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LR 42 Services Coordination Study

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LR 42 Services Coordination Study

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Legislative Resolution 42

Introduced by Byars, 30

PURPOSE: The purpose of this study is to examine the quality and effectiveness of services coordination provided by the Department of Health and Human Services to persons in Nebraska's developmental disabilities system. This study shall include, but not be limited to, the exploration of the training and staff development for services coordinators and administrators, including orientation and continuing education, the quality review mechanisms in place to assure the consistent delivery of services coordination in keeping with policies and procedures, the ability of services coordinators to work effectively on behalf of persons served to insure the most appropriate services and supports, and the best practices in Nebraska and other states.

Input on this study and its development shall be solicited from stakeholders, including, but not limited to, consumers and their families, services coordinators, service providers, and advocates.

NOW, THEREOFRE, BE IT RESOLVED BY THE MEMBERS OF THE ININETY-EIGHTH LEGISLATURE OF NEBRASKA, FIRST SESION;

1. **That the Health and Human Services Committee of the Legislature shall be designated to conduct an interim study to carry out the purposes of this resolution.**
2. **That the committee shall upon the conclusion of its study make a report of its findings, together with its recommendations, to the Legislative Council or Legislature.**

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Executive Summary

In 2003, Senator Byars was approached by a group of developmental disability providers and advocates to review the role and function of service coordinators for the developmentally disabled. A task force of clients, advocates, providers, and Health and Human Services agency personal were assembled to review the quality and effectiveness of services coordination. Topics of consideration were training and staff development, quality review mechanisms, and the ability of the service coordinator to work effectively on behalf of the client.

Role and mission of Services Coordination

At initial meetings, the work group discussed what the role and mission of a service coordinator (SC) is versus what the role and function of the SC is perceived to be by clients, providers, advocates and the service coordinators themselves. Issues presented were: The SC as an advocate or an organizer of services; The SC as a watchdog of the state dollars or the monitor and enforcer of state policy. What the relationship of the SC is with regard to the client, the parents and the provider.

Some members of the work group saw the primary focus of a SC as a cost containment specialist rather than the person who would advocate on behalf of the client. Others felt that some SC advocated for their clients to the best of their ability within the framework that the agency allows. Additional comments were that some service coordinators are too subjective and delved into the clients' lives to the point of intrusion.

Inconsistent training and high caseloads

A concern mentioned by a majority of the members was the inconsistent training of new service coordinators which contributed to wide disparities in the delivery of service coordination.

Discussions occurred and some members of the work group stated that services coordination is entirely different than case management and should be delineated as such. In the first few meetings, there was a fairly strong sentiment that service coordination should be an independent function, not part of the providers (as had been the case previously) and not part of HHS as is the current situation. There is still some support for this structure. The reason for supporting this independent format would be to allow the service coordinator to take on more of an advocate role for the client when review and allocation of services occur.

Develop a set of standards and state wide training.

Consistency of training of new service coordinators was raised as an issue by the task force. At the time of the study, training for new service coordinators took place at the local level and did not provide for consistency of department policy. Since some clients, advocates and providers were often confused or misunderstood the role of service coordinators, these stakeholders were not in a position to say if the coordinators were doing an appropriate job.

Comments were made that some clients and their guardian (if there is one) should be informed on the role and function of a service coordinator because there is confusion on exactly what a service coordinator should do for the client. This would help the client and others to better understand what is within the purview of a service coordinator, what the service coordinator can and can't do on behalf of a client and what the professional relationship is between the service coordinator and the provider.

Suggestions were made that a list of basic responsibilities should be printed and a 1-800 number made available so any questions that do arise regarding a service coordinator's responsibilities could be addresses consistently and at the state level.

Choice of Service Coordinators

As in any relationship, some people get along and some people don't. Comments were made that clients had the choice of whether to accept services or not, which services they needed, and which provider would provide those services. Yet if the relationship between the client and the service coordinator was not a positive one, the client most likely could not change, partly due to lack of other service coordinators available, but also due to lack of responsiveness to the client's wishes.

University of Nebraska Public Policy Center Survey

The work group had a number of meetings where it became apparent that discussions were based somewhat on perception, somewhat on fact, and somewhat on anecdotal information. Everyone agreed however, that a survey of clients, providers and services coordinators was necessary and highly desirable. This survey could provide an accurate picture of how clients view their service coordinator, how providers work with the SC and how service coordinators

perceive their relationship with their clients, what their role, mission, training experience actually are.

The University of Nebraska Public Policy Center was contracted to conduct a study of the developmental disabilities service coordination system in Nebraska.

The study was designed to assess:

- Stakeholder (clients and providers) satisfaction with service coordination
- The roles and responsibilities service coordinators currently are fulfilling
- The importance of various aspects of service coordination
- How service coordination may be improved
  (see University Report September 2006)

In the executive summary of the report, clients had a favorable response to the service coordinators and believed that they tried hard, and were helpful and available. Providers were not as favorable that service coordination was as beneficial.

As for the roles and responsibilities of service coordinators, clients and their families said that the coordinators helped in a wide range of ways. Both Service coordinators and provider staff indicated that they helped support consumer self-determination.

The study also includes a section on how service coordination may be improved.

1) Stakeholders want to additional service coordinators or help reduce the caseload.
2) Increase funding for services for people with developmental disabilities
3) Families, clients and service coordinators believe changes are needed in the process for determining eligibility for hours and types of services.
4) Service coordinators want process to improve provider accountability.
5) Greater communication and teamwork is needed between service coordinators and provider staff
6) Service coordinators and provider staff may benefit from additional training opportunities.

(Executive summary of University report, page ii.)

Conclusion

There are four main issues that were raised during the course of the task force's work.

The first three issues were; lack of service coordinators; consistent training; and quality of service coordination. These issues were addressed to some degree in 2005 with the addition of 26 service coordinators and statewide training taking place. In addition, quality improvement monitoring was put in place to assess the delivery of services coordinator.

Another issue was misunderstanding of the role and mission of a service coordinator. Some saw the position as needing to be an advocate others saw the service coordinator as being a gate keeper of the state's fund, others perceived the role as one of monitor and enforcer of state policy. These roles can be and often are in direct conflict with one another but may not be easily separated from each other. To some extent, clarification of the role of a service coordinator may be achieved with on-going, consistent, statewide training. However, the coordinators and providers must work together to provide the quality of service a client deserves and is entitled to receive.

There were some members of the committee that believed that the service coordinators should be independent from Health and Human Services. This would permit the service coordinators to be true advocates for the client without reservations of having the agency be their employer as well. This objective appears unlikely but a possible solution would be to place the service coordinators under the purview of the Developmental Disabilities System. The majority of the members believed this to be the next best option. The agency personnel on the committee made no comment and took no position on this subject.

A peripheral issue regarding this study of service coordination but key to provision of services is the Objective Assessment Process. This is an ongoing and ever evolving process to determine most appropriate service in the most appropriate way.

We would like to thank all the members of the task force for their time, their energy, their passion and their commitment to improve the lives and services for people with developmental disabilities.