

Person Centred Approaches: A model for considering the foundations  
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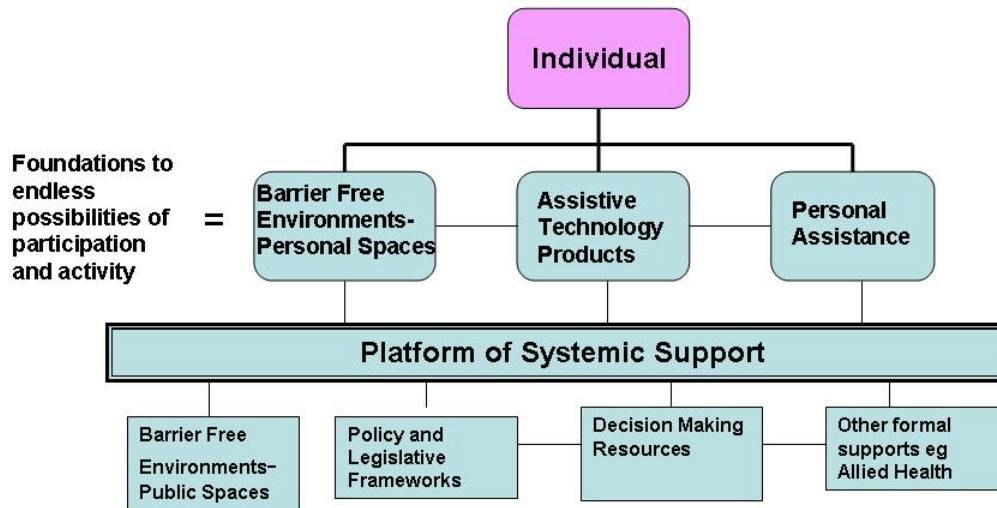
This paper is not grounded in empirical evidence, but is a theoretical paper based on more than 30 years of practice as an allied health professional, systemic advocate and administrator in the health, ageing and disability sectors. Its aim is to present a model for a person centred approach that will stimulate debate, academic thought and hopefully a shift in service delivery.

The Disability and Ageing sectors are commencing a significant change in service provision philosophy and delivery: a move to real, person centred approaches. The starting point in these approaches is the understanding that:

- People with disabilities know their abilities and needs better than anyone else, they are their experts in their disability
- People with disabilities are able to manage their own selves, determine their own lives and make their own choices
- From time to time, people with disabilities may need a level of support in making choices and determining their own paths in life and in service delivery.

These approaches should enable individuals to select the service delivery that meets their needs, creating real opportunities for real choice in participation and the activities which underpin participation, not just those presented to them.

## A Person Centred Approach



There are three foundations to accessing real choice in participation and activity. Without these foundations there can be no real choice. These foundations are:

- barrier free personal environments, including the home, work and any other space directly related to personal activity;
- assistive technologies: hard and soft;
- direct personal assistance.

Of course, individuals need differing combinations of each of these foundations according to their functional impairments. The mix of these foundations may also change as circumstances in life change, for example through ageing, pregnancy and other life events.

The activities of life occur as multiple sets of linked events, as a person moves in and out of their personal spaces and activities. Leading a life requires community infrastructure, attitudes and services that enable place the linkages required. Individuals and communities need to be supported in achieving effective and synchronous foundations through a systemic platform:

- barrier free public environments, including transport, community attitude and building management practice
- policy, Legislative and service delivery frameworks;
- decision-making resources and
- other incidental formal supports

Too often the provision of the foundations is a compromise. The home and other personal environments should work together with assistive technologies to create an environment that maximizes independence. Historically, in most jurisdictions, these are organized and funded separately and any available funding is rationed to a select group of items and services. The home modification and the assistive technology prescription processes take each into account, but are rarely undertaken together, the result of which is reduced choice and often reduced independence. Rationed, silo-istic service in these two areas renders a greater reliance upon direct personal assistance necessary, meaning that an individual must accept increased intrusion into their lives and another person undertaking tasks that they would otherwise be able to perform. The cost of home modifications and assistive technologies has too often been the cause of the reliance on direct personal assistance services, but this is a narrow view, as this cost over time of direct personal assistance in most instances would be much greater. There is some evidence to support this and interested readers are directed to the work of the AT Collaboration ([http://www.ilcnsw.asn.au/home/what\\_we\\_do/at\\_collaboration.html](http://www.ilcnsw.asn.au/home/what_we_do/at_collaboration.html))

The NDIS also has the capacity to enable individuals and families to determine their own lives, accessing the supports they need, when they need them and in ways that are relevant to their lives. The NDIS in Tier 1 also recognises the importance of the systemic supports as enablers of choice.