



Recovery and Resiliency in Mental Health: A Person-Centered Approach

A new level of care

Recovery from mental illness is a personal journey of healing to achieve satisfaction in life, work, home and relationships. The Department of Human Services is committed to recovery and resiliency for youth, families and adults who receive mental health services.

Making sure mental health services are “person-centered” is critical to recovery and resiliency and to offering people effective and appropriate services. Being person-centered means:

- A deep respect for people and their individuality
- Treating a person with dignity and respect
- Building on his or her strengths and talents
- Helping him or her connect with their community and
- Developing relationships, listening to and acting on what he or she communicates to you, and taking time to know and understand the person and the things that make them unique.

Often when professionals say “person-centered,” they are thinking of person-centered planning and the processes that go along with that. However, being “person-centered” is much broader. Case managers, service coordinators, providers, and others that are involved in providing access to, implementing, and monitoring services have many opportunities to be person-centered and use person-centered practices.

In Minnesota, many case managers, providers, advocates, family members and others have long been engaged in person-centered planning and practices. In recent years, DHS has provided training and information on person-centered principles and practices in order to broaden thinking to looking at the whole person in every way for people receiving services.

Five common elements of person-centered practices:

*Services must help
people...*

- *Share ordinary
places*
 - *Make choices*
 - *Develop abilities*
 - *Be treated with
respect and have a
valued social role*
 - *Grow in
relationships*
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Minnesota's Olmstead Plan

Minnesota's Olmstead plan reinforces our commitment to recovery and resilience. The plan is a comprehensive strategy to improve choice and opportunities for all persons in Minnesota with mental illness—wishing to become more included in the community.

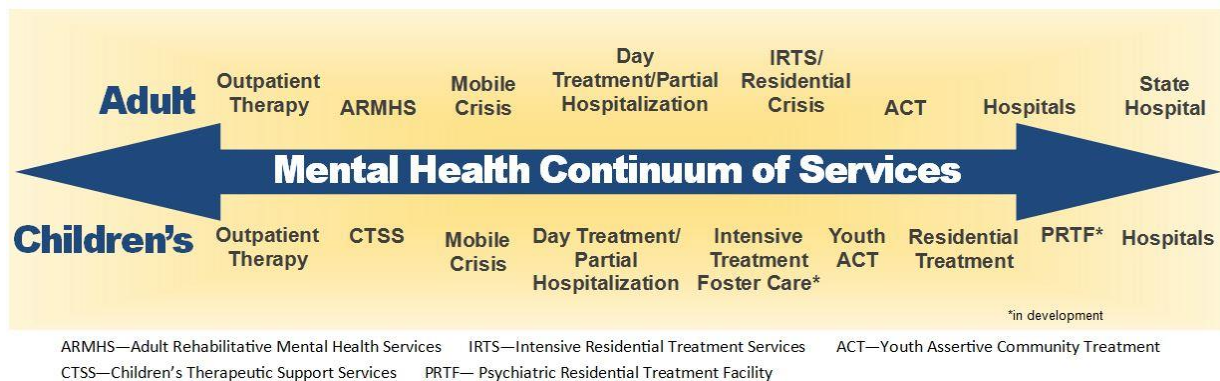
At the foundation of Olmstead is a person-centered approach through customized services, shared power and decision-making, and promoting hope. Minnesota's Olmstead Plan supports transformation of policies, procedures and practices to ensure individual choice, person-centeredness and the right services. Examples of transformation may include:

- Assessments identify how people are functioning in their everyday life. Providers may discover chemical health, primary health, spiritual health and well-being strengths and needs.

- Recovery and resiliency goals form the basis for service planning. Goals are informed by the person's and family's hope for the future.
- Power is shared between the person and provider, and the person and the provider negotiate a final plan for change to take place.
- Documentation is written concurrently and/or collaboratively. There is an exchange of information and clarifying ideas between the person and the provider.
- The care team coordinates services and shares information based upon the person's preferences and permission.
- Individual and family choices are honored to support a journey of healing to attain satisfaction in life, school, work, home and relationships.

Mental Health at DHS

The Department of Human Services is dedicated to supporting adults, children and youth with a mental illness in their personal journey toward recovery, as well as preventing mental illness whenever possible. DHS oversees a number of publicly funded programs offering community-based mental health services, creating a continuum of services designed to meet the needs of people engaging in mental health services and supports.



For more information, visit
www.dhs.state.mn.us/olmstead