Counselor and Support Staff Checklist

Table of Contents

Application	3
Counselor	3
Forms to take to the meeting:	3
Enter into eFORCE	3
Send to support staff (Make sure all is filled out and signed)	3
Support Staff	3
Forms and completed and signed:	3
Enter into eFORCE	3
Other	3
Eligibility	4
Counselor	4
Support staff	4
IPE	5
Counselor	5
Complete case note (see appendix 2)	5
After approval	5
Support staff	5
After approval	5
IPE Review	6
Counselor	6
IPE Amendment	7
Counselor	7
After approval	7
Support staff	7
After approval	7
Authorizations	8
Counselor	8
Enter case note (see appendix 5)	8
Enter authorization into eFORCE	8
Support staff	8
Closures	q

Counselor	9
Support staff	9
Appendix 1	10
Application	10
Appendix 2	11
IPE	11
Appendix 3	12
IPE Review	12
Appendix 4	13
IPE Amendment	13
Appendix 5	14
Authorization	14
Technology	14
College training	14
All other authorizations	14
Appendix 6	15
Closure	15

Application

Co

Couns	elor
Forms	to take to the meeting:
	VR Application release for services VR Application (if not entering it on computer at the meeting) SSN entered correctly Health assessment form General release of information (minimum of 5) U of I release of information SSA releases Work history Client rights and responsibilities CAP Voter registration Eligibility aid
Enter i	nto eFORCE *As soon as possible*
	Start new case
	Application screen
	Application case note (See appendix 1) Work history
	Work history Blind journal
-	
	o support staff (Make sure all is filled out and signed) *Within 1 week*
	Application release for services Health assessment
	ROIs
	Voter registration
Suppo	ort Staff
	and completed and signed:
	Application release for services
	ROIs
	Health assessment
	Voter registration Eligibility aid (not required to sign)
	Engloshing and (not required to sign)
<u>Enter i</u>	nto eFORCE
	ROIs
	External assessments (IESBVI, IEPs, etc)
Other	
	Send/Fax ROIs
	File paperwork

Eligibility
Counselor
 □ Review medical reports □ Complete the eligibility aid with client □ Complete the eligibility screen ○ List of barriers ○ Check boxes of barriers ○ List of services required based on barriers ○ SD or MSD determined ■ If MSD selected, secondary diagnosis documentation on file ○ Diagnosis(es) are documented with date of report and doctor name ○ Analysis of psychological, educational, vocational, and social completed □ If secondary diagnosis, there is medical documentation to support it
 ☐ If secondary diagnosis, there is medical documentation to support it ☐ Print the eligibility certificate ☐ Sign and send the eligibility certificate and eligibility aid
Support staff
☐ List of barriers completed
☐ Barriers are check boxed
□ SD or MSD determined o If MSD selected, secondary diagnosis documentation on file
List of services completed
 □ Diagnosis(es) are documented with date of report and doctor name □ Analysis of psychological, educational, vocational, and social completed
☐ If secondary diagnosis, there is medical documentation to support it
☐ Eligibility certificate signed
☐ File eligibility certificate

IPE	
Couns	elor
	Interest/skills inventories (or some other assessment) completed Labor market research complete LMI form
Complete case note (see appendix 2)	
	Enter IPE into eFORCE and reassign to support staff
After approval	
	Print IPE and sign Send IPE to support staff
Support staff	
	Review to ensure all components are entered
	Ensure case note is complete
	Reassign to supervisor for approval
After approval	
	Send IPE to client with a client response form
	File the IPE into permanent paper file

IPE Review

Counselor

Enter in review date
Enter in next review date
Enter case note (See appendix 3)

IPE A	mendment
Couns	elor
	Review plan
	Enter amendment
	Enter case note (See appendix 4)
After approval	
	Print IPE amendment and sign
	Send IPE amendment to support staff
Support staff	
	Review to ensure all components are entered
	Ensure case note is complete
	Reassign to supervisor for approval
After approval	
	Send IPE amendment to client with a client response form
	File the IPE amendment into permanent paper file

Authorizations Counselor Enter case note (see appendix 5) Enter authorization into eFORCE ☐ Correct authorization type ☐ Appropriate service for the authorization ☐ Authorized item and amount ☐ Correct address and phone number for delivery ☐ Complete dates the authorization is in effect ☐ Reassign to support staff ☐ Maintenance voucher signed (if maintenance authorization) Support staff □ Correct authorization type □ Correct service type ☐ Proofread item description(s) ☐ Correct case note is attached ☐ Check case note for justification ☐ Reassign to supervisor for approval

□ Once approved, print authorization for file□ Send to vendor (and client if appropriate)

Closures

Counselor

- ☐ Service history screen □ Programs closed □ Closure screen ☐ Closure case note (See appendix 6) ☐ Closure letter to support staff ☐ Print closure amendment and sign
- □ Send closure amendment

Support staff

- □ Closure letter into eFORCE
- ☐ Closure and closure letter sent
- ☐ Survey and survey letter sent

Application

Purpose: Complete the application

Assessment:

- Statement indicating the individual is interested in going to work
- Summary of client's current situation:
- What is their living situation?Do they have a support system?
- Have they worked in the past? Why aren't they working now?
- What skills/training do they have?
- What skills/training do they need to work again?
- Medical issues that will impact their work?
- Any other pertinent information

Intervention by counselor:

- Describe VR services and the rehab process
- Complete health assessment
- Complete ROIs for necessary parties
- Review rights and responsibilities and CAP
- Start the eligibility aid (assess barriers-mobility, communication, self-care, self-direction, interpersonal skills, work skills, work tolerance)
- Explain eligibility process

Plan: Send in ROIs for medical documentation. Meet again once eligibility is determined.

IPE

Purpose: Develop plan for employment

Assessment:

- Current knowledge, skills, abilities
- Current situation (school, working part time, wanting to change career, recent change in health, etc)
- Related experience to career goal identified
- Training requirements (travel skills, accessing public transportation, computer skills)
- Supports that may be required to be successful (transportation, job coach, etc)
- Labor Market Information (LMI)
 - Skills/abilities/education required
 - o Essential functions of the job
 - Wage and hours for the area
 - o If necessary, is individual willing to move for more opportunities?

Intervention:

- Completed assessments/researched LMI
- Provided guidance and counseling by jointly developing plan for employment with career goal
 of ...
- Established services required to obtain goal
- Criteria for review were set
- Rights/responsibilities and CAP

Plan: Begin services once plan is approved. Client's next steps (Johnny will....research education programs, send current resume, etc)

IPE Review

Purpose: Review plan for employment

Assessment:

- Review of progress with criteria for review
- Review services and service dates

Intervention:

• Provide guidance and counseling

Plan: Meet again (date) to (next activity)

IPE Amendment

Purpose: Amend plan for employment

Assessment:

- Current situation
- Reason for amendment

Intervention:

- Provide guidance and counseling
- Review plan
- Review rights and responsibilities and CAP

Plan: Amend plan and identify next steps

Authorization

Technology

- Summary of the client's current situation
- o Reason/need for the authorized item
- o Comparable benefits have been explored
- $_{\odot}$ $\,$ Technology recommendation and summary of quotes are in eFORCE if over \$500
- Guidance and counseling provided and checked
- o Plans for delivery and training of the authorized item

College training

- o Summary of the client's current situation (college name, progress, etc)
- Statement indicating required paperwork has been received
- o Comparable benefits have been explored (grants/scholarships)
- o Guidance and counseling provided and checked
- o Plan for next meeting

All other authorizations

- o Summary of the client's current situation
- Reason/need for the authorized item/service
- Guidance and counseling

Closure

Purpose: Close case

Assessment:

- Current situation
 - o If working: wages, hours, benefits, etc. Identify that it aligns with IPE
 - o If not working: reason for closing case unsuccessfully
- Summary of services provided over life of case
- Education level at closure

Intervention:

- Provide guidance and counseling
- Review rights and responsibilities and CAP

Plan: Close case and send closure letter