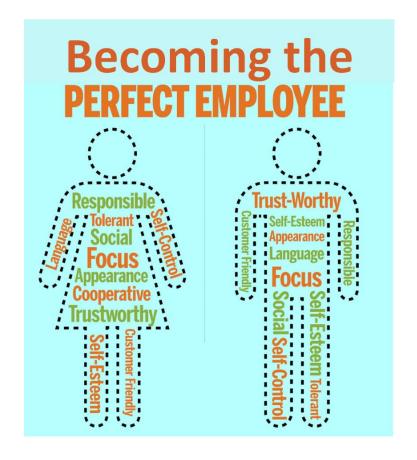
Community-Based Prevocational Services

Training Manual



Innovations in Employment Supports

Exercise—My First Jobs

- Write down in order every paid job you have held (on and off the books).
- Write down how old you were with your very first job.

Maybe put down these ages next to jobs 16 & 18

How/why did you get your first job?

When do you feel like you became an adult?

When do you feel like you discovered your passion?

What/who influenced some of the changes in jobs that occurred?

If you held more than one at a time, why? Are you where you thought you'd be at 16? 18? After college?

| 1. | |
|-----|--|
| 2. | |
| 3 | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |
| 11. | |
| 12. | |
| 13. | |
| 14. | |
| 15. | |



As a group, consider business expectations; brainstorm skills that support successful employment.

| Soft Skills/Hard Skil | ls [Not task specific] |
|-----------------------|------------------------|
| Ex. Follow directions | |
| | |
| | |
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| Community Pre-Vocational (Waiver Service) | Pathway to Employment (Waiver Service) | Employment Training Program (ETP) (Program) | Supported Employment (SEMP) (Waiver Service) |
|--|--|--|--|
| Prepares people for paid employment or meaningful activities | Creates a vocational plan and prepares people for paid work | Provides an opportunity time limited paid work experience after Discovery and targeted job development | Provides job coaching, job development and support on a job |
| 2 years or more | 1 year | 1 year or less | On-Going |
| Discovery, community work experiences, volunteer opportunities and career planning | Discovery, community work experiences, and develop a vocational goal | Discovery, job development, Intensive SEMP, and Internship/Work opportunity at a community business that agrees to hire the individual | Community-based, competitive, integrated employment |
| Unpaid/Volunteer work or 14C Paid Experiences | Unpaid/Volunteer Experiences or paid at minimum wage | Wages paid by OPWDD at Minimum Wage until business hires | Paid by business at Minimum Wage or higher |
| F | e Tools | The Tools in our Toolbox | XOC |

COMMUNITY-BASED PREVOCATIONAL SERVICES

CPV services provide learning and work experiences, including volunteer work, where the individual can develop general, **non-job-task -specific** strengths and skills that contribute to employability in paid employment in integrated community settings.

What are the Individual's Requirements for Participating in Community-BASED Prevocational Services?

- Require habilitative services including learning and work experiences, including volunteer experiences, where the individual can develop general, non-job-task specific strengths and skills that contribute to employability in paid employment in integrated community settings;
 AND EITHER
- Have documented and assessed earning capacity of less than 50 percent of the current state minimum wage, federal minimum wage, or prevailing wage; OR
- Be likely unable to retain competitive employment in the community without significant prevocational or job readiness services due to the nature of his or her developmental disability.

FLSA—Unpaid Work Experiences

Per Department of Labor, individuals with disabilities can spend a **limited number of hours** engaged in unpaid work experiences at a business for job exploration, assessment and training.

These experiences must meet all of the following criteria:

- 1. The individual participating in the situational assessment has a physical and/or cognitive disability that prevents them from obtaining competitive employment at or above the minimum wage immediately and the individual needs intensive ongoing support to succeed in employment.
- 2. Time spent at the place of business is for vocational exploration, assessment or training. It must be conducted under the general supervision of staff from a rehab organization.
- 3. Employment in the community must be a specific goal in the individual's plan of service specifying the need for exploration, assessment and training activities.
- 4. The individual's activities can't result in an immediate advantage to the business, examples include:
 - a) Individual can't displace regular employees
 - b) Individual can't fill a vacant position
 - c) Individual can't relieve regular employees of assigned duties
 - d) Individual can't perform duties that are a clear advantage to the business
 - e) Individual can't be under the supervision of the business instead of the rehab agency
 - f) Individual can't be engaged in activities that don't address the needs identified in the individual's service plan
 - g) The individual's service plan specifies a limit on the time spent at the business (the planning document needs to be specific regarding the intent of the person's time at the site in terms of duties and how long they spend there).
- 5. Per DOL, as a general rule, unpaid work experiences are permissible if the following hour limitations are not exceeded:
- Vocational explorations (Identifying types of jobs an individual may be interested in) 5 hours per job
 experienced
- Vocational assessments (Evaluating an individual's overall employment skills, interest and suitability for specific occupations)- 90 hours per job experienced
- Vocational training (Developing an individual's skills for a specific occupation)- 120 hours per job
 experienced

FLSA—Situational Assessment Criteria

- 6. The participating individual is not entitled to a job after the unpaid work experience is completed. However, if they are hired they can't be considered a trainee unless they are working in a different, clearly distinguishable occupation.
- 7. Upon request, documentation must be provided to DOL indicating that the **individual is enrolled in a community based placement program, that the enrollment is voluntary and that there is no expectation of payment.**

Considerations in Unpaid Work Experiences

There are a number of practical considerations in the use of unpaid job experiences under the DOL guidelines:

- 1. The use of unpaid work experiences must connect clearly with the goals and objectives of the individual's service plan. There should be a particular rationale why the specific activities at the that particular place of business are occurring and it should be documented in the service plan. Simply having an individual participate in a unpaid work experiences to "stay busy" or because it is a standard part of the "employment program" for everyone is not acceptable to DOL.
- 2. The planning document must state the specific intent and purpose of the individual's time at the employer site in terms of duties and number of hours that will be spent there.
- 3. If there are benefits to the business be explicit that these benefits are incidental and immaterial and ensure that all other requirements are fully complied with.
- 4. A type of work experience that raises DOL concerns is taking a group on an ongoing basis to a business to perform job duties for no pay, unless each individual's service plan specifically states how this unpaid work experience is connected to their employment goals and specifies the number of hours of the unpaid work experience. All other requirements of the guidelines must be complied with.

Volunteering, internships and unpaid job exploration can be effective strategies for individuals with disabilities to gain work-related experience, as well as assessments and training.

FLSA—Volunteering Overview

- Volunteering refers to unpaid activities with non-profit groups that are open to the public.
 - DOL "individuals may volunteer or donate their services for public service, religious or humanitarian objectives"
- Volunteering may be a step towards employment. It is a way of exploring interests, developing skills, gaining experience, building a resume and making connections that lead to future paid jobs.
- Volunteering should not be a long-term substitute for paid employment.
- Volunteer activities should be based on an individual's interests and preferences.
- General characteristics of a volunteer opportunity:
 - 1. The activity is generally part-time
 - 2. The activities are the kind typically associated with volunteer work rather than paid employment
 - 3. Services are offered freely and without pressure or coercion—i.e. the person is truly volunteering.
 - 4. Regular employees have not been displaced to accommodate the volunteer.
 - 5. The individual does not receive or expect to receive any benefit) beyond the experience itself).
 - Volunteers may receive reimbursement for expenses, discounts on services, refreshments, small gifts of appreciation.

Community Business and Organization Survey

Find an organization (a community center, senior center, school, library, etc.) that provides services to the community and speak to a staff member to help answer the following questions. Attach a business card of the person you spoke to or an organizational flyer/pamphlet.

| 1. Name / address of organization: |
|--|
| 2. Name of representative interviewed: |
| 3. Title of individual interviewed: |
| 4. Telephone / email of individual interviewed: |
| 5. Purpose of business / organization: |
| 6. History of / knowledge about partnering with community organizations: |
| 7. How will the assets and employability skills of the participants in CBPV be developed in this business /organization: |
| 8. Assets of business / organization: |
| 9. Does this business / organization need education and training on disability and/or what to expect? If so, what will this encompass? |
| 10. Possible vocational exposure activities: |
| |
| |
| |

Sampling— Great Informational Interview Questions to Choose From

- 1. What are the various jobs available in this field?
- 2. What types of training do companies offer those who enter this field?
- 3. In what ways is your occupation changing?
- 4. How is the economy affecting this industry?
- 5. What is the employment outlook like in your career field? How much demand is there for people in this career?
- 6. How quickly is the field growing?
- 7. What are the growth areas of this field?
- 8. Are you likely to have future job openings?
- 9. What is the typical entry-level salary in this field?
- 10. What do you find unique about your career field?
- 11. From everything you've observed, what problems can you cite regarding working in this career?
- 12. What skills or personal characteristics do you feel contribute most to success in this industry?
- 13. What sacrifices have you had to make to succeed in this field, and do you feel the sacrifices were worth it?
- 14. When people leave this career, what are the usual reasons?
- 15. What are the typical entry-level job titles and functions?
- 16. What entry-level jobs offer the best opportunities for learning?
- 17. What are the most significant characteristics of this industry?
- 18. What trends in the field would be most likely to affect someone just entering this career now?
- 19. What kinds of people experience the greatest success in this field?
- 20. What is the most important thing that someone planning to enter this career should know?
- 21. How did you get your job?
- 22. What jobs and experiences have led you to your present position?
- 23. What were the keys to your career advancement?

Access full document:

https://gsm.ucdavis.edu/sites/main/files/file-attachments/informational interviewing 200 questions.pdf

Build relationships in the community

COMMUNITY-BASED VOLUNTEER/WORK EXPERIENCES

Identify the Career Exploration Activity that will address the Discovery area below Assess a person's skills, abilities, and strengths in real work situations ☐ Allow the person to experience a variety of work environments, tasks, work expectations, and work-related social interactions Determine the person's interests and dislikes Identify barriers and long-term supports needed for employment success Identify the interpersonal and social skills needed specific to various work environments Allow the person to make informed decisions about employment interests, capabilities and goals Contribute to building comprehensive job match criteria for job development

CBPV—Transferable Skills Assessment Checklist

| 1. Not Applicable | Individual has not had an opportunity or been observed to attempt or complete skill |
|--|---|
| 2. Extensive Support | ** * * |
| 3. Moderate Support | Individual requires frequent assistance (verbal, physical, visual prompts) and periodic supervision to complete task |
| 4. Minimal Support | Individual requires occasional assistance (verbal, physical, visual prompts) and intermittent supervision to complete task |
| 5. Independent | Individual completes task without assistance/supervision |
| | - |
| Career Development: abilities relating to fu | Knowledgeable about the world of work, career options, personal skills, aptitudes, and ture career decisions. |
| | |
| abilities relating to fu Level of | ture career decisions. |
| abilities relating to fu Level of | ture career decisions. Skills/Ability |
| abilities relating to fu Level of | Skills/Ability Exhibits and/or expresses specific interests |
| abilities relating to fu Level of | Skills/Ability Exhibits and/or expresses specific interests Demonstrates abilities related to specific interests |
| abilities relating to fu Level of | Skills/Ability Exhibits and/or expresses specific interests Demonstrates abilities related to specific interests Identifies skills needed for employment success |

| Integrated Learning: | Application of academic knowledge and skills to CBPV experiences |
|-----------------------------|--|
| Level of Independence | Skills/Ability |
| | Uses basic academic skills in community/work-based learning experiences (e.g. applies math skills to purchase items, alphabetizing skills to sort or file) |
| | Demonstrates newly acquired skills in a variety of settings |
| Comments: | |

| Level of Independence | Skills/Ability |
|-----------------------|---|
| | Reading: Identifies and understands texts and symbols (e.g., stop, exit, and restroom signs) |
| | Reading: Identifies vocabulary associated with various jobs (e.g., matches tools to words) |
| | Writing: Creates pictures, symbols and objects and writes words and sentences to communicate information |
| | Listening: Follows one step directions to complete a given task |
| | Listening: Follows two or more step directions to complete a given task |
| | Speaking: Uses language to interact with other (e.g., expresses needs, demonstrates understanding, and interacts socially with others). May include augmentative communication, as appropriate |
| | Math: Demonstrates basic math skills, including counting with one-to-one correspondence, matching similar objects, and understanding concepts of quantity (e.g., more, less, etc.) |
| | Functional Math : Applies basic math skills to daily living (e.g., tells time, manages money needed for work setting) |
| omments: | |

| Thinking Skills: Abi | ility to use ideas and information to make decisions and solve problems |
|--------------------------|---|
| Level of Independence | Skills/Ability |
| | Recognizes that there is a problem and requests assistance |
| | Solves routine problems in daily life (e.g., indicates choice from menu of items, dresses for the weather) |
| | Solves lesser common problems, such as contacting emergency services (e.g., dial 911) |
| | Demonstrates understanding of cause and effect (e.g., hot stove will cause burn, consequences of inappropriate workplace actions) |
| | Uses similar skills across a variety of settings (e.g., identifies building exits in different settings) |
| Comments: | |

| Managing Information | on: Ability to access and use information |
|-----------------------|---|
| Level of Independence | Skills/Ability |
| | Uses information to make simple decisions (e.g., responds to safety alarms, follows traffic safety rules) |
| | Access information from a variety of sources (e.g., internet, advertisements, orders from menu) |
| Comments: | |

| Level of Independence | Skills/Ability |
|-----------------------|--|
| | Selects the appropriate resources to complete a task |
| | Initiates tasks |
| | Remains on task |
| | Completes tasks within existing time limits |
| | Manages work experience task (e.g., gathers materials, knows when to replace broken or soiled items, restocks depleted items |
| omments: | • |

| Level of Independence | Skills/Ability |
|--------------------------|--|
| | Navigates the community (e.g., walking, public transportation) |
| | Demonstrates understanding of who to ask for help |
| | Uses appropriate health and safety practices |
| | Follows daily schedule and routines |
| | Adapts to new situations |
| | Understands and follows rules |
| Comments: | |

| Level of Independence | Skills/Ability |
|--------------------------|---|
| | Communicates preferences and needs |
| | Self-regulates during transitions (e.g., waits appropriately, engages in appropriate self-soothing activity in stressful situations |
| | Transition appropriately between activities |
| | Manages health (e.g., makes personal and health needs known) |
| | Performs personal care skills |
| | Uses unstructured time appropriately |
| Comments: | |

| Level of Independence | Skills/Ability | | | |
|-----------------------|---|--|--|--|
| | Asks for help when faced with difficult situations and individuals | | | |
| | Self-advocates (e.g., seeks out and uses supports and accommodations) | | | |
| | Accepts direction from authority figures | | | |
| | Works independently | | | |
| | Works as part of a team | | | |
| | Respects the space and property of others | | | |
| | Demonstrates appropriate behavior across settings | | | |
| | Interacts appropriately with peers and others | | | |
| | Participates in leisure/recreation activies | | | |
| omments: | · · · · · · · · · · · · · · · · · · · | | | |

| <u>Technology</u> : Ability to use different types of technology and resources to satisfy personal and societal needs an wants | | | | | |
|--|--|--|--|--|--|
| Level of Independence | Skills/Ability | | | | |
| | Identifies the correct tool/technology necessary to complete a given task | | | | |
| | Uses basic tools safely and appropriately (e.g., microwave, eating utensils, mobile phones, assistive technology | | | | |
| Comments: | | | | | |

| | | | developing and negotiating potential community and employment experiences community and employment or other members of the individuals circle of support | - | | - - | Ī | lite |
|-----------------------------------|---------------------------|--------------------------|--|---|---|---|---------------------|------------|
| Year: | | | documenting the delivery of prevocational services | 1 | | - | | |
| Month | ö | | developing the individuals service delivery plan and related documents | 1 | | | | Initials |
| lendar | dicaid II | | assisting the individual to experience a variety of employment options within the community | | | | | |
| Services for Calendar Month/Year: | Individual's Medicaid ID: | | providing instruction in the use of technology that can assist in developing job skills and meeting workplace expectations | | | | | |
| Servic | Individ | | gninnelq affened ni notzunteni gnibivorq | | | | | |
| | | | assessing the individual to determine his or her work interests, productivity and skills | | | | | |
| | | | providing instruction in the appropriate use of job-related facilities | | | | | |
| | | | eeitivitse neewted noitetrodenest gnibivotd | | |] | | |
| | | | gninist levest gnibivosq | | | | | |
| | | | doį dtiw leubivibni edt gnizisilimet stnemeriuper eonemrotieg bne noitouborg | | | | | |
| | | vices: | ersisting the individual with adjusting to the spirit asset of the workplace | | | | Į. | аше |
| | | of Se | helping the individual to acquire appropriate attitudes and work habits | | | | Staff Signature Lag | Print Name |
| | | Description of Services: | training the individual to follow directions, aftend to task, multi-task, complete tasks, problem solve, work safely, increase productivity, adapt to work routines, and arrive and arrive and arrive and arrive and arrive | | | | Ste | |
| | | | Total Number of Services Provided(At lead on Habilitation Plan Hand of the Service from Habilitation) | | | | | |
| | | | Total Duration per Session | | | | | |
| 4 | | | Time Stop |] <u>.,</u> | ļ., |],, | | |
| | | | Time Start | ervices | ervices | ervices | | |
| | | | Date Services Docurmented | ponse to | ponse to | ponse to | | |
| | | | Services were provided to I-individual or G-group (2) or G | and/or Res | andlor Res | andfor Res | | |
| je: | Name: | | Staff Initials by Person Delivering Services | (OPTIONAL) Purpose and/or Response to Services: | (OPTIONAL) Purpose and/or Response to Services: | (OPTIONAL) Purpose and/or Response to Services: | | |
| Agency Name: | Individual's Name: | | Date Services | TIONAL | TIONAL | TIONAL | | Signature |

| INDIVIDUAL'S NAME: | TABS ID: | MEDICAID #: |
|--|---|--------------------------------------|
| Summarize the Community Based | Based Prevocational Services provided this month, as follows. | s month, as follows. |
| Summarize the implementation of the individual's Community Based Prevocational Habilitation Plan. | | |
| Describe whether the individual participated in paid work and/or unpaid activities. | | |
| Describe the individuals prevocational progress. | | |
| Describe some of the staff actions to address prevocational challenges. | | |
| Describe the individual's response to services. | | |
| Describe any issues or concerns pertaining to prevocational services. | | |
| The narrative monthly summary note must be completed, signed, and dated no later than the 30th day after the month of service. | pleted, signed, and dated no later than the | 30th day after the month of service. |
| SIGNATURE OF STAFF PERSON WRITING THE NOTE (required) | тиге | DATE (mth/dy/yr) |
| SIGNATURE OF STAFF PERSON REVIEWING THE NOTE | TITLE | DATE (mth/dy/yr) 8/8/2018 |

BILLING STANDARDS

Billing allowed for staff travel time

Travel may be with or without the individual May be individual or group

Billing allowed for Innovations training

Travel may be included Billed to group

Multiple staff cannot bill for the same individual at the same time

COMMUNITY-BASED PREVOCATIONAL (HOURLY) EFFECTIVE APRIL 1, 2018

(6.5% Direct Support Compensation and 3.25% Clinical Compensation Increase)

| REGION | INDIVIDUAL SERVING 1 | GROUP SERVING 2 | GROUP SERVING 3+ |
|--------|----------------------|-----------------|------------------|
| 1 | \$44.22 | \$27.64 | \$22.11 |
| 2 | \$46.68 | \$29.18 | \$23.34 |
| 3 | \$45.61 | \$28.51 | \$22.81 |

COMMUNITY-BASED PREVOCATIONAL CONVERTED TO QUARTER HOUR

| REGION | INDIVIDUAL SERVING 1 | GROUP SERVING 2 | GROUP SERVING 3+ |
|--------|----------------------|-----------------|------------------|
| 1 | \$11.05 | \$6.91 | \$5.53 |
| 2 | \$11.67 | \$7.29 | \$5.84 |
| 3 | \$11.40 | \$7.13 | \$5.70 |

https://www.health.ny.gov/health care/medicaid/rates/mental hygiene/2018-04-01 comm prevoc.htm

Request to provide Prevocational Services in a group of more than eight:

https://opwdd.ny.gov/opwdd regulations guidance/adm memoranda/documents/sifl/request eight

| Region 1 | |
|----------------------------------|---|
| Five boroughs of NYC | Region 2 |
| Region 3 All remaining counties | Nassau, Suffolk, Putnam, Rockland, Westchester counties |

Community-Based Prevocational services may be provided directly to an individual or on his or her behalf. These services may include, but are not limited to:

| 1. | training the individual to follow directions, attend to task, multi-task, complete tasks, problem solve, work safely, increase productivity, adapt to work routines, and carry out assigned duties in an effective manner; |
|-----|--|
| 2. | helping the individual to acquire appropriate attitudes and work habits, including instruction in socially appropriate behaviors on and off the job site; |
| 3. | assisting the individual with adjusting to the demands of the workplace including stress management techniques; |
| 4. | familiarizing the individual with job production and performance requirements, such as training the individual to follow directions; |
| 5. | providing travel training, including the use of public and para-transit systems; |
| 6. | instructing the individual to adhere to generally accepted workplace policies, conduct and dress; |
| 7. | instructing the individual to communicate effectively with supervisors, coworkers and customers; |
| 8. | instructing the individual on topics related to mobility about the appropriate use of job-related facilities, such as lounge areas, lunch rooms/cafeterias; and rest rooms; |
| 9. | instructing the individual, family, advocates, and support staff about benefits, planning, education, and counseling pertaining to benefits management and employment; |
| 10. | instructing the individual about the use of technology that can assist in developing job/volunteer skills and meeting workplace expectations; |

| 11. | providing instruction in the appropriate use of job-related facilities (e.g., lounge areas, lunch rooms/cafeterias, and rest rooms); |
|-----|--|
| 12. | assessing the individual to determine his or her work interests, productivity and skills; |
| 13. | instructing the individual about the use of technology that can assist in developing job/volunteer skills and meeting workplace expectations; |
| 14. | assisting the individual to experience a variety of employment and/or volunteer options within the community; |
| 15. | documenting and supporting the delivery of Community Based Prevocational services. Examples include habilitation plans/staff action plans, service documentation, monthly summaries, annual assessments, and other documentation directly related to the delivery of community based prevocational services, as required by OPWDD; |
| 16. | transporting individuals between activities; |
| 17. | assisting an individual with obtaining and participating in Community Based Prevocational experiences; |
| 18. | developing and negotiating potential community and employment experiences on behalf of the individual; |
| 19. | assisting an individual with obtaining and participating in Community Based Prevocational experiences; (repeat) |
| 20. | communicating with family or other members of the individual's circle of support to discuss and address issues related to Community Based Prevocational activities, and preparing the individual for prevocational activities; |
| 21. | staff travel time to allowable Community Based Prevocational services activities while the staff is being paid for work hours by the provider; |
| 22. | staff time to attend OPWDD Innovations Training; and |
| 23. | other services, as previously authorized by OPWDD. |

| Work Readiness Preparation Resources | | | | | |
|--|---|--|--|--|--|
| https://careerwise.minnstate.edu/careers/clusters.html | Career and job exploration tools. <u>Videos</u> of different careers with identified requirements and skills. No account needed. Career and job exploration tools. <u>Videos</u> of different ca- | | | | |
| https://www.careertrekbc.ca/ | reers with identified requirements and skills. No account needed. | | | | |
| https://www.jobzone.ny.gov/ | Target group – Adult job seeker. Need to register and create an account | | | | |
| https://www.onetonline.org/ | O*NET OnLine has detailed descriptions of the world of work for use by job seekers, workforce development and HR professionals, students, researchers, and more! | | | | |
| https://www.16personalities.com/ | Online assessment to determine the dominant personality factors an individual might hold. | | | | |
| http://parenttoparentnys.org/ | Parent to Parent of New York State builds a supportive network of families to reduce isolation and empower those who care for people with developmental disabilities or special healthcare needs to navigate and influence service systems and make informed decisions. Provides information and training for families. Excellent resource for family engagement. | | | | |
| https://www.dol.gov/odep/documents/ TeachingSoftSkills.pdf | Teaching soft skills through workplace simulations in classroom settings | | | | |
| https://www.lwsd.org/uploaded/Website/ Get Involved/ MTSS/Best Practices in Social Emotional Learning Hanover Report.pdf | Manual – Best Practices in Social-Emotional Learning | | | | |
| https://www.heath.gwu.edu/sites/g/files/ zaxdzs2346/f/downloads/ the 411 on disability disclosure for adults .pdf | The 411 on Disability Disclosure. Excellent resource to teach self-advocacy skills. | | | | |

Work Readiness Preparation Resources

| https://1drv.ms/b/s! AvUzndtkEoSy9HEYNXLPxKLXb AF? e=ooJ4nH | A Toolkit of motivational Skills. Encouraging and supporting change. Guide to the motivational approach for any professional who needs to help others to change. |
|---|--|
| https://lohp.berkeley.edu/wp-content/ uploads/2017/09/SSAW 24nr 2016- 159.pdf | Staying Safe at Work: A curriculum for Teaching Workers with Intellectual and Developmental Disabilities about Health and Safety on the job |
| https://www.dol.gov/odep/topics/youth/softskills/softskills.pdf | Skills to Pay the Bills: Mastering Soft Skills for Work- place Success (curriculum) |
| https://opwdd.ny.gov/ opwdd_regulations_guidance/ adm_memoranda/documents/sifl/ request_eight | The approval form for providing site based or community based prevocational services to a group of more than 8 or more than one group |



PREVOCATIONAL SERVICES ANNUAL ASSESSMENT

(Fillable Form)

Assessments are important in determining whether an individual has a continued need for Site Based or Community Based Prevocational Services.

Purpose:

A provider must conduct an annual assessment to determine whether Prevocational Services continue to meet the individual's vocational needs. **This assessment MUST be conducted in a community based setting.** For site based prevocational enrollments, the assessment site MUST be in a different location than where the person regularly receives the site based prevocational services.

Annual Assessment Calendar Year:

| | 2019 | 2020 | 2021 |
|----------------------------------|------|---------|---------------|
| Name of Individual | | | Tabs ID # |
| Provider Agency | | | Provider ID # |
| DDRO: | | | |
| Enrollment Date for: Site Based: | | Program | Code: |
| Community Based: | | Program | Code: |

An Initiative of the Office for People With Developmental Disabilities

| Other OPWDD day se | rvices the individua | al receives. F | Please check off all | that apply: | |
|----------------------------------|----------------------|-----------------|----------------------|-------------------|-------------------|
| Day Habili | itation | Day Habili | tation w/out Walls | Commu | nity Habilitation |
| | Supported Emplo | yment | Pa | thway to Emplo | pyment |
| Community Prevocational Services | | Site E | Based Prevocat | ional Services | |
| Has this individual be | en informed of oth | er available s | services? | Yes | No |
| Date of latest Individu | ialized Service Plar | ı (ISP) or Life | eplan: | | |
| Care Manager: | | | | | |
| Name | | | Email Address | | |
| | | | | | |
| Care Coordination Or | ganization (CCO) N | ame: | | | |
| | | | | | |
| List three (3) Vocation | nal Tasks and/or Sk | ills the indiv | ridual has worked o | on in the last ye | ar: |
| 1. | | | | | |
| | | | | | |
| 2. | | | | | |
| | | | | | |
| | | | | | |
| 3. | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Volunteer/Community Situational Assessment (Prevocational Annual Assessment)

| 1. | Business/Organization Name/Site: | |
|---------|---|------------------|
| • | Description (Our extension (Otto Antalas es | |
| 2. | Business/Organization/Site Address: | |
| 2 | Date(s) of Assessment: | |
| Э. | Date(5) of Assessment. | |
| 4. | Length of Assessment (number of hours): | |
| 4. | Length of Assessment (number of nours). | |
| Additio | onal Assessment site information (if multiple s | ites were used): |
| | | |
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| | | |
| | | |
| Tasks | Performed: | |
| 1. | | |
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| 2. | | |
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| 3. | | |
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| 4. | | |
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| coworkers: | |
|---|----|
| General Public: | |
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| | |
| | |
| | |
| <u>Customers:</u> | |
| Oustomers. | |
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| | |
| Coworkers: | |
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| | |
| List three positive behaviors/skills observed during this situational assessment that could be transferable | to |
| List three positive behaviors/skills observed during this situational assessment that could be transferable competitive employment: | to |
| List three positive behaviors/skills observed during this situational assessment that could be transferable competitive employment: 1. | to |
| competitive employment: | to |
| 1. | to |
| competitive employment: | to |
| 1. | to |
| 1. 2. | to |

Describe the interactions observed during this situational assessment with the general public, customers, and

| obtain or maintain competitive employment: | impact the mai | vidual S ability to |
|--|----------------|---------------------|
| 1. | | |
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| 2. | | |
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| 3. | | |
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| | | |
| Did the individual enjoy the volunteer/community activities? Yes | No | |
| | ., | |
| Nould the individual benefit from additional volunteer/community activities? | Yes | No |
| | | |
| If yes, describe what actions will be taken to offer additional opportunities. | | |
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| If no, explain why not? | | |
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| | not a full Career/Vocational Plan | | |
|---|---|---------------|-----|
| f yes, have you considered: E | Employment Training Program (ETP) | Yes | No |
| s | upported Employment (SEMP) | Yes | No |
| F | Pathway to Employment (PTE) | Yes | No |
| Describe what actions will be | e taken. | | |
| | | | |
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| | | | |
| | | | |
| f no, have you considered: E | mployment Training Program (ETP) | Yes | No |
| Р | athway to Employment (PTE) | Yes | No |
| Describe what actions will be | takan | | |
| Jescride what actions will be | taken. | | |
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| i the decision was made NOT | to pursue ETP, SEMP and/or PTE descr | ibe the speci | fic |
| the decision was made NOT | alivered through prevocational services | | |
| ctions/supports that will be de | chivered through prevocational services | | |
| ctions/supports that will be do List at least 3) | | | |
| ctions/supports that will be de | | | |
| ctions/supports that will be do List at least 3) | envered unough prevocational services | | |
| ctions/supports that will be do List at least 3) | | | |
| ctions/supports that will be do List at least 3) 1. | chvered through prevocational 3ct vices | | |
| ctions/supports that will be do List at least 3) | envered unough prevocational services | | |
| ctions/supports that will be do List at least 3) 1. | chivered through prevocational services | | |
| ctions/supports that will be do List at least 3) 1. | | | |
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| ctions/supports that will be do List at least 3) 1. | | | |
| ctions/supports that will be do List at least 3) 1. | | | |

| Provide any other information that would demonstr based or community based prevocational services. | rate the individual's need for continued enrollment in site |
|--|--|
| | |
| Completed By (Printed Name) | Title |
| | |
| Email address | Date Completed |
| | |
| Director/Manager/Super | completed by the Provider Agency visor of Prevocational Services. |
| of the assessment as well as th | nal Assessment and agree with the content re recommended actions. |
| Reviewer/Approver (Printed Name) | Title |
| | |
| Email address | Date Reviewed/Approved |
| | |
| | |
| find attached directions or go | the assessment into CHOICES. Please to the OPWDD CHOICES webpage |
| nttps://opwdd.ny.g | gov/opwdd login/choices |

<u>Uploading Prevocational Services Annual Assessments in CHOICES</u>

Document Naming Convention:

LastName_FirstName_TABSID_YYYY_MM_DD_DocumentName

Example: Consumer_Jon_12345_2012_09_01_CBPV_Annual_Assessment (use the date the assessment was completed as listed on the form)

In the CHOICES choose the following commands:

- **⇒** Workplace
- **⇒** Individual
- **⇒** Supporting Documents
- **⇒** Create



CLOSED ACTIVITIES

TABS INQUIRIES

⇒ New
Example: New | Dedit | New | FAQ

SUPPORTING DOCUMENTS

⇒ Upload File



⇒ Add Additional Information About Document Uploaded

ACTIVITIES

- ⇒ Document Class = Assessment (drop down list)
- ⇒ Type = Vocational Assessment (drop down list)
- ⇒ Subtype = Community Based Prevoc or Site Based Prevoc (drop down list)
- **⇒** Save or Save and Close



If you need further assistance, go to the OPWDD CHOICES webpage,

https://opwdd.ny.gov/opwdd login/choices.