The Role of the Support Coordinator

The Support Coordinator manages Support Coordination services for each participant. Support Coordination services are services that assist participants in gaining access to needed program and state plan services, as well as needed medical, social, educational and other services. The Support Coordinator is responsible for developing and maintaining the Individual Service Plan with the participant, their family (if applicable), and other team members designated by the participant. The Support Coordinator is responsible for the ingoing monitoring of the provision of services included in the Individualized Service Plan.

The Support Coordinator writes the Individual Service Plan based on assessed need and the person-centered planning process with the individual and the planning team. The Support Coordinator links the individual to needed services and supports and assists the individual in identifying service providers as needed. The Support Coordinator also ensures that the services and supports remain within the allotted budget and monitor the delivery of services. The Support Coordinator must make a clear distinction between acting as a resource and providing advocacy on behalf of the individual/family. The Support Coordinator provides information, supports individuals in advocating for themselves, and links individuals to advocacy resources but does not serve as the advocate for the individual/ family.

The Support Coordinator's role can be divided into the following 4 general functions: individual, discovery, plan development, coordination of services, and monitoring.

- 5.4.1 Individual Discovery: Individual discovery is the process by which the Support Coordinator, in conjunction with the individual and planning team, gathers and evaluates information in order to assist the individual to determine his/her outcomes, supports, and service needs. This function begins once the individual is assigned a Support Coordinator and occurs concurrently with other functions. This process and the tools used to facilitate it are further described in section 6.4.1 "Assessments/Evaluations."
- 5.4.2 Plan Development: This function involves the process by which the Support Coordinator facilitates a planning team to develop the Person Centered Planning Tool (PCPT) and Individualized Service Plan (ISP). The PCPT is a person-centered plan which identifies needed outcomes, goals, supports, and services. The ISP directs the provision of those supports and services. Section 6 details the policies and procedures necessary to complete this function.
- 5.4.3 Coordination of Services: This function includes activities necessary to obtain the supports and services identified in the ISP. Coordination of services requirements are outlined in section 7.
- 5.4.4 Monitoring: Monitoring is the process by which the Support Coordinator ensures that the individual progresses toward identified outcomes and receives quality supports and services as outlined in the ISP and in accordance with the Division's mission and core principles. Section 8 describes specific responsibilities for accomplishing the monitoring function.

The Responsibilities of the Support Coordinator

The Support Coordinator is responsible for:

- Using and coordinating community resources and other programs/agencies in order to ensure that services funded by the Division will be considered only when the following conditions are met: o other resources and supports are insufficient or unavailable, o the services do not meet the needs of the individual, and o the services are attributable to the person's disability.
- Accessing these community resources and other programs/agencies by o utilizing resources and supports available within the individual's family, neighborhood, and community; o developing a thorough understanding of programs and services operated by other local, State, and federal agencies; o ensuring these resources are used and making referrals as appropriate; and o coordinating services between and among the varied agencies so the services provided by the Division complement, but do not duplicate, services provided by the other agencies.
- Developing a thorough understanding of the services funded by the Division and ensuring these services are utilized in accordance with the parameters defined in the Current Division of Developmental Disabilities (DDD) Services Chart found in Appendix B.
- Interviewing the individual and, if appropriate, the family; reviewing/compiling various assessments or evaluations to make sure this information is understandable and useful for the planning team to assist in identifying needed supports; and facilitating completion of discovery tools, if applicable.
- Scheduling and facilitating planning team meetings; writing and distributing the ISP (and PCPT when the individual consents) to the individual, all team members, and the identified service providers; and reviewing the ISP through monitoring conducted at specified intervals.
- Obtaining authorization from the SC Supervisor for Division-funded services.
- Monitoring and following up to ensure delivery of quality services, and ensuring that services are provided in a safe manner, in full consideration of the individual's rights.
- Maintaining a confidential case record that includes but is not limited to the NJ Comprehensive Assessment Tool (NJ CAT), completed Support Coordinator Monitoring Tools, PCPTs, ISPs, notes/reports, annual satisfaction surveys, and other supporting documents uploaded to the iRecord for each individual served.
- Ensuring individuals served are free from abuse and neglect, reporting suspected abuse or neglect in accordance with specified procedures, and providing follow-up as necessary.
- Ensuring that incidents are reported in a timely manner in accordance with policy and follow-up responsibilities are identified and completed.

- Notifying the individual, planning team, and service provider and revising the ISP whenever services are changed, reduced, or services are terminated.
- Reporting any suspected violations of contract, certification or monitoring/licensing requirements to the Division. 10
- Entering required information into the iRecord in an accurate and timely manner.
- Ensuring that individuals/families are offered informed choice of service provider.
- Notifying the individual regarding any pertinent expenditure issues.
- Conducting monthly contacts, quarterly face-to-face visits, and an annual home visit that includes review of the ISP and is documented on the Support Coordinator Monitoring Tool.

*This information was taken directly from the Interim Policy Guide created by The New Jersey Division of Developmental Disabilities.