

**Integrated Work Site Assessment Summary**

The completed Summary Form must be accompanied by the completed Integrated Work Site Assessment form(s) and Vendor Authorization to process payment.

When completing the form, you must provide an explanation regarding the relevance of the information for potential job matches and support strategies for the customer or the employer. Please do not leave any item unanswered.

Customer Identification Information

Last Name:	First Name:	Middle Name:
Street address: (include apartment and room number, if any)		
City:	State:	ZIP code:
Primary contact number:	Secondary contact number:	
Email address:		
Does the customer have a legal representative?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, enter name of the person:		

Residential or Domestic Information

A. Family (parent or guardian, spouse, children, siblings):
B. Extended family:

Current living situation: Describe customer's current living situation. How long has the customer lived at the current location? Does the customer plan to remain at this location when he or she gets a job?

Family and friends' proximity and support: Describe the customer's proximity to family members and friends and the amount of contact the customer has with them. Describe the extent to which family members and friends would be willing to support the customer to find and keep a job (for example, transportation or connections).

Financial status: Describe the customer's financial status. What are the sources of income? If the customer receives benefits, explain how he or she and family members have been given information regarding how work will impact the benefits for them to make an informed decision.

Child care issues: What impact, if any, will child care issues have on work, hours, and location?

Information about the neighborhood: Describe the neighborhood in which the customer lives. Describe the proximity of businesses to the customer. Describe the general availability of services and supports to the customer. Are there any support or safety issues in the neighborhood that may impact the customer's work hours?

Education History

Education: What is the highest grade completed by the customer?

Enter the date the customer received diploma or highest education:

What classes did the customer participate in where he or she may have gained transferable employment skills? Describe the transferable skills learned and how the customer can currently perform each skill.

Vocational or technical training: Describe any vocational or technical training the customer had in school. Cite any paid, supported, or volunteer experiences the customer has. Describe any academic or vocational strategies that were effective with the customer. What was learned about the customer's skills, abilities, and support needs? What relevance does this have to possible job matches and potential job supports?

Current Level of Functioning as Observed by the CRP during customer engagement and work site assessment(s)

Domestic skills and level of support: Describe the customer's ability and willingness to perform routine and non-routine activities in his or her current living situation such as personal hygiene, dressing, cleaning, laundry, cooking, etc. Does the customer enjoy some activities more than others? What modifications or support strategies are in place, if any, to help the customer perform activities? What implications do these modifications or support strategies have for job matches or support strategies for the customer or the employer?

Functional reading ability: Describe the customer's reading ability in functional terms (not grade level). Give examples of the customer's reading comprehension related to job performance. Describe the format for written material that affords the customer the greatest level of comprehension, for example, bulleted format, short sentences, paragraph, pictures, etc. What types of assistance or supports have helped the customer? Describe how you reached this conclusion. Explain the relevance of this information for potential job matches or support strategies for the customer or the employer.

Functional math ability: Describe the customer's math ability in functional terms (not grade level), including telling time. Describe modification and support strategies, if any, used to help the customer with mathematical functions. Explain relevance of this information for potential job matches or support strategies for the customer or the employer.

Time management: Describe the customer's ability to manage his or her own time. Describe any factors that would impact the customer's ability to manage his or her time. Is there a time of day when the customer performs better than others? What are the typical daily routines that the customer participates in at home and the community? Are there times during the day or week that the customer is interested in safeguarding, and does he or she consider this time non-negotiable and could pose constraints in obtaining and maintaining employment?

Medication management: If the customer takes medication, describe the extent of ability to self-manage taking medication or the supports in place to help the customer take medication. To what extent does the customer perceive the value of taking the medication? How does the medication affect the customer at certain times? What implications does this information have for potential job matches and/or job supports?

Communication: Describe the extent to which the customer is able and willing to express needs, ask questions and communicate with others. Does the customer require assistance with communication? How would the customer's communication style best be communicated to a prospective employer and co-worker?

Social interaction: Describe the extent to which the customer is interested in and successful with interacting with other people. How important is social contact with others to the customer? Are there successful strategies in place to help the customer engage in social interaction with others?

Mobility and navigation: What mode of transportation does the customer typically use? To what extent is the customer able to travel to locations such as a job without assistance? If the customer needs assistance with transportation, describe the primary method the customer has for reliable transportation to and from work and

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the backup transportation plan. What potential impact does this information have on distance and potential work hours?

Behavioral challenges: Describe in detail any behaviors that have been labeled as challenging. What specifically occurs when the customer engages in the behavior? What happens before and after the behavior occurs? Are there specific, proven support strategies that have been effective in aiding the customer to reduce or avoid the behavior? What implications does this information have for potential job matches or potential supports for the customer or the employer?

Learning and Performance Characteristics

Physical environment: Describe the types of physical environments, indoors or outdoors, in which the customer is most comfortable and functions the best. Are there specific concerns about any potential physical environment?

Cultural and workplace environment: Describe the types of cultural and workplace environments in which the customer is most comfortable and functions the best. Describe the overall pace of the environment in which the customer is most likely to be comfortable or function best.

Pace of work: Describe the pace and consistency of work that would suit the customer. Would he or she benefit from a fast-paced job? Would he or she perform with consistent predictable activities, varied duties, or a combination of both? Describe how you reached this conclusion.

Learning new tasks: Describe the most effective way to teach the customer a new task. Describe the sequence of steps or strategies that works best. What type of task monitoring or supervision seems to fit the customer's preferences, tolerances, and ability to respond? Describe how you reached this conclusion.

Preferences and Choices

Work preferences: Describe the types of work in which the customer would like to engage. Explain steps taken to help the customer make an informed decision about employment. Does the customer understand the tasks that may have to be performed for the type of job interest he or she expresses? Does the customer's family have a strong interest in his or her working in a particular job? What transferable job skills or tasks can the customer demonstrate? If the customer is interested in a job for which he or she may not be qualified, what tasks within that job or related tasks can the customer perform?

Hobbies and leisure: Describe the types of leisure activities the customer prefers, keeping in mind the potential for discovering possible job matches and identifying strong interests as part of the customer's assets.

Work and Life Experiences

Work experiences: Other than educational experiences, describe the customer's work history in detail. Describe job duties, hours, and circumstances for the customer's leaving the job. Based on these work experiences, what has been learned about the customer's skills, interests, and potential support needs for new employment?

Life experiences: Describe briefly the customer's chronological life experiences and how these may impact vocational choices, work interest, and support needs.

Community Resources and Supports

Provide community support that customer might use in the spaces below. Examples are DIDD, mental health services, transportation, Independent Support Coordinator, physicians, etc.

Name of resource:

Contact information of resource:

Summary of service or supports:

Conclusions

Briefly provide a summary of customer's employability and support needs related to gaining and maintaining long-term, competitive integrated employment.

I, the Employment Specialist certify that the above dates, times, and services are accurate. I personally completed, documented, and provided all services recorded and information described. I maintain credential and training requirements as described in the CRP Service Guide.

Name of Community Rehabilitation Provider:

Name of the Employment Specialist:

Signature:

Date: