

ACCR Quality Improvement Committee
Brief Explanations for Recovery/Service Planning Principles

- 1) The person in recovery drives the recovery planning process.** The plan belongs to the individual served and the family or guardians for children and youth. The person(s)' choices and self-direction are the most important elements in the plan.
- 2) Service planning and the service system must be constructed in a way that encourages independence, develops natural community supports and provides for choice of services.** Service planning must promote hope for recovery, present meaningful opportunities for individual growth and create an environment of respect, allowing for informed decision-making.
- 3) Individuality should be recognized, respected and used in constructing unique plans.** Since each person is unique, each (every) plan should reflect the (person's) individual's personal situation, culture, desires and hope for recovery.
- 4) A wide variety of methods should be explored for developing an effective plan for change and growth.** The person served should have a choice among options and those options should be explained well enough to allow the person and/or their significant others to make informed decisions.
- 5) Successful working relationships are based on trust which is gained by communicating honestly and respectfully.** The partnership between the person served and the person helping is based on the belief that both have viewpoints that count and must be respectfully considered.
- 6) A person's strengths must be identified before setting goals.** Although basic needs must be met, it is a person's strengths that provide the basis for hope, change and recovery.
- 7) Plans should be in easy to understand language that helps everyone involved work together.** Both the language and the format of the plan should be clear and easy to understand for the person and/or their significant others. The person's own words should be used in the plan whenever possible.

8) The individual's chosen support network should be involved whenever the individual decides it may be helpful. Service users will identify, on an on-going basis, those whom they would like involved with them in the planning process. They should not ever be forced to include anyone.

9) Ideas for progress toward goals must be tested within reasonable timeframes and reviewed at regularly defined times. The time it takes to accomplish a person's goals should be reasonable. A person's progress toward those goals should be reviewed at regular intervals. A regular review of the plan helps the person served and the service provider to see progress that has been made.

10) Service plans should belong to the person(s) in recovery and be in a form that can be built upon and carried from one service provider to another. The person (s) in recovery owns the service plan. A single form that is used by everyone will help persons in recovery to use that plan with different providers.

11) The service plans should promote wellness for the whole individual. Plans should reflect ways to make healthy and personally meaningful choices for body, mind and spirit. The plans should address the person as a whole and not only their diagnosis. Plans should address all aspects of a person's life.