I. Purpose

This Standard Operating Protocol (SOP) outlines the process for the District of Columbia Department on Disability Services (DDS) Rehabilitation Services Administration (RSA) and the Developmental Disabilities Administration (DDA) to coordinate case management/service coordination in order to provide high-quality service delivery in compliance with federal and DDS policies, procedures, and regulations.

II. Responsible Staff

Responsible staff includes Vocational Rehabilitation (VR) Specialists, Supervisory VR Specialists, DDA Service Coordinators (SC), and Supervisory Service Coordinators (SSC).

III. Protocols

A. Coordination of ISP and IPE

1. When a person receives services from both DDA and RSA, the SC and VR Specialist will ensure that they share copies of all current Individualized Support Plans (ISP) and Individualized Plans for Employment (IPE) with each other for as long as the person continues to receive services from both administrations.

2. For people referred to RSA from DDA, a copy of the person’s current ISP is provided as part of the referral packet. The packet should also include the person’s positive personal profile, job search/community integration plan, and any employment discovery completed. If additional employment related discovery is needed to fully understand the person’s interests, talents, skills and knowledge,
learning styles, positive personality traits, temperaments in different settings, experiences, support systems, needs and specific challenges, accommodation requirements for different settings and activities, and dislikes, which may serve as a guide for customizing employment, the VR Specialist may authorize a discovery assessment, in addition to the intake and assessment for supported employment.

3. If the person centered work plan (PCWP) is informed by a discovery assessment, the VR Specialist will have a follow up meeting with the supported employment provider, the person, and any necessary supports, to discuss the work plan and next steps. The VR Specialist will schedule a meeting to occur within two (2) weeks of receiving the PCWP. At this meeting, any necessary changes will be made to the IPE, and necessary authorizations, including for supported employment – job development, will be issued.

4. As indicated above, the VR Specialist will provide a copy of the completed IPE to the SC. The VR Specialist should also provide a copy of the positive personal profile, completed during the discovery assessment. This information should be shared with the person’s DDA day and employment providers and considered when updating the person’s ISP.

5. Any Supported Employment IPE will identify a funding source for extended employment services, and the SC will provide the VR Specialist with a letter from the Medicaid Waiver Unit attesting to the person’s eligibility for the Medicaid Home and Community-Based Services (HCBS) Waiver for Persons with Intellectual and Developmental Disabilities, or the VR Specialist will document that there is a reasonable expectation that funding for extended support services will be available within 30 calendar days from when job stabilization is achieved.

6. The SC will consult with the Medicaid Waiver Unit to pre-determine whether the person is eligible for employment supports through the Medicaid HCBS Waiver program and provide the VR Specialist with documentation regarding availability of extended supports through DDA.

B. Communication between VR Specialist and Service Coordinator for Persons Referred to RSA by SC for Supported Employment Services

Once the person has had an initial provider meeting, the VR Specialist will establish communication with the SC at least every 30 calendar days, either in person, via conference call or email, to discuss the progress and participation of the person, what is working or not working, any barriers, and the next steps to ensure appropriate and timely delivery of services to the person. The VR Specialist will forward all monthly progress reports received, and discuss any issues raised in these reports in the monthly contact with the SC.
C. IPE Job Stabilization Criteria Met

1. Once the VR Specialist has determined that the criteria for job stabilization, established in the IPE have been met, the VR Specialist will send the SC and the SSC a “Transition to Extended Support Services” notification letter via email. The letter informs the SC team that the person has been determined to be stabilized in employment and that RSA services will transfer to extended services in 30 calendar days.

2. VR services will remain in place until waiver services begin. If there is a delay of more than two (2) weeks, the VR Specialist and SC will elevate the issue to their respective supervisors for resolution.

D. Discharge Planning

1. The VR Specialist will continue to monitor the person for 90 consecutive calendar days following the transition to extended services.

2. During this time, the VR Specialist will continue communication with the SC at least every 30 calendar days either in person, via conference call, or by email conversation (response is required).

3. When the person has maintained the employment outcome for 60 consecutive calendar days, the VR Specialist will notify the SC and SSC, via email, of the pending closure in 30 calendar days.

E. RSA Case Closure

1. The VR Specialist will close the person’s case when the person has maintained a successful employment outcome for 90 consecutive calendar days following the transition to extended employment services, or when circumstances merit an unsuccessful case closure for reasons consistent with the RSA Case Closure Procedure.

2. In the event of loss of contact, the VR Specialist will include the SC in efforts to reestablish contact and will notify the SC and SSC when a “30-Day Notice of Pending Case Closure” letter is sent.

3. The VR Specialist will notify the SC and SSC, via email, of VR case closures in any status.

4. Prior to any unsuccessful case closure, the VR Specialist will communicate with the
SC and SSC to inform them of the reason for the proposed case closure and discuss whether there is a need for a joint meeting in order to discuss whether provision of other services by either DDA or RSA could result in a favorable outcome for the person.