COMPETENCY STANDARD 5: COMMUNITY COLLABORATION AND TEAMWORK

The qualified direct support professional (DSP) is competent in the area of “community collaboration and teamwork” as it relates to individuals with Intellectual or Developmental Disabilities and Mental Illness (IDD/MI).

OVERVIEW

A significant barrier to effective services for all people with IDD/MI is the segregation and separation of services. People with dual diagnosis often must seek benefits and interact with systems from distinct silos based on a single focus (i.e., DD or MI, aging, TBI, criminal justice, etc.). As a result, there is often an absence of cohesive planning and response to the person's actual needs. Professionals versed in mental health may have little understanding of the impact or needs of a person with intellectual disabilities. Professionals effective in supporting people with developmental disabilities may be stretched to meet the needs of a person with co-occurring disorders. In addition, there may be cultural, linguistic, and other social barriers to access and use of services.

The qualified DSP recognizes the need to advocate and collaborate across service silos and in the community in order to effectively support people with IDD/MI. The DSP recognizes their critical role in helping the person navigate these system issues. They recognize that the best approach starts from what the person wants and expects regarding life goals (person-centered). They are able to identify appropriate resources in the community. They are able to support the person in gathering and understanding information. They are able to help the person advocate as needed.

Collaboration is the vehicle for sharing responsibility and facilitating best practice. It supports the use of the combined knowledge, creativity, and experience of others. The goal of community collaboration and teamwork is building a more effective system for service recipients and greater awareness of the needs of individuals. Community collaboration is centered on improving access and availability of health and human services. The focus is improving the quality of life for service recipients and addressing barriers to services.

To meet these needs, the qualified DSP has good communication skills and the ability to work with others. The DSP must recognize cultural and system barriers and have skill at supporting self-advocacy. The DSP is committed to full participation of the person in the process. He/she encourages the person to use informal social networks (family, etc.) to help sort through information and support decision-making. They show leadership in the community to help support ongoing recognition of community needs in the area of IDD/MI.

AREAS OF KNOWLEDGE AND SKILL

The following areas of knowledge and skill have been identified as benchmarks for satisfying Competency Standard 5 - Community Collaboration and Teamwork.

Benchmark 5A Knowledge of Service Systems
Benchmark 5B Communication across Systems
Benchmark 5C Building Positive and Cooperative Relationships
BENCHMARK 5A: Knowledge of Service Systems

One objective of collaboration across systems is to improve the effectiveness of service delivery to individuals. The DSP supports effectiveness by working to harness the combined benefits of available support to meet the specific needs of individuals. The DSP has a basic awareness of options benefits available to people in their communities. This includes housing, transportation, employment support, case management, and education. It also includes other types of systems such as criminal justice diversion programs or community mental health clinic. The DSP is able to recognize when cultural issues may be barriers and reaches out to necessary communities in order to identify proper support for individuals. The DSP is able to effectively research additional options when needed.

Benchmark 5A Performance Indicators

In the area of “service systems” the qualified DSP:

1. Lists typical state and provincial systems and services available to individuals supported and how they must access them. (Including education, health care, DD/IDD services, mental health services, inpatient referral process, the justice system, foster care, youth services, community disability services, transportation and employment.)

2. Supports people in obtaining information as needed regarding services, benefits or community based resources.

3. Supports individuals in accessing state and provincial services.

4. Supports individuals in understanding conflicts between systems and sorting through information in order to decide how to approach these issues.

5. Describes and gives examples of common cultural barriers to service access and how he/she might overcome a barrier like this.

6. Recognizes when cultural, linguistic or other diversity issues that are not being met by services and takes steps to improve the situation.

7. Advocates for increased capacity for community to meet the needs of all citizens including citizens with IDD/MI.

Benchmark 5B: Communication Across Systems

Effective communication skills are essential for the qualified DSP. Each system has its own language and lens. Being able to recognize, organize, and share critical information is a key component to effectively working with others across systems. The DSP must also be able to listen to others and gain necessary information to help individuals understand what is available.
to them. Sharing current and accurate information will help in obtaining the most appropriate and effective supports.

5B Performance Indicators

In the area of “communication across systems” the qualified DSP:

1. Communicates individuals’ needs and concerns in simple and effective language.

2. Recognizes the focus of the particular system that is being engaged and adjust message to be most effective to obtaining what is needed by the individual.

3. Maintains good records and information in a simple format and uses this as a basis for sharing information about treatment history and current support needs of individuals.

4. Is sensitive to the policies and procedures of other professionals and works with them effectively on behalf of the individual supported.

5. Can convey complicated information sensitively to others who needs to know about an individual’s needs and supports, particularly during a behavioral or medical crisis.

6. Whenever possible, lets the person supported take a lead role in all communication providing support as necessary for accuracy and completeness.

Benchmark 5C Facilitating Positive and Cooperative Relationships

The qualified DSP recognizes that he or she is often the first point of contact with families and others across multiple systems. He/she is also a central member of the professional team. The DSP considers the effects of his or her behavior and statements in interactions with others. The DSP is effective in his or her role as the liaison between individuals and other professionals providing services. As the main point of contact, the DSP provides accurate and complete information. He/she communicates the needs of individuals and supports a collaborative approach to treatment.

5C Performance Indicators

In the area of “positive and cooperative relationships” the qualified DSP:

1. Shares recommendations between systems (e.g., psychiatrists and other health professionals, employment, residential settings) for maximum coordination of service and benefit to the person supported.

2. Reflects on their own work and communication style to improve effective collaboration within agency or across agency boundaries.

3. Builds positive and cooperative relationships with other health and mental health professionals.

4. Is perceived by others in each system as a collaborative, cooperative and reliable member of the team.
5. Recognizes and addresses barriers to services in a professional and effective manner.

6. Uses effective and welcoming communication and works in partnership with family members and friends of individual.

7. Recognizes members of the person’s informal support network (family, loved ones) as integral partners in support and gathers input from them as appropriate.

8. Effectively problem solves and communicates in a team setting for the benefit of the person supported.

**Benchmark 5D Promoting Person-Centered Support, Informed Consent and Advocacy**

Person-Centered care places the individual at center of his or her support plan. The qualified DSP recognizes that by their nature services are not person-centered. He/she also recognizes that people with IDD/MI are at high risk for having their rights overlooked or denied. The DSP takes an active role in supporting individuals in participating in decisions about their own treatment. The DSP focuses on flexibility and choice. He/she recognizes that efforts must be made to ensure people with IDD/MI understand and are consenting appropriately. He/she helps individual reach out to their systems of natural support in decision-making. He/she helps individuals develop self-awareness about their treatment needs and preferences. The DSP promotes inclusion and independence in communities of the person’s choice. He/she supports self-advocacy and participates in advocacy when needed.

**5D Performance Indicators**

In the area of “person-centered support” the qualified DSP:

1. Assists individuals in developing skills to be proactive in their own supports/treatment program.

2. Uses alternate methods of recognizing people’s preferences and choices in services and treatment when direct communication is not available. (For example, established method of PCP, observations, information from support network and social norms of peer group, etc.)

3. Recognizes and encourages opportunities to promote self-directed supports on a daily basis.

4. Describes the civil, legal, and service recipient rights people have.

5. Vigorously protect people’s rights by reviewing their rights with them and helping them advocate when rights are violated.

6. Assists individuals with understanding and evaluating treatment options and preferences so that it can be ensured they are making informed consent to services.

7. Works collaboratively with guardians, families or others upon whom the person relied to help protect their rights and organize services.
8. Helps people obtain needed support when they lack a guardian or others who can help them with expression of rights (paid advocates, legal aid, protection and advocacy systems, guardian ad litem, etc.)

9. Works across systems to build advances towards a more person-centered approach to service delivery.

10. Works to protect an individual’s confidentiality to promote privacy and respect while simultaneously ensuring information gets to the correct people as desired by person supported.