

Interpretive/Narrative Summary Formulation for Person-Centered Care Planning

Identity and Cultural Considerations: Consider age, culture, spirituality/religious affiliation, sexual orientation, etc. Focus on how cultural identifications/preferences may impact recovery and/or treatment preferences. What influences does culture play in their lives in their understanding of the illness?

Explanation of Illness/presenting issues: Why is the person here, and why now? Include the person's understanding and/or perception. Identify any differences that may exist in your understandings.

Summary of Priority Needs/Barriers to Goal Attainment: Consider how symptoms/functional impairments or other factors/issues may be interfering with recovery progress. Look at how the barrier or need impacts the client's life, not just that it exists and IS impacting them. Specify where the client's behavioral health symptoms and life stressors show up. Look at Psychosocial Environment e.g. consider housing, employment, support system, acute/chronic stressors, etc.

Strengths, Preferences and Priorities: Personal talents/interests/coping skills as well as natural supports & community connections

Stages of Change: And your reason for the determination of stage for each big picture treatment goal

Hypotheses: Consider central themes, insights, understandings, underpinnings, including relevance of past treatment success/failure. Your best guesses at what may be going on. Where you might need to explore further.

Treatment Recommendations: What level and intensity of services does this individual need based on the above information/understanding and justification for such.

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This form is based off of the work of and edited in consultation with Diane Grieder, co-author of *Treatment Planning for Person-Centered Care: Shared Decision Making for Whole Health*, Second Edition by Neal Adams, and Diane M. Grieder (2013).