## OVR-7EO Individualized Plan for Employment(IPE) Employment Outcome Form Instructions

**Purpose:** The IPE Employment Outcome is that portion of the case record that summarizes the achieved employment outcome, need for post-employment services, services provided, supported employment information and SSI/SSDI Ticket to Work information.

This form is used once the consumer has reached the specific employment goal, as agreed to by the consumer (or as appropriate, his/her representative) and the counselor and the employment has been maintained for a period at least 90 days.

**Name:** Enter the consumer's first and last name.

**SSN:** Enter the consumer's Social Security Number

**Employment Outcome Achieved:** Enter the specific employment achieved. This outcome should be consistent with the specific employment outcome (work goal) as agreed to on the IPE or in the most recent amendment to the IPE.

The counselor should notify the consumer of the intent to close the case in order to verify all services have been completed and no additional services are needed.

**SOC Code:** Enter the appropriate Standard Occupational Classification code that is most closely associated with the achieved employment goal. There are two additional codes that can be used specifically for VR.

**Post-Employment Services:** Post-Employment services mean the provision of additional services to assist the consumer in maintaining, advancing, or regaining employment. These services are expected to be of short duration and not require the intense focus expected in the provision of services in a standard case. The consumer should be informed by the counselor prior to case closing that post-employment services may be available to them.

Check the box corresponding to the perceived need or lack of need of post-employment services. If the counselor checks that there is a perceived need for post-employment services then insert the specific services that are expected in the fill in space provided. Examples of this may include the following: the need for attendant care due to the progression of an impairment, the need for certification testing or renewal based upon the requirements of a profession.

\*Please note that though there is an anticipated post-employment need listed does not necessarily mean VR will be paying for the services. Comparable benefits must once again be used first before the provision of services is allowed. An economic needs testing will need to be completed prior to OVR participation in payment of post-employment services.

**Services:** Check all boxes by the services provided by VR. This includes those services provided by VR staff as well as those provided by other agencies where VR paid for the service. This section does not include those services paid for to establish eligibility or services provided by comparable benefits.

**Supported Employment:** This section is only to be filled out if a person was eligible for, and had in their IPE, Supported Employment Services. This service does not fall under the category of post-employment services.

If the case was identified and received Supported Employment Services during their case check the first box and list the provider of the Supported Employment service in the space provided.

If the case was identified as needing Supported Employment services but the services were not provided die to lack of availability in the geographic location or available slots with Supported Employment providers, then check the second box. List the other services used to assist that consumer in maintaining their employment in lieu of Supported Employment services.

**Supplemental Security Income (SSI) and Social Security Disability Insurance** (**SSDI**) **Recipients:** This section is only to be filled out if the consumer received SSI or SSDI funds at any time during the duration of their case. This section is looking at the assignment of or lack of assignment of the Ticket to Work. This information is important to the reimbursement process between VR and the Social Security Administration. The counselor should check the correct box corresponding to the appropriate status of the Ticket.

**Signature:** The form should be signed and dated by the counselor with a date reflecting that the consumer has successfully maintained employment for a period exceeding 90 days and has completed all services planned for in the IPE.

**Distribution:** The completed Employment Outcome form with the signature of the counselor and the closure date should be placed in the consumer's file. A copy of the form should be mailed to the consumer for their records.