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|  | **Tennessee Department of Human Services Vocational Rehabilitation Program**  **Supported Employment Consultation and Services Plan** |

**Report for**       **(Month)**       **(Year)**

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| **VR Counselor Name:** | | | **District Number:** | |
| **Client Name:** | **SSN (last 4):** | | **CRP Name:** |

**ATTENDEES**

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| **VR staff**  **CRP Employment Staff**  **CRP Residential**  **Other**  **Friend** | **ISC**  **Family**  **Conservator/ Guardian**  **School**  **Case Manager**  **Direct Service Person** |

**WORK**

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| How was work determined to be a goal?    Has the person worked before, or volunteered? Likes and dislikes about each experience.    How will the disability condition affect work?    Targeted number of hours wanting to work.    Initial discussion of accommodations or assistive technology that will be needed. |

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| **Job Developing:**  A discussion of how everyone can help, what areas to focus on and assistance that may be needed.  Targeted jobs, job descriptions, broad category of work    Hours, environmental conditions, time of day    Days not available to work    Who has connections in these broad categories of work    When do we start looking    Responsibilities of the job seeker    Responsibilities of the CRP staff    Training, clothing, tools, transportation that may be needed |

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| **Representational Consideration** The job developer will be representing job seeker in the community.  How does the job seeker want to be represented?    How will disabilities be addressed with an employer?    Do you want to help with a description on how to present the job seeker to an employer?    A video?    A portfolio showing what the job seeker’s abilities are?    A resume?    Instead of saying this person has “Autism” (or an intellectual disability, or mental health issues) how would you describe specific characteristics and how they would affect work    **Other Important Information** This is individualized but could include:  Criminal record    Substance abuse    Safety Concerns    Unique aspects of this client’s life |

**PLAN OF ACTION**

**Expectations of those attending this meeting:** Everyone attending this meetinghas expressed an interest and desire that the person finds employment. How are you going to assist in identifying, getting and keeping competitive integrated employment? This could be providing areas of interest, networking contacts, transportation or motivational support.

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**CRP understands that as the Supported Employment services provider, the CRP will have the ultimate responsibility to coordinate and provide on-going support services once the case is successfully closed with VR. This will be documented further using the IPE and the Extended Services Plan.**

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| **Signature:** | |
| I, the SE Employment Specialist certify that the above dates, times, and services are accurate. I personally completed, documented, and provided all services recorded and information described. I maintain credential and training requirements as described in the SE Attachment. | |
| Name/Signature of the SE Employment Specialist: | Date form completed: |