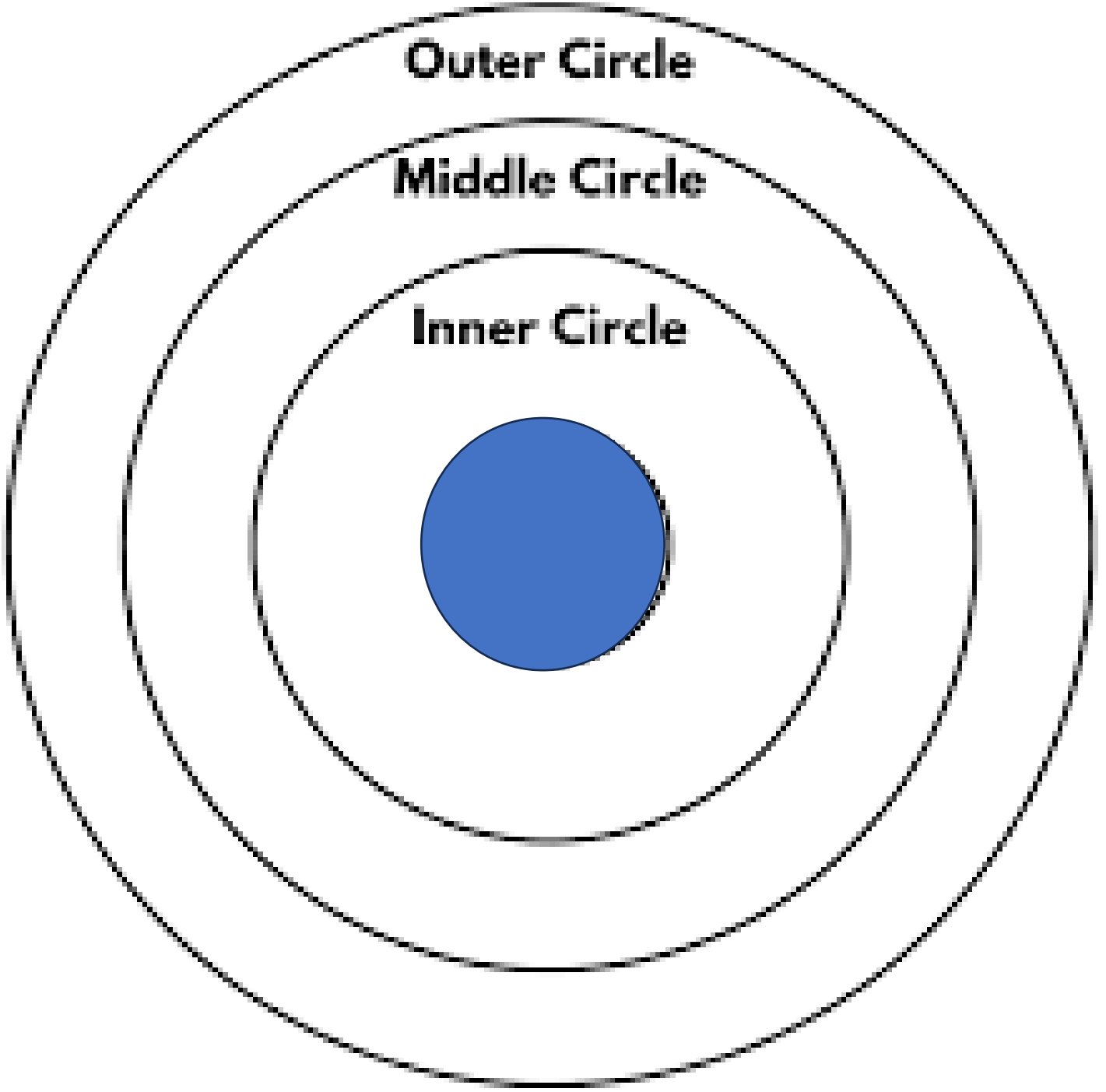
2. Use relationships:
- - Who noticed the issue?
- - Who does the person trust?

3. Take action:
- - Engage supports first
- - Escalate to Medicare/OIG if needed

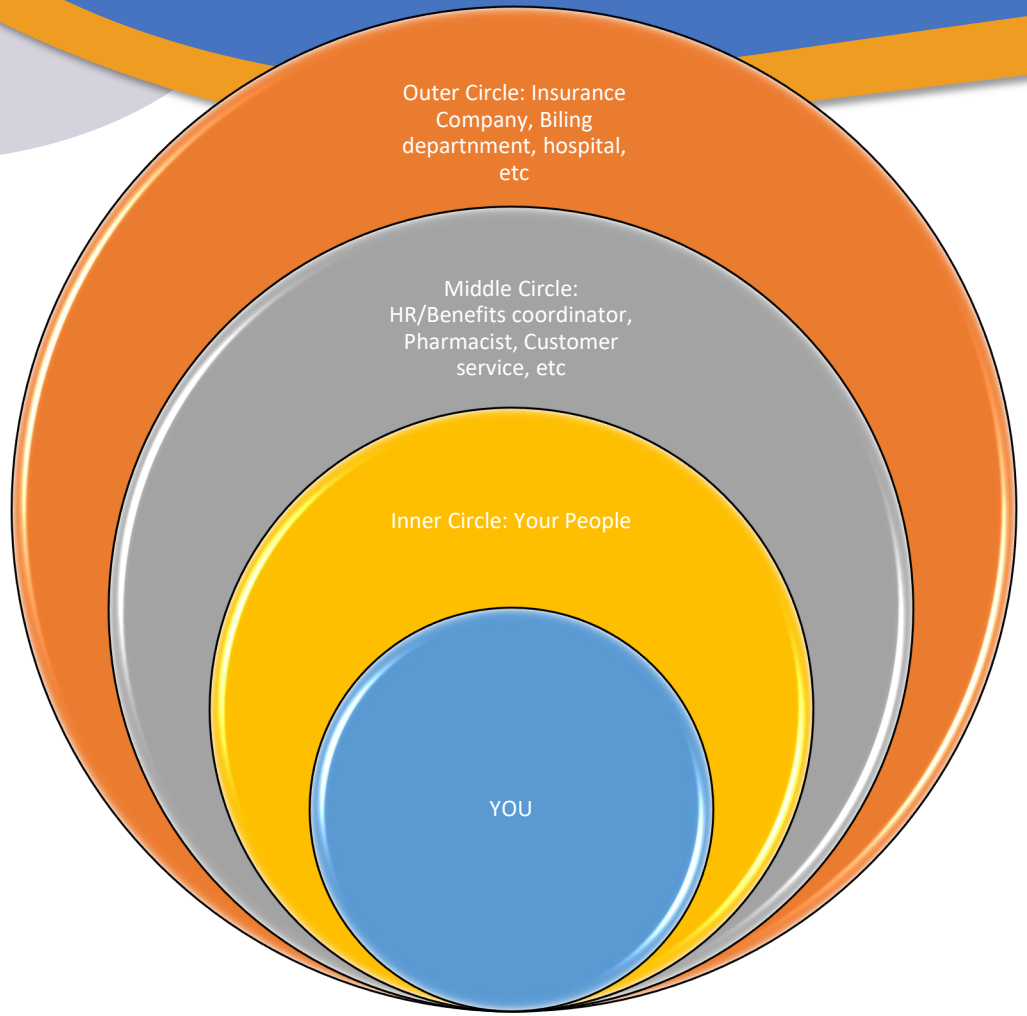
3. Result:
- - Person-centered response
- - Better protection

Relationship Map

- Now, look at the next scenario. This is a self-reflection exercise using the relationship map



Self Reflection Relationship Map



1. Start with the person:

2. Use relationships:

3. Take action:

3. Result:

PCT De-Escalation Steps

De-Escalation & Person-Centered Practice

1

Give the person space to vent their concerns and frustrations for a few minutes without interruption.

2

Listen attentively and take notes as they describe why they are emotional.

3

Confirm with the person what the issue is to ensure you are on the same page and to set expectations around what you can help with.

4

Pay attention to what helps the person calm down, such as specific language, actions, or approaches.

Scenarios

- We will look at a few scenarios. You will be given time to read the prompts.
- Please work with the persons at your table and select 1 person to be your speaker at the end
- Use the de-escalation steps provided and apply them to the scenarios presented





Scenario 1

- Anthony is a dedicated SHIP/SMP/MIPPA staff who usually works on data entry. During a presentation during Open Enrollment on Medicare at a Senior Center that was receiving media coverage, a beneficiary, and veteran, got very upset with him. The beneficiary thought Anthony worked for Medicare and that Anthony was responsible for Medicare not covering his wife's recent SNF stay. Anthony has informed you that he walked out of the presentation. What do you as the person in charge of the SHIP/SMP/MIPPA program presentations do in response? Additionally, the media outlet present has also reached out for comment.

Scenario 2

- Melinda is a 74 y/o beneficiary with traditional Medicare due to snowbirding in another state for the winter. In January, she had a fall and needed to be hospitalized. While in the hospital, she learned that she had been put on an MA plan and does not have traditional Medicare anymore. The hospital also tries to order her a brace, of which she doesn't qualify because she apparently already billed Medicare for braces that month. She pays out of pocket and saves all her bills. She comes to your SHIP/SMP office and demands to speak to the counselor that signed her up for Medicare last open enrollment. You check your records and do not see any appointments with Melinda and ask your staff, of which, no one knows or remembers working with Melinda. How do you de-escalate this situation?

Scenario 3

- Jolly comes into her scheduled SHIP counseling session bright eyed and cheery with her adult son Francois in tow. Francois lives with Jolly and drove her in today. Within the first few minutes you notice he's short with Jolly and impatient. You need more information to sign her up for MSP and other plans you believe she may qualify for, but it will require her to go home and bring in additional paperwork. At one point you see Jolly wince, as if she was going to be struck by Francois. You are concerned for Jolly and you also need to complete her Medicare enrollment.

Scenario 4

- Marty is a 65 y/o who recently retired and signed up for an MA plan. The MA plan sent him a letter saying they are leaving his network and that he would likely receive a special enrollment period to sign up for another MA plan or for traditional Medicare. Marty is upset. He liked his plan because it was the only one that offered a gym membership to his preferred gym where guys he used to work with go. After you spend 20 minutes working with him and, a dysfunctional plan finder, Marty is increasingly upset. He flips over a table next to you and then starts sobbing.

Scenario 5

- It’s June of 2025, you and one other volunteer are in the office getting ready to end the day. Karen comes in frantic and says she lost her father’s Medicare card. She can’t get through to social security and needs a card for her father as soon as possible because her father is convinced Medicare will disappear for new enrollments and only kept for those grandfathered in and have an existing Medicare card (based on what he saw on the news). You have 10 minutes left in your working day and Karen is insistent a person help her because she’s been on hold or talking to “robots” all day at social security and 800 Medicare.



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