

NEW JERSEY-BASED CARE MANAGEMENT

POLICIES & PROCEDURES MANUAL



TABLE OF CONTENTS

1. INTRODUCTION	5
a. Purpose, Mission, and Vision	5
b. Overview of Support Coordination Services	5
c. Core Values and Guiding Principles	6
2. DEFINITIONS	6
Acronyms	12
3. AGENCY STRUCTURE AND LEADERSHIP	13
4. PERSONNEL POLICIES AND PROCEDURES	16
a. Staff Qualifications and Training Requirements	16
b. Background Checks Policy and Exclusions	17
c. Support Coordinators and Support Coordinator Supervisors	19
d. Performance Evaluations	27
e. Code of Ethics for SCs and SCSs	28
f. Conflict of Interest Policy and Procedures	29
g. Professional Communication and Non-Discrimination	30
h. On-call Policy for SCs and SCSs	32
5. CLIENT ADMISSIONS	34
a. Admissions Process	34
b. Initial Contact and Inquiry	35
c. Information Gathering and Assessment	35
d. Admissions Policy and Procedures	36
f. Individualized Service Plan (ISP) development and implementation	38
g. Monitoring and Updating the ISP	39
h. Case Management and Ongoing Support	40

6. CLIENT DISCHARGE	42
a. Reasons for Discharge	42
b. Process for Discharge	42
c. Discharge Policy and Procedures	43
7. REPORTING INCIDENTS	46
a. Types of Reportable Incidents (Division Circular #14)	46
b. Definitions, Incident and Injury Levels	47
c. Incident Reporting By Staff	49
d. Unusual Incident Reporting Policy and Procedures	50
8. COMPLAINT/GRIEVANCE RESOLUTION OR APPEAL PROCESS	55
a. Filing Complaints or Grievances	55
b. Internal Investigation and Resolution Process	56
c. Appeals Process and Timelines	57
9. COMPLAINT INVESTIGATION	59
a. Internal Investigation and Resolution process	59
b. Investigation Appeals Process and Timelines	61
c. Complaints Investigation Policy and Procedures	61
10. HIPAA & PROTECTED HEALTH INFORMATION	64
a. Minimum Necessary Standard for Disclosure	64
b. Individual Rights Regarding PHI	65
c. Safeguarding PHI and Security Measures	66
d. Confidentiality of Client Information	67
e. Limits of Confidentiality	69
f. Mandatory Reporting Requirements	70
g. Policy and Procedures	71
11. EMERGENCY PROCEDURES	74
a. Life Threatening Emergencies	74
b. Medical Emergencies	75
c. Fire Emergencies while completing a face-to-face visit	75
d. Evacuation Procedures	76
e. Incident Reporting Procedures and Notification Practices	77
f. Crisis Intervention and Resolution Procedures	78
12. REPORTING MEDICAID WASTE/FRAUD/ABUSE	80

a. Types of Reportable Medicaid Incidents	80
b. Policy and Procedures	81
c. Reporting to Appropriate Authorities	83
d. Internal Investigation Process	84
e. Documentation and Record-keeping	85
f. Corrective Action Plans and Follow-up	86
13. HUMAN RIGHTS	89
a. Fundamental Human Rights	89
b. Professional Conduct and Ethics	90
c. Code of Ethics for Support Coordinators	91
d. Identifying Conflict of Interest	92
e. Conflict of Interest Policy	93
e. Professional Communication and Non-Discrimination	94
14. FINANCIAL MANAGEMENT AND BILLING	96
a. Billing Practices for Support Coordination Services	96
b. Billing Policy and Procedures	97
c. A Mechanism for Notification of Fiscal Sustainability	98
15. QUALITY MANAGEMENT	101
a. Internal Quality Management System	101
b. Monitoring and Evaluation Procedures	102
d. Performance Improvement Initiatives	103

1. INTRODUCTION

a. Purpose, Mission, and Vision

This statement of purpose outlines the support services that [COMPANY NAME] provides to

[REDACTED]

This document provides policies and procedures for developing, implementing, and revising admission, program, health, personnel, and organizational policies and procedures that cover the supports and services provided, and policies and procedures applied to ensure quality service and organizational principles.

[COMPANY NAME] is a self-approving agency through the New Jersey Division of Developmental Disabilities (DDD). The agency's mission is to

[REDACTED]

b. Overview of Support Coordination Services

[COMPANY NAME] serves individuals in [REDACTED] Counties in New Jersey.

[COMPANY NAME] works collaboratively with individuals, their families, service providers, and the community to

[REDACTED]

[COMPANY NAME] provides services by arranging for and coordinating DDD services,

[REDACTED]

[COMPANY NAME] assists in building a team that will

[REDACTED]

c. Core Values and Guiding Principles

A future where individuals with developmental disabilities are valued members of their communities and supported in their needs leads to a just and cohesive society.

[COMPANY NAME] partners with [REDACTED]

CORE VALUES

1. [REDACTED]
[REDACTED]
[REDACTED]
2. [REDACTED]
[REDACTED]
3. [REDACTED]
[REDACTED]
4. [REDACTED]
[REDACTED]
5. [REDACTED]
[REDACTED]
6. [REDACTED]
[REDACTED]
7. [REDACTED]
[REDACTED]

GUIDING PRINCIPLES

1. *Person-centered care:* [REDACTED]
[REDACTED]
2. *Holistic care:* [REDACTED]
3. *Advocacy:* [REDACTED]
[REDACTED]
4. *Continuous improvement:* [REDACTED]
[REDACTED]
5. *Ethical practices:* [REDACTED]
[REDACTED]

These values and guiding principles provide a framework for all operations at [COMPANY NAME] and reflect the agency's commitment to supporting individuals with developmental disabilities to lead fulfilling lives.

2. DEFINITIONS

Acuity Factor – modifier added to the tier for individuals with high clinical support needs based on medical and/or behavioral concerns, notated by “a” next to the tier assignment. The acuity factor can also impact the rate and/or unit of a service base rate for services where that may be applicable.

Centers for Medicare and Medicaid Services (CMS) – the federal agency within the U.S. Department of Health and Human Services that administers the Medicare program and works in partnership with state governments to administer Medicaid, the State Children’s Health Insurance Program (SCHIP), and health insurance portability standards.

Children’s System of Care (CSOC) – the Division within the New Jersey Department of Children and Families that serves children (under 21) with emotional and behavioral health care challenges and their families and children (under 21) with developmental and intellectual disabilities and their families. Services include community-based services, in-home services, out-of-home residential services, and family support services.

Community Care Program (CCP) – a Division of Developmental Disabilities initiative included in the Comprehensive Medicaid Waiver (CMW) that funds community-based services and supports for adults (age 21 and older) with intellectual and developmental disabilities who have been assessed to meet the specified level of care (LOC) for Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/ID) – i.e., an institutional level of care. Formerly known as the Community Care Waiver (CCW).

Comprehensive Medicaid Waiver (CMW) – the New Jersey Department of Human Services Medicaid waiver is a collection of reform initiatives designed to sustain the program long-term as a safety net for eligible populations, rebalance resources to reflect the changing healthcare landscape, and prepare the state to implement provisions of the federal Affordable Care Act in 2014. The Supports Program is the Division of Developmental Disabilities’ initiative within this waiver.

Department of Children & Families (DCF) – the state agency that works to ensure the safety, well-being, and success of children, youth, families, and communities.

Department of Education (DOE) – the Department of State Government that oversees the programs and services provided in all public and nonpublic primary and secondary schools in New Jersey; administers state and federal aid to schools and school districts; and establishes and regulates New Jersey’s educational policies.

Department of Human Services (DHS) – the Department of State government that serves seniors, individuals and families with low incomes; people with mental illnesses, addictions, developmental disabilities, or late-onset disabilities: people who are blind, visually impaired, deaf, hard of hearing, or deaf-blind; parents needing child.

Department of Labor and Workforce Development (LWD) – the Department of State

Government that provides workforce development, family leave insurance, analyzes labor market information, health, and safety guidelines, social security disability programs, temporary disability, unemployment benefits, worker's compensation, and resources for employers. The Department of LWD also provides services and support to individuals with disabilities in the workforce through the Division of Vocational Rehabilitation Services.

Division Circulars – documents issued by the Assistant Commissioner of the Division of Developmental Disabilities which set policy for the various agencies within the Division. Division Circulars can be found in the **Division of Developmental Disabilities (Division or DDD)** – the Division within the New Jersey Department of Human Services that coordinates funding for services and supports that assist adults aged 21 and older with intellectual and developmental disabilities to live as independently as possible. An overview of DDD is outlined in section 1.2 of this manual.

Division of Vocational Rehabilitation Services (DVRS) – the Division within the New Jersey Department of Labor and Workforce Development that provides services to assist individuals with disabilities to prepare for, obtain, and/or maintain competitive employment consistent with their strengths, priorities, needs, and abilities.

Employment/Day Budget Component – the portion of the individual budget that can be used to purchase services that are categorized as supporting an individual with their employment and day support needs-based. An indication of the budget component in which each service is categorized is available within the table provided for each service in Section 17 of this manual.

Fair Hearing – an administrative proceeding to resolve an appeal of a Medicaid waiver-funded service when the service has been denied or will be reduced, suspended, or terminated.

Fiscal Intermediary (FI) – the entity that manages the financial aspects of the Supports Program on behalf of an individual choosing to direct their services through a Self-Directed Employee. In addition, the FI acts as a conduit for an organization or enterprising entity that is not a Medicaid provider but engages in commercial, industrial, or professional activities that are offered to the general public and will be available to individuals enrolled in the Supports Program. More information about the responsibilities of the FI can be found in section 10 of this manual.

Health Information and Portability and Accountability Act (HIPAA) – the federal law passed by Congress in 1996 that protects the privacy of protected health information (PHI) and personally identifiable information (PII) and establishes national standards for its written, oral, and electronic security.

Home and Community-Based Services (HCBS) – Medicaid-funded services and supports that are provided to individuals in their own home or community. HCBS programs serve a variety of targeted population groups, including individuals experiencing chronic illness or individuals with mental illnesses, intellectual or developmental disabilities, and/or physical disabilities.

Home Visit SC Assist Staff (HVSCAS): the professional responsible for emergency home visits due to unanticipated life events or a medical state limiting the actual SC from making a required visit(s). This is an internal agency quality assurance fabricated title. The professional is DDD certified SC assigned to GNSS.

Individual/Participant – an adult age 21 or older who has been determined to be eligible to receive services funded by the Division of Developmental Disabilities.

Individual Budget – an up-to-date amount of funding allocated to an eligible individual based on his/her tier assignment to provide services and support. Each Individual Budget is made up of an Employment/Day budget component and an Individual/Family Supports budget component.

Individual/Family Supports Budget Component – the portion of the individual budget that can be used to purchase services that are categorized as providing support to the individual and/or family in addition to their employment/day services. An indication of the budget component in which each service is categorized is available within the table provided for each service in Section 17 of this manual.

Individualized Service Plan (ISP) – the standardized Division of Developmental Disabilities' service planning document, developed based on assessed needs identified through the NJ Comprehensive Assessment Tool (NJCAT); the Person-Centered Planning Tool (PCPT); and additional documents as needed, that identifies an individual's outcomes and describes the services needed to assist the individual in attaining the outcomes identified in the plan. An approved ISP authorizes the provision of services and support.

iRecord – DDD's secure, web-based electronic health record application.

Level of Care – the assessed level of assistance an individual requires in order to meet his/her health and safety needs and accomplish activities of daily living. Eligibility for certain Medicaid-funded long-term services and supports is tied to an individual's Level of Care designation.

Managed Care Organizations (MCO) – organizations, also known as HMOs or health plans, that contract with state agencies to provide a health care delivery system that manages the cost, utilization, and quality of Medicaid health benefits and additional Medicaid services.

Managed Long-Term Services & Supports (MLTSS) – the program that ensures the delivery of long-term services and supports through New Jersey Medicaid's NJ FamilyCare managed care program. MLTSS is designed to expand home and community-based services, promote community inclusion, and ensure quality and efficiency. MLTSS provides comprehensive services and support, whether at home, in an assisted living facility, in community residential services, or in a nursing home.

Medicaid – a federal and state jointly funded program that provides health insurance to parents/caretakers and dependent children, pregnant women, and people who are aged,

blind, or disabled. These programs pay for hospital services, doctor visits, prescriptions, nursing home care, and other healthcare needs, depending on what program a person is eligible for.

National Core Indicators (NCI) – standard measures used across states to assess the outcomes of services provided to individuals and families. Indicators address key areas of concern including employment, rights, service planning, community inclusion, choice, and health and safety. NCI is a voluntary effort by public developmental disabilities agencies to measure and track their own performance.

NJ Comprehensive Assessment Tool (NJ CAT) – the mandatory needs-based assessment used by the Division of Developmental Disabilities as part of the process of determining an individual's eligibility to receive Division-funded services and assessing an individual's support needs in three main areas: self-care, behavioral, and medical.

Person-Centered Planning Tool (PCPT) – a mandatory discovery tool used to guide the person-centered planning process and to assist in the development of an individual's service plan.

Planning for Adult Life Project – a statewide project funded by the NJ Division of Developmental Disabilities (DDD) to assist students (ages 16-21) with developmental disabilities and their families in charting a life course.

Planning Team – a team of people, with a valuable connection to the individual, that participate in planning meetings and contribute to the development of the PCPT and ISP. At a minimum, the planning team includes the individual and Support Coordinator. Parents, family members, friends, service providers, coworkers, etc. are also often included in the planning team as established by the individual.

Prior Authorization – the approval – obtained prior to service delivery – those details start/end dates, number of units, and procedure codes authorized in order for the identified provider(s) to receive payment for services once they have been rendered.

Provider Database – a searchable database of approved service providers.

Self-Directed Employee (SDE) – a person who is recruited and offered employment directly by the individual or the individual's authorized representative to perform waiver services for which SDEs are qualified.

Service Provider – the entity or individual who will provide the waiver service(s) indicated in the ISP. Service providers must meet the qualifications and standards related to the service(s) being offered.

Support Coordination Agency (SCA) – an organization approved by the Medicaid and the Division of Developmental Disabilities to provide services that assist participants in gaining access to needed program and state plan services, as well as needed medical, social, educational, and other services.

Support Coordination Supervisor (SCS) – the professional within a Support Coordination Agency that provides oversight and management of the Support Coordinators and approves ISPs.

Support Coordinator (SC): the professional responsible for developing and maintaining the Individualized Service Plan with the participant, their family, and other team members; linking the individual to needed services and monitoring the provision of services included in the Individualized Service Plan.

Supported Employment Budget Component: an additional component of the individual budget that can be accessed in situations when the individual budget does not sustain the level of Supported Employment – Individual Employment Support needed in order for the individual to find or keep a competitive job in the general workforce.

Supports Program – the Division of Developmental Disabilities initiative included in the Comprehensive Medicaid Waiver (CMW) that provides needed support and services for individuals eligible for DDD who are not in the Community Care Program (CCP).

Tier – an assigned descriptor, based on support needs determined through the NJ CAT, that determines the individual budget and reimbursement rate a provider will receive for that individual for services

Acronyms

APS – Adult Protective Services
AWC – Agency with Choice
BGS – Bureau of Guardianship Services
CCP – Community Care Program
CDU – Community Development Unit
DDD – Division of Developmental Disabilities
DVRS – Division of Vocational Rehabilitation Services
FFS – Fee-for-Service
HIPAA – Health Insurance Portability and Accountability Act
ICM – Intensive Case Management
IDT – Interdisciplinary Team
IR (formally UIR) – Incident Report
ISP (or NJISP) – Individualized Service Plan
MCO – Managed Care Organization
MLTSS – Managed Long-Term Services and Supports
MMT – Monthly Monitoring Tool
NJCAT – New Jersey Comprehensive Assessment Tool
PA – Prior Authorization
PASRR – Preadmission Screening & Resident Review
PCPT – Person-Centered Planning Tool
PDN – Private Duty Nursing
PEA – Participant Enrollment Agreement
PPMU – Provider Performance and Monitoring Unit
QAS – Quality Assurance Specialist
RCR – Retroactive Change Request
RTR – Residential Transfer Referral
SC – Support Coordinator
SCA – Support Coordination Agency
SCS – Support Coordination Supervisor
SCU – Support Coordination Unit
SDE – Self-Directed Employee
SDR – Service Detail Report
SOS – Seeking out Support
SP – Supports Program



3. AGENCY STRUCTURE AND LEADERSHIP

DO NOT COPY



- Support Coordinator Supervisor - [REDACTED]
[REDACTED]
- [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]

Frontline Staff

- Support Coordinators - [REDACTED]
[REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]



- [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
○ [REDACTED]

This organizational structure ensures that [COMPANY NAME] has the resources and expertise to deliver high-quality, client-centered care management services to individuals with developmental disabilities in Morris, Middlesex, Union, and Essex counties in NJ.

DO NOT COPY



4. PERSONNEL POLICIES AND PROCEDURES

a. Staff Qualifications and Training Requirements

Minimum Qualifications

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Training

- All staff must complete the [REDACTED]
[REDACTED]
- Staff involved in support coordination must [REDACTED]
[REDACTED]
government agencies, certification organizations, and professional organizations
- The completion of training must be noted in a system for tracking and documenting in-service training credits.

Staff qualifications go beyond the minimum requirements and outline preferred qualifications for staff, including having college degrees.

Staff qualifying for the agency must be made aware of the requirement to comply with agency policies and procedures.

Training and Professional Development

[COMPANY NAME] will ensure that all [REDACTED]
[REDACTED]

[REDACTED] Trainings to follow orientation include:

- [REDACTED]
- [REDACTED]
- [REDACTED]

Staff Orientation (within 90 days of hire and after completion of CDS modules)

Overview of the Agency	[REDACTED] [REDACTED]
Mission, Philosophy, Goals, Services and Practices	[REDACTED] [REDACTED]

Personnel Policies	[REDACTED]
[REDACTED]	College of Direct Support- Supporting Healthy Lives: Care of Common Health Conditions, Health Across the Lifespan, Individual Health Needs, Living Healthy Lives, Signs and Symptoms of Illness, Working with Health Care Professionals
[REDACTED]	College of Direct Support- DDDSC: NJISP Related: Individualized Service Plan Process and Documentation
[REDACTED]	[COMPANY NAME] orientation
[REDACTED]	College of Direct Support and review at orientation
[REDACTED]	College of Direct Support and review at orientation
[REDACTED]	College of Direct Support and review at orientation
[REDACTED]	College of Direct Support and review at orientation
[REDACTED]	College of Direct Support and review at orientation
[REDACTED]	College of Direct Support and review at orientation
[REDACTED]	College of Direct Support and review at orientation

b. Background Checks Policy and Exclusions

REFERENCE NO: 17.18.5.3, 17.18.5.4, 17.18.5, 17.18.5.1 AND 18.5.2

POLICY

Service Coordinators (SCs) and Service Coordinator Supervisors (SCSs) must undergo [REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

All employees also must undergo fingerprint checks [REDACTED]
[REDACTED]

[illegible]

The agency must verify that any current and prospective employees ([REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[illegible]

- Written consent must be obtained from the candidate before initiating a background check

- The background check must adhere to the Compliance with Fair Credit Reporting Act (FCRA), which protects privacy and dictates how background check reports are handled
- The specific types of background checks conducted include (where applicable):
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]

EXCLUSIONS

- The FCRA restricts the use of certain types of information in employment decisions. Background checks exclude:
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]

Background checks must follow a standardized process to [REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

The New Jersey Division of Developmental Disabilities' Support Coordination Unit website must be checked for any specific background check requirements for their programs, and to ensure compliance with regulations.

This policy is effective as of [Date] _____

This policy is approved by [Name, Title] _____

c. Support Coordinators and Support Coordinator Supervisors

[COMPANY NAME] is committed to providing [REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

The agency believes individuals should be in charge of their services and supports. The agency's focus is on [REDACTED]

striving to improve the lives of individuals through access to appropriate services and supports, and promoting opportunities for individuals to participate actively in their communities.

The SC manages Support Coordination services for each participant. Support Coordination services are services that assist participants in gaining access to the needed program and State plan services, as well as needed medical, social, educational and other services.

The SC is responsible for developing and maintaining the Individualized Service Plan with the participant, their family (if applicable), and other team members designated by the participant. The SC is responsible for the ongoing monitoring of the provision of services included in the Individualized Service Plan. The SC writes the Individual Service Plan based on assessed needs and the person-centered planning process with the individual and the planning team.

The SC links the individual to needed services and supports and assists the individual in identifying service providers as needed. The SC also ensures that the services and supports remain within the allotted budget and monitor the delivery of services. [REDACTED]

The Support Coordinator is responsible for:

Using and coordinating community resources and other programs/agencies in order to ensure that waiver services funded by the Division will be considered only when the following conditions are met:

- [REDACTED]
- [REDACTED]
- [REDACTED]

Accessing these community resources and other programs/agencies by:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED] defined in

Section 17 of this manual.

- Interviewing the individual and ensuring they are at the center of the planning process and in determining the outcomes, services, supports, etc. that they desire.
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
- Scheduling and facilitating planning team meetings in collaboration with the individual; [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
- Ensuring that, for individuals assigned an acuity, the Addressing Enhanced Needs Form is updated at least annually and revised more frequently during the plan year, as necessary. [REDACTED]
[REDACTED]
- Ensuring that there has been a discussion regarding a behavior plan for individuals with behavioral concerns and that a behavior plan is in place as needed, particularly when the individual is assigned acuity due to behavior. This shall be documented in the individual's ISP.
- Ensuring that there has been a discussion regarding the medical needs of the individual and that these needs are documented in the ISP. [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
- [REDACTED]
[REDACTED]
[REDACTED]
- Annual completion of the Participants Rights and Responsibilities form [REDACTED]
[REDACTED]
[REDACTED]
- Obtaining authorization [REDACTED]

- 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.

[REDACTED]

- [REDACTED]

- Maintaining a confidential case record that includes but is not limited to [REDACTED]

[REDACTED]

- [REDACTED]

- [REDACTED]

- When a Support Coordinator is alerted that an individual assigned them has had an interaction with law enforcement/court system that results in a criminal charge, summons, or complaint they will discuss the availability of resources with the individual/guardian. [REDACTED]

[REDACTED]

- [REDACTED]

- [REDACTED]

- [REDACTED]

- [REDACTED]



- Linking the individual to service providers by providing information about service
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
- [REDACTED]
[REDACTED]
[REDACTED]
- [REDACTED]
- Conducting contacts on a monthly basis, face-to-face visits on a quarterly [REDACTED]
[REDACTED]
[REDACTED]
- [REDACTED]
- [REDACTED]
[REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
[REDACTED]
- [REDACTED]
[REDACTED]
- [REDACTED]
- Ensuring that the individual is aware of different housing options that can be utilized
in the community [REDACTED]
[REDACTED]
[REDACTED]
- [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]





SUPPORT COORDINATOR QUALIFICATIONS

REFERENCE No: 17.18.5.3 & 17.18.5.4

[COMPANY NAME] is committed to equal opportunity and does not discriminate in the recruitment, selection, or advancement of personnel based on race, sex, age, ethnicity, national origin, religion, marital status, disability, or political affiliation.

All SCs must meet the following minimum qualifications:

- [REDACTED]
- [REDACTED]
 - [REDACTED]
- [REDACTED]
- [REDACTED]

Ongoing Requirements:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

In accordance with Appendix I, [COMPANY NAME] is required to verify that all current and prospective employees, contractors, or subcontractors involved in furnishing or managing services are not excluded from working with this population. This requires monthly searches of the following databases by the Executive Director:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

Support Coordinator Deliverables



- Approved by [Name, Title] _____

REFERENCE NO: 17.18.5 & 17.18.5.1 and 18.5.2

[REDACTED]

[REDACTED]

The diagram illustrates a hierarchical structure. At the top, a single black bar is connected by a vertical line to a group of seven black bars. This group is further connected by a vertical line to a single black bar, which is then connected by a vertical line to a final group of two black bars at the bottom. A small circle is located near the top of the first group of bars.

- [REDACTED]
- [REDACTED]

The SCS actively promotes quality assurance and compliance within [COMPANY NAME],

As the designated liaison with DDD personnel regarding compliance matters, the SCS ensures open communication and timely resolution of any compliance concerns. Ultimately, the SCS is responsible for ensuring all SCs adhere to DDD qualifications, standards, and policies related to Support Coordination.

The SCS must verify that all current and prospective employees, contractors, or subcontractors who are involved in ordering, managing, or prescribing services are not excluded from working with this population. This requires monthly searches of the following databases by the Executive Director:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

[COMPANY NAME] is committed to equal opportunity [REDACTED]

The SCS plays a vital role in ensuring the agency delivers high-quality services to individuals with developmental disabilities, and contributes to its overall mission and ethical standards.

Responsibilities of the Support Coordination Supervisor

The SC Supervisor is responsible for:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]



- [Redacted]
 - [Redacted]
 - [Redacted]
- [Redacted]
[Redacted]
- [Redacted]
- [Redacted]

Effective as of [Date] _____

Approved by [Name, Title] _____

d. Performance Evaluations

Performance evaluations are a tool for professional development by identifying areas for improvement and setting goals for growth.

Performance evaluation process

- [Redacted]
[Redacted]
 - [Redacted]
[Redacted]
 - [Redacted]
 - [Redacted]
[Redacted]
 - [Redacted]
- [Redacted]
 - [Redacted]
 - [Redacted]
[Redacted]
 - [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
[Redacted]
[Redacted]
- [Redacted]
[Redacted]
- [Redacted]
[Redacted]





e. Code of Ethics for SCs and SCSs

This Code of Ethics serves as a guide for SCs and SCSs working with people with disabilities. It outlines the core principles and values that govern the agency's professional conduct in supporting individuals to achieve their goals and live fulfilling lives.

CORE VALUES

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

ETHICAL RESPONSIBILITIES

[COMPANY NAME] remains committed to developing trusting and respectful relationships with clients and actively listening to their concerns and priorities. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

PROFESSIONAL CONDUCT

[COMPANY NAME] must uphold the confidentiality of all client information, except in situations where disclosure is required by law or to protect the safety of the client or others, and maintain accurate and complete client records. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]



To strengthen its commitment to professional development, the agency must strive to stay informed about relevant laws, regulations, and best practices in support coordination, participate in ongoing training to enhance staff skills and knowledge, and maintain professional certifications (where applicable).

This Code of Ethics serves as a guide for professional conduct. Violations of this Code may result in disciplinary action, up to and including termination of employment.

f. Conflict of Interest Policy and Procedures

A conflict of interest is a situation where an employee's personal interests might interfere with the best interests of [COMPANY NAME] or the individuals it serves, [REDACTED]

[REDACTED]

POLICY

All [COMPANY NAME] staff are obligated to disclose in writing any actual or potential conflicts of interest to their supervisor immediately, and detail the nature of the conflict.

[REDACTED]

The aim of this Conflict of Interest Policy is to ensure that all employees and contractors conduct their work with the highest ethical standards and avoid situations where their personal interests could influence their professional judgment or actions.

PROCEDURES

Employees are required to use their judgment and consult with their supervisor if they are unsure about a particular situation. Some examples of situations that could be considered conflicts of interest include:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

Upon disclosure of a potential conflict of interest, [COMPANY NAME] must take the following steps to manage the situation to ensure the best interests of the client are protected by:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

Any information disclosed regarding a conflict of interest must be maintained confidentially, except where required by law or to report a suspected legal violation.

The agency must provide training to all employees on this Conflict of Interest Policy, which serves to increase awareness and understanding of the policy and its implications for staff conduct.

Staff must report any suspected violations of this policy to their supervisor or the Human Resources department. All reports must be investigated confidentially.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

This Conflict of Interest Policy must be reviewed and updated periodically to ensure its effectiveness.

This policy is effective as of [Date] _____

This policy is approved by [Name, Title] _____

g. Professional Communication and Non-Discrimination

Effective communication is essential for Support Coordinators to build trust, rapport, and successful working relationships with clients, families, colleagues, and other professionals.

All staff at [COMPANY NAME] are expected to:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

NON-DISCRIMINATION

[COMPANY NAME] is committed to providing services in a fair and inclusive manner, free from discrimination. The agency strives to create a work environment where everyone feels respected and valued.

The agency does not tolerate discrimination on the basis of

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

This policy applies to all aspects of employment and service delivery, including:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Examples of discrimination include

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Employees or clients who believe they have experienced or witnessed discrimination can report the incident to their supervisor, Human Resources department, or a designated compliance officer. All reports of discrimination must be investigated promptly and confidentially.

h. On-call Policy for SCs and SCSs

POLICY

[COMPANY NAME] currently operates core hours [REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]

This policy provides a framework to ensure:

- [REDACTED]
[REDACTED]
[REDACTED]
- [REDACTED]
- [REDACTED]
[REDACTED]
[REDACTED]

This policy applies to [COMPANY NAME] employees only, paid on the single pay, who participate in an approved on-call arrangements to deliver business-critical services outside core hours.

On-call is defined as “non-work time, during which members of staff are required to be available to handle job-related activities and emergencies out of hours”. An employee is on-call when, as part of an established arrangement expressly approved by the SCS, they are available outside of core service hours to work as required and to physically attend if the matter cannot be dealt with remotely. There is no expectation that an employee must remain at their home whilst on-call provided they comply with the employee responsibilities set out. An employee who is on-call must be directly contactable by telephone and email and remain in an area of mobile phone and internet connectivity at all times.

Employee responsibilities include:

- [REDACTED]
[REDACTED]
- [REDACTED]
[REDACTED]
- [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]



- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

By nature of the service, on-call may take place in many different scenarios and situations, and may present challenging situations of increased risk to health and safety. There is, therefore, the need for the designated Support Coordination Supervisor to act in a particularly vigilant manner with regard to the safety of those affected by the incident.

Whenever an employee is in any doubt of their own level of competence they must seek appropriate support from the SCS fellow staff, utility providers, and/or emergency services.

This policy is effective as of [Date] _____

This policy is approved by [Name, Title] _____

DO NOT COPY



5. CLIENT ADMISSIONS

a. Admissions Process

The admissions process serves to gather essential information about a potential client and determine their eligibility for services. Intake steps include:

1. [REDACTED]
2. [REDACTED]
3. [REDACTED]

Once an individual is assigned to the agency an in depth intake interview will be followed to understand the individual's needs and develop a personalized support plan. For this, the Support Coordinator will conduct a comprehensive interview with the client, including (where feasible) family members or caregivers, to gather information about:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

When feasible, standardized assessment tools must be used to evaluate specific areas like cognitive functioning or communication skills. The Support Coordinator will collaborate with other professionals involved in the client's care, if necessary, such as doctors, therapists, or case managers.

Following the assessment, the Support Coordinator will

- [REDACTED]
- [REDACTED]
- [REDACTED]

The intake and assessment process must always be conducted with respect for the client's privacy and preferences. Communication throughout the process must ensure the client understands the procedures and has the opportunity to ask questions. Depending on the agency's structure and service offerings, other personnel like social workers may be involved in the intake and assessment process if feasible.

By following a well-defined intake and assessment protocol, [COMPANY NAME] can efficiently personalize support plans, and connect individuals with disabilities to the services they need to live fulfilling lives.

b. Initial Contact and Inquiry

The initial contact and inquiry process that an individual or family makes is the first step a potential client may take to connect with the agency's care management and support coordination services. The agency strives to make this process welcoming, informative, and efficient to encourage potential clients to consider its services.

[COMPANY NAME] staff will be trained to respond to inquiries promptly, politely, and professionally, and briefly explain the agency's mission and the types of services offered.

1. [REDACTED]
2. [REDACTED]

[COMPANY NAME] staff will be trained on effective communication skills for handling inquiries, including active listening and addressing concerns empathetically. The agency will ensure all contact channels are accessible to individuals with disabilities. The privacy of any personal information collected during initial contact must be ensured.

c. Information Gathering and Assessment

Client information will be gathered using the following techniques:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

Assessment tools must be culturally appropriate and avoid biases.

The information gathered from various tools needs to be analyzed and interpreted to develop a comprehensive understanding of the client's situation.

d. Admissions Policy and Procedures

REFERENCE NO: 17.18.5.3 & 17.18.5.4

[COMPANY NAME] will ensure that new individuals assigned to the agency or through the CSA selection process will be guaranteed a timely introduction, first meeting and plan development that meet all DDD standards set forth in the Supports and Community Care Program manuals. [COMPANY NAME] has a zero-rejection policy.

PROCEDURES

1. [REDACTED]
2. [REDACTED]
3. [REDACTED]
4. [REDACTED]
5. [REDACTED]
6. [REDACTED]
7. [REDACTED]
8. [REDACTED]
9. [REDACTED]
10. [REDACTED]

The following documents must be printed out and brought to the first meeting:

Rights and Responsibilities, 2 copies
Participant Enrollment Agreement, 2 copies
Mental Health Checklist
HIPAA, 2 copies
NJCAT, 2 copies
Welcome letter
Budget amount
Visit Verification Form

The following documents must be obtained by the SC at the first meeting or noted at the PCPT meeting:

Signed Rights and Responsibilities - 1 copy to the family, 1 copy for the file
Signed Participant Enrollment Agreement - 1 copy to the family, 1 copy for the file
HIPAA completed and signed by an individual or legal guardian
NJCAT - 1 copy to individual or family
Completed MH Checklist, discussed with family, and information used to conduct the interview
A list of all medications (dosage, frequency/time taken, taken for what and how it is taken)
A discussion of current services receiving: DDD, PPL, and/or PPP by any other providers
**** A copy of guardianship papers
Completed intake form

After the PCPT meeting (within one week):

<p>The following must be uploaded into iRecord under 'Documents':</p> <ul style="list-style-type: none"> - Rights and Responsibilities - Participant Enrollment Agreement - HIPAA - Guardianship papers (noting the date the papers were issued) <p>and sent via email to the SCS Mental Health Checklist</p>
<p>PCPT must be completed in iRecord under 'Tools'</p> <p>All information must align with the NJCAT. If there is a discrepancy, it must be noted in a 'Case Note'. Any new or corrected information from the provider must be noted with 'According to: _____'.</p>
<p>Any other providers must be contacted, including name and phone number and relevant information about the client.</p> <p>The total number of hours/units they have attended or received services for from other providers must be noted before completing the ISP, so it can be added to the outcomes. A day habilitation worksheet or individual supports worksheet must be obtained from other providers, and uploaded in iRecord.</p>
<p>An ISP must be completed in iRecord, ensuring it aligns with the PCPT and NJCAT.</p> <p>Any discrepancies must be noted in 'Case Note'.</p> <p>If the individual does not already attend a service, 'Outcomes' in ISP must be noted as exploratory (meaning services MUST be found within 3 MONTHS).</p> <p>A copy of the Service Detail Report (SDR) must be sent to the service provider, and confirmation received that the service and units are correct prior to holding the ISP meeting.</p>
<p>A referral to DVRS online or complete F3 must be made if the individual will NOT be pursuing employment at this time.</p> <p>The referral must be saved and uploaded into 'Documents' in iRecord.</p>
<p>ISP must be sent to review to SCS BEFORE the ISP meeting, to allow SCS to review and include changes that need to be made PRIOR to the meeting. It must be sent ONLY ONCE for review when all units have been included for services that the individual already has.</p>
<p>The ISP meeting must be set, for the plan to be approved 30 DAYS from assignment to the agency. It is IMPERATIVE that the plan not be late.</p>
<p>The ISP and PCPT must be reviewed in the meeting, and a signature for ISP obtained.</p> <p>If any changes are needed, a note must be made in 'Case Note'.</p>

An email must be sent to the Support Coordinator Supervisor to say that the plan is ready to be reviewed. ISP IS DUE INTO REVIEW 2 WEEKS AFTER THE ASSIGNMENT. THIS WILL ALLOW FOR TIME FOR ADJUSTMENTS AND ANY REVISIONS THAT NEED TO BE MADE.

THIS TIME FRAME IS NOT NEGOTIABLE UNLESS DISCUSSED WITH THE SUPERVISOR.

SCS will review the plan and either send it back to you for revisions or approve the plan

If changes are needed, the plan will be put into revision with general notes on changes that need to be made. It is important that these changes be made immediately to ensure plan approval.

This policy is effective as of [Date] _____

This policy is approved by [Name, Title] _____

f. Individualized Service Plan (ISP) Development and Implementation

The Individualized Service Plan (ISP) is a document supporting people with disabilities that outlines a person-centered approach to achieving their goals and living a fulfilling life.

Developing ISPs

1. _____

2. _____
3. _____

4. _____

5. _____

6. _____

7. _____

Implementing the ISPs

1. _____
2. _____



3. [Redacted]
4. [Redacted]
5. [Redacted]
6. [Redacted]
7. [Redacted]
8. [Redacted]
9. [Redacted]
10. [Redacted]
11. [Redacted]

By following a well-defined ISP development and implementation process, individuals with disabilities can better be supported in achieving their goals and living independently in the community.

g. Monitoring and Updating the ISP

Effective monitoring and updating of ISPs are essential to ensure they remain relevant and continue to meet the evolving needs and goals of the individual with a disability.

ISPs will be monitored by:

- [Redacted]
- [Redacted]
- [Redacted]

ISPs will be updated by noting:

- [Redacted]
- [Redacted]
- [Redacted]



STRATEGIES FOR EFFECTIVE ISP MONITORING AND UPDATING

The agency will monitor progress toward achieving the desired outcomes outlined in the ISP, not just service delivery. [REDACTED]

Cultural sensitivity must be maintained throughout the monitoring and updating process. [REDACTED]

By implementing a systematic approach to monitoring and updating ISPs, Support Coordinators can ensure ISPs remain up-to-date and responsive to the changing needs and aspirations of the individuals they serve. The goal is to empower people with disabilities to improve their quality of life, and achieve their full potential.

Note to Readers:

Thank you for exploring this sample of our work. In order to maintain the brevity of our online showcase, we've provided only a selection from this piece.

Should you be interested in viewing the complete work or wish to delve deeper into our portfolio, please don't hesitate to reach out. We're more than happy to provide extended samples upon request.

Thank you,
The Write Direction Team