

Trainer's Notes

Case Management Strategies for Success: Utilizing Assessment

Purpose

This course focuses on incorporation of assessment results into all aspects of ongoing case management.

Learning Objectives

Upon completion of this course, you will be able to:

- Use assessment results from various assessment tools and sources in program plans and case management decisions.
 - Appraise W-2 participants' progress in their goals and program activities.
 - Support assessment utilization through documentation.
-

Materials**Equipment**

Laptop with PPT installed and download Live Slides Add-On (*log into Live Slides within PPT with the log in information of PTTTrainingSupp@wisconsin.gov, password: PTTTrainingSupp*)

Projector

Mouse

Speakers

Learning tools

Flipchart Paper

Markers

Mini-white boards and dry erase markers (1 set per learner)

Tabletop materials

Name tents

Printed/ prepared materials

What would you do? Scenario/cards

Copies of Adult Learning Style Assessments

Prepared flipchart paper for Collective Knowledge activity

Printed Mini-Scenarios

Index cards with written Mini-Scenario names

Picture Cards for Zoom Activity (obtain from previous trainer)

- ZOOM by Istvan Banyai
- Re-ZOOM by Istvan Banyai

Lined paper for PIN comment activity

Participant Guide (Optional)

TN


Evaluations

Suggested Pace

This course is a full 6-hour course. The following agenda is the suggested pace.

9:00 – 9:10	Adult Learning Assessment
9:10 – 9:20	Welcome and Introductions (as needed)
9:20 – 9:45	Activity: Zoom
9:45 – 9:55	Assessment Process Model (review from 2-day course)
9:55 – 10:05	Why Assessments?
10:05 – 10:15	Broadcast Message: One and Done
10:15 – 10:30	Break
10:30 – 11:10	Activity: Collective Knowledge
11:10 – 11:35	Utilizing Assessment Results
11:30 – 12:00	Mini-Scenarios
12:00 – 1:00	Lunch
1:00 – 1:10	SMART Goals
1:10 - 1:15	Accommodations
1:15 – 1:25	Broadcast Message: Get to the Point
1:25 – 1:35	Evaluation of Assessment
1:35 – 1:45	Documenting
1:45 – 1:55	Broadcast Message: Commenting for Days
1:55 – 2:15	Activity: Documenting through PIN Comments
2:15 - 2:30	Break
2:30 – 2:40	Appraise Progress
2:40 – 3:10	Activity: What would you do?
3:10 – 3:20	Revisiting Documentation
3:20 – 3:30	Broadcast Message: No Talk, No Action
3:30 – 3:35	Summary
3:35 – 3:55	Closing Activity: Broadcast to Participants
3:55 – 4:00	Conclusion

Activity: Adult Learning Assessment

 PPT 1 TN Appendix A (32-35)

Purpose: Learners experience how it can be frustrating to complete assessments, and then they are not utilized.

Materials: Paper assessments

Time: 10 minutes

Directions to Trainer: Place a paper assessment at each seat prior to class. When class begins, instruct the learners to complete the assessment on their own, and then score the assessment. Give them five minutes. At the end of the five minutes, tell them to put their names on the scoring sheets and turn them upside down and just set them off to the side near them. Then move onto the introduction.

Trainer Instructions to Learners: There are assessments at your seat. We are going to start by having everyone complete an assessment and score sheet. You have five minutes. When you are done, put your name on the score sheet, turn them upside down, and set them off to the side near you.

Introduction

 PPT 2

Good morning and welcome to Case Management Strategies for Success: Utilizing Assessments. Thank you all for taking those assessments. We will not be working with them any more today. We just need to have everyone taking courses complete them.

Note to Trainer: Be sure that trainers introduce themselves. Have the class introduce themselves, and review basic housekeeping if needed.

Today we are going to talk about:

- Using assessment results from various assessment tools
- Appraising W-2 participants' progress
- Supporting assessment utilization through documentation

As we go through the day, our PowerPoint will display the page number of where we are in your Participant Guide in the blue circle in the top right-hand corner.

Activity: Zoom

 PPT 3 PG 4**Time:** 30 minutes**Materials:** Picture cards (currently have one copy to be shared)**Purpose:** Learners create a framework to explore the importance of capturing an entire story.**Directions to the Trainer:**

Part One: Trainer pulls a sequential number of the picture cards, enough for each learner to have one card. The pictures are randomly ordered and handed out. The task is to create a unified story from a set of sequential pictures within pictures. Learners do not show their card to anyone. The learners then talk with each other and describe their cards to put the story in the correct picture sequence.

Part Two: After 10 minutes, allow 5 minutes for the learners to sort out and re-order themselves/their photos. It may be helpful for them to lay the story out on a table in order to walk through the sequence.

Part Three: Ask the debrief questions. After debriefing, have the learners complete the two questions in their Participant Guide. Give them two minutes. Then instruct learners to share their responses with a partner at the table. Give two minutes to share.

Instructions to Learner:

Part One: (10 minutes) In order to understand a participant's story, we need to see the big picture and understand the minute details, along with everything in between. I will hand each of you one picture. Do not show your picture to anyone. Each picture depicts a scene that tells a story when put in order with other scenes. Your job is to describe your picture to others in order to put the scenes of the story into the correct sequence. Create a line/continuum of where you think your picture fits in the story.

Part Two: Now share your picture. You can reorder yourselves if necessary.

Part Three:

Debrief questions:

What approach did you take to describe your picture? What did you notice about how others described their picture?

How did it feel to have only one piece of the whole picture?

Now take a couple minutes to answer the two questions in your Participant Guide.

Note to Trainer: *The questions from the Participant Guide:*

- *What parallels can you draw between this and working with W-2 participants?*
- *How do you ensure you see the big picture when working with a participant?*

Share your answers with a partner at your table and discuss similarities and differences in your answers.





State we want to keep this in mind throughout the day and when you get back to the office.

Assessment Process Model

☀ PPT 4

📄 PG 5

Think back to the two-day assessment course where you learned about a case management process model. Assessment is one part of the case management process. Just like case management is a process, so is assessment.

Remember you first  collect assessment information, then you  evaluate it, and then you must take  action based on the assessment information. You must remember to  document even if your action is only to reinforce a current case management approach. The process then repeats. Each step of the process must be documented in the case record.

☀ PPT 5

Directions to the Trainer: These questions are to be completed with the Poll Everywhere slides in the PowerPoint. Click Activate to allow learners to submit their responses. After everyone has submitted their responses, clear and click next to move on to the next question. Learners can submit responses via the Poll Everywhere app, text message, or online.

Trainer Instructions to Learner: Submit your responses to the following questions by texting, the Poll Everywhere app, or online. The text line and website are at the top of the screen.

Note to Trainer: *If technology is not working, review questions below and solicit verbal responses.*

Collection of information

How do you collect assessment information?

Possible Answers:

- *Ask questions*
- *Forms*
- *WWP Assessment Driver Flow*
- *Observations*
- *Collateral contacts*
- *Personal interaction*
- *Testing*

Evaluation of information

How do you evaluate information?

Possible Answers:

- *Reviewing results for understanding*
- *Comparing and contrasting various sources of information*
- *Reviewing participant progress*
- *Recognizing outside influences that affect the results - internal (health/wellness, environment), external (family, community)*
- *Identifying missing information*

Action based on information

What action could you take based on assessment results?

Possible Answers:

- *Updating the Employability Plan*
- *Changing Placement*
- *Assigning new/different activities*
- *Referring to other programs or community supports*
- *Providing accommodations*
- *Recommending further assessments*

Documentation of information

What do you document?

Possible Answers:

- *Participant progress*
- *Accommodations provided*
- *Participation*
- *Goals*
- *Assessment information, etc.*

Where do you document?

Possible Answers:

- *WWP (including detail and notes fields, PIN-level comments, and the EP)*
- *CWW (case-level comments, change in placement)*
- *ECF (Electronic Case File)*

All this information assists you in making case management decisions; for example placement determination, ongoing activities and outcomes, and need for additional assessment.

It's important to know what assessment tools are available, how to administer them, and how to interpret and use the results.

Why Assessments?

 PPT 6

 PG 6

Throughout the day, we are tuning into What's In It - For Me, or WII-FM, coming to you live from your world. Whenever you hear one of these WII-FM broadcast messages, listen for what is in it for you specifically as a Case Manager.

Let's begin by taking a look at the two questions at the top of the page in your Participant Guide and jotting down your responses.

What do you get from assessments?

Possible Answers:

- *Information*
- *Potential activities the participant already is completing*
- *Insight into what's going on in the participant's world*
- *Ideas for potential goals, including personal goals*
- *A chance to see the 'whole picture'*
- *Knowledge of potential barriers and ideas for accommodations*

What do participants get from assessments?

Possible Answers:

- *A better understanding of themselves*
- *How to work to the best of their ability*
- *Verification of goals*
- *A stronger partnership with their Case Manager*
- *A chance to work together to develop an EP that best fits their individual needs*

Broadcast Message: One and Done

 PG 6

Our first broadcast message features **One and Done**, who asks, "Why do we need to do so many different types of assessments?" While listening to the broadcast, think of other answers to **One and Done's** question.

Directions to Trainer: Play the first broadcast message to the learners by advancing to the next slide. The script of the broadcast message can be found below.

PPT 7

Broadcast Message #1 from WII-FM

We interrupt this training to bring you a message from the WII-FM Studios for a dose of “what’s in it for me.” Today, we’re responding to your questions from the front lines. **One and Done** writes in asking, “Why do we need to do so many different types of assessments; isn’t the informal assessment enough? Completing all those assessments takes so much time, so what’s in it for me?” Well **One and Done**, assessments give us a wealth of information, and each assessment gives us different types of information. By completing multiple assessments, you’ll know what the participant is interested in, what he or she is able to do, and what is needed to ensure the participant is able to do it. This eliminates having to guess what will work for the participant through trial and error, thus saving you time in the long run. When you utilize the assessment results, it also means the participant is more likely to be engaged and fully participating. Who doesn’t want to have less non-participation to enter and re-engagement calls to make? Well, that is all we have for this dose of “what’s in it for me.” Tune back in later for more from your friends here at WII-FM Studios. Back to you, trainers.

Debrief

What other “what’s in it for me” reasons you would tell “**One and Done**”?

Potential Responses:

- *Different types of assessment, like career assessment and educational needs assessment, are required by policy.*
- *Participants are not one-dimensional. Multiple assessments allow us to see the full picture and get a better understanding of who the participant is.*
- *Gathering results from multiple assessments gives us a better ability to assist with goal setting, as we can gather information to help set personal goals, employment goals, and programmatic goals.*

Activity: Collective Knowledge

PPT 8

PG 7

Purpose: Learners identify information gathered from various types of assessments.

Time: 30 minutes

Materials: Prepared flipchart paper, markers


Directions to Trainers: Instruct the learner to complete the matching activity independently. After 2-3 minutes, have the learners share their responses with their table groups. Then the trainer reveals the correct answers to the entire group.


Trainer Instructions to Learner: Take a couple of minutes to complete the matching activity in your Participant Guide.


Now share your responses with your table groups.


Here are the correct responses.

PPT 9


 Informal Assessment - Gathers information regarding a participant and their family

 Formal Assessment - Establishes the extent, severity, and effect of any disability along with the need for services/accommodations

 Vocational Evaluation - Assesses a participant's capacity to become employed and remain employed, establish realistic vocational goals, and develop a plan to achieve them

 Career Assessment: Work Styles - Assess a participant's work personality (attitude, ethic, etc.)

 Career Assessment: Skills - Determines the skills a participant already has

 Career Assessment: Interests - Identifies careers that may fit a participant's interests

PPT 10

PG 8

Directions to Trainer:

Part 1: Divide the class into groups of 3-4. Give the groups five minutes to brainstorm the information they get from each type of assessment. Inform them to record their thoughts in their Participant Guide.

Part 2: Then have each group go to a different piece of prepared flipchart paper with the name of one type of assessment on it [Informal, Formal, Vocational Evaluation, Workstyles, Skills, and Interests]. Learners record the information they brainstormed on the flipchart paper. Tell the learners to bring their Participant Guides with them. Give them two minutes.

Have the groups rotate to the next type of assessment after the two minutes has passed. Continue the process, decreasing the time at the flipchart paper as needed until

all groups have been to each type of assessment. Have learners go back to their seats and go over what is recorded on each piece of flipchart paper.

Trainer Instructions to Learners: Throughout ongoing case management, participants complete various types of assessments, each providing different types of information.

Part 1: In your groups, brainstorm what information you get from each assessment. Record your thoughts in your Participant Guide.

Part 2: Now go to one piece of prepared flipchart paper and record the information you brainstormed. You have two minutes. Bring your Participant Guides for reference. When I call time, rotate to the next piece of flipchart paper. We will continue rotating until every group has gotten to each assessment.

PPT 11

Return to your seats and we'll discuss each assessment. Feel free to record in your Participant Guide what we get from of each type of assessment as we go through them.

Note to Trainer: Ask for a volunteer to go to each assessment flipchart to report out; or the trainer can make their way around the room and report out each. Review each flip chart response and ask for any additions.

Possible Responses for Trainer reference:

Informal Assessment

Potential Responses: Work history, educational information, participant barriers, family barriers, legal information, military experience, other programs participant is working with, transportation information, housing information, etc.

Formal Assessment

Potential Responses: Diagnosis, severity of disability, potential accommodations, participant's abilities/restrictions, collaborating partner in the provider, etc.

Vocational Evaluation

Potential Responses: Observations of subjective, third party provider, recommendations in a participant's ability to perform specific functions, potential accommodations, etc.

Career Assessment

1. Workstyles

Potential Responses: Better understanding of participant's personality, career paths that participant may thrive in, career paths that would not suite participant well, etc.

2. Skills

Potential Responses: Set of transferrable skills participant already possesses, gap in a participant's current skill set, areas that participant could use more development/practice in, etc.

3. Interests

Potential Responses: Potential jobs/fields that participant would be interested in, what participant enjoys doing, areas to explore for potential training or work experience sites, etc.

Utilizing Assessment Results

PPT 12

PG 9

Assessments are an integral part of case management, and, as you can see, we get a wealth of information from the various types of assessments we complete. However, we must go a step beyond just completing the assessments. We must act based on them.

Think back to earlier this morning. You took an adult learning assessment, scored the assessment, set it aside with no further explanation.

Answer the first two questions in your Participant Guide.

Ask the Learners to share some of their responses to each question:

 Why did we ask you to complete the Adult Learning Assessment?

Possible Responses:

- *Determine learning style*
- *You mentioned you needed to keep it on file*
- *Unsure; I was unclear why we were doing this*


How did you feel after completing it, scoring it and setting it off to the side with no further explanation?

Possible Responses:

- *Frustrated*
- *Confused*
- *Pointless*

There was no further discussion, and we did not take any action based on those assessment results.

This can translate directly to how participants feel when they complete assessments, but no action is taken. This can lead to participants feeling disengaged and lacking buy-in. Instead, we want to place value on the time and effort they put into completing the assessment, along with the valuable information we gained by utilizing the assessment results.

Now look at the third question in your Participant Guide.  As a W-2 worker, where/how can you utilize assessment results? On your whiteboard, write one example of where you can incorporate assessment results; then hold it up.

Note to Trainer: *if you don't have whiteboards, cardstock can be used instead.*

Directions to Trainer: Read the responses as they are displayed.

Possible Responses:

- *Determining Work Experience sites*
- *Identifying needed accommodations*
- *Recommending additional trainings*
- *Setting goals, etc.*


We have talked about what we gather from assessments and ways we utilize that information. Now, you get the chance to practice utilizing assessments.


What is your agency's process for receiving, reviewing, and discussing assessment results with participants?

Answers will vary

Activity: Mini-Scenario Stations

PPT 13

 PG 10-13, 25-45 (Fred 10, Appendix A 25-26), (Darrin 10, Appendix B 27-30), (Nicole 11, Appendix C 31-33), (Cory 11, Appendix D 34-39), (Gail 12, Appendix E 40-45)

 TN Appendix B (Fred 36-38), C (Darrin 39-43), D (Nicole 44-47), E (Cory 48-54), and F (Gail 55-61)

Purpose: Learners practice interpreting various assessment results and utilizing those results to make case management decisions.

Materials: Printed scenarios from appendices

Time: 45 minutes

Directions to Trainers: Create five stations around the room, each one containing one mini-scenario and assessment. Divide learners into five groups. Send one group to each of the stations. Give the groups five minutes to review the scenario and assessment at their station and answer the question for the station located in their Participant Guide. Recommend that they take notes regarding that participant, as they will be working with these participants again later. After five minutes, instruct groups to rotate to the next station. Continue doing this, rotating every five minutes, until the

groups have visited all the stations. Then have the class return to their seats and debrief.

Trainer Instructions to Learners: In your group, go to one scenario station located around the room. Each station contains a scenario. Find the corresponding assessment in the Appendix of your Participant Guide. Review the scenario and assessment for that station, and then answer the corresponding question in your Participant Guide. You may want to take notes regarding each scenario because we will be working with these participants again later in the day. You have five minutes. At the end of the five minutes, I will call time and you will rotate to the station to your right. We will continue to rotate every five minutes until you have had the opportunity to visit every station.

Debrief each station by asking the groups to share how the assessment information impacted each scenario.

 PPT 14

 PG 10

 Fred completed an educational needs assessment:

List five next step action items that you may do or offer to Fred.

Possible Responses:

- *Sign Fred up for Literacy Skills classes*
- *Pair him up with a tutor to work on reading and writing*
- *Provide picture signs at work site so that Fred can complete sorting*
- *Read all paperwork aloud with Fred to ensure he understands*
- *Update EP to include time to practice reading and/or writing*

 PG 10

 Darrin completed the O*NET Interest Profiler/ career assessment:

List five items to address with Darrin at his appointment today based on the information from the career assessment.

Possible Responses:

- *Mismatch in career assessment results and current job goal*
- *Potential Work Experience site change to better align with career interests*
- *Offer research opportunity for Darrin to look into different careers recommended*
- *Refer to local tech school for additional career exploration and potential training opportunities*
- *Discuss lack of participation in Work Experience*

 PG 11

 Nicole completed a vocational evaluation:


How do you cover the results of this assessment with her? List 5 key items to discuss with her.

Possible Responses:

- *Explain to Nicole what the WAIS-IV is and what it tests for*
- *Go over entire vocational evaluation report with Nicole*
- *Referral to DVR, medical and/or mental health provider*
- *Incorporate recommended activities and accommodations into EP, and provide a copy of the Services and Accommodations form to necessary professionals Nicole also is working with for activities*
- *Pair with Mentor at Work Experience Site*

Note to Trainer: *The WAIS®-IV is intended for use with adults ages 16 to 90. The assessment measures cognitive ability using a core battery of 10 unique subtests that focus on four specific domains of intelligence: verbal comprehension, perceptual reasoning, working memory, and processing speed.*

 PG 11


 Cory completed a physician's assessment, and we received a medical capacity form:

List five things to discuss with Cory based on this assessment.

Possible Responses:

- *Layer EP to start new activities next week (when surgery occurs)*
- *Schedule weekly appts with Cory to record her participation in lieu of her completing logs on her own*
- *Update activities on EP to remove Work Experience, and replace with activities that do not require manual manipulation such as workshops*
- *Talk about best communication method for Cory during this time for if/when she is unable to complete activities due to pain*
- *Schedule follow-up appt with Cory for 1 week post-op to see how she is doing and if EP needs to be further adjusted*

 PG 12

 Gail completed a mental health assessment, and we received a mental health report form:

What are five questions or discussion topics you have with Gail upon receipt of this assessment?

Possible Responses:

- *Update EP to include weekly counseling appts*
- *Discuss having meetings with FEP in a private office where it is quieter and easier for Gail to focus*
- *Change schedule of activities to be late morning and afternoon to accommodate sleep disturbances*
- *Work with Gail to determine appropriate accommodations, such as frequent breaks, and complete the Services and Accommodations form*
- *Offer to pair her up with a Mentor*

 PPT 15

 PG 13

Debrief instructions to learners:

Now that you have had the opportunity to work with several assessments, let's take a moment to complete a self-assessment. In your Participant Guide, assess your comfort level with each type of assessment using the visual rating scale.

Ask Which assessments are you not fully comfortable using? Describe your action plan to become comfortable with each one. **Ask** for examples of action steps.

The concept of you writing action steps to improve your comfort and knowledge of various assessment types is similar to you developing action steps and/or goal steps with participants on their EPs that help them reach their employment goals.

Note to Trainer: *As time permits, have the learners use their small white boards. As each assessment is mentioned, they indicate their rating and share with their table group.*

Responses will vary

SMART Goals

 PPT 16

 PG 14

Not only do assessments impact your case management decisions and participants' activities, they also impact their goals and accommodations. When developing and revisiting goals, we need to help participants use those assessment results to develop SMART goals. To review why we develop SMART goals, let's watch a short YouTube clip. The link to the clip is in your Participant Guide if you would like to share it with participants when you get back to the office.

Directions to Trainer: Have the YouTube clip *Achieving More by Setting SMART Goals* (<https://www.youtube.com/watch?v=yA53yhiOe04>) open on your laptop. Leave the PPT to play the clip, and then come back when it is complete. Then go on to ask the questions below.

What does SMART stand for?

Answer:

 *Specific*,  *Measurable*,  *Attainable*,  *Relevant*,  *Time-Based*

How can you help participants develop SMART goals?

Possible Responses:

- *Ask probing questions*
- *Help them break large goals down to focus on specific steps*

How do you get buy-in for setting goals, especially when a participant has never done it before or is skeptical about setting goals?

Possible Responses:

- *Break up goals into small, more manageable steps, and celebrate when participant completes the little goals*
- *Highlight success stories of participants who have had success with getting to their goals*

How does helping participants develop SMART goals benefit you?

Possible Responses:

- *More likely for participants to get to their goals*
- *Better buy-in to W-2 program*
- *More likely to be engaged and participating*

Accommodations

 PPT 17

 PG 15

You also need to be using those assessment results when identifying accommodations for participants to fully participate in the W-2 program.


When an assessment determines a need for an accommodation, but no accommodation recommendations have been made, it is important for you to work with participants to determine what will work best to suit their needs. One resource that can be used not only by you, but also by participants, is the Job Accommodation Network, or AskJan.org.



Other than assessments and AskJan, how else do you identify accommodations?

Possible Responses:

- *From participants themselves*
- *Co-workers*
- *Other service providers or community members*
- *Personal observations*
- *DVR*

 Where do you document accommodations?

Possible Responses:

- *Services and Accommodations form*
- *PIN comments*
- **Participant Barrier page**

Broadcast Message: Get to the Point

 PPT 18

 PG 16

Our next question comes from **Get to the Point**, who asks, “Why do we need to even evaluate assessment results?” While listening to the broadcast, think of other answers to **Get to the Point’s** question.

Directions to Trainer: Play the second broadcast message to the learners. The script of the broadcast message can be found below.

 PPT 19

Broadcast Message #2 from WII-FM

We interrupt this training for our next question from the front lines here on WII-FM. **Get to the Point** asks, “Why do we need to even evaluate assessment results? We need to incorporate them no matter what, so what’s the point?” We are glad you asked, **Get to the Point**. There are many things that could’ve affected those assessment results, such as the participant having a bad day or didn’t sleep well the night before. If you just take the assessments at face value, you could be missing out on valuable information from the participant. Your time is precious, and you don’t want to waste it trying to figure out this information down the road. It’s also crucial in ensuring that you are understanding the assessment results. If you don’t fully understand the assessment results, having an expert help you evaluate them will allow you to gain more knowledge; and knowledge is key. That is all the time we have for this dose of “what’s in it for me.” Back to you, trainers.



Debrief



What other “what’s in it for me” reasons you would tell “**Get to the Point**”?

Potential Responses:

- *Evaluating helps us make solid case management decisions*
- *It allows us to explain the results more clearly to the participant*
- *It gives us an opportunity to discuss with the participant if he or she agrees with the results*

 PPT 20 PG 16

As mentioned in our broadcast, evaluation of assessment results is crucial. Evaluating the results should involve both the  FEP and the  participant.

Not only do you need to understand what the results mean, but participants also need to fully understand what the assessment results mean. When participants understand their assessment results, it allows them to participate meaningfully in setting goals, which empowers them to  “make choices,” not  “take chances.” If they understand their own assessment information, they can have a more realistic view of the future and choose goals that meet the SMART goals criteria.

There are several questions to consider while evaluating assessments results with participants. Our broadcast message brought up one question – what could have affected those assessment results? When you discuss assessment results with participants, you can gain their insight on whether they believe the results are an accurate representation of themselves. If not, you can dive deeper into what may have affected those results, how it may have affected those results, and if re-assessment is needed.

Trainer Instructions to Learner: In your table groups, take five minutes to discuss a few more questions to consider when evaluating assessment results found in your Participant Guide. Think about what you gain by asking these questions to participants. Then designate a spokesperson to share your responses when we reconvene to our large group.

What does the result mean to the participant?

Possible Responses:

- *Participant buy-in into the W-2 program.*
- *More accurate outcomes, which increase participant success.*
- *Insight into participant's motivation, which can be harnessed when there is lack of progress.*

What actions need to be taken regarding our case management plan?

Possible Responses:

- *Solicits participant ideas on what he or she needs to do to progress toward goal(s). Participant ownership in plan, which increases participation.*
- *Helps participant learn to be more self-sufficient, which leads to less dependence.*

What further assessment is needed?

Possible Responses:

- *Better understanding of participant's entire story through multiple assessments.*
- *Open up opportunities for collaboration if participant would be going to another professional.*

Documenting

☀ PPT 21

📄 PG 17

We have talked about collecting assessment information, evaluating that information, and acting based on the information. Our next step is documenting that information. Documentation means recording your comments and information received in the case record. Documentation records what happened regarding:

- 🖱 Collateral contacts, or oral confirmations of a participant's circumstances by a person, such as an assessment provider, that are made in person or by telephone
- 🖱 Your observations of documents or assessment results
- 🖱 An explanation of conversations

☀ PPT 22

Proper documentation of actions taken based on assessment 🖱 reduces errors by providing understanding of and accountability for case actions. It justifies and 🖱 supports the decisions you make.

Good documentation not only protects you, but it also helps co-workers when covering other caseloads or 🖱 when a case is transferred. The key is to tell the participant's story and 🖱 remove the mystery of what was done so that anyone can understand why, when, and what actions were taken. Documentation is especially critical when a case is transferred to another worker or agency. The new worker relies on comments and data entered to begin managing the case. Workers should include enough information to describe the nature and source of the information.

When you obtain information from the provider of an assessment, document the non-confidential details in PIN comments. The documentation should include the name of the source, as well as the details of the statement and how you obtained it. Confidential information can be documented by typing up a statement with the details that could not be put in PIN comments and scanning it into ECF under the correct confidential code.

 PPT 23 PG 18

Let's practice documenting. Read the example appointment summary in your Participant Guide and record what you would write in PIN comments.

Example:

You are meeting with Shonda Quill to go over her career assessment results with her. Her interest inventory results show that she is Realistic and Social. Her current goals were to get a degree in computer science and become a computer programmer. You and Shonda discuss how these results may conflict with her current goals because she would not be able to be outdoors or work with many people. Shonda agrees that they do not align, and states she was pursuing that field because her mom said it would pay well. You and Shonda update her goals and activities to better align what she is interested in.

PIN Comment:

Possible Response: Shonda attended appt to go over career assessment results. She tested high in Realistic and Social. Discussed results with Shonda in correlation with current goals/activities. Shonda stated she only decided on current goals due to her mother stating that field would pay well. She states that she would be more interested in a field where she could work more hands-on, preferably outdoors, and with people. Updated goals and activities based on conversation. Will reassess new direction at next appt.

Pair up with someone at your table and compare your responses.

Broadcast Message: Commenting for Days

 PG 19

Commenting for Days asks, “Why do we need to be documenting our rationale for utilizing the assessment results?” While listening to the broadcast, think of other answers to **Commenting for Days**’ question.

Directions to Trainer: Play the third broadcast message to the learners. The script of the broadcast message can be found below.

 PPT 24**Broadcast Message #3 from WII-FM**

We interrupt this training with another question from the front lines here on WII-FM. **Commenting for Days** writes in, asking, “Why do we need to be documenting our rationale for utilizing the assessment results? Well sure, policy requires it, but what’s in it for me? I use the assessment results and plan on scanning them into ECF. Why do I need to comment as well?” That’s a great question, **Commenting for Days**. You and the participant worked hard incorporating all those assessment results to make an effective plan to get to his or her goals. That is a lot of work by itself, not to mention when you multiply it by your entire caseload! Now, we don’t expect you to have superpowers and remember all that information! By documenting the rationale, not only can you review it later, but a co-worker or supervisor can as well. And, if they can review it, well that means they can cover for you when you take some much-needed time off! And, of course, as you mentioned, policy requires it. Following policy means happy monitors. And happy monitors make for a happy agency, which makes for a happier life. The benefits to you really are endless! Tune back in later to WII-FM for another what’s in it for me.” Back to you, trainers.

Debrief

What other “what is in it for me” reasons you would tell “**Commenting for Days**”?

Possible Responses:

- *Documentation can be a nice way to show a participant how far they have come. That can be a motivational tool.*
- *It gives a clear road map of where to go to next and how the participant is going to get there.*
- *You have documentation to present at Fact Findings or Fair Hearings if necessary.*

Activity: Documenting through PIN Comments

 PPT 25 PG 19

Purpose: Learners practice documenting how they utilized assessments.

Time: 15 minutes

Materials: Index cards with names of mini-scenarios and lined paper for PIN comments

Directions to Trainers: Instruct learners to divide into groups of 2-3. Each group picks a card to determine what scenario they work with from the mini-scenario activity. They will use the assessment and the responses to the questions in the Participant Guide for that scenario for this activity. As a group, they choose a writer and record PIN comments on the provided piece of paper regarding the scenario, assessment, and how they incorporated those assessment results. Give them five minutes to do this. After time is up, collect the pieces of paper with all the PIN comments.

Inform learners that they are going to receive a set of PIN comments from a different group. Learners review the comments and add any information they believe is missing. Give them two minutes to do this. Collect the PIN comments again and repeat this process one more time. Instruct learners to return to their seats.

Trainer Instructions to Learners: Now that we have heard why documenting our decisions is so important, let's get some practice by revisiting those scenarios from earlier in the day and the notes you made in your Participant Guide. You are preparing to transfer a participant's case to another FEP. As a group, choose a writer and record your PIN comments based on the actions you took due to the assessment information you went over with the participant that is on the index card you picked. Remember, it is best practice to include a participant's name in commenting. Be detailed enough that the next FEP understands what happened. You have five minutes to do this. When you are done, turn in your PIN comments to me.

Now, I am going to give you a set of PIN comments. Pretend the participant was just transferred to you, and you want to find out about the last assessment they took. Review them, add any additional information you would have liked to have as the new FEP. You will have two minutes. Turn your comments in to me again when you are done.

I will give you one more set of PIN comments. Review them and add any additional information. You will have one minute. When you are done, return them to me.

Debrief questions:

When reviewing the PIN comments you received, did they contain enough information for you to know what happened at that appointment and what the next steps are? What was missing?

How can you ensure that you are documenting all the essential information after completing an assessment?

Appraise Progress


 PPT 26


 PG 20

So far, we have revisited the Assessment Process Model that you saw during New Worker Training. We have looked at collecting, evaluating, taking action on, and documenting assessment data. Now, we need to look at how things are going for the participant. Is the participant making progress toward their goals? Just like each participant is a unique individual, their progress is as unique and needs to be evaluated on its own merits.

Odds are a participant's progress will ebb and flow, progress and regress, so it is important for the FEP to continually appraise, monitor, and evaluate progress. This is one step of the Evaluation section of the Assessment Process Model.

When appraising a participant progress, think of the three R's:

 Reassess

 Reengage

 Reevaluate

 PPT 27

Directions to Trainer: After this mini lecture about appraising progress, instruct the learners to define each of the words: Reassess, Reengage and Reevaluate in the space in their Participant Guide. Learners share their definitions using the 1-2-4-All process as directed and timed by the trainer. Debrief through a report-out from each group. Capture their commonalities on the flip chart or white board.

Trainer Instructions to the Learner:**Step 1:**

Take the next few minutes to individually write your definitions of Reassess, Reengage and Reevaluate in the space in your Participant Guide.

 **Step 2:**

Next, take three minutes to share your definitions with another learner not at your table. Compare and contrast your definitions.

 **Step 3:**

Next, find another pair to make a foursome to compare your definitions. You have five minutes. Ask one person in your group to record and be prepared to report out during the group debrief about the commonality or consensus of your definitions.

Debrief:

- In what situations would you reassess?
Possible Responses:
 - *When a participant stops participating in activities.*
 - *When there are changes in a participant's circumstances.*
 - *When assessment results are inconsistent.*
- In what situations would you reengage?
Possible Responses:
 - *When a participant stops participating in activities.*
 - *When a participant stops attending appointments/returning phone calls.*
 - *When progress towards goals has stalled.*
- In what situations would you reevaluate?
Possible Responses:
 - *When current activities/goals are not working for participant.*
 - *When participant expresses that he or she is bored/uninterested.*
 - *When a participant's motivations have changed.*

Transition to Activity

You have had the opportunity to awaken your idea-generating skills, and you just identified situations to reassess, reengage, and reevaluate. You now are going to get the opportunity to practice identifying potential next steps in some case scenarios

Activity: What Would You Do?

 PPT 28 PG 21 TN Appendix G (62-64)

Purpose: Learners generate numerous ideas on how to reengage, reassess, and reevaluate W-2 participants' progress using various scenarios.

Time: 30 minutes

Materials: Preprinted Scenario and Response cards from the TN Appendix.

Directions to Trainers: Divide the class into groups of four and have them bring their Participant Guide with them to the assigned tables. Give each group one stack of response cards and one stack of scenario cards. One learner in each group chooses one scenario card. This is the card that the learner judges on. Each learner takes one set of four response cards.

One learner takes a turn being the judge, reading his or her scenario, while the other learners write a response to that scenario. Responses should include reengaging, reassessing, and/or reevaluating strategies. After all responses to the scenario have been written, they are placed face down in the middle of the table for the judge to choose a favorite response. After the judge reviews each response, the judge can ask follow-up questions and questions for clarification before choosing one response. The judge can jot down notes on the response cards to keep track of the additional information provided. The other learners in the group also may engage in asking follow-up and clarification questions so all learners in the group understand each response that the judge has the option to choose. The judge then picks their favorite response. Each learner in the group has a different scenario card and gets an opportunity to be the judge.

After each group has rotated through all learners having an opportunity to be the judge, learners report out. Trainer facilitates reporting out by going through each scenario card. Learners who had the same scenario share their chosen response.

Trainer Instructions to Learners: Bring your Participant Guide with you. At your table, there are stacks of response cards and one stack of scenario cards. This activity is much like Apples to Apples or Cards Against Humanity. Each person grabs one scenario card and one stack of response cards. You should have five cards in your hand. Each person takes turns reading your scenario card (being the judge) while your tablemates write a response to your scenario. Your responses should include reengaging, reassessing, and/or reevaluating strategies. After you write a response, place it down on the table. After all responses are written, the judge reads the responses and asks follow-up questions for clarification of the responses. The other learners at the table can ask follow-up questions for clarification. The judge then selects the response they like best. Take turns around the table, allowing every person in the group to be the judge.

Optional (as time permits): Have judges for each scenario convene and discuss the responses they each selected. Choose a spokesperson, and when the group reconvenes, report out the response your group agrees is the favorite.

Debrief:

Have each mini-scenario group report out the response they felt was the best or the favorite through majority rules or consensus.

Did you have a hard time deciding on your response? Why?

Is there more than one response (next step) when looking at reengaging, reassessing, and reevaluating?

Note to Trainer: Instruct the learners to stay in their group and keep their scenario and chosen 'what would you do?' response for their next activity.

Transition to Revisiting Documentation

Everyone just had an opportunity to hear multiple responses to a scenario they selected and to ask questions and seek clarification to determine an option for reengagement, reassessment, and reevaluation.

As with any decision or action you make, what must happen next to ensure that information is not lost?

Answer: Document decisions and actions taken.

Revisiting Documentation

 PPT 29

 PG 21

Purpose: Learners practice giving and receiving feedback on PIN comments.

Time: 10 minutes

Materials: Cards from What Would You Do? activity, participant guide

Earlier in the day, we talked about case management being a non-linear process. While working with a participant, you continually are moving from one part of the process to another. You must document participant progress and the actions you take on a case, as it is a critical part of case management. As you provide case management to participants, you continually are assessing, evaluating, and reassessing progress. Documentation at each stage ensures you have a thorough case record, which tells a detailed story of the events of the case.

 PPT 30

Directions to the Trainer: Learners return to their groups in which they completed the What would you do? Activity. Learners take their response with their chosen decision, and document PIN comments in their Participant Guide. Then, they share their comments for immediate feedback. Remind and instruct the learners to be honest, but professional, in providing feedback with care.

Trainers Instructions to the Learner: Let's get some practice documenting actions taken with participants. In the previous activity, you were asked to choose one response

card for reassessing, reevaluating, and/or engaging a participant. Now, take the card that you chose, and use the space in your Participant Guide to write PIN comments to document the actions taken with that scenario.

Now, share these comments with the learners in your group. Take turns giving feedback to each other on the comments.

PPT 31

Debrief:

- What details did your colleagues suggest you add?
- Describe your experience of receiving feedback.
- How does thorough and accurate documentation impact case management?

Possible Responses:

- *Allows for Case Manager to have a better understanding of the participant.*
- *Chronological documentation tells the story of the case.*
- *Makes sure participants are on track and making progress.*
- *Detailed records available if needed in a Fact Finding.*

Broadcast Message: No Talk, No Action

PG 22

Our final broadcast features a question from **No Talk, No Action**, who asks, “Why should I bother commenting every time someone doesn’t answer my phone calls, or another appointment where no progress is made?” While listening to the broadcast, think of other answers to **No Talk, No Action’s** question.

Directions to Trainer: Play the fourth broadcast message to the learners. The script of the broadcast message can be found below.

PPT 32

Broadcast Message #4 from WII-FM

It’s me again with another question from the front lines here at the WII-FM Studios. Our last question today comes in from **No Talk, No Action**. He asks, “Of course I am trying to reassess and reengage participants, but if I can’t get ahold of them, there is not much to say. I have a lot of participants on my caseload; why should I bother commenting every time someone doesn’t answer my phone calls, or another appointment where no progress has been made? That time can be spent doing more important things, so what is in it for me?” Well, we can understand where you are coming from, **No Talk, No Action**. We know that time is precious on the front lines!! You are doing the necessary work to help participants make change in their lives; you might as well take credit for it. Commenting leaves a trail for you to be able to do just that. By spending the minute or

two up-front when you make the initial effort, you save yourself time later by having to explain your actions a few weeks down the road when management or monitors want to know what is going on with the case. Commenting now about your attempts also provides a great reminder for you when cases pop up on reports. Less time trying to remember what happened means more time for you to do the great work you came to your agency to do! Well, from all of us here at WII-FM Studios, we thank you for all you do to make a positive impact for Wisconsin's families. Back to you, trainers.

Debrief

What other "what's in it for me" reasons you would tell "**No Talk, No Action**"?






Possible Responses:

- *It shows a pattern of behavior that you can talk about with the participant.*
- *Showing patterns of behavior can be the basis of making good decisions about reengagement attempts and changes to a case plan.*
- *This is a form of assessment. You can use this information as you start to uncover the reasons for a participant's non-engagement.*

Summary

 PPT 33

 PG 22

Assessment is  ongoing throughout the entire time participants are in W-2. Whether the assessment is informal, formal, career, vocational, or educational needs, the results  need to be  utilized as part of your ongoing case management to ensure participants are reaching their goals. As  re-assessment takes place, you need to update goals and activities to  incorporate the new information and changes in circumstances.

Closing Activity: Broadcast to Participants

 PPT 34

 PG 23

Time: 20 minutes

Throughout the day, you heard several broadcasts centered around "what's in it for me," or WII-FM. This concept is used throughout different fields that are centered on working with adults, from sales to training to human services. The key concept of this idea is that adults are just that – adults, – and they want to be treated like adults.

Directions to Trainers: Learners develop a broadcast message of their own targeted at the participants they work with. Learners' messages answer the question: "How does

using assessment results benefit participants?" Give them five minutes to work on their message. After the five minutes, ask each pair to share one of their broadcasts.

Trainer Instructions to Learners: Like all of you, participants want to know why or what's in it for them. Thinking about everything you learned today, it is your turn to develop a broadcast message. This message should be under one minute in length and should tell participants why using assessment results benefits them. You have five minutes to work on your broadcast.

Share your broadcast with a partner and discuss why that concept stood out to you. Then choose one broadcast to share with the group.

Conclusion PPT 35

Thank you everyone for your time and participation today! Please complete your evaluations and leave them on the tables. We do value your feedback!

Trainer's Notes Appendix

Appendix A: Adult Learning Assessment

Adult Learning Style Modality Profile

(Adapted from Learning Style Form developed by Ray Barsch)

The following statements are designed to determine your learning style modality (visual, auditory, or kinesthetic). No style of learning is better than another. However, each style makes its own demands on the environment of the learner.

Directions: Read each statement, and place a check mark in the appropriate box to indicate your feelings about that statement and yourself. Work quickly. Do not sit and ponder. Avoid the urge to mark all items "sometimes." **THERE ARE NO RIGHT OR WRONG ANSWERS.** When finished, follow instructions for scoring.

	<u>Often</u>	<u>Sometimes</u>	<u>Seldom</u>
1. I remember things better when people tell them to me than when I read them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I follow written directions better than oral directions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I like to write things down or take notes for visual review.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I bear down extremely hard with pen or pencil when writing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I require explanations of diagrams, graphs, or visual directions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I enjoy working with tools (cooking, woodworking, mechanical).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I am skillful and enjoy developing and making graphs and charts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I like to learn something new by talking rather than reading about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I remember best by writing things down several times.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I can understand and follow directions using maps.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I do better at academic subjects by listening to lectures and tapes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I handle objects (coins, keys, pencils) while studying, reading, conversing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	<u>Often</u>	<u>Sometimes</u>	<u>Seldom</u>
13. I learn to spell better by repeating the letters aloud, not by writing them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I understand a news article better by reading about it than by listening to the radio.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. I chew gum, smoke, eat, or drink while studying or working.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. I remember something best if I picture it in my head.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. I like to make things as I learn.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. I would rather listen to a good lecture or speech than read about the subject.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. I am good at working and solving jigsaw puzzles and mazes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. I prefer listening to news on the radio or TV rather than reading about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. I like to learn most by building, making, or doing things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. I enjoy researching an interesting subject by reading relevant material.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. I feel comfortable touching others, hugging, handshaking, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. I follow oral directions better than written ones.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. I enjoy learning by going places and seeing things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. I like to draw, color, sketch, paint things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. I doodle during meetings, lectures, or while listening on the phone.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. I enjoy listening to music.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. I like to shape or make things with my hands (clay, ceramics, dough, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. I read aloud (or whisper) to myself when trying to understand new written material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SCORING FOR ADULT LEARNING STYLE PROFILE

First, place the point value on the line next to its corresponding item number.
 Next, total each column to arrive at your profile score under each style.

OFTEN = 5 POINTS

SOMETIMES = 3 POINTS *Tip: avoid overuse of "sometimes" – you'll get a more*

SELDOM = 1 POINT *interesting score*

AUDITORY	VISUAL	KINESTHETIC/TACTILE
# of points	# of points	# of points
1 ____	2 ____	4 ____
5 ____	3 ____	6 ____
8 ____	7 ____	12 ____
11 ____	9 ____	15 ____
13 ____	10 ____	17 ____
18 ____	14 ____	21 ____
20 ____	16 ____	23 ____
24 ____	19 ____	25 ____
28 ____	22 ____	27 ____
30 ____	26 ____	29 ____
Total	Total	Total

My Dominant Mode = _____

My Back Up Mode = _____

My Least Preferred Mode = _____

Appendix B: Fred Scenario

Fred is a 49-year-old father of four children, ages 25, 19, 17, and 10. All four children live at home with Fred and his wife, Theresa, who receives SSI. Fred was employed most recently by Heartland Farms until he was laid off at the end of the harvest season. He reports having other previous manual labor experience and states he would like to stay in that field. He reports no barriers to employment, has stable housing, has his High School Diploma, and has reliable transportation.

Fred states his Primary Employment Goal is to find full-time employment doing manual labor within six months. He is assigned 2 hours of independent job search and 5 hours of work experience at the local food pantry every weekday.

When filling out forms, you notice that Fred's eyes seem to glaze over until you read the information to him. After reviewing his job search logs, you notice that the handwriting on the log does not match his signature. You speak with Fred's site supervisor, who states that Fred has been doing well restocking the pantry, but has been putting the products on the shelves incorrectly when they are completely empty.

Based on these observations, you decide to have a conversation with Fred about his literacy skills. He seems uncomfortable when you bring it up and states he prefers to work with his hands rather than read or write. He reluctantly agrees to take an educational needs assessment.

Review Fred's educational needs assessment. Participant Guide 25-26.



Individual Profile: Fred

Report Criteria			
ID:	00010	State:	Wisconsin
Test Name:	TABE 9 Complete Battery	District:	FVTC
Test Finish Date:	10-14-2019	School:	Downtown
Report Date:	10-14-2019	Class:	Friday ABE
			Test Scheduler: Tonya Teacher

Test Results						
Content Area	Level	Number of Questions			Scale Score	Grade Equivalency
		Total	Correct	Attempted		
Applied Mathematics	E	50	26	45	426	3.3
Language	E	50	17	40	407	2.8
Math Computation	E	40	17	32	419	3.5
Reading	E	50	29	42	430	3.0
Total Mathematics*					422	3.4
Total Battery**					419	3.1

Note:

Level

- This is the level he tested into with his locator test.

Scale Score

- The scale score is what is used to compare performance with average test takers in the same level and content area. These can be compared across subject areas and TABE levels.

Grade Equivalency

- The grade equivalency mirrors the typical structure seen in K-12 education, with the numbers representing a particular school year and month. These scores are not comparable across different test levels.

* Average Applied Mathematics and Math Computation

** Average of all scores

Appendix C: Darrin Scenario

You are inheriting a case due to a co-worker being out on FMLA. Darrin is a 29-year-old father of one child, age 3, and has been in W-2 for six months. He has been a stay-at-home dad for the past three years. Prior to his daughter being born, he worked a variety of jobs including a bank teller and a mechanic. Darrin states that he hasn't hated any of his past jobs, but he also hasn't loved any of them. He reports no barriers to employment. He is currently living with his parents, and lives on a bus route. He has his High School Diploma and a mechanic certification.

Darrin's Primary Employment Goal is to find work as a mechanic by the end of the year. He currently is assigned 1 hour of independent job search and 4 hours of work experience at Little Sprouts Daycare every weekday. Additionally, he attends 1 hour of Job Club on Wednesdays. You notice that he has been completing all his Job Club and job search hours, but rarely completes any work experience hours. You check ECF and find a copy of his career assessments.

Review his career assessments. Participant Guide 27-30.



Printed for: Darrin

O*NET Interest Profiler: Career List

Your interest results:

Realistic	29
Investigative	21
Artistic	16
Social	17
Enterprising	11
Conventional	3

Your Job Zone:

Job Zone Three
Medium Preparation Needed

Careers that fit your interests and preparation level:











 Best fit  Great fit

-   Medical Appliance Technicians
-   Veterinary Assistants & Laboratory Animal Caretakers
-   Commercial Divers
-  Forest & Conservation Technicians
-  Municipal Firefighters
-  Potters, Manufacturing
-  Precious Metal Workers
-   Radiologic Technologists
-  Robotics Technicians
-   Veterinary Technologists & Technicians

Other careers that fit your interests:


Job Zone One: Little or No Preparation Needed






 Best fit  Great fit

-  Agricultural Equipment Operators
-  Farmworkers & Laborers, Crop
-   Fishers & Related Fishing Workers
-   Hunters & Trappers
-  Meat, Poultry, & Fish Cutters & Trimmers
-   Roustabouts, Oil & Gas
- Fabric Menders
- Painting, Coating, & Decorating Workers
- Plasterers & Stucco Masons
-  Septic Tank Servicers & Sewer Pipe Cleaners

Job Zone Two: Some Preparation Needed




 Best fit  Great fit

-  Animal Breeders
-   Animal Trainers
-  Excavating & Loading Machine & Dragline Operators
-  Forest Firefighters
-  Mine Cutting & Channeling Machine Operators

-  Multiple Machine Tool Setters, Operators, & Tenders, Metal & Plastic
-  Nursery Workers
-  Rail Car Repairers
-  Sheet Metal Workers
-  Solderers & Brazers











































Job Zone Four: High Preparation Needed




 Best fit  Great fit

-  Fish & Game Wardens
-  Foresters
- Aerospace Engineers
- Agricultural Engineers
- Automotive Engineers
- Electronics Engineers
- Energy Engineers
- Mechanical Engineers
-  Museum Technicians & Conservators
- Solar Energy Systems Engineers

Job Zone Five: Extensive Preparation Needed

 Best fit  Great fit

-   Acupuncturists
-   Surgeons
-   Allergists & Immunologists
-   Anesthesiologist Assistants
-   Anesthesiologists
-   Athletic Trainers
-   Chemistry Teachers, Postsecondary
-   Chiropractors
-   Dentists, General
-   Dermatologists
-   Human Factors Engineers & Ergonomists
-   Medical Scientists
-   Nurse Anesthetists
-   Obstetricians & Gynecologists
-   Oral & Maxillofacial Surgeons
-   Orthodontists
-   Orthoptists
-   Orthotists & Prosthetists
-   Preventive Medicine Physicians
-   Prosthodontists
-   Radiologists

-  Soil & Plant Scientists
-   Sports Medicine Physicians
-   Urologists
-   Veterinarians

Special Notice: Proper Use of O*NET Interest Profiler Results

You **should use** your **O*NET Interest Profiler** results to explore the world of work and identify careers that may satisfy what is important to you in a job-your interests. You will be able to look at the interests satisfied by careers and compare them to your own interests. Talk to a vocational/employment counselor or teacher for more help on how to use your **O*NET Interest Profiler** results.

Your **O*NET Interest Profiler** results **should not be used** for employment or hiring decisions. Employers, education programs, or other job-related programs should not use your results as part of a screening process for jobs or training.

If you think that your **O*NET Interest Profiler** results are being used incorrectly, talk to your vocational/employment counselor, teacher, or program administrator. You also can contact the National Center for O*NET Development for assistance.

National Center for O*NET Development
Attention: Customer Service
P.O. Box 27625
Raleigh, NC 27611
Email: [O*NET Customer Service \(onet@onetcenter.org\)](mailto:onet@onetcenter.org)

Appendix D: Nicole Scenario

Nicole is 19 years old, and has a four-month-old child. She applied for W-2 after her son was born, and she was placed in a CSJ placement after her CMC placement ended. During her most recent informal assessment, Nicole reported that she has ADHD and stated that she “has trouble understanding things sometimes.” You offered the option for her to get a formal assessment completed, but she declined. She stated that ADHD never has been a problem when working in the past. Nicole has experience working in fast food, and states she didn’t mind it, but wishes those jobs paid better. She is assigned 1 hour of job readiness workshops at your agency, 1 hour of independent job search, 2 hours of work experience at the Salvation Army, and 1 hour of parenting classes at the local YMCA every weekday.

When following up with Nicole’s worksite supervisor to see how she is doing, the supervisor states that Nicole is having a hard time following directions, often asking to be shown how to do something multiple times. She also is having a hard time focusing to complete her tasks. You reach out to the workshop facilitator, and he reports the same. He also states Nicole often brings up inappropriate topics during the workshops.

You have a conversation with Nicole at her next appointment. She still declines to complete a physician’s assessment, but does agree to a vocational evaluation.

Review Nicole’s vocational evaluation. Participant Guide 31-33.



Vocational Evaluation Report

Name: Nicole

Length of Evaluation: 2 days

Reason for Referral: Nicole is being referred by the W-2 agency to ascertain her cognitive functioning. Reports from her workshop facilitator and worksite provider indicate difficulty understanding directions, focusing, and navigating social interactions through proper communication. Statement from Case Manager also reports that Nicole informed her that she “has trouble understanding things sometimes.” Due to all of these items, Case Manager suspects there may be cognitive deficits. No additional records provided, as she declined other formal assessments.

Background Information: Nicole is a 19-year-old female with a four-month-old child. She lived with her baby's father for six months, but moved back home two weeks before her child was born due to breaking up with the father. Nicole graduated from West High School last year with a 2.5 GPA, by her report. She indicated her strongest core skills were in science, but preferred music and gym. She reports that she was diagnosed with ADHD in high school. She took part in a different classroom for homeroom and study hall where she received help with homework. Nicole reports that she received several detentions a semester for causing disruptions during class. She has experience working in several different fast food restaurants, none of which lasted more than five months. Nicole was fired from her most recent position at Wendy's. She states it was due to not getting along with co-workers.

Vocational History: (Employer/Job Title/Primary Duties)

December 2018 – January 2019: Wendys/Cook/wash, cook, and prepare food

February 2018 – July 2018: McDonalds/Crew Member/take orders, clean tables

Observations: Nicole arrived on time for her first appointment, and was 15 minutes late for her second appointment. She reports that she was late because it took longer than expected dropping her child off at daycare. During her initial interview, she appeared to be nervous. When asked about it, she stated that she doesn't like to be judged. Evaluator explained that she would not judge her, but rather make recommendations to assist her. This appeared to ease some of Nicole's nervousness. Her hygiene and grooming were within appropriate limits regarding her age. When asked about her current living situation, Nicole brought up the father of her child, citing him as a cheater. Evaluator redirected her to her current situation. Nicole brought up the father of her child 6-7 times over the period of the 2 days that she was being assessed. During her interactions with the Evaluator, she asked personal questions and asked for advice. Evaluator declined to answer each time, but she asked again at least once an hour. When provided a list of tasks to complete, Nicole repeatedly asked for instructions. She would work on the task for 15-30 minutes at a time and then appeared to get distracted.

Assessments Administered:

Wechsler Adult Intelligence Scale, fourth addition (WAIS-IV):

	Composite Score	Percentile Rank	Confidence Interval	Qualitative Descriptor
Verbal Comp.	85	16	80-91	Low Average
Perceptual Reasoning	82	15	80-91	Low Average
Working Memory	70	2	82-93	Low
Processing Speed	90	17	85-94	Low Average
Full Scale IQ	82	15	82-90	Low Average

The WAIS-IV was administered to Nicole to as a measure of her intellectual functioning and cognitive abilities. Results reflect that her Full Scale Intelligence Quotient (FSIQ) was measured to be in the Low Average range and at the 15th percentile. Her strongest area of performance was on the measure of Processing Speed. Nicole's scores show that her cognitive abilities are below most others her age in the general population.

Recommendations:

1. *Further develop social skills* – Nicole's interactions with Evaluator and comments submitted prior to evaluation indicate that she struggles with effectively socializing with others. A mentor or job coach is recommended to be at a work site and/or workshop setting to aid Nicole in navigating social relationships. Providing small rewards and feedback for positive interactions will help re-enforce appropriate behavior. It is not recommended that Nicole pursue unsubsidized employment until social skills are better developed.
2. *Continue W-2 participation* – Nicole will benefit from the support and assistance provided by the W-2 agency. Providing instructions and plans in multiple formats would help her participate to the best of her ability. An audio recorder and/or written instructions should be provided when she expected to complete more than two tasks over a period of more than 30 minutes. Nicole functions best in environments with limited distractions, such as a quiet environment.
3. *Consider follow-up with a medical and/or mental health provider* – Nicole demonstrated resentment regarding her baby's father. Her insistence on bringing him up suggests that she is unable to move on and may benefit from speaking with a professional. Nicole also indicated that she performed better in school when she was taking medication. She has since stopped that medication and has regressed. Nicole may benefit from resuming a medication regimen.

Appendix E: Cory Scenario

Cory is 35 years old and has two children, ages 12 and 5. She came to W-2 after moving back to Wisconsin from out of state. She has her GED and is interested in getting a degree from the local tech school. Cory has experience working in retail sales, which is a field that she enjoys. She rents an apartment and has childcare set up. Cory walks or borrows a vehicle from friends when she needs to get around. She states she has pain caused from Carpal Tunnel, but it hasn't affected her ability to work too much. No other barriers are reported.

At her last appointment, Cory informed you that she needed to have Carpal Tunnel surgery within the next couple of months. She agreed to get a formal assessment completed, and you provided her with a MedCap. Together, you both decided to keep her goals, activities, and placement the same until she gets the MedCap completed. She currently is assigned 4 hours of work experience at the Habitat for Humanity Restore and 1 hour of independent job search every weekday, and 1 hour of working with a counselor at the local tech school on Tuesdays and Thursdays. She is working with the counselor to complete the Accuplacer, a placement tool for post-secondary education, get signed up, and register for classes.

You just received Cory's MedCap back this morning, and have a meeting with her scheduled for this afternoon. Review the MedCap. Participant Guide 34-39.



MEDICAL EXAMINATION AND CAPACITY

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04 (1)(m), Wisconsin Statutes].

The provision of your Social Security Number (SSN) is mandatory under Wisconsin Statutes 49.145 (2)(k). Your SSN may be verified through computer matching programs and may be used to monitor compliance with program regulations and program management. Your SSN may be disclosed to other Federal and State Agencies for official examination. If you do not provide your social security number, your application for benefits will be denied.

Participant Name Cory Pentel	Date of Birth 08,01,1984	Social Security Number 895-625-6296
--	------------------------------------	---

Name of Professional Provider David Ford		Professional Title MD	
Office Address 5585 Belknap St	City Superior, WI	State WI	Zip Code 54880

Dear Health Professional,

The individual named above is an applicant/participant in the **Wisconsin Works (W-2)** program. The purpose of this form is to gather information about this individual's current ability to participate in W-2 activities.

W-2 is a program designed to help individuals become self-sufficient through work and work readiness activities. In order to assign appropriate activities, it is important for us to have an idea of what tasks and assignments this individual is capable of. It is also important for us to know about accommodations and modifications that may assist this individual in participating in work readiness activities.

Activities that can be a part of a W-2 placement include:

- o job readiness/life skills workshops;
- o education and job skills training;
- o on-the-job work experience;
- o recommended medical treatments; and
- o counseling and physical rehabilitation activities.

Please answer the following questions concerning this individual's medical condition(s):

1. How frequently is the patient scheduled to meet with you?
Every six months

Regarding current course of treatment, how long have you been meeting with this patient?
4 years

When is your next scheduled appointment with this patient?
2 weeks

2. Are you aware of any other health care professionals who are currently treating this person? If yes, please identify provider name and purpose of treatment:
Jamie Ener, Orthopedic Surgeon

3. Diagnosis/Condition: Carpal Tunnel in both wrists

4. Prognosis: (if the patient's condition is related to pregnancy, please enter the expected date of birth)
Surgery for right wrist scheduled for 1 week, left wrist scheduled for 3 weeks

5. When did your patient's symptoms begin (estimate date)? Five years ago

Is it likely that your patient's symptoms will last 6 months or longer? Yes No

Is it likely that your patient's symptoms will last 12 months or longer? Yes No

6. What kind of treatment plan is the patient involved in? What is the expected outcome? Was completing physical therapy, which was no longer working. Surgery scheduled for both wrists to take place within the month. Strength building post-surgery expected to take 6-8 weeks, but then should have full recovery.

If schedule for treatment plan is known, please include below or attach:

7. What type of environment or conditions could help this person function most effectively in a variety of daily activities? Unable to write, type, or complete any other manual manipulation immediately following surgery. Will be able to do more as strengthening progresses. Once back at full capacity, no special environments/conditions required.

8. This individual may have his/her vocational capacity assessed. What, if any, accommodations should be provided for the assessment? N/A

9. Is the patient attending scheduled appointments? Yes No

If no, please explain and list missed appointment dates:

Do you attribute the missed appointments to the impairment(s)?

Yes No

10. Identify any psychological conditions that you are aware of:

- Depression
- Anxiety
- Somatoform disorder
- Personality disorder
- Psychological factors affecting physical condition
- Other: _____

11. Physical Capacities

Maximum ability to lift and carry on an occasional basis (no more than 2 hours out of an 8 hour day).

No limitation 100 lbs. 50 lbs. 20 lbs. 10 lbs. Other None until strength rebuilt

Maximum ability to lift and carry on a frequent basis (no more than 6 hours out of an 8 hour day)

No limitation 100 lbs. 50 lbs. 20 lbs. 10 lbs. Other None until strength rebuilt

Maximum ability to stand and walk (with normal breaks) during an 8 hour day.

No limitation no more than 6 hours no more than 2 hours Other _____

How many city blocks can this individual walk without rest or severe pain? No restriction

Maximum ability to sit (with normal breaks) during an 8 hour day.

No limitation no more than 6 hours no more than 2 hours Other _____

For questions 12-14 below, "rarely" means 1%-5% of an eight-hour workday; "occasionally" means 6%-33% of an eight-hour workday; and "frequently" means 34%-66% of an eight-hour workday.

12. How often can this individual perform the following activities?

Activity	Never	Rarely	Occasionally	Frequently
Look down (sustained flexion of neck)				X
Turn head right or left				X
Look up				X
Hold head in static position				X
<hr/>				
Twist				X
Stoop (bend)				X
Crouch/squat				X
Climb ladders				X
Climb stairs				X

13. Does this patient have significant limitations with reaching, handling, or fingering? Yes No

If yes, please indicate the percentage of time during an 8-hour day that your patient can use hands/fingers/arms for the following activities:

Activity		Never	Rarely	Occasionally	Frequently
Hand: Grasp, turn twist objects	Right		X		
	Left		X		
Fingers: Fine finger manipulation	Right		X		
	Left		X		
Arm: Reaching (include overhead)	Right			X	
	Left			X	

14. If your patient's symptoms interfere with performance of simple work task, please estimate the frequency of interference?

- Never Rarely Occasionally Frequently

15. What is your assessment of this individual's ability to communicate and see?

No limitation

16. Is your patient making positive progress? Yes No

Please describe the progress or lack of progress.

Physical therapy no longer working, surgery scheduled

17. Are the patient's impairments likely to produce 'bad' days? Yes No

If yes, on the average, how often do you anticipate that your patient's impairments would become acute so that the patient would be absent from work and/or other W-2 activities?

- Once per month or less Over twice per month
 About twice per month More than 3 times per month

18. Does this person's medication(s) or treatment cause side affects that impact his/her ability to participate in a work/education environment (e.g., drowsiness, dizziness, nausea, etc.)?

- Yes No

If "Yes" specify: Unable to write, type, or complete any other manual manipulation for 3 weeks post-op

19. Does this person require any adaptive devices or other accommodations to help him/her function effectively in a work/education environment (e.g., assistive device for ambulation, need to alternate positions frequently, limits on pushing and pulling, operating hand or foot controls, accommodations for bending and stooping, part-time or flexible work schedule, etc.)?

Yes No Unknown

If "Yes" describe what is needed:

Will need assistance with writing, typing, and other manual manipulation for at least 3 weeks post-op

20. Identify any of the following that your patient is likely to experience:

- Low tolerance for frustration
- Difficulty communicating his/her needs
- Difficulty following instructions
- Inability to work with children
- Difficulty working around other people
- Difficulty controlling anger appropriately
- Socially inappropriate responses to situations
- Seizures
- Difficulty engaging in complex tasks that require judgment
- Difficulty maintaining activities of daily living
- Difficulty with decision making
- Difficulty following through on agreed actions
- Panic attacks
- Difficulty with reality interpretation
- Difficulty being in unfamiliar environment
- Difficulty with impulse control
- Difficulty maintaining concentration
- Other: _____

21. Please recommend any other activities and services not included in your treatment plan that may help this individual further address his/her mental health impairment:

- Assessment (please specify type) _____
- Treatment and/or counseling (please specify) _____
- Advocacy for Social Security Income/Disability
- Other _____

22. Additional Recommendations or Restrictions: _____

23. Considering this patient's condition(s) and limitation(s) please indicate below what activities related to work and training you would recommend?

- work/work experience activities
- adult basic education/literacy
- job readiness/life skills workshops
- job skills training
- supported job search activities
- other

If no recommendations, please explain:

Do not recommend any work related activities for at least 1 week post-op and light work duties until follow-up appointment in 8 weeks

24. Estimate the number of hours a day (5 days a week) this individual can participate in work/work readiness activities within these recommendations : 0-20 depending on patient comfort level

25. If you have indicated anywhere on this form that this patient is unable to participate in W-2 activities, please explain: All activity to be limited immediately following post-op

26. Given your patient's current medical condition(s), please specify a date when the recommendations that you have provided should be reviewed: 8 weeks

Name of Professional Provider David Ford	Title MD	Telephone Number 715-889-6548
Signature of Professional Provider <i>David Ford</i>		Date Signed 08/07/2019

Return completed form to:

Name of Agency Representative Lucy Miller		Address 856 E 2nd St		Date Sent 08/01/2019
City Superior	State WI	Zip Code 54880	Telephone Number 715-894-6326	Fax Number 715-894-6666

Appendix F: Gail Scenario

You just have been transferred to work in a new W-2 office and are beginning the task of setting up appointments to meet with participants on your new caseload. The first person you have scheduled is Gail, a 24-year-old mother of two daughters, ages 2 and 4. PIN comments and the paper file show a past pattern of non-participation. She rarely, if ever, attended group job club or her GED classes. She missed several appointments with her previous FEP. Your new office is in a busy job center, which houses multiple partner agencies. Your office is a cube in which you can hear all the hustle and bustle of happenings in the building. On Gail's current EP, she is assigned to 1 hour of group job club, 4 hours of independent job, and 3 hours working on her GED and attending classes every weekday.

You have her most recent Mental Health Report Form from six months ago.

In preparing for your initial appointment with Gail, you review PIN comments and the Mental Health Report Form. However, there was no mention of it in the report or what was done with it in the PIN comments. Participant Guide 40-45.



DEPARTMENT OF CHILDREN AND FAMILIES
Division of Family and Economic Security

WPM

MENTAL HEALTH REPORT

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04 (1)(m), Wisconsin Statutes].

The provision of your Social Security Number (SSN) is mandatory under Wisconsin Statutes 49.145 (2)(k). Your SSN may be verified through computer matching programs and may be used to monitor compliance with program regulations and program management. Your SSN may be disclosed to other Federal and State Agencies for official examination. If you do not provide your social security number, your application for benefits will be denied.

Participant Name Gail Nash	Date of Birth 02/02/1995	Social Security Number 815-475-4454
--------------------------------------	------------------------------------	---

Name of Professional Provider Carole King	Professional Title Licensed Professional Counselor		
Office Address 221 W. 16th Ave, Room 201	City Milwaukee	State WI	Zip Code 53527

Dear Mental Health Professional,

The individual named above is an applicant/participant in the **Wisconsin Works (W-2)** program. The purpose of this form is to gather information about this individual's current ability to participate in W-2 activities.

W-2 is a program designed to help individuals become self-sufficient through work and work readiness activities. In order to assign appropriate activities, it is important for us to have an idea of what tasks and assignments this individual is capable of. It is also important for us to know about accommodations and modifications that may assist this individual in participating in work readiness activities.

Activities that can be a part of a W-2 placement include:

- o job readiness/life skills workshops;
- o education and job skills training;
- o on-the-job work experience;
- o recommended medical treatments; and
- o counseling and physical rehabilitation activities.

Please answer the following questions concerning this individual's impairments:

1. How frequently is the patient scheduled to meet with you?
Weekly (45 minutes)

Regarding current course of treatment, how long have you been meeting with this patient?
2 years, since birth of second daughter

When is your next scheduled appointment with this patient? Next Tuesday at 3:15pm

2. Are you aware of any other health care professionals who are currently treating this person? If yes, please identify provider name and purpose of treatment: Medical doctor for anxiety prescription

3. DSM-IV-TR Multiaxial Evaluation:

- include code and diagnosis for each axis
- in addition to mental health, please include any diagnosis related to alcohol or other substance abuse

Axis I: _____ Axis IV: _____

Axis II: _____ Axis V: Current GAF: _____

Axis III: _____ Highest GAF Past Year: _____

DCF-F-126 (R. 10/2018)

4. Identify your patient's signs and symptoms associated with this diagnosis:

	Poor Memory		Time or place disorientation
	Appetite disturbance with weight loss		Decreased energy
X	Sleep disturbance	X	Social withdrawal or isolation
	Personality changes		Blunt, flat or inappropriate affect
	Mood disturbance or lability		Illogical thinking or loosening of association
	Pathological dependence or passivity		Anhedonia or pervasive loss of interests
	Delusions or hallucinations		Manic syndrome
X	Recurrent panic attacks		Obsessions or compulsions
	Somatization unexplained by organic disturbance		Intrusive recollections of a traumatic experience
	Psychomotor agitation or retardation		Persistent irrational fears
	Paranoia or inappropriate suspiciousness	X	Generalized persistent anxiety
X	Feelings of guilt/worthlessness		Catatonia or grossly disorganized behavior
X	Difficulty thinking or concentrating		Hostility and irritability
	Suicidal ideation or attempts		Other:

5. If your patient experiences symptoms which interfere with attention and concentration needed to perform even simple work tasks, during a typical workday, please estimate the frequency of interference. *For this question, "rarely" means 1% to 5% of an eight-hour working day; "occasionally" means 6% to 33% of an eight-hour working day; "frequently" means 34% to 66% of an eight-hour working day; and "constantly" means more than 66% of an eight-hour working day.*

- rarely occasionally frequently constantly

Is your patient making positive progress? Yes No

Please describe the progress or lack of progress.

Has been progressing with occasional set backs. Displays willingness to try new strategies for anxiety and improve sleep.

6. To the best of your knowledge, is the patient on prescribed medications? Yes No

If yes, please list:

Xanax for anxiety and panic attacks, journal kept to record when medication is needed and circumstances of why needed

Describe any side affects of prescribed medications which may have implications for working, e.g., dizziness, drowsiness, fatigue, lethargy, stomach upset, etc.:

Anxiety medication can help with better sleep if taken prior to bed, but can lead to inability to focus or complete tasks if taken during day

7. When did your patient's symptoms begin (estimate date)?

As a teenager, not diagnosed until two years ago

8. Is it likely that your patient's symptoms will last 6 months or longer? Yes No

9. Is it likely that your patient's symptoms will last 12 months or longer? Yes No

10. Does the psychiatric condition exacerbate your patient's experience of pain or any other physical symptoms? Yes No

If so, please explain:

11. When completing the chart below:

*A “Marked” degree of limitation may arise when several activities or functions are impaired or even when only one is impaired, so long as the degree of limitation is such as to seriously interfere with the ability to function independently, appropriately and effectively.

***“Concentration, persistence and pace” refers to ability to sustain focused attention sufficiently long to permit the timely completion of tasks commonly found in work settings. This is often evaluated in terms of frequency of errors, assistance required and/or time necessary to complete simple tasks.

*** “Repeated” refers to repeated failure to adopt to stressful circumstances such as decisions, attendance, schedules, completing tasks, interactions with others, etc., causing withdrawal from the stress or to experience decompensation or exacerbation of signs and symptoms.

FUNCTIONAL LIMITATION		DEGREE OF LIMITATION				
		None	Slight	Moderate	Marked*	Extreme
1.	Restriction of activities of daily living	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Difficulties in maintaining social functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Deficiencies of concentration, persistence or pace resulting in failure to complete tasks in a timely manner (in work settings or elsewhere) **	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	Episodes of deterioration or decompensation in work or work-like settings which cause the individual to withdraw from that situation or to experience exacerbation of signs and symptoms (which may include deterioration of adaptive behaviors)	<input type="checkbox"/>		Once or Twice <input checked="" type="checkbox"/>	Repeated*** <input type="checkbox"/>	Continual <input type="checkbox"/>

12. Please describe any additional functional limitations not covered above that would affect your patient's ability to work in a job on a sustained basis: _____

13. On the average, how often do you anticipate that your patient's impairments would become acute so that the patient would be absent from work and other W-2 activities?

- Once a month or less
- About twice a month
- Over twice a month
- More than 3 times a month

14. Has there been any recent acute episodes? If yes, please explain and give dates: _____

15. To determine your patient's ability to do work-related activities on a day-to-day basis in a regular work setting, please give us your opinion – based on your examination – of how your patient's mental/emotional capabilities are affected by the impairment(s). Consider the medical history, the chronicity of findings (or lack thereof) and the expected duration of any work-related limitations, but not your patient's age, sex or work experience.

For each activity shown below, describe your patient's ability to perform the activity according to the following items:

Unlimited to Very Good:	Ability to function in this area is more than satisfactory.
Good:	Ability to function in this area is limited but satisfactory.
Fair:	Ability to function in this area is seriously limited, but not precluded.
Poor or None:	No useful ability to function in this area.

	MENTAL ABILITIES AND APTITUDE NEEDED TO WORK	UNLIMITED TO VERY GOOD	GOOD	FAIR	POOR OR NONE
1.	Interact appropriately with general public		X		
2.	Understand, remember and carry out very short and simple instructions		X		
3.	Maintain attention for two-hour segment		X		
4.	Maintain regular attendance and be punctual with customary, usually strict tolerances		X		
5.	Sustain an ordinary routine without special supervision		X		
6.	Work in coordination with or proximity to others without being unduly distracted		X		
7.	Complete a normal workday and work week without interruptions from psychologically based symptoms		X		
8.	Perform at a consistent pace without an unreasonable number and length of rest			X	
9.	Accept instructions and respond appropriately to criticism from supervisors		X		
10.	Get along with co-workers or peers without unduly distracting them or exhibiting behavioral extremes		X		
11.	Respond appropriately to changes in a routine work setting			X	
12.	Deal with normal work stress		X		
13.	Be aware of normal hazards and take appropriate precautions		X		
14.	Deal with stress of semi-skilled and skilled work			X	
15.	Perform detailed or complicated tasks			X	
16.	Perform fast paced tasks (e.g., production line)			X	

16. Is the patient attending scheduled appointments? Yes No

If no, please explain and list missed appointment dates:

Do you attribute the missed appointments to the mental health impairment? Yes No

17. What kind of treatment plan is the patient involved in? What is the expected outcome?

Ongoing weekly counseling, medication as needed/documenting when needed
Outcome: maintain safety, care, and stability of children, development of self
care/self management of anxiety triggers

If schedule for treatment plan is known, please include below or attach:

See above

18. Please recommend any other activities and services not included in your treatment plan that may help this individual further address his/her mental health impairment:

- Assessment (please specify type) _____ Treatment and counseling (please specify) _____
- Advocacy for Social Security Income/Disability _____ Other _____

19. What type of environment or conditions could help this person function most effectively in a variety of daily activities? Provide clear directions, be friendly and approachable, pair with
professionals with working knowledge of anxiety

20. Considering this patient's mental health condition and limitations please indicate below what activities related to work and training you would recommend?

<input checked="" type="checkbox"/> work/work experience activities	<input checked="" type="checkbox"/> job skills training
<input checked="" type="checkbox"/> adult basic education/literacy	<input checked="" type="checkbox"/> supported job search activities
<input checked="" type="checkbox"/> job readiness/life skills workshops	<input type="checkbox"/> other _____

If no recommendations, please explain:

21. Estimate the hours a day (5 days a week) this individual can participate in work/work readiness activities within these recommendations? 5-8 per day with flexibility to leave and regroup, low stress

22. Given your patient's current mental impairments, please specify a date when the recommendations that you have provided should be reviewed: Reassessed at each counseling session

Name of Professional Provider Carole King, LPC	Title Counselor	Telephone Number 414-529-4258
Signature of Professional Provider <i>Carole King</i>		Date Signed 03/01/2019

Return completed form to:

Name of Agency Representative Cary Sorenson		Address 552 E Southland Ct.		Date Sent 03/01/2019
City Milwaukee	State WI	Zip Code 53527	Telephone Number 414-858-6454	Fax Number 414-858-6453

Appendix G: Scenario and Response Cards

Camila

Camila currently is placed in a W-2 T placement, and has been in the W-2 program for nine months. Six months ago, you received a formal assessment completed by Camila's mental health provider that confirmed Camila suffers from clinical depression, anxiety disorder, and PTSD. She has continued to work with her provider over the last nine months, and has been very limited in the activities that she can complete due to her barriers.

Last week, you received an updated formal assessment from Camila's provider that states she is making progress with her mental health and that the provider feels a work experience would be good for her. Since talking to Camila about the updated formal assessment, she has been a no show for appointments and is not returning phone calls.

How do you reengage Camila in the W-2 program?

Sara

Sara came into the W-2 program unemployed a year and a half ago. Through the completion of a career assessment, you found that Sara was interested in the health care field. Sara completed her CNA coursework through the help of the program, and since has found part-time employment as a Certified Nursing Assistant.

Through a check-in with Sara's employer, you found out that Sara turned down a full-time CNA position. She also has stopped signing up for shifts and has seemed disengaged when at work. Sara's supervisor also mentioned that she does great hands-on work with the residents, but Sara struggles documenting her work and completing paperwork.

When discussing these issues, Sara reiterates that she is interested in working in health care and really enjoys helping the residents.

What will you do to reassess/reevaluate Sara?

Kristy

Kristy came into the W-2 program unemployed, with prior work experience in the retail industry. She reported liking retail and customer service work, with those being the only fields she's worked in.

Kristy was placed in a work experience at a local grocery store. At first, she was attending as scheduled and receiving good reviews from the worksite supervisor. Lately, Kristy has been skipping scheduled shifts without notice, and reported to you that working on the cash register gives her anxiety.

How do you reengage Kristy in the W-2 program?

Nigel

Nigel has been in the W-2 program for one year, and currently is in a CSJ placement. He's placed at a worksite with a construction company and is attending a local technical college's carpentry program.

During his time in W-2, Nigel has been diligent in moving forward and making progress toward his goals. He's received continued praise for his work ethic and dependability from his worksite supervisor.

Recently, Nigel's grades have begun to slip at the technical college. When you ask him about his courses, Nigel is very stressed and reports that he isn't sure he's going to be able to finish.

How do you reevaluate the current situation with Nigel?

Camila Response

Kristy Response

Nigel Response

Sara Response