

DATA REPORT: SERVICE COORDINATION TRAINING

Purpose

This study was conducted to determine the status of Part C service coordination training across the U.S. and its territories. Training coordinators from 53 states and territories responded to a survey of training methods, curricula, and follow-up for service coordinators in early intervention programs. This report summarizes the findings of that survey and raises important concerns about preparation and support of service coordinators. Data revealed a notable lack of consistency in the development of training standards and insufficient follow-up and assessment procedures.

Method

Participants

Curricula data on service coordination training were gathered through interviews of Part C training staff in 49 states and 4 territories as part of a larger study on service coordination. Part C coordinators in 55 U.S. states and territories were asked to identify the person most familiar with their state's training curricula in service coordination.

Survey Design

Research and Training Center project staff contacted the designated training person in each state to ask the following four questions:

1. Does the state have separate standards (requirements) for service coordinators than they do for other service providers?
2. If yes, what are the standards?
3. What type of training does the state do for service coordinators?
4. How does the state insure service coordinators have learned training content? Is there follow up conducted?
5. What is the training curriculum? (and copies were requested)

Information was collected through telephone interviews lasting approximately 30 minutes each. Some individuals chose to submit answers to the questions by e-mail or fax. Data were compiled and entered as narrative statements into Microsoft Word.

Results

Standards and Requirements for Service Coordinators

Twenty-six (26) of the 53 participating respondents reported that their state had separate job standards and requirements for service coordinators. Of these, 7 states required at least a four-year degree for service coordinators. Eight (8) states reported competency-based requirements. The remaining 11 states required specific training, self-evaluation, or other forms of assessment.

Examples of requirements included:

1. Having a BA in early childhood education, special education, nursing, or closely related field
2. Acquiring an appending credential within 15 months of employment
3. Training in Medicaid

4. Training in expenditure of funds
5. Attending a university course
6. Working with a mentor for a specified period of time
7. Submitting a portfolio

Nearly half of the states did not have separate requirements or standards for service coordinators.

Service Coordination Training Practices

Thirty-seven (37) states provided specific training for service coordinators. Sixteen (16) states provided no service coordination training but provided general training for early intervention staff. Six (6) states reported they had collaborated with universities to design service coordinator training.

Many of the training staff stated that they were dissatisfied with their states' current training, or lack of training for service coordinators. Nearly half of those contacted (47%) reported that their state was in the process of revising existent training or developing a new curriculum. Of the 37 states that provided service coordination training, 15 reported that the length of training varied, depending on the needs of the individual service coordinator. Of the remaining 22 states, the average length of training was 2.9 days. Training was mandatory in 20 of the 37 states that provided service coordinator training (54%).

States with Follow-up Training or Supervision

Approximately half (N=17) of the 37 states (47%) provided follow-up support or training to service coordinators after the initial training period. Some of the states that did not provide distinct training programs required a period of self-study followed by a review of skills in the form of a test, observation, or portfolio. Several respondents reported mentoring as a way to provide support and training to service coordinators.

Table 1

Follow-up Training and/or Support Provided for Service Coordinators after Hire in 37 States Providing Service Coordinator Training

	N = 53	Frequency	%
No response		2	3%
No follow-up cited		25	47%
Performance appraisal/evaluation by supervisor		9	17%
Pre/Post testing		6	11%
Self-monitoring		3	5%
Technical assistance on an individual basis		3	5%
State monitoring		2	4%
Other		4	7%

Content of Training Curricula

Twenty-nine (29) of the 53 states and territories (55%) responding to the curricula study provided service coordination training materials to the Research and Training Center. Eleven

(11) states submitted comprehensive curricula packages (greater than 100 pages) for service coordination training. Five (5) states submitted packets of 20-50 pages that included agendas, handouts, course descriptions, and service coordinator competency lists. The remaining 13 states provided curricula materials of ten pages or less, consisting of brochures, agendas, competencies, or flyers.

Comprehensive training packets of over 100 pages were analyzed using the following protocol:

1. All training topics were listed by two separate evaluators
2. Training topics were organized into content areas, including subcategories of the areas
3. The evaluators then compared lists to arrive at a final list of content areas and subcategories
4. Each content area and subcategory of the 11 curricula were coded to determine the breadth of the curriculum using the following codes:
 - ❖ 0=training topic not mentioned
 - ❖ 1= training topic mentioned, but no accompanying training material sent
 - ❖ 3= training topic directly covered and training materials sent

The number of content areas and subcategories covered by a single curriculum varied from a high of 106 to a low of 16 (see Table 3). Of 34 possible content areas, only 2 were covered by all 11 states reviewed. Two (2) areas were taught in 10 states. Six (6) common topics were taught by 9 states. The full listing of service coordination training topics is in Appendix B.

Service Coordinator Performance Competencies

Of the 53 states submitting training information, 12 sent performance competencies for service coordinators. Detailed samples of state competency requirements can be found in Appendix C. Generally, the 12 states were consistent in competency requirements for service coordinators. All states listed competencies in coordinating and monitoring services and collaborating with families. Eleven states listed competencies in assessment and developing and monitoring IFSPs. Several competencies were listed by only one state, including: 1) communicating effectively with children, 2) writing jargon free reports, and 3) promoting family-to-family support. A summary of the competency requirements is shown in Table 2.

Table 2

Competency Requirements for Service Coordinators in Twelve States

	States											
	1	2	3	4	5	6	7	8	9	10	11	12
A. Knowledge of child development	X		X					X		X	X	X
B. Perform and evaluate assessments	X	X	X	X	X		X	X	X	X	X	X
C. Coordinate/monitor services	X	X	X	X	X	X	X	X	X	X	X	X
D. Collaborate with families	X	X	X	X	X	X	X	X	X	X	X	X
E. Participate in development and monitoring of IFSPs	X	X	X	X	X	X	X	X	X		X	X
F. Facilitate transitions		X	X	X	X			X	X		X	X
G. Exhibit effective communication skills	X	X	X	X	X			X	X		X	X
H. Perform and apply research	X		X									X
I. Provide public education	X	X	X									
J. Display professional values and ethics	X						X				X	

Summary

It is clear that there is a wide discrepancy across the US in training practices for service coordinators. Thirty percent (30%) of the respondents to the curricula survey reported that their state did not provide specific training in service coordination, and 51% of states did not have additional standards or requirements of service coordinators as compared to other early intervention professionals. In states that did provide training, only 21% submitted curricula that were comprehensive and specifically targeted for service coordination. Regardless of the comprehensiveness of the curriculum, the average length of training was under three days. Nearly half of the 55 U.S. states and territories are in the process of revising existent curricula or creating new training. Some training staff, when asked to forward training materials, said they were not comfortable doing so because they were not satisfied with the training methods, practices, or materials in their state. Some states have wide-ranging competencies for service coordinators, but no accompanying training or follow-up to ensure that skills are acquired and maintained.

This study highlights the lack of comprehensive training in service coordination and the absence of adequate ongoing support and assistance for service coordinators. An initial three-day training program is not sufficient to cover the breadth of curricula topics necessary to provide service coordinators with the skills they need to perform their job competently. Until the gap between professional competency expectations and training is bridged, families cannot expect to receive consistent, high quality service coordination.

Appendix A: Curricula Survey Questions

State Training Curricula on Service Coordination Data Collection Form

State: _____

Date: _____

Contact Person: _____

Phone: _____

1. Does the state have separate standards (requirements) for service coordinators than they do for other service providers?

If yes, what are the standards, requirements and how do they differ?

2. What type of training does the state use?

3. How do they know if the service coordinators have acquired the information from training (what is the follow up)?

Ask them to send any training materials that they have

Appendix B: Curricula Training Topics

Key: 1 = mention of topic in curricula

2 = topic covered/detailed information included in curricula packet

<u>Training topic</u>	<u>State</u>										
	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>	<u>H</u>	<u>I</u>	<u>J</u>	<u>K</u>
Federal and State Regulations		2		2		2			2		2
History of legislation						2		2	2		2
Overview of relevant laws past to present.	2	2		2	1	2	1	2	2		2
Specific federal laws and state regulations	2	2		2	1	2		1	1		2
Part C of IDEA	2	2	1	2	1	2		1	2		2
Part B of IDEA	2	2	1	2	1	2					2
Procedural Safeguards	2	2	2			2	2	1	1	2	2
Comprehensive Systems of Personnel Development	2					2	2		2		2
Organizational Structure of State Lead Agency		2		2				1	2		2
Flow chart of state system	2	2		2	1						2
Mission/Vision/Philosophy of States B-3						2					1
Funding and Finance	2	2	2						2		2
Personnel Roles and Qualifications		2		2							2
Developmental Therapists		2		2							2
Early Intervention Specialists		2		2				2	2		2
Family Support Specialists		2			2						2
Medical and Health Personnel		2		2					1		2
Mental Health Personnel		2		2					1		2
Occupational Therapist		2		2			2		1		2
Paraprofessional		2	2	2					1		2
Parent Professional									1		2
Physical Therapist		2		2			2		1		2
Service Coordinator /Case Manager	2	2	2	2	1	2	2	2	2		2
Speech/Language Pathologist		2		2			2		1		2
Minimum qualifications for EI staff		2	2	2		2			2		2
Personnel Competencies				2					2		2
Competencies associated with service providers				2	2				2	2	2
Pre/Post Training Evaluation of Service Coordinator		1									
Administrative Supervision		2									
Documentation		1	1			2			2		2
Role of documentation in service coordination	1	1				2	2		2	1	2
Billing and Insurance Information		2	2						1		2
Rules for payment	1	2	2	2			2		1		2
Understanding billing, forms and procedures		2					2		1		2

<u>Training topic</u>	<u>State</u>										
	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>	<u>H</u>	<u>I</u>	<u>J</u>	<u>K</u>
Records and Confidentiality		2		2					2		2
Definition of confidentiality	2	2	2	2	1				2	2	2
State and federal confidentiality guidelines		1	2						1		2
Approved Providers									2		1
Who is an approved provider?	2	2	2		2				2		1
Process for becoming an approved provider											
Funding and Finance		2	2			2			2		2
Accessing financial and funding resources	1	2	2			2			2		2
The Early Intervention Process											
Point of Entry		2	2			2			2		2
Referral		2	2	2		2	2		2		2
What happens after referral		2		2		2	2		2	2	2
Assessment/Evaluation		2		2		2			2		2
Eligibility		2		2		2			2		2
Eligibility criteria	2	2	2	2	1	2	2		2	1	2
Reassessment		2		2		1				2	1
Family Assessment		1				2			2		2
Including family needs	2	1		2	1	2	2		2	2	2
Assessing family needs	2	2			1	2	2		2	2	2
Procedures for assessment		2		2		2			2		2
Requirements of the assessment	1	2		2		2	2		2		2
Applying Assessment Results						2			2		2
Practice/Model—applying assessment results to IFSP.	1	1				2			2		2
Non-eligible Children		2									1
The IFSP Process		2	1	2		2		1	2		2
Natural environments	2	2	2	2		2	2		2	1	2
Determining present levels of development	2	2	2	2		2	2		2	1	2
Family centered practices—determining families priorities and concerns	2	2	2	2	1	2	2		2	2	2
Integrating family concerns/ideas into the IFSP	2	2	2			2	2		2		2
Writing Functional Outcomes	2	1	2	2	1	2	2		2		1
Practice/models for writing functional outcomes	2	1			1	2	2		2		2
IFSP Team		2				2			2		2
Composition of the IFSP team	2	2				2			2		2
Completing the IFSP	2	2	2	2		2	2		2		2
Mediation Process		2		2		2				1	2
Definition	2	2	2	2		2	2				2

<u>Training topic</u>	<u>State</u>										
	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>	<u>H</u>	<u>I</u>	<u>J</u>	<u>K</u>
Stages of the mediation process	2	2		2		2	2				2
Transitions			1	2		2			2		2
Process	2	2		2		2	2		2	2	2
When to begin	2	2	1	2		2	2		2	2	2
What steps to take	2	2		2		2	2		2	2	2
Who is part of the transition process	2	2		2		2	2		2	2	2
Components of the Early Intervention Process											
Family-centered	2	2	2	2		2		1	2	2	2
Child-centered	2	2		2					2		2
Family Systems Theory					1			1	2		
Cultural Diversity						2			2		2
Cultural sensitivity	2				1	2	2		2	2	2
Impact of culture on family	2				1	2	2		2	2	2
Finding Resources/Referrals		1		2		1		2	2		2
Locating resources in families' communities	2	2		2			2	2	2	2	2
Establishing community relationships									2		2
Atypical and Special Needs									2		2
Key milestones	2				1	2	1		2		2
Key indicators of development	2				1		1		2		2
Mental Health		2	1						2		2
Key milestones	2				1				2		2
Key indicators of development	2				1	2			2		2
Abuse and Neglect		2							2		1
Key Indicators	0								2		
Reporting Systems	0	2							2		
Parents with Disabilities									1		
Assisting parents with disabilities	2								1		
Common Challenges in the Service Coordination field	2				1				2	2	2
Proactive problem solving	2			2					2	2	2
Crisis prevention	2				1				2		
Time/resource/stress management									2		2
Working with parents to manage time, decrease stress	2						2		2	2	2
Taking care of self				2					2		2
Support strategies and coping skills									2		2
Boundaries/setting professional limits					1				2	2	1
Values/Personal Characteristics						2			2		2
How individual values affect interactions with families.	1					2			2		1
Communication				2		2		1	2		2

<u>Training topic</u>	<u>State</u>										
	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>	<u>H</u>	<u>I</u>	<u>J</u>	<u>K</u>
Collaboration	2			2	1	2	2	1	2	2	2
Types of Teams		1		2		2	2		2		2
Facilitation skills				2		2			2		2
Including families in team process	2			2		2			2	2	2
Advocacy						2		1			2
What it is				2	1	2				2	2
Who can be an advocate						2					2
Non-required Services	2										1
Home Visiting Models									2		1
	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>	<u>H</u>	<u>I</u>	<u>J</u>	<u>J</u>
TOTALS	51	73	30	58	28	64	37	16	96	98	106

Appendix B (continued)

Service Coordinator Training Content in 11 States		
<p>11 states cover: Federal and state regulations IFSP process</p>	<p>10 states cover: Funding and finance E.I. process</p>	<p>9 states cover: Family assessment Writing functional outcomes Transitions Family/child-centered E.I. services Finding resources/referrals Communication</p>
<p>8 states cover: Organizational structure of state lead agency Records and confidentiality IFSP team Mediation process</p>	<p>7 states cover: Documentation Billing and insurance info Cultural diversity Mental health Common challenges in service coordination</p>	<p>6 states cover: Funding and finance Atypical and special needs Types of teams Facilitation skills Advocacy Approved providers</p>
<p>5 states cover: Personnel competencies</p>	<p>4 states cover: Values/personal characteristics</p>	<p>3 states cover: Personnel roles/qualifications</p>

Appendix B (continued)

<u>Training topic</u>	<u>Sta</u>										
	<u>te</u>										
	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>	<u>H</u>	<u>I</u>	<u>J</u>	<u>K</u>
Federal and State Regulations	X	X	X	X	X	X	X	X	X	X	X
Organizational Structure of State Lead Agency	X	X		X	X	X		X	X		X
Funding and Finance	X	X	X	X	X	X	X	X	X		X
Personnel Roles and Qualifications		X		X							X
Personnel Competencies		X		X	X				X		X
Documentation	X	X	X			X	X		X		X
Billing and Insurance Information	X	X	X	X			X		X		X
Records and Confidentiality	X	X	X	X	X				X	X	X
Approved Providers	X	X	X		X				X		X
Funding and Finance	X	X	X			X			X		X
The Early Intervention Process	X	X	X	X	X	X	X		X	X	X
Family Assessment	X	X		X	X	X	X		X	X	X
Non-eligible Children		X									
The IFSP Process	X	X	X	X	X	X	X	X	X	X	X
Writing Functional Outcomes	X	X	X	X	X	X	X		X		X
IFSP Team	X	X	X	X		X	X		X		X
Mediation Process	X	X	X	X		X	X			X	X
Transitions	X	X	X	X		X	X		X	X	X
Family/Child Centered EI Services	X	X	X	X		X		X	X	X	X
Cultural Diversity	X				X	X	X		X	X	X
Finding Resources/Referrals	X	X		X		X	X	X	X	X	X
Atypical and Special Needs	X				X	X	X		X		X
Mental Health	X	X	X		X	X			X		X
Abuse and Neglect		X							X		
Parents with Disabilities	X								X		
Common Challenges in the Service Coordination Field	X			X	X		X		X	X	X
Values/Personal Characteristics	X					X			X		X
Communication	X			X	X	X	X	X	X	X	X
Types of Teams		X		X		X	X		X		X
Facilitation Skills	X			X		X			X	X	X
Advocacy				X	X	X		X		X	X
Non-Required Services	X										X
Home Visiting Models									X		X
	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>	<u>H</u>	<u>I</u>	<u>J</u>	<u>J</u>
TOTAL TOPICS	26	23	15	21	16	22	17	8	28	14	29

Appendix C: Detailed Competency List from Five States (shortened and/or paraphrased)

State 1.

Competency area: TYPICAL/ATYPICAL CHILD DEVELOPMENT

Knowledge of typical and delayed child development
Knowledge of common developmental disabilities
Knowledgeable about potential impact of disability on child's needs

Competency area: PROGRAM MANAGEMENT

Knowledge of regulations for eligibility of young children for EI services
Knowledge of contractors/subcontractors visions, goals and operating procedures which drive services for children and families
Knowledge of program's system for conducting staff performance appraisals
Manages of daily operations
Maintains safe work and educational environments
Maintains proper inventory of materials and equipment
Understands sources of contractors/subcontractors funds
Understands labor laws, union contracts, anti discriminatory hiring practices
Demonstrates leadership

Competency area: SERVICE COORDINATION

Knowledge of related service providers and public/private community providers
Ability to network to increase options for children and families
Uses good communication skills and productive problem solving strategies
Manages crises in the work setting
Develops, negotiates, implements interagency agreements
Develops and implements successful transitions

Competency area: RESEARCH

Knowledge of research as a tool to improve practices
Uses current literature to solve problems or modify practices
Gathers and analyzes data to measure program effectiveness
Contributes to body of knowledge in field

Competency area: PROFESSIONAL VALUES AND ETHICS

Uses self evaluation to ensure personal and professional growth
Receives feedback on performance in a professional manner
Gives feedback in a professional manner
Participates in ongoing training and/or education
Adheres to a code of professional ethics as identified by employer, licensure agency, and/or professional organization
Assists others to establish professional goals and facilitate their attainment

State 2.

Role 1: COORDINATE AND EVALUATE THE ASSESSMENT PROCESS

Has a working knowledge of state service delivery
Understands agency structure, eligibility criteria, personnel in various agencies
Understands record keeping, documentation policies
Develops jargon free assessments within established timelines
Understands how to determine family resources, priorities, and concerns regarding their child
Describes resources and supports to families
Is an effective team member
Demonstrates active, listening appropriate communication skills
Is an effective participant in team meetings

Role 2: DEVELOP AND REVIEW IFSPs

Has a working knowledge of roles and functions of service coordinator
Understands Part C, IDEA
Develops IFSPs with families implements plan
Respects different values, beliefs, lifestyles
Understands levels of communication and cooperation in different team models
Demonstrates active listening skills and communication skills
Demonstrates ability to advocate and network to facilitate parent support
Skilled in leading, facilitating, recording, and participating in group meetings

Role 3: COORDINATE AND MONITOR SERVICE DELIVERY

Understands the concepts of interagency cooperation, referrals, contracts, formal and informal agreements
Understands the complexity of the service delivery system (health care, child care, education, social services, housing, etc.) for children and families
Demonstrates strategies to help families locate, access and coordinate networks of supports that address their needs and priorities.

Role 4: FACILITATE SUCCESSFUL TRANSITIONS

Understands processes and strategies supporting transitions
Understands transition requirements as defined by IDEA
Understands state policy related to transition
Knows the various transition related choices and options available to families
Demonstrates skill in leading, facilitating, participating in a task group meeting

Role 5: CONDUCT PUBLIC AWARENESS PROGRAMS

Understands that children and families live in communities that have a much broader context than early intervention
Networks across agency boundaries to community organizations
Maintains communication with community partners
Disseminates information about early intervention and encourages organizations to join community efforts

State 3.

REFERRAL, ELIGIBILITY, ASSESSMENT FOR PROGRAM PLANNING

Demonstrates effective communication skills (active listening, reflection of feeling and content, questioning techniques and body language).
Uses knowledge of adult learning styles when working with families and other team members
Includes caregivers as part of the team
Assists families to understand their rights in regard to procedural safeguards
Explains eligibility evaluation and ongoing assessment procedures
Conducts family interviews—identify family priorities, concerns, resources, preferences
Selects, administer, score and interpret screening and evaluation instruments
Summarizes evaluation findings
Writes clear reports that are sensitive to family values and culture and incorporate caregivers info and recommendations
Engages caregivers in testing and assessment process

INDIVIDUAL FAMILY SERVICE PLAN AND SERVICE DELIVERY

Develops IFSP outcomes that support positive child and family outcomes
Modifies intervention strategies based upon caregiver's priorities, concerns, resources and preferences
Synthesizes info, recommendations and strategies from family and multiple disciplines in the design of intervention strategies
Designs intervention plans the incorporate adaptive and assistive technology
Uses and shares knowledge of typical development

Uses and shares knowledge of common genetic and medical conditions and environmental risk factors and their impact on child development
Uses and shares knowledge of theories, trends, issues and research regarding infant and toddler development
Identifies caregivers concerns and priorities and set a priority and agenda for each individual interaction
Includes siblings and extended family in service delivery
Identifies learning opportunities, design intervention strategies, integrate instructional objectives into families routines
Demonstrates skill in working with families from a variety of backgrounds (cultural, ethnic, racial, socioeconomic, religious, educational, intergenerational, ages)
Demonstrates skill working with families affected by developmental disabilities, physical limitations, mental illness, chronic illness, abuse—and identify appropriate referral sources for support
Uses a variety of techniques to support infant and toddler learning
Formulates strategies and activities to promote child growth
Applies data collection methods, evaluate progress of IFSP outcomes, and modify intervention strategies within context of family perceptions and observations and child needs.
Incorporates knowledge of infant/toddler curricula in selection of instructional practices
Implements interventions in a variety of settings (home, childcare, community, hospital, etc.)
Maintains accurate, current records

COLLABORATION

Plans, facilitates and implements transitions
Demonstrates knowledge of family support
Promotes family to family support
Identifies natural, community based supports in conjunction with caregivers
Facilitates interagency communication
Complies with state mandates regarding children and families (e.g. abuse and neglect reporting, HIV, confidentiality)
Communicates federal, state and program regulations, standards and rules

State 4.

COORDINATE THE EVALUATION AND ASSESSMENT PROCESS

Has a working knowledge of EIP service delivery
Understands eligibility and personnel related to EI services
Understands and respects different values, beliefs, lifestyles
Understands record keeping policies
Understands the philosophy and approach to determine family resources, priorities, concerns
Can describe available resources and supports
Is an effective team member
Demonstrates active listening, and communicates appropriately

FACILIAE AND COORDINATE THE DEVELOPMENT OF IFSPs

Has a working knowledge of roles and functions of service coordinator
Understands Part C, IDEA
Develops IFSP with family and carries out tasks necessary to move toward implementation
Understands the levels of communication and cooperation in different team models

ASSIST FAMILIES TO ACCESS SERVICES SUPPORTS AND RESOURCES

Competencies in #1 plus

Has a working knowledge of health care finance systems

COORDINATE AND MONITOR DELIVERY OF SERVICES

Understands the complexity of service delivery systems for children and families
Demonstrates strategies to help families locate and coordinate and network supports that address their needs and priorities

FACILITATE TRANSITIONS

Understands processes and strategies supporting transition
Understands transition requirements as defined by IDEA
Understands district policy and procedures related to transition
Knows the transition options and choices available for children and families

State 5

COORDINATE AND EVALUATE ASSESSMENTS

Gives/receives information in a family centered, culturally competent, respectful manner
Communicates basic knowledge of disabilities and impact on the family
Identifies standards for assessment
Makes referrals based on intake and screening information
Avoids duplication of assessments
Demonstrates knowledge of rules, regulations, funding, forms, teaming, organization
Uses proper procedure and protocol for communication

FACILITATE AND PARTICIPATE IN THE DEVELOPMENT OF IFSPs

- Applies interview techniques
- Identifies and acts on situations in which services should begin before the IFSP
- Communicates effectively with team members
- Understands the IFSP process
- Understands assessment and evaluation
- Facilitates family involvement
- Ensures family priorities are used in developing plans.
- Ensures that interventions are incorporated into family routines

ASSIST FAMILIES TO IDENTIFY SERVICE PROVIDERS

- Involves family to the maximum extent they desire
- Identifies and accesses funding sources such as SSI, CHAMPUS, private insurance
- Knowledgeable about service providers, networks and accesses resources
- Knowledgeable about links for IFSP goals, knows how to locate services
- Facilitates natural supports in the child's community
- Establishes strong working relationships, open communication

COORDINATE AND MONITOR SERVICES

- Assures delivery of service
- Assesses family satisfaction
- Effective team member
- Empowers families
- Builds respectful relationships with families and professionals
- Demonstrates effective communication skills

INFORM FAMILIES OF ADVOCACY SERVICES

- Provides appropriate helping responses based on families strengths and resources
- Knowledgeable about parent groups, state and local advocacy organizations

COORDINATE WITH MEDICAL AND HEALTH CARE PROVIDERS

- Maintains records
- Communicates effectively with health care professionals
- Follows appropriate protocol and procedures for working with health care providers
- Maintains confidentiality
- Utilizes families as advisors in coordinating with providers

FACILITATE TRANSITIONS

Knowledgeable of receiving agencies systems and regulations

Provides information about Part C to the staff of receiving agency

Maintains documentation and communication

Communicates effectively with service providers to achieve a coordinated effort

Demonstrates an understanding of the difference between IEPs and IFSPs