Chapter Five

The Product: Evaluating Progress and Outcomes

The last “P” of the 4 Ps is the Product: evaluating the progress and outcomes of the person-centered Plan or, as it is called in PROS, the Individualized Recovery Plan (IRP). Personalized Recovery Oriented Services (PROS) Regulations require that each person’s IRP be reviewed and updated at least every six months to assure that it continues to reflect the person’s evolving goals in the recovery process. Frequent and ongoing reviews are also integral to person-centered practices because they provide a forum to celebrate individual accomplishments and, when necessary, adjust services and interventions so that they continue to address the individual’s changing strengths, barriers, and goals. Reviewing the IRP is often an opportunity to acknowledge the person’s progress and support transitions into greater independence and autonomy; however, the nature of recovery includes the possibility of relapse as well. Practitioners should be prepared to recognize when this is occurring and to encourage the individual to accept the challenges of overcoming new or persistent barriers without becoming discouraged.

Individual Progress towards Recovery Goals

Discussion of Assessments and Individualized Recovery Planning in previous chapters has stressed the dynamic, interactive quality of person-centered planning. The review of the IRP should be a continuation of the conversations already initiated and include discussion of the key elements identified during the Assessment Service and throughout Individualized Recovery Planning. Including these key issues in the review of the IRP provides a familiar platform from which the individual and the practitioner can evaluate how the person is doing in his or her recovery process.

The IRP Review is designed to blend regulatory compliance with an individualized, person-centered conversation with the person that considers his or her progress towards recovery. PROS Regulations require that the IRP Review include:
• an evaluation of the person’s existing goals, objectives, mental health barriers, and the ways that PROS Services and other interventions address these;
• the identification of new goals, objectives, barriers, PROS Services, and interventions if indicated;
• the updating and modification of target dates for the achievement of objectives/goals if necessary;
• the discontinuation of objectives and goals that the person has attained or believes are no longer pertinent;
• the documentation of all of the above in a new IRP that concludes with a new narrative formulation summary.

The regulatory requirements associated with the IRP Review can be accomplished within a person-centered context using the PROS Service, Individualized Recovery Planning, to discuss the person’s impressions of his or her progress towards recovery. The following suggestions provide ideas for structuring the conversation in a way that covers the required areas for an IRP Review while engaging the individual in the process.

• How does the person regard his or her progress and his or her work in PROS?
• What new strengths and skills has the person developed? Are these related to PROS Services and objectives? What objectives has he or she attained? How has this helped the person to come closer to attaining his or her life role goal(s)? How does the person feel about these accomplishments?
• Does the person want to modify any of his or her current goals as a result of attaining new competencies? Which goals might need to be re-prioritized?
• What barriers has the person overcome? What strengths, skills, and other resources has the person used to work on these barriers? What has the person learned in the process of meeting and overcoming these challenges?
• What new barriers have emerged? How can the person use the new skills he or she has developed to address these? What existing skills can the person use? What PROS Services and other interventions can be used to overcome new barriers?
• Which objectives, interventions, and modalities in the IRP need to be revised or updated?
What are new and different PROS Services that the person is interested in using to attain objectives and goals?

Are target dates still appropriate? Do they need to be revised or updated?

The person and the practitioner may decide that the best course to follow is to create an updated IRP that adds completely new goals. On the other hand, they may determine that only minor changes are necessary, such as the modification of an objective or extending a target date. Regardless of the scope of the modification to the IRP, the most important feature of the IRP review is the careful, insightful collaboration between the person and the practitioner, which assures that the IRP remains a dynamic, living document that reflects the individual as a whole person and captures his/her unique preferences and needs.

Monthly Progress Notes

Monthly Progress Notes are an indispensable tool in IRP Planning as well as in the facilitation of the required IRP reviews. Monthly Progress Notes provide an opportunity for the person and the practitioner to evaluate how things are going on a frequent and regular basis and document the continued medical necessity of the services being provided. In PROS, a Progress Note must be completed at least monthly for each individual and maintained in the person’s case record. More frequent Progress Notes, or shorter, less detailed Contact Notes, are also useful and may be invaluable in documenting the details of the individual's recovery process but are not required by the PROS Regulations.

Each Monthly Progress Note is like a small IRP Review and should be completed in partnership with the individual, using the PROS Service, IRP Planning. PROS Regulations require that each Monthly Progress Note include information about the following issues:

- Progress made and/or challenges encountered in achieving goals and overcoming identified mental health barriers;
- Discussion of PROS Services and other interventions used during the month and how these have been useful in overcoming barriers and achieving recovery;
- Documentation of any significant events in the person’s life, including special accomplishments or particular difficulties;
• Description of the person’s progress toward attaining his or her goals and objectives, including any goals or objectives that have been attained during the month;
• Any new PROS Service(s) added to the IRP during the month, the reason for adding the service(s) and the barrier(s) being addressed;
• Confirmation that the services and supports are being provided as defined in the IRP.

As with the IRP Review, Monthly Progress Notes must be completed in order to comply with PROS Regulations, but they are enhanced when they are completed through a person-centered process. When completed as a collaborative effort between the person and the practitioner, Monthly Progress Notes become meaningful assets in considering the recovery process.

**Managing Setbacks and Relapses**

As discussed in Chapter 2, people do not typically follow a straightforward and linear path through the Stages of Change. Periods of great progress and success are often followed by periods of time when the person experiences an increase in symptoms and greater challenges in attaining or sustaining goals and overcoming barriers.

It is important that relapses and delays in recovery be talked about openly and supportively. Conversations that consider stalled progress or potential relapse also contain the potential to reveal new and interesting information about the person, his or her goals, and how he or she feels about the recovery process. As such, even a difficult or disappointing experience may offer the person opportunities for significant insights and personal growth. In considering why the person is experiencing greater challenges, some issues to contemplate include the following:

• some goals may not be as meaningful to the person as he or she initially thought they would be and may need to be discontinued
• some objectives may need to be modified so that they are more useful or attainable
• target dates may need to be re-evaluated and modified to reflect a more manageable timeframe
• the person may need to participate in PROS Services using a different modality, such as in a smaller group or as a site-based group vs. a community-based service
• an additional or more intensive support may need to be added to the plan, such as an Intensive Rehabilitation (IR) service or a Clinical Treatment service

By discussing challenges and struggles in attaining and sustaining recovery in a collaborative manner, the individual often learns that mental health barriers can be experienced as opportunities for personal growth and autonomy rather than as failures. When an individual is able to engage in a frank and honest conversation about the things that are helpful and the things that are detrimental, he or she is invited to take personal control over his or her mental illness. In this context, relapses can become constructive tools in the recovery journey.

**Evaluating and Planning for Transitions**

Transition planning is a coordinated set of activities that promotes movement from one phase of life to another. Individuals transition from adolescence into adulthood, from attending school to finding a job, from living in a group setting to setting up housekeeping in an apartment. Exciting as certain transitions can be, there is inevitably an element of stress that accompanies such periods in life.

Person-centered transition activities focus on providing assistance to the person so that he or she is supported to live, work, and grow in the community of his/her choice. How does the person and his/her team of practitioners know when the time has come to plan for a transition? Some key points to consider may include the following:

- **The progress the person has made in achieving goals that will support his or her transition:** encourage the person to discuss the skills he/she has developed and the strengths/talents/resources he or she can use to manage mental health barriers that may present themselves.

- **The PROS Services the person has used:** Initiate a conversation about what the person has experienced in PROS and what he/she has learned from PROS Services. How will these experiences help prepare the person for the anticipated transition?
- **Feeling ready for the transition:** Support the person to examine his/her feelings – both positive and negative – around the anticipated transition. In what ways does the person feel ready and eager for the change? What are the things the person feels less confident about? What supports/services/resources would help the person manage the transition smoothly and with confidence?

- **Examine how supports/services/resources/community networks will change:** Explore how the transition may change important aspects of the person’s support system and help the person to consider and develop new systems of support that he or she can turn to following the transition.

- **Identify a safety net:** Discuss strategies and supports that the person can use if things do not go exactly as planned. Who are the natural supporters that the person can call on if necessary? Review the Relapse Prevention Plan and consider modifications and updates that might be useful during the transition. Encourage the person to identify and organize services and supports that he or she will be able to access after the transition if it is necessary. Identify the additional steps that might be needed if the person decides he or she needs to re-enroll in PROS or other services. Discuss potential barriers that might make it difficult for the person to access these services following the transition.

In more traditional approaches, mental health services often become the primary, if not sole, focus of individuals' lives. Such a focus creates additional and unnecessary challenges when a person is ready to transition to a more independent lifestyle. Recovery-oriented services, on the other hand, seek to convey a strong message that recovery is not only possible but **anticipated** for each individual. From the point of the initial contact, personal, social, and community resources are integrated into the recovery plan so that recovery, progress, and independence become the essential focal points. In this way, the person is supported to pursue a life that is grounded in friends, work, and community rather than one that is sustained by mental health services.

As with all life changes, the loss of certain activities, relationships, and familiar routines are inherent in a transition within and beyond the mental health system. It is essential to acknowledge this loss. Encourage the person to look forward, while continuing to support
conversations about his or her sense of loss and separation. Life transitions are often an opportunity to celebrate growth and recovery. An effective transition plan will help the person feel confident that she/he has the skills, the tools, and the supports necessary to negotiate a successful transition while leaving behind the familiar routines. The necessary skills, tools, and supports often come from within the individual as well as through his or her network of natural supports and community resources – as well as from the new relationships and activities that have yet to be discovered!

**Evaluating Person-Centered Processes**

The individual's level of satisfaction with the plan and the planning process is an important part of evaluating the implementation of person-centered planning. Practitioners should encourage individuals to consider some of the following issues in evaluating their level of satisfaction with the person-centeredness of their recovery plans:

- How satisfied are you with the level of input you have had in developing your plan?
- In defining your goals?
- In choosing your services?
- In prioritizing your goals?
- In achieving your goals?
- In feeling competent and autonomous in your community?
- In defining what recovery means to you?

In 2011, Dr. Janis Tondora, from the Yale Program for Recovery & Community Health, and Diane Grieder of AliPar, Inc., developed *Person Centered Planning Indicators (PCPI)* for NYAPRS (New York Association of Psychosocial Rehabilitation Services) as a precursor to developing a fidelity measure for person centered recovery planning. The measures are simple and easy to use. The first measure gathers the perspective of the person receiving service. The second measure gathers information about how person centered recovery planning processes are reflected in documentation (chart review). The actual instruments, scoring sheets, and instructions for use are provided as part of the Appendices to this handbook.
Person-Centered Planning encourages individuals and practitioners to join forces in the person’s quest for recovery. The recovery journey, like any journey, is a process that embodies inherent challenges and opportunities. It is the task of the partners – the individual working in close collaboration with the practitioners – to acknowledge and embrace the experiences encountered on the recovery journey and to value these experiences – the successes, the challenges, the goals achieved and the skills and abilities discovered and attained – as opportunities for personal growth and the realization of personal potential.
Chapter Highlights: The Product

- The review of the IRP should include discussion of the key elements that the person and the practitioner have already identified during the Assessment Service and throughout Individualized Recovery Planning.

- Frequent reviews of the IRP are integral to person-centered practices and assure that services and interventions continue to address the individual’s changing strengths, barriers, and goals.

- Monthly progress notes provide an opportunity for the person and the practitioner to evaluate how things are going and also provide documentation of the continued medical necessity of the services being provided.

- Supportive and open conversations that consider stalled progress or potential relapse frequently reveal new and interesting information about the person, his or her goals, and how he or she feels about the recovery process. These conversations offer the person opportunities for significant insights and personal growth.

- Identification and familiarity with social, community, and personal resources should be integrated into supports, services, and interventions from the person’s first contact with the program; this focus should be maintained throughout the recovery journey.

- Transition activities should focus on providing assistance to the person so that he or she is supported to live, work, and grow in the community of his/her choice.