

Center of Excellence for Behavioral Health

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# Iowa IPS Documentation Training

June 22, 2023

# PLEASE READ - IMPORTANT

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This PowerPoint has been modified from the original PowerPoint shared at the IPS Documentation Training On June 22<sup>nd</sup> 2023.

It has been modified because additional documentation changes Have been implemented since the training; This presentation includes those changes.

# Objectives

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## Milestones

Participants will become familiar with Iowa's IPS milestone funding structure and understand how and when employment milestones are achieved

## Documentation

Participants will gain knowledge and understanding on required IPS milestone & IPS fidelity documents and successfully complete them.

# Getting to Know YOU

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## **Name/Role**

Introduce yourself to the group.



## **Agency**

Where do you currently work?



## **Dream Job**

Tell us your dream job!

# IPS Milestone Documentation

2023-2024 Service Funding Structure for approved IPS Sites via IVRS and Medicaid Habilitation			
Outcome Description	Outcome Reimbursement		Providers' Supporting Documentation
#1. Completed Employment Plan	IVRS \$1404.88	Medicaid \$1404.63	<ul style="list-style-type: none"> <li>Career Profile</li> <li>IA IPS Job Search Plan</li> </ul>
#2. 1 <sup>st</sup> Day Successful Job Placement	\$2142.00	\$2141.64	<ul style="list-style-type: none"> <li>IA IPS Milestone Progress Report (MPR)</li> <li>Job Development Log</li> <li>Job Development Monthly Report</li> <li>Job Start Form</li> </ul>
#3. 45 Days Successful Job Retention	\$2142.00	\$2141.64	<ul style="list-style-type: none"> <li>Updated IA IPS MPR</li> <li>Job Analysis Form</li> </ul>
#4. 90 Days Successful Job Stabilization	\$780.16	\$779.57	<ul style="list-style-type: none"> <li>Updated IA IPS MPR</li> <li>Time-Unlimited Support Form</li> <li>Job Support Plan</li> </ul>
Per IVRS job candidate \$6469.04		Per Medicaid member \$6467.48	

# Required Documents

## Required for IPS Fidelity:

- Career Profile
- Disclosure Worksheet
- Job Search Plan
- Job Development Logs
- Job Start Form
- Job Support Plan
- Job End Form

## Required for Iowa IPS Milestones:

- Career Profile (\*1)
- Job Search Plan (\*1)
- IA IPS Milestone Progress Report (\*2, \*3, \*4)
- Job Development Log (\*2)
- Job Development Monthly Report (\*2)
- Job Start Form (\*2)
- Job Analysis Report (\*3)
- Time-Unlimited Support Report (formerly called "Employment Training Plan" (\*4)
- Job Support Plan (\*4)

*\* Denotes Milestone #*

# Forms Links

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- [Iowa Vocational Rehabilitation Services | Iowa Vocational Rehabilitation Services \(https://ivrs.iowa.gov\)](https://ivrs.iowa.gov)
  - For Our Partners
  - Community Rehabilitation Programs (CRPs)
  - CRP Menu of Services
  - find Individual Placement and Support and click the +
    - Forms will be updated by 7/10/2023

# Forms Links

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- [Center of Excellence for Behavioral Health \(CEBH\) \(iowacebh.org\)](http://iowacebh.org)
  - Practices of Focus
  - Individual Placement and Support
  - Resources
  - More IPS Resources
    - Forms will be updated by 7/10/2023



# The Career Profile

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- 3 approved formats for the Career Profile
- An important step to a successful outcome
- Memorize key questions
- Have a conversation
- Add info you already know
- Get input from VR, behavioral health team, natural supports
- Update with new information like preferences, employment, education
- Completed in first couple weeks

# The Career Profile is a Living Document

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- ***A framework for gathering information and getting to know a person***
- Helps explore passions, interests and strengths
- Documents work incentives planning
- Documents disclosure preferences
- Identifies natural supports
- Captures the employment history
- Reflects the integration between the team
- Foundation for individualized job search and follow-along plans
- Facilitates brainstorming ideas in supervision

# Getting Started

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- BEGIN BY:
  - Listening
  - Learning
  - Building trust

**NOT** focusing on the paperwork; Be ***hospitable!***



# Gathering Information

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- Be OK not knowing everything at once
- Use existing info
- Ask team members
- Explain why you're asking the questions
- Ask open ended questions
- Build profile over several meetings
- Incorporate into clinical file

# Disclosure Worksheet (not required for milestones)

- Reviews common “pros & cons” of disclosing mental illness to employers
- Allows worker to create their own pros/cons of disclosure
- Gives worker choice RE: ES contacting employers on their behalf
- Discusses what worker **does** and **doesn't want** shared with employers
- Shows a robust conversation about disclosure is being had

# IA IPS Job Search Plan

- Preferences
- Disclosure
- Job Development Plan
- Employment Goal

## IA IPS Job Search Plan

Job Seeker: [redacted]

Date: [redacted]

1.) Job Preferences *(individualized; list in order of most to least important; can include type of work, pay, schedule, environment, working alone or with others, type of day, repetitive/varied duties, fast/slow paced or other factors):*

1. [redacted]
2. [redacted]
3. [redacted]
4. [redacted]
5. [redacted]

2.) Do you want your Employment Specialist to gather information about jobs on your behalf and advocate to employers (disclosure)? Yes  No

If yes, Employment Specialist will visit how many businesses per month on behalf of client? [redacted]

3.) Do you want to apply for jobs together with your Employment Specialist? Yes  No

If yes, how often will they meet to do this each month? [redacted]

4.) Will you work on finding jobs on your own, outside of appointments with your Employment Specialist? Yes  No

If so, where, when, and how (help job seeker make structured plan for job search)? [redacted]

5.) What businesses will the IPS Specialist and/or job seeker approach? (Put preferred jobs at top)

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

6.) What is your overall employment goal? What are you hoping for as far as work is concerned and what would you like to gain from getting a job? (Use client's own words) [redacted]

# Page 2, IA Job Search Plan

- Client Strengths
  - Self identified
  - Identified by clinical team and other supporters
- Action Plan
  - Objectives
  - Who's responsible?
  - How often?
  - By when?

7.) What are your strengths related to your employment goal that will help you to achieve your goal?

8.) What are strengths the Employment Specialist or other supports (family member(s), VR counselor, case worker, therapist, psychiatrist, teacher, etc.) identify?

Below, create a plan of action and steps to take to achieve client's employment goal (*ideas such as making list of employers, learning how to fill out job application, interview practice, gathering references, learning about job requirements, visiting employers, etc.*):

Objectives:	Persons Responsible:	Frequency:	Target Date:
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			

\_\_\_\_\_  
 Client Signature Date

\_\_\_\_\_  
 Employment Specialist Signature Date

# IA IPS Milestone Progress Report

**IA IPS Milestone Update Report**

Job Seeker:

FUNDER:

HAB:  IHH Care Coordinator:

IVRS:  VR Counselor:  IPE Completed or Amended: Yes:  Date:  No:

REGION:  OTHER/AWAITING FUNDER:

Employment Specialist:

EMPLOYMENT GOAL (in client's own words):

MILESTONE:  #1 (Career Exploration)  #2 (JD1)  #3 (JD2)  #4 (Job Coaching)

**EMPLOYMENT INFORMATION**

Start Date:

Employer:

Job Title:

Supervisor:

Wages:

Hours:

Job Duties:

Transportation:

Union position: Yes:  No:

Disclosure: Yes (signed release):  No (does not want employer contacted):

**UPDATES/CHANGES**

Vocational/Educational Goal:

Career Planning & Preferences:

Job Development:

Disclosure Plan:

Job Support Plan:

Referrals Needed/Made to Other Providers:

Service Coordination with MH Team:

Mental Health Symptom Update:

Benefits Planning Update:

**PROGRESS**

(Complete brief summary of client's successes and any at work, issues or needs, including any feedback from employer, ES, or other clinicians for each milestone achieved; include client quotes whenever possible):

Milestone #1:

Milestone #2:

Milestone #3:

Milestone #4:

\_\_\_\_\_  
Employment Specialist Signature

\_\_\_\_\_  
Date

**• Living Document**



# Milestone #1 – “Career Exploration”

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- **ACHIEVED WHEN:**
- Employment planning is complete
  - Required documentation:
    - Career Profile
    - IA Job Search Plan

# And then - Repeat and Continue:

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**Building Trust**



**Gathering  
Information**



**Expanding  
Employer  
Relationships**



**Refining the  
Job Search**

# Until a Job is Obtained. Whoopee!

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# Update Milestone Progress Report

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- Review information
- Update any changes in preferences on the career profile
- Revisit disclosure and benefits planning
- Track milestone progress
- Add employer information
- Include brief summary of progress, needs, or assistance provided since last milestone

# Job Development Monthly Report Form

- Individualized for each worker
- Form on VR website
- Attains pre-employment needs & services provided
- Targets specific employers to pursue
- Identifies employment barriers
- Captures employer & ES feedback RE: business contacts
- Next steps

**Job Development Monthly Report Form**

Job Candidate Name: \_\_\_\_\_

Service: Job Development  
 CRP Staff: \_\_\_\_\_  
 Month: \_\_\_\_\_

1. Services Provided

Completed Application (list businesses below)

Application Follow-Up

Interview Skills

Interview

Mock Interview

Assistive Technology

Career Counseling

Employment Preparation/Training

Resume building

Employer Development

Disability Awareness Training

Plan for Natural Supports

Hiring Event

Reasonable Accommodation(s) \_\_\_\_\_

Other \_\_\_\_\_

2. Employers contacted

Business Name	Phone	In-Person	Interview
_____	<input type="checkbox"/> Phone	<input type="checkbox"/> In-person	<input type="checkbox"/> Interview
_____	<input type="checkbox"/> Phone	<input type="checkbox"/> In-person	<input type="checkbox"/> Interview
_____	<input type="checkbox"/> Phone	<input type="checkbox"/> In-person	<input type="checkbox"/> Interview
_____	<input type="checkbox"/> Phone	<input type="checkbox"/> In-person	<input type="checkbox"/> Interview
_____	<input type="checkbox"/> Phone	<input type="checkbox"/> In-person	<input type="checkbox"/> Interview

3. A description of any newly identified barriers to successful employment:  
 \_\_\_\_\_

4. Feedback from Employers/Businesses contacted:  
 \_\_\_\_\_

5. CRP Comments/Next Steps:  
 \_\_\_\_\_

If Employment is obtained, complete the following to submit to IVRS with a finalized Job Analysis Form.

Business name	Address	Position	Hours per week	Wage/hr	Start Date
_____	_____	_____	_____	_____	_____

Service provided: Job Development  
 Date(s) of service and hours worked each date: \_\_\_\_\_  
 Total number of hours worked: \_\_\_\_\_  
 CRP Signature: \_\_\_\_\_

**CRP staff submit this form to IVRS with any narrative needed to document the provision of this service.**

# Job Development Log

- Documents 6 weekly face-to-face employer contacts
- Records next steps
- Helps ES remember information attained RE: jobs/employers
- Also submitted w/Milestone 2

**Job Development Log**

Job Candidate: \_\_\_\_\_

Date	Business name/Address	Contact person	Results	Next Steps

CRP REPRESENTATIVE: \_\_\_\_\_ DATE \_\_\_\_\_

# IA IPS Job Start Form

- Formerly called “Placement Report”
- Gathers information about job w/worker

IPS Job Start Form

Client Name: [REDACTED]	Employer: [REDACTED]
Client Address: [REDACTED]	Employer Address: [REDACTED]
City/State/Zip: [REDACTED]	Employer Phone Number: [REDACTED]
Phone Number: [REDACTED]	Supervisor: [REDACTED]
Social Security Number: [REDACTED]	Employment Start Date: [REDACTED]
IVRS Counselor: [REDACTED]	Position Title: [REDACTED]
IPS Employment Specialist: [REDACTED]	Hours Per Week: [REDACTED]
IHH Care Coordinator: [REDACTED]	Work Schedule: [REDACTED]
Therapist/Case Manager/Provider/Etc: [REDACTED]	Current Pay Rate: [REDACTED]
Funding Source: (Mark all that apply) <input type="checkbox"/> HAB <input type="checkbox"/> Region <input type="checkbox"/> IVRS <input type="checkbox"/> Awaiting Funder <input type="checkbox"/> Other: [REDACTED]	Union Position? [REDACTED]
	Job Tasks: [REDACTED]
	Fringe Benefits: [REDACTED]

Services/Forms -Revised 6/27/2023

Client Name: \_\_\_\_\_ Member ID#: \_\_\_\_\_ DOB: \_\_\_\_\_

# IA IPS Job Start Form

- Gathers feelings about the job
- Update benefits planning information
- Update disclosure preferences

Dress Code:   
Work Transportation:   
Does client want or need on the job coaching? If so, what is the plan?   
Does client feel this is the right job for them?   
Why or why not?

**Benefits Planning:**

List benefits & entitlements (SSI, SSDI, SNAP, Medicaid, Housing Subsidies, Veteran's Benefits, Retirement from previous job, etc.):

How will earnings from job be reported and by whom?

**Disclosure:**

Does ES have permission to speak to client's supervisor?

Has client signed release of information?

What information is ES allowed to share with supervisor?

What information is not allowed to be shared?

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Client Signature

Date:

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Employment Specialist Signature

Date:

Client Name:

Member ID#:

DOB:



# Milestone #2 – “Job Development (1)”



## • **ACHIEVED WHEN:**

### • 1<sup>st</sup> Successful Job Placement/1<sup>st</sup> day on the job

#### – Required documentation:

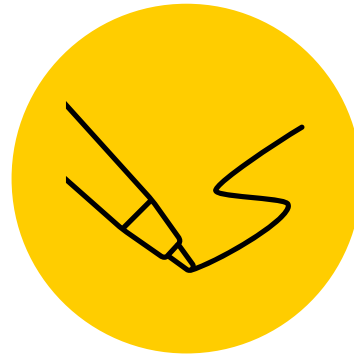
- IA IPS Milestone Progress Report (updated)
- Job Development Log
- Job Development Monthly Report
- Job Start Form



# Then -Prepare to Support Successful Employment



**Continue to Gather  
and Update  
Information**



**Complete Job  
Analysis Form**



**Evaluate Job Support  
Needs**

# Update Milestone Progress Report

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- Review information
- Update any changes in preferences, career profile sections, etc.
- Document any career advancement goals
- Track milestone progress
- Include brief summary of progress, needs, or assistance provided since last milestone

# Job Analysis Form

- Required Milestone 4 Form
- Document that evaluates:
  - Job & Workplace Safety
  - Essential Functions of the Job
  - Physical Demands of the Job
  - Cognitive Demands of the Job
  - Job Requirements (age, education, other)

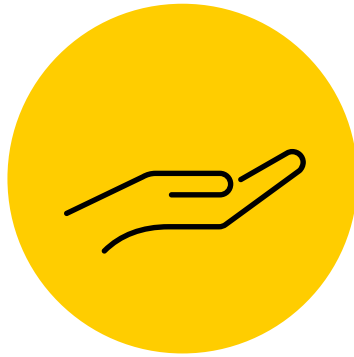


# Milestone #3 – “Job Development (2)”

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- **ACHIEVED WHEN:**
- Worker has maintained employment 45 days
  - Required documentation:
    - IA IPS Milestone Progress Report (updated)
    - Job Analysis Form

# Then: Prepare to Transition to Long Term Supports



**Continue job coaching  
or other job supports  
as needed, expanding  
MH support**



**Build natural  
supports**



**Complete Time-  
Unlimited Support  
Report & Job Support  
Plan**

# Update Milestone Progress Report

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- Review information
- Update any changes in preferences, career profile sections, etc.
- Document any career advancement goals
- Track milestone progress
- Include brief summary of progress, needs, or assistance provided since last milestone

# **Time-Unlimited Support Report** (formerly called “Employment Training Plan”)

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- Information about the job & employer
- Documents supervisor & ES partnership of supporting the worker
- Compiles job tasks & task sequence
- Evaluates worker’s skill levels at job tasks
- Informs readiness for successful IVRS closure, or need for additional supports
- If client does NOT disclose, do your best to complete with the client/worker



# Time- Unlimited Support Report

## Time-Unlimited Support Report

Name of Employee:  Employment Start Date:

Name of Employer:  Job Title:

Business Address:  Business Phone #:

Business Contact:  Supervisor:

What methods were given to the employer on how to contact the job coach?

What training or strategies were provided to the supervisor/mentor in order for them to support and direct the client?

Work Schedule:

Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Split Shifts
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

Job Skills (Examples: active learning, self-monitoring, communication, listening, social interaction)	Rating (NI, A, M)	
Can employee identify any natural supports in the workplace? Please list who they can identify and who the Job Developer/Coach feel the natural supports are.	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

NI – Needs Improvement, A – Acceptable, M – Mastered

Client Name:

Member ID#:

DOB:

Sequence of Tasks	Rating (NI, A, M)	Date/Comments
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

NI – Needs Improvement, A – Acceptable, M – Mastered

Staff Signature

Date

Client Name:

Member ID#:

DOB:

# Job Support Plan

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- Begin working on this plan as soon as person becomes employed
- Do NOT wait until 90 days to complete!
- Way of building natural, employment & MH supports
- Identifies needs and/or accommodations
- Revisits disclosure preferences

# Job Support Plan

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- Involves the care team
- Specifies the “who, what, where, when & how” of job supports
- Ultimate goal is successful job retention use of supports
- \*Added – section addressing benefits & entitlement future planning to avoid worker losing SSI/SSDI, HAB or planning for independence from benefits & entitlements

# Job Support Plan

## Job Support Plan

Client: [redacted] Today's Date: [redacted]  
 Employment Specialist: [redacted]

Employer: [redacted] Start Date: [redacted]  
 Position Title: [redacted]

- Plan for getting to work: [redacted]  
 Back-up plan for getting to work: [redacted]
- What strengths will help the worker succeed on the job: [redacted]
- What does the worker want to get out of the job (for example, meet new people, save to make a specific purchase, occupy time, more income, etc.): [redacted]
- What does the worker want help with in the new job (for example, getting up on time, dealing with nervous feelings, getting feedback from supervisor, having good relationships with co-workers, learning the job, getting tools/clothes for work, etc.): [redacted]
- Will the IPS Specialist have contact with the supervisor? YES  NO 
  - If yes, please describe the type of contact and how often: [redacted]
  - Release of Information signed for Specialist to speak with supervisor? YES  NO
- Others who can provide job supports to the worker (enter person's name, type, and frequency of support):
  - Family Member: [redacted]
  - Friend: [redacted]
  - Case Manager (or another primary worker): [redacted]
  - Other care professional: [redacted]
  - Someone else: [redacted]
    - Release of information signed for support person(s)? YES  NO
- Has worker met with a CWIC to manage earnings and entitlements? YES  NO  N/A 
  - If yes, what is the plan for worker to manage earnings and maintain Medicaid HAB, SSI/SSDI eligibility or plan for independence from entitlements?
    - N/A; does not have Medicaid HAB/SSI/SSDI
    - Explain: [redacted]

Client Name: [redacted] Member ID#: [redacted] DOB: [redacted]

## Job Support Plan

### 8. Job Supports

Type of Support	Where	When/How Often	Who
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]

Notes/Updates: [redacted]

Client/Worker Signature \_\_\_\_\_ Date \_\_\_\_\_

IPS Specialist Signature \_\_\_\_\_ Date \_\_\_\_\_

Client Name: [redacted] Member ID#: [redacted] DOB: [redacted]

# Milestone #4 – “Supported Job Coaching”

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- **ACHIEVED WHEN:**
- Worker has maintained employment 90 days
  - Required documentation:
    - IA IPS Milestone Progress Report (updated)
    - Time-Unlimited Support Report (formerly called “Employment Training Plan”)
    - Job Support Plan

# Job End Form

- Completed once job ends
- Documents information about the job and reason job ended
- Involves care team
- Obtains perspectives regarding the job ending
- Updates disclosure preferences
- Discusses benefits & entitlements changes

Client: [redacted]  
First day of employment: [redacted]

Date: [redacted]  
Last day of employment: [redacted]

Care Team	Notified of Job Ending?	By whom/when?
IVRS: [redacted]	Yes <input type="checkbox"/> No <input type="checkbox"/>	[redacted]
IHH: [redacted]	Yes <input type="checkbox"/> No <input type="checkbox"/>	[redacted]
Psych Prescriber: [redacted]	Yes <input type="checkbox"/> No <input type="checkbox"/>	[redacted]
Therapist: [redacted]	Yes <input type="checkbox"/> No <input type="checkbox"/>	[redacted]
Case Manager: [redacted]	Yes <input type="checkbox"/> No <input type="checkbox"/>	[redacted]
Other: [redacted]	Yes <input type="checkbox"/> No <input type="checkbox"/>	[redacted]

Business name: [redacted]  
Business address: [redacted]  
Change (job duties, supervision, schedule) after job start: [redacted]  
Reason for job end:  Quit;  Terminated;  Laid off

Client's perspective regarding job end: [redacted]  
Employer's perspective regarding job end: [redacted]  
IPS specialist perspective regarding job end: [redacted]  
VR counselor's perspective: [redacted]  
Other (family, mental health team...): [redacted]

How will entitlement systems be notified of job end: [redacted]

Client's preferences for next job:  
Type of job: [redacted]  
Disclosure of personal information: [redacted]  
Other: [redacted]

\_\_\_\_\_  
Client/Worker signature Date

\_\_\_\_\_  
IPS Specialist signature Date

# Conclusion

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- Questions?
- Thanks for attending!
- Please take time to complete the training survey
- Next IPS Training:
  - IA IPS Quarterly Learning Community meeting  
Topic – *“Time Unlimited Supports”*
  - Thursday July 20<sup>th</sup>
  - 10 a.m. to 12 p.m.
  - [Register Here](#)

# Contact Information

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Center of Excellence for Behavioral Health

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# Thank you

→ [iowacebh.org](http://iowacebh.org)

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