How To Choose a Healthcare Coordinator

The designated healthcare coordinator is not usually the agency nurse or service coordinator, but is:

- 1. A person who sees the individual regularly.
- 2. A person the individual trusts to coordinate their healthcare.
- 3. A person with whom the individual will discuss health needs.
- 4. A person who is able to communicate health concerns to the individual, interdisciplinary team, and medical team.
- 5. A person who can monitor the individual for health needs and outcomes.
- 6. A person who can facilitate medical appointments, follow-ups, and regular communication.
- 7. A person who can commit to being an integral part of the Interdisciplinary team.

While the above are general guidelines for the choice of a healthcare coordinator, there are some special considerations depending on the specific residential situation of the individual. Below are the considerations for four distinct service models: Independent Living (or those who do not receive residential services), Family Living, Supported Living, and those who choose to coordinate their own healthcare regardless of service model.

Special Considerations for the Choice of a Healthcare Coordinator for Individuals who access Independent Living or do not have a Residential Service:

Individuals may desire to fulfill the role of Healthcare Coordinator independent of their team. For individuals with Health Assessment Tool Scores 4-6, someone must be assigned to assist in completion of this role, even if the individual desires to complete the primary functions himself/herself. Regardless, individuals may desire or need someone to assist them in adequately performing the function of Healthcare Coordinator. In this case, it is extremely important that the individual who is assigned is a trusted person who visits the individual regularly and as needed. Ideally, this would be a family member or direct support staff who typically visits the individual weekly and can interpret information, provide prompts to follow-through on health related tasks, and assist the individual to attend appointments and follow through on physician directed treatment. It is important that we recognize that the individual has the right to informed decision making regarding healthcare and may refuse advisable treatments. The assigned healthcare coordinator must be able to respect the individual's decision, but still educate and promote informed choice.

Special Considerations for the Choice of a Healthcare Coordinator for Individuals who access Family Living Services:

In most cases, the Family Living Provider is the person who has the closest relationship with the individual receiving family living services. The Family Living

Provider will be readily available to monitor health needs, to schedule appointments, and to track follow-up medical care. For these reasons, typically the Family Living Provider is the most appropriate person to coordinate healthcare for individuals accessing this service. Occasionally, however, the individual or team may feel that there is an alternate person who is more appropriate. The individual may be more comfortable with a close family member who is actively involved with the person coordinating their healthcare, or the family living provider may feel that they do not have the communication or facilitation skills to assure the individual's healthcare is well coordinated or that support from another team member would be helpful given the complexity of an individual's health needs.

Special Considerations for the Choice of a Healthcare Coordinator for Individuals who access Supported Living Services:

If an individual accesses Supported Living Services, it is imperative that healthcare is well coordinated due to the revolving nature of staffing in this environment. For this reason, it is necessary that the person chosen to coordinate healthcare is accessible to the staff, has a relationship with the individual, and has the ability to communicate effectively to the agency and team. Frequently the person who is most able to fulfill this role well is the house manger. While the healthcare coordinator may coordinate healthcare tasks, this does not mean that they are going to personally fulfill all of them. The healthcare coordinator for an individual using supported living services delegates, monitors documentation, and communicates both treatment and follow up needs to others in the agency and on the team. It is not necessary that healthcare coordination be fulfilled the by the house manager. If the individual or team feel there is someone else on the team who is better able to fulfill the role, that person may be chosen—however, the chosen person should only be the agency nurse for those with complex medical conditions.

Special Considerations for Individuals who Coordinate their own Healthcare:

If an individual prefers, he or she may coordinate his or her own healthcare. This means that they will take responsibility for the appointments, information, and decisions that are made. This does not mean, however, that they are alone. The interdisciplinary team remains a resource for the individual (for individuals with Health Assessment Tool score of 4-6, an individual must be named to assist the individual). The team should discuss with the individual what role the individual would like the team to play. Does the person want someone to assist in scheduling appointments, filling medications, monitoring health needs? Does the person just want someone to talk to if they are uncertain of the appropriate action to take regarding a health need or information? The team should respect the individual's desire to coordinate healthcare, but be available as a resource. At times, everyone is uncertain of the right decision regarding their own healthcare—people receiving paid supports have the same uncertainties. It is the job of the team to provide support, education and assistance regarding healthcare to an individual who requests it so the

individual can make an informed decision. It is also the job of the team to respect that decision.

Special Considerations when a Nurse is the Designated Healthcare Coordinator:

While it should not be typical for the agency nurse to be the Healthcare Coordinator, at times the IDT or a provider agency may feel that it is imperative for a nurse to fulfill the role of Healthcare Coordinator. This could be due to an individual's level of acuity, the specific nature of the individual's disability related needs, or the choice of the agency management. In these situations, the nurse continues to have the same basic functions as any nurse in the DD system to assure appropriate healthcare monitoring, oversight, follow up and medical facilitation. There are no new responsibilities for a nurse who fulfills this role.

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The IDT should discuss at the annual ISP who would be an appropriate choice to fulfill the role of the Healthcare Coordinator. If the person chosen feels that another team member would be more appropriate, there should also be discussion of this. The team should work to form consensus regarding who would be appropriate to fulfill the role, discuss what the function and requirements of the role are, and ask that person if they would be willing to complete those requirements. If the individual chosen by the team chooses to defer, an alternate should be chosen. In the case of a lack of team agreement, the following hierarchy shall determine who is responsible for fulfilling the role:

- Community Living Provider
- ➤ Private Duty Nursing Provider
- > Adult Habilitation Provider
- Community Access Provider
- Supported Employment Provider