The Hoosier Orientation Handbook on Supported Employment

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Second Edition
The Hoosier Orientation Handbook on Supported Employment

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This manual is part of a joint project between:

The Center on Community Living and Careers
The Indiana Institute on Disability and Community
Indiana’s University Center for Excellence
Indiana University
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Vocational Rehabilitation Services
Division of Disability and Rehabilitative Services
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This second edition of the Hoosier Orientation Handbook on Supported Employment is an adaptation of a manual initially co-produced by the Indiana Institute on Disability and Community at Indiana University and The Supported Employment Consultation and Training (SECT) Center with support from Indiana Vocational Rehabilitation Services. The presentation of the material is similar to that of the original manual, however reflects changes throughout the state in programs, services, funding and legislation since the original publication.

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The Center on Community Living and Careers is one of seven centers located at the Indiana Institute on Disability and Community at Indiana University, Bloomington. The Indiana Institute on Disability and Community is committed to services that touch the entire life span, from birth through older adulthood. The work of these seven centers addresses the following issues: young children and families, school inclusion, transition, employment, autism, information and referral, planning and policy studies and technology and technological adaptations. The Indiana Institute on Disability and Community pursues its mission with support from Indiana University and funding from federal and state agencies and foundations.

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About this manual... 

This manual is meant to be a basic introduction to supported employment for new staff (referred to as Employment Specialists throughout this manual) during their first few weeks of employment and a reference and resource book. It is intended to complement any current agency orientation. It is not meant to replace more further in-depth training such as courses by the Indiana Supported Employment Training Team’s (ISETT) Employment Specialist Training (EST) or the Supported Employment Consultation and Training (SECT) Center’s Employment Support Specialist (ESS) 100, or the need for regular continued education in the field of supported employment.

The manual is divided into three sections: Foundations in Supported Employment (overview of disability, definition of supported employment, the Employment Specialist’s role, and the vision of supported employment); Supported Employment Systems (referral and funding, rights and advocacy, and additional consumer resources); and an Overview of Supported Employment (getting to know the job seeker, job development and placement, training and support, and ongoing support). Each section builds upon the information in the previous section. Read in succession, the manual will fortify a basic understanding of the supported employment process and the role of the Employment Specialist.

The provision of supported employment services requires the development of a complex skill set. Throughout this manual, there are Employment Specialist’s Competencies listed that correspond to the skills needed for a successful career as an Employment Specialist. Reading and understanding this manual is only the first step in achieving these competencies. It is expected that an Employment Specialist would work towards developing these skills during his or her first 6-9 months of employment by shadowing other professionals in the field, reading applicable references, and attending training on specific skills and obtaining knowledge related to supported employment.

This manual will help the new Employment Specialist and his or her supervisor to develop a personal learning plan. There are stimulating questions and suggested information to seek in each section. This manual will be most effective when the new staff person takes the time to answer the questions, seek the information, read and understand the important things to remember, and review the support information (glossary, acronym list, resources, and recommended bibliography). Note that the first time a word in the glossary is used in the text it is in bold print.

Becoming a successful Employment Specialist means continuously discovering new learning opportunities. This manual is only a beginning to developing skills. Through the use of external and internal formal and on-the-job training, and interactions with individuals with disabilities, the community, and others in the field, your journey toward a productive and rewarding career has begun!
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Foundations in Supported Employment

Changing Times in Rehabilitation Services

Disability Services in the United States

An individual with a disability is defined by the Amendments to the Rehabilitation Act (1998) as:

“A physical or mental impairment that constitutes or results in a substantial impediment to employment or a physical or mental impairment that substantially limits one or more major life activities.”

There are many types of disabilities and these disabilities can affect individuals in a variety of ways. It is important to remember that not all individuals with a particular disability or diagnosis label are alike.

Some common disabilities include:

- Mental Retardation (MR) – condition indicating difficulty with cognitive functioning characterized by below average intellectual functioning
- Serious Mental Illness (SMI) – persistent condition affecting cognitive functioning often characterized by emotional instability
- Vision Impairment (VI) – loss or reduced ability to see
- Hearing Impairment (HI) – loss or reduced ability to hear
- Autism – a neurobiological syndrome evident by age three that manifests itself in abnormal ways of relating to people, objects, and events; disturbances often occur in speech, language, and responses to sensations, including social and physical stimulus
- Paralysis – loss of movement
- Amputation – actual physical loss of a body part
- Cerebral Palsy (CP) – a family of syndromes with disordered movement and posture, impaired motor development and atypical motor findings on neurological examinations; manifestations vary considerably
- Epilepsy – relating to seizures or seizure disorders
- Head Injury – physical or mental impairment arising from an injury to the head
- Down Syndrome—a chromosomal condition, usually diagnosed at birth, that manifests itself by decreased muscle tone and altered physical appearances; functioning varies considerably, but often thyroid disorders, mental retardation, and hearing loss occurs
Historically, individuals with disabilities have been treated with disrespect, pity, or fear. They have been labeled and defined by their disability. Unfortunately, individuals with labels tend to act upon the expectations of others, especially when segregated together. For many individuals with disabilities, this segregation has occurred in the classroom, in work situations and in non-work, recreational activities.

The effects of segregation can stifle change and growth. Individuals with disabilities in segregated settings seldom have the opportunity to interact with the community. Aside from family members and other personal stakeholders, interactions are often limited to either paid staff or other individuals with disabilities. There is little chance to meet new community members, limiting networking opportunities and personal relationships, and hindering the potential to model positive behaviors.

**Sheltered workshops** were considered the ideal mechanism for the employment of individuals with developmental and other disabilities until the middle of the 1980’s. These sheltered experiences were the training grounds for community work experiences. They were developed as safe places where individuals with disabilities gathered together to develop work skills. Unfortunately, sheltered workshops often promoted segregation while limiting community-based opportunities.

The following time divisions highlight the chronology of service provision for individuals with disabilities in the United States:

- **1800s:** Special schools and training center models were developed;
- **1900s:** Population of institutions flourished;
- **1960s:** Community options were being explored;
- **1970s:** Normalization and deinstitutionalization were becoming priorities;
- **1980s:** Community options were readily seen as viable options to segregation; supported employment grew;
- **1990s:** Inclusion activities gained momentum;
- **2000s:** Community-based service initiatives and efforts to close institutions continue to grow.

Individuals diagnosed with mental illness have often been placed in day treatment programs. These segregated programs are heavily grounded in medical treatment models (treating and/or curing an illness), complete with simulated activities and therapy. Day treatment programs, not unlike sheltered work, minimized daily living options, choice, and community exposure.
Changes in the day treatment programs for individuals with mental illness include **Psychosocial Rehabilitation** (PSR), often organized as a **clubhouse**. Individuals who attend these programs are considered “members” and are full participants in the operation of the program. The program generally offers a package of services that includes social/recreational, vocational, residential, and educational. These service areas are focused on helping members to develop necessary skills and supports to function within their community (Stroul, 1986). It is out of this model that community-based employment programs developed for persons with serious mental illness.

**Shifts in Values and Assumptions**

Services in the rehabilitation field are rapidly changing. "The history of change in employment services for people with significant disabilities suggests that rehabilitation organizations must be prepared for an ongoing evolution of how organizations deliver services" (Albin, 1992). The rationale for these changes can be found in shifting values and assumptions:

- **FROM** a focus on pre-requisites, readiness, and a continuum of services **TO** providing individualized and customized supports so people can live, work, and contribute to their community. Traditionally, programs focused on

  a continuum of services (institutions, day habilitation programs, work activities, work adjustment, sheltered work, then community employment). Individuals had to demonstrate they were ready for the next step. While this may sound logical, the reality was that many individuals were never making it to the community.

- **FROM** a focus on disabilities and trying to correct “deficits” **TO** recognizing and encouraging capacities and gifts.

  Traditionally, services were based on the medical treatment model. The role of rehabilitation staff was to find out what someone could NOT do and try to fix it. Value shifts have led providers to realize that individuals with disabilities have strengths and capacities to build upon.

- **FROM** a belief that the community is rejecting, hostile, and unsafe **TO** believing in the capacity of natural communities to accept and include individuals with disabilities. Reluctance and non-belief by providers may hinder the process much more than the reality of the community. Instead of thinking that the community is cold, rejecting, the “enemy”, dangerous, too risky, and incompetent, providers are realizing there are many community members who are tolerant, welcoming, appreciative, helpful, and yet inexperienced.
FROM an assumption that professionals know best and that they need the power TO taking direction from individuals with disabilities and the people who know them well. Professional control is no longer emphasized; work is not delegated to direct service workers; interdisciplinary teams are not being relied on to generate plans; meetings are not being organized in conference rooms at the convenience of professionals; and the team is not spending a lot of time planning with little action. Instead professionals are sharing decisions with the person, family, and friends; empowering direct service workers; utilizing person centered teams; organizing in the communities at the convenience and comfort of the person, family, friends; and spend and spending lots of time taking action with regular planning time (Mount, 1989).

Out of these value shifts came changes in services. A growing number of consumers were not satisfied with traditional segregated options. The field was motivated to discover new ways to provide services. Universities developed research and demonstration projects in an attempt to discover processes that no longer focused on pre-requisites, readiness, and life-long continuums of services.

The Emergence of Supported Employment

Supported employment emerged as an alternative to segregated, traditional services. Since the late 1970s, experimentation with supported employment models has expanded to the point of national acceptance.

The following shows the chronology of supported employment in Indiana:

- **Early 1980s**: Early supported employment demonstrations
- **1987**: Expansion of supported employment
- **1988**: Implementation of supported employment throughout the State of Indiana
- **1989**: Twenty-one successful supported employment closures
- **1992**: Vocational Rehabilitation Services creates two supported employment technical assistance centers
- **1996**: Over one hundred providers of supported employment throughout the state. Conversion Task Force is formed to assist the State of Indiana to eliminate barriers surrounding the total provision of community-based services
- **1997**: Nine hundred eighty seven successful supported employment closures for the year
- **1999**: One thousand and eighty six successful supported employment closures for the year
- **2000**: One thousand, one hundred and ninety successful supported employment closures for the year
- **2002+**: Numbers of supported employment providers and participants continue to increase.
- **2006**: Indiana moves to an outcome based funding system
Supported employment is both successful and growing. The success of supported employment arises from research and very basic and firm values. Some underlying values in supported employment include:

- **Everyone has the right to participate, be employed, and be integrated in his or her community with access to adequate supports.** It is assumed that everyone has the capacity to learn job skills and build relationships. The community will support individuals to contribute and be included.
- **People with disabilities find community employment desirable and dream of contributing to their communities.** This contribution includes responsibility to the community.
- **While promoting empowerment, supported employment must assure dignified interactions with individuals with disabilities through community settings with minimal intrusions.** Service providers assisting individuals with disabilities through the supported employment process should be well trained to accomplish mutual goals.
- **Supported employees deserve to be respectfully connected to their communities.** They should be treated as competent participants who have choices and are free to make decisions.

- **As supported employment participants, individuals have access not only to employment, but also career planning, job development, job placement, work supports, life-community supports, and career advancement.** (Adapted from Association for Persons in Supported Employment’s Ethical Guidelines)
Important Things to Remember:

☑ Individuals with disabilities are all uniquely different, much like individuals without disabilities. A disability label does not define the totality of the person.

☑ The effects of segregation can stifle personal growth and change. Interactions directly with the community often result in networking opportunities, expansion of life options, and real choices.

☑ The roots of supported employment are firmly planted in ethical values and research based.

☑ Supported employment is a successful and growing rehabilitation option.
Questions to ask and information to seek

1. What are some ways a label can be harmful to a person? Have you ever “labeled” anyone? If so, were the “labels” accurate?

2. How are mental retardation and mental illness different? Explain.

3. Do you believe simulated work activities can be beneficial? What can a person learn in a segregated environment that they cannot learn in the community?

4. Find out what “labels” of disability that your agency typically serves. Are there other providers in the community that serve these individuals or individuals with different “labels”?
5. How are people with dual diagnoses (e.g., mental illness and mental retardation) served in your area? Does your agency provide services to these individuals? If not, how might an individual who has needs in both areas get the services they need?

6. For more information on developmental disabilities terms you may consider obtaining a copy of Dictionary of Developmental Disabilities Terminology by Pasquale J. Accardio and Barbara Y. Whitman (ISBN 1-55766-112-X pc). This book was published by the Paul H. Brookes Publishing Company in 1996 and is still readily available by special order through your local bookstore. You can also search the dictionary on the internet by following this link:

http://www.brookespublishing.com/dictionary/

7. Many websites exist containing disability information. You can utilize this resource to obtain more information about various disabilities. Type in any disability category into a search engine and see what pops up (Down Syndrome, mental illness, or even the general term “disability”). Many websites will contain links to other related websites. As an alternative, try typing in the name of any disability-related organization, such as, National Institute on Disability and Rehabilitation Research: http://www.ed.gov/offices/OSERS/NIDRR. If you do not have Internet access, try your local library (usually free) or a business center like Kinko’s (small fee) to get on-line.
Supported Employment Defined

**Employment Specialist (ES) Competency**

- *ES displays belief that all people have the right to work and no one should be excluded from employment services based on “readiness” skills or disability.*

Work is an important part of life. Work offers financial security, personal challenges, growth, and the potential to develop relationships. Supported employment offers individuals with disabilities the opportunity to be successful at community work.

Supported employment is a process of ongoing services that assists an individual, regardless of severity of disability or intensity of supports needed, to be employed at a real job for real wages. **Supported employment** is defined by the Rehabilitation Act Amendments (1998) as:

“...competitive work in integrated work settings, or employment in integrated work settings in which individuals are working toward competitive work, consistent with the strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the individuals, for individuals with the most significant disabilities

(a) for whom competitive employment has not traditionally occurred; or

(b) for whom competitive employment has been interrupted or intermittent as a result of a significant disability; and

(c) who, because of the nature and severity of their disability, need intensive supported employment services for the period, and any extension, described in paragraph (36)(C) and extended services after the transition described in paragraph (13)(C) in order to perform such work.

Supported employment may be transitional for persons with chronic [serious] mental illness.”

Supported employment is paid work with ongoing supports in an **integrated setting** for those with the most significant disabilities. Paid work implies commensurate wages paid by a community **employer** of record. Ongoing supports are services needed by an individual with a disability in supported employment in order to continue successfully performing his or her job after **stabilization** has occurred. An integrated setting refers to an employment situation where individuals have the opportunity
to interact with non-disabled individuals to the same extent that non-disabled individuals in comparable positions interact with others. Section 7 of the Rehabilitation Act Amendments of 1998 defines a “significant disability” as:

An individual with a disability.

- Who has a severe physical or mental impairment which seriously limits one or more functional capacities (such as mobility, communication, self-care, self-direction, interpersonal skills, work tolerance, or work skills) in terms of an employment outcome;
- Whose vocational rehabilitation can be expected to require multiple vocational rehabilitation services over an extended period of time; and
- Who has one or more physical or mental disabilities resulting from amputation, arthritis, autism, blindness, burn injury, cancer, cerebral palsy, cystic fibrosis, deafness, head injury, heart disease, hemiplegia, hemophilia, respiratory or pulmonary dysfunction, mental retardation, mental illness, multiple sclerosis, muscular dystrophy, musculo-skeletal disorders, neurological disorders (including stroke and epilepsy), paraplegia, quadriplegia, and other spinal cord conditions, sickle cell anemia, specific learning disability, end stage of renal disease, or another

disability or combination of disabilities determined on the basis or an assessment for determining eligibility and vocational rehabilitation needs to cause comparable substantial functional limitation.

Supported employment is a process that creates and expands employment opportunities for individuals with significant disabilities.

The supported employment process may include (see Section 3 of this manual for more detailed information):

- Getting to know the individual with a disability;
- Placement assistance, including job exploration and job development;
- On-the-job training and support as needed;
- Assistance with developing natural supports;
- Performance monitoring and enhancement;
- Advocacy and community building;
- Career planning; and/or
- Extended/ongoing support for as long as needed, including both on- and off-site supports.
Supported Employment is **NOT:**

- **A readiness program.**
  There are no job readiness criteria used to screen potential supported employees. All people, regardless of type or severity of disability, can work in the community. A person does not have to “prove” worthy of supported employment by participating in a daily activity or sheltered work program. The belief that everyone, regardless of type or severity of disability, has the right to work in the community or participate in any social or non-work activity, is known as **zero exclusion.**

- **Transitional in nature.**
  Community employment is a desired goal. Supported employment is a preferred entryway into the world of work. An individual need not “graduate” into a supported employment program. However, supported employment may be considered **transitional employment** (a series of temporary job placements leading to a permanent job placement) for people with serious mental illness.

- **A “cookie cutter” approach.**
  It is individualized to meet an individual’s unique needs, capitalizing on his or her capacities, interests, personal strengths, and dreams. In the mental health arena, the supported employment process is often called the “choose, get, keep, leave” vocational model (Bond, 1991).

- **Place and pray that the job will work.**
  Supported employment is a systematic process with its own technologies and methodologies.

- **A short-term commitment.**
  By its very nature, supported employment offers ongoing services.

- **An individual effort.**
  A partnership of many persons, including the individual, the Employment Specialist, Vocational Rehabilitation Services, other service providers, the employer, etc., is fundamental to the supported employment process.

Because supported employment is a process that emphasizes the individual, there is a high correlation between consumer satisfaction and success. With this personal success comes important contributions to community. The benefits to individuals and their communities include:

- Individuals with disabilities contribute to society by engaging in meaningful work, earning wages, paying taxes, and accessing community activities and resources as consumers of goods and services.
- Employers realize individuals with disabilities are productive and loyal employees and are an overall asset to their businesses.
• Individuals with disabilities transcend the stereotypes of being “disabled” by filling the roles of employee, co-worker, and friend.
• Individuals with disabilities engage in relationships outside the network of paid providers.

• People with disabilities gain control of their lives.
• Available resource expansion due to the utilization of generic, community resources that occur naturally in communities.

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**Important Things to Remember:**

☑ Supported employment is relationship building. It implies an equal partnership between the job seeker and the service provider. Both the individual and the Employment Specialist have defined rights and responsibilities.

☑ Involvement in supported employment requires sensitivity to all aspects of an individual’s background and culture, current living situation, and dreams.

☑ Supported employment is a process of mutual discovery.

☑ The main purpose of supported employment is to assist individuals with disabilities to obtain and maintain employment consistent with their interests and skills.
Questions to ask and information to seek

1. How is supported employment unique in contrast to other rehabilitation options? Why do you think supported employment is so successful?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. What is your agency’s mission? Do written value statements exist to support this mission?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3. What are your program’s admission criteria for supported employment? Are these criteria consistent with your organization’s mission? Is this consistent with the supported employment philosophy of zero exclusion?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

4. Before this job, did you have any personal connections with a person with a disability? In what ways did those connections influence you?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

5. What would you do if an individual really wanted to participate in supported employment but his or her significant others were against the idea?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
6. Who are the other supported employment providers in your area? How do their services differ from those provided by your agency? (VRS can provide you with a list of SE providers in your area and across the state.)

7. For more information about supported employment in Indiana, request a copy of Supported Employment in Indiana: A Decade of Opportunity, available through the library at Indiana Institute on Disability and Community (see the resource section of this manual).
The Employment Specialist

Employment Specialist (ES) Competencies

- ES views his or her role as challenging and rewarding, and looks forward to work.
- ES displays flexibility to make changes in daily schedules and the ability to perform multiple tasks effectively and efficiently.
- ES demonstrates working knowledge of positive behavior supports, support strategies, and assistive technology. All supports must be as typical and non-intrusive to individuals and the workplace as possible.
- ES demonstrates familiarity with the local business community and resources.
- ES demonstrates effective writing, documenting and recording skills that utilize alternative formats as needed to assure all understand.
- ES demonstrates effective conflict resolution, negotiation, problem-solving, and self-advocacy skills and promotes these skills in individuals served.

There may be many agency staff involved in the lives of individuals with disabilities. The professionals primarily responsible for assisting individuals with disabilities to obtain and maintain employment through supported employment are often known as Employment Specialists. Other common job titles for these positions include Employment Training Specialist, Employment Advisor, Employment Consultant, Employment Support Specialist, Case Manager, Job Developer, and Job Coach.

The Employment Specialist’s role is one of equal partner, active supporter, and assistant as defined by the individual with a disability. It is a role of partner, consultant, and resource to an employer and of partner, vendor of service, and liaison to the funding source. It is important to balance these roles and remember that all these parties are your consumers.

Considering the professional demands of the Employment Specialists’ role, there are essential skills needed for the job. These skills include:

- Specialized knowledge about the supported employment process;
- Active listening skills, communication skills and ability to give feedback;
- Knowledge of support mechanisms, including positive behavior and natural supports, systematic instructional strategies, assistive technology and other typical, non-intrusive supports;
• Marketing and networking skills;
• General case management and collaboration skills, including effective recording and documentation, negotiation, conflict resolution, problem solving, and public speaking;
• Advocacy skills;
• Knowledge and application of various disability and employment related legislation;
• Understanding of government entitlement/benefits and their inter-relationships;
• Ability to work independently and as part of a service delivery team; and
• Willingness to work a flexible schedule.

Regardless of the qualifications required for Employment Specialists (some agencies require a college degree and others do not), the position needs to be considered professional and staff must conduct themselves in that manner. Whether working with individuals, employers, family members, or other service providers, it is important that Employment Specialists display confidence, competence, and professionalism. Some tips include:

• Communicate to all consumers and let them know what’s going on. Try to return all phone calls (and e-mails) within 24 hours.
• Dress the part. Consider carrying an extra set of clothing with you, so you can be prepared for training at job sites, as well as job developing or meetings with individuals or families. Also remember your emotional appearance: remain calm, collected, and confident.
• Get good at the paperwork (because it will not go away)! Edit and proof every letter, report, and other document that leaves your desk. Ask others for assistance if spelling and grammar are not your best skills. Be concise and brief. Be neat and legible. If your handwriting is poor, type it. Be person centered and respectful in your text. In other words, write about the person as though he or she would read it, avoiding unkind or judgmental statements that might be offensive to him or her. Be as objective and factual as possible in your writing. Make sure everyone that needs copies, gets copies in a timely manner. Don’t get behind; procrastinating paperwork will come back to haunt you.
• Keep everyone informed!
Documentation of EVERY staffing (or monthly report) should always include:

**For persons in job development:**

- Review of vocational objective/ideal job scenario
- Review of any job trials or job shadowing
- Review of strategic plan, including all places job developed and outcome of each
- Plan for future job development (including specific lists of employers you plan to contact)

**For persons working:**

- Place of employment, hours, wage, start date
- Brief overview of job duties
- Feedback from employer (written, verbal, or both)
- Natural supports developed
- Training plan (and data if applicable)
- Fading plan (and anticipated date of entry into follow‐along)

- Always document the necessity of your actions, in relation to the person’s needs and the plan that you have established with him or her. If you cannot make a connection between what you did and what the individual needs and what was planned, it may not have been necessary.

- Be on time for all appointments, meetings, etc... and ALWAYS call if you are going to be late.
- Follow through on commitments, do what you say you’re going to do, talk the talk and then walk the walk. Keep a to-do list, track assignments, and deadlines. Keep your calendar with you at all times. Try not to procrastinate undesirable tasks.
- Keep brochures and business cards with you at all times. You never know when an opportunity for networking or job developing will come along.
- Be confident! You do not need to know everything; no one expects you to. But you do need to show confidence in your problem solving ability. Say “I can find out” or “I’ll refer you to someone who can help” to demonstrate your willingness to answer questions. Sometimes (for example, during job development with an employer), it may be more beneficial to “be impressed” than to “impress”. This indicates that you are listening to the employer and paying attention to his or her needs, and not focusing too much on impressing him or her on what you know.
- Take time to thank people.
Important Things to Remember:

☑ Supported employment offers ongoing support and requires flexible work hours.

☑ Every supported employment opportunity can positively impact an individual’s life. There are no cookbook recipes for success. Involvement in supported employment offers many tangible/intangible rewards and opportunities for personal growth and enrichment. Multiple skills and tasks keep the job fresh and fluid.

☑ An Employment Specialist position can encompass the following roles: job developer, career planner, case manager, teacher, coach, bridge builder, mobility coordinator, benefits analyst, business consultant, advocate, marketing representative, professional, facilitator, supporter, and friend . . . definitely a job with variety!
Questions to ask and information to seek

1. What title(s) does your agency use to describe the Employment Specialist position? Obtain and compare job descriptions of all employment-related positions in your agency.

2. How would you describe your role as an Employment Specialist to someone unfamiliar with rehabilitation services?

3. The Center on Disability Information and Referral (CeDIR) at the Indiana Institute on Disability and Community loans and sends publications through the mail. The only cost is for shipping and handling. They publish a catalogue of current, Indiana Institute produced publications. Call CeDIR at (812) 855-6508 to request a catalogue or publication, or visit the website at

   http://www.iiddc.indiana.edu/cedir/

4. Certificate trainings by the Indiana Supported Employment Training Team (ISETT) and the Supported Employment Consultation and Training (SECT) Center are available for supported employment. Periodic flyers announcing dates and locations are sent to all supported employment program managers.
5. Consider joining the **Association for Persons in Supported Employment (APSE)**. Your organization may already be a member. APSE publishes a quarterly newsletter, holds annual national conferences, publicizes current issues, disseminates information, and **advocates** for individuals with disabilities. They also publish ethical guidelines for professionals in supported employment. Membership in APSE includes membership in the Indiana Association for Persons in Supported Employment (IN-APSE). Contact APSE at 1627 Monument Avenue, Richmond, VA 23220 or [www.apse.org](http://www.apse.org).

6. Many publications are available through the Training Resource Network (P.O. Box 439, St. Augustine, FL 32085-0439).
   Website: [http://www.trninc.com/](http://www.trninc.com/)
   They also publish a bi-monthly newsletter called **Supported Employment Infolines**. Catalogues are available upon request.
Moving Ahead with the Vision

Employment Specialist (ES) Competencies

• ES continuously evaluates services provided and satisfaction of customers to improve services/supports provided.
• ES demonstrates a basic knowledge of accreditation standards related to employment services.
• ES demonstrates the ability to work with others as a team member.
• ES demonstrates basic understanding of legislation effecting supported employment.

Quality Indicators

A continuous and constant pursuit of quality is critical to the success of supported employment. Supported employment involves many clients, primarily the individual and the employer, and secondarily the funder/referral agent, the co-workers, and other members of the individual’s planning team. Supported employment providers must continually collaborate with, and seek feedback from all clients in order to assure quality. Employment Specialists have a critical role in assuring the effectiveness and efficiency of supported employment services, while vigilantly promoting individual choice and control.

Typical quality indicators of supported employment include:

• No readiness criteria are used for entry into supported employment services.
• Employment Specialists are strong advocates for individuals and for work.
• There are reasonable timeframes for entering services, finding a job, and receiving supports.
• The individual, family, and the planning team direct the supported employment process.
• The service provider offers a team approach to services. Individuals are viewed holistically.
• Employment Specialists are professional and well trained. Turnover among Employment Specialists is minimal.
• A variety of jobs, based on individual’s wants and needs, are developed.
• Employment Specialists focus on natural supports and on- and off-site community connections.
• Job losses are not viewed as failures but as opportunities to learn what works for individuals. Individuals are quickly re-entered into active job development.
• Flexibility in terms of hours of support, job opportunities, and individual supports is offered.
• Consumer’s input is sought and valued.

(Adapted from: Carie [Howard-Herbein] and Banks, 1997)
The Employment Specialist must always strive for quality. To the community, the Employment Specialist is often the initial (and sometimes the only) point of contact with the rehabilitation organization and the disability field. The benchmarks of quality define the success of supported employment outcomes. If outcomes are of good quality, the community will value the work of persons with disabilities and see the value of supported employment as a service. Employment Specialists can work to improve quality outcomes in many ways, including:

- Investing the time to really get to know supported employees, their families, and their planning teams;
- Constantly identifying barriers that might impede the job search or impact employment and strategizing ways to overcome them;
- Understanding the many roles of the Employment Specialist, as well as the roles of Vocational Rehabilitation Services, other funders and referral sources, the supported employee, and other stakeholders;
- Actively seeking out additional learning opportunities, including attending agency and statewide trainings and networking opportunities;
- Keeping current in the field and up-to-date on supported employment best practices;
- Tracking and monitoring one’s own performance (placements, retention, productivity and consumers feedback);
- Supporting team members, supervisor, and agency to strive for improving quality;
- Participating in local community transition councils that focus on the movement of students with disabilities from high school to adulthood;
- Working to develop all of the Employment Specialist Competencies listed throughout this manual; and
- Serving as a mentor for others in the field as skills are developed.

Another strategy is to understand and participate in the accreditation process. Any vendor currently under contract to provide rehabilitation and/or habilitation day program service for adults must seek and attain accreditation from an organization called CARF (The Rehabilitation Commission). CARF is a not-for-profit organization that annually establishes a set of “[inter]national consensus standards” that define the expected inputs to, processes for, and outcomes of rehabilitation programs and services for those people receiving services. CARF recognizes an organization’s compliance with these standards through accreditation.

The Indiana Code was amended regarding accreditation of organizations (House Enrolled Act 1511), effective July 1, 2003. This legislation clarifies that the Rehabilitation Services Bureau
will contract with organizations or individuals that are accredited by one of the following accrediting organizations:

1. **CARF** (described above)
   http://www.carf.org

2. **The Council on Quality and Leadership in Supports for People with Disabilities (The Council):** an international organization that provides a continuum of services and resources, including accreditation and quality enhancement reviews of human and social service organizations and systems. Review provides organizations with external benchmarks for practices and ways to strengthen their own internal practices. The Council emphasizes the outcomes that people with disabilities identify as most important; identification of organizational and individual supports that enable people to achieve outcomes; provision of individually-tailored supports and services; connectivity between staff activities and desired outcomes of persons served; person centered life planning and service delivery; and organizational accountability and pursuit of excellence.
   http://thecouncil.org

3. **The Joint Commission on Accreditation of Healthcare Organizations (JCAHO):** an independent, not-for-profit organization that has developed professional-based standards and evaluates the compliance of health care organizations against these benchmarks. Their evaluation and accreditation services are provided for the following types of organizations: general, psychiatric, children’s and rehabilitation hospitals; health care networks; home care organizations; nursing homes and laboratories.
   http://www.jcaho.org

4. **The National Commission on Quality Assurance (NCQA):** an independent non-profit organization whose mission is to evaluate and report on the quality of the nation’s managed behavioral health care organizations and providers. The NCQA’s accreditation program is designed to foster accountability for the quality of care and services to members; provide employers, public purchasers, health plans, and consumers with meaningful information about the organizations; strengthen population-based continuous quality improvement programs; and encourage effectiveness of care by addressing the need for prevention, early intervention, and coordination of behavioral health with medical care.
   http://www.ncqu.org
Federal and State Initiatives that support employment of people with disabilities

Supported employment is constantly evolving and expanding. There are many current changes in federal legislation that can dramatically affect supported employment such as:

*The Workforce Investment Act (WIA)* was designed to consolidate, coordinate, and improve employment, training, literacy, and vocational rehabilitation programs. The Act provides for the establishment of workforce investment boards; national training programs (i.e., for adults aged 18 or older, dislocated workers, Native Americans, migrant/seasonal farm workers, veterans, youth); adult education and literacy programs; development of a “One-Stop” system for job training, education, and employment services; reauthorization of the Rehabilitation Act of 1973; and unified state plans to ensure coordination of workforce development activities. WIA replaced the *Job Training Partnership Act (JTPA)* effective July 1, 1999.

*Amendments to the Rehabilitation Act* designed to make it easier for the consumer to access competitive employment and Vocational Rehabilitation Services. These include presumption of eligibility for VRS for individuals who are recipients of SSI or SSDI, strengthening informed choice of individual who access VRS, and encouraging the use of self-employment throughout VRS.

*The Ticket to Work and Work Incentives Improvement Act (TWWIIA)*, passed in 1999, encourages SSDI beneficiaries and SSI recipients to use “tickets” to choose the service provider of their choice from an Employment Network (EN). This legislation also provides for expanded availability of health care: Extended Medicare Coverage for SSDI beneficiaries for at least 93 months, and expanded state options and funding for Medicaid Buy-In (known as MED Works in Indiana). Provisions also include Expedited Reinstatement of Benefits, changes to the Continuing Disability Review process for individuals making timely progress on achieving their goals under the Ticket program and work incentive planning and assistance for beneficiaries. The provisions of TWWIIA were phased in between 10/1/00 - 1/1/2004. Demonstration projects and studies have been conducted regarding the improvement of Title II work incentives. On July 1, 2008, Social Security issued new regulations significantly improving the Ticket to Work Program. These new regulations make it more feasible for employment and training programs to become Employment Networks and provide services to beneficiaries to help them work toward Self-Sufficiency.
The Basics of the Ticket to Work at a Glance

The Ticket to Work Program is based on the premise that Social Security beneficiaries can work.

- **How Individuals Use Their Ticket**
The Ticket to Work is a voluntary program that offers beneficiaries age 18 through 64, and who are receiving Social Security Disability Insurance (SSDI) and/or Supplemental Security Income (SSI) based on disability, more options to obtain the services and supports that they need to work and to achieve their employment goals. Participation in the ticket to work is not mandatory; however if a beneficiary chooses to use the ticket, they have the opportunity to contact various Employment Networks (EN’s) to discuss services and choose the right EN to help them with employment services. Employment Networks are any entity that has entered into an agreement with the Social Security Administration to provide employment services to beneficiaries of Social Security.

- **How the Ticket Encourages Increased Self-Sufficiency:**
This program is designed to reduce reliance on Social Security disability benefits and promotes increased self-sufficiency for beneficiaries with disabilities through work. While some beneficiaries of Social Security may choose to work at a level where they are no longer dependent on cash benefits, some may not. The program is flexible and allows individuals to work to their fullest potential and use Social Security’s work incentives.

- **How Beneficiaries and Employment Networks Work Together:**
Beneficiaries and an Employment Network enter into an agreement to achieve goals through an Individual Work Plan (IWP) also known as an Individual Plan for Employment (IPE). When beneficiaries achieve certain benchmarks with their earnings and employment goals, Social Security rewards the Employment Network with outcome or milestone payments for helping beneficiaries achieve these benchmarks. The Ticket to Work payment system is an outcome based system with the ultimate goal of moving beneficiaries beyond Social Security cash payments and on to complete self-sufficiency. Employment Networks may enter into a partnership with the Office of Vocational Rehabilitation to help beneficiaries achieve goals toward self-sufficiency.
The Basics of the Ticket to Work at a Glance

• **How Social Security Pays Employment Networks:**
  There are two types of payment systems under the Ticket to Work. These include the Outcome Payment System and the Outcome-Milestone payment system. Most Employment Networks, including supported employment providers use the Outcome-Milestone Payment System in which the payments are provided in three phases:
  - During Phase 1, payments are made based on gross income (ignoring deductions for work incentives) and working at the Trial Work Period amount. Phase 1 payments for SSI and SSDI tickets are the same.
  - Phase 2 payments are also based on gross income (ignoring deductions for work incentives) and working at the Substantial Gainful Activity.
  - Phase 3 payments are based upon countable income and leaving the Social Security cash benefit roles.

Because the payments are contingent upon reaching certain goals with cash benefits and work incentives, it is critical that employment service providers and their staff understand Social Security programs and work incentives. There are several ways to become informed about federal and state benefit programs through work incentives trainings offered in Indiana through the Indiana Institute on Disability and Community [www.iidc.indiana.edu/cclc](http://www.iidc.indiana.edu/cclc) or through the Supported Employment Consultation and Training Center [www.sectcenter.org](http://www.sectcenter.org).

• **How to Become an Employment Network:**
  If your agency is in the business of helping people with disabilities find work, it is a good idea to discuss becoming an EN or partnering with other organizations to combine resources as an EN. There is a Request for Proposal (RFP) to participate as an EN through the Social Security Administration. More information can be found at Social Security’s Work site: [www.socialsecurity.gov/work](http://www.socialsecurity.gov/work).
**Indiana Medicaid Buy-In** is a program designed to provide access to comprehensive health care for working people with disabilities. This program is critical for people with disabilities who have a difficult time finding affordable comprehensive health care coverage in the private market. The Medicaid Buy-In allows working people with disabilities to pay a premium to participate in their state’s Medicaid program, just like they would if they were buying private health care coverage. Effective July 1, 2002, The Indiana Office of Medicaid Policy and Planning implemented the Medicaid Buy-In program for working Hoosiers with disabilities called MED Works. (Medicaid for Employees with Disabilities).

Another change that effects the evolution of supported employment is provider expansion, both the establishment of new providers of supported employment, as well as existing providers expanding beyond their traditional geographical territory.

This expansion brings about an increase in competition for both consumers of services and employers. There is also greater emphasis on natural supports, profiling, community connections, holistic and team-centered service provision, and career advancement versus “just finding someone a job.” In addition, assistive technology is advancing and expectations for the skills and competencies of Employment Specialists are expanding.

As the demand for services increases, it is expected that the importance of consumer choice will continue to expand. Therefore, quality and consumer satisfaction will become even more vital to an organization’s survival. Supported employment staff must be able to thrive in environments of organizational change. Staff must focus on professionalism and competencies, including effectiveness and efficiency as even greater numbers of individuals with disabilities gain access to new community opportunities through supported employment.
Important Things to Remember:

☑ Quality outcomes are essential to the success of supported employment.

☑ It is important to measure success by both achieving professional goals and assisting individuals with disabilities to achieve their goals.

☑ There are many changes in state and federal legislation affecting supported employment. It is important to keep current on these changes, issues in supported employment, and pending legislation.

☑ Networking with peers is very important. Employment Specialists must constantly seek training and new learning opportunities to grow in their role.
Questions to ask and information to seek

1. How is supported employment success defined in your agency? What quality indicators are tracked? Ask for a copy of your program’s Outcome Measurement (or Program Evaluation) system.

2. Ask yourself:
   - What can I do within the scope of my job to promote quality?
   - How will I determine and monitor quality?
   - What are the goals of your agency’s supported employment program?

3. Is your agency an Employment Network? How can an agency benefit from becoming an EN? How does Ticket to Work benefit a consumer of SE services?

4. Does your supported employment program have a mechanism in place to collect feedback? How is it collected (surveys, telephone interviews, etc.)? Is feedback sought from supported employees? Employers? Funders and referral sources? How is this feedback used for program planning and development?

5. Take responsibility for your own growth. Positions within the supported employment field are professional. Take time to grow in your knowledge, attend trainings and conferences, and set personal learning goals.

6. Your supervisor will have a copy of the accreditation standards that your agency or department must follow. Ask to see a copy and review these standards. Do not worry if you do not understand everything. Use the manual as a tool to ask questions and learn more about quality measures in supported employment. Accreditation standards are revised regularly (often annually), so your review should be ongoing.
Supported Employment Systems

Referral and Funding Sources

Employment Specialist (ES) Competency

- ES demonstrates a basic knowledge of referral and reporting requirements of funders and referral systems, specifically Vocational Rehabilitation Services, Bureau of Developmental Disabilities Services, Division of Mental Health and Addiction, Medicaid Rehabilitation Option, and Medicaid Waiver.

Vocational Rehabilitation Services (VRS)

Supported employment is one of many services that are provided through the Indiana Family and Social Services Administration (FSSA), Division of Disability and Rehabilitative Services (DDRS), Vocational Rehabilitation Services (VRS). VRS is a federally funded program using matching funds from the State of Indiana to assist in obtaining the federal money for Indiana’s Vocational Rehabilitation program. Supported employment was originally established as a service in the Rehabilitation Act Amendments of 1986 and has been subsequently included in the Rehabilitation Act Amendments of 1992 and 1998.

Supported employment was developed to provide individuals with the most significant disabilities opportunities to secure competitive employment in their communities and give Hoosiers with disabilities the opportunity to work alongside their non-disabled peers. In the early 1980s, Indiana began including supported employment as one of many services available to individuals eligible for VRS. These services, available primarily to those with physical or developmental disabilities, were provided through community rehabilitation organizations, usually as an add-on option.

In 1988, The Center for Mental Health (CMH) in Anderson, Indiana began providing supported employment to address the specific needs of persons with mental illness. In 1992, Governor Evan Bayh mandated the closure of Central State Hospital in Indianapolis. This prompted the recruitment of additional supported employment providers and increased the accessibility of supported employment services to consumers of mental health services.
Individuals interested in pursuing assistance in securing employment should contact Vocational Rehabilitation Services. VRS in Indiana is divided into five regions, with each region having a Region Manager who oversees five local areas. In July 2009, VRS moved to a virtual services approach in an effort to have VRC’s increase their presence and work in their communities. Each local VRS area has an Area Supervisor who oversees the Vocational Rehabilitation Counselors (VRCs) that work in their respective assigned area.

To receive supported employment services from Vocational Rehabilitation Services, an individual must first apply and be determined eligible for services. The eligibility guidelines for VRS are:

- **Individual must have a physical or mental impairment;**
- **This impairment must constitute or result in a substantial impediment to employment;**
- **Individual must be able to benefit in terms of an employment outcome from the provision of vocational rehabilitation services; and**
- **Individual must require services to help him or her secure, retain or regain gainful employment.**

An individual who is interested in receiving services from VRS may begin this process by contacting the local VRS office to express his or her interest in applying for these services. VRS will then obtain and process basic referral information from the individual and assign a VRC to the referral. Once the VRC receives the referral information an appointment will be scheduled with the individual to meet and complete the application for services. School personnel, agency personnel, family members, or others who may be supporting this individual to obtain assistance in securing employment may assist individuals in the referral process.

Once an individual has met with his or her assigned VRC and completed an application for services (status 02), the VRC will obtain needed medical and other documentation to assist him or her in determining the individual’s eligibility. Existing records are used whenever possible. VRS may cover the costs associated with obtaining needed documentation or assessments to determine the individual’s eligibility.

After all the necessary information is obtained, the VRC will make a determination as to the individual’s eligibility for services within 60 days of application. The VRC will meet with the individual and review this decision with him or her. If the individual is determined to be eligible (status 10) for VRS, the VRC will work with the individual to develop an Individual Plan for Employment (IPE). This plan will outline all the services that will be provided to the individual to assist him or her in securing employment in the identified vocational field of choice (status 12). The VRC can then begin providing
these services to the individual or purchasing the services outlined in the plan from other vendors.

Supported employment is just one of many services VRS can provide to an individual. Some other services that VRS may provide to individuals are Job Placement, training or educational services, and adaptive devices or equipment. This is just a small example of services VRS may provide to an individual, VRCs can provide more information on the services that VRS provides. Supported employment can only be provided to individuals with the most significant disabilities under the Rehabilitation Act (see section 1 for definition).

In Indiana, supported employment services are provided through Community Rehabilitation Programs (CRPs), Community Mental Health Centers (CMHCs) and other service providers who have a contract with VRS to provide this service to individuals. If the VRC and the individual decide that the individual would benefit from supported employment services, the VRC will provide the individual with the names of agencies in the area that provide supported employment services. The individual (and perhaps an advocate for the individual) can then contract each of these agencies to find out more about the services and supports they provide in order to make an informed choice about his or her preferred provider.

The VRC will make a referral to the agency to provide supported employment services. When the agency accepts this referral, it is making a commitment to provide supported employment services to this individual, as well as to provide or facilitate long-term, follow-along support services. VRS will then supply the provider agency with an authorization for supported employment services, (also known as Tier 1) under results based funding which will be discuss in the next section.

At the time that VRS, the individual, the supported employment provider and other parties determine that the individual is successfully employed and is ready to transfer to ongoing extended services, VRS will close the individual’s case as a successful closure (status 26). VRS case closure is contingent upon an individual maintaining employment for 60 days. The individual will be transferred to extended services under another funding source. While the definition of supported employment states that individuals receiving this service are entitled to receive ongoing extended services (often called follow-along services), VRS in Indiana does not fund these extended services. VRS is a short-term funding agency and only provides funding for supported employment services for an individual until he or she has secured and stabilized in community competitive employment (typically up to eighteen months). Funding for the ongoing extended services must be secured through other sources.
Employment outcomes are appropriate, based on the individual’s strengths, abilities, capabilities, interests and informed choice. Tier One and Tier Two are the two levels that define support needs for an individual. The decision as to which tier the individual will enter is mutually discussed by the provider and the VRC. If an agreement is not reached, the VRC will make the final decision.

**Tier One:** People who need ongoing support and qualify as Most Severely Disabled (MSD) as defined in the VR Services State Policy, deficit in three out of nine life domain areas.

- Cognitive and Learning Skills
- Communications
- Interpersonal Skills
- Mobility
- Motor Skills
- Self Care
- Self Direction
- Work Skills
- Work Tolerance

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**Results Based Funding**

In July 2006, Results Based Funding (RBF) was implemented by Indiana Vocational Rehabilitation Services. RBF is an outcome based payment system where the provider’s compensation is contingent upon outcome performance measures.

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**VRS Status Codes**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>00</td>
<td>Referral</td>
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<tr>
<td>02</td>
<td>Application</td>
</tr>
<tr>
<td>06</td>
<td>Applicant in Extended Evaluation</td>
</tr>
<tr>
<td>08</td>
<td>Case Closure from applicant Status or ineligible for services</td>
</tr>
<tr>
<td>10</td>
<td>Eligible for VRS</td>
</tr>
<tr>
<td>12</td>
<td>IPE Written and Signed</td>
</tr>
<tr>
<td>14</td>
<td>Consumer receiving Guidance &amp; Counseling only</td>
</tr>
<tr>
<td>16</td>
<td>Consumer receiving Physical/Mental Restoration Services</td>
</tr>
<tr>
<td>18</td>
<td>Client in Service/Training</td>
</tr>
<tr>
<td>20</td>
<td>Client Ready for Employment</td>
</tr>
<tr>
<td>22</td>
<td>Client in Employment</td>
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<tr>
<td>24</td>
<td>Services Interrupted</td>
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<tr>
<td>26</td>
<td>Case Closed Rehabilitated</td>
</tr>
<tr>
<td>28</td>
<td>Case Closed Not Rehabilitated, After Plan Implemented</td>
</tr>
<tr>
<td>30</td>
<td>Case Closed, Initial Plan Not Implemented</td>
</tr>
</tbody>
</table>
AND

is likely to need ongoing, intensive intervention to get and keep a job as evidenced by:

• Lack of consistent work history
• Current barriers to employment
• Previous rehabilitation history
• Available supports

Tier Two: People who do NOT need ongoing support.

• Qualifies as having a disability, severe disability, or most severe disability
• Would not require ongoing intensive intervention to get and keep a job as evidenced by:
  • Work History
  • Current barriers to employment
  • Previous rehabilitation history
  • Available supports

Under RBF, payment is made to the provider of Supported Employment Services in four Milestones:

Milestone 1: A Plan for Employment and Supports (PES): A plan developed by the customer and his/her support team. (the support team required members include Employment Specialist, consumer, VRC, and consumer’s representative (if any).

Milestone 2: 5TH Day of Placement: The customer has worked one week at the hours per weekly goal in the vocational area identified in the PES and the consumer is satisfied with the job and the employer is satisfied with the consumer.

Milestone 3: Four Week Placement: The customer has worked four weeks in which he/she met hours per weekly goal and pay rate as stated in the PES.

Milestone 4: Eligibility for Closure: The consumer is employed in supported/competitive employment. The consumer has maintained employment for 60 calendar days (for those eligible for Supported Employment services) or 90 calendar days for others.
Stabilization

Individuals who are eligible for Tier I/Supported employment services must reach a level of stabilization, which is the point in time when the team agrees that intervention time is predictable and intensive job coaching has minimized. Stabilization usually is indicated by the gradual decline and leveling off of intervention time both on and off the employment site, although on going support may be necessary. Stabilization is not a payment milestone and cannot occur before 30 calendar days of employment. Eligibility for VRS closure cannot occur prior to 60 calendar days after stabilization is agreed upon. At the time a stabilization date is agreed upon by the team: The VRC will complete the Stabilization and Notification of Transfer to SE Follow-Along form, and send it to the provider and BDDS. The consumer is placed in status 22(employed) and then transferred to SE Follow-Along upon successful VR closure.

Funding Sources for Extended Services

Once an individual who has been receiving supported employment services is employed and has reached VRS status 26, he or she will be transferred to extended services (also called ongoing supports or follow-along). VRS will discontinue funding for the supported employment services. However, the individual will continue to receive services or support from the supported employment provider agency through other funding sources. The funding source for individuals who receive extended services will vary depending on availability of funds and eligibility criteria. Funding sources should be identified prior to job development. Some of the more common funds utilized for extended services are Bureau of Developmental Disabilities Services (BDDS) funds (Community Budget), Medicaid Waiver funds, Medicaid group home day rates, Medicaid Rehabilitation Option funds (MRO), and the Hoosier Assurance Plan (HAP).

Funding for extended services through the Bureau of Developmental Disabilities Services (BDDS) is available for individuals who have a developmental disability (Title XX). The term “developmental disability” means:

...a severe, chronic disability of a person that:

- is attributable to a mental or physical impairment or a combination of a mental and physical impairment (other than a sole diagnosis of mental illness);
- is manifested before the person is twenty-two (22) years of age;
- is likely to continue indefinitely;
- reflects the person’s need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services that are of lifelong or extended duration and are individually planned and coordinated;
- results in substantial limitations in at least (3) of the following:
– self-care;
– receptive and expressive
– language;
– learning;
– mobility;
– self-direction;
– capacity for independent living;
– economic self-sufficiency.

BDDS has eight districts located throughout the state that provide services to various counties in each area. Each district office has several Service Coordinators, who provide eligibility determination and service coordination. For individuals who reside in a Medicaid-funded group home, the group home provider receives funds from Medicaid as part of their rates to provide or purchase day program services for the individual. These funds can be utilized to pay for an individual’s supported employment extended services.

Medicaid Waiver funds may also be utilized to fund supported employment extended services. These funds are limited to individuals who are eligible and receiving Medicaid Waivers for services. This service must be planned, approved, and included in their individualized plan for services, developed with the individual and the independent case manager for Medicaid Services.

Medicaid Rehabilitation Option (MRO) funds may be utilized to fund some of the supported employment extended services received by individuals with serious and persistent mental illness. These services may not be direct on-the-job training, but could include case management services, adult daily living (ADL) skills training, off-site supports, social skills, community integration skills, and other skills development or support services that may be needed to assist the individual in maintaining community employment. These services may only be provided through an agency that is an approved Medicaid provider. In order for an individual to receive MRO funds, a physician or Health Service Provider in Psychology must certify the diagnosis and authorize the plan of care as indication of his or her approval of the assessment, Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV) classification, and the proposed methods of treatment.

The Indiana Division of Mental Health and Addiction (DMHA) is another agency under FSSA whose mission is to assure the availability of accessible, acceptable, and effective mental health and chemical addiction services for Hoosiers. DMHA has the responsibility to provide funding support for mental health and addictions services to target populations with financial need through a network of managed care providers, certify all Community Mental Health Centers (CMHCs) and managed care providers, license inpatient psychiatric hospitals and administer federal funds earmarked for mental health services and substance abuse prevention projects. While DMHA does not provide funding directly for supported employment services, CMHCs
may receive funding from DMHA to provide various services to persons with mental illness or chemical addictions. The Hoosier Assurance Plan (HAP) is the primary funding system used by DMHA to pay for mental health and addiction services, through contracts with managed care providers who provide a continuum of care for individuals who meet diagnostic, functioning level, and income criteria.

Supported employment extended services may also be funded for individuals through resources that an agency may receive from special grants, United Way funds, county funds, or other funds that the agency may set aside for this purpose. Individuals may pay for their supported employment extended services privately or may use Social Security Work Incentives such as Impairment-Related Work Expenses (IRWE) or Plans for Achieving Self-Support (PASS) to assist with the cost of this service. Detailed information about specific benefits can be found later in the chapter entitled “Consumer Resources and Federal and State Benefits Programs.”
School To Work Transition

Other providers of supported employment services that are not traditionally funded through VRS in Indiana are local school corporations and special education cooperatives. Many of the local school corporations provide work experiences and supported employment services to students as part of the transition component of their Individualized Education Program (IEP). Since this service is only available to students while they are in school, the student, his or her family and school personnel must develop goals and an action plan to transition the student to adult services upon completion of school. These transition goals need to include the local VRS office to ensure that the student has completed the eligibility and application processes for supported employment services. Information should be provided to the student about local agencies who provide supported employment services, so he or she can make an informed choice about a supported employment provider. Ideally, an adult service agency will start working with a student (overlapping job coaching with the school) during the student’s last semester. Generally this support is paid for through VRS.

However, sometimes the student may be employed and not require some of VRS services (such as job development or training), but rather just need an adult service provider for extended follow-along services. In these cases, the VRC will contract with the service provider. The student’s transition goals need to include the adult service provider that the student has chosen to provide him or her services.

For more information on school to work transition visit the following the following links:
http://iidc.indiana.edu
http://www.ncset.org/stateresources/
Important Things to Remember:

- VRS is the primary funding source for supported employment services in Indiana, but does not provide funding for ongoing follow-along services.
- VRS must assume all persons with disabilities, regardless of the severity of their disabilities are employable (zero exclusion).
- Individuals should be able to choose their supported employment provider.
- VRS is one of an agency’s consumers. Supported employment providers should seek out consumer satisfaction information from their local VRS office and VRS counselors.
- Supported employment providers should report progress of services to the VRC. Discussion with the VRC around what documentation they would like to have to supplement the required RBF form should occur. Best Practice in Supported Employment indicates that documentation should include: all job development progress notes including a review of the individual’s vocational objective and ideal work environment, and a list of all businesses contacted on the individual’s behalf. All training and support progress notes should include an update of the current job (duties, wages, hours, etc.), the reason for continued intervention, and a plan for fading.
- By the federal definition, individuals receiving supported employment services are entitled to long-term extended services to support individuals with job maintenance, in making career advancements, and/or job changes.
- Indiana Vocational Rehabilitation Services uses an outcome based payment system called Results Based Funding for supported employment that focuses on an individual’s interests, abilities, capabilities, strengths and informed choice.
Questions to ask and information to seek:

1. In what VRS region is your agency located and to what local VRS offices does your agency provide supported employment services?

2. Who is/are the Region Manager(s) for your area? The local Supervisor(s)? The VRCs?

3. Ask one of your local VRCs to explain the history of Vocational Rehabilitation Services and what services, other than supported employment, they can provide.

4. What is the referral process for your agency for receiving new referrals for supported employment services from the local VRS office? What are the timelines that you must follow? How do you know if an authorization to provide services for an individual has been provided by VRS?

5. What type of reports, meetings, and contacts are you expected to have with the VRC?
6. How does your agency interact with local school programs that provide supported employment services to students? What is your role with school systems? How do students who are exiting the school system get involved with adult services for supported employment?

8. What type of information does your agency provide to individuals who contact your agency about your program and supported employment services to assist them in making an informed choice about the agency they would like to receive these services from?

7. How are individuals participating in other services through your agency (e.g., sheltered work, day treatment, habilitation, etc.) who are interested in supported employment referred to the local VRS office?

9. What funding source(s) does your agency utilize for supported employment extended services?
10. How can individuals use Social Security Work Incentives such as PASS or IRWE to pay for extended services? Where can you obtain more information about Social Security Work Incentives?

11. Where is your district Bureau of Developmental Disabilities Services office located and who is the Service Coordinator for your area?
Rights and Advocacy

Employment Specialist (ES) Competencies

- ES demonstrates a basic general knowledge of the ADA, disclosure, civil rights and related legislation, and Department of Labor (DOL) standards.
- ES interacts with and represents individuals in a positive, professional, respectful, and dignified manner and provides individuals with support and information enabling individuals to make informed choices and ensuring others see individuals as citizens with full rights.
- ES ensures individual is aware of his or her rights.

Individuals with disabilities have the same rights as any citizen and should be treated as full citizens with respect and dignity. An important role of an Employment Specialist is assisting an individual in understanding his or her rights, advocating on his or her behalf, and assisting with self-advocacy/self-determination.

There are many laws, resources, and agencies available to assist individuals who may be discriminated against because of their disability. There are groups and trainings that an individual can contact or join to assist him or her in developing self-advocacy skills. An Employment Specialist can assist an individual with developing these skills through person centered planning activities, self-management tools, problem-solving skills development, and interviewing skills development. An Employment Specialist should take the time to consider how he or she can include the individual in all parts of supported employment and insure that the individual’s wants and desires are being included and he or she is being treated in a dignified and respectful manner.

Following is a list of organizations that individuals can contact to obtain more information about rights or for assistance with advocating for his or her rights. While it is not expected that an Employment Specialist have knowledge and understanding of all these resources, it is recommended that he or she be aware of them and be able to assist an individual in making connections with these agencies as needed.

Indiana Protection and Advocacy Services (IPAS): established “to protect, promote and expand the access to and exercise of human and civil rights of individuals with disabilities through negotiation, litigation and other remedies.”

The Hoosier Orientation Handbook on Supported Employment
To find out more about these services you can contact IPAS at (800) 622-4845 or (317) 722-5555. 
http://www.in.gov/ipas/index.htm

Indiana Protection & Advocacy Services:

- Is for all citizens of Indiana who have a disability and are either being denied a right or are being discriminated against because of the disability.
- Administers 8 federally mandated and funded programs for Indiana:
  - Client Assistance Program (CAP)
  - Protection & Advocacy for Assistive Technology (PAAT)
  - Protection & Advocacy for Individuals w/ Developmental Disabilities (PADD)
  - Protection & Advocacy for Individuals w/ Mental Illness (PAIMI)
  - Protection & Advocacy for Individual Rights (PAIR)
  - Protection & Advocacy for voting access (PAVA)
  - Protection & Advocacy for Traumatic Brain Injury (PATBI)
  - Protection & Advocacy Services for Beneficiaries of Social Security (PABSS)

Laws and legislation that protect the rights of persons with disabilities include the Americans with Disabilities Act (ADA), Indiana Department of Labor Rules (DOL), and the Federal Civil Rights. These were developed to ensure that all individuals are treated equally and to prevent discrimination. The Americans with Disabilities Act contains a section that deals specifically with employment issues, reasonable accommodations and accessibility for businesses. An Employment Specialist needs to be aware of these laws and applicable resources.

Some organizations and resources that assist with self-advocacy skills include:

**Governor's Planning Council for People with Disabilities**
(317) 232-7770 Voice
(317) 232-7771 TDD
http://www.state.in.us/gpcpd/

**ARC of Indiana**
(800) 382-9100 Voice
(317) 632-4387 Voice
http://www.arcind.org/

**Association of Rehabilitation Facilities (INARF)**
(317) 634-4957 Voice
http://www.inarf.org

**Breaking New Ground Resource Center**
(800) 825-4264 Voice
(317) 494-5088 Voice/TDD
ASK-About Special Kids  
(317)257-8683 Voice  
(800)964-4746 Toll Free  
(317)251-7488 FAX  
http://www.aboutspecialkids.org/

Mental Health Association of Indiana  
(317) 638-3501 Voice  
http://www.nmha.org/

ATTIC, Incorporated  
1721 Washington Ave.  
Vincennes, IN 47591  
(812) 886-0575 Voice  
(877) 962-8842 Toll Free  
(812) 886-1128 FAX  
www.atticindiana.org

National Alliance for the Mentally Ill-Indiana (NAMI-IN)  
(800) 677-6422 Voice  
http://www.namiindiana.org/

Self Advocates of Indiana  
http://www.saind.org/

Other good sources of advocacy and self-advocacy are Independent Living Centers:

Center for Disability Information and Referral  
Sponsored by the Indiana Institute on Disability and Community  
(800) 437-7924 Voice/TDD  
(812) 855-9396 Voice/TDD  
http://www.iidc.indiana.edu/

Everybody Counts & Reuben Center  
9111 Broadway  
Merrillville, IN 46410  
(219) 769-5055 (Voice)  
(219) 756-3323 TT  
(888) 769-3636 Toll Free  
(219) 769-5325 FAX  
http://www.everybodycounts.org/

League for the Blind & Disabled  
5821 S. Anthony Blvd.  
Fort Wayne, IN 46816  
(260) 441-0551 Voice/TT  
(800) 889-3443 Voice/TT  
(260) 441-7760 (FAX)  
http://www.the-league.org

Indian Protection & Advocacy Services (IPAS)  
(800) 622-4845 Voice/TDD  
(317) 722-5555 TDD  
http://www.state.in.us/ipas\n
KEY Consumer Organization  
(800) 933-KEYS Toll Free  
(317) 205-2500 Voice  
http://www.imcpl.org/cgi-bin/irnfull.pl?MAIN0594AB

IN-SOURCE Special Education Resource Center  
(574) 234-7101  
(800) 332-4433 Voice/TDD  
http://www.insource.org

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Wabash Independent Living and Learning Center, Inc. (WILL)
4312 S Seventh St.
Terre Haute, IN 47802
(812) 298-9455 Voice
(812) 299-9061 Fax
877-915-9455 Toll Free
http://www.thewillcenter.org

Indiana Center for Independent Living (SICIL)
Stone City Mall
3300 West 16th Street
Bedford, IN 47421
(812) 277-9626 Voice/TT
(800) 845-6914 Voice
(812) 277-9628 FAX
http://SICIIIndiana.org/services

Independent Living Center of Eastern Indiana (ILCEIN)
3771 South A Street
Richmond, IN 47374
(765) 939-9226 Voice
(765) 966-8229 TT
(877) 939-9226 Toll Free
(765) 966-3431 FAX
http://www.ilcein.org/

Indianapolis Resource Center for Independent Living (IRCIL)
2110 N. Capitol Ave.
Indianapolis, IN 46202
(317) 596-6449 Voice
(800) 860-7181 Toll Free
(317) 596-6446 FAX

Future Choices, Inc.
309 North High Street
Muncie, IN 47305
(765) 741-8332 Voice
(866)741-3444 Toll Free
(765)741-8333 FAX
http://www.futurechoices.org/
Important Things to Remember:

☑ All persons should be treated with respect and dignity at all times.

☑ Every effort should be made to utilize the least intrusive methods of intervention as possible at all times.

☑ Individuals with disabilities are entitled to the same rights and freedom as persons without disabilities.

☑ It is important for an Employment Specialist to talk with each supported employment participant about how he or she wants the Employment Specialist to represent him or her and whether he or she wants the Employment Specialist to disclose any information about a specific disability.
Questions to ask and information to seek:

1. What is your agency’s grievance policy?

2. If you feel that a person’s rights are being violated, how do you report this and/or assist the person to self-report?

3. How can you ensure that you promote individuals in developing self-advocacy skills?

4. Talk to other staff and your supervisor about what information you should provide to a prospective employer about an individual. Do you discuss the individual’s specific disability? How can you best handle questions that a prospective employer may ask about the individual’s specific disability?
Consumer Resources and Federal and State Benefit Programs

ES Competency

- ES demonstrates a basic knowledge of Social Security (including application, appeal procedures and benefit calculation) Medicaid, Housing and Urban Development, Food Stamps, Work Incentives, and other public assistance programs.

An Employment Specialist wears “multiple hats” and has a variety of roles. Providing supported employment services involves more than just locating a job in the community and teaching someone how to do the job tasks. Many items influence what type of employment site will match the individual’s wants and desires and what supports the individual will need to be successful in his or her pursuit of employment. One item that often influences an individual’s decision to work competitively in the community is the impact employment may have on his or her benefits or entitlements. It is important for Employment Specialists to have at a minimum, a conversational level of knowledge about benefits and work incentives.

An individual may receive a variety of benefits. Some of the more common benefits that individuals with disabilities may receive are:

Social Security Disability Insurance (SSDI): provides benefits to individuals who are disabled or blind who are “insured” by the workers’ contributions to the Social Security trust fund. These contributions are made under the Federal Insurance Contributions Act (FICA) as Social Security tax paid on their earnings or those of their spouses or parents.

Supplemental Security Income (SSI): cash assistance payments to people who are aged, blind and/or disabled (including children under age 18) who have limited income and resources. The Federal government funds SSI from general tax revenues.

Medicare: a federally funded health insurance program for individuals who have been receiving SSDI benefits for at least 24 months.

Medicaid: a federally funded medical insurance provided to persons by the State through Indiana’s Family and Social Service Administration, available to certain low-income individuals who are disabled.

Section 8 Housing Assistance: federal program funded by the Department of Housing and Urban Development (HUD) that provides rental subsidies to low-income families, single people over age of 62, single women who are
pregnant, and people with disabilities who live in privately owned housing units.

**Food Stamps**: A resource offered under the Department of Family Resources of the FSSA, that supplements the available purchasing dollars of low-income households with food stamp benefits.

**Federal and State Work Incentives**

Understanding benefits can often be very confusing for individuals, advocates and employment specialists. The Social Security Administration (SSA) has funded Work Incentives Planning and Assistance (WIPA) Programs in Indiana, known as Indiana Works. These WIPA programs have trained Community Work Incentives Coordinators (CWICs) who can provide individualized benefits counseling to Social Security beneficiaries who are employed or seeking employment. Specifically, Indiana Works provides the following supports to beneficiaries:

- provide work incentives planning and assistance;
- refer beneficiaries with disabilities to appropriate Employment Networks or State VR agencies based on individual needs and impairment types;
- provide general information about potential employer-based or federally subsidized health benefits coverage available to beneficiaries once they enter the workforce; and
- inform beneficiaries with disabilities of further protection and advocacy services available to them.

For employment service providers, Indiana Vocational Rehabilitation supports providers having knowledge about benefits and work incentives and using this information to support beneficiaries in reaching employment goals. As of this writing, a project called the **Benefits Information Network (BIN)** trains and supports staff from employment services agencies to provide VRS customers information on federal and state benefit programs (contingent upon available funding). Staff who successfully complete the training are referred to as Benefit Information Network Liaisons, and are trained to gather information about the beneficiary’s federal and state benefits; develop a plan to support work incentives; and, collaborate with Indiana Works CWICs as individuals prepare for, obtain, and maintain employment. VRS makes referrals for individual’s in need of benefits counseling to a Benefits Information Network (BIN) as well as provides the funding.

Many of the federal and state benefit programs offer work incentives that support efforts toward employment and self-sufficiency. The use of work incentives is based on the types of benefits, work history and financial goals of each individual. In general, work incentives help individuals pay for the services and items they need in order to work and maintain their benefit until they are stable in employment.
Just knowing about the work incentives is not enough, you must be trained on federal and state benefits and the applicable work incentives and how to support individuals in navigating these benefit programs. Below is an overview of work incentive basics.

### Federal and State Benefit Programs

#### Social Security Work Incentives

**SSDI Work Incentives**
- Trial Work Period
- Extended Period of Eligibility
- Subsidy and Special Conditions
- Impairment-Related Work Expense for SSDI

**SSI Work Incentives**
- Earned Income Exclusions
- Section 1619b
- Student Earned Income Exclusion
- Impairment-Related Work Expense for SSI
- Blind Work Expense
- Plan to Achieve Self Support
- Extended Medicare Coverage for SSDI beneficiaries
- Expedited Reinstatement of Benefits

#### Medicaid Work Incentives

- Medicaid Buy In (MED Works)
- Section 1619b Medicaid Protection

#### Other Federal and State Benefit Work Incentives

- HUD Earned income disregard
- Individual development accounts
- Family and self-sufficiency accounts
- Earned income tax credit

To explore benefit programs and work incentives in detail, visit:

http://www.iidc.indiana.edu/disabilitybenefitsandwork/default.htm
http://www.ssa.gov/disability/
http://www.socialsecurity.gov/redbook/
Important Things to Remember:

- Social Security Disability Insurance (SSDI or Title II) is a benefit paid to individuals with disabilities (and their dependents) who have been employed and who have paid Social Security taxes through wages earned.

- Supplemental Security Income (SSI or Title XVI) is a benefit paid to individuals who need supplemental income if they are 65 or older or if they have a disability. This is a needs-based program and is based on income and resources.

- Individuals who receive SSDI benefits may also receive Medicare if they have been receiving SSDI benefits for at least 24 months.

- Medicaid is a needs-based program. Individuals who are disabled with limited income and resources may receive Medicaid to assist with medical expenses, such as medication, doctor appointments, mental health services, etc.

- Work incentives help individuals pay for the services and items they need in order to work and maintain their benefit until they are stable in employment.
Questions to ask and information to seek:

1. Where are the local offices located that provide SSDI, SSI, Medicare, Medicaid, Section 8 and Food Stamp assistance? Does your agency have a contact person at these offices?

2. Who in your agency assists individuals with benefits monitoring? How can you obtain more information on the effects of employment on the benefits of individuals?

3. Several resources exist in Indiana for assistance with work incentives. Contact the Center on Community Living and Careers at the Indiana Institute on Disability and Community at Indiana University, or the SECT Center in Anderson (see Selected Resources section).

4. Visit the Social Security Administration website or visit the local SSA office to obtain a copy of the Red Book On Work Incentives.
   http://socialsecurity.gov/redbook
Overview of Supported Employment

Getting to Know the Job Seeker

Employment Specialist (ES) Competencies

- **ES demonstrates the ability to gather and document information needed to develop a Vocational Profile/Person Centered Plan, such as spending time with the individual in multiple settings, observing work in the community, and talking with others who know the individual.**

- **ES demonstrates the ability to facilitate the Vocational Profiling/Person Centered Planning meeting using a team approach to develop a strategic/action plan that includes specific action steps and time frames. Possible job loss is planned for up-front.**

- **ES displays the ability to arrange for trial work experiences (job shadowing, job tryouts, and situational assessments) to enable the individual to explore options and preferences, if needed.**

- **ES, in partnership with the job seeker and others, clearly identifies the individual’s strengths, preferences (needs and wants), interests, support needs, desired vocational objective, and employment environment.**

- **ES clearly documents a list of businesses to be targeted; and when this list has been exhausted, the team develops a new list.**

- **ES is sensitive to and helps individuals advocate regarding socio-cultural issues.**

The process of getting to know the job seeker in supported employment is critical for job success. The purpose of an assessment is to guide the job development process and find a good job match. A supported employment assessment differs from traditional evaluation in several ways:

1. Its purpose is to determine the best job match rather than to determine capability or eligibility for particular services or programs.

2. It relies heavily on existing information and real experiences rather than testing and simulated activities to determine strengths, interests, and support needs.

3. Its scope is broader and takes into consideration the job seeker’s whole life.

A supported assessment may be called different things (e.g., vocational assessment, profile, person centered career planning). Different techniques
are often used to gather needed information, including individual interviews, interviews with significant others, home visits, job shadowing (observing others doing potential jobs), and job trials (arranging with the employer for the job seeker to try out a job for a short period of time). However, all supported employment assessments involve:

1. getting to know the individual’s strengths, preferences, abilities and support needs in a structured, planned way;
2. determining an appropriate work goal and environment (an ideal employment situation);
3. involving significant others to develop a strategic action plan to guide job development, the employment process, and job retention;
4. documenting all of the above in an understandable, usable format for all those involved (especially the consumer); and
5. continuing to update and revise the plan and information as needed (to address changes).

A supported employment assessment includes two important parts: 1) **Profile/discovery information** which includes basic identification information, relevant background, educational information, financial information (e.g., government entitlements), work experiences, natural supports and connections, personal interests and leisure, learning styles, performance characteristics, socio-cultural information, accommodation needs, and health issues; and 2) a **strategic action plan/Plan for Employment and Supports** which includes the job seeker’s ideal job scenario, specific strategies and action steps to guide the job development process (what, who, by when), and the steps needed once a job begins. The planning team can later use this list to assist with the job matching process.

During the assessment period, a planning team is assembled as many times as needed to assist with gathering information and developing the strategic action plan. The job seeker invites friends, family, rehabilitation counselors, school personnel if applicable, and other service providers. The primary purpose of this meeting or series of meetings is to create a list of prospective employers for the Employment Specialist to use in the job search.
Team members can also assist with identifying employment goals, recommending ideal job characteristics (work environment and socio-cultural issues), addressing concerns and barriers to employment (e.g., benefit loss, transportation), suggesting support techniques, and/or committing to providing supports.

The Employment Specialist documents the profile and strategic plan information on the Plan for Employment and Supports form (standard VRS form) and shares it with the individual and the planning team. The document should be fluid, and reviewed and revised as needed. It should also be written with positive and understandable language. The person responsible for action steps and clear timelines should be identified on the plan. All members of the team must agree on the PES and all must sign the document.

One helpful tool during the assessment is to assist the job seeker to develop a “wants” and “needs” list, taking into consideration issues such as:

- Wages
- Benefits
- Advancement opportunities
- Time off needs
- Desired hours and schedule (full time, part time, days, nights, weekends)
- Location and transportation availability
- Supervision needs
- Safety concerns
- Required/appropriate dress
- Amount of public/consumer interaction
- Noise level
- Temperature factors
- Work environment (inside/ outside)
- Mobility requirements (sedentary/ move around)
- Lifting requirements
- Work space (enclosed/open)
- Number of required tasks and frequency of tasks, and
- Socialization skills needed.
Important Things to Remember:

☑ Traditional vocational evaluation in a sheltered setting is typically not a predictor of an individual’s success in a community job.

☑ Getting to know an individual’s strengths, interests, preferences, and support needs is critical for job success.

☑ The primary purpose for doing a supported employment profile/person centered plan is to develop strategic action steps to guide the job development process.

☑ Various person centered planning techniques, such as Personal Futures Planning (PFP), Planning Alternative Tomorrows with Hope (PATH), and Essential Lifestyle Planning, can be extremely helpful in the supported employment assessment process. Books and videos on these resources can be found in the reference section of this manual.

☑ Do not rely on past case files, student files, or just “hearsay” when getting to know the job seeker. Spending quality time in community settings with the individual will offer information that is more valuable and accurate.

☑ Even with the best job matching processes, it may take an individual several jobs in order to find the one best suited for him or her. The planning team should address potential job loss up-front during the assessment process. Job loss does not mean failure. It is an opportunity to learn more about the individual and to improve the job match for the next placement.
Questions to ask and information to seek:

1. What is your program’s typical process for getting to know an individual? Does this include job shadowing and job trials? Do Employment Specialists typically make visits to the family and home?

2. Who in your agency typically completes the assessment and planning process? If not the Employment Specialist (e.g., done by another staff person within the agency, or someone outside of the agency such as with a transitioning student), when does the Employment Specialist become involved?

4. At what point in the assessment process does the team come together? How are these meetings typically run? How long do they last? Who is involved?

5. How is a strategic action plan to guide job development created? What does this plan include?
6. How is the profile/person centered plan (including the strategic action plan to guide job development) documented? Who receives copies? Is it presented in a usable, understandable format for all planning team members?

7. How does this plan fit in with your agency’s Individual Habilitation Plan (IHP)/Individual Program Plan (IPP), Individual Support Plan (ISP)/Treatment Plan?
Job Development and Placement

Employment Specialist (ES) Competencies

- ES relies heavily on personal networks and referrals for job leads.
- ES develops long-term, mutually beneficial partnerships with businesses that result in quality jobs at a variety of levels with opportunities for advancement.
- ES organizes employment contacts in a way that maximizes efficiency, consumer service and follow-up, shares job leads and successful job placements.
- ES markets services and represents job seeker with a positive, professional, and respectful approach that leads to successful employment.
- ES demonstrates creativity in development of job leads and situations through job carving, job sharing, proposal letters, and other means.
- ES demonstrates the ability to provide initial presentation to employers, obtain information on employer’s needs, and secure a follow-up meeting with employer to show how services of ES can meet employers’ needs.
- ES assists job seekers to maximally participate in job development activities.
- ES thoroughly assesses all job leads, including hours, wages, impact on benefits, duties, work locations, work culture, and supports available, prior to recommending a job placement.
- ES develops/creates jobs based on individual’s interests, skills, preferences and work culture needs. Employment Specialist does not group people together for the convenience of supports or job availability.

Job development is the art of supporting the job seeker to find quality competitive employment consistent with his or her strengths, preferences and support needs. It is a set of individual-focused job search activities based on the ideas generated in the supported employment assessment and action steps from the strategic plan.

An Employment Specialist or a Job Developer, in partnership with the job seeker and his or her planning team, leads this process.
There are several important unique things about supported employment job development:

- Job development is always done on behalf of an individual. While general agency marketing and relationship building is important to generate contacts and leads, all employer contacts are made with the specific individual in mind. Job development is not sales but rather marketing the skills and abilities of an individual to an employer. However, during job development, positions not of interest to the candidate may be located. Employment Specialist should coordinate and share these leads with other team members.

- The single most important aspect of job development is the Employment Specialist getting to know the job seeker well, and developing employer leads specifically based on the individual’s strengths, preferences, and support needs.

- Job seekers and their team direct the job search and selection process.

- The use of both the job seeker’s and the Employment Specialist’s personal/professional contacts and networking are preferred job development techniques. The goal is to develop mutually beneficial partnerships with businesses on behalf of the job seeker.

The Employment Specialist’s role during job development includes:

1. **Contacting potential employers and pursuing job leads based on the job seeker’s strategic action plan.** Never count on the newspaper want ads. Eighty-five percent of available jobs never make the newspaper. Asking about open positions and completing job applications are THE LEAST LIKELY WAYS for success. Better strategies include using referrals, developing long-term relationships with employers, and asking personnel offices to send openings directly to the agency.

2. **Identifying businesses with needs that your job seeker can meet.** The job market is extremely competitive. It may be difficult finding jobs posted that the job seeker qualifies for, if he or she has little or no work history. On the other hand, if he or she is qualified for the job, he or she will be in competition with many other job seekers that may not bring identified barriers to employment. To overcome this situation, the best strategy is to think about the skills and abilities that the job seeker has, and then look for businesses with those needs. A proactive approach of contacting employers prior to job openings and developing employment proposals to meet their needs and the needs of the individual will often result in more job opportunities.
3. **Conducting a job analysis to thoroughly assess each potential job in terms of position responsibilities and work environment in order to recommend good job matches.** This may include analyzing and identifying specific tasks within a given job that might be reassigned to another position (called **job restructuring** or **job carving**) or suggesting a position be created to increase productivity or provide a new service in order to create a better job match for the job seeker (called **job creation** or employment proposal). However, when job carving or restructuring the Employment Specialist needs to be aware of the potential risks of the supported employee not being in a “typical” position within the company which could decrease integration and natural supports or the elimination of this position due to downsizing within the company.

4. **Assisting the job seeker in the application and interviewing process as needed.** Depending on the individual’s preference and need this may take a variety of approaches. Assistance may range from assisting the individual by practicing/role-playing before an interview, to actually accompanying the individual during the interview and completing the application for or with him or her. In some cases, it may be necessary to recommend that the employer forgo a traditional interview and meet the individual in a more informal way.

5. **Assisting the job seeker and his or her team in making the final job selection.** The Employment Specialist should assure that the job duties, required qualifications, job benefits, work-site supports available, and work environment match the individual’s needs (and as many of his or her “wants” as possible) as outlined in Plan for Employment and Supports.

6. **Finalizing and negotiating job duties, schedules, wages, and benefits with the employer.** This may also include assisting with final arrangements for transportation, uniforms, on-site job training, and other needed supports.

7. **Assisting the employer to apply for any employer incentives.** One example is the **Work Opportunities Tax Credit (WOTC)**, a federal income tax credit incentive, that encourages employers to hire individuals who are traditionally difficult to place in jobs or who have trouble gaining experience in the job market.
8. **Facilitating natural supports and connections within the workplace.** The Employment Specialist should start by ensuring that the individual participates in the company’s typical orientation and training. The Employment Specialist or other assigned staff continues supporting employer and co-worker involvement throughout the individual’s employment.

9. **Continuing to serve as a consultant to the employer after the placement.** The Employment Specialist or other assigned staff continues to provide consultation that may include, recommending and facilitating job accommodations, monitoring benefits, assistive technology and other work-related supports as needed.

Helping a supported employee get off to a good start is important. Prior to the supported employee starting the job, the Employment Specialist may assist him or her to:

- Establish at least preliminary transportation arrangements.
- Tour the workplace and meet all supervisors and co-workers.
- Attend the company orientation, if applicable.
- Arrange for uniforms, if applicable.
- Fill out all paperwork (make sure that proper IDs are available).
- Understand all company benefits and policies (sick and vacation leave, health insurance, retirement plans, etc.).
- Understand how income may impact his or her benefits (e.g., Social Security, Medicaid).
- Contact VRS about potential adaptations, authorizations, etc., as needed.
- Negotiate or arrange any necessary accommodations to the job tasks, work environment, schedule, or routine.
**Customized Employment**

Customized Employment builds on proven principles, services and strategies, such as supported employment, and results in individually designed services, supports, and jobs negotiated to fit the needs of a specific job seeker or employee. The term Customized Employment means individualizing the employment relationship between job seekers and employers in ways that meet the needs of both. It is based on a personalized determination of the strengths, requirements, and interests of a person with a disability, and is also designed to meet the specific needs of the employer. It is not a program, but rather a set of principles and strategies that result in employment. It may include employment developed through job carving, self-employment or entrepreneurial initiatives, or other job development or restructuring strategies that result in job responsibilities being customized and individually negotiated to fit the needs of individuals with a disability.

**Self-Employment**

Many people with disabilities dream of owning a business, but there is a gap between dream and reality that can be filled only with careful planning. The Vocational Rehabilitation (VR) Counselor, and other sources of support understands the process and steps for helping a consumer start a business and can help people who wish to be self-employed start a successful business. According to the U.S. Small Business Administration, self-employment is an important and often-used alternative to wage and salary employment. People who are self-employed also are major contributors to the economy and generate many new services and products. Today there are approximately 20 million self employed workers in the U.S. working in some form of entrepreneurial activity. People with disabilities are no different than anyone else who goes into business for him- or herself. They want to be self-employed for various reasons. They may seek freedom from the 9-5 daily work routine or want to be their own bosses. They may want to improve their standards of living, be bored with their current jobs, or prefer to work when and where they want. They may have products or services that they think are in demand. In rural areas, there may be few employers and jobs. People with disabilities may need flexible work schedules or need to work at home.
Important Things to Remember:

☑ Positive attitude and image are critical for job development success. Be professional. Dress for the part. Go with someone else until you feel comfortable.

☑ Remember the power of networking: Become familiar with businesses, labor trends, services and products in your community; participate in trade shows, business expos, and job fairs; join and participate in the Chamber of Commerce and other business associations and civic clubs; volunteer for city/county events (fairs, parades, fund-raisers, cultural events) and not-for-profit organizations; do your personal business (shopping, getting hair cut, working out) in the same town you work; and offer training in disability awareness, ADA, and diversity to businesses and community groups.

☑ FOLLOW-UP on all job leads, contacts, and callbacks in a timely manner. Get organized!

☑ Never over-promise during employer contacts. Promising 100% productivity from day one or suggesting that the agency will do ALL the training or supervision will be detrimental to the placement.

☑ The Plan for Employment and Supports (PES) guides job development. If changes are needed to the strategic action plan/PES, this is discussed at the individual’s planning meetings.

☑ Job development coordination among agency staff is very important. Document your leads, and let others know where you have gone, and where you are going. Some agencies find a computerized employer log helpful, while others have success with weekly job development meetings.

☑ Be prepared for potential employer concerns. Have answers ready when an employer is reluctant to hire due to concerns about high turnover, insurance rates, training costs, attendance and punctuality, productivity, safety, public image, or union issues.

☑ Do not forget self-employment as an option. People with disabilities can and do own their own businesses!
Questions to ask and information to seek:

1. What kinds of marketing materials (such as brochures, fact sheets, introduction letters, videos, references from other employers, and slide presentation) does your program use to market supported employment to employers?

2. Make arrangements to shadow several experienced Employment Specialists as they job develop. How did they describe the program to potential employees? How were the job seekers represented? How did their approaches differ?

3. If the Employment Specialist is a different person than the one completing the supported employment assessment, how does the Employment Specialist assure that he or she gets to know the job seeker well?

4. What type of businesses or organizations does your agency encourage and support Employment Specialists to participate in for networking and business connection activities (e.g., Chambers, Civic Clubs)?
5. Does your program have a **Business Advisory Committee** (a group of business and community members that meet regularly on behalf of your program to assist with job leads, marketing, and community awareness)? Do Employment Specialists attend these meetings and what role do they play?

6. How are job leads coordinated within your department and within your agency? How do you document information from an employer lead?

7. How is job development progress shared with funding and referral sources (e.g., VRS)?

8. How are job analyses conducted and documented? Do they include socio-cultural concerns?

9. Ask others for examples of situations where jobs have been carved or restructured. Are written proposals typically used? What information is included in the proposals?
Training and Support

Employment Specialist (ES) Competencies

- ES assists the worker, as needed, to orient to the new job, including understanding benefits.
- ES encourages typical probation and performance appraisal processes within the workplace.
- As needed, the ES thoroughly analyzes tasks, and collects and analyzes data in order to assist the supported employee to learn the job.
- ES recommends job site modifications, as needed, that are as typical as possible.
- ES uses the employer and co-workers as the first source of training and support.
- ES provides, as needed, training, support, and consultation to the employer and co-workers.
- ES works in partnership with supported employee and employer on the best employment training approaches to meet the individual’s needs, emphasizing self-management techniques.

The type and amount of support that a supported employee receives from an Employment Specialist once a job begins will vary greatly depending on the needs of individual and the employer. Sometimes the Employment Specialist will not go on-site at all, but rather will check in with the supported employee and the employer at regular times, either on-site or off-site. Other times, the Employment Specialist may be on-site, assisting with the orientation and training, until the supported employee and the employer are comfortable with the employee’s performance and the employee is well integrated into the workplace.

In all training and support strategies, the Employment Specialist must strive to be as typical as possible. Current research shows that employees with disabilities are more likely to be well integrated AND earn more if the job acquisition process, compensation package, work roles, and initial orientation and training are typical to others in the workplace. Employees with disabilities who are better integrated are shown to work more hours, have higher hourly earnings and have higher monthly earnings (Mank, Cioffi, and Yovanoff, 1997, 1998, 1999).

Once a job begins the type and amount of support that a supported employee receives from an Employment Specialist will vary greatly depending on the needs of the individual and the employer. For example, an individual may need support learning the job tasks. Other individuals may need support ranging
from how to deal with the stigma of having a disability to acquiring a sense of belonging at the work site. These types of support strategies may be provided by an Employment Specialist on-site (at the work site), and/or off-site (away from the work site).

Regardless of how much support the worker will receive from his or her Employment Specialist, the support and training must focus on both job tasks and work culture. The supported employee needs to learn his or her job tasks and fit into the work environment. It is very important that the worker go through the typical orientation and training process of the employer. The goal is to develop a strong relationship between the supported employee and his or her new supervisor and co-workers, and fully utilize the “natural supports” that exist in the workplace.

Natural supports refer to the supports typically available in a workplace or community setting to all employees or members (e.g., orientation and training programs, company-sponsored social events, supervision, car pools, benefits, and reminders). As this relates to supported employment, it is any assistance, relationship or interaction that allows a person to secure, maintain, and advance in a community job of their choosing, correspond to the typical work routines and social actions of other employees and enhance individual’s work and non-work social life among his or her co-workers and other members of the community (Murphy and Rogan, 1994).

**On-site Supports**

If it is determined that the supported employee needs more assistance than what the employer typically offers, the Employment Specialist may supplement the training at the job site, in partnership with the employer and co-workers. The Employment Specialist develops a plan of organized and strategic training techniques to assist the supported employee to learn his or her job. This often begins by taking baseline data on a particular job or task (based on the job analysis), providing instructional techniques, and then comparing new data to the baseline measures.

The Employment Specialist develops a “tool box” of training supports to assist the worker. One of the first things the Employment Specialist may find helpful is to complete a task analysis of the steps that the supported employee is having difficulty with in order to break down a specific part of the job (a task) into smaller, more teachable steps. The Employment Specialist can then try a variety of methods of assistance, including modeling, demonstration, and/or physical guidance. Other instructional techniques that can be helpful include:
**Prompting** is any type of instruction or feedback given to a worker (e.g., verbal, gestures, physical assistance) to assist him or her to learn a particular job or task. Prompting hierarchy refers to the progression of least to most (or vise versa) intrusive prompts.

**Modeling** is demonstrating the task to be completed by performing the task. It teaches by observation and example. The Employment Specialist may demonstrate for the employee how to physically complete a task, and then ask him or her to repeat what the Employment Specialist has just done. The same technique can be use to learn social skills, such as introductions, starting a conversation, asking for assistance, etc.

Highlighting natural **cues** or creating artificial cues is a type of assistance that involves identifying the natural cue in the work environment that would happen prior to the worker’s next step or task and then assisting the worker to recognize this cue either by calling attention to it or by implementing an artificial cue. For example, in order for someone to know when to go on break, an Employment Specialist can highlight the cue by teaching the supported employee to break when he or she sees others heading towards the break room, or can implement an artificial cue, such as pre-set clock that rings when it is break time. All artificial cues should be as non-intrusive as possible.

**Reinforcement** is rewards that are paired with correct responses to instructional cues to encourage someone to continue or increase a particular behavior or set of behaviors. Reinforcers should be positive, age-appropriate, and the least intrusive as possible. Examples of common reinforcers are pay and praise from a supervisor.

**Self-management techniques** is the use of a procedure that enables the user to manage his or her own behaviors or events through self-prompting or use of tools. At job sites, this might include pictures, symbols, word checklists, modified clock faces, pre-set alarms, cassette recordings, counters, tokens or coins (self delivered) or asking for feedback.

**Positive behavioral interventions and supports** is a way of thinking about behavior that goes beyond reducing the challenging or impeding behavior to multiple approaches such as changing systems, altering environments, teaching skills, and focusing on positive behavior. Positive behavioral interventions and supports are procedures based on environments, teaching skills, and focusing on positive behavior. Positive behavioral interventions and supports are procedures based on an understanding of why challenging behavior occurs. They are part of an ongoing problem-solving process that includes a thorough functional behavioral assessment to
design effective interventions to reduce impeding behavior(s) and/or teach new skills and supports. Interventions that result in humiliation, isolation, injury, and/or pain are not positive behavior supports and would not be considered appropriate in a supported employment setting.

**Assistive Technology** is any item, piece of equipment, service or product system, whether acquired commercially off-the-shelf, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of individuals with disabilities.

Regardless of how long an Employment Specialist plans to remain on-site, all training programs should begin fading from day one. Fading refers to the systematic reduction of training and support. The Employment Specialist negotiates the fading plan with the supported employee and the employer. The Employment Specialist will need to collect data on the progress of the supported employee by documenting whether specific steps are achieved, what types of prompting and methods of assistance are still needed, and/or what types of errors the worker is still making. This data can assist with objective evaluation of performance, determining areas ready for fading or in need of continued training and call attention to areas that may need different training methods, adaptations, or self-management systems. It can be shared with the employer and co-workers to ask for assistance, feedback, and new ideas, and can be shared with funding sources to justify the need for additional intervention and/or to help determine when to transfer into extended services.

**Tips for fading:**

- Fully utilizing existing orientation and training provided by supervisors/coworkers.
- Asking co-workers for assistance in solving problems.
- Encouraging the employer and co-workers to communicate directly with the supported employee.
- Looking for opportunities to back off, such as when a co-worker approaches and interacts in any way.
- Asking co-workers and supervisors to model a task or assist with training.
- Making sure that the individual takes breaks and lunches with others at the job site.

**Off-site Supports**

Training and support strategies can also be provided off the job site. Off-site supports are referred to as services/supports provided at the work site, when the individual is not present and services/supports provided away from the work site. Such off-site supports may be necessary to assist the individual with maintaining employment and with
securing a sense of belonging in the workplace. For some individuals, the supports provided off-site may be more critical to the success of the placement than those supports provided on-site. For example, some individuals with a severe and persistent mental illness may not necessarily need job task related support; instead, they may need support with how to deal with the onset of symptoms, counseling prior to work, social skills training, etc. The types of support strategies will vary from individual to individual.

Off-site supports may include assisting with the following:

- Follow-up services with the individual, employer, parents, family members, advocates, and/or other authorized persons;
- Pay and benefit information and monitoring;
- Arranging for or assisting with transportation;
- Medication monitoring;
- Money management and budgeting;
- Collaboration with other service providers, including case managers, therapists, physicians/medical personnel, living supports, and Vocational Rehabilitation Counselors;
- Accessing leisure and recreational activities;
- Social skills and other job-related skills training such as grooming and hygiene, appropriate dress for work, getting along with co-workers, getting to work on time, breaks and lunch, and coping skills, such as stress management;
- On-going assessment of support needs conducted after the individual is on the job; and
- On-going assessment and modification of the environment to enhance socio-cultural match.

An Employment Specialist may also provide other direct employment related interventions associated with advocacy or case management (e.g., entitlement planning, coordinating referrals to other sources). To the extent possible, Employment Specialists should first assist with the development of a natural support system, on and off the job site, which reinforces the consumer’s sense of belonging to the work environment. Employment Specialists must be able to determine and implement the types of support strategies appropriate to the needs of the consumer, from basic on-site work skills development to off-site counseling that assists in relating to co-workers, supervisors, or dealing with the issue of stigma.
Important Things to Remember:

☑ Training and support can be provided both on and off the job site. The Employment Specialist must strive to be as typical and unobtrusive as possible and must focus on both the job tasks and work culture.

☑ The principles of adult learning are important when supporting individuals with disabilities on jobs: 1) People learn better when they are respected and treated as adults; 2) People learn better when they are comfortable and at ease; 3) People learn better when they are in the natural environment for what they are learning; 4) People learn better when learning promotes progress toward his or her own goals; 5) People learn better when the trainer knows and takes into account the individual’s strengths, support needs, and learning styles; and 6) People learn better when they can quickly feel a sense of accomplishment.

☑ While good common sense is important in providing on-site supports, the Employment Specialist must be able to make objective decisions regarding training and fading. Taking and analyzing data regularly is critical for success.
Questions to ask and information to seek:

1. If the Employment Specialist responsible for job training is typically a different person than the Employment Specialist who developed the job, how do you assure he or she gets to know the job seeker and the job site well?

2. Plan to visit several job sites. What supports (on- and off-site) are being provided by the Employment Specialist? What natural supports are developed?

3. Ask other Employment Specialists for examples of adaptations, self-management techniques and assistive technology used at job sites. How were these developed? How can you access assistive technology for an individual, if needed?

4. How is coverage handled at job sites? How is on-site support handled if you are unable to go to a job site? What are the responsibilities of team members if they, or you, request “coverage” at a job site?
5. How does your agency typically document job or task analyses? How/when is data collected and shared?

6. How are contacts with other service providers, case managers, therapists, physicians/medical personnel, living supports, and Vocational Rehabilitation Counselors handled? What are the Employment Specialist’s responsibilities in relation to these providers?
Extended Services/Ongoing Supports

Employment Specialist (ES) Competencies

- ES assists individuals, as needed, to develop relationships within and outside of their job, including employer-sponsored activities.
- ES facilitates individual, as needed, to access housing, community connections, and other necessary services and supports.
- ES facilitates training and support for other work-related issues, such as transportation, monitoring of benefits, money management, and self-advocacy.
- ES interfaces with family members and other service providers, as needed, and preferred by the individual.
- ES monitors the individual’s job performance and satisfaction, and supports the employee to pursue career development and advancement opportunities.
- ES knows how to assist someone to access support for a job change through knowledge of funding sources and agency guidelines.

Supported employment, by definition, assumes that an individual will need some type of extended services for the life of the job and perhaps for future jobs. VRS and most other sources that fund job development and training services are short-term. This necessitates a transfer to a long-term funding source once the supported employee is stable in the job and the support provided by the Employment Specialist fades or is minimized (called stabilization). Extended services (also called ongoing supports or follow-along) refer to any ongoing supports needed to support and maintain an individual with the most significant disability in supported employment after transition from the initial funding service (often VRS). The goal of such services is to assess and assist the individual’s employment stability.

Ongoing supports can range greatly in intensity and scope based on an individual’s and an employer’s needs; however, they must occur at least twice monthly. They may be provided on-site, off-site, or both. If an individual requests that such supports be provided off-site, they must consist of at least two monthly contacts with the individual and one contact with the employer (see the Federal Register, Volume 59, Title 34). At many agencies, the same Employment Specialist who provides the job development and/or training supports provides the ongoing supports. However, another Employment Specialist whose role is primarily follow-along, a case manager or service coordinator, or another service provider or agency (e.g., someone who assists the individual with his or her living supports) may provide extended supports.
An extended support plan should be developed and put into place by the supported employee’s planning team before he or she transitions from the job training and support phase. The plan includes identification of the needed supports, who will provide the supports (and a back-up plan), and specific timelines and processes for monitoring the plan. Extended supports can be put into place to meet a wide range of needs, including monitoring work performance, monitoring the BIN recommended benefits plan, offering crisis intervention, assisting with socialization and overall integration, supporting employers and co-workers, providing retraining of previously learned skills or training new skills, career development, as well as continued assistance with any off-site supports previously identified. This may include helping to negotiate pay raises and/or increasing job duties in the current position, or assisting the individual to find a new position within or outside of his or her current company. If a supported employee loses or leaves a job, the Employment Specialist may assist the individual to find a new job (which involves pulling back together the planning team and developing a new strategic plan), as well as assist the individual to find meaningful activities while in-between jobs. Extended/ongoing services also include collaboration and coordination with family members and other service providers, including case managers, therapists, physicians/medical personnel, and residential providers, to assist the individual with maintaining their employment status. Regular assessment of consumer satisfaction is another important component of extended services. This may be done in a variety of ways, both formally through surveys and interviews, and informally through regular contact. Supported employees should be asked about their satisfaction with their current job as well as with the supports they are receiving. Regular feedback should also be obtained from employers and from funding and referral sources, and be used to make improvements to the services and supports provided.

**Community Participation**

In some agencies, an Employment Specialist may also have the role of assisting an individual with developing community connections outside of the workplace. Despite the focus on integrated employment and natural supports, a supported employee may still feel isolated and lonely, especially
if he or she was in a school program, a sheltered workshop, or a full day activity or treatment program prior to obtaining community employment. Just being in the community does not necessarily mean people are developing connections and friendships or participating as community members.

**Community participation** is defined as: .... the efforts and activities used to assist people to participate fully in their community and exercise control of their lives. This may include: assistance with developing connections and friendships; membership in local community clubs, organizations and services groups; participation in integrated sports, recreation, and leisure activities; participation in community-based integrated continuing education; and assistance with developing and maintaining volunteer work positions in not-for-profit or public organizations. These activities can be used to supplement supported employment or as alternative to supported employment during transition periods. (BDDS Service Definitions)

Community connections are the set of ties a person has with others. True community participation is the experience of being known, being liked, and belonging with others. It is important to remember that “community” is an EXPERIENCE, not a PLACE. Community participation is NOT an “outing” or a tour of the community with a staff guide.

The process of community participation is very similar to supported employment. It begins with getting to know an individual’s strengths, preferences, interests and support needs and then identifying and exploring possible connections:

- Where would others with the same interests be found?
- Where are general potential welcoming places? Examples include art organizations, business organizations, charitable groups and drives, church groups, collectors’ groups, diners, senior groups, ethnic associations/groups, health and fitness facilities, interest clubs, political organizations, service clubs, sports leagues, social cause groups, neighborhood and block clubs, and volunteer organizations.
- Who are the LEADERS and active members in the community? Who can we enlist as a bridge builder to assist with introductions?

Introductions can be made, support provided as needed and then faded when appropriate. Just as in supported employment, these connections may require continued follow-up and support.
Important Things to Remember:

☑ Extended services may be provided off-site, on-site, or both. Supports are not only related to job duties, but also to developing natural supports and connections on and off the job site.

☑ Be proactive! Keep in regular contact with supported employees and employers to keep issues from building up.

☑ Extended services should include assistance with job changes and career advancement.

☑ Remember that there are many reasons for job dissatisfaction, including boredom, feelings of not being able to do the job well, inadequate supports and interactions from employer and co-workers, or other personal (not job-related) issues.
Questions to ask and information to seek:

1. If the person responsible for follow-along is typically a different person than the Employment Specialist who developed the job or provided the training supports, how do you assure he or she gets to know the job seeker and the job site well?

2. How are decisions made about when to transfer individuals to extended services in your agency? What is the process for this?

3. Once a person is no longer funded from their up-front funding source (e.g., VRS or a school system), what happens if he or she loses a job and needs assistance securing another one? Who provides this assistance? Who (if anyone) funds this?

4. How are extended service plans documented in your agency? How does this plan fit in with your agency’s Individual Habilitation Plan (IHP)/Individual Program Plan (IPP)/Treatment Plan?
5. What are some of the options for individuals who are “in-between” jobs (waiting for another placement)? How do they typically spend their day?

6. How does your agency collect and use satisfaction information from supported employees, employers, and funding/referrals sources?

7. Is it the role of Employment Specialists within your agency to assist individuals with developing other community connections? How is this funded? If not, how can you assist an individual to access support in this area?
Summary

The role of an Employment Specialist is both rewarding and challenging. Because the field of supported employment is constantly changing, it is important that staff continually seek out new information and training on best practices. This handbook is only a beginning on a long journey to learning how to support individuals with disabilities in the community.

Employment Specialists’ Competencies have been listed in each section throughout this manual. It is not expected that new staff will develop these overnight or even in their first couple of months. They should be used as a guide for the Employment Specialist and his or her supervisor to develop a learning plan over the new employee’s first year. In order to gain these competencies, the new Employment Specialist should:

• Utilize the Resources listed in this manual for additional training and information;
• Read books and articles from the Suggested Bibliography;
• Attend available training, such as ESS 100 or EST;
• Job shadow and network with other Employment Specialists;
• Maintain regular times to discuss progress with his or her supervisor and team members;
• Continually seek feedback from consumers; and
• Practice the following Survival Skills.

Employment Specialists’ Survival Skills

• Practice good time management skills. However, do not get so organized or time-efficient that you lose flexibility and creativity.
• Make a point of celebrating successes.
• Make time to get together with other staff for brainstorming and problem solving.
• Assure that your team has adequate backup/coverage systems.
• Get good at paperwork so you can do it quickly, and get back out with your consumers. Have clearly written procedures for paperwork and samples of all documents accessible. Have forms easily accessible.
• Put a high emphasis on staff development. Continue to learn and grow.
• Know when and how to say no! Don’t take on too much.
• Take your vacation and personal time.
• BELIEVE IN YOURSELF AND YOUR CONSUMERS. REMEMBER, YOU REALLY DO MAKE A DIFFERENCE!
GLOSSARY OF TERMS
Page numbers in parenthesis indicate first time word appears in the text

**Accommodation (page 46):** Any change or adjustment to a job or work environment that will allow a qualified individual with a disability to perform the essential functions of the job and enjoy the benefits and privileges of employment equal to those enjoyed by employees without disabilities.

**Activities of Daily Living /Adult Daily Living (ADL) (page 37):** The daily tasks required in life, including personal hygiene, preparing meals, managing household chores or finances, etc.

**Advocate (page 18):** A person who acts on another’s behalf in his or her defense or support.

**Americans with Disabilities Act of 1990 (ADA) (page 45):** Civil rights legislation that provides equal opportunity and access for people with disabilities. This law prohibits discrimination on the basis of disability in employment, state and local government, public accommodations, commercial facilities, transportation, and telecommunications.

**Assistive Technology (page 15):** Any item, piece of equipment, service, or product system, whether acquired commercially off-the-shelf, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of individuals with disabilities.

**Association for Persons in Supported Employment (APSE) (page 5):** An international membership organization whose mission is to improve and expand integrated employment opportunities, services, and outcomes for persons experiencing disabilities.

**Authorization (page 33):** A document from Vocational Rehabilitation Services that authorizes payment for services rendered to an individual by an employment service provider. The authorization specifically outlines the type of service(s) to be provided and the rate of payment.

**Benefits (page 11):** See Entitlements.

**Benefits Information Network (page 52):** A program that trains and supports staff from employment services agencies to provide VRS consumers information on federal and state benefit programs.

**Bureau of Developmental Disabilities Services (BDDS) (page 32):** A bureau under the Family and Social Services Administration of the State of Indiana that plans, develops and administers a variety of services for people who have developmental disabilities.

**Business Advisory Council/Committee:** A formal or informal network of area employers that periodically meet to assist and support the marketing and job development efforts of the supported employment program.
CARF: The Rehabilitation Commission (page 22): A not-for-profit organization that annually establishes a set of “[inter]national consensus standards” that define the expected inputs to, processes for, and outcomes of rehabilitation programs and services for those people receiving services. CARF recognizes an organization’s compliance with these standards through accreditation. Currently, VRS in Indiana requires that all agencies with which they have a contract must have CARF accreditation. The acronym “CARF” originally meant The Commission on Accreditation of Rehabilitation Facilities.

Case Manager (page 15): An individual who organizes, coordinates, and sustains a network of formal and informal supports and activities designed to promote the well being and self-sufficiency of persons with disabilities and achieve continuity of care.

Client Assistance Program (CAP) (page 46): A program under Indiana Protection and Advocacy Services that provides information about VRS, Department of Services for the Blind, Projects with Industry, and the Independent Living Programs. CAP provides information regarding services, the rehabilitation process, and individual rights and responsibilities. CAP can assist with problem solving, communication, and administrative proceedings.

Clubhouse (page 3): A vocational and social rehabilitation program (often part of a CMHC) for adults with a history of mental illness. The model is one of membership and equality between staff and persons with mental illness. Activities often include clubhouse operations such as preparing lunches, publishing a newsletter, maintenance of building and grounds, outreach to other members, phone reception, etc. Some clubhouses operate prevocational work teams, transitional employment, or groups to develop or improve members’ job-seeking skills or readiness to work.

Community-Based Assessment (CBA) or Evaluation (CBE): An exploration of an individual’s abilities, capabilities, and capacity to perform in work situations, which is assessed during trial work experiences in community settings, including experiences in which the individual is provided appropriate supports and training.

Community Mental Health Center (CMHC) (page 33): Agencies established under the Community Mental Health Center Act of 1963 to deinstitutionalize individuals with serious mental illness from state hospitals and provide services in the community. CMHCs currently offer a range of services including outpatient care, day treatment, case management, emergency services, consultation and education, and are accessible to clients regardless of age, race, color, national origin, disability, diagnosis, or ability to pay.

Community Participation (page 80): The efforts and activities utilized to assist people to participate fully in their community and exercise control of their lives. This may include: assistance with developing connections and friendships; membership in local community clubs, organizations and services groups; participation in integrated sports, recreation, and leisure activities; participation in community-based integrated continuing education; and assistance with developing and maintaining volunteer work positions in not-for-profit or public organizations. These activities can be used to complement supported employment or as alternative to supported employment during transition periods.
Community Rehabilitation Program (CRP) (page 33): An agency, or part of an agency, that directly provides or facilitates the primary provision of vocational rehabilitation and other community services to individuals with disabilities to enable individuals to maximize life opportunities, including employment and career advancement.

Community Support Services/Program (CSS/CSP): A mental health center service or program that focuses on personal development by offering recreational programming in the community, providing opportunities for learning basic and advanced living skills, encouraging good physical and mental health, assisting with linkage with vocational and training opportunities, and encouraging overall community involvement. These opportunities are usually provided through case management services, therapy, clubhouse activities, residential services or facilities, and/or groups.

Competitive Employment (page 9): Work in the competitive labor market that is performed on a full-time or part-time basis in an integrated setting; for which the individual is usually compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals who are not disabled.

Consumer/Client/consumer (page 4): The person(s) for whom services are provided.

Continuing Disability Review (CDR) (page 24): Regular, variable-frequency eligibility determination assessment conducted by Social Security of all SSI and SSDI recipients; review focuses on the appropriateness of the “disability” label in relation to substantial gainful activity (SGA), the severity of the impairment and the prognosis for recovery.

Customized Employment (page 67): Individualizing the employment relationship between job seekers and employers in ways that meet the needs of both. Approaches include supported employment, self-employment and entrepreneurship.

Cues (page 73): What occurs prior to the next step or task that gives information. Highlighting a natural cue or implementing an artificial cue are types of assistance used in systematic instruction.

Day Activity/Habilitation (page 81): A planned facility or community-based, goal-centered activity program designed to assist individuals with disabilities to increase their independence in their daily living and to enhance their participation in the community through actual participation in the community or community simulations in a segregated environment.

Department of Housing and Urban Development (HUD) (page 51): A federal agency designed to promote adequate and affordable housing, economic opportunity, and suitable living environments free from discrimination for low-income, elderly, and disabled households. HUD provides grants, insures loans, provides housing assistance for people who are elderly or disabled or who have HIV/AIDS, enforces fair housing laws, supports public Housing Authorities so they can provide housing for poor and disadvantaged families, and provides other supportive services and financing to meet their mission.
Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV) (page 37): A manual published by the American Psychiatric Association that is a classification system for dividing mental disorders into types based upon certain criteria and features. Mental health clinicians use this manual as a guideline to select a diagnosis for an individual depending upon the symptomatology that he or she presents.

Disability (page 1): A physical or mental impairment that constitutes or results in a substantial impediment to employment or a physical or mental impairment that substantially limits one or more major life activities.

Division of Disability and Rehabilitative Services (DDRS) (page 31): A division of the Family and Social Services Administration that works to inform, protect, and serve older adults and individuals with disabilities and their families in need of human services, resources or support to obtain employment and self sufficiency or to gain independence.

Division of Mental Health and Addiction (DMHA) (page 31): A division of the Family and Social Services Administration that provides funding support for mental health and addictions services to target populations with financial need through a network of managed care providers, certifies all community mental health centers and managed care providers, licenses inpatient psychiatric hospitals, operates the state mental health hospitals, and administers federal funds earmarked for substance abuse prevention projects.

Drop-In Center/Social Club: Generally a part of a Clubhouse or CSS/CSP that provides a venue for fellowship, recreation, and support for members.

Employer (page 9): An individual or organization providing competitive full or part-time community work situations while compensating employees usually at or above the minimum wage, with or without benefits.

Employment Networks (page 24): An EN in an organizational entity (State or local, public or private) that enters into a contract with SSA with the intention of coordinating and delivering employment services, VR services, and/or other support services under the Ticket to Work Program. These services are provided by the EN to SSA beneficiaries who have assigned their Tickets to the EN which has accepted the Ticket.

Employment Proposal (page 64): See Job Creation.

Employment Specialist (ES) (page 1): A representative of an employment service who provides a wide range of employment services to persons with disabilities. These services may include assessment, job development, initial training and support, follow-along and career planning. May also be called Employment Consultant, Employment Advisor, Job Developer, Job Coach, etc.

Enclave: An employment model in which a group of eight or less individuals with disabilities work within a larger integrated employment setting. These workers work alongside other employees without disabilities, but have full-time supervision and support from an employment provider.

Entitlements (page 51): Governmental assistance in the form of cash payments or health insurance available to persons served and/or their families (e.g., SSI, SSDI, Medicaid).
Equal Employment Opportunity Commission (EEOC): A federal agency established by Title VII of the Civil Rights Act of 1964. Its purpose is to promote equal opportunity in employment through administrative and judicial enforcement of the federal civil rights laws and through education and technical assistance. The EEOC enforces the principal federal statutes prohibiting employment discrimination on the basis of race, color, religion, sex, or national origin (Title VII of the Civil Rights Act of 1964), age (Age Discrimination in Employment Act of 1967 (ADEA)), gender (Equal Pay Act of 1963 (EPA)), and disability (Title I of the ADA and the Rehabilitation Act of 1973). They also enforce the Civil Rights Act of 1991, which includes provisions for monetary damages in cases of intentional discrimination and clarifies provisions regarding disparity in hiring.

Extended/Follow-Along or Ongoing Services (page 9): Services needed by an individual with a disability in supported employment to continue performing a job after reaching stabilization.

Extended Medicare Coverage (page 24): A law under the Ticket To Work and Work Incentives Improvement Act that allows working Medicare Beneficiaries to continue their Medicare coverage for at least 93 months.

Fading (page 17): The systematic reduction of training and support.

Family and Social Services Administration (FSSA) (page 31): A state agency that provides services to families who have issues associated with low income, mental illness, addiction, mental retardation, a disability, aging, and children who are at risk for healthy development.

Food Stamps (page 51): Resources offered under the Department of Family Resources of the Family and Social Services Administration. The Indiana Food Stamp Program is designed to raise the nutritional level of low-income households by supplementing their available food purchasing dollars with food stamp coupons. Eligibility includes financial (i.e., income and assets) and non-financial (i.e., state residency, citizenship/alien status, work registration, and cooperation with the IMPACT program) criteria.

Federal Benefit Rate (FBR): The full SSI payment before deductions for income, in-kind services (such as free food, clothing, or shelter), or any other deductions. The FBR is reviewed annually and revised based on the cost of living.

Group Home (page 36): A supervised residential program for individuals who are learning skills needed to progress to more independent or less supervised living situations. The term “group home” generally refers to a residential facility or house in which all residents have a disability and need some level of supervision by on-site staff. In some cases, group homes are more like halfway houses, in that there is less supervision and more opportunities for residents to use their independent living skills.

Hoosier Assurance Plan (HAP) (page 36): A state funding system used by DMHA to pay a CMHC for a year of mental health and addictions services at the most appropriate level for all enrollees based on their diagnosis, function levels, and income criteria.
Impairment-Related Work Expense (IRWE) (page 38): An SSI and SSDI work incentive that allows an individual to deduct the costs of certain items or services from his or her work income so that they are not counted in determining income for Social Security purposes. The costs must be related to the impairment or disability and must help the individual to work.

Indiana Institute on Disability and Community/Center on Community Living and Careers (CCLC) (page 55): An University Center on Excellence within Indiana University that provides training, research, and advocacy services to affect systems and organizational change for people with disabilities. The Center's focus is on improving transition and adult services through person-directed planning, community living and home ownership, employment, community membership, organizational change, career development, and inclusive education.

Indiana Manpower and Comprehensive Training (IMPACT) Program: A program administered by the Department of Family Resources of the Family and Social Services Administration that provides services designed to help recipients of food stamps and TANF to achieve economic self-sufficiency through education, training, and job search and placement activities. IMPACT is Indiana’s Welfare-to-Work program, a critical component of Indiana’s welfare reform initiatives, which places an increasing emphasis on “work first” (individuals are expected to accept a job that can be secured with their existing education and skills).

Indiana Protection and Advocacy Services (IPAS or P & A) (page 45): An independent state agency (that receives no state funding or support from any service providers) that provides legal and advocacy services to citizens of Indiana who have a disability and are either being denied a right or are discriminated against on the basis of a disability. Six federally-mandated and funded services are currently available: Protection and Advocacy for Individuals with Mental Illness (PAIMI), Protection and Advocacy for Individuals with Developmental Disabilities (PADD), Protection and Advocacy for Individual Rights (PAIR), Protection and Advocacy for Beneficiaries of Social Security (PABSS), Protection and Advocacy for Assistive Technology (PAAT), and the Client Assistance Program (CAP), Protection and Advocacy for Voting Access (PAVA), Protection and Advocacy for Traumatic Brain Injury (PATBI).

Indiana Supported Employment Training Team (ISETT) (page 19): A consortium of employment professionals who join together to provide Employment Specialist Training (EST) workshops across Indiana. This group has provided a 6-day competency-based training and post-training evaluation for over eleven years and has trained more than 1400 people. Indiana is the only state that has a freestanding consortium of this type of people to provide training.

Individual Plan: A person-centered and directed strategic guide to development containing goals and objectives, including timelines and responsibilities; a person may have more than one plan (education, employment, habilitation, and placement).

Individual Plan for Employment (IPE) (page 25): A plan for services under VRS that is designed to achieve the specific employment outcome that is selected by an individual consistent with his or her unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.
Inpatient Hospitalization: In the context of mental health, acute psychiatric care that occurs on a general hospital unit, and includes intensive evaluation and focused brief treatment for persons with serious mental illness who cannot be effectively treated in a less intensive setting. The clinical emphasis is on the reduction of symptoms and stressors as well as the enhancement of coping skills sufficient to permit an early return to the community. Discharge planning is carefully coordinated with CMHCs.

Integrated Setting (page 9): A setting typically found in the community in which individuals with disabilities interact with non-disabled individuals.

International Association of Psychosocial Rehabilitation Services (IAPSRS): A membership organization for Psychosocial Rehabilitation practitioners, managers, advocates, researchers, behavioral health care officials, consumers and family members, who care about the rehabilitation, recovery, rights and community resources for people with psychiatric disabilities.

Job Analysis (page 65): The process of analyzing a potential job site in terms of position responsibilities and work environment to determine appropriate job matches.

Job Carving or Restructuring (page 63): The process of analyzing and identifying specific tasks within a specific job that might be reassigned to another person.

Job Creation/Employment Proposal (page 65): The process of developing and negotiating a new job (one that did not previously exist) within a business to meet both the employer needs and the needs of the job seeker.

Job Development (page 5): The art of supporting the job seeker to find quality competitive employment consistent with his or her skills, abilities, interests, and desires.

Job Shadowing/Job Trials (page 17): An informal opportunity for an individual to observe, and, in some cases, try out a job in the community of interest before making a decision to work or select a specific job goal.

Job Training Partnership Act (JTPA) (page 24): Effective in 1983, an act providing job-training services to economically-disadvantaged adults and youth, dislocated workers, and others who face significant employment barriers in order to move them into permanent, self-sustaining employment. JTPA provided for the establishment of State Job Training Coordinating Councils, designation of Service Delivery Areas to receive federal job training funds, appointment of Private Industry Councils, and provision of training and employment/support services (e.g., assessment of skills and abilities, classroom training, on-the-job training, job search assistance, counseling, basic skills training, school-to-work transition services, alternative high school services, basic and remedial education). JTPA was repealed effective July 1, 2000, and was replaced by Workforce Investment Act.

KEY Consumer Organization (page 47): A self-help organization created and managed by mental health consumers that offers information, advocacy services, referrals, and support services, and that promotes a philosophy of empowerment for individuals with mental illness.
**Major Life Activities (page 1):** A term used when discussing the following skills; self care, receptive and expressive language, learning, mobility, and capacity for independent living and economic self-sufficiency.

**Medicaid (page 24):** A federally-funded health insurance program (administered by Indiana’s Family and Social Services Administration) available to certain low-income individuals (i.e., members of families with children, pregnant women, and people who are aged, blind, or who have a disability).

**Medicaid Buy-In (page 24):** A program designed to provide access to comprehensive health care for working people with disabilities. This program is critical for people with disabilities who have a difficult time finding affordable comprehensive health care coverage in the private market. The Medicaid Buy-In allows working people with disabilities to pay a premium to participate in their state's Medicaid program, just like they would if they were buying private health care coverage. The program in Indiana is referred to MED Works.

**Medicaid Rehab Option (MRO) (page 36):** A type of Medicaid funding for medically necessary treatment. MRO may be used for outpatient and intensive day treatment services, and case management for persons with serious and persistent mental illnesses. Under MRO, a physician or Health Service Provider must certify the diagnosis and authorize the plan of care as indication of his or her approval of the assessment, DSM-IV classification, and the proposed methods of treatment.

**Medicaid Waiver (page 31):** Waivers given by the Federal Government to grant/allow a state(s) permission to waive certain federal requirements in order to operate a specific kind of program. The two waivers allowed by the federal government are Program waivers and Research and Demonstration waivers.

**MED Works (page 24):** Indiana’s Medicaid Buy In program that allows working individuals with disabilities access to comprehensive health care. (see Medicaid Buy-In).

**Medicare (page 24):** A federally-funded health insurance program for individuals who are receiving SSDI/SSDAC benefits.

**Mobile work crew:** A work crew comprised of people with disabilities who complete a variety of tasks under a particular business or department (e.g., housekeeping, clerical, grounds keeping) as a prevocational experience or as supported work. Although the crew is not generally integrated, the business often travels as a unit to a variety of settings that are integrated.

**Modeling (page 72):** Teaching a skill or behavior by demonstration or example.

**Natural Supports (page 10):** Supports typically available in a workplace to all employees (e.g., orientation and training programs, supervisors, reminders and supports). As this relates to supported employment, it is any assistance, relationships, and interactions that allow a person to secure, maintain, and advance in a community job of his or her choosing, corresponding to the typical work routines and social interactions of other employees, and enhance the individual’s work and non-work social life among his or her co-workers and other members of the community.
**Outpatient Services:** In the context of a mental health center, services that generally include diagnostic and assessment services, individual psychotherapy, group therapy, psychiatric evaluation, and medication therapy and follow-up. These services are generally available to individuals who live in the community, come to regularly scheduled appointments, and have at least a minimal support system in the community.

**Partial Hospitalization Program (PHP):** In the context of a mental health center, a program providing highly structured, intensive, comprehensive treatment as an alternative to inpatient hospitalization or as a transition from a brief inpatient admission. It is generally for people who do not require constant 24-hour psychiatric care and who can benefit from combining professional treatment with their lives outside of the hospital. Treatment involves a variety of group and individual therapies along with the use of psychotropic medications as indicated. This program is usually offered during the weekday daytime hours.

**Person Centered Plan (PCP) (page 45):** Process that involves individuals with disabilities and their support systems to develop a plan that identifies an individual’s vocational and life goal(s) and the supports needed to obtain those goals.

**Plan for Achieving Self-Support (PASS) (page 38):** An SSI only work incentive that allows an individual to purchase items that will lead to increased independence in getting and keeping a job, and allows him/her to deduct the cost of these items from income counted by Social Security in determining benefits. (Note: Although PASS is an SSI work incentive, it may be used to make an SSDI recipient eligible for SSI.)

**Plan for Employment and Supports (PES) (page 35):** Employment Plan developed by an individuals support team which focuses on the job seeker’s ideal job scenario, specific strategies and action steps to guide the job development process (what, who, by when), and the steps needed once a job begins.

**Positive Behavioral Interventions and Supports (PBIS) (page 73):** A way of thinking about behavior that goes beyond just reducing the challenging or impeding behavior to multiple approaches such as changing systems, altering environments, teaching skills and focusing on positive behavior. Positive behavioral interventions and supports are procedures based on understanding why challenging behavior occurs. They are part of an ongoing assessment to design effective interventions to reduce impeding behavior(s) and/or teach new skills and supports. Interventions that result in humiliation, isolation, injury and/or pain are not positive behavior supports and would not be considered appropriate in a supported employment setting.

**Profile (page 57):** The discovery process, information, and documentation used to develop the person-centered plan.

**Prompting (page 73):** Any type of instruction or feedback given to a worker (e.g., verbal, gestures, physical assistance) to assist him/her to learn a particular job or task. Prompting hierarchy refers to the progression of least to most (or vice-versa) intrusive prompts.
Psychosocial Rehabilitation (PSR) (page 3): A model of community-based mental health service that provides a comprehensive menu to service recipients (called members), including vocational, residential, social/ recreational, educational, and personal adjustment services. The values and concepts associated with PSR include wellness, self-determination, normalcy, informality, strengths-focus, and collaboration with others to achieve mental health goals. The PSR model is most often organized as a Clubhouse.

Rehabilitation Services Administration (RSA): The principal Federal agency established by Congress as authorized to carry out Titles I, III, VI, VII, and VIII, as well as specified portions of Title V of the Rehabilitation Act of 1973, as amended, as well as certain other disability-related Acts. As part of its duties, RSA is responsible for the formulation, development, and implementation of regulations, policies, and guidelines for the statutes described above, which govern the Family and Social Services Administration. In addition, RSA is responsible for advising the Assistant Secretary of the Office of Special Education and Rehabilitative Services (OSERS) and the Secretary of Education on the formulation, development, implementation, and review of other policies and legislation affecting individuals with disabilities. RSA acts as an advocate to assure the rights of persons with disabilities, serves as a resource and clearinghouse of information for service providers at national, regional, state, and local levels in the development of national programs to reduce or eliminate social and environmental barriers experienced by persons with disabilities, establishes standards for determining who are individuals with disabilities for purpose of RSA program eligibility; and provides leadership in assuring that all categories of individuals with disabilities receive equitable consideration for access to services.

Reinforcement (page 73): Rewards that are paired with correct responses to instructional cues to encourage someone to continue or increase a particular behavior or set of behaviors. Reinforcers should be positive, age-appropriate, and as least intrusive as possible.

Results Based Funding (page 33): Funding system implemented by Indiana Vocational Rehabilitation Services on July 2006. RBF is an outcome based payment system where the provider’s compensation is contingent upon outcome performance measures. Payment is defined by four levels defined as Milestone Payments.

Section 8 (page 51): A rental assistance program established by the Housing and Community Development Act of 1974. This federal program, funded by HUD, provides rental subsidies to low-income families, single people over the age of 62, single women who are pregnant, and people with disabilities who live in privately owned housing units. These families pay no more than 30% of their income for housing to the landlord. The Indiana Housing Finance Authority pays the difference between the fair market rent and the amount contributed by the family as its subsidy. In order to receive assistance, an applicant family must be income eligible, their housing unit must qualify, and the landlord must be willing to accept Section 8 payments.
**Self-determination**: The skill, ability, and drive to advocate for and assert oneself and one’s personal goals to improve one’s quality of life.

**Self-management techniques (page 71)**: Use of a procedure that enables the user to manage his or her own behaviors through self-prompting or use of tools. At job sites, this might include pictures, symbols, word checklists, modified clock-faces, pre-set alarms, cassette recordings, counters, tokens, or coins (self-delivered) or asking for feedback.

**Sheltered Workshop (page 2)**: An agency-operated work-oriented service for carrying out habilitation/rehabilitation for individuals with disabilities. Individuals are provided remunerative employment or other occupational activity. Individuals are often paid for work completed based on their productivity or a set piece rate.

**Social Security Disabled Adult/Child (SSDAC)**: A program identical to SSDI with the exception that the person receiving these benefits is paid based on his or her parent’s contributions to the system, not his or her own.

**Social Security Disability Insurance (SSDI) (page 25)**: Also known as Title II under the Social Security Act, this entitlement is earned (under Social Security taxes deducted from employment wages), requires a medical disability and gross countable earnings below substantial gainful activity. The cash payment remains the same, regardless of other income, as long as a person does not perform SGA.

**Spend-down**: For Medicaid, if a person’s income is too high, he or she may be asked to pay a certain amount of his or her medical expenses before securing his or her monthly Medicaid coverage. In other words, he or she must “spend down” his or her excess income. This is similar to a deductible for private insurance, but will fluctuate according to income.

**Stabilization (page 9)**: In supported employment, the point in time when the ES, supported employee, and employer agree that intervention time is predictable and intensive job coaching is no longer needed; stabilization usually is indicated by the gradual decline and leveling off of intervention time. For supported Employment stabilization cannot occurs before the consumer has been on the job for 30 days...

**State Hospital/State Developmental Center (page 31)**: A freestanding facility whose purpose is to provide long-term inpatient treatment for persons with serious mental illness who cannot be effectively treated in a less intensive setting. Each state hospital in Indiana has some (not all) specialty units for specific populations or treatment (e.g., persons with mental illness who are involved in the criminal justice system, persons who are dually diagnosed with mental illness and/or chemical addictions, persons who have mental retardation and developmental disabilities, seriously emotionally disturbed (SED) children and adolescents). State Developmental Centers, which serve persons with developmental disabilities, are the equivalent of State Hospitals, which serve individuals with mental illness.
**Status 26 (page 33):** A VRS code that indicates that a person is "rehabilitated," and the consumer’s case is closed successfully. This occurs when: (1) the vocational rehabilitation services provided under the IPE have contributed substantially to the achievement of the employment outcome; (2) the employment outcome is consistent with the individual’s strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice; (3) the employment outcome is in the most integrated setting possible, consistent with the individual's informed choice; (4) the individual has maintained the job for a period of at least 90 days; and (5) the individual and the VRS counselor consider the employment outcome to be satisfactory and agree that the individual is performing well on the job.

**Strategic Action Plan (page 58):** Part of the person-centered plan that refers to developing specific action steps, timelines and responsibilities to guide the job development process.

**Substantial Gainful Activity (SGA) (page 26):** The performance of significant physical or mental activities in work for remuneration or profit. It applies to the SSDI program during initial application and on an ongoing basis. It applies to the SSI program only in determining whether a person is initially eligible for SSI disability payments, and does not apply to SSI recipients who are blind. The SGA is automatically adjusted annually based on increases in the national average wage index.

**Supplemental Security Income (SSI) (page 25):** Also known as Title XVI under the Social Security Act, an entitlement provided to people who are 65 or older, or who are blind, or who have a disability, and who have little or no income. The cash payment varies in amount, depending on the amount of a person’s earned (e.g., wages or self-employment earnings) or unearned (e.g., SSDI, Veteran’s benefits, or pensions) income.

**Supported Employment (SE) (page 1):** Competitive employment in an integrated setting with ongoing support services for individuals with the most significant disabilities for whom competitive employment has not traditionally occurred, or for whom competitive employment has been interrupted or intermittent as a result of a significant disability.

**Supported Employment Consultation and Training Center (SECT) (page 19):** A not-for-profit agency within The Center for Mental Health (a CMHC) that provides consultation, training, and technical assistance for those who provide employment services for individuals with psychiatric disabilities. The SECT Center also facilitates statewide data collection and fosters relationships between VRS, DMHA, and other service providers. The SECT Center is focused on promoting, expanding, and enhancing quality employment services for individuals with serious mental illness.

**Supported Living:** A residential program, in which a case manager assists an individual in finding an apartment in a safe environment near needed resources. Financial assistance for housing may be provided. Support services are provided to individuals to assist them in maintaining independent living situations.
Support System (page 75): Supports provided that assist individuals to achieve the goals of independence and productivity and facilitate their integration into the community. They are supports that occur naturally in the community, at work, in a social situation, or they may be planned, facilitated, or coordinated in partnership with a service provider.

Systematic Instruction (page 15): A plan of organized and strategic training techniques to assist someone to learn a job or task. Often begins with taking baseline data on a particular job or task (based on the job/task analysis), providing instructional techniques, and then comparing new data to baseline.

Task Analysis (page 72): The process of breaking down a specific part of a job (a task) into smaller, more teachable steps

Temporary Assistance to Needy Families (TANF): Formerly known as Aid to Families with Dependent Children (AFDC), a program that provides cash assistance to children under age 18 who are living with a parent or relative and who are deprived of financial support of a parent by reason of death, absence from the home, unemployment, or a physical or mental incapacity.

Ticket to Work and Self-Sufficiency/Work Incentives Improvement Act (TWWIIA) (page 24): Passed in 1999, a law allowing SSI and SSDI recipients to use “tickets” to choose the service provider of their choice from an employment network. This legislation also provides for expanded availability of health care: extended Part A Medicare coverage for an additional 4 ½ years for working SSDI beneficiaries, suspended Medicare coverage while under group health insurance plans, and expanded state options and funding for Medicaid. Provisions also include expedited reinstatement of benefits, changes to the CDR process, and new work incentive programs for people with disabilities.

Tier One (page 34): Defines a supported employment service (through VRS Results Based Funding) provided to individuals who qualify for Supported Employment services. Individuals eligible for Tier One services must meet the following criteria: Qualifies as Most Severely Disabled (MSD) as defined in the Vocational Rehabilitation Services State Policy, need ongoing support, and requires multiple services over an extended period of time. See definition for Supported Employment). The provider of this service is paid in accordance with an established rate for each milestone outcome.

Tier Two (page 34): Defines a placement service (through VRS Results Based Funding) provided to individuals who are unable to engage in their own self-directed job search to obtain and maintain competitive employment. Job placement is achieved for VRS clients who most likely will not require intensive job coaching or long term follow along and with whom a specific vocational goal has been established. The provider of this service is paid in accordance with an established rate for each milestone outcome.

Transitional Employment (page 11): A series of planned temporary job placements in competitive work integrated settings with ongoing support services for individuals with the most severe disabilities due to mental illness which include continuing sequential job placements until job permanency is achieved.
Vocational Rehabilitation Counselor (VRC) (page 32): An employee of VRS who provides guidance and counseling to individuals who are eligible for VRS services to establish a plan to achieve a vocational goal, based on his or her interests and abilities, and identify the services which will be needed to achieve the vocational goal.

Vocational Rehabilitation Services (VRS) (page 32): A program of the Division of Disability and Rehabilitation Services (DDRS) under the Indiana Family and Social Services Administration (FSSA) whose purpose is to assist people with disabilities to obtain essential services to empower them to achieve equality of opportunity, gainful employment, independent living, economic and social self-sufficiency, and full inclusion in society. VRS assists people with disabilities in making informed career choices and utilizing available support services to prepare for, secure, retain, or regain employment.

Welfare to Work: A term used to describe the programs mandated under the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193). This welfare reform plan was designed to change the nation’s welfare system into one that requires work in exchange for time-limited assistance. The law contains strong work requirements, a performance bonus to reward states for moving welfare recipients into jobs, state maintenance of effort requirements, comprehensive child support enforcement, and supports for families moving from welfare to work, including increased funding for child care and guaranteed medical coverage.

Work Opportunity Tax Credit (WOTC) (page 65): A federal income tax credit incentive that encourages employers to hire individuals who are traditionally difficult to place in jobs or who have trouble gaining experience in the job market. Contact the Department of Labor office to obtain more information on the WOTC.

Workforce Investment Act of 1998 (WIA) (page 24): Legislation designed to consolidate, coordinate, and improve employment, training, literacy, and vocational rehabilitation programs. The Act provides for the establishment of workforce investment boards; national training programs (i.e., for adults aged 18 or older, dislocated workers, Native Americans, migrant/seasonal farm workers, veterans, youth); adult education and literacy programs; development of a “One-Stop” system for job training, education, and employment services; reauthorization of the Rehabilitation Act of 1973; and unified state plans to ensure coordination of workforce development activities. WIA replaced JTPA effective July 1, 2000.

Workforce Investment Board (WIB): Under WIA, each state establishes both state and local WIBs. The state WIB advises the Governor on ways to develop the statewide workforce investment system and labor market information system, and helps the Governor to develop a five-year strategic plan describing workforce development activities, monitor statewide activities, and report to the Secretary of Labor. In cooperation with local elected officials, local WIBs plan and oversee the local workforce investment system, designate “One Stop” operators, identify providers of training services, monitor system and local performance, and help to develop the labor market information system.

Zero Exclusion (page 11): The philosophy that everyone, regardless of type or severity of disability, has the right to work or participate in any social or non-work activity in the community.
# ACRONYMS

<table>
<thead>
<tr>
<th>Acronym</th>
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<tbody>
<tr>
<td>AAMR</td>
<td>American Association for Mental Retardation</td>
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<td>ADA</td>
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<td>ADL</td>
<td>Activities of Daily Living</td>
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<td>APSE</td>
<td>Association for Persons in Supported Employment</td>
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<td>ARC</td>
<td>Previously known as Association of Retarded Citizens</td>
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<td>Article 7</td>
<td>State regulations governing special education</td>
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<td>Benefits Information Network</td>
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<td>CAP</td>
<td>Client Assistance Program</td>
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<td>CARF</td>
<td>The Rehabilitation Accreditation Commission (formally the Commission on the Accreditation of Rehabilitation Facilities)</td>
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<td>CBA/CBE</td>
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<td>Center on Community Living and Careers</td>
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<td>Indiana Chapter of the Association for Persons in Supported Employment</td>
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INARF  Indiana Association of Rehabilitation Facilities
IN-TASH  Indiana Association for Persons with Severe Handicaps
IPAS  Indiana Protection and Advocacy Services
IPE  Individual Plan for Employment
IRA  Indiana Rehabilitation Association
IRCIL  Indiana Resource Center for Independent Living
IRWE  Impairment-Related Work Expense
ISETT  Indiana Supported Employment Training Team
ITP  Individual Treatment Plan
JCAHO  The Joint Commission on Accreditation of Healthcare Organizations
JTPA  Job Training Partnership Act
LRE  Least Restrictive Environment
MHA  Mental Health Association
MRO  Medicaid Rehabilitation Option
NAMI  National Alliance for the Mentally Ill
NCQA  The National Commission on Quality Assurance
OMPP  Office of Medicaid Policy and Planning
OSERS  Office of Special Education and Rehabilitative Services
P&A  Protection and Advocacy
PAAT  Protection & Advocacy for Assistive Technology
PABSS  Protection & Advocacy for Beneficiaries of Social Security
PADD  Protection and Advocacy for individuals with Developmental Disabilities
PAIMI  Protection and Advocacy for individuals with Mental Illness
PAIR  Protection and Advocacy for individual rights
PATBI  Protection and Advocacy for individuals with Traumatic Brain Injury
PASS  Plan for Achieving Self-Support
PCP  Person-Centered Plan
PFP  Personal Futures Planning
PHP  Partial Hospitalization Program
PSR  Psychosocial Rehabilitation
RBF  Results Based Funding
RSA  Rehabilitation Services Administration
SE  Supported Employment
SECT  Supported Employment Consultation and Training Center
SGA  Substantial Gainful Activity
SL  Supported Living
SSA  Social Security Administration ("A" sometimes refers to "Act")
SSDAC  Social Security Disabled Adult/Child
SSDI  Social Security Disability Insurance
SSI  Supplemental Security Income
TANF  Temporary Assistance for Needy Families
TWWIIA  Ticket to Work and Self-Sufficiency/Work Incentives Improvement Act
UCFA  United Cerebral Palsy Association
VRC  Vocational Rehabilitation Counselor
VRS  Vocational Rehabilitation Services
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>WD/WDS</td>
<td>Workforce Development Services</td>
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<tr>
<td>WOTC</td>
<td>Work Opportunity Tax Credit</td>
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<tr>
<td>WIA</td>
<td>Workforce Investment Act</td>
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<tr>
<td>WIB</td>
<td>Workforce Investment Board</td>
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<tr>
<td>WIPA</td>
<td>Work Incentives Planning &amp; Assessment</td>
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<tr>
<td>WtW</td>
<td>Welfare to Work</td>
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</tbody>
</table>
Selected Resources

ARC of Indiana
22 East Washington Street, Suite 210
Indianapolis, IN 46204
317-632-4387 or 800-382-9100
www.arcind.org
State organization with local agencies throughout Indiana

ASK-About Special Kids
(317)257-8683 Voice
(800)964-4746 Toll Free
(317)251-7488 FAX
http://www.aboutspecialkids.org

Indiana Association of Area Agencies on Aging
4755 Kingsway Drive, Suite 200
Indianapolis, IN 46205
317-254-5465 ext. 311 or
800-986-3505
Referrals to local Area Agencies on Aging;
information/application guidelines for
Medicaid Waiver services

Association for Persons in Supported Employment (APSE)
1627 Monument Avenue
Richmond VA 23220
804-278-9187
www.apse.org
Advocacy and systems change organization

ATTIC, Incorporated
1721 Washington Ave.
Vincennes, IN 47591
(812) 886-0575 Voice
(877) 962-8842 Toll Free
(812) 886-1128 FAX
www.atticindiana.org
Serves SW Indiana, home modifications and
independent living aids

Brain Injury Association of Indiana
9531 Valparaiso Ct., Suite A
Indianapolis, IN 46268
317-356-7722 or 808-356-7770
Education, advocacy and referral

Breaking New Ground Outreach Program, Purdue University
1146 Agricultural Engineering Building
West Lafayette, IN 47907-1146
765-494-5088 or 800-825-4264
www.ecn.purdue.edu/ABE/Extension/BNG/index
Self-advocacy and adaptive equipment

Bureau of Developmental Disabilities Services (BDDS)
317-232-7933 or 800-545-7763

Vocational Rehabilitation Services (Central Office)
www.in.gov/fssa/ddrs/
317-232-1319 or 800-688-6790

-Region I
219-864-8163 or 877-428-8513
Northwest Indiana

-Region II
765-455-5020 or 877-715-5294
Northeast Indiana

-Region III
317-254-6707 or 877-847-9894
Central Indiana

-Region IV
812-425-1367 or 877-715-5299
Southwest Indiana

-Region V
812-523-6601 or 877-847-9895
CARF: The Rehabilitation Accreditation Commission
4891 East Grant Road
Tucson, AZ 85712
520-325-1044
www.carf.org
Publications, training and accreditation

Center for Disability Information and Referral (CeDIR)
812-855-6508 or 800-437-7924
www.iidc.indiana.edu/~cedir
Disability library offering loan program and dissemination of Indiana University Publications; one center of the Indiana Institute on Disability and Community

Center on Community Living and Careers (CCLC)
812-855-6508 or 800-437-7924
www.iidc.indiana.edu/~cclc
Focuses on community-based services, including supported employment; one center of the Indiana Institute on Disability and Community

Connect 2 Help
http://www.connect2help.org/
Referral and information network
(317) 923-4357

Division of Adult Education
Office of Adult Education
Indiana Department of Education
151 West Ohio Street
Indianapolis, Indiana 46204
Phone: 317-232-0522
Fax: 317-233-0859
http://www.doe.state.in.us/adulted/welcome.html
Notes: literacy for families.

Home and Community-Based Medicaid Waivers
http://www.in.gov/fssa/ompp/2549.htm
[Applications for Medicaid Waiver services can be initiated statewide at all Area Agency on Aging (AAA) offices, Vocational Rehabilitation (VR) offices, and Bureau of Developmental Disabilities Services (BDDS) field offices].

Department of Education
Indiana Educational Resource Center
7725 North College Ave.
Indianapolis, IN 42240
317-232-0587
web.indstate.edu/soe/iseas/dse.html

Down Syndrome Association of Central Indiana
10792 Downing
Carmel, IN
317-574-9757
Advocacy, information and support

Easter Seals Crossroads Regional Technology Center
4740 Kingsway Drive
Indianapolis, IN 46205
317-466-1000www.eastersealstech.com/
Drivers education and rehabilitation technology

Everybody Counts and Reuben Center
9111 Broadway
Merrillville, IN 46410
219-769-5055 or 888-769-3636
219-756-3323 (TT)
Independent living center serving NW Indiana.

Future Choices, Inc.
309 North High Street
Muncie, IN 47305
765-741-8332
Independent living center.
Independent Living Center of Eastern Indiana (ILCEIN)
3771 South A Street
Richmond, IN 47374
765-939-9226 or 877-939-9226
765-966-8229 (TT)
Independent living center serving SE Indiana

Indiana Association for Persons in Supported Employment (INAPSE)
Contact: APSE, 1627 Monument Avenue,
Richmond VA 23220
804-278-9187/www.apse.org or
http://ljschaaf.tripod.com/inapse.htm
Advocacy and systems change organization, state membership through national organization

Indiana Council on Independent Living (ICOIL)
402 W. Washington Street, Rm. W453, P.O. Box 7083
Indianapolis, IN 46207-7083
http://icoil.org/

In care of DDRS/VRS
PO Box 7083
Indianapolis, IN 46207-7083
800-545-7763 ext. 1353
Oversees independent living services throughout the state.

Indiana Family and Social Services Administration (FSSA)
402 West Washington Street, Room W 461
Indianapolis, IN 46207-7083
317-233-4454
www.ai.org/fssa/index.html

Indiana Governor’s Planning Council for People with Disabilities (GPC)
Harrison Building, Suite 404
143 West Market Street
Indianapolis, IN 46204
317-232-7770
www.state.in.us/gpcpd
Independent state agency which funds empowerment activities

Indiana Institute on Disability and Community
Indiana’s University Center for Excellence
Indiana University
2853 East 10th Street
Bloomington, IN 47408-2696
(812) 855-6508
or (800) 437-7924 (IN residents)
www.iidc.indiana.edu
The Institute houses the Early Childhood Center, the Center on Education and Lifelong Learning, the Center on Community Living and Careers, the Center on Aging and Community, the Center for Planning and Policy Study, the Center on Technology and Instruction, the Center for Disability Information and Referral and the Indiana Resource Center for Autism

Indiana Parent Information Network (IPIN)
4755 Kingsway Drive, Suite 105
Indianapolis, IN 46205
317-257-8683 or 800-964-IPIN
www.ai.org/ipin
Free newsletter and inexpensive training offered to parents/families of individuals with disabilities

Indiana Protection and Advocacy Services (IPAS or P & A)
4701 North Keystone Avenue, Suite 222
Indianapolis, IN 46205
800-622-4845 or 317-722-5555
www.state.in.us/ipas
State agency that responds to crisis and rights issues

Indiana Resource Center for Families with Special Needs (IN*SOURCE)
809 North Michigan Street
South Bend, IN 46601
574-234-7101 or 800-332-4433
www.insource.org
Provides training and support to Indiana families
Indianapolis Resource Center for Independent Living (IRCIL)
2110 N. Capitol Ave.
Indianapolis, IN 46202
317- 596-6449 or 800- 860-7181
Advocacy, education, supported employment, ADA training, information/referral, peer counseling, independent living skills, Braille reproduction, etc.; home of the ADA Training Network 800-860-7186

Indiana Supported Employment Training Team (ISETT)
In care of Kay Moore
Indiana Institute on Disability and Community
2853 East 10th Street
Bloomington, Indiana 47408-2601
812-855-6508
Training for Employment Specialists

Integrated Services, Inc.
Connie Ferrell
5995 South Bear Wallow Road
Morgantown, IN 46160
756-342-8437
Training, facilitation, and technical assistance
(Medicaid, supported employment, Social Security, etc.)

Job Accommodation Network
PO Box 6080
809 Allen Hall
West Virginia University
Morgantown, WV 26506-6080
800-526-7234
http://www.jan.wvu.edu/
Maintains a databank of job accommodations; assist with problem-solving in area of accommodations

Key Consumer Organization
2506 Willowbrook Pky, Suite 199
Indianapolis, IN 46205
317-205-2500
1-800-933-KEYS
Mental health, consumer run, advocacy and information organization

League for the Blind & Disabled
5821 S. Anthony Blvd.
Fort Wayne, IN 46816
260-441-0551 or 800-889-3443
www.the-league.org
Independent living center serving NE Indiana

National Alliance on Mental Illness
PO Box 22697
Indianapolis, IN 46222-0697
3(17) 925-9399
www.namiindiana.org
Advocacy & Education

Sandy, Savage and Associates
7984 Branch Creek Way
Indianapolis, IN 46268
317-875-9919
e-mail: sansav@indy.net
Training, facilitation and technical assistance

Self-Advocates of Indianapolis
www.saind.org/
Training, public speakers, etc. on self-advocacy

Southern Indiana Center for Independent Living (SICIL)
651 X Street
Bedford, IN 47421
812-277-9626 or 800-845-6914
Independent living center serving SW Indiana

Supported Employment Consultation and Training Center (SECT)
The Center for Mental Health, Inc.
1100 Broadway
Anderson, IN 46012
765-641-8246
Employment Support Specialist training, SSWI training, and other consultation, technical assistance and research
TASH
29 West Susquehanna, Suite 210
Baltimore, MD 21204
800-482-TASH or 410-828-8274
www.tash.org/
www.TASH.org
Advocacy organization

Training Resource Network
PO Box 439
St. Augustine, FL 32085-0439
904-823-9800 or 866-823-9800
www.trninc.com
Publisher of many supported employment related books and Supported Employment Infolines newsletter

Wabash Independent Living and Learning Center, Inc. (WILL Center, Inc.)
7J The Meadows
Terre Haute, IN 47803
812-886-0575 or 800-962-8842
Independent living center serving SW Indiana
References and Bibliography


Gray, K & Riley, A. (1995). The publicity handbook: showing you how to get your agency’s name in front of the public as often and as favorably as possible. Bloomington, IN: Indiana University.


Owen, D. Supported employment…A training manual for consumers, families and service providers. Ohio: Project MORE.


