

## **Person Centered Planning Notice**

Care Design NY is committed to providing services that are person-centered, meaning that you are the most important person in the planning process. Your wishes and needs are at the center of the services provided to you. This notification is to provide you with a summary of regulations that have been finalized by OPWDD and are effective November 1, 2015. These regulations address and outline your right to participate in a person-centered planning process. These regulations do not change your services in any way as agreed upon in your ISP or Life Plan unless you express a desire to do so.

A person-centered planning process is a process in which, to the maximum extent possible, an individual directs the planning of his or her services and makes informed choices about the services and supports that he or she receives. The planning process guides the delivery of services and supports to an individual in a way that leads to outcomes or results in areas of the individual's life that are most important to him or her (e.g., health, relationships, work, and home).

The individuals receiving support choose their circle of support. This circle of support is a group of people who they trust in their lives to assist them in the decision-making process. The person-centered planning process requires that:

- the services are based on the person's needs, interests, and strengths.
- the services are designed to empower the individual and strengthen skills.
- the person be satisfied with these services and supports.
- the person-centered planning process is collaborative between the individual and the service providers.

A person-centered planning process is utilized to develop a person-centered service plan (ISP or Life Plan). The individual directs the process, making informed decisions, and is involved in the scheduling of the meeting. The process considers cultural concerns so that it is understandable by the person served and all the parties chosen by the individual. The planning meeting will be scheduled in conjunction with the person supported at a time and location that is convenient for the individual. Updates are clearly communicated and there are strategies to address disagreements in the process.

The Life Plan must include the person's goals, strengths, and therapeutic needs. It will also include all services to be provided, including any self-directed services, the chosen providers, and evidence that the person's residence (if applicable), is of their choice. Any risk factors and strategies to minimize risks will be included. Monitoring of the plan will be ongoing by the Care Manager and the individual.

Page **1** of **2** Updated 1.19.2021



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The plan must be finalized and agreed to with the individual's written informed consent and signed by the provider(s) responsible for implementing the person-centered service plan. The plan will be reviewed at least semiannually, when review is warranted by reassessment, if capabilities or preferences change, or if requested by the person or the parties chosen by the person.

When the person's needs require modifications to his or her rights, a specific assessment and justification for the need will be included. Privacy, freedom to control his or her daily activities and schedules, full and unrestricted access to typical spaces and the ability to have and engage with visitors of their choice on the individual's schedule is included in this. The person should be able to have access to food at any time.

When living in a residence, the person's residence must provide a legally enforceable agreement that ensures the same protections from eviction as provided by landlord/tenant law. This protection should be provided through a lease, residency agreement or some other form of written agreement. This agreement should provide for eviction process and appeals. The residence must allow for privacy in the residence and bedroom by way of lockable entrances with only appropriate parties having keys or access as needed. If sharing the residence with others, the person must have choice of roommate. The person must have freedom to furnish and decorate their bedroom or residence within the parameters of the lease or other agreement.

The regulations outline what must be documented when certain rights are modified such as the specific and individualized need and underlying reason for the modification, less intrusive methods of meeting the need that were tried and did not work, and the informed consent of the individual and/or the party chosen by the individual to assist in decision-making, except to the extent that decision-making authority is conferred on another by state law, among others.

When rights modifications affect another individual who is receiving services in the setting, the regulations specify that the Care Manager must ensure documentation of the impact the rights modification has on the individual; the efforts taken to lessen the impact on the individual; and the informed consent of the individual and/or the party chosen by the individual to assist in decision-making, except to the extent that decision-making authority is conferred on another by state law is included in the individualized service plan or Life Plan.

The final regulations identify requirements for notification of the individual's right to a person-centered planning process and a person-centered plan and of the right to object to services pursuant to OPWDD regulations in 14 NYCRR Section 633.12. Notification must be provided to the individual and a person upon whom decision-making authority is conferred by state law, if any.

As always, your Care Manager is available to answer any questions you may have. You may also review the source document regulation 14 NYCRR Part 636 and amendments to 14 NYCRR Parts 633, 635, 671 and 686 final regulations, effective 11/1/2015.

Page 2 of 2 Updated 1.19.2021



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Thank you for the opportunity to serve you.

Page **3** of **2** Updated 1.19.2021