

 WRAPAROUND MILWAUKEE Policy & Procedure	Date Issued: 4/1/11	Reviewed: 10/11/11 By: WA Last Revision: 11/16/11	Section: PROVIDER NETWORK	Policy No: 055	Pages: 1 of 5 (1 Attachment)
☒ Wraparound ☒ Wraparound-REACH ☒ FISS ☒ Project O-Yeah	Effective Date: 1/1/12	Subject: EMPLOYMENT PREPARATION AND PLACEMENT SERVICES			

I. POLICY

It is the policy of Wraparound Milwaukee/REACH/O-YEAH/Family Intervention Support & Services (FISS) that individuals in need of Employment Preparation and Placement Services receive these services per the established guidelines.

This service is designed to assist the Service Recipient with acquiring permanent paid employment. Payment for Employment Preparation and Placement services is “outcome based” with reimbursement being made upon achievement of each of three (3) phases or milestones. Duration of the service (three (3) phases combined) is anticipated to be six (6) months or less.

II. PROCEDURE

A. Definitions.

1. Employment Preparation and Placement Services.

Employment Preparation and Placement Services are provided to a Wraparound, REACH/O-YEAH or FISS enrollee age 15-1/2 or older, or in rare cases, the parent or guardian of an enrollee, who is in need of assistance with obtaining and sustaining employment. Employment Preparation and Placement Services includes three phases:

- a. Phase One is Assessment and Employment Plan.
- b. Phase Two is Job Development and Acquisition.
- c. Phase Three is Post Placement Support.

Providers of Employment Preparation and Placement Services must offer all three phases of this service.

The Direct Service Provider’s role is to provide vocational and functional assessments, soft skill training, career planning, job exploration and placement, perform job searches and engage the client in interviewing and resume writing/skill development, and to provide post placement follow up support. **Employment must be permanent, versus temporary or seasonal, unless explicitly identified on the Plan or Care and Referral Form.** Upon completion of the service, electronic and printer copies of a resume **must** be made available to the Service Recipient. While the Service Recipient is enrolled in this service, Providers will attend all Plan of Care and Child & Family Team meetings. If at any point, 30 days elapse of no contact with the Service Recipient, the Provider will contact the Care Coordinator to discontinue services.

Employment Preparation and Placement Services must be reflected in the Service Recipient’s Plan of Care (for Wraparound/REACH/O-YEAH) or the Treatment Plan (for FISS).

2. Phase One: Assessment and Employment Plan.

Service Components: Assessment, Employment Plan and Pre-Employment Training.

Phase One **must** include a minimum of eight attempted (scheduled) face-to-face meetings. The Assessment and Employment Plan may include a formal interview and/or completion of a formal written Assessment used to assess the Service Recipient’s needs. The Assessment and Employment Plan **must** be signed by the parent/guardian, as appropriate. In addition to providing skill training,

pre-employment training sessions may be used as a method of determining what assistance the Service Recipient may require to obtain employment. If the Provider determines that the Service Recipient is not suitable for Phase Two and Three, a description must be provided of the reasons why, as well as recommendations for becoming suitable for employment. A Service Recipient can only be determined unsuitable for Phases Two and Three on the basis of being unwilling or unable to meet participation requirements, and cannot be determined unsuitable on the basis of functional level alone.

Pre-Employment Training – As part of the Assessment Process, the Provider may begin training in the following areas in order to determine the Service Recipient’s level of commitment, abilities and employment related training needs. This training may include the following topics:

- Attendance and punctuality.
- Personal appearance; grooming, hygiene, appropriate workplace dress, value of first impressions.
- Communication and dispute resolution.
- Networking.
- Filling out a job application.
- Resume creation.
- Obtaining references.
- Marketing oneself to an employer; identifying personal strengths and assets.
- Dealing with an arrest and conviction record.
- Employer expectations.
- Taking time off.
- Getting to and from the job.
- What to expect when you get your first check (i.e., taxes and other withholdings).
- Management of Service Recipient needs other than the above that were identified during the Assessment process.

Outcome: Report identifying the Service Recipient’s aptitudes, interests, limitations, job goals and steps necessary to achieve job goals.

3. Phase Two: Job Development and Acquisition.

Service Components: If, after 12 weeks, the Service Recipient has not obtained employment, the Provider is to contact the Care Coordinator to assess whether or not the Service Recipient is likely to benefit from continuing services.

Phase Two - Job Development and Acquisition Services may include:

- Continuation of “Pre-Employment Training” activities from Phase One.
- Identification of potential jobs and/or employers that have new or imminent job openings that are consistent with the Service Recipient’s job goal(s) and abilities.
- Job search activities performed on behalf of the Service Recipient.
- Pre-employment contact by Provider with potential employers to identify job opportunities that are relevant to the Service Recipient.
- Negotiation of job restructuring and/or job creation for the Service Recipient with a potential employer.
- Activity associated with the development of the employer’s capacity to provide “natural supports” to aid the Service Recipient in job retention (natural supports are employer resources/personnel who can offer job training, support, mentoring and encouragement to the new employee).
- Obtaining and completing job applications.

- Accompanying the Service Recipient to job interviews.
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- Service Recipient specific pre-employment counseling and advocacy services.

Phase Two - Job Development and Acquisition services must include:

- Development of a resume that offers a chronological summary of the Service Recipient's work history (if previously employed) and/or highlights relevant Service Recipient skills and abilities (functional resume). The resume should emphasize credible experiences such as school activities and accomplishments, volunteer work at home and in the community, including caregiver responsibilities, odd jobs and community and church related work/responsibilities. An electronic copy of the resume is to be given to the Service Recipient before the Employment Preparation and Placement service ends.

Outcome: Service Recipient obtains job.

4. Phase Three: Post Placement Support.

Service Components – if the Service Recipient is unsuccessful in retaining employment for 60 days, either due to voluntary or involuntary separation, the Provider is to contact the Care Coordinator to assess whether or not the Service Recipient is likely to benefit from continuing services. If the Service Recipient loses employment by no fault of their own (illness, injury, layoff, etc.) before 60 days, service reauthorization for Phase Two may be considered.

Phase Three – Post Placement Support services may include:

- Orientation of the Service Recipient/employee to his/her new job.
- Assistance and direction regarding management of transportation needs.
- Monitoring of job attendance, productivity and socialization (getting along with others on the job).
- Monitoring employer satisfaction with the Service Recipient/employee's job performance.
- Assisting the Service Recipient with opening a bank account.
- Consultation with the employer regarding development of natural supports within the workplace in order to promote satisfactory job performance and sustained employment with the goal of "fading" the need for job support from the Provider, as the Service Recipient/employee independence increases and the benefit of natural supports is realized.

Outcome: Service Recipients retain employment and are fully integrated into the workplace.

B. Requirements.

1. Agency.

- a. During the application process, agencies must show evidence or prior experience specific to the provision of this service.
- b. The Agency must have a written plan for the provision of the service including: assessment, training, job development, job placement and follow-up services. The Agency must identify expectations and participation requirements for the program, the criteria by which they will be measured, as well as participant conduct that could result in expulsion from the program.

2. Provider.

- a. Individual Direct Service Providers of this service must possess a High School Diploma or GED and must have a minimum three years work force experience and at least one year experience in providing same/similar type services; OR a Bachelor's Degree in Business, Finance or Human Resources with at least one year work experience. Evidence of Direct Service Provider credentials is to be kept in the employee file and made available upon request.

- b. Prior to the provision of service, a Criminal Background Check must be completed on all Direct Service Providers per Wraparound Milwaukee Policies and Procedures (see *Wraparound Milwaukee Caregiver Background Check Policy 057*).
- c. A Department of Motor Vehicle Driving Abstract must be completed prior to the provision of services.
- d. A copy of a valid Wisconsin Driver's License and a copy of the Direct Service Provider's current automobile insurance must be kept in the employee file.

3. Service Recipient File.

- a. Every Service Recipient should have his/her own file. Records must be maintained as outlined in the Provider Agency Responsibilities and Guidelines Policy 054.
- b. The Agency **must** receive a PROVIDER REFERRAL FORM from the Care Coordinator/FISS Manager **prior to the provision of services**. A copy or original form must be kept in the Service Recipient file.
- c. An Agency CONSENT FOR SERVICE form must be completed on every client **prior to the provision of services**. The Consent should be dated and signed by the Service Recipient and **must be signed by the legal guardian, if the Service Recipient is a minor**. If the Service Recipient is an adult, he/she must sign and date the Consent. The Consent must specify the Agency name and the service being provided. All Consents authorize service for one year from the date of signing.
- e. If the Agency will be transporting the Service Recipient in an employee or agency vehicle, a TRANSPORTATION CONSENT FORM (see Attachment 1) must be completed **prior to transport**. The Transportation Consent Form should be maintained in the Service Recipient file. The Consent **should be dated and signed by the Service Recipient and must be signed by the legal guardian, if the Service Recipient is a minor**. If the Service Recipient is an adult, he/she must sign and date the Transportation Consent Form.

C. Documentation and Reimbursement.

Reimbursement for Employment Preparation and Placement Services is outcome based. Upon achievement of an identified "milestone", payment for services for the corresponding "Phase" (One, Two or Three) will be processed when the report associated with the service "Phase" has been entered into Synthesis.

DOCUMENTATION REQUIREMENTS BY "PHASE" ARE AS FOLLOWS:

Phase One: Assessment and Employment Plan.

1. Synthesis Reports.

The Direct Service Provider is to complete the "Employment Preparation and Placement Service – Phase One Assessment and Employment Plan Report" in Synthesis that includes:

- a. **Assessment Summary** – a description of the Assessment that was used to identify the Service Recipient's strengths and needs (observation, paper and pencil testing, simulated work experiences, job site tours, etc.). A summary of the Service Recipient's level of formal education, areas of interest, specific job preferences and objections, limitations (physical, emotional, etc.), employment skills and training, past and current employment history, financial needs, location of current residence, transportation needs, willingness and ability to use public transportation, hours available for work, geographic preferences, other strengths, weaknesses and preferences as they relate to employment, and literacy and other basic academic skills. The Provider will also describe Agency recommendations regarding the type of job(s) and industry appropriate for employment pursuit based on the Service Recipient's skills, interests, assets, needs and current job availability. The Assessment Summary should also include all dates for which the Service Recipient was scheduled and seen. If the Provider determines that the Service Recipient is not suitable for Employment

- Preparation and Placement, a description should be provided of the reasons why, as well as recommendations for becoming suitable for employment.
- b. **Employment Plan** – if the recommendation is for the Service Recipient to continue to Phase Two: Job Development and Acquisition, the Assessment Summary will conclude with an “Employment Plan”, which identifies a minimum of three job goals, in order of preference. The job goals must reflect the Service Recipient’s employment related preferences and constraints as identified in the Assessment. The written plan identifies the course of action that will be taken to assist the Service Recipient in achieving identified job goals, and specifically identifies the role and responsibilities of the Service Recipient and Provider.
2. **A hard copy of the Assessment Summary and Employment Plan Report**, signed by the Service Recipient (if an adult) or parent/guardian (if the Service Recipient is a minor) must be retained in the Provider’s client file.

Phase Two: Job Development and Acquisition.

1. **Synthesis Reports.**
 - a. If 30 days elapse without an employment start date, and every 30 days thereafter until placement, a monthly summary report of activities engaged in must be completed in Synthesis.
 - b. After the Service Recipient has completed the first day of work, the Direct Service Provider is to complete the “Employment Preparation and Placement Service – Phase Two Employment Verification Report” in Synthesis that includes: start date, job title, brief description of job duties, wage, weekly schedule and total hours, name, address and telephone number of the employer, and name of the supervisor.
2. **A hard copy of the Employment Verification Report**, signed by the employer, must be retained in the Provider’s client file.

Phase Three: Post Placement Support.

1. **Synthesis Reports.**
 - a. After 30 days of employment, a monthly summary report of activities engaged in must be completed in Synthesis.
 - b. After 60 days of employment (60 days post hire when the Service Recipient has worked at least 2 days each week) and the Service Recipient is considered in good standing with the employer, the Direct Service Provider is to complete the “Employment Preparation and Placement Service – Phase Three Employment Retention Report” in Synthesis that includes: start date, job title, brief description of job duties, wage, average hours worked per week since hire, name address, and telephone number of the employer, name of the supervisor, an indication that the employee has completed/passed a probationary period, as applicable, and an indication that the employee is working independently (without Provider support).
2. **A hard copy of the Employment Retention Report**, signed by the employer, must be retained in the Provider’s client file.

Note: *There is NO provision for the identified Service Recipient to repeat any of the Employment Preparation and Placement Phases, resulting in payment to the Provider Agency/Direct Service Provider more than once for the same “Phase”.*

Any/all of the above requirements may be audited by Wraparound Milwaukee/FISS, the State of Wisconsin, Milwaukee County and/or any program-affiliated auditing body.

Reviewed & Approved by: Bruce Kamradt
Bruce Kamradt, Director

TRANSPORTATION CONSENT FORM

YOUTH/CLIENT NAME: _____ DOB: _____
(Print)

(Provider's Name) OF _____
(Name of Provider Agency)

HAS PERMISSION TO PICK UP AND TRANSPORT _____
(Name of Youth/Client)

FROM _____ THROUGH THE TERMINATION OF SERVICES FROM THIS AGENCY.
(Effective Date)

SPECIAL CONSIDERATIONS/MEDICAL-MEDICATION ISSUES/LIMITATIONS:

Signature of Legal Guardian Relationship to Youth Date

Signature of Youth (should sign if age 14 or over) Date

WITNESSED BY:

Print Name of Witness

Signature of Witness Date Witnessed

Agency Address Agency Phone

EMERGENCY CONTACT:

Name: _____

Address: _____

State: _____ Zip: _____ Phone: _____

Unless otherwise specified, this consent will expire 12 months from the date it was signed. This consent or any part of this consent may be canceled at any time with written notification.