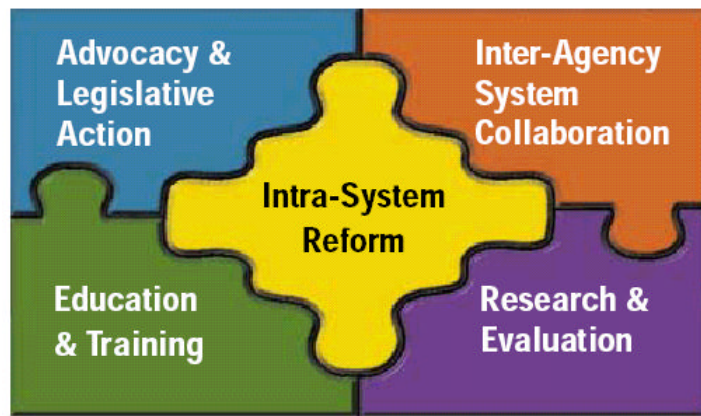


COMMUNITY SUPPORT TRAINING MANUAL

GUIDELINES FOR CSP INTERVENTIONS THAT ENHANCE EMPLOYMENT OUTCOMES



Working for Recovery

**Ohio Department of Mental Health
Office of System Development & Consumer Services**

May 1, 2003 Edition

May 1, 2003

Dear Reader,

The goal of this manual and related training is to assist CSP (Community Support Program) workers in adopting a recovery approach toward assisting consumers who want to work. The manual highlights best practices in addressing the barriers to employment faced by people with severe and persistent mental illness. The manual is a communication tool to present useful information on:

- Assisting consumers in using employment as a means to advancing recovery
- Benefits—how consumers can maintain benefits (i.e. Medicaid) while working
- What interventions work? Evidence based practices
- Community resources for employment
- How CSP can support consumers who work

Recovery is defined as a personal process of overcoming the negative impact of a psychiatric illness despite its continued presence.

Wilma Townsend, Sherry Boyd & Grisetta Griffin “Emerging Best Practices in Mental Health Recovery”, Ohio Department of Mental Health, Michael F. Hogan, PH.D., Director, June, 1999.

In the recovery process, consumers move from a state of dependency on the mental health system and their families to interdependency with their family and friends with less dependence on the mental health system. Employment, often starting part time, is a catalyst for recovery. With employment, consumers have more money and more choices. Many consumers report that their mental health symptoms decrease while they are at work. Even when symptoms remain present, consumers may contribute more to their families and communities while advancing their recovery through employment.

This manual is intended to promote the reengineering of CSP to support recovery; it is not intended to increase the total number of CSP hours delivered. The manual itself does not carry any authority. We recognize that most mental health systems are being challenged by tight fiscal resources, and believe that supporting employment for consumers can assist in using those resources in a cost effective manner. Life experience and research demonstrate that consumers who are in the process of recovery need fewer mental health services over the years to come and participate more fully in their communities.

Members of the Working for Recovery Intra System Reform Team developed this manual as a resource to support recovery through employment. The team members included providers, administrators, employers, consumers, family and friends of the mental health system. I hope that the information provided in this manual results in more opportunities for consumers to include employment as a significant part of their recovery.

Sincerely,

Judy Wortham Wood, Deputy Director
Program and Policy Development
Ohio Department of Mental Health

COMMUNITY SUPPORT TRAINING MANUAL

April 27, 2003 Revision

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I. Frequently Asked Questions

1. What can I find in this manual?

- Success stories
- Recovery information
- Tools for case managers & consumers
- What works? (research findings)
- Community Resources
- Case examples
- Employment Resources

2. How can I use this manual?

- A training manual
- A reference manual
- For planning service delivery
- Source of inspirational recovery stories

3. Will consumers be able to keep Medicaid, Medicare, SSI and SSDI when they return to work?

- Most consumers are able to keep Medicaid and part or all of their SSI or SSDI, while beginning to work part time if they use existing work incentives under Social Security Administration and Medicaid rules.
- Most consumers with SSI, SSDI, Medicaid and Medicare have more money when they return to work.
- Consumers who return to work will need to keep Social Security Administration and Job and Family Services informed.
- Consumers need specialized information available through benefits specialist, and may need assistance in meeting reporting requirements.
- The rules are complex, and CSP workers need to be careful and detail oriented when assisting consumers in following these rules.
- CSP workers are strongly encouraged to refer consumers to a qualified benefits specialist to advise consumers.
- Benefits specialists are available at no cost to consumers nationally through a federal grant; see page 13 for benefits specialists in Ohio.

4. Will employment make consumers' mental illness worse?

No, both research and experience show that most consumers have fewer symptoms and need less mental health services when employed. Competitive employment results in better control of psychiatric symptoms and more satisfaction with finances and with leisure.

5. How can I tell if a consumer is ready to return to work?

- Consumer says he/she wants to work now
- Ability to work is NOT related to severity of symptoms
- Research says professional assessment of readiness is poor predictor.
- Consumer motivation to work is best predictor of success

6. What are key areas for CSP workers to assess?

- How was consumers' energy level before, during and after work?
- How was consumer's comfort level and job performance?
- How was work socially?

7. Does the manual give examples of ODMH recommended forms?

No, the manual was not intended to give examples of forms; the material can be adapted to any forms in use by provider agencies.

8. Who can I contact for additional training materials and information about this manual?

Liz Gitter, LISW, Ohio Department of Mental Health, 30 E. Broad Street, Columbus, OH 43215, GitterL@mh.state.oh.us, (614) 466-9963

Craig Gebers, Zeph Center--Empact, 3443 Secor Road, Suite B, Toledo, OH 43606-1520, 419-418-2390.

II. How Work Supports Recovery

This section, How Work Supports Recovery, includes:

- ODMH’s vision in Working for Recovery
- How work supports recovery
- How rehabilitation (i.e. CSP, employment services, clinical services) can make a difference in recovery & employment
- How work relates to guiding principles of Emerging Best Practices of Recovery
- Recovery success stories of consumers who work in Ohio
- Tool for employment recovery plan

“Increasing employment opportunities for people recovering from serious mental illness is one of the most urgent priorities in today’s public mental health system.”

Michael F. Hogan, Ph.D., 1999

“Most people with mental illness want to be employed.”

Boston University, Consumer Survey

Ohio Department of Mental Health, Longitudinal Study of Mental Health Services and Consumer Outcomes, 1999



How does employment support recovery in Ohio?

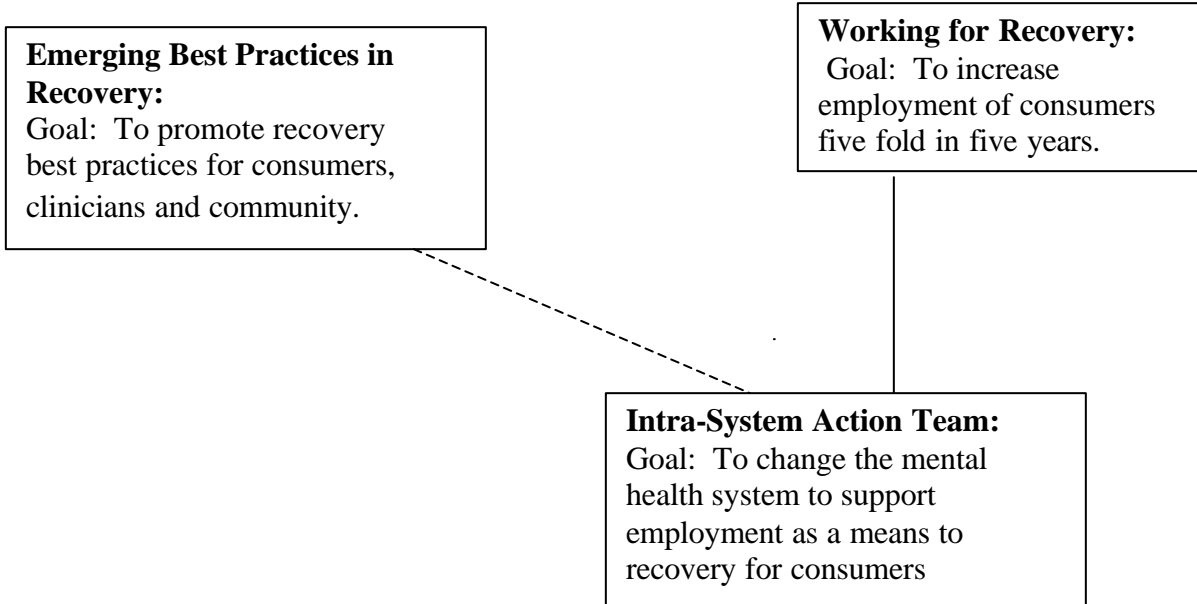
The Ohio Department of Mental Health has adopted the Vision Statement from the planning meeting for Working for Recovery:

There will be a five-fold increase in employment for people with mental illness within five years. The Values we hold are:

- Consumer choice is valued and honored.
- Equal employment opportunities for all.
- Culture is honored.
- Meaningful activities are valued.
- Stigma does not exist and there is community acceptance.
- People with mental illness contribute to economic prosperity
- Decreased dependence among people recovering from severe mental disabilities.

These values are incorporated into initiatives Emerging Best Practices in Recovery and Working for Recovery which address the priorities of recovery and employment. We are using this CSP training manual to merge and connect these initiatives. The Emerging Best Practices in Recovery Practice Model and Working for Recovery. Working for Recovery. The vision statement adopted for “Working for Recovery” is “There will be a five-fold increase in employment for people with mental illness within five years.” The Working for Recovery has five action teams. One of the action teams, “Intra-System Reform” had the purpose of eliminating barriers to employment within the public mental health system. The Intra-System Reform team developed this training manual for the purpose of eliminating barriers to employment for consumers.

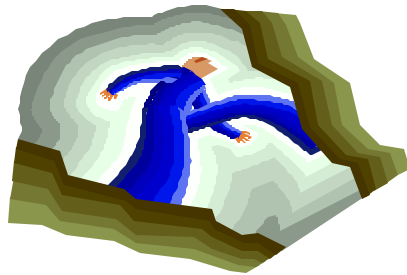
Emerging Best Practices is identified “work/meaningful activity” as one of nine essential components that are needed in order for a community to provide effective services and support. Working for Recovery promotes employment for consumers. Working for Recovery: Intra-System Action Team was charged with addressing what could be changed within the mental health system to support employment for consumers. **In this manual, we share best practices on how CSP (Community Support Program) staff can assist consumers in using employment and community support services in their recovery process.** It is very important to understand that each consumer has the responsibility of directing his/her own recovery process, and that professionals provide treatment, services and supports which facilitates the recovery process.



How work supports recovery....

Recovery is a personal process of overcoming a psychiatric disability despite its' continued presence.

Wilma Townsend, Sherry Boyd & Grisetta Griffin, "Emerging Best Practices in Mental Health Recovery", Ohio Department of Mental Health, Michael F. Hogan, Ph.D., Director, June 1999.



“Work for Ohioans with disabilities... and serious mental illnesses is much more than just a job. Jobs bring dignity, increased opportunities for self-determination. Jobs are people’s identity. Jobs are where people meet their friends and frequently their life partners. And a job is an opportunity to break the cycle of dependence and isolation that so often accompanies a severe mental illness, or any disability. A dozen years ago I was sitting at home, smoking cigarettes, drinking coffee and pacing the floor day after day. A job working evenings as a janitor broke that cycle. I got out of the house. I was able to have some income again. Most important, that job gave me back hope that there was a future.”

Doug DeVoe, Executive Director, Ohio Advocates for Mental Health, testimony before the Ticket to Work Program Evaluation Committee, March 8, 2001

Work Supports Each Principle of Recovery.....

The Ohio Department of Mental Health in collaboration with a group of consumers, providers and board members has developed “Emerging Best Practices in Mental Health Recovery” which has twelve guiding principles. Below, we list these principles with a *brief comment on how employment contributes* to each one:

I. The consumer directs the recovery process; therefore, consumer input is essential throughout the process.

Most consumers say that they want to work according to nationally published research and responses of Ohio consumers to ODMH’s longitudinal surveys.

II. The mental health system must be aware of its tendency to enable and encourage consumer dependency.

Employment decreases dependency on the mental health system and assists consumers in becoming interdependent with coworkers, family and community.

III. Consumers are able to recovery more quickly when their:

- **Hope is encouraged, enhanced, and /or maintained;**
- **Life roles with respect to work and meaningful activities are defined;**
- **Spirituality is considered;**
- **Culture is understood;**
- **Educational needs as well as those of their family/significant others are identified;**
- **Socialization needs are identified.**

Employment speeds recovery by nurturing hope for resuming the life role of employee.

IV. Individual differences are considered and valued across their life span.

Employment provides opportunities to recognize abilities and differences.

V. Recovery from mental illness is most effective when a holistic approach is considered.

Employment is included in a holistic approach to recovery.

VI. In order to reflect current “best practices” there is a need to merge all intervention models, including Medical, Psychological, Social and Recovery.

Employment merges social and recovery interventions with medical and psychological interventions.

VII. Clinician’s initial emphasis on “hope” and the ability to develop trusting relationships influences the consumer’s recovery.

Employment supports hopes and dreams of consumers.

VIII. Clinicians operate from a strengths/assets model.

Employment focuses on consumers’ strengths and assets.

IX. Clinicians and consumers collaboratively develop a recovery management plan. This plan focuses on the interventions that will facilitate recovery and the resources that will support the recovery process.

Clinicians and consumers can collaborate on employment which will bring additional financial resources to support recovery.

X. Family involvement may enhance the recovery process. The consumer defines his/her family unit.

Families provide valuable support and practical assistance such as transportation. Families can often assist consumers in finding employment through networking or providing employment opportunities.

XI. Mental health services are most effective when delivery is within the context of the consumer’s community.

Employment services are most effective when delivered in the community-- not in the office.

XII. Community involvement as defined by the consumer is important to the recovery process.

Employment provides opportunities for consumers to become involved in their community.



**Recovery Success Stories....
People with Severe and Persistent
Mental Illness
Who Live and Work in Ohio**

...after rebounding from homelessness and loss of Social Security and Medicaid benefits, a Columbus man has now been working for 15 months in Customer Service with an auto glass repair company. His Benefits Specialist from the Job Incentive Focus Project helped this individual regain appropriate benefits. This person now rents a home and is receiving services from a mental health center.

...another person has been employed at a non-profit organization in Toledo for almost one year, grossing over \$1300/month and performing technical skills on the job. He is using Trial Work Period as a medical transcriber, working 28 hours a week at \$10.56/hour to start. This man says this is his first "real job" in 17 years. He's looking forward to transitioning from Medicaid to the employer provided health insurance.

...a person from Dayton, who had unsuccessful work attempts in the past, is now working at a job that suits him well and has been at the job for almost a year. He has enlisted the Job Incentive Focus Project Employer Liaison to educate his co-workers and managers about ways to create a positive atmosphere for people with disabilities.

...another individual, who works full time in the community, used the services of his Benefits specialist to plan his withdrawal from public support programs. He planned for the end of his SSDI benefits, and his employer- provided insurance allowed him to replace his Medicaid benefits as well. He has now been working without Social Security or Medicaid benefits for over a year.

...a person with a severe visual impairment in addition to mental health issues used his Benefits specialist to help understand the impact of his earnings on benefits. He now plans ahead for decreases in SSI, saves receipts, and sends in receipts and check stubs to Social Security to avoid overpayments. He's been working in a competitive position in the community for over six months.

Developed by:

Bailey, D.; Imler, T.; Shober, S.; & Vasko, B. Anecdotes of mental health consumer success. Job Incentive Focus Project, Ohio Department of Mental Health, funded by a Social Security Administration State Partnership Initiative Grant. June 2001.

The guide for an employment recovery plan on the next two pages **may be used:**

By CSP Workers:

- To initiate dialogue with consumers
- A beginning point for developing an ISP (individual service plan)
- Reference tool for discussion points with consumers
- Homework Assignment for Consumers

By Consumers:

- To identify employment recovery goals
- To identify what you can do for yourself
- To identify what you wish to request from professionals

IT IS OPTIONAL!



**GUIDE TO RECOVERY PROCESS TOWARDS EMPLOYMENT
THROUGH CONSUMER CHOICE**

Employment Status

- | | |
|--|--|
| 1. Competitive employment | 4. Receiving SSI, SSDI and not working |
| 2. Supported competitive employment | 5. Application for SSI or SSDI pending |
| 3. Not employed, some work activity—i.e.
Vocational training, volunteering, sheltered
workshop | |

Please document responses in consumer's own words, as applicable

1. What is your present employment status? (Choose from “Employment Status List”) If employed, how many hours per week?
2. On a scale of 1-5 (1 very satisfied; 5 very dissatisfied), how satisfied are you with your current employment status? Please explain.
3. What is your desired employment status? (Choose from “Employment Status List”)
4. Is changing your employment status a priority for you, at this time? Please Explain
5. What <u>steps</u> do you need to take to achieve your desired employment status? Do you need to consult a benefits specialist?
(Examples: buy work clothes, talk with my doctor about adjusting medication so it doesn't make me so sleepy during day.)

6. What skills and resources (personal and community) do you need, to reach your desired employment status?

(Example: computer skills, inter-personal skills)

7. What skills and resources (personal and community) do you already have that would help you reach your employment status?

(Example: interested in learning new things, a good worker, get along well with others, have my GED, some people at my Church might hire me for a job)

8. What personal and community resources do you need to help you maintain your desired employment?

(Example: help finding and keeping a job, extra support from my case manager just before and after my first day at a new job, assistance from my case manager in dealing with my boss)

9. How does employment fit in with other recovery goals—i.e. better housing, making new friends?

Please document responses in consumer's own words, as applicable

Client Signature:

Date:

The format of this form was developed by the Community Support Housing Manual Recovery Committee including Kim Hensley, Laurel Labadie, Gerry McDonald, Thelma Rist, Sherry Boyd, Liz Gitter, Kathy Chaffee

III. Financial Benefits* & Work

***Benefits such as Medicaid, Medicare, SSI, SSDI, and eligibility based assistance with food, housing and education**

Will consumers lose their financial benefits when they go to work? (By benefits we mean SSI, SSDI, Medicaid, Medicare, Veteran's benefits, food stamps, housing subsidies, and scholarships based on financial eligibility and other income from non-employment sources that consumers receive.)

- Most consumers will financially benefit by going to work part time, and be able to keep some or all of their benefits including Medicaid and Medicare.
- The benefit system rules are very complex. **We encourage all consumers with benefits to consult a qualified benefits specialist.**
- Benefits specialists are available, for the most part, at **no cost to all consumers** in the United States through a federal grant. See a list of the benefits specialists funded by the federal grant in this section. Some communities have additional benefits specialists.

The following benefit information has been adapted from:

“It Pays to Work....A guide to help people receiving SSDI and or SSI, Choose Work Options, 2003 Edition, COVA,3770 N. High Street, Columbus, Ohio 43214 Phone: 877-521-2682. Funding for this handbook is provided by the Social Security Administration (SSA) as part of an annual cooperative agreement with COVA (Center of Vocational Alternatives).”

Consumers receiving SSI and Medicaid in 2003¹

- May keep Medicaid without a spenddown while earning up to \$2202 gross income per month through a provision called 1619(b) as long as medically disabled. Advocacy may be required as some county Job and Family Services may not be aware of 1619(b).
- Work expenses including medications may be excluded from income as an “Impairment-Related Work Expense” as related to disabilities.
- May keep some cash benefits and health coverage even if earning a substantial amount.
- Social Security Administration and Job & Family Services must be notified of income changes.
- Other financial benefits not listed here—i.e. assistance with food, housing and education, may also be affected.

SSI Example (uses 2003 amounts) ¹

Step 1 Subtract exclusions from gross monthly wages.

A. Gross monthly wages		\$295
B. Earned Income Exclusion	\$65	
C. General Income Exclusion	\$20	
(if SSI is only unearned income)		
D. Impairment-Related Work Expense	<u>\$10</u>	
	\$95 -	\$ 95
E. Adjusted earned income		\$200

Step 2 Half of adjusted earned income $\$200/2$ \$100

Step 3 Current SSI benefit rate

A. Current SSI benefit rate		\$552
B. Half adjusted earned income	-	<u>\$100</u>
(see step 2)		
C. Adjusted SSI monthly check		\$452

Step 4

A. Gross monthly wages		\$295
B. Adjusted SSI monthly check	+	<u>\$452</u>
C. NEW MONTHLY INCOME		\$747

Before Employment \$552

After Employment \$747

Caution: This example does not include other financial benefits that consumers may receive for housing, utilities, food, and education that may interact with other financial benefits.

Consumers receiving SSDI and Medicare in 2003¹

- Can earn up to \$570 without impacting benefits or starting Trial Work Period. \$570 for 2003 “It Pays to Work”
- Have a Trial Work Period during which SSDI and Medicare benefits continue without change for nine months.
- Social Security must be notified of income changes.
- May be eligible for EPE (extended period of eligibility) up to 36 months in which cash benefits are paid in any month earnings are below \$800.
- If premium is paid, Medicare can continue beyond EPE.
- Other financial benefits not listed here—i.e. assistance with food, housing and education may also be affected.

SSDI and Medicare Example¹

For the Trial Work Period

SSDI monthly check		\$600
Gross monthly wages	+	<u>\$850</u>
NEW MONTHLY INCOME		\$1450

Medicare benefits and SSDI check continue through the Trial Work Period regardless of earnings if work occurs one year after receiving SSDI.

SSDI Example :

For the Extended Period of Eligibility

Note: The rules for earnings change after the Trial Work Period is completed.

Step 1: Gross monthly wages \$880

Step 2: Subtract Impairment-Related Work Expenses - \$115

Step 3: Adjusted monthly wages \$765

Choose One:

Under \$800 in wages:

Add your existing gross monthly wages to the existing SSDI check.

\$765 Wages
\$600 SSDI check
 \$1365 New monthly Income

\$800 and over in wages

No SSDI cash benefits are payable.

\$880 Wages
\$ 0 SSDI check
 \$880 New Monthly Income

Step 4 New Monthly Income: \$_____

SSDI Worksheet

For the Extended Period of Eligibility

Note: The rules for earnings change after the Trial Work Period is completed.

Gross monthly wages \$
Subtract Impairment Related Work Expenses - \$ _____
Adjusted monthly wages

Under \$800 in wages

Add your existing gross monthly wages to the existing SSDI check.

\$ _____	Wages
+ \$ _____	SSDI check
\$ _____	New monthly income

\$800 and over in wages

No SSDI cash benefits are payable.

\$ _____	Wages
+\$ <u>0</u>	SSDI check
\$ _____	New monthly income

Consumers receiving SSDI, SSI, Medicare and Medicaid: ¹

- Can earn up to \$65 per month with no change in SSI check
- After \$65 is excluded, half of earnings are deducted from SSI check
- SSDI continues as long as disabled unless earn more than \$800 per month
- Any month that income exceeds \$570 counts as part of Trial Work Period. There is only one Trial Work Period per disability.
- Other financial benefits not listed here—i.e. assistance with food, housing and education may be affected.

SSI & SSDI Example:

Current SSI check (with no earnings)	\$300
Current SSDI check	\$272

Step 1: SSI calculation

Gross monthly wages		\$295
Earned	\$65	
Impairment-related Work Expense	<u>\$30</u>	
Total deduction	-\$95	
Adjusted earned income: Social Security will		
Take half of this amount from next SSI check	\$200	

Step 2:

Half of the adjusted earned income $\$200/2 =$ \$100

Step 3:

Current SSI check		\$300
Half of adjusted earned income (step 2)	<u>-\$100</u>	
Adjusted SSI check	\$200	

Step 4:

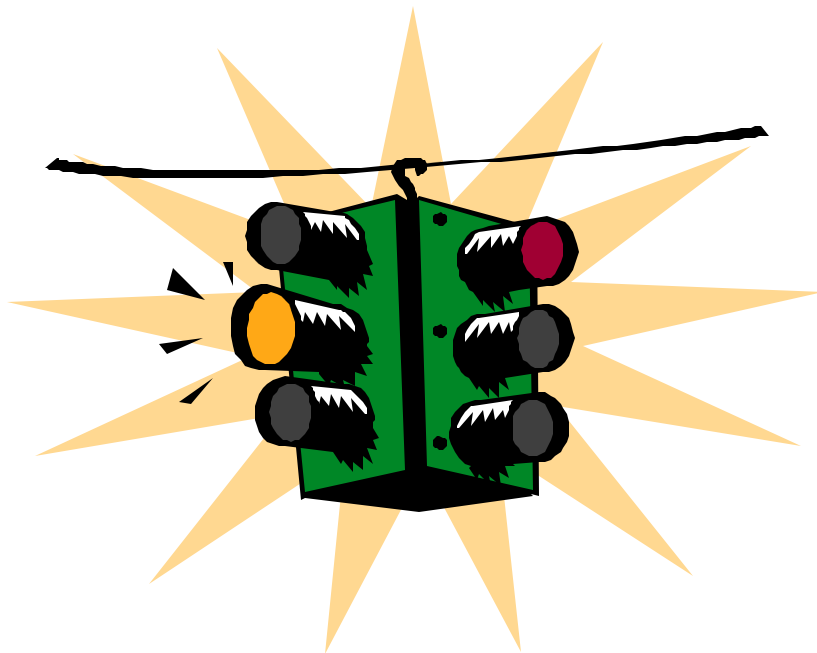
Adjusted SSI check		\$200
Add SSDI check	\$272	
Add gross monthly wages	+	<u>\$295</u>
New monthly income		\$767

Before Working		
SSI check		\$ _____
SSDI check		\$ _____
Total Monthly Income		\$ _____
After Working		
Wages		\$ _____
Adjusted SSI check		\$ _____
SSDI check	+	\$ _____
Total Monthly Income		\$ _____

CAUTION:

Consult a Benefits Specialist:

- The rules are complicated—especially if more than one benefit is involved, as a change in one benefit may affect eligibility on other benefits including food and housing subsidies.
- The rules around Impairment-Related Work Expenses may require specialized expertise to apply to individual situations.
- The rules change periodically.
- A consultation with a qualified benefits specialist provides information and may prevent major headaches (not knowing how to report something) and can really save money for consumers.
- Most consultations are free and available statewide.
- Locations of benefits specialists funded by federal grant are on the next page
- Your area may have additional qualified benefits specialists not listed here.



The following are Benefits Planning, Assistance and Outreach Coverage Areas in Ohio available through a federal grant.

For Central and Southeast Ohio:

Counties included: Adams, Athens, Belmont, Carroll, Columbiana, Coshocton, Delaware, Fairfield, Franklin, Gallia, Guernsey, Harrison, Hocking, Holmes, Jackson, Jefferson, Knox, Lawrence, Licking, Madison, Marion, Meigs, Monroe, Morgan, Morrow, Muskingum, Noble, Perry, Pickaway, Pike, Richland, Ross, Scioto, Tuscarawas, Union, Vinton, Washington

COVA

Ron Swain/Meg Griffing

614-294-7117

877-521-2682

For Northeast Ohio:

Counties included: Ashland, Ashtabula, Cuyahoga, Erie, Geauga, Huron, Lake, Lorain, Mahoning, Medina, Portage, Stark, Summit, Trumbull, Wayne

LEAP

Dave Reichert/Pat Schiff

216-696-2716

877-899-5327

For Northwest Ohio:

Counties included: Crawford, Defiance, Fulton, Hancock, Henry, Lucas, Ottawa, Paulding, Sandusky, Seneca, Williams, Wood, Wyandot

Legal Services of Northwest Ohio

Deb Paterakis/Susan Choe

419-724-0030

888-534-1432

For Western Ohio:

Counties included: Allen, Auglaize, Champaign, Clark, Clinton, Darke, Fayette, Greene, Hardin, Highland, Logan, Mercer, Miami, Montgomery, Preble, Putnam, Shelby, VanWert

Legal Aid Society of Dayton

Lisa Shaw 937-228-8088

For Southwestern Ohio:

Counties included: Brown, Butler, Clermont, Hamilton, Warren

Legal Aid Society of Greater Cincinnati

Julie Honican/Andrea Zigman

513-241-9400

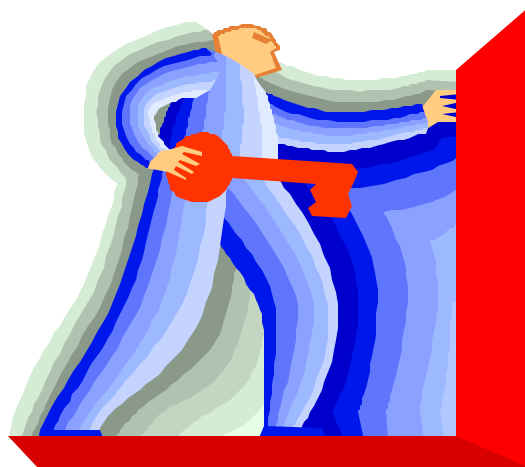
800-582-2682

**IV.
What
Interventions
Work?
(Evidence Based
Practices)**

The Ohio Department of Mental Health adopted a strategic goal in January, 2001 of a five-fold increase in employment of individuals with severe mental illness in five years. To achieve this goal, the Ohio Department of Mental Health supports using vocational and employment strategies that have research evidence to support their effectiveness. For the research to be useful to clinicians and consumers, a definition and measurement of employment is needed. Research can give clinical staff information about what is most likely to be effective.

This section includes:

- Definition of Consumer Employment
- Measurement of Consumer Employment
- Successful Vocational Rehabilitation Strategies
- Models used by providers
- Key elements of each model



Additional references, resources and details about research and measurement of evidence based employment and practices may be found in “Evidence based Employment Models and Practices”, written by the Working for Recovery: Research & Evaluation Action Team, presented March 6, 2002 at the Working for Recovery Reunion sponsored by the Ohio Department of Mental Health Columbus, Ohio. Contact Wilma Lutz at LutzW@mh.state.oh.us or 614-466-8651.

Definition of Employment:

“Employment” is any activity conducted in a competitive, community work setting for which an individual is paid at least minimum wage. No minimum hours per week or month is included in the definition, and the target population is adults, ages 18 and older, with serious and persistent mental illness.

This definition was adopted by the Research and Evaluation Action Team of the Working for Recovery Initiative of Ohio Department of Mental Health August 1, 2001. The Working for Recovery Initiative included more than one hundred consumers, clinical staff, employment staff, employers, boards, professional associations, and Ohio Department of Mental Health staff.

Why this definition?

This definition excludes many work-related activities that may also support and contribute to a person’s recovery from mental illness including sheltered employment, volunteering, casual employment and vocational training. The rationale of the Research and Evaluation Action Team for this was:

- “The definition of employment for persons with severe and persistent mental health problems should not differ from the definition of employment for the rest of the population;
- Research in the field almost universally uses this definition of employment, and part of the Research & Evaluation Committee’s charge is to use research-based best practices in our vocational efforts. It will be difficult to apply the research findings if the definition differs from that used in the research.”

Recommended Employment Measures: ¹

1. The following variables should be incorporated into an employment measurement approach:

- Designation that the individual is a consumer of mental health services
- Age in years
- Employment status categories² – Employed, Not in labor force (e.g. students, homemakers, retirees, children/transition youth), Unemployed (not working now, but seeking employment)
- Employment type³ – Competitive employment, Competitive employment with support (supported employment), Not employed but participating in other activities (e.g. sheltered employment, casual employment, volunteering, paid vocational training)
- Duration of employment – length/tenure of job(s) during a given year
- Pay designation – wages earned from employment

2. Proxy measure of employment can be used and may need to be used until a direct measure is available.

- Consider measures your agency is collecting which are reliable
- Consider measures independent of agency, if available (i.e. CQRT—Consumer Quality Review Team or ADAMH or MH Board measures)
- Consider formal evaluation study to evaluate proxy measures you select.

¹The Working for Recovery, Research and Evaluation Team developed the following measurement recommendations, which was endorsed January 4, 2002 by the Working for Recovery Steering Committee.

²Employment status should be determined by hours worked per week to allow flexibility in designating full-time and part-time status. In the event it is not possible to use hours worked per week, standard designations for full-time (e.g. 35 or more hours) and part-time (e.g. between 10 and 35 hours or between 8 and 35 hours) should be used.

³The designation of competitive employment should include individuals who identify themselves being in the labor force and participating in supported employment. Separate, distinct designations should be included for sheltered employment, volunteering, casual employment (bartering, odd jobs, under the table payment for work), and paid vocational training.

Your agency may already be measuring employment.....

One current proxy measurement already being used by many providers is the Ohio Mental Health Outcomes System Adult Consumer Form A, question number 66: The entire form is available at <http://www.mh.state.oh.us/initiatives/outcomes/outcomes.html>

What is your current employment status?

- Employed full time**
- Employed part time**
- Sheltered employment**
- Unemployed**
- Homemaker**
- Retired**
- Disabled**
- Inmate of institution**

Research-Based Principles of Successful Vocational Rehabilitation Strategies

1. People with serious mental illness can be successfully engaged in competitive employment.
2. Vocational rehabilitation should involve employment in integrated settings for minimum wage or above.
3. Consumer should be placed in paid jobs as quickly as possible and according to their preferred pace.
4. Ongoing vocational support should be available as needed as desired.
5. Consumers should be helped to find jobs that match their career preferences.
6. Vocational rehabilitation services should explicitly address financial planning and provider education/support around disability benefits and entitlements.
7. Vocational and mental health services should be integrated and coordinated.
8. Vocational service providers should work collaboratively with consumers to address issues of stigma and discrimination, and to help negotiate reasonable accommodations with employers.
9. Vocational rehabilitation services should be made available to all mental health consumers.
10. Vocational services should involve family and friends in supporting consumers' efforts to work.

Developed by:

**The Employment Intervention Demonstration Program
Center for Mental Health Services
Substance Abuse and Mental Health Services Administration**

**EIDP Coordinating Center Director: Judith A. Cook, Ph.D.
UIC Mental Health Services Research Program
Department of Psychiatry, University of Illinois at Chicago**

What are some Evidence Based Employment Models Used by Providers?

1. The Dartmouth-New Hampshire “**supported employment** model”, also known as the “IPS” (Individual Placement and Support) model
2. **Fountain House Clubhouse**

Both are based on the “**Choose-Get-Keep**” approach developed by William Anthony. The Choose-Get-Keep model was developed to assist consumers in achieving a Vision of Recovery; “to help people move beyond being a patient in mental health system, to being a member of a community/neighborhood: still coping with mental illness every day, but also thinking of and working towards a future” (Anthony, 1994).

In addition, supported employment concepts can be found in two comprehensive treatment research validated treatment approaches:

1. **P/ACT**—(Program for/Assertive Community Treatment) incorporates supported employment as part of comprehensive treatment for persons with severe and persistent mental illness. While P/ACT includes treatment of persons with dual disorders of mental illness and substance abuse, dual disorders are not its exclusive focus.
2. **IDDT** (Integrated Dual Disorder Treatment) incorporates supported employment as part of a comprehensive treatment approach for persons with dual disorders of substance abuse and mental illness.

Supported Employment Model
Developed by Deborah Becker and Robert Drake
Dartmouth University, New Hampshire

- Providers of supported employment are committed to competitive employment as a goal for consumers with severe mental illness.
- Provider resources are devoted to competitive employment, not day treatment or sheltered work.
- Rapid job search approach is used to assist consumers in finding jobs directly, rather than providing lengthy pre-employment assessment, training and counseling.
- Individual job placement is according to consumer preferences, strengths, and work experiences. Generally less than 10% of the placements will be in same job category if individual placement is being used, however, this has not been confirmed by research.
- Assistance in finding another job experience after one job has ended using job endings as a learning experience and using the principle of on going assessment.
- Supports available to consumer on job if needed---i.e. Job coach at work site if needed and CSP services used when appropriate.
- Follow-along supports are on going and not time limited.
- Integrated services—employment specialist, benefits specialist, CSP worker, therapist and psychiatrist function as a team and communicate.
- **References:**
Implementing Employment as an Evidence-Based Practice, Gary Bond, Deborah Becker, Robert Drake, Charles Rapp, Neil Meisler, Anthony Lehman, Morris Bell, Crystal Blyler, PSYCHIATRIC SERVICES, March 2001, Vol. 52. No. 3

“Supported Employment: Train the Trainers Training” handout materials, training sponsored by Ohio SAMI CCOE and Ohio Department of Mental Health, February 20 & 21, 2002, Deborah Becker, Doug Bailey, Patrick Boyle.

The Fountain House Clubhouse Model

- Developed by consumers at Fountain House in New York following recovery ideology
- Based on premise that work is rehabilitative
- Includes “work ordered day” of meaningful activity
- As consumers progress in recovery, they take transitional work opportunities and receive support for competitive employment.
- Community support for employment and recovery
- Typically has a building
- Run by partnership of consumers and professionals
- Resource: www.fountainhouse.org
- Reference: Transitional employment: An evaluative description of Fountain House Practice. Macias, C., Kinney, R. & Rodican, Journal of Vocational Rehabilitation, Vol. 5 151-157, 1995

V.
Community
Resources

Community Resources for Employment:

This section includes information about community resources for employment outside of the mental health system for persons with disabilities including mental illness that are available or will soon be available through out the United States. These resources include

- Ticket to Work for most SSI and SSDI beneficiaries
- One-Stop Centers available through the Work Investment Act
- Rehabilitation Services Commission.
- Employment Services for Mental Health Consumers

Ticket to Work will be sent to most beneficiaries of SSI or SSDI in Ohio starting in November, 2003. The ticket entitles the recipient to receive vocational rehabilitation and employment services from their choice of participating public or private providers. To locate a Directory of Employment Networks and learn more about the ticket, check out the website Yourtickettowork.com Vocational rehabilitation and employment services that are a part of some comprehensive community mental health centers are eligible to become providers under “Ticket to Work”. The employment provider receives payment only after the person served starts working.

“One-Stop” center—a single point of access where job seekers and employers can access a wide range of services from all of the partners in one location. One Stops provide three levels of service—core, intensive and training. After the initial core level of services available to everyone, persons must demonstrate the need for the next level(s) of services to successfully obtain employment. The next levels of service may require disclosure of a disability to meet eligibility criteria. In some areas, One-Stops and RSC (see description below) may share clients. As “One Stops” vary in their stage of development and “user friendliness”, CSP providers need to learn about their local One Stops before making referrals or accompany consumers to One-Stops.

The One-Stops were created by the WIA (Workforce Investment Act) of 1998 which was designed to create a nation-wide totally-integrated workforce system to meet the needs of job seekers and employers. Title 1 combined many previously separate employment programs with the former Job Training Partnership Act (JTPA) program. Vocational rehabilitation (VR) is now part of this act, as Title 4. Vocational rehabilitation is a mandatory partner of local One-Stop centers. Each local workforce board under WIA is required under WIA to develop employment and training priorities and services that reflect the needs of the community. Mental health advocates (including consumers, family members, board and provider staff) have the opportunity to influence the development of employment and training priorities by seeking membership on local WIA boards.

RSC (Rehabilitation Services Commission) which is also known as the **VR (vocational rehabilitation) system** has a cooperative relationship in many communities with the local mental health systems with both systems benefiting from each other's expertise. Mental health benefits from the vocational rehabilitation knowledge of RSC staff. Mental health contributes support and clinical expertise. The cooperative relationship does not exist in every community, but is worth pursuing.

Most likely to benefit from RSC services are mental health consumers:

- who want to work
- who could benefit from training to achieve their career goal
- who might need rehabilitation technology for a physical disability

The VR system has some federal requirements that may limit services to consumers. These are:

- The RSC model encourages full time employment as a goal which may not be an appropriate goal for many consumers. All state vocational rehabilitation systems have goals around hours worked and wages earned. Some mental health consumers exit the VR system with part time work.
- RSC is an eligibility, not an entitlement program. This sometimes necessitates a longer than desirable waiting period rather than encouraging rapid choice and placement consistent with evidence based practices for supported employment services for persons with severe and persistent mental illness.
- The VR system provides time limited services, not the ongoing supported employment needed by many MH consumers.

Employment Services for Mental Health Consumers:

Some local mental health systems offer employment services that are designed for mental health consumers. These services typically provide assessment of consumers' work preferences and work skills, job development, job coaching, and follow along supports.

VI. Case Studies

Disclaimer:

- These are fictional case studies drawn from experiences with many consumers.
- The case studies do not meet requirements of Ohio Department of Mental Health (ODMH) Certification Standards or those of national accrediting bodies (i.e. CARF or JCAHO) for complete diagnostic/assessments and Individual Service Plans (ISPs).
- The case examples focus on services that support employment and exclude essential components of recovery and clinical services.
- Only the section of the ISP that includes employment is included. Thus, the ISP in these examples is intentionally incomplete.
- The progress notes are intended to be complete, but may exclude services that might be provided in the same visit that do not address supporting employment. The progress notes have not been reviewed against national accrediting standards.
- The intent of this section is to provide examples of service delivery, not of clinical forms. The documentation on these forms may be adapted to other forms being used.
- While the authors have attempted to remove errors in documentation, this document is not perfect and may have unintended errors. If you find an error, send corrections to GitterL@mh.state.oh.us or Liz Gitter, LISW, Ohio Department of Mental Health, 30 E. Broad Street, FL 8, Columbus, OH 43215-3430 or call 614-466-9963. Feedback will be used to update subsequent editions of this manual.

Content and Organization of this Section

The **purpose** of this section is to give examples of best practices of integrated supported employment. In these examples, we have illustrated how supported employment, an evidence based practice, can be integrated with CSP services and other services.

This section includes **three case studies of consumers**—a consumer who has been unemployed for a number of years, a newly diagnosed young adult consumer, and an older successfully employed consumer who experiences a relapse. Each case is intended to demonstrate:

- How **employment** can be a catalyst for recovery.
- How traditional **CSP services** can be adapted to support consumer employment while continuing to support other components of recovery.
- How the (research) evidence based practice “**supported employment**” which integrates CSP services, employment services, and financial benefits counseling can be accomplished. (Note: employment services and financial benefits counseling are not clinical services.)
- How **interview questions** can be used to incorporate recovery concepts and the red flags report into the development of an ISP without adding more paperwork.
- How **CSP services** that support employment can be **documented**.

The following three cases are organized in the following format:

- **Case description:** consumer’s strengths and assets, barriers to employment and needs for intervention, and prioritized treatment recommendations from diagnostic/assessment.
- **Recovery interview questions:** may be used to incorporate recovery concepts into the ISP (Individual Service Plan). As the ISP may be used to document the consumer’s responses, no new form is required.
 - **Ohio consumer outcomes:** referenced briefly in recovery interview question section—the red flags report may be used to identify needs that might be addressed by employment as a consumer goal which can be incorporated into the ISP, i.e., “having more money and more friends” might be reasons to seek employment.
- **Recovery Plan:** written by consumer in his/her own language (not CSP documentation)
- **ISP: employment section** only
- An **employment services plan** developed by consumer and employment specialist (not CSP documentation)
- **Progress notes documenting CSP** interventions that support employment for consumer.
- **Notes documenting services (not CSP)** from employment specialist and benefits counselor
- *This blue font with italics will be used to give good clinical practice tips.*

Tom Smith

Strengths/Assets

Tom wants to work, and to start by working part time—perhaps starting 12-20 hours per week. *(A consumer stating he/she wants to work is the best predictor of readiness for successful employment.)* He would like to work around people. He would like to have more money than his SSI check so he could get his own apartment and have more money to buy CDs and to go to movies more often. He would also like to have something to do besides stay home or go to the consumer drop-in center. He is currently living with his mother who is in her 80's and who is Tom's biggest cheerleader. Tom is a 35-year old high school graduate and attended Bowling Green University for three years. He has five years of working for a hospital as a janitor; however, he has not worked for eight years due to mental illness except for doing some odd jobs for his mother's friends. Tom stopped working after a hospitalization for depression in which both his concentration and his self-confidence were impaired. Tom says that when he worked as a maintenance worker at the hospital, he received satisfactory evaluations. Tom has many skills at fixing and painting, and often uses these skills in his own home and sometimes in the homes of his mother's friends. Tom says that he understands his illness, and has learned from experience that stopping medications doesn't work for him. Tom gets along well most of the time with people at the drop-in center and in his neighborhood. Most of Tom's friends are other consumers who he sometimes sees for coffee at McDonalds.

Barriers to Employment and Needs for Intervention

He cancels appointments if he has something more important to do such as be home when his SSI check arrives. Tom occasionally stops his medication, gets manic and makes some irrational and inappropriate phone calls to his CSP worker and possibly to his employer. When Tom gets depressed, he sometimes starts drinking which causes tardiness and missed days at work. He has been attending a weekly "Double Trouble" AA meeting that he reports is helpful.

Tom has impairments in his organization, memory, concentration, inattention to self care when manic or drinking, impulse control issues, diminished capacity for relationships, anxiety and substance abuse due to his mental illness (bipolar disorder) which impact his ability to work.

Prioritized Treatment Recommendations from Diagnostic Assessment

1. CSP, Med-Somatic and Crisis Services to assist Tom in educating himself about bipolar disorder and managing the symptoms of his bipolar disorder.
2. CSP and group counseling to assist Tom in becoming clean and sober—substance abuse probably triggered by bipolar disorder impulse control issues.
3. CSP and employment services to assist Tom in overcoming barriers to employment due to the symptoms, behaviors and thought processes due to his mental illness listed earlier in this document.
4. CSP services to provide education, advocacy and skills training to Tom's mother so that she can provide the support that Tom needs to manage his mental illness and return to work.

How Can I Use the Guide to Recovery Process Through Consumer Choice in Developing an Individual Service Plan Without Adding More Paperwork?

Hint: A guideline for process (outline of interview questions) for developing this plan may be found on page 13). The process itself can be documented on any ISP form your agency is using and is improved by substituting the consumer's language and examples from the consumer's life. If your agency is using Ohio Consumer Outcomes, the red flags report may be used to identify consumer's concerns discussed in questions 1-4 below, which might be linked to employment goals, i.e., having more money, having friends, etc.

1-4. You indicated that you are unemployed and would like to become employed. In comparison to your other priorities for recovery, where does employment rank? Is there another priority that you (the consumer) believe must be addressed first, i.e., homelessness, medication not working? Does employment address some of your other priorities (i.e., would getting a job help you reach other important goals such as meeting people, having something to do during the day or having more money to get a nicer home?). Would you like to be employed full time, part time, or not at all at the present time?

Consumer's response to these questions becomes Goal #2.

"I want to get a job and stay off benefits. I want a job in the evenings away from old drug friends."

- 5.** What steps do you need to take to choose, get and keep a part time job? Do you need to see a financial benefits counselor before you look for work?
- 6.** What skills and resources (personal and community) do you need to find a part time job?
- 7.** What skills and resources do you already have that would help you find work? (**Note: This uses consumer's words to describe "consumer's desired work status".**)
- 8.** What personal and community resources do you need to help you find employment?
- 9.** How does employment fit in with your other recovery goals?

Consumer's responses become objectives and interventions in Individual Service Plan (see example that follows).

This page is not traditional clinical documentation; it is a consumer's personal recovery plan work that may be incorporated into a clinical record and is considered in developing effective individual service plans.

Tom has developed the following recovery plan for himself at the Consumer Operated Drop-In Center that he has attended. He has shared it with his CSP worker.

Tom's Recovery Plan

1. I will look for work by asking my friends about available jobs while getting some assistance from an employment specialist and my CSP worker.
2. When I'm earning enough money, I'll find a better place to live near my girlfriend.
3. I will maintain sobriety by attending Double Trouble and calling my sponsor for support as needed.
4. I will work on making some new friends by socializing with new people when possible.

Below is the employment goal for Tom's ISP:

(Interventions and objectives are developed using data from the Recovery Process interview questions. If available, the consumer's recovery plan and/or a red flags report from Ohio Consumer Outcomes may be used as additional sources of information for the ISP.)

Client Name	Client #
Individual Service Plan	

The Goals below must be coordinated with "Treatment Recommendations" on the current Diagnostic Assessment/Update of 6/16/05 (date).

Goals	Goal # 2	Treatment Recommendation: #3 as prioritized from Tom's Diagnostic/Assessment	Start Date:
Describe below in Client's words:		Client's Initials:	Target Completion Date: 12/31/05
I want to get a job and get off of benefits. I want a job in the evenings away from old drug using friends.			Adjusted Target Date:
			Reason for Adjustment:
Desired Outcomes: Tom will be hired and start working at a job that meets his stated needs and gets him into the work force earning money.			
Strengths: Intelligent, supportive family, desire to work, hopeful about his future			
Skills/Knowledge Needed: Assistance with learning how to compensate for disabilities due to symptoms of mental illness on the job and assistance with maintaining sobriety.			
Natural/Community Supports Needed: Sober living support, encouragement, and support to start a job.			

OBJECTIVE #1: Tom will explore job opportunities available and decide which meet his immediate needs. He will submit applications for the ones he chooses.			Start Date: 6/30/05	Target Date: 7/30/05
Therapeutic Intervention	Service Description	Frequency	Responsible: Consumer, Provider/Credential, community, other	Duration
Arrange employment service assessment, participate in meeting with employment specialist, and Tom to provide CSP assessment information to employment specialist and coordinate CSP & employment services in ISP.	CSP Services coordinating and linking with employment services	One meeting plus phone calls and additional as needed	Sunny Day, Trained Other	3 months
Arrange a meeting with a benefits specialist to give Tom information about how his SSI and Medicaid benefits will be impacted by differing amounts of income. Assist Tom who may have memory limitations due to mental illness to process this complex information.	CSP Services and Benefits Specialist services	1-3 meetings	Sunny Day, Trained Other Bob Dollars, Benefits Specialist	3 months

Therapeutic Intervention	Service Description	Frequency	Responsible: Consumer, Provider/Credential, community, other	Duration
Facilitate the development of a list of elements Tom is looking for in a job. Assist Tom in exploring jobs, provide support and feedback, facilitate informed decision making, problem solving.	Employment Services lead CSP provide additional support as needed to address MH issues	2 times/week	Sunny Day, Trained Other John Jones , Employment Specialist	1 month
Assist Tom in completing and submitting job applications. Assist with planning, preparing, and problem solving. Provide off-site support and feedback to Tom, as he wants to do this independently.	Employment Services; CSP address MH issues if they arise	3 times/week	Sunny Day, Trained Other John Jones, Employment Specialist	1 month

OBJECTIVE #2: Tom will complete the applying and hiring process and start a job that meets his needs.	Start Date: 7/30/05	Target Date: 12/31/05
--	-------------------------------	---------------------------------

Therapeutic Intervention	Service Description	Frequency	Responsible: Consumer, Provider/Credential, community, other	Duration
Provide off-site support, feedback, information processing, and problem solving with Tom as he applies for and interviews for jobs.	Employment Specialist lead; CSP address MH issues as needed	2 times/week	John Jones, Employment Specialist Sunny Day, Trained Other	4 weeks
Provide off-site support when Tom starts new job. Facilitate planning for work, and ongoing problem solving and feedback.	Employment Specialist lead; CSP address MH issues as needed	2 times/week	John Jones, Employment Specialist Sunny Day, Trained Other	4 months
Facilitate a meeting with Tom and his Mom to discuss his support needs and expectations in his new role as worker.	CSP	3 times and evaluate if additional meetings are needed	Sunny Day, Trained Other	4 weeks
Provide assistance as requested by Tom on assistance with the practical tasks required outside of work to maintain employment including, but not limited to reporting income changes to SSI and Medicaid, purchasing an alarm clock and work clothing, and developing strategies to manage symptoms of mental illness on the job.	CSP	1-2 times per week as needed	Sunny Day, Trained Other	4 weeks

OBJECTIVE #3: Tom will develop the supports he needs to stay in the job he has started and work successfully. Tom will decide and state what his next employment step/goal will be.			Start Date: 9/01/05	Target Date: 12/31/05
Therapeutic Intervention	Service Description	Frequency	Responsible: Consumer, Provider/Credential, community, other	Duration
Assist Tom in identifying, planning, and developing supports necessary. Advocate, link, and refer as necessary to develop these supports.	Employment Specialist supports at work CSP supports outside of work	1 time/week	Sunny Day, Trained Other John Jones, Employment Specialist	4 weeks
Facilitate discussions with Tom about long-term goals, likes, and dislikes about current job. Assist Tom in planning what his next career step will be, i.e., school, stay in current job, try another job. Problem-solve, provide feedback, and advocate as necessary.	Employment Specialist CSP – coordinate as part of ISP	1 time/week	Sunny Day, Trained Other John Jones, Employment Specialist	4 months
Assist Tom in developing natural (unpaid) supports at work and in neighborhood. Ongoing support at minimum level needed to function successfully at work.	CSP worker	As needed 1-8 times/month, decreasing if possible	Sunny Day, Trained Other	6 months and ongoing as needed

Actual Date of Completion:	Discontinued Date:
Client Name: Allen Able	Client #: 00000000

Below is an employment services plan for non-clinical employment services developed by an Employment Specialist with Tom Smith. The employment services plan is for non-clinical services and does not need to meet Medicaid and other medical insurance type criteria. Employment services are services that a job seeker with challenges other than mental illness might also use. Examples of such challenges are physical disabilities or long-term unemployment.

Employment Service Plan for Tom Smith

Developed by: Tom Smith & John Jones, CRC

Start Date: 07/05/05

Anticipated ending date: 12/30/05

1. Employment Specialist will meet with Tom Smith and CSP worker to assess Tom Smith's employment strengths and job preferences.
2. The Employment Specialist will participate in the weekly team meetings with Tom's CSP worker, and will use these meetings to exchange information and coordinate services with Tom's mental health treatment.
3. Facilitate the development of a list of elements Tom is looking for in a job. Assist Tom in exploring jobs, provide support, feedback, facilitate informed decision making, and problem solving.
4. Assist Tom in completing and submitting job applications. Assist with planning, preparing, and problem solving. Provide off-site support and feedback to Tom, as he wants to do this independently. This will include problem solving around Tom's concerns about losing Medicaid and SSI benefits as he begins working.
5. Provide off-site support, feedback, information processing and problem solving with Tom as he applies for and interviews for jobs.
6. Provide off-site support when Tom starts new job. Facilitate planning for work and ongoing problem solving and feedback.
7. Assist Tom in identifying, planning, and developing supports necessary. Advocate, link, and refer as necessary to develop these supports. (Note: Co-workers and supervisors should be considered possible supports.)
8. Facilitate discussions with Tom about long term goals, likes, and dislikes about current job. Assist Tom in planning what his next career step will be, e.g., school, stay in current job, try another job, etc. Problem solve, provide feedback, and advocate as necessary.
9. Refer Tom to his CSP worker for ongoing support when employment services are terminated. *(As most employment services are time limited, CSP services are used to provide longer term supports to consumers who need them. Unlike employment services, CSP services must be medically necessary to address the symptoms, thought or behaviors caused by mental illness.)*

Signature: John Jones, CRC

Signature: Tom Smith, Consumer

Date: 6/30/05

CSP Interventions that Improve Employment Outcomes

Consumer: Tom Smith **Date:** 6/30/05
Starting Time: 8:00 a.m. **Stopping Time:** 9:00 a.m. **Duration:** .1 hours of 1.0 hour
 CSP team meeting.
CSP Billable time, if different from duration: 0 hours—team meeting without consumer
Location: Office—staff meeting
Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary
Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input checked="" type="checkbox"/> Not applicable	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to <input type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP:

Goal #2 "I want to get a job and stay off benefits. I want a job away from old drug friends."

Objective #1 Tom will explore job opportunities available and decide which meet his immediate needs. He will submit applications for the ones he chooses.

Therapeutic Interventions and Response to Interventions:

In the weekly CSP team meeting, the CSP worker talked with John Jones, Employment Specialist, to make a referral for Tom. An employment planning meeting was scheduled 7/05/05 that includes Tom, the CSP worker and the Employment Specialist. The purpose of the employment planning meeting will be to assess Tom's work preferences and discuss what services are needed to support Tom becoming employed. At that meeting, Tom and the CSP worker will give work history, symptoms of mental illness related to work and respond to the Employment Specialist's questions. Other team members who had worked with Tom also gave information about his substance abuse history including drinking when angry. The psychiatrist commented that Lithium used during manic episodes may cause some hand tremors as side effects which could interfere with fine motor skills required in some work. The CSP worker also agreed to send the Employment Specialist a copy of the most recent Diagnostic Assessment, ISP, and Release of Information.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

Note: The evidence based practice of supported employment includes integration between employment services and clinical services. Recovery principles indicate that Tom, the consumer, needs to be present and an active participant in developing his ISP with the CSP worker and the Employment Plan with the Employment Specialist.

CSP Interventions that Improve Employment Outcomes

Consumer: Tom Smith

Date: 7/05/05

Starting Time: 1 p.m.

Stopping Time: 3 p.m.

Duration: 2 hours

CSP Billable Time, if different from duration: _____

Location: Employment Specialist's Office

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP:

Goal: "I want to get a job and stay off of benefits. I want a job in the evenings away from old drug friends."

Objective #1: Tom will explore job opportunities available and decide which meet his immediate needs. He will submit applications for the ones he chooses.

Therapeutic Intervention and Response to Intervention:

The CSP worker and the Employment Specialist met with Tom to complete an assessment of skills, experience, and desired work. With assistance of the CSP worker and the Employment Specialist, Tom identified the steps he will need to complete to re-enter the workforce. Tom would like some assistance with 1) identifying some possible part time jobs so he can try working, 2) skill development in building working relationships including responding to supervisor, 3) information about how working would impact his SSI and Medicaid to enable him to make informed decisions, and 4) symptom management techniques for managing his depression when he's working.

Much of the session was devoted to identifying Tom's work preferences. Tom's preferences include: working evenings to facilitate minimizing substance abuse, working 12-20 hours per week which includes some people contact, work that uses his skills fixing things or cleaning things, and work he can do without needing a car.

Tom is eager to find work soon, and says he's more likely to keep a job longer that meets his work preferences. He was pleased with a plan to meet with a benefits specialist and his CSP worker for his next appointment.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

Treatment Communication: Not billable as a part of staff meeting communication

The CSP worker briefly discussed Tom's intentions to work with Dr. Nimble, psychiatrist, at team meeting, and asked if the timing of Tom's evening medication could be adjusted to reduce evening drowsiness if he took an evening job. Dr. Nimble indicated that Tom could simply shift the dosage of his medication later by 1-4 hours per day, if needed. Dr. Nimble indicated that he would communicate this to Tom at his next appointment. The CSP worker said she would mention this to Tom and encourage him to talk about this issue at his next scheduled appointment.

CSP Interventions that Improve Employment Outcomes

Consumer: Tom Smith

Date: 7/10/05

Starting Time: 2:00 p.m. **Stopping Time:** 3:30 p.m. **Duration:** 1.5 hours

(If the benefit specialist and the CSP worker have the same employer, only one of them may bill for the time.)

CSP Billable Time, if different from duration: 1.3 hours (.2 hours non-billable: Tom slept in car on the way home.) *(Note: this proactively addressed a potential audit issue.)*

Location: Benefits specialist's office

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Tom's mood was mildly depressed.
	Thought Process/Orientation <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Tom's speech was slower than usual.
	Behavior/Functioning <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Fell asleep in car.
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP:

Goal: "I want to get a job and stay off of benefits. I want a job in the evenings away from old drug friends."

Objective #1: Tom will explore job opportunities available and decide which meet his immediate needs. He will submit applications for the ones he chooses.

Therapeutic Intervention and Response to Intervention:

While driving, the CSP worker asked Tom to describe the concerns he wanted to address with the benefit specialist today and assessed Tom's mental status. While at the benefit specialist's office, the CSP worker assisted Tom when his attention wandered due to bipolar disorder. The CSP worker encouraged Tom to take notes while the benefit specialist was explaining how much Tom could earn while continuing to keep SSI and Medicaid, and how 1619b allows Tom to keep Medicaid while working as long as his income is within certain limits. As Tom was having trouble concentrating due to symptoms of bipolar disorder, the CSP worker took notes about reporting requirements and asked Tom if he would like a copy. Tom indicated that he would. Based on the information that Tom was given, he decided that his plan to work 12-20 hours per week would allow him to maintain his Medicaid benefits and would give him more income. The benefits specialist indicated that he would be available by phone if either Tom or the CSP worker had questions. The CSP worker indicated that she would be willing to assist Tom by reminding him for the first few months to report to Social Security (SSI) and Job & Family Services (Medicaid). The benefit specialist also offered to contact Job & Family Services to advocate for Tom using 1619b, as he had some experience with Job & Family Services not being aware of 1619b. The benefit specialist also asked Tom to sign a release of information so that he could get 1619b information from Social Security to give to Job & Family Services.

Tom agreed to sign a release of information for the benefits specialist to contact Job & Family Services to advocate on his behalf about 1619b. He seemed pleased with the information he had received. Due to poor sleep the previous evening, he dozed in the car on the way home.

Signature/Credential: *Sunny Day, Trained Other*

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Tom Smith **Date:** 7/17/05
Starting Time: 3:00 p.m. **Stopping Time:** 4:30 p.m. **Duration:** 1.5 hours

CSP Billable Time, if different from duration: _____

Location: Consumer's home

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Back to usual for Tom.
	Thought Process/Orientation <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Back to usual for Tom.
	Behavior/Functioning <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Back to usual for Tom.
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property <input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:	

Goal(s) Objective(s) Addressed from ISP:

Goal: "I want to get a job and stay off of benefits. I want a job in the evenings away from old drug friends." #1 Tom will explore job opportunities available, decide which meet his immediate needs. He will submit applications for ones he chooses. Therapeutic Intervention and Response to Intervention: The CSP worker discussed the job referrals that John Jones, Employment Specialist, had made in relationship to Tom's life and mental health issues. The CSP worker is encouraging Tom to apply for all of them, and to make decisions after further information is gathered in the application process. The CSP worker encouraged Tom to identify practical problems that would need to be solved for him to work. With the CSP worker's assistance, Tom indicated that he would need to buy an alarm clock and start using it, might need to buy uniforms, would need to decide how to handle questions from co-workers about being unemployed, and would need to develop strategies for handling anger in work place. The CSP worker and Tom discussed how Tom could talk about the maintenance work he'd been doing for his Mom's friends as employment for the past few years, and role played how to do that. The CSP worker and Tom discussed strategies for handling anger. Strategies that Tom can use include verbal response of "I would like to discuss this later", Tom taking a brief time out in the bathroom, and venting appropriately to his Double Trouble Substance Abuse group, friends, family or CSP worker. They also talked about how Tom could identify days on which he might be particularly irritable because of bipolar disorder, and limit confrontation on those days.

Tom liked the ideas re: handling of question about prior employment. Tom wasn't sure that the strategies for managing anger on the job would work well for him when he became really angry as he sometimes does. Tom thought that the anger management strategy most likely to work was the time out and said he would try that strategy first.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Tom Smith **Date:** 7/20/05
Starting Time: 3 p.m. **Stopping Time:** 3:24 p.m. **Duration:** .4 hours

CSP Billable Time, if different from duration: _____

Location: Telephone

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face Visit	<input type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Depressed in reaction to not getting job at Wendy's
	Thought Process/Orientation <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Worried that not getting one job means he won't get any
	Behavior/Functioning <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Considering getting drunk, but decided not to.
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP: Goal #1: "I want to get a job and stay off of benefits. I want a job in the evenings away from old drug friends." #2 Tom will complete the applying and hiring process and start a job that meets his needs.

Therapeutic Intervention and Response to Intervention: In responding to Tom being angry and upset that he was turned down for a job, the CSP worker explained that getting turned down is expected in any job search and doesn't mean that Tom will have difficulty getting any job. The CSP worker challenged Tom's catastrophic thinking, and encouraged him to ask his friends about how many jobs applications had resulted in getting turned down. The CSP worker also encouraged Tom to think about this as one "no" in a series of "no's" that are a part of any job search. The CSP worker supported Tom's decision not to get drunk, encouraged him to call his AA sponsor and attend some extra AA meetings.

Tom said he can handle some more "no's" in the job hunt. He said he'd call his AA sponsor, but didn't want to attend a new AA meeting where he didn't know anyone.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Tom Smith **Date:** 7/22/05
Starting Time: 3 p.m. **Stopping Time:** 4:30 p.m. **Duration:** 1.5 hours
CSP Billable Time, if different from duration: _____
Location: Consumer's home
Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary
Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Tom is appropriately happy in response to job offer.
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input checked="" type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input checked="" type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other: <input type="checkbox"/> Others <input type="checkbox"/> Property	

Goal(s) Objective(s) Addressed from ISP:

Goal: "I want to get a job and stay off of benefits. I want a job in the evenings away from old drug friends." Tom will explore job opportunities available and decide which meet his immediate needs. He will submit applications for ones he chooses.

Therapeutic Intervention and Response to Intervention: Tom started out the session by announcing that he had accepted a position staffing the desk at the gym at the YMCA from 5–10 p.m., Wednesday–Sunday, starting in three days. The CSP worker congratulated him. The CSP worker assisted Tom in making a list of things to do so that he is ready to work. Tom indicated that he did not need new clothes or an alarm clock for this job. The CSP worker reminded him that he would need to report to Social Security and Job and Family Services his change in employment and income status, and agreed to assist Tom in doing that during his next appointment. Together during this appointment, the CSP worker and Tom called the benefit specialist who did some quick calculations to tell Tom exactly what he might expect. Tom is delighted that he will be able to keep his Medicaid through 1619b without incurring a spend down. Together, they also called Job and Family Services and had a conversation with Tom's Medicaid caseworker about what information he needed to provide to continue getting Medicaid using 1619b. Tom also indicated that he'd like to take his evening medication an hour later to avoid drowsiness on the job which the psychiatrist had said was OK. As Tom was concerned about getting anxious, the CSP worker indicated that he could use deep breathing even while on the job as a way of decreasing anxiety, and commented that most people are anxious the first day on a new job. The CSP worker demonstrated how to do deep breathing and coached Tom in practicing it. Tom is delighted to be going to work later this week. He's a bit overwhelmed with dealing with a new job, as well as SSI and Medicaid.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Tom Smith **Date:** 7/22/02
Starting Time: 4:30 p.m. **Stopping Time:** 4:42 p.m. **Duration:** .2 hours
CSP Billable Time, if different from duration: 0 if CSP worker and Employment Specialist have the same employer. **Location:** CSP worker’s office
Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary
Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client’s Condition for Face to face Visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP:

Goal: “I want to get a job and stay off of benefits. I want a job in the evenings away from old drug friends.” Tom will complete the hiring process and start a job that meets his needs.

Therapeutic Intervention and Response to Intervention:

Using three-way calling, the CSP worker contacted Tom Smith, consumer, and John Jones, Employment Specialist, to coordinate support for Tom as he begins work. They agreed Tom (consumer) would take primary responsibility for getting and keeping a job. They agreed that John (employment specialist) would take the lead in support around job related issues—i.e. getting along with supervisor, and that CSP worker would take the lead around less directly related issues—talking with psychiatrist and Mom and addressing issues specifically related to management of symptoms of mental illness. John Jones is particularly concerned that Tom continue to attend a Double Trouble group (substance abuse group) that meets at 1 p.m. Mondays and Wednesdays.

Tom agrees he needs to attend the Double Trouble group to make his job work. Tom is pleased with the support he is getting from the Employment Specialist, and would like to make friends in his work place.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Tom Smith **Date:** 7/25/05
Starting Time: 3 p.m. **Stopping Time:** 3:48 p.m. **Duration:** .8 hours
CSP Billable Time, if different from duration: _____
Location: Consumer's home & CSP's car
Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary
Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face Visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP: Goal: "I want to get a job and stay off of benefits. I want a job in the evenings away from old drug friends." Tom will complete the application and hiring process and start a job that meets his needs.

Therapeutic Intervention and Response to Intervention: At consumer's home, the CSP worker talked with Tom about his expectations on the first day of work and explained that most people are somewhat anxious on their first day of work at a new job. They spent time dealing with anticipatory anxiety, addressing issues that Tom raised about meeting new co-workers and when to get lunch and a smoke break. The CSP worker complimented Tom on being ready, appropriately dressed, and ready to go to work. These issues arise primarily because Tom has been unemployed for a number of years due to mental illness. While driving, the CSP worker asked Tom about any concerns he might have about managing mental health symptoms on the first day of work. (Note: A proactive audit approach: While driving, the CSP worker did mental health intervention—clearly indicates that treatment intervention was occurring during drive.)

Tom thought he might have a bit of a problem with concentration, but decided he could ask people to repeat something if needed. He was eager to work.

Signature/Credential: Sunny Day, Trained Other **Signature Date:** _____

CSP Interventions that Improve Employment Outcomes

Consumer: Tom Smith

Date: 7/28/05

Starting Time: 3 p.m.

Stopping Time: 4 p.m.

Duration: 1 hour

CSP Billable Time, if different from duration: _____

Location: Consumer's home

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face Visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP:

Goal: "I want to get a job and stay off of benefits. I want a job in the evenings away from old drug friends." Tom will complete the application and hiring process and start a job that meets his needs.

Therapeutic Intervention and Response to Intervention: The CSP worker inquired about Tom's work. Tom said his employment was going well. He did have some concerns about his co-workers asking him some nosy questions about whether he had a girlfriend. Due to having been unemployed because of mental illness, Tom had not developed the social skills to handle these questions. The CSP worker assisted Tom in role-playing some possible responses to these questions. The CSP worker also assisted Tom in contacting Bob Dollars, benefits specialist. Bob agreed to write letters on behalf of Tom to Job & Family Services and Social Security, and will send both Sunny Day and Tom a copy of those letters. Tom had some concern about needing another cigarette break at work. The CSP worker recommended that Tom either talk to his co-workers or supervisor as to whether this was possible. If not, Tom might want to talk with his physician about a nicotine patch or using nicotine gum to get through his work.

Tom appreciated the assistance in dealing with a nosy co-worker. Tom is still uncomfortable about losing benefits, but is glad to have the benefits specialist assisting him.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Tom Smith

Date: 8/05/05

Starting Time: 2 p.m.

Stopping Time: 3 p.m.

Duration: 1 hour

CSP Billable Time, if different from duration: _____

Location: Consumer's home

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face Visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP:

Goal: "I want to get a job and stay off of benefits. I want a job in the evenings away from old drug friends." Tom will complete the applying and hiring process and start a job that meets his needs.

Therapeutic Intervention and Response to Intervention: The CSP worker used active listening while Tom expressed his anger at his supervisor for telling him that he needed to tell teenage boys in the pool area to stop yelling. Tom says this shouldn't be part of his job, and that it isn't his fault that the boys are yelling. The CSP worker asked Tom to imagine himself in his supervisor's shoes, and asked how he would handle the problem. Tom says, if he were the supervisor, he would confront the boys. The CSP worker asked where the supervisor normally worked, and where Tom normally worked. The CSP worker also asked Tom about how well he had been sleeping, and how Tom was doing with taking his meds to assist Tom in evaluating if his mental health symptom management had impacted this issue at work. Based on Tom's response that he wasn't sleeping well, but was taking his medication regularly, the CSP worker asked Tom if he might be a bit irritable due to depression that may make him less tolerant of yelling adolescent boys. The CSP worker recommended some exercise—perhaps taking a half hour walk earlier in the day before going to work--as one way for Tom to increase his tolerance of stress. Also, the CSP worker commented that most people feel angry with adolescent boys for yelling.

Tom agreed that walking might help him be more tolerant of normal workday stresses and agreed to try it. Tom believes that not sleeping periodically is just a normal part of his life, and isn't particularly concerned about it. He still thinks that it's his boss's problem, and nobody is going to change his mind.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Tom Smith

Date: 8/12/05

Starting Time: 2 p.m.

Stopping Time: 3 p.m.

Duration: 1 hour

CSP Billable Time, if different from duration: _____

Location: Consumer's home

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Blank look on face & appeared depressed
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input checked="" type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input checked="" type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP:

Goal: "I want to get a job and stay off of benefits. I want a job in the evenings away from old drug friends." Tom will complete the applying and hiring process and start a job that meets his needs.

Therapeutic Intervention and Response to Intervention: The CSP worker learned that Tom had gone drinking with a co-worker after work, and had drunk a six-pack of beer. Tom reported feeling lousy, and really not wanting to go to work today, but was not currently intoxicated. The CSP worker talked with Tom about drinking is incompatible with working and feeling good while managing bipolar disorder. The CSP worker also talked with Tom about relapse prevention strategies, recommended that Tom talk with his AA Double Trouble sponsor, and talk with his substance abuse counselor. The CSP worker asked Tom to explain why he wanted to work and to talk about the rewards of work, and how he thought drinking might affect that. The CSP worker worked with Tom to develop a written relapse prevention plan which includes avoiding going to bars, including after work activities he can do, and people he can call if he has strong cravings to drink. The CSP worker also explained that relapse is a part of recovery, and doesn't have to be a major downward slide.

Tom says he thinks it's possible for him to drink one or two beers and still work. He did the writing on the relapse plan, and said he would carry it in his wallet. He has decided that he will invite his co-worker to go to a coffee shop for decaffeinated coffee after work instead of a bar the next time.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Due to space limitations, we have left out a number of contact notes in which Tom is doing rather well. Tom has now been on the job for five months and will be ending work with the employment specialist. This note reflects that transition.

Consumer: Tom Smith

Date: 11/30/02

Starting Time: 1 p.m.

Stopping Time: 2 p.m.

Duration: 1 hour

CSP Billable Time, if different from duration: _____

Location: Employment Specialist's office

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building

Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP:

Goal: "I want to get a job and stay off of benefits. I want a job in the evenings away from old drug friends." Tom will develop the supports he needs to stay in the job he has started and work successfully. Tom will decide and state what his next employment step/goal will be.

Therapeutic Intervention and Response to Intervention: The employment specialist, CSP worker and Tom are meeting together to discuss Tom's next step with his career. Tom is continuing to do well on the job, but continues to be challenged to manage irritability due to his bipolar disorder. Tom was asked to state what kind of work he would like to be doing next month, and one year from now. Tom is currently satisfied with working part time at the YMCA. He would like to continue that job for another six months, and evaluate at that time if he is ready to seek full time employment. The CSP worker and the employment specialist supported that decision. Tom continues to have issues around drinking and depression. The CSP worker also encouraged Tom to talk about what he would be doing if he didn't have to deal with having been unemployed for five years. Tom said he would like to be working full time with benefits, and be able to get married. The employment specialist and the CSP worker encouraged Tom to think about how he might accomplish full time work in the future.

Tom would eventually like to work full time. However, at this time, he would like to stay part time so he can continue getting benefits. Tom's goal is to complete a year of part time work before considering full time higher paying jobs with more responsibility, better pay and more stress.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

Allen Able

Strengths/Assets: Allen Able is an eighteen-year-old African American male who was discharged from the state hospital six months ago after his first hospitalization for paranoid schizophrenia. Prior to this hospitalization, he had not received any treatment for mental illness. However, from his personal history, it was evident that some signs of mental illness were present for one to two years prior to his hospitalization. His symptoms became worse when a drug dealer murdered his best friend. Allen indicates that he had been using marijuana daily for two years to reduce auditory hallucinations so he can sleep. After his friend's murder, he is motivated to stop using marijuana.

Allen lives with his mother and two younger brothers, Jake, 15, and Tom, 7, in the Linden area of Columbus. He likes to play guitar and baseball. In grade school and middle school, he was a C & D student with some indications of a learning disability. He completed eleventh grade with some special education courses in high school and is two courses short of a high school diploma.

When asked what he'd like to be doing five years from now, Allen states that he'd like a job, his own apartment, a car, a girlfriend and some friends. He believes that he needs to keep busy to stop using marijuana, and wants to work as a way of keeping busy. Allen has some concentration and short-term memory problems. He'd like to work in a sales position eventually, and has an outgoing personality. Right now, he wants a job that does not require him to work in the morning and will keep him busy in the evenings.

Allen wants to apply for a job as a cook at Pizza Restaurant in his neighborhood. His drug using friends don't hang out there. He's willing to work with an employment specialist.

Allen's mother is worried that he will relapse. She likes having him around to baby-sit his youngest brother. Allen's mother works as a nurse's aid at a local nursing home.

Barriers to employment and needs for intervention: Allen has no prior work history, and may need to learn what is expected at work. He recently received SSI and Medicaid, but would like to replace these benefits with more income from employment. He may need to learn about expected social interaction with co-workers and how to handle supervision. Allen would benefit from completing his high school diploma, but chooses not to return to school at this time. Allen may need some assistance around tolerating background noise, and addressing some impairment of short-term memory and concentration due to schizophrenia. Even while taking his medication, he sometimes hears voices that seem real telling him that he is a bad person who will go to hell. The voices were very loud, persistent and distracting before he started taking medication and interrupting them with music from a personal CD player or snapping a rubber band on his wrist. He may also need some feedback if he has some difficulty with misinterpreting other people's behavior when he gets symptoms of paranoia that are a part of schizophrenia. Allen may also benefit from meeting other people with schizophrenia who are successfully working and learn what works for them.

Treatment Recommendations and Assessed Prioritized Needs :

1. Allen needs to continue to learn more about managing his symptoms of schizophrenia using medication and other techniques. Bridges training (training by consumers on mental illness) may be useful.
2. Allen needs treatment and support to abstain from marijuana. A Double Trouble Substance Abuse group may be helpful. Motivational interviewing may also be helpful.
3. Allen wants a job. Provide CSP Services to assist him in finding, getting and keeping a job.
4. Allen's goals and his mother's needs are sometimes in conflict. Provide education and support to Allen and his mother about his diagnosis and support needs.

How Can I Use the “Guide to Recovery Process Towards Employment Through Consumer Choice” in developing an Individual Service Plan without adding more paperwork?

Hint: A guideline for process (outline of interview questions) for developing this plan may be found on pages 13 and 14. *(The questions from the process are included in italics for your convenience.)* **The process itself can be documented on any ISP form your agency is using and is improved by substituting the consumer's language and examples from the consumer's life.**

- 1-4.** On your (red flags) outcome report, you indicated that you are currently unemployed. How satisfied are you with not working? Would you like to get a job? Full time, part time or not at the present time? Is this a priority for you at this time?

Consumer's response to these questions becomes Goal #2:

“I want to get a job that will give me enough money to get my own apartment. I prefer a job at a restaurant within walking distance of my home which has evening hours.”

5. What steps do you need to take to choose, get, and keep a part time job?
6. What skills and resources (personal and community) do you need to find work?
7. What skills and resources do you already have that would help you find work? **(Note: This uses consumer's words to describe consumer's desired work status.)**
8. What personal and community resources do you need to help you maintain your desired employment status?
9. How does employment fit in with your other recovery goals?
Consumer's responses become objectives and interventions in Individual Service Plan. See highlighted items in example that follows.

Allen Able has made this short recovery plan for himself:

- 1. I will get enough money to have my own place a year from now by getting a job.**
- 2. I will look for a restaurant job that I can walk to.**
- 3. I will attend Double Trouble to keep marijuana from messing up my life, and use the assistance of a sponsor.**
- 4. I will take responsibility for what I can change and give the rest to God.**
- 5. I will make new friends at the gym who don't do drugs or get drunk.**
- 6. I will do everything I can for myself.**
- 7. I will ask my CSP worker to assist me with getting information about jobs, Medicaid and SSI.**

Note: Allen's recovery plan for himself includes items that have nothing to do with mental health services.

Recovery plans may be included in clinical records as addendums to Individual Service Plans (ISPs) if your employer has not made specific provisions to integrate recovery plans into ISPs.

The Goals below must be coordinated with “Treatment Recommendations” on the current Diagnostic Assessment/Update of 6/16/05 (date).

Goals	Goal # 2	Treatment Recommendation # from DA: 3, 4	Start Date: 6/30/05
Describe below in Client’s words:		Client’s Initials:	Target Completion Date: 12/31/05
I want a life. I want more money. I want to get a job in the evenings and stay away from drug using friends.			Adjusted Target Date:
			Reason for Adjustment:
Desired Outcomes: Allen will be hired and start working at a job that meets his stated needs and gets him into the work force earning money.			
Strengths: Supportive family, desire to work, hopeful about his future			
Skills/Knowledge Needed: Basic job skills since he has no work history, coping skills to avoid marijuana use, and skills to manage symptoms of mental illness—short term memory deficits, impaired concentration, interpreting relationships, and screening out noise that makes employment more challenging.			
Natural/Community Supports Needed: “Double Trouble” support, encouragement and support to start a job			

OBJECTIVE #1: Allen will explore job opportunities available and decide which meet his immediate needs. He will submit applications for the ones he chooses.			Start Date: 6/30/05	Target Date: 7/30/05
Therapeutic Intervention	Service Description	Frequency	Responsible: Consumer, Provider/Credential, community, other	Duration
Arrange employment service assessment, participate in meeting with employment specialist, and Allen to provide CSP assessment information to employment specialist and coordinate CSP & employment services in ISP.	CSP Services and employment services	One meeting plus additional as needed	Sunny Day, Trained Other	3 months
Arrange a meeting with a benefit specialist to give Allen information about how his SSI and Medicaid benefits will be impacted by differing amounts of income. Assist Allen who has short-term memory and attention deficits to process this information.	CSP Services and Benefit services	One meeting plus additional contacts as needed.	Sunny Day, Trained Other Bob Dollars, Benefits Specialist	3 months
Facilitate the development of a list of elements Allen is looking for in a job. Assist Allen in exploring jobs, provide support and feedback, facilitate informed decision making, problem solving.	CSP & Employment Services	2 times/week	Sunny Day, Trained Other John Jones, Employment Specialist	1 month
Assist Allen in completing and submitting job applications. Assist with planning, preparing, and problem solving. Provide off-site support and feedback to Allen, as he wants to do this independently.	CSP & Employment Services	3 times/week	Sunny Day, Trained Other John Jones, Employment Specialist	1 month

OBJECTIVE #2: Allen will complete the applying and hiring process and start a job that meets his needs.			Start Date: 7/30/05	Target Date: 12/31/05
Therapeutic Intervention	Service Description	Frequency	Responsible: Consumer, Provider/Credential, community, other	Duration
Provide off-site support, feedback, information processing, and problem solving with Allen as he applies for and interviews for jobs.	Employment Specialist—lead CSP—address MH issues as needed	1 time/week	John Jones, Employment Specialist Sunny Day, Trained Other	4 weeks
Provide off-site support when Allen starts new job. Facilitate planning for work, and ongoing problem solving and feedback.	Employment Specialist—lead CSP—coordinate services	1 time/week	John Jones, Employment Specialist Sunny Day, Trained Other	4 months
Facilitate a meeting with Allen and his Mom to discuss his support needs and expectations in his new role as worker.	CSP	2-3 meetings	Sunny Day, Trained Other	4 weeks

OBJECTIVE #3: Allen will develop the supports he needs to stay in the job he has started and work successfully. Allen will decide and state what his employment step/goal will be.			Start Date: 9/01/05	Target Date: 12/31/05
Therapeutic Intervention	Service Description	Frequency	Responsible: Consumer, Provider/Credential, community, other	Duration
Assist Allen in identifying, planning, and developing supports necessary. Advocate, link, and refer as necessary to develop these supports.	CSP	1 time/week	Sunny Day, Trained Other	4 weeks
Facilitate discussions with Allen about long-term goals, likes, and dislikes about current job. Assist Allen in planning what his next career step will be, i.e., school, stay in current job, try another job. Problem solve, provide feedback, and advocate as necessary.	Employment Specialist CSP – coordinate as part of ISP	1 time/week	Sunny Day, Trained Other	4 months

Actual Date of Completion:	Discontinued Date:
Client Name: Allen Able	Client #: 00000000

The Employment Specialist will develop an Employment Service Plan for Allen Able. This plan does not need to meet Medicaid requirements, but should be coordinated in the Individual Service Plan. Below is Allen Able's Employment Service Plan.

Employment Service Plan for Allen Able

Developed by: Allen Able & John Jones, CRC

Start Date: 07/05/05

Anticipated ending date: 12/30/05

1. Employment Specialist will meet with Allen Able and CSP worker to assess Allen's employment strengths and job preferences.
2. The Employment specialist will participate in the weekly team meetings with Allen's CSP worker, and will use these meetings to exchange information and coordinate services with Allen's mental health treatment.
3. Facilitate the development of a list of elements Allen is looking for in a job. Assist Allen in exploring jobs, provide support, feedback, facilitate informed decision making, problem solving.
4. Assist Allen in completing and submitting job applications. Assist with planning, preparing and problem solving.
5. Provide both on and off site support, feedback, information processing and problem solving with Allen as he applies for and interviews for jobs.
6. Provide on-site support when Allen starts new job. Facilitate planning for work and ongoing problem solving and feedback.
7. Assist Allen in identifying, planning and developing supports necessary. Allen has identified a need for assistance with arranging transportation and group support for abstaining from substance abuse. Allen also believes going to the gym may help him cope with on the job stress.
8. Facilitate discussions with Allen about long term goals, likes, dislikes about current job. Assist Allen in planning what his next career step will be, i.e., finish high school, stay in current job, or try another job. Problem-solve, provide feedback and advocate as necessary.
9. Refer Allen to his CSP worker for ongoing support when employment services are terminated.

Signature: John Jones, CRC

Signature: Allen Able, Consumer

Date: 6/30/05

CSP Interventions that Improve Employment Outcomes

Consumer: Allen Able

Date: 06/25/05

Starting Time: 3 p.m.

Stopping Time: 4 p.m.

Duration: 1 hour

CSP Billable Time, if different from duration: _____

Location: Consumer's home

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP:

Allen will explore job opportunities available and decide which meet his immediate needs. He will submit applications for the ones he chooses.

Therapeutic Interventions and Consumer Response: Allen has just received his first SSI check and first Medicaid card. While Allen was happy to have the SSI check and Medicaid card, he said he needed more money to get an apartment of his own. The CSP worker reminded Allen that he had needed to apply for SSI so that he could get Medicaid to pay for the medication, treatment and supports he needs to manage his schizophrenia. Now that he has Medicaid and SSI, he can get enough money to get a place of his own by working. The CSP worker explained how having Medicaid is very important in being able to pay for medication that Allen needs to be able to concentrate and not hear voices interfering with work and his personal life. Allen says he is still interested in looking for work. The CSP worker explained that her colleague, John Jones, Employment Specialist, could provide information about what jobs were available, and assist Allen in deciding which of those jobs might be best for him. Allen says he wants an evening job at a pizza or a fast food restaurant where he can work in the kitchen. He hates getting up in the morning and likes being around people. The CSP worker also recommended that Allen meet with a benefit specialist to learn about how his employment will impact his new Medicaid card and SSI check. Allen says he's willing to meet with both the employment specialist and the benefit specialist.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Allen Able **Date:** 7/05/05
Starting Time: 1:00 p.m. **Stopping Time:** 2:00 p.m **Duration:** 1 hour

CSP Billable Time, if different from duration: _____

Location: Employment Specialist office

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property		<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP:

Allen will explore job opportunities available and decide which meet his immediate needs. He will submit applications for the ones he chooses.

Therapeutic Interventions and Response to Intervention: While driving, the CSP worker talked with Allen about what Allen wanted to address with the employment specialist. The CSP worker asked Allen to think about what questions he might like to have answered and what kind of assistance he might like to get a job. Allen indicated that he would like to know what kinds of jobs are available. While meeting with John Jones, Employment Specialist, Allen gave information about his lack of work history, work preferences, and positive attributes that might be used to find a job. The CSP worker gave some additional information about her observations of Allen's work preferences, and asked some questions that led Allen to disclose additional positive attributes. Allen identified working in a restaurant with some people contact was his first choice. The CSP worker asked some questions about Allen's ability to respond quickly to verbal requests typically required in a busy kitchen. Allen says this might be an issue. The Employment Specialist indicated that there are some cooking jobs where the requests are all in writing. Also there are dishwashing jobs that don't require responding to verbal requests. Allen decided that he'd prefer a cooking job with written requests for work. He hates washing dishes. While driving Allen home, the CSP worker asked what he wanted to disclose regarding his disability with his employer. John also presented a range of options, i.e., (1) I have schizophrenia, (2) I have a serious mental illness, (3) I have had some personal problems, (4) I sometimes have difficulty with short term memory, feel shy around people, and would appreciate written orders, or (5) no disclosure. After hearing these options, Allen decided that he would prefer option (4).

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

From Employment Service Records - not CSP services

Work Assessment: Allen Able, Consumer

7/07/05

2 hours

John Jones, job developer, reviewed an inventory of job preferences that Allen had done as homework. Allen still wants to get a job as a cook where the orders are written rather than verbal. Allen states that he will consider other cook jobs and would consider dishwashing. They spent time reviewing Allen's positive attributes—excellent school attendance, conscientious about doing quality work, good physical stamina and desire to work hard. John reviewed some of the expectations at work regarding dress, small talk, and not disclosing too much personal material, i.e., "talking about hospital stays". John explained to Allen that it is OK to say "it's not something that I like to talk about" in response to unwanted questions.

John mentioned that in most food service settings, employers are concerned about workers looking clean and washing hands thoroughly. John also talked about employers being concerned that people show up to work on time, don't call off sick too often, get along with people, and get the job done. Allen would like to make \$15 an hour. John explained that it wasn't likely that anyone starting out work without some specific skills could get \$15 an hour.

John also had Allen role play some job interviews. Allen was able to identify that he could talk about his attendance, physical stamina, and strong desire to do a good job in response to some typical job interview questions.

John Jones, Employment Specialist

Work Assessment: Allen Able, Consumer

7/09/05

2 hours

The employment specialist reviewed Allen's sample job application, and gave him some suggestions on how to improve his applications by making them neater, and listing his education more completely. The employment specialist assisted Allen in identifying some possible job references. Allen has selected a couple of teachers and his pastor as references. The employment specialist asked Allen to locate his Social Security card or other proof of citizenship or having met the requirements to work in this country. The employment specialist also did some additional role-playing with Allen. The employment specialist indicated to Allen that he would accompany him to a couple of employers for interviews. Once Allen got a job, then he would be linked with a job coach who would assist Allen in blending into the work place, and assist Allen's supervisor in supporting Allen in becoming acclimated to the job.

John Jones, Employment Specialist

CSP Interventions that Improve Employment Outcomes

Consumer: Allen Able **Date:** 7/13/05
Starting Time: 1 p.m. **Stopping Time:** 2 p.m. **Duration:** 1.5 hour

CSP Billable Time, if different from duration: _____

Location: Benefit Specialist's office

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Flatter than normal
	Thought Process/Orientation <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Slightly slower; poor sleep triggered mild symptoms
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property <input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:	

Goal(s) Objective(s) Addressed from ISP: Allen will explore job opportunities available and decide which meet his immediate needs. He will submit applications for the ones he chooses.

Therapeutic Interventions and Response to Intervention: While the CSP worker was driving, the CSP worker asked Allen what questions he would like the benefits specialist to answer about how working would impact his SSI and Medicaid benefits. The CSP worker also monitored Allen's symptoms. The CSP worker explained that Allen would not have to pay the benefits specialist because a federal grant paid for benefits counselors throughout the state. Allen indicated that his Mom wanted to know what would happen to his Medicaid card if he were to go back into the hospital.

While meeting with the benefits counselor, the CSP worker assisted Allen by prompting him on asking some questions regarding how his SSI and Medicaid benefits would be affected. Allen was pleased to learn how much more money he would have. The CSP worker took notes for Allen, who can't write well, and wrote down basic reporting information for Allen and how much money he would be able to keep with earning \$300, \$400 or \$500.

While driving Allen home, the CSP worker discussed what assistance Allen might desire in meeting the reporting requirements. Allen said he needs the CSP worker to remind him to do the paperwork, as he sometimes has difficulty with staying organized due to his impaired thought processes. Also, Allen's concentration is sometimes poor if he is having auditory hallucinations.

Signature/Credential: Sunny Day, Trained Other **Signature Date:** _____

The Employment Specialist accompanied Allen to several restaurants where the employment specialist had previously developed relationships with the employers. Allen filled out applications for cook jobs at two of the restaurants and for dishwashing jobs at two of the restaurants. The Employment Specialist did some prompting of Allen on filling in some missing blanks on the application. The Employment Specialist introduced Allen to one of the managers, and explained that he was doing some of the talking since Allen who is a very good worker, had difficulty doing some of that himself. Allen talked with the manager at one of the restaurants who offered him a cooking job. The job met Allen's job criteria of having written orders, having evening hours, but was further from his home than he would like—almost a mile. It wasn't Allen's first choice. That was the restaurant within two blocks of his home. After the Employment Specialist explained that "perfect jobs" are extremely rare and that most jobs entail some compromise, Allen decided to take the job. He will start next Tuesday night. Allen seemed excited and happy. The Employment Specialist asked Allen if he would be willing to work with a Job Coach. The Job Coach would spend a couple hours a day on the job with Allen the first week to give him some extra instruction to reinforce what the supervisor was teaching him, would facilitate him getting to know co-workers better at the break and give him some feedback he might need since he hasn't worked before. Allen said he thought the job coach was a good idea, and agreed to meet him the next day.

John Jones, Employment Specialist

CSP Interventions that Improve Employment Outcomes

Consumer: Allen Able **Date:** 7/20/05
Starting Time: 2 p.m. **Stopping Time:** 3:30 p.m. **Duration:** 1.5 hours
CSP Billable Time, if different from duration: _____
Location: Consumer's home
Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary
Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Back to normal for Allen
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Back to normal for Allen
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Back to normal for Allen
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property <input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:	

Goal(s) Objective(s) Addressed from ISP: Allen will explore job opportunities available and decide which meet his immediate needs. He will submit applications for the ones he chooses.

Therapeutic Interventions and Response to Intervention: The CSP worker talked with Allen about his meetings with John Jones, Employment Specialist. Allen indicated that he had been pleased so far, but is anxious about starting a job at the pizza restaurant next week. The CSP worker congratulated Allen on his new job. Allen expressed concern that his mother would expect him to work hours that would not interfere with his babysitting his younger brothers. The CSP worker explained that it might not be possible for Allen to have a job that didn't conflict. Allen was willing to bring Mom into the conversation. Allen's mom would like him to be available to baby-sit when she works second shift. After some prompting by the CSP worker, his mom conceded that Allen wasn't responsible for childcare. Mom was able to identify a neighbor who could provide childcare when both of them are working. As she has had the same job for a number of years, she might be able to change her working hours more easily than Allen could get working hours that worked around hers. The CSP worker also asked about what changes Mom could expect if Allen were working. Mom indicated that she would like Allen to pay the amount for rent and food of \$60 per month, primarily to cover food. Allen was agreeable to this. The CSP worker also assisted Allen in explaining how his SSI and Medicaid would be impacted, since Mom was worried about Allen having medical coverage. Allen told the CSP worker that he would be meeting his job coach an hour before he started work at a fast food restaurant near his workplace. The CSP worker indicated that she could meet with Allen and his job coach there.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Allen Able **Date:** 7/24/02
Starting Time: 2 p.m. **Stopping Time:** 2:30 p.m. **Duration:** .5 hours

CSP Billable Time, if different from duration: _____

Location: at burger place near Allen’s job

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client’s Condition for Face to face visit	<input type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Allen is understandably excited and anxious on first day of work
	Thought Process/Orientation <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Attention/concentration slightly impaired
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP: Allen will complete the applying and hiring process and start a job that meets his needs.

Therapeutic Interventions and Response to Intervention: The CSP worker met Allen at his home. While driving, the CSP worker asked Allen if there was anything with which he would like assistance while assessing his mental condition as noted above. Allen indicated that he was excited about starting work, but was concerned that the job coach might provoke questions from other workers. The CSP worker indicated that the workers had seen job coaches before, and that using a job coach might make him more successful. At the fast food restaurant, the CSP worker introduced Allen to the job coach and spent a few minutes with them before leaving.* Allen indicated that he would like feedback on what he was doing right, and perhaps a little “social grease” to assist him in making friends with his co-workers. The job coach explained that Allen could learn best by listening to his supervisor on what his supervisor expected, to ask for written instructions if he needed them, and to observe what his co-workers did socially, and try to match his behavior to theirs. The Job Coach explained that at this job the workers were mostly young people his age, and that sometimes people liked to joke when there was a lull in business.

(*Billing Note: The Job Coach works for a different employer than the CSP worker, so all of the CSP worker’s time is billable. If the Job Coach and the CSP worker work for the same employer, only one of them may bill for service while both of them and the client are present.)

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

Job Coaching: Allen Able, Consumer

6 hours

7/24/02

Connie Coach, Job Coach, met Allen with his CSP worker, Sunny Day, at a burger restaurant. Coach Connie walked the block with Allen to his new job at Pizza King. Coach Connie greeted the shift supervisor and introduced herself to co-workers without explaining who she was. The shift supervisor gave Allen and Connie both the same set of instructions and orientation. Connie and Allen both assembled pizzas, while Connie occasionally reminded Allen of how the shift supervisor wanted it. At break time, Connie Coach suggested to Allen that he might want to ask someone to join him in smoking outside. Allen tried that, while Connie stayed inside doing something else. Allen seems to be working out well, and didn't need the written instructions that he thought he might need.

Connie Coach, Job Coach

Job Coaching: Allen Able, Consumer

2 hours

7/25/02

Allen needed some reminders to work a bit faster, but did OK. He got a bit upset with someone asking his work history, which Connie indicated that Allen was just out of school and had been enjoying some time between school and work.

Connie Coach, Job Coach

Job Coaching: Allen Able, Consumer

Due to space limitations, two weeks worth of job coaching notes are not included.

CSP Interventions that Improve Employment Outcomes

Consumer: Allen Able **Date:** 7/25/02
Starting Time: 1 p.m. **Stopping Time:** 1:18 p.m. **Duration:** .3 hours

CSP Billable Time, if different from duration: _____

Location: Consumer's home

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property		<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP: Allen will complete the applying and hiring process and start a job that meets his needs.

Therapeutic Interventions and Response to Intervention: The CSP worker called Allen after his first day of work to inquire how work had gone. Allen indicated that he was able to concentrate well enough and that the voices hadn't bothered him on the job. The CSP worker asked about Allen's co-workers. Allen said he thought that his co-workers might not like him because he was quiet. He also asked Sunny Day not to visit him on the job during work hours, as his Job Coach said that his employer might think she was a probation officer. Sunny Day agreed to meet him outside of work hours. Allen indicated that his Mom had asked him to babysit one night while he was supposed to be working, but he had said no, and Mom had found a neighbor to babysit. Allen said he needed to reschedule his next appointment so it didn't interfere with work hours, and did that.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Allen Able **Date:** 7/30/02
Starting Time: 1:00 p.m. **Stopping Time:** 2:00 p.m. **Duration:** 1.0 hour
CSP Billable Time, if different from duration: _____
Location: Consumer's home
Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary
Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP: Allen will develop the supports he needs to stay in the job he has started and work successfully. Allen will decide and state what his next employment goal will be.

Therapeutic Interventions and Response to Intervention: The CSP worker asked Allen about how work was going for him socially. Allen indicated that he had some co-workers who talked about sports, but felt he didn't have much to say. The CSP worker asked Allen if he would like to learn about sports. When Allen said no, the CSP worker asked Allen to identify some topics of conversation that he could use at work. He identified subject matter from the ten o'clock news, motorcycles, and fishing. The CSP worker asked him to identify who at work would be interested in discussing those topics. Allen identified several people. The CSP worker did some role-playing with Allen, with the goal of increasing Allen's skills and confidence in talking with co-workers. This will assist Allen in developing the relationships with people who can become his friends and provide on the job support. The CSP worker gave Allen a homework assignment to try out his new skills.

The CSP worker also addressed Allen saying he suspected the supervisor was spying on him with a camera. The CSP worker asked Allen if he saw cameras. Allen said yes. The CSP worker asked Allen if the camera also took pictures of all of the people in the restaurant. Allen said yes. The CSP worker then explained that in some restaurants where they are concerned about theft this is done as a business practice and has nothing to do with Allen. Allen may have been suspicious because of his paranoid schizophrenia.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Allen Able

Date: 8/7/05

Starting Time: 3 p.m.

Stopping Time: 4 p.m.

Duration: 1.0 hour

CSP Billable Time, if different from duration: _____

Location: Consumer's home

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Flatter affect, a bit depressed
	Thought Process/Orientation <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Reports auditory hallucinations and impaired concentration
	Behavior/Functioning <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Avoiding social contact except when needed.
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP: Allen will develop the supports that he needs to stay in the job he has started and work successfully.

Therapeutic Interventions and Response to Intervention: The CSP worker asked Allen how he was doing, and he said fine. The CSP worker commented that Allen looked like he was having a tough day on his day off from work. Allen said that he had messed up a pizza, and the shift supervisor had yelled at him, and his co-workers had kidded him about it. The CSP worker asked if the shift supervisor yelled at other employees, and Allen said yes. The CSP worker asked if the employees kidded each other, and Allen also said yes. Allen said that he had been hearing voices the last couple days and that it had been harder to concentrate at work. The CSP worker indicated that Allen was doing well to hang in there, and asked what his strategies for dealing with the voices were. Allen said that he sometimes uses a rubber band to snap his wrist to decrease the voices when he is at home, but wasn't sure what he would do at work if someone asked him about it. The CSP worker suggested that he really didn't have to explain to his co-workers who probably wouldn't ask. However, if asked, he might tell his co-workers that he used the rubber band to feel more awake. Allen was agreeable to this. The CSP worker also asked Allen if he'd ever talked with his psychiatrist about increasing his meds when the voices occurred. Allen explained that increased meds made him too sleepy to work, and he'd rather live with some voices and be able to stay awake. The CSP worker assisted Allen with assembling and mailing reporting to Medicaid and SSI agencies.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Allen Able

Date: 8/14/05

Starting Time: 2 p.m.

Stopping Time: 3 p.m.

Duration: 1.0 hour

CSP Billable Time, if different from duration: _____

Location: Consumer's home

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Allen is angry and discouraged.
	Thought Process/Orientation <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Allen's thinking is less organized than usual.
	Behavior/Functioning <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Allen is less responsive and more avoidant of other people.
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP: Allen will develop the supports he needs to stay in the job he has started and work successfully.

Therapeutic Interventions and Response to Intervention: Allen wants to quit. He had a bad day at work. He's mad at his boss for asking him to work a couple extra shifts. The CSP worker asked Allen if other workers were asked to work extra shifts. Allen indicated that other workers were asked to work extra shifts too. The CSP worker then commented that Allen was simply being treated as a regular employee—something he had said he wanted earlier. The CSP worker asked Allen about what might be bothering him. Allen indicated that he had asked a girl out at work, and she had said no. He now feels uncomfortable around her. The CSP worker and Allen discussed various options for handling this. The CSP worker reframed this by saying it's very normal and typical to have these experiences when trying to date at work. Allen decided that he would try to go back to pretending that he'd never asked her out. The CSP worker also talked with Allen about how things were going at home. Allen says Mom is being more supportive of him working, but has started asking Allen for money several times a week. The CSP worker talked with Allen about setting limits with Mom and opening a savings account to deposit his paycheck. Allen requested that the CSP worker accompany him to open a savings account as part of their next appointment.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Allen Able **Date:** 8/21/05
Starting Time: 1:12 p.m. **Stopping Time:** 2:12 p.m. **Duration:** 1.0 hour

CSP Billable Time, if different from duration: _____

Location: Consumer's home

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP: Allen will develop the supports he needs to stay in the job he has started and work successfully.

Therapeutic Interventions and Response to Intervention: The CSP worker asked Allen how work was going. Allen indicated that it was going fine now. The CSP worker asked Allen if his mother was supporting his working. Allen indicated that he was still doing some babysitting for his younger siblings, but that it wasn't interfering with work. Allen says that he was able to buy himself a nice pair of shoes that he's wanted for a long time with his own money, and that felt very good. The CSP worker pointed out that Allen had really earned those shoes with working hard consistently. The CSP worker asked about Allen attending Double Trouble groups. He said that he'd been doing that most, but not all of the time. He says his sponsor doesn't approve, but that he's still using marijuana occasionally to get to sleep at night. The CSP worker asked if he noticed any relationship between marijuana use and short term memory. Allen said he hadn't noticed any relationship, but that sometimes his short term memory caused him some minor problems at work with remembering orders, and he had to compensate by looking back at the written orders. The CSP worker suggested that stopping the marijuana might improve short term memory, and indicated that marijuana could cause short term memory impairment.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

Betty Baker

Strengths/Assets: Betty is a 55 year old who has been employed as a direct care worker in a group home for the mentally retarded in a small town in southeastern Ohio. She has held the same job for ten years. She is good with residents and has considerable empathy. She belongs to a church, and has a small circle of friends and has a sister and extended family in the area. She lives in her own apartment and has no children. She bakes good pies. Betty is a very conscientious hard worker. When she was in her twenties, she had several hospitalizations for schizophrenia, but has been able to make a good recovery from her illness. She sees the psychiatrist every three months for medication, and has a community support worker who sees her only occasionally since she has not needed any assistance in the last few years. While she has had symptoms that interfere with her life about once a year, these symptoms have not caused her to do anything differently other than to take a couple days off from work, until recently.

Betty has a couple of friends at work who sometimes go to movies or social events at church. Betty's sister invites her for holiday celebrations every year. Betty has been in relatively good physical health for most of her life with occasional bouts of the flu. Betty likes to listen to country music and read mystery books.

Needs for intervention: Recently, Betty was hospitalized for pneumonia, and experienced auditory hallucinations and delusional thinking which was more severe than she has had since her twenties. Her physician believes that the pneumonia and hospitalization for pneumonia triggered her psychiatric symptoms. She has been off work for two weeks of which the first was spent in the hospital with pneumonia. Betty would like to return to her employment as a direct care worker in the group home for the mentally retarded. Her employer is willing for her to return to work. It is unclear as to whether her employer has either very limited or no knowledge of her psychiatric illness. She believes that she can work, and believes that she needs to work so that she will have enough Social Security when she retires. While she appears able to work, she may occasionally have auditory hallucinations and make a few odd statements about hearing voices. This doesn't interfere with her ability to attend to the needs of the residents and is quite harmless. She also has some impairment of concentration that impairs her reading a book, but is not likely to interfere at her current job. The agency's employment specialist is recommending that Betty request that her employer "**accommodate her disability under the Americans with Disability Act**" which will make it more difficult for her employer to fire her for occasional odd behavior. The employment specialist is recommending that Betty ask for some additional feedback as she returns to work, so that she can make any changes needed to accommodate her illness while working. The CSP worker (or therapist) will need to work with Betty on what she would like to disclose.

Note: Using the words, requesting accommodation "under the Americans with Disability Act" is putting an employer on notice that an employee is aware of her rights and might take legal action if not accommodated. It is helpful to disclose when an accommodation is needed and before major problems occur. With accommodations made, an employee may be better able to perform

his/her job, and misinterpretations of difficulties caused by an undisclosed disability are prevented.

Experience of employment professionals has indicated that it is generally best to disclose brief information in lay terms which explains what someone cannot do and what accommodation might be needed on a specific job. Disclosure of specific diagnoses which may carry a major stigma, e.g., Schizophrenia, is not usually advisable. Rather than disclose "Betty has schizophrenia", it is preferable to disclose that: "Betty has a medical condition that sometimes impairs her concentration and may occasionally make her be a bit more suspicious than usual. Betty has been able to work successfully with her mental illness for many years, and we expect that she can continue working successfully." CSP workers need to talk with consumers about what they are willing to disclose. If a consumer has been working at a job, it is helpful to ask the consumer what he/she expects the employer's response to be and what information has led her to expect that response.

Betty's Brief Recovery Plan

1. I will eat well, get enough sleep and take vitamins to get my strength back so I can clean my house without getting tired.
2. I will start taking short walks and build up to longer walks.
3. I will return to work.
4. I will seek some information about how ADA might protect me from discrimination in returning to work.
5. I would like some assistance from my doctor and CSP worker in managing my psychiatric symptoms.

The Goals below must be coordinated with “Treatment Recommendations” on the current Diagnostic Assessment/Update of 6/16/05 (date).

Goals	Goal # 2	Treatment Recommendation # from DA: not applicable	Start Date:
Describe below in Client’s words:		Client’s Initials:	Target Completion Date:
I want to return to work. I don’t want to worry about getting fired because of occasional psychiatric symptoms that might make me act oddly, but are really harmless.			Adjusted Target Date:
			Reason for Adjustment:
Desired Outcomes: I want to keep my job and get back to socializing at church and taking walks.			
Strengths: I have worked at the same group home for mentally retarded persons for ten years.			
Skills/Knowledge Needed: I sometimes hear voices and need feedback as to which ones are real. I also am having some problems with short term memory.			
Natural/Community Supports Needed: I think I can work as long as I write tasks down and my employer doesn’t get upset if I occasionally respond to a voice that isn’t there.			

OBJECTIVE #1: Provide assistance and support as requested as Betty returns to work after illness.			Start Date: 6/30/05	Target Date: 7/30/05
Therapeutic Intervention	Service Description	Frequency	Responsible: Consumer, Provider/Credential, community, other	Duration
Meet with employment specialist for assessment on what supports might be needed for Betty to keep current job.	CSP Services and Employment Services	Once	Sunny Day, Trained Other John Jones, Employment Specialist	One month or less
Provide support, assistance, and feedback as requested by Betty as she returns to work after both pneumonia and recurrence of symptoms of schizophrenia.	CSP Services	Weekly and more as needed.	Sunny Day, Trained Other	3 months
Employment specialist services include assessment, coaching, and employer education about disability, as needed and wanted by Betty.	Employment Services	As needed	John Jones, Employment Specialist	3 months

John Jones has developed the following Employment Specialist's plan with Betty Baker:

Employment Specialist's Plan:

1. Assess Betty's motivation and ability to return to her current employment.
2. If decision is for Betty to return to her current employment, assess need for ADA accommodation.
3. If needed and desired by Betty, coach her in requesting accommodation.
4. If needed and desired by Betty, assist in providing education to her employer about effective accommodations.

CSP Interventions that Improve Employment Outcomes

Consumer: Betty Baker

Date: 6/30/05

Starting Time: 3 p.m.

Stopping Time: 4 p.m.

Duration: 1 hour

CSP Billable Time, if different from duration: _____

Location: Consumer's home

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building
 Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Back to normal for Betty after a couple weeks of being depressed
	Thought Process/Orientation <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Reporting auditory hallucinations have decreased from daily in hospital to a couple times a week
	Behavior/Functioning <input checked="" type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	Concerned that she occasionally responds to auditory hallucinations before she recognizes that it is hallucination.
	Danger to <input checked="" type="checkbox"/> None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	

Goal(s) Objective(s) Addressed from ISP: I want to return to work. I don't want to worry about getting fired because of occasional psychiatric symptoms that might make me act oddly, but are really harmless.

Therapeutic Interventions and Response to Intervention: This is the first home visit since Betty was discharged from a medical hospital where she was treated for pneumonia and also experienced some auditory hallucinations and some delusional thinking that she was in Florida. In response to the CSP worker's inquiry, Betty is now oriented to time, person, and place, but is still experiencing some auditory hallucinations in which she hears women talking. Betty is able to cook, but becomes tired when attempting to do physical work such as cleaning or lifting laundry baskets. She says her doctor says that this is typical in recovering from pneumonia. When the CSP worker asked Betty about when she planned to return to work, she expressed concern that she might be fired if she responds to the voices she hears at work. Based on the content of the voices, it is unlikely that it would pose a safety risk at Betty's job if she responds to auditory hallucinations. As this CSP worker doesn't have much experience with work accommodations, she is recommending to Betty that they consult with an employment specialist about what they might do to maximize Betty's chances of success upon return to work. Betty is agreeable to this.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

CSP Interventions that Improve Employment Outcomes

Consumer: Betty Baker

Date: 7/7/05

Starting Time: 3 p.m.

Stopping Time: 4 p.m.

Duration: 1 hour

CSP Billable Time, if different from duration: _____

Location: Consumer's home, car, Employment Specialist's office

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building

Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Danger to x None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property	<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP: I want to return to work. I don't want to worry about getting fired because of occasional psychiatric symptoms that might make me act oddly, but are really harmless.

Therapeutic Interventions and Response to Intervention: The CSP worker met Betty at her home. While they were driving, the CSP worker asked Betty if she still wanted to return to work, and if she thought she might want some assistance in requesting work accommodations from her employer. Betty indicated that her employer had called her, and wanted her to return to work next week. Betty said that she would like to return, but was concerned that she might get fired if the employer noticed her responding to the voices she was hearing once or twice a week. At the employment specialist's office, Betty described her job and her concerns about how her employer might react if she responded to her voices. John Jones, Employment Specialist, indicated that she could ask for accommodations of additional feedback from her employer upon return to work. By asking for accommodations, her employer would be less likely to fire her because her employer would know that Betty knows her rights and has support. By asking for feedback, Betty would know if her employer has any concerns. Betty said that she was willing to have the employment specialist accompany her on a meeting she had set up with her employer later that week, and assist her in asking for accommodations. While driving Betty home, the CSP worker talked with Betty about what she might need to do to manage her lowered physical energy level when she returns to work. Betty indicated that she could do her housework on the weekend, so that she could rest when she got home.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

Employment Specialist: Betty Baker, Consumer

7/9/05

Betty and the employment specialist met with her supervisor, Sally Smith, at Sally's office. With some assistance and coaching, Betty requested that she receive additional feedback for several months as an American with Disabilities Act accommodation when she returns to work. Betty explained that she had fully recovered from a mental illness more than twenty years ago, but had recently experienced some symptoms when she became ill with pneumonia. Betty explained that her symptoms were currently limited to hearing occasional women's voices asking about harmless things such as making innocent comments about people in the room. Sally indicated that Betty had been a good reliable employee, and that she would be willing to provide the additional feedback. Sally asked Betty if she would be willing for someone else to drive the group home van until she was fully recovered from her illness. Betty indicated that she thought she could drive without problems, but said she was OK with not driving until her symptoms were totally gone. Sally offered Betty the opportunity to return to work next week if her physician was agreeable. Betty indicated that her physician had cleared her to return to work on Monday of next week, and that she would return.

John Jones, Employment Specialist

CSP Interventions that Improve Employment Outcomes

Consumer: Betty Baker

Date: 7/15/05

Starting Time: 3 p.m.

Stopping Time: 3:30 p.m.

Duration: .5 hours

CSP Billable Time, if different from duration: _____

Location: Consumer's home

Type of CSP Service: Face-to-face Phone Ancillary Consumer & Ancillary

Activity Offered: Assessment Monitoring Linking Coordinating Skills building

Crisis Management Education/Employment Advocacy Other

Relative Changes in Client's Condition for Face to face visit	<input checked="" type="checkbox"/> Not significant change from last visit	If remarkable, comment
	Mood Affect <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Thought Process/Orientation <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
	Behavior/Functioning <input type="checkbox"/> Remarkable <input type="checkbox"/> Unremarkable	
Danger to x None <input type="checkbox"/> Self <input type="checkbox"/> Others <input type="checkbox"/> Property		<input type="checkbox"/> Ideation <input type="checkbox"/> Plan <input type="checkbox"/> Intent <input type="checkbox"/> Attempt <input type="checkbox"/> Other:

Goal(s) Objective(s) Addressed from ISP: I want to return to work. I don't want to worry about getting fired because of occasional psychiatric symptoms that might make me act oddly, but are really harmless.

Therapeutic Interventions and Response to Intervention: Betty reports that she had returned to work. While she was physically tired, it had otherwise gone well. The CSP worker asked about how her meeting with the employment specialist and her supervisor had gone. Betty said that it had gone well, and that her employer had agreed to give her additional feedback. Betty said that it was a relief not to feel that she had to be so careful at work if her supervisor was around. The CSP worker asked Betty what symptoms of mental illness she had at work. Betty said that she had only one auditory hallucination. She also said that she thought some of the group home residents were talking about her, but then realized that they were talking about another group home member. The CSP worker asked if Betty needed any additional support to work, and Betty said that she didn't think so. The CSP worker also asked if she had returned to her usual church activities. Betty indicated that she was avoiding those until she was sure she had enough stamina. Betty indicated that she was having some trouble with remembering if she had completed activities at work—possibly an indication of short term memory or attention problems. The CSP worker suggested taking a small notebook to work, making lists and checking them off. Betty thought this was a good idea and decided to try it.

Signature/Credential: Sunny Day, Trained Other

Signature Date: _____

VII.

Bibliography

Bibliography

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Bond, Gary R., Becker, Deborah R., Drake, Robert E., Rapp, Charles, Meisler, Neil, Lehman, Anthony, Bell, Morris D., Blyler, Crystal, Implementing Supported Employment as an Evidence Based Practice, *Psychiatric Services*, March 2001, Vol. 52, no. 3.

Evidence based Employment Models and Practices, written by the Working for Recovery: Research and Evaluation action Team, presented March 6, 2002 at the Working for Recovery Reunion, sponsored by Ohio Department of Mental Health.

It Pays to Work... A guide to help people receiving SSDI and/or SSI Choose Work Options, 2003 Edition", available through COVA, 3770 N. High Street, Columbus, Ohio 43214. Phone: 877-521-2682.

National Research and Training Center on Psychiatric Disability and Peer Support: The Employment Intervention Demonstration Program Coordinating Center
<http://www.psych.uic.edu/eidp/>

New Hampshire-Dartmouth Psychiatric Research Center
<http://www.dartmouth.edu/dms/psychrc>

Ohio Department of Mental Health, Office of Program Evaluation & Research, Toward Best Practices: Top Ten Findings from the Longitudinal Consumer Outcomes Study, 1999.

Ohio Department of Mental Health, Office of System Development & Consumer Services, Working for Recovery, Ohio's Employment Action Plan for People Recovering from Severe Mental Illness, 2001

Rogers, E.S., Danley, K. & Anthony, W.A. (1992), Survey of client preferences for vocational and educational services. Boston University, Center for Psychiatric Rehabilitation, Boston, M.A.

Townsend, Wilma, Boyd, Sherry, Griffin, Grisetta, Emerging Best Practices in Mental Health Recovery, Ohio Department of Mental Health, June, 1999

Transitional employment: An evaluative description of Fountain House Practice: Macias, C., Kinney, R. & Rodican, *Journal of Vocational Rehabilitation*, Vol. 5, 151-157, 1995.

VIII.

Web Sites

Web Sites

Employment for Persons with Serious Mental Illness

Boston University—Center for Psychiatric Rehabilitation, home of Bill Anthony and Courtenay Harding

<http://www.bu.edu/cpr/> <http://www.bu.edu/resilience/>

Job Accommodation Network—Department of Labor

<http://janweb.icdi.wvu.edu/>

Matrix Research Institute, Philadelphia

<http://www.matrixresearch.org>

National Research and Training Center on Psychiatric Disability and Peer Support: The Employment Intervention Demonstration Program Coordinating Center, home of Judith Cook

<http://www.psych.uic.edu/eidp/>

New Hampshire-Dartmouth Psychiatric Research Center, home of Deborah Becker & Robert Drake

<http://www.dartmouth.edu/dms/psychrc>

University of Chicago Center for Psychiatric Rehabilitation

<http://www.ucpsychrehab>

Employment for Persons with Disabilities including Mental Illness

Presidential Task Force in Employment of Adults with Disabilities

www.dol.gov/_sec/programs/ptfead/

Social Security Administration Return to Work Website

<http://www.ssa.gov/work/>

State Partnership System Change Initiative---benefit counseling information

www.SPICconnect.org

Workforce Investment Act

www.usworkforce.org/

Useful Sites for Case Managers and Clinical Administrators

Knowledge Exchange Network—general information about mental illness

<http://www.mentalhealth.org/>

National Association of Case Managers—organizational practice guidelines & ethics statement

www.yournacm.org

National Alliance for Mentally Ill—educational materials—family/consumer and medication

<http://nami.org>

Ohio Department of Mental Health

<http://www.mh.state.oh.us>

Consumer Recovery/Empowerment Sites

Mental Health Recovery Self-Help Strategies: Mary Ellen Copeland

<http://www.MaryEllenCopeland.com>

National Depressive and Manic Depressive Association

<http://www.ndmda.org/>

National Empowerment Center—home of Pat Deegan and Dan Fisher—self help for managing hallucinations

<http://www.Power2u.org/>

This manual was developed by the
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The following individuals participated on the Intra-System Action Team of the Working for Recovery Initiative of the Ohio Department of Mental Health that developed this manual:

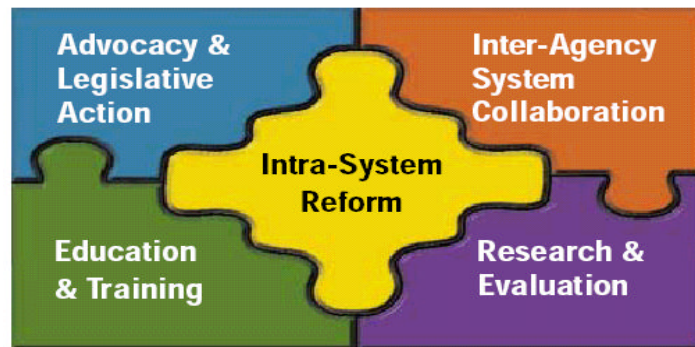
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