

9 Elements of a Person-Centered System

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Through our work at [Support Development Associates](#), we have come to understand that a person-centered system has nine components working in concert. These nine elements are listed below and then described individually.

1. **A vision, mission, and values** that are routinely used
2. **Advocacy**—external and internal—for the desired outcomes, movement toward the vision and having the efforts be effective and efficient.
3. Effective **ways to learn the outcomes** that each person wants
4. Effective **support for those who implement** (paid and not paid)
5. An **organizational and team culture** that supports learning and provides psychological safety
6. Planning, practices, and supports that are **trauma-informed**
7. **Alignment The external and internal pressures on the system are aligned to best** support movement toward the vision.
8. A **quality management system** that measures effectiveness and identifies areas for improvement
9. **Leaders** who understand all of the above and engage in sustained and consistent actions for their implementation

1. Vision, mission, and values that are routinely used

In his TED talk, [How Great Leaders Inspire Action](#), Simon Sinek said: “People don’t buy what you do. They buy why you do it.” A key part of leading change is articulating the “why” in a way that creates buy-in. This is the vision, the reason why we are making the effort. The best vision statements are what Rosa Beth Moss Kanter calls “a compelling aspiration” in her article [The Enduring Skills of Change Leaders](#) (1999). It makes you want to be part of the effort. The best, most powerful are developed with those impacted. However, the more people engaged, the more likely the temptation to include everyone’s thoughts. Instead of a compelling aspiration you get a complex, compound, run-on sentence that has no power. Everyone engaged needs to seek a simple, clear statement of the “why.”



The mission statement is the “what.” It is what we do to move toward the vision. It is clearly related to the “why.”

The values are not simply a restatement of the vision but instead are the values you use in everyday work. They lend themselves to asking questions that help you assess your practices, such as “Are we transparent in our actions?” They are part of the “how” in accomplishing the “why.”

Unless they are used, none of these matter, and time and energy spent on developing them is wasted. Ask:

- Is there a vision that describes the why and is a compelling aspiration?
- Is the vision routinely shared?
- Are the vision and mission used when evaluating existing efforts and deciding on future projects/efforts?

2. Advocacy—external and internal—for the vision, alignment, and outcome implementation

Resistance to change is normal, and the resistance requires responsive pressure for change. Much of the pressure for change comes from those who advocate for it. The more informed the advocates are, the more targeted their advocacy will be. External advocates are those who are not employed by the system. Typically, they are the ones who come to mind when we think of advocates. But there are also internal advocates. They are most often people who have been through training and have a passion for the work. They are the champions. As champions, they are a key source of positive pressure. In addition to encouraging the development and use of person-centered practices, they can help evaluate proposed efforts and help avoid unintended consequences.

Another key group of advocates are those who are supported and their families. Opportunities to learn the skills needed to develop, direct, and contribute to individual support plans must be routinely available to advocates who also need to know what plans should include and how the plan will be used. Those who learn how to develop their own plans and direct their services must have opportunities to support others who are using the services. What is working and not working in how the system is supporting them needs to be solicited, and their life in balance from their perspective needs to be described plainly in their plan. Learning from those who are supported should be a major driver of change.

3. Effective ways to learn the outcomes that each person wants

NCAPPS identifies [Five Competency Domains for Staff Who Facilitate Person-Centered Planning](#). They unite the many effective ways to do person-centered planning that have been developed and used over the past two decades. At their core is effectively learning

how each person wants to live and the support needed to have that occur. What needs to change and what needs to stay the same for the person to move toward (or sustain) their desired life are the outcomes the plan needs to describe. Efforts to deal with issues of health or safety are described in the context of the person having what matters to them (“what is important to”).

Do the identified outcomes support the person to have a life of meaning and purpose? Have those providing support used a discovery process to learn what is meaningful to the person that can be a springboard to developing outcomes that make sense for the person?

4. Effective support for those who implement (paid and not paid)

Plans only matter if they are implemented. Good planning entails making promises to the person with whom you are planning. Not implementing the plan feels to the person as if promises have been broken and trust shattered. Implementation is as critical as developing plans. Those who are to implement need the skills and support required to be successful. The vision, mission, and values need to not only be part of onboarding but used in giving feedback on performance. Person-centered thinking skills need to be taught and their use reinforced so that they become embedded in the culture.

5. Organizational and team culture that supports learning and provides psychological safety

In seeking to become a person-centered organization, a learning culture is a key driver. A “blame culture” will kill progress. As Peter Drucker, a leading management expert, has been quoted as saying, “Culture will eat strategy for breakfast.” Every person-centered organization and system will have unique characteristics. To become and then stay person-centered requires a commitment to systemwide learning. There needs to be a recurring cycle of effort, learning, and acting on the learning. But learning cultures require that other attributes are present. First there needs to be what Adam Grant describes in his book [*Think Again*](#) as psychological safety. It must be OK to try and not be successful. It must be OK to share the learning from less-than-successful efforts. Additionally, there needs to be accountability, respect, and trust.

Efforts should be made to have these characteristics be the core of the organizational culture, but with the recognition there will always be a team culture that displaces organizational culture. Training and support for managers to establish and maintain the organizational culture at the team level must be present so that the overall culture and team culture work in unison.

6. Planning, practices, and supports that are trauma-informed and culturally competent

Everyone who works in the organization needs to have training to achieve a basic understanding of what causes trauma and the impact of trauma on the brain and behavior. There needs to be recognition that employees as well as those using services are impacted by trauma. Referral for treatment/support must be arranged, if warranted. No one should seek to uncover someone else's trauma or seek details unless they have the necessary clinical training.

Staff need to be trained to assume trauma as a potential cause of any challenging behavior. Effective treatment needs to be present or developed. Where trauma has been established as the cause of the behavior, an assessment of the setting should be done and a "healing environment" provided.

Those who develop plans and those who implement them need to learn:

- How does the person define a safe setting?
- Where do they need control that can be supported?
- What relationships are healing?

The expectation is that the learning will be acted on.

As a part of effective support, training in cultural competence and cultural humility is part of onboarding. Understanding of and respect for the culture of those supported is seen as a core value.

7. Alignment of external and internal pressures to support the first six

Alignment means having the processes and practices of the system working together in ways that are both effective and efficient. Effective in that they are moving the system toward the why, and efficient in that they are doing it with the least effort. This often begins with looking for and questioning the underlying assumptions. For example, Is the assumption that the system is the expert, and the expert knows best, thus creating a dependence on the system? Or is the assumption that the person, family and loved ones are the experts, and the role of the system is to enhance/promote/endorse the capacities of the service users? If the answer is support and the person and the families are the experts it changes how intake, assessment and individual planning are done.

If there is alignment, the external and the internal advocates are all pushing in the same direction. Funding is used to support people in having positive control over their lives.

8. A quality management system that measures effectiveness and identifies areas for improvement

Quality management is viewed as a technical assistance entity supporting and verifying the results that lead to the outcomes identified by the person. This moves beyond measuring just health and safety standards and the process of plan development and implementation. Instead, efforts are made to look at experience of services and supports, with learning and modifications to best support the person occurring in a timely and effective manner. Health and safety are still reviewed and done in the context of the life the person desires. Data are disaggregated by ethnicity, language, and other characteristics to determine whether there are disparities in outcomes or experiences.

Areas of opportunities for improvement are identified based on meeting required standards, effectiveness of services and supports, and experiences of the person/family supported.

9. Leaders who understand all of the above and engage in sustained and consistent actions for their implementation

The strongest predictor of success in this work is the sustained, active engagement of leaders. Where the single motivation is to be in compliance, or to look good, engagement is not sustained, and the changes are superficial. There may be a strong initial effort. However, the test is whether the effort is sustained. Will support continue when the organization is faced with making changes to its operational structure, practice, or organizational cultures? If those invested in the change see their efforts are not supported by leadership, they will stop trying to make changes. In situations where leadership is invested in the change, leaders serve as role models and demonstrate the changes they want other employees of the organization to make. Resistance is expected and addressed. There is a used and useful change management strategy. Everyone is moving toward the new mindset and practices. This engages the organization as a whole and creates a learning culture to identify what is working and not working to better support those using services and supports, as well as those providing services and supports.

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