

Prevocational Services in the Family Care and Family Care Partnership Programs
Q&A Document #2
 February 28, 2011

This Q&A document relates to the OFCE Technical Assistance Series Memo: 10-04

Module 1: Intent of Prevocational Services and Definition of "Integrated Employment"	
1. How come sheltered workshops are not counted as employment?	Sheltered workshop participation, even for pay, is an element of prevocational services intended to prepare people for subsequent employment. It is not in and of itself an employment outcome. It is similar to a student doing a paid internship in preparation for actual employment. The term "employment" as used in a policy context is reserved for work in the community. If supports are needed for this, supported employment services are authorized.
2. What is a reasonable amount of time? How do we convince employers to hire people who have disabilities, at the wage of non-disabled workers make, when there are not enough jobs for qualified and over qualified workers? (i.e. where are all of these minimum wage or better jobs coming from?) Please define "working age Family Care members." What is working age? What about individuals who have had integrated employment and no longer wish to work in that environment?	<p>Reasonable Amount of time....answered in Q&A #1; Page 8, #2</p> <p>Having a disability does not mean a person is not qualified to do a job in the community. Employers are interested in people who can contribute to their business operation. If people's skills and contributions match an employer's needs, the employer is not being asked to hire a person who isn't qualified. Customized employment offers a strategy to work with employers to create positions that match their needs with the skills and contributions of an individual with a disability.</p> <p>Working age is generally considered to be 18-64, although there are an increasing number of people 65 and over who still wish and perhaps need to work.</p> <p>Many of us have had a community job that has not worked out to our or our employer's satisfaction. The job has ended. Typically, we pursue another job rather than conclude we no longer wish to be involved in community employment. Our approach for people with disabilities should not be different. There is no one integrated employment situation that typifies what an integrated employment environment is. If one situation did not work out, there are many other situations that can be tried.</p>
3. For individuals who need long term support in employment setting IE job coach - how will this be funded?	The Family Care, Family Care Partnership, PACE and IRIS long-term care programs can fund long term support.
4. In 60 seconds or less, what is the purpose of this program other than giving someone disabled a job? When does this start? Is this the same program that the State is going to put into effect about people being treated at home rather than a nursing home in 2014? Is this a State funded?	Prevocational Services are one service option in the Family Care, Family Care Partnership, PACE and IRIS Medicaid waiver programs, all of which are designed to advance community integration for individual with disabilities. The change to prevocational services is designed to enhance opportunities for community integration through employment. The waiver programs can only be operated with federal approval, in part because the federal government provides roughly 60% of the funding for these programs. The federal government approved the prevocational service definition change in late 2009 for Family Care, FC Partnership and

	PACE. The Technical Assistance Guidelines for implementing the revised prevocational services definition in Family Care, Partnership and PACE were issued on June 3, 2010. The guidelines took effect September 1, 2010.
5. Is integrated employment really voluntary?	Yes, members can choose to work or not, and group supported employment is another option available. Prevocational services are intended to support individuals to achieve at least part-time integrated employment.
6. While in Pre-Voc can the consumer be working in center and working on skills that will enable him-her to get an integrated job?	Yes, a person can receive prevocational services in a work center as part of making reasonable and continued progress toward at least part-time participation in integrated employment. The skills focused on must be general (helpful for succeeding in a range of integrated jobs) rather than job-specific. Training to acquire job-specific skills would be funded by the Division of Vocational Rehabilitation rather than under prevocational services. Learning general skills for integrated employment can also be done in community settings.
7. What if a person (current prevocational service recipient) is happy with their present job?	If a current prevocational recipient is happy with his/her activities in a facility that are part of prevocational services, he/she can continue to enjoy those activities so long as part of the service package that also includes community-based and integrated employment related activities. Further, the fact that a member enjoys their time in a facility does not mean the member would not also be interested in a part-time job in the community. People can do both under the policy.
Module 2: Prevocational Services Explained	
1. How should the IDTs verify that members are participating in programs that contribute to a member's work experience, skills and work-related knowledge during work center downtime?	At the time when prevocational services are being reviewed, the IDT could ask the prevocational service provider for a summary of the activities provided to the individual during downtime in the previous six month service authorization. The IDT should also ask the member what s/he does during downtime. If the IDT has concerns, further fact-finding should be done. The provider network unit of each MCO collects information from prevocational providers regarding downtime programs so the IDT could also consult this unit and then determine if the member is being offered these programs during downtime, either by talking to the member or asking the prevocational provider for documentation of the activities provided to the individual during downtime.
2. When you talk about appropriate age or working age group, what age range are you talking about?	See Mod. #2 Q. 2 for answer.
3. Generally accepted community workplace etiquette: how will that effect people with disabilities who display extremely challenging behaviors; are these individuals disqualified from integrated employment? Ability to communicate": does this disqualify individuals who are non-verbal from integrated employment? "Workplace safety skills": how does this effect individuals who are unable to discriminate between safe and unsafe situations? mobility skills: how does this effect individuals who are completely non ambulatory? Will they be disqualified from integrated employment. If someone has disabilities that are extreme enough that they will not qualify for integrated employment, does this mean that they will be unable to continue participation in Pre-Voc, essentially disallowing their right to work?	No one should be disqualified from integrated employment based on any of the issues in this question. These issues may require specialized approaches for services and support, but are not grounds for disqualification from integrated employment. People need to learn about and, as far as possible, understand and independently exercise workplace skills and behaviors desired by employers; but supported employment services and assistive technology are available to support people in these areas so no one is disqualified from integrated employment.

<p>4. Is the IDT responsible for funding the pre-training aspect and then the referral to DVR? If so, how do we show the member's progress and document this? Also, what if they are placed on a waiting list for services at DVR; do we then need to repeat or continue the prevocational training?</p>	<p>You are correct that generally the MCO is the funding source for prevocational services and generally DVR is the funding source for vocational services, although the MCO can pay for services that DVR otherwise provides if DVR services are unavailable to a particular individual. Medicaid is also typically the funding source for long-term support, after someone finishes with DVR services. Documented progress in prevocational services will be evident in the six month progress report and service plan submitted to the IDT by the prevocational provider. This plan asks the prevocational provider to report when a person is referred to DVR. It's important to note that participation in prevocational services is not required prior to referral to DVR, nor is there a set amount of time that someone needs to spend in prevocational services prior to applying to DVR for services. The trigger point for DVR referral is when the individual (and his/her guardian if one exists) has decided that s/he wishes to pursue at least part-time integrated employment, and through prevocational service opportunities, has had the chance to develop a preliminary sense of what type of job, location, hours, etc. is preferred. While people work their way through the DVR process, prevocational services can continue to be authorized so that skills that will help the individual succeed in integrated employment can continue to be developed and enhanced. As well, when a person obtains integrated employment that is part-time, prevocational services can continue to be provided as a wrap-around if the IDT determines this is a cost effective way for the person's additional vocational needs to be met. Prevocational services can continue if a person is placed on a DVR waiting list. However, it is not anticipated that most people being referred to DVR from prevocational services will be placed on a DVR waiting list. For more advice on DVR waiting list issues, please see Q&A #1; page 13, #3.</p>
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Module 3: Informed Choice, the Inter-Disciplinary Team's Role and the Role of the Prevocational Service Provider

<p>1. Why are service providers not part of the IDT? There are many times a question from members, guardians, and /or case managers come up at meetings and then an answer is not given. This is something that should be looked at closely. Service providers know members very well.</p>	<p>Service providers can be a part of the IDT meetings when the member or guardian or other formal member of the IDT invites the provider. There may be other times when the member, guardian or another formal member of the IDT believes that talking without a service provider present would be of benefit. In order to allow for choice of provider, the ability for the IDT to consider a change in provider at any given point of time, or the opportunity for the member, guardian and IDT to discuss issues related to provider performance, there will be times when a service provider should not be involved in an IDT meeting. Also, a policy that would make providers formal IDT members could not restrict membership to a single provider category (e.g. pre-voc providers), but would need to allow all providers to join the IDT, which could render the IDT unworkable.</p>
<p>2. Is the standardized reporting form provided only to the MCOs or will it be provided to CRPs as well?</p>	<p>Each MCO will provide its prevocational service providers with the reporting format the MCO wishes its providers to use. Reporting at six-month intervals is expected. Many MCOs are looking at using the standardized six month report form recommended by DHS. This form can be found at http://www.dhs.wisconsin.gov/lc/Pages/ProgramOps/prevoc/index.htm. The final version was developed with input from CRPs and MCOs.</p>
<p>3. If a member is participating in pre-voc services and SE, as part of a work crew or enclave, are they still expected to make progress toward IE and no longer participate as part of the work crew or enclave? Is this perhaps expected to be accomplished via fading out of the job coaching?</p>	<p>Any member participating in prevocational services is expected to make reasonable progress toward integrated employment, regardless of their participation in group supported employment (e.g. a work crew or enclave). Integrated employment involves no more than two individuals placed and supported to work together. Fading of coaching from a work crew or enclave that involves 3 or more people placed and supported to work together would not make</p>

	the employment situation fit the definition of integrated employment. There is no requirement that an individual would need to give up participation in a work crew or enclave if they begin participating in integrated supported employment. People can be supported in a mix of employment situations. If a member is not participating in prevocational services and is only participating in a work crew or enclave, there is no requirement that they progress toward at least part-time participation in integrated employment, although the member should be regularly offered this opportunity by the IDT.
4. If a member over the age of 60 with a DD diagnosis is in a nursing home due to needing ongoing skilled care related to their compromised medical issues (which cannot be managed within an AFH or CBRF) and the Power of Attorney for Healthcare is insisting that the member attend some type of supported/prevocational employment, how do you handle this? How should a situation where a member refuses to participate in supported or prevocational employment while the Guardian or POA-HC insists on this be handled?	Any member participating in employment services, including supported employment or prevocational services, is expected to have an employment outcome they are working toward. The member centered plan should identify whether the member has employment related outcomes. When there is apparent disagreement between a member and her/his guardian regarding the member's outcomes, IDTs are encouraged to seek a discussion with both the member and the guardian with outside facilitation (e.g., an ombudsman) if needed to attempt to reach a solution that is mutually acceptable to the member and guardian.
5. Can a member ever be recommended for center work and also can the member just work in supported employment? For Pre-Voc, is the outcome always integrated employment.	For prevocational services, the expected outcome of the service is at least part-time participation in integrated employment. A member can just work in supported employment. The member can be involved in a mix of group and individual supported employment, or just one of these options. A member cannot be referred for center-based (sheltered) work as a permanent employment situation. If members are referred for participation in center-based work as part of prevocational services, that participation is intended to help the member make reasonable and continued progress toward at least part-time integrated employment. When a member is participating in part-time integrated employment, that member can, with IDT authorization, continue in a prevocational program that includes center-based employment.
6. Can the Volunteer experience utilize an authorized support person to help with the training and supervision of the Member?	Yes, this can be done.
7. Define "formal member" of the IDT. Can a provider be a member of the IDT if the member requests?	Answered in Q&A #1; Page 9, #1.
8. Is the standardized reporting form for the prevocational providers?	Yes, it is a sample form for prevocational providers to complete so IDTs have the information they need to make decisions regarding reauthorization of prevocational services for a member.
Module 4: Guidelines for Members Classed as "New Entrants" to Prevocational Services	
1. Why do volunteer opportunities not count as employment?	Volunteer opportunities are not considered to be employment because the activity isn't paid. However, volunteer opportunities are very good community based prevocational activities because they allow individuals to do work-like activities in integrated community settings, alongside community members without disabilities. Through volunteering, people can also get accustomed to following a schedule and traveling to an integrated site, which are good preparatory activities for integrated employment.
2. Are "in-kind" services received from a sheltered workshop prior to 1 September considered prevocational services?	No, a person would not be considered a current prevocational service recipient if they attended a work center (sheltered workshop) prior to September 1, 2010 but there was no payment made by the long-term care system for the services rendered.
3. Please clarify whether a new entrant who is already receiving pre-vocational services in school could continue pre-vocational services.	Yes, if the new entrant has a goal of working in at least part-time integrated employment OR if the new entrant is uncertain about integrated employment but is willing (i.e. not opposed) to

	<p>learning and exploring possibilities around integrated employment. See Prevocational Services Decision Tree, page two (yellow boxes) which can be found at: https://www.dhs.wisconsin.gov/familycare/mcos/prevocdecisiontree.pdf</p>
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Module 5: Guidelines for Members Classed as "Current Prevocational Service Recipients"

<p>1. How is this information being shared with transition services / school to work?</p>	<p>The Department of Public Instruction will coordinate training on prevocational services for transition coordinators and relevant school personnel. Department of Health Services representatives are also providing information to local Transition Advisory Councils, when invited to do so. Finally, Department of Health Services staff will also be presenting the information at upcoming Wisconsin Statewide Transition Initiative conferences.</p>
<p>2. In the slide notes, it is stated that the pre-voc/SE provider can assist the IDT and member with accessing DVR. The slide states that the IDT typically helps the member access DVR. Please clarify - there is some concern among providers that helping a member access DVR is a conflict of interest, especially if the provider is the only available vendor in that area and would therefore be the DVR referral option.</p>	<p>DVR has confirmed that it is not a conflict of interest for a provider that is also a DVR vendor to assist a member to apply for DVR services, so long as the provider understands that doing so does not guarantee the provider will receive an authorization from DVR to provide services to the member. Providers should always try to help individuals apply for services that could benefit them.</p>
<p>3. To be clear, individuals currently participating in Prevocational Services may continue, but will be forced to work toward community based employment; whether they really want it or not? Individuals not currently participating in Prevocational Services are being strongly encouraged not to, even if that is their or their guardian's strong preference?</p>	<p>These statements are not correct. Regarding statement one, DHS and Family Care will <i>actively encourage</i> people currently receiving prevocational services to consider and pursue integrated employment. The process outlined in the technical guidelines includes the inter-disciplinary team (IDT) and prevocational service provider taking adequate time with each individual and his/her family/guardian to provide sufficient and accurate information about the opportunities for integrated employment that are available, as well as the benefits of participating in integrated employment. The process outlined in the technical guidelines also involves the IDT and prevocational service provider identifying and addressing concerns or hesitations that the individual and his/her family or guardian may have about participation in integrated employment. Experience tells us that many typical concerns or hesitations can be effectively addressed by providing correct information and by developing an individualized approach for each person.</p> <p>As outlined in the guidelines, if after a sufficient period of time, and a good faith effort by one or more prevocational providers, a current prevocational service recipient still does not wish to pursue integrated employment on even a part-time basis, the individuals will not be forced to do this. However, there is an expectation that continued prevocational services will allow for greater community integration and the possibility that integrated employment may be something the individual might reconsider at a later date. Hence the technical guidelines state that the prevocational service plan will need to be "at least partly focused on activities outside of facility-based work that are specifically relevant to preparing people for voluntary participation in integrated employment at a future date." This ensures that the service being delivered is consistent with the service definition, while not forcing any current prevocational service recipient into integrated employment. This also ensures that an individual will have the chance to revisit the opportunity to pursue integrated employment over time, as circumstances may change and this may, at some future point, be something the individual would like to consider.</p>

	<p>Regarding statement two, prevocational services are not being discouraged for individuals not already receiving them (new entrants) but rather, in keeping with the service definition, are being made available to new entrants who wish to pursue at least part-time integrated or who are not opposed to further exploring the possibility of pursuing integrated employment. See Prevocational Services Decision Tree, page two which can be found at: https://www.dhs.wisconsin.gov/familycare/mcos/prevocdecisiontree.pdf</p>
Module 6: Guidelines for Reauthorizing Prevocational Services	
<p>1. Can the IDT RAD rides for prevocational training and services?</p>	<p>The IDT is required to use the Resource Allocation Decision-Making Method for all service authorizations including prevocational services and transportation.</p>
<p>2. Will there be increased funding for Prevocational Service providers to hire more staff; which will be necessary to do one on one or small group community based activities in a concerted effort to assist individuals in preparation of integrated employment.</p>	<p>As with all Family Care services, each MCO negotiates with providers to arrive at mutually agreeable rates and staffing ratios for any new service options. Rates currently being paid per staff hour for facility-based prevocational services may be sufficient to provide smaller group services in community settings.</p>