Person-centred approaches originated in the disability sector, and are now used within the areas of mental health, aged care services, schools, within the healthcare sector, and criminal justice system. Person-centred practices are used in teams and organisations to ensure that the focus is on what matters to the people receiving support and their families, and pays attention to how to support staff as well. Person-centred approaches ensure that we see people as unique individuals with valuable gifts and contributions.

Person-centred practices can be seen as a ‘toolbox’ or variety of ways to listen to and gather information with people. There are various evidence based resources that enable people to choose their own pathways to success. As with any other tool they are only effective if the user has developed the skills to use them and continues to improve them through practice and feedback with others. Working in this way ensures that people are truly listened to and are kept at the heart of all decision-making; how a service is commissioned, provided and organised. People in planning roles will have clear responsibility to use person-centred practices to help people they’re supporting to figure out where they want to go and how to best get there. In order to ensure that plans are implemented, and that the person continues to be supported in ways that make sense to them, person-centred practices must be embedded in daily practice at all levels of organisations.

People that take a person-centred approach to their work ensure that the person is at the centre of all that happens. Human services however operate as systems, and all too often the work becomes system or service-centred rather person-centred. Understanding the difference between the two is helpful in defining person-centred approaches.

<table>
<thead>
<tr>
<th><strong>Person-centred</strong></th>
<th><strong>Service/system centred</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Talking with the person</td>
<td>Talking about the person</td>
</tr>
<tr>
<td>Planning with the person</td>
<td>Planning for the person</td>
</tr>
<tr>
<td>Focused on strengths, abilities, skills</td>
<td>Focused on labels/diagnosis, deficits</td>
</tr>
<tr>
<td>Finding solutions that could work for anyone, preferably community based</td>
<td>Creating supports based on what works for people with ‘that diagnosis’</td>
</tr>
<tr>
<td>Things are done that way because they work for the person</td>
<td>Things are done that way because they work for staff or the service</td>
</tr>
<tr>
<td>Family and community members are seen as true partners</td>
<td>Family members &amp; community seen as peripheral</td>
</tr>
</tbody>
</table>

**Person-centred vs Service/System-centred**

Every conscientious and committed person working in human services believes that their approach to working with people is person-centred. They genuinely care about those they support; they want to help people to live fulfilling lives, to support them in ways that make best sense to them, and to see people achieve their goals and dreams for the future.
Person Centred thinking:

Person-Centred Thinking skills were developed by The Learning Community for Person Centred Practices and are used in several countries around the world within the areas of disability, aged care, mental health, chronic health conditions. It challenges us all to actively listen to the people we serve and to those who know them best in order to understand what they want for their lives. This enables us to help support the individual in ways that will increase their success at living as independently as they are able, and allows them to contribute to the extent they choose to community life.

They are a set of practical, yet values based tools and skills that have been developed over time that:

- Help find ways to support the person rather seeing the person as broken and needing to be ‘fixed’;
- Work for humans;
- Work at every level of the organisation; and,
- Help to build organisational cultures of learning and accountability.

Some of the different Person-Centred Thinking skills provide a framework for conversation, feedback and recording learning about what’s working and not working in relation to different goals and individual might have as well as how to support them in a way that makes sense to them.

One-page profiles:

One-page profiles capture what people like and admire, what’s important to the person and what others need to know and do to support them. They are a great way of giving new people crucial information to understand without it needing to take a long time. They are especially helpful when there are new or occasional staffs that may never have met the person before and may not meet them again. One-page profiles are also a way of ensuring that important information is captured and shared so that we don’t just rely on what is passed on verbally.

100 one-page profiles
One-page profile clip

Person Centred Review:

Person-Centred Review is a way of facilitating planning meetings and reviewing plans using some of the Person-Centred Thinking skills. The information leads to the development of clear person-centred outcomes and can be used to develop a living description and a one-page profile. The Person-Centred Review process is a way of making sure that there is a person-centred approach to planning with individuals even when there are time constraints and the planning might happen because the service requires it.

Person-Centred Reviews clip
How can I make sure we have person-centred outcomes for people?

So often for people who have long-term conditions, outcomes may be imposed on them by the services supporting them. Ensuring that we support people to develop person-centred outcomes means that they are much more likely to achieve success.

**Step 1: Checking what matters to people**
Before we can think about outcomes, we need to make sure we know and have recorded what matters to the person. This means we can make sure that when we develop outcomes with the person, they will be meaningful to them. One way of capturing this is through a one-page profile.

**Step 2: Where are we now?**
It is really important that we understand the person’s specific situation right now, comparing it with the life they have described in their one-page profile and truly understanding from their perspective what the issues are that they may want to address, rather than what we think they should address. One way of doing this is to use the person-centred thinking tool working/not working from different perspectives, including the health practitioner’s perspective.

**Step 3: Prioritising**
Having identified the issues that the person would like to address, they can be prioritised by mutual agreement.

**Step 4: What would success look like?**
For each of the issues the person has prioritised, we can start developing outcomes by identifying what success would look like if each of the issues were addressed successfully. This gives us the basis of the outcome.

**Step 5: Test it**
There are some simple questions you can ask to test the outcome. Sometimes, outcomes have solutions embedded in them, and asking questions like ‘What would it give you, do for you or make possible for you if you had that outcome?’ can help to uncover the true outcome.

**Step 6: What is getting in the way?**
Having identified what the person wants to achieve, we then need to identify the obstacles that may be getting in the way of achieving it.

**Step 7: Creating clear goals/steps and actions**
Having identified what is getting in the way of achieving the outcomes, the person can then set goals or steps to address these obstacles and move forward with their outcomes. They will need to be SMART, and they may need resources to be assigned to ensure that they happen.

**Step 8: Record in the plan**
The outcomes and the steps and support needed to achieve them can then be recorded in the plan. We should also record how the outcomes will be reviewed.

As part of the NDIS, it is important to have some practical tools that enable you to ensure participants are at the centre of decision making and planning. Person-Centred Thinking and approaches enable you to do this in a way that keeps the person at the centre but also allows for transparency and accountability. Even though participants may have a plan developed through NDIS it will often need “fleshing out” to ensure that ongoing learning is captured and that the person remains at the centre of decision making and support.

**Additional Resources**
Making a person-centred approach real for the people you support:
- NDP webinar videos
- Helen Sanderson associates
- HSA online learning

You can also contact the HSA Australia team for more information on:
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