

Rehabilitation Services Policy Manual

SECTION Administrative Issues
PART Organizational Structure

SECTION NO. 1-1
PUBLISHED 03/21

Section 1 Administrative Issues

Part 1 Organizational Structure

Rehabilitation Services offers a variety of programs and services to meet the diverse needs of Kansans with disabilities.

- **Vocational Rehabilitation (VR) services** are the cornerstone of our efforts to empower Kansans with disabilities to become gainfully employed and self-sufficient.
- **Pre-Employment Transition Services (Pre-ETS)**, which are part of the VR program, are designed to help students with disabilities prepare for the adult world or work and independent living.
- **Services for people who are blind or visually impaired** - Programs include independent living services for persons who are age 55 or older, and the Business Enterprise Program (BEP).
- **Centers for Independent Living (CILs)**- Services include advocacy, independent living skills training, peer support, information/referral, and deinstitutionalization support.
- **Kansas Commission for the Deaf and Hard of Hearing (KCDHH)** - Services include information/referral, quality assurance screening for sign language interpreters, advocacy.
- **Disability Determination Services (DDS)** - This program determines disability status for Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) claims filed in Kansas.

Unless otherwise specifically noted, the policies in this manual relate to the VR program as authorized through the Rehabilitation Act, Public Law 93-112.

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PART	Purpose of the Rehabilitation Act and Vocational Rehabilitation Services	PUBLISHED	03/21

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Part 2 Purpose of the Rehabilitation Act and Vocational Rehabilitation Services

The purpose of the Rehabilitation Act is to empower persons with disabilities to maximize employment, economic self-sufficiency, independence and inclusion and integration into society.

Reference: PL 93-112, Sec. 2(b)

Synopsis of federal regulation

The purpose of Title I of the Rehabilitation Act is to provide a comprehensive, coordinated, effective, efficient, and accountable program that is designed to assess, plan, develop, and provide vocational rehabilitation (VR) services for individuals with disabilities, consistent with their strengths, resources, priorities, concerns, abilities, capabilities, and informed choice, so that they may prepare for and engage in gainful employment.

Reference: §361.1

Effective Date: May 1, 1998

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SECTION Administrative Issues
PART Mission, Values and Goals

SECTION NO. 1-3
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Part 3 Mission, Values and Goals

Department for Children and Families (DCF)

Mission: To protect children, promote healthy families and encourage personal responsibility.

Rehabilitation Services (RS)

Mission: Working in partnership with Kansans with disabilities to achieve their goals for employment and independence.

Our values and goals:

RS values the worth, rights and contributions of people with disabilities.

Our goals are to:

- Guarantee meaningful participation in planning and obtaining services through informed choice and shared responsibility.
- Deliver rehabilitation services that meet or exceed the expectations of individuals served.
- Achieve high quality rehabilitation outcomes.
- Advocate the rights of persons with disabilities.

RS values competent, facilitative and responsive staff. Our goals are to:

- Use outcome oriented performance standards for all staff.
- Recruit, employ, support, develop and promote qualified staff, and compensate them equitably.
- Practice open communication and participation.
- Celebrate exemplary performance.

RS values a supportive and accountable organization. Our goals are to:

- Promote an organizational climate of trust and consistency.
- Establish management systems that support participation.
- Use management practices that emphasize outcomes.
- Use measures of client satisfaction and other outcomes to improve organization performance.

RS values responsive acquisition and accountable management of resources. Our goals are to:

- Allocate and manage all resources, including staff, in a timely manner according to the changing needs of Kansans with disabilities.
- Increase resources to improve and expand the scope and quality of services.
- Collaborate with others in the public and private sectors to insure that the needs of Kansans with disabilities are addressed.

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RS values public support. Our goals are to:

- Involve persons with disabilities and other consumers in developing agency policy and legislation.
- Obtain the active participation of business and industry.
- Assist Kansas employers in meeting their workforce needs through referral of qualified individuals with disabilities.
- Inform and educate the public.

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SECTION Administrative Issues
PART Public Input for Program Administration

SECTION NO. 1-4
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Section 1 Administrative Issues

Part 4 Public Input for Program Administration

Rehabilitation Services (RS) will seek and consider the views of a variety of stakeholders in matters relating to general policy development and implementation and in administration of the State Plan for vocational rehabilitation (VR) services. The State Plan describes the VR program and the plans and policies to be followed in carrying out the program. The Plan is submitted to the federal Rehabilitation Services Administration.

The stakeholders to be involved in this process include.

- Current and former consumers of VR services, or, as appropriate, their representatives
- Personnel working in the field of VR.
- Providers of VR services.
- The director of the Client Assistance Program (CAP)
- The State Rehabilitation Council
- Others interested in VR, such as legislators, employers, educators, and the general public

Procedures used to obtain and consider stakeholder views include:

- Public forums conducted throughout the State.
- Meetings of advisory councils.
- Regulatory hearings when appropriate.
- Methods to measure client satisfaction, such as surveys, focus groups and problem-solving teams.
- Staff involvement in various special focus commissions or task forces.
- Ongoing consultation with staff in CAP, and with administrative and direct service staff responsible for the VR program.
- Interaction with client advocacy and employer organizations.
- Participation in budget hearings and open meetings conducted by the Kansas Department for Children and Families.

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SECTION Administrative Issues
PART Workplace Violence and Safety

SECTION NO. 1-5
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Section 1 Administrative Issues

Part 5 Workplace Violence and Safety

Synopsis of State of Kansas Workplace Violence Policy

The safety and security of State of Kansas employees and customers are very important. Threats, threatening behavior, acts of violence, or any related conduct which disrupts the organization's ability to execute its mission will not be tolerated.

Any person who makes threats, exhibits threatening behavior, or engages in violent acts on state-owned or leased property may be removed from the premises pending the outcome of an investigation.

Threats, threatening behavior, or other acts of violence executed off state-owned or leased property but directed at state employees or members of the public while conducting official state business will not be tolerated. Off-site threats include, but are not limited to, threats made via the telephone, fax, electronic or conventional mail, or any other communication medium.

Violations of this policy may lead to barring the individual from state-owned or leased premises, termination of business relationships with that individual, and/or prosecution of the individual.

Employees are responsible for notifying the local area management of the Kansas Department for Children and Families (DCF) and Rehabilitation Services (RS) Administration Office of any threats that they have witnessed, received, or have been told that another person has witnessed or received.

Reference: Workplace Violence Policy, Kansas Department of Administration, January 22, 1997

Rehabilitation Services (RS) Policy

When an individual demonstrates by past or present actions that they pose a threat to RS staff, they have forfeited the right to receive vocational rehabilitation (VR) services. The Field Services Administrator in the RS Administration Office should be consulted in all such cases.

- If there is an open case, the case should be closed as "failure to cooperate." The individual should be notified in writing of the closure, the reason for the closure (the individual's behavior which was identified as violent or threatening), the State's workplace violence policy, and the standard rights to appeal.
- Requests to open new cases or reopen previously closed cases should be assessed very carefully. The individual must provide independent evidence that they have received services or therapy to address the previously identified violent or threatening behavior. It is the individual's responsibility to provide such evidence. Independent sources for such evidence and evaluation may be a psychiatrist, psychologist, medical doctor, or other professional whom the counselor deems qualified to assess such situations. Participation in such services or therapy alone does not equate to eligibility for VR services. The individual would still have to be determined eligible according to the standard eligibility policies and procedures. If a case is

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not opened or reopened, the individual should be notified in writing of the RS decision, the reason for the action, the State's workplace violence policy, and the standard rights to appeal.

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SECTION Administrative Issues
PART Appeals – Review of Rehabilitation Counselor Decisions

SECTION NO. 1-6
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Section 1 Administrative Issues

Part 6 Appeals – Review of Rehabilitation Counselor Decisions

Rehabilitation Services (RS) procedures

Applicants, clients or former clients who are dissatisfied with any determination by the rehabilitation counselor regarding the provision or denial of vocational rehabilitation (VR) services may request timely review of those determinations through a mediation process, informal resolution or formal hearing. A client's or applicant's representative may also make such a request. Such requests must be made within 30 days of the agency decision in question.

Applicants and clients are informed of their appeal rights in writing at key stages of the rehabilitation process. Key stages of the rehabilitation process include, but are not limited to, application, determination of eligibility, determination of ineligibility, Individualized Plan for Employment (IPE) development, IPE/service changes and case closure. The information on appeal rights must include the name and address with whom to file requests for reviews. Information about the Client Assistance Program (CAP) must also be provided. One method of providing this information is through the Handbook of Services. This information will be made available in an accessible mode of communication.

When exercising appeal rights, the individual or his/her representative may present evidence or information to support their position. The individual may be represented by an attorney, advocate or any other person selected by the individual if that is his/her choice.

Informal resolution: Individuals are encouraged to discuss any problems directly with their counselor or counselor's supervisor to see if the problem can be resolved. Often CAP facilitates such informal discussions. Or, an administrative review may be conducted by a RS Program Administrator who has not been involved in the case. Use of these informal methods is not required. If the individual chooses not to pursue informal methods, or if the issues were not resolved informally, the next step is a formal hearing which must be conducted within 45 days of the individual's original request for review.

Mediation: Applicants and eligible individuals may resolve disputes through mediation. Mediation services must be presented as an option whenever an individual requests a fair hearing.

- Mediation is voluntary.
- Mediation may not be used to deny or delay the rights of an individual to a fair hearing or to any other rights afforded that individual under Title I of the Rehabilitation Act.
- Mediation must be conducted by qualified and impartial mediators.
- Services, including assessment services and services authorized through an IPE, may not be suspended, reduced or terminated pending the mediation process. Exceptions to this requirement would include situations where the individual requests the change in services, or situations where the individual and/or his/her representative have obtained the services through misrepresentation, fraud or criminal conduct.
- RS will pay for all costs related to mediation.
- If an agreement is reached, the mediator will put the agreement in writing.

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- All information learned during mediation is confidential and cannot be used in subsequent appeal actions.

Formal hearings (fair hearings): These hearings are conducted by Fair Hearing Officers from the Office of Administrative Hearings. These hearings must occur within 45 days of an individual's request for review, unless resolution is achieved, or the parties agree to a specific extension of time. While such a hearing is pending, services being provided under an IPE may not be suspended, reduced or terminated unless requested by the client or unless there is evidence that the services have been obtained through misrepresentation or fraud.

During a fair hearing, the client or his/her representative and the agency have the opportunity to present evidence or witnesses and to question other witnesses and evidence. The client may be represented by an attorney or advocate if that is his/her choice. The hearings officer makes decisions based on the State Plan, the Rehabilitation Act, VR regulations and state policies. Decisions are provided to the individual and RS Director within 30 days of the hearing.

In most situations, if the client is not represented by an attorney during fair hearings or other proceedings, RS will not be represented by an attorney. Exceptions will be made at the discretion of the RS Director. Staff may seek consultation or technical assistance from the DCF Legal Department or local office Attorneys prior to the hearings or proceedings if appropriate.

Review of formal hearings (fair hearings) decisions: Kansas has established the following procedures for the review of decisions of the fair hearings officer.

- The client or the agency may request a review of the fair hearing decision. The authority for this review is vested in the Secretary of the Kansas Department for Children and Families (DCF), the director of the Designated State Agency. Per Kansas Statute 77-527, the Secretary delegates this authority to the State Appeals Committee. Such authority may not be delegated to RS, the Designated State Unit. Parties may submit additional evidence to the State Appeals Committee through legal briefs or presentation of oral arguments. Appeals committee decisions are presented to the Secretary for review, approval and signature.
- The client or the agency must file a petition for a review of the fair hearing decision within 15 days of the date of the decision, if the decision is delivered in person; or within 18 days of the date of the decision, if the decision is mailed.
- After the request for an impartial review, reasonable time extensions may be granted for good cause.
- The State Appeals Committee reviews the decision of the hearings officer to assure consistency with the State Plan, the Rehabilitation Act, VR regulations, and state policies consistent with federal requirements. Any decision of the fair hearings officer that supports the position of the VR applicant or eligible individual can only be overturned or modified by the State Appeals Committee if there is clear and convincing evidence that the decision of the fair hearings officer was erroneous because it was contrary to the State Plan, the Rehabilitation Act, federal regulations, or state policies that are consistent with federal requirements.
- The decision of the State Appeals Committee/Secretary of DCF must be made within 30 days of receipt of legal briefs and oral arguments. A full written report of the decision and the rationale for the decision is provided to the applicant, eligible individual or his/her representative, and to RS.

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District Court: The client may bring a civil action for review of decisions by hearings officers or the State Appeals Committee/Secretary of DCF. The civil action may be brought in any State court of competent jurisdiction or in a district court of the United States of competent jurisdiction without regard to the amount in controversy.

In such actions, the court:

- Shall receive the records related to the hearing and the records related to the state review;
- Shall hear additional evidence at the request of a party to the action; and
- Basing the decision of the court on the preponderance of the evidence, shall grant such relief as the court determines to be appropriate.

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SECTION Administrative Issues
PART Confidentiality – Protection, Use and Release of Personal Information

SECTION NO. 1-7
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Section 1 Administrative Issues

Part 7 Confidentiality – Protection, Use and Release of Personal Information

Rehabilitation Services (RS) will safeguard the confidentiality of all personal information, including photographs and lists of names. All applicants and eligible individuals and, as appropriate, those individuals' representatives, service providers, cooperating agencies, and interested persons are informed through appropriate modes of communication of the confidentiality of personal information and the conditions for accessing and releasing this information.

All applicants or their representatives are informed about the RS need to collect personal information and the policies governing its use, including:

- Identification of the authority under which information is collected.
- Explanation of the principal purposes for which RS intends to use or release the information.
- Explanation of whether providing requested information to RS is mandatory or voluntary and the effects of not providing requested information.
- Identification of those situations in which RS requires or does not require informed written consent of the individual before information may be released.
- Identification of other entities to which information is routinely released.

An explanation of policies and procedures affecting personal information will be provided to each individual in that individual's native language or through the appropriate mode of communication.

The requirements listed above are met using the RS Handbook of Services.

Release to other programs in the Department for Children and Families (DCF)

RS staff may release client information without a signed release from the client to other programs within DCF *on a need-to-know basis*. A signed release is not necessary within DCF since all programs are part of the same state agency.

RS staff may release information without a signed release from the client to DCF contractors and service providers *on a need-to-know basis*. Contracts include assurances that the contractors, who are acting on behalf of RS and DCF, will use the information appropriately and maintain confidentiality standards.

If RS has obtained personal information about a client from another agency, provider or organization, such information may be released within DCF *on a need-to-know basis*. Restrictions on further release do not apply within DCF since all programs are part of the same state agency. In analyzing "need-to-know", counselors shall consider whether entire reports or summary documents should be released, and whether the information is necessary for the purposes of the requesting program.

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Release to programs outside of DCF

When programs outside of DCF which are not contractors of DCF request personal information, informed written consent of the client is required. Upon receiving the informed written consent of the individual or, if appropriate, the individual's representative, RS may release personal information to another agency or organization for its program purposes only to the extent that the information may be released to the involved individual or the individual's representative and only to the extent that the other agency or organization demonstrates that the information requested is necessary for its program.

Release to the Client Assistance Program

Informed written consent is required.

Requirements for release forms

See Forms Part 7, Part 8, Part 9, Part 10 for copies of release of information forms approved by RS. RS staff may also accept release of information forms from other organizations. Whether using RS forms or forms provided by other organizations, the following informed written consent requirements must be met:

- The client's name and identifying information (such as the date of birth or Social Security Number) must be clearly stated.
- The information being requested or released must be specifically identified.
- The person or organization to receive the released information must be specifically identified.
- The purpose for the request or release must be specifically identified.
- The form must be signed, witnessed and dated.
- Specifications of the date, event or condition upon which the release expires must be clearly stated.

Release to applicants and eligible individuals

If requested in writing by an applicant or eligible individual, RS shall release all requested information in that individual's record of services to the individual or the individual's representative in a timely manner. Release may occur by making the record of services available to the individual to view, or by providing copies of information in the record of services, according to the individual's informed choice. There are two exceptions:

1. Release of information that may be harmful to the individual
 - Medical, psychological, or other information that RS determines may be harmful to the individual may not be released directly to the individual. However, this information must be provided to the individual through a third party chosen by the individual. The third

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party may include, among others, an advocate, a family member, or a qualified medical or mental health professional, unless a representative has been appointed by a court to represent the individual, in which case the information must be released to the court-appointed representative.

- In such circumstances, counselors will inform the client and/or the client's representative that specific records contain information which requires professional explanation and interpretation, and in the counselor's judgment, review by or release directly to the client would not be in the client's best interests.
- Counselors should discuss the option of having the client authorize release of the information to a physician or psychologist to facilitate interpretation of the information. If the client agrees with this approach, the counselor may assist the client in arranging such a meeting with the health care professional and in paying for it. If the client does not agree with this option, the counselor shall proceed in a timely manner to release the information to the client's representative.

Note regarding release of such information to other programs: Medical or psychological information that RS determines may be harmful to the individual may be released to another program if the client has provided an informed written consent and if the other program assures RS that the information will be used only for the purpose for which it is being provided and will not be further released to the individual.

2. Further release of information that has been obtained from another agency or organization
 - If RS has purchased a medical/psychological assessment, exam or service on behalf of the client, then RS is considered to be the "owner" of the related records. In such circumstances, RS may further release the records to other appropriate individuals or organizations on a need-to-know basis without other restrictions or conditions.
 - If RS has obtained copies of personal information, such as medical/psychological assessments, exams or services, then such information may be released only by, or under the conditions established by, the other agency or organization.

Fees for copies provided by RS

RS may establish reasonable fees to cover extraordinary costs of duplicating records or making extensive searches. Questions on current fees should be directed to the Administration Office.

Amending the record of services

An applicant or eligible individual who believes that information in the individual's record of services is inaccurate or misleading may request that RS amend the information. If the information is not amended, the request for an amendment must be documented in the record of services.

Release to authorities

Informed written consent (a signed release of information form) is not required in the following circumstances:

- RS shall release personal information if required by Federal law or regulations. Questions about this standard should be addressed to the Social and Rehabilitation Services (DCF) Attorney in the local office at the time a request for release is received.

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- RS shall release personal information in response to investigations in connection with law enforcement, fraud, or abuse, unless expressly prohibited by Federal or State laws or regulations, and in response to an order issued by a judge, magistrate, or other authorized judicial officer.
- RS also may release personal information in order to protect the individual or others if the individual poses a threat to his or her safety or to the safety of others.

State program use

All personal information in the possession of RS must be used only for the purposes directly connected with the administration of the vocational rehabilitation program. Information containing identifiable personal information may not be shared with advisory or other bodies that do not have official responsibility for administration of the program.

Release for audit, evaluation, and research

Personal information may be released to an organization, agency, or individual engaged in audit, evaluation, or research only for purposes directly connected with the administration of the vocational rehabilitation program, or for purposes that would significantly improve the quality of life for applicants and eligible individuals and only if the organization, agency, or individual assures that:

- The information will be used only for the purposes for which it is being provided.
- The information will be released only to persons officially connected with the audit, evaluation, or research.
- The information will not be released to the involved individual.
- The information will be managed in a manner to safeguard confidentiality.
- The final product will not reveal any personal identifying information without the informed written consent of the involved individual or the individual's representative.

Information in this Part is based on §361.38 and DCF guidance.

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SECTION Administrative Issues
PART Informed Choice

SECTION NO. 1-8
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Section 1 Administrative Issues

Part 8 Informed Choice

Rehabilitation Services (RS) Policy

Informed choice is a decision-making process in which the individual analyzes relevant information and selects, with the assistance of the counselor, vocational goals, intermediate objectives, services and service providers. The concept of informed choice flows through every aspect of the rehabilitation process.

RS will provide each applicant, including persons who are participating in an extended evaluation, and each eligible vocational rehabilitation (VR) client with opportunities to make informed choices throughout the rehabilitation process. Each applicant and eligible client will work as active partners with counselors to select vocational goals, select Individualized Plan for Employment (IPE) intermediate objectives, identify services needed, select providers and choose the methods to secure needed services.

Decisions throughout the rehabilitation process must be consistent with the client's strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice. Staff and clients incorporate the concept of partnership in every step of the rehabilitation process. Both staff and clients bring strengths to this process.

- For example, staff bring skills in rehabilitation, knowledge about work, careers, technology, RS practices and federal regulations. Facilitating informed choice often requires innovative approaches within the rehabilitation process.
- The client brings to this partnership a lifetime of experiences, goals and self-awareness about the impact of disabilities, abilities, strengths and interests.
- Families and others often also contribute to this partnership.

Each client or client's representative will receive information about informed choice as well as their responsibilities and opportunities to participate in decision-making. This information is provided by counselors and through the Handbook of Services. Information is provided through appropriate modes of communication based on the client's needs. Assistance is available for persons with cognitive or other disabilities as needed.

During eligibility, each applicant is asked to identify his/her current medical provider for available information. If additional diagnostic information is needed, each applicant may select which provider is used; in some areas there may be a limited number of providers available, or a limited number of providers who will accept RS fees.

RS will assist the client in accessing the information he or she needs to make an informed choice about services and providers of services. Choice in every aspect of service delivery is not open-ended; rather it is related to what is required, not simply desired, to reach the vocational goal and achieve employment. This information will include data related to cost, accessibility and the duration of services. Qualification of provider personnel, scope of available services and the degree to which services are provided in integrated settings are also important components of informed choice.

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Sources of such information will include lists of service providers; client satisfaction reports; referrals to consumers or groups qualified to discuss options with the individuals; and relevant information related to qualification of providers, such as accreditation or certification credentials. Resource directories developed by local transition councils may also be reviewed, if available.

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SECTION Administrative Issues
PART Consultants

SECTION NO. 1-9
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Part 9 Consultants

Consultants are a valuable source of information, expertise and professional medical opinions. They are available to assist counselors in clarifying medical information or in analyzing recommendations. As a general policy, consultant approval is not required before proceeding with service delivery. Decision-making at the local level is encouraged. Counselors may use their discretion in determining when to seek advice or information from one of the consultants. (EXCEPTION: The State Psychological Consultant must approve psychotherapy plans of 25 sessions or more.)

When requesting information or advice from the consultant, include the recommended course of treatment, physician reports or relevant materials that will help the consultant to analyze the situation.

The State Medical and Psychological Consultants are responsible for establishing a network of local medical and psychological consultants, staff training, review of newly developed medical or psychological treatments, advice on cost-effective procedures and development of effective administrative procedures.

Contact the Administration Office for a listing of current consultants and addresses.

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SECTION Administrative Issues
PART Standards for Facilities and Service Providers

SECTION NO. 1-10
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Section 1 Administrative Issues

Part 10 Standards for Facilities and Service Providers

Synopsis of federal regulations

Accessibility of facilities: Any facility in which vocational rehabilitation (VR) services are provided must be accessible to individuals receiving services and must comply with the requirements of the Architectural Barriers Act of 1968, the Uniform Accessibility Standards and their implementing regulations in 41 CFR Part 101, Subpart 101-19.6, the Americans with Disabilities Act of 1990, and section 504 of the Act.

Personnel standards:

1. Qualified personnel. Providers of VR services shall use qualified personnel, in accordance with any applicable national or state-approved or -recognized certification, licensing, or registration requirements, or, in the absence of these requirements, other comparable requirements (including state personnel requirements), that apply to the profession or discipline in which that category of personnel is providing vocational rehabilitation services.
2. Affirmative action. Providers of VR services shall take affirmative action to employ and advance in employment qualified individuals with disabilities.
3. Special communication needs personnel. Providers of VR services shall:
 - Include among their personnel, or obtain the services of, individuals able to communicate in the native languages of applicants and eligible individuals who have limited English speaking ability; and
 - Ensure that appropriate modes of communication for all applicants and eligible individuals are used.

Fraud, waste, and abuse: Providers of VR services shall have adequate and appropriate policies and procedures to prevent fraud, waste, and abuse.

Reference: §361.51

Rehabilitation Services (RS) policy

Counselors will purchase services for clients only from those community rehabilitation programs approved for use by RS. Approval requires compliance with applicable federal and state statutes and regulations.

Service providers have the following responsibilities:

1. Provide the services described in the written agreement.
2. Keep current any state or local licenses, certifications, registrations or permits required for service providers.
3. Provide service only as authorized in advance by RS and only in the amounts authorized.

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4. Not discriminate against any person served because of race, age, color, sex, national origin, or disability, and to provide reasonable accommodations if necessary to permit the person to fully participate in the service.
5. Receive approval from the RS counselor and client before making any change in the goals, objectives or services being provided.
6. Tell the client about the Client Assistance Program (CAP) if there is a complaint or grievance about the services provided.

RS will use only those professional service providers who meet applicable state licensure or certification requirements.

1. A psychiatric diagnosis can be provided by a Licensed Physician, a Licensed Ph.D. Psychologist, a Licensed Clinical Social Worker and a Licensed Master's Level Psychologist working in a Mental Health Center. Beginning July 1, 2000, all Master's Level Mental Health providers can apply for a Clinical credential, allowing them to diagnose and treat mental disorders. A diagnosis made by any Mental Health professional with this clinical certification may be accepted. The list of accepted providers for psychotherapy is the same as the list of providers who can make psychiatric diagnoses with a few additions. Licensed Family Therapists can provide psychotherapy for RS consumers provided that the main obstacle to employment relates directly to a marriage or family conflict. Certified Drug and Alcohol Treatment Counselors can also provide substance addiction services. When accepting services from these providers, it is important to pay especially close attention that the scope of their treatment does not go beyond the expertise of the treatment provider.
2. Psychological evaluations should be accepted if provided by a Ph.D. or Master's Level Psychologist. Certified School Psychologists can provide psychological testing to document specific learning disabilities. Mental Health professionals other than Psychologists should not be accepted as qualified sources of psychological evaluations.
3. A general health appraisal must be performed or approved by a physician, registered physician assistant, certified school nurse, or advanced registered nurse practitioner who is certified by the Kansas State Board of Nursing to function in the expanded role of nurse clinician or nurse practitioner.
4. Individualized prescription and fitting of telecommunication, sensory and other technological aids and devices must be performed only by individuals licensed in accordance with state licensure laws or by appropriate certified professionals.

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SECTION Administrative Issues
PART Record of Services

SECTION NO. 1-11
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Section 1 Administrative Issues

Part 11 Record of Services

Synopsis of Federal Regulation

Rehabilitation Services (RS) shall maintain for each applicant or eligible individual a record of services that includes, to the extent pertinent, the following documentation:

1. If an applicant has been determined to be an eligible individual, documentation supporting that determination.
2. If an applicant or individual receiving services under an Individualized Plan for Employment (IPE) has been determined to be ineligible, documentation supporting that determination.
3. Documentation that describes the justification for closing an applicant's or eligible individual's record of services if that closure is based on reasons other than ineligibility, including closure prior to eligibility determination.
4. Documentation supporting the determination that an individual has a significant disability or a most significant disability.
5. If an individual with a significant disability requires an exploration of abilities, capabilities, and capacity to perform in realistic work situations through trial work experiences or extended evaluations in order to determine whether the individual is an eligible individual, documentation supporting the need for and the plan for the trial work experience or extended evaluation, documentation supporting the periodic assessments conducted during the trial work experiences or extended evaluations, and the written plan developed during the trial work experience or extended evaluation.
6. The IPE and any amendments to the IPE.
Documentation describing the extent to which the applicant or eligible individual exercised informed choice regarding the provision of assessment services and the extent to which the eligible individual exercised informed choice in the development of the IPE with respect to the selection of the specific employment outcome, the specific VR services needed to achieve the employment outcome, the entity to provide the services, the employment setting, the settings in which the services will be provided, and the methods to procure the services.
7. In the event that an individual obtains competitive employment, verification that the individual is compensated at or above the minimum wage and that the individual's wage and level of benefits are not less than that customarily paid by the employer for the same or similar work performed by non-disabled individuals.
8. Documentation concerning any action and decision resulting from a request by an individual for review of a rehabilitation counselor determination.
9. In the event that an applicant or eligible individual requests that documentation in the record of services be amended and the documentation is not amended, documentation of the request.
10. Documentation regarding referrals made by RS.
11. In the event an individual's record of service is closed as a successful rehabilitation, documentation that demonstrates the services provided under the individual's IPE contributed to the achievement of the employment outcome. In addition, documentation must show that all of the following requirements have been met:
 - o The individual has achieved the employment outcome that is described in the individual's IPE and is consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

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- The individual has maintained the employment outcome for an appropriate period of time, but not less than 90 days, necessary to ensure the stability of the employment outcome, and the individual no longer needs VR services.
 - At the end of the appropriate period, the individual and the qualified rehabilitation counselor employed by RS consider the employment outcome to be satisfactory and agree that the individual is performing well in the employment.
 - The individual is informed through appropriate modes of communication of the availability of post-employment services.
12. In the event that an individual's IPE provides for VR services in a non-integrated setting, a justification to support the need for the non-integrated setting.
13. In the event an individual achieves an employment outcome in which the individual is compensated in accordance with the Fair Labor Standards Act or RS closes the record of services of an individual in an extended employment on the basis that the individual is unable to achieve an employment outcome or that an eligible individual through informed choice chooses to remain in extended employment, documentation of the results of the annual reviews required, of the individual's input into these reviews, and of the individual's (or representative's) acknowledgement that these reviews were conducted. (*Note: Such closures would not meet the requirements for a Status 26 closure.*)

Reference: § 361.47

RS Policy

Documentation is intended to meet, but not exceed, the federal requirements for records of service. RS staff will exercise professional judgment and discretion in determining the nature, scope and extent of relevant information to be included in the record. Information should be limited to that which is necessary and sufficient to show the basis and justification for eligibility decisions, order of selection designations, service decisions and the expenditure of public funds. The IPE should be written with sufficient detail to avoid any misunderstanding about the goal, services and responsibilities. Duplicate and extraneous materials do not need to be kept in the record. Documentation of a decision should be sufficient to show that the decision is reasonable, based on adequate fact and information, correctly applies policy, and that the client participated in the decision. Generally, narratives should address:

- What occurred: (decision made, client reported progress, counseling and guidance occurred, information requested, etc.)
- An explanation of what occurred, if needed.
- A description of the client's involvement in what occurred.
- A brief notation of the next step.

Narratives are necessary only for information that cannot be found in other records. Beyond the minimum documentation requirements, staff should focus time and effort on value-added activities, including counseling and guidance, which lead to quality employment outcomes.

If requested or otherwise necessary, a record of services will be transferred based upon the residence of the individual, the nature of the individual's disability, the availability of services, and the individual's choice. See Section 1 / Part 13.

Effective Date: October 1, 2001

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Data Collection and Use of KMIS

KMIS information is used for program evaluation, state budgeting, and federal reporting. Given the critical nature of these functions, it is essential that accurate and complete data is entered on KMIS. This includes, but is not limited to: accurate entry of application information including the date the application was received; accurate eligibility information and time extensions, when used; complete and accurate IPE development and time extensions, when used; services authorized and paid; status movement; use of comparable benefits; and reasons for case closure. In addition, as a result of the Workforce Innovation and Opportunity Act (WIOA) there are many additional data elements which must be recorded at specific points in the case process. These elements include but are not limited to: barriers to employment; involvement with other workforce programs; credential attainment; measurable skill gains; dates of career services provided; and use of comparable benefits. While implementation of WIOA is ongoing, changes to KMIS data screens have been made, and will continue to be made, to facilitate such data entry. Error reports will be provided so that Counselors and Program Specialists can make corrections prior to submission of federal reports. Each VR staff is responsible to record the required data in a timely, complete and accurate manner. Rehabilitation Managers and Program Administrators have the primary oversight responsibilities to assure that this occurs. The reliability and validity of data reported will be subject to case reviews, performance evaluation monitoring, and audits.

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Section 1 Administrative Issues

Part 12 Documentation Guide

This Documentation guide contains the following sections:

General Requirements
Case File Organization
Referral
Application
Initial Interview
Eligibility
Order of Selection
Comprehensive Assessment
Individualized Plan for Employment
Substantial Counseling and Guidance
Progress Notes
Frequency of Contact
Employment Outcomes (Rehabilitated)
Supported Employment Outcomes
Other Outcomes
Records Retention

IMPORTANT NOTE REGARDING THIS DOCUMENTATION GUIDE

The provision of certain services often requires specific information to be researched and analyzed. The provision of certain services, or services which exceed standard cost caps, may also require exceptions to be approved by the RS Program Administrator for your Region, or by the Administration Office. Policy and procedure on such issues are maintained in the RS Manual, which should be used as a reference by counselors in determining specific documentation requirements for such circumstances.

General Requirements

When viewed as a whole, the case file (record of services) should reflect:

- The quality and substantiality of the services provided by VR.
- Evidence of counseling and guidance provided to promote the client's full involvement and participation in the rehabilitation process, to guide the client in exploration of options, to support and assist with problem solving, to refer to other appropriate services, and to coordinate services.
- Maintenance of appropriate and timely contact with the client, with no undue or unwarranted delays. (See Resources Part 9.)
- Timeliness of services provided with no undue or unwarranted delays. The case file should show evidence that RS Staff responded to individuals in a timely way at each stage of the VR process and that services were delivered as expeditiously as possible.
- Evidence that the Client exercised informed choice throughout every aspect of the VR case. Examples include:

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- Summaries of initial interviews which identify how the client expects to be helped through the provision of VR services and the client's ideas related to employment options.
- Narratives identifying options for vocational objectives, services, or service providers explored in a collaborative partnership between the counselor and the client. Narratives which reflect that the counselor provided information on these subjects and/or that the client conducted his or her own research on these subjects.
- Narratives that reflect information provided or research conducted on the labor market.
- Completion of the "client/Client Guide to Developing the IPE,".
- Completion of KMIS screens related to extension of the timeframe for determining eligibility or developing the IPE. (The KMIS printout must be filed in the service record.)
- Narratives reflecting counseling and guidance provided to help the client consider options and make choices.
- Narratives which provide the counselor's rationale for supporting or denying the client's choice.
- Narratives which document conversations in which the counselor explained state policies related to the parameters of services that can be provided.
- Closure narratives that reflect the client's satisfaction with the job achieved and agreement that additional services are not needed.
- See Section 1/Part 8 of the RS Manual for more information on informed choice.
- That the overall case shows an emphasis on helping the client achieve a high-quality employment outcome.

Any information used to evaluate, or support casework decisions needs to be in the service record. Information must be sufficient to show that decisions were reasonable, were based on adequate fact, were considerate of the individual's circumstances, and correctly applied policy. Unless specified otherwise, documentation may be in the form of narratives, various reports, correspondence, copies of e-mail communications, KMIS printouts, completion of forms, and other sources of information. You must get the client's permission to file TTY printouts.

When necessary to organize and clarify multiple or vague sources of information, the counselor should use the narrative to provide an analysis of the information and a rationale which supports the decisions made. The counselor must provide an explanation of apparent discrepancies. (For example, medical information indicates that the client has difficulty walking across the room without getting out-of-breath. The VO is day care provider. This is an apparent discrepancy in that it is difficult to understand how a person with such a limitation would be able to work as a day care provider. Another example of discrepancies occurs when there are conflicting medical records or when medical and school records are not consistent.)

Narratives are necessary for information that cannot be found or not clearly shown in other records. Narratives are essential to recording the counselor's rationale for actions taken. Generally narratives should address: what occurred; the client's involvement; decisions made; client progress; counseling and guidance; information requested; each client contact; attempted client contacts; other party contacts, such as guardians, agencies, providers, employers; and suggested next steps.

Narrative entries should be dated with the current case status and include the counselor's initials. If other staff add to the narrative, they should sign their full names.

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Care should be taken to assure that other client names aren't inadvertently placed in a service record. For example, if multiple client names appear on an e-mail message to be filed in the service record, black out all names/information that do not relate to the specific client.

Progress notes from vendors (contractors/service providers) need to clearly identify the vendor as the source.

Case File Organization

The information filed in the service record should be organized as follows:

Left section:

- Signed and date stamped application
- Signed and dated IPE and IPE amendments
- Assurance letter for extended ongoing services in supported employment
- PELL information
- Medical and psychological information
- Vocational history and evaluation
- DDS referral and information
- Vocational assessment
- Rehabilitation teacher reports
- Social Security verification
- School IEP

Right section:

- Annual review
- KMIS screen print forms
- Client history (KMIS printout)
- Closure letter
- KMIS printout of closure screens (after implementation of revised screens)
- Case narrative, including determination of eligibility
- KMIS printout of eligibility/OS screens (after implementation of revised screens)
- Functional limitations worksheet
- Initial interview
- Questionnaires (optional)
- Placement information
- Progress reports/service provider reports
- Correspondence, such as referral letters and authorization cover letters
- Release of information forms
- Authorization and payment records
- Materials received reports
- Bid documentation

Counselors have the flexibility to divide each section described above into two parts for ease of handling of lengthy case files.

Information in the case file should be in chronological order, with the most recent information on top.

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Reports of contact should be maintained with the related information. For example, a definitive medical report would be placed with medical information. A specific question answered by a psychologist would be placed with the other psychological information. Every effort should be taken to keep the file folder free of duplicate and unnecessary information. For example, if there are multiple accounts of the same medical information, only one copy is needed. Records received that are not pertinent to the VR case can be destroyed. The counselor should note in the narrative what records are being destroyed and why.

Referral

- For third party referrals, the record of services needs to provide evidence that the counselor responded as soon as possible but not more than 30 days after receiving the referral; evidence that the response included information about VR services and how to apply; copy of response letter in case file; narrative regarding responses if by phone or in person.
- For direct inquiries, the record must provide evidence that the VR staff provided immediate information about how to apply for VR services; evidence that an appointment was scheduled in a timely manner.

See Section 2 / Part 1.

Application

Documentation requirements include:

- Application is signed and dated by the individual (or if appropriate, by the individual's representative), or the individual has otherwise requested services and provided necessary information.
- Application is date stamped when received in the VR office.
- Application is entered on KMIS.
- Evidence that the individual has received the *Handbook of Services*, as shown by the signed application form.

See Section 2 / Part 1.

Initial Interview

In addition to the Rehabilitation Services application form, the following information, to the extent it will impact the VR process or employment, must be collected as part of the application process and recorded in the record of services.

- Applicant's description of the disability and how it impacts the ability to work and to complete daily activities.
- Employment history, such as work performed at home; paid work (employers, dates, wages, duties, job title, reason no longer working there); job duties the applicant can no longer perform; type of work the applicant wants to do; accommodations that may be required.
- Residential, domestic and family information (such as number in family, dependents, typical routine, support available through family, friends and social groups.)
- Medical history, such as names of hospitals, doctors, psychologists, social workers.

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- Current medications.
- Transportation available? Driver's license? Ability to use public transportation, if available.
- Corrections history, including names of probation or parole officers.
- Childcare arrangements.
- Media of choice.
- Does the client have a Ticket-to-Work? Is it available for assignment? Or, if the client has assigned it to another Employment Network (EN), identify the EN.
- How can VR help? What is the applicant's reason for applying?

Documentation must identify the name of the person who conducted the initial interview, if that person was someone other than the VR counselor.

See Section 2 / Part 1.

Eligibility

The determination of an applicant's eligibility for VR services must be based only on the following requirements:

- A determination by qualified personnel that the applicant has a physical or mental impairment.
- A determine by qualified personnel that the applicant's physical or mental impairment constitutes or results in a substantial impediment to employment for that specific individual applicant.
- A determination by the RS VR counselor that the applicant requires VR services to prepare for, secure, retain, or regain employment consistent with the applicant's unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

It is presumed that the applicant can benefit in terms of an employment outcome from the provision of VR services unless there is clear and convincing evidence to the contrary.

Any applicant who has been determined eligible for SSI or SSDI is presumed eligible for VR services and is considered to be an individual with a significant disability. (This means that these individuals are in *at least* Category 2 in the Kansas Order of Selection.)

Related to eligibility, the case file must address the following factors:

- Description of the applicant's primary and secondary impairments. [A physical or mental impairment means: any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological, musculo-skeletal, special sense organs, respiratory (including speech organs), cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine; or any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.
 - Descriptions of impairments are usually found in medical or psychological records and may be enhanced by information in vocational assessments and/or the counselor's narrative description.
 - If the individual has a disability that can be verified by counselor observation or by information provided by the individual or family, they meet this first part of the eligibility criteria. In such cases, Part 1 of eligibility should not be delayed while medical or

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psychological information is gathered. Such information, however, may be necessary to develop an appropriate plan of services.

- If the individual is not receiving SSI/SSDI and does not have an impairment that can be verified by counselor observation or information from the individual or family, then request medical information. The case must show that such requests were made in a timely manner. Delays must be explained in the narrative.
- Documentation must show that existing information was used to the extent available, timely and adequate for eligibility determination. Information used must show the *current* functioning of the individual.
- A description written by the counselor that explains how the applicant's impairment constitutes or results in a substantial impediment to employment for that specific individual. The description should specify the impediment, how it results from the impairment, how it hinders employment, and why it is substantial for the individual. [Substantial impediment to employment means that a physical or mental impairment (in light of attendant medical, psychological, vocational, education and other related factors) hinders an individual from preparing for, entering into, engaging in, or retaining employment consistent with the individual's abilities and capabilities.]
- Documentation from the counselor that explains why the applicant requires VR services to prepare for, secure, retain or regain employment consistent with the applicant's unique strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice. (The counselor must presume that a person who has a disability which has been determined to constitute an impediment to employment can benefit from VR services in terms of an employment outcome unless there is clear and convincing evidence to the contrary.)
- Evidence that an applicant who has already been determined eligible for SSI or SSDI, or who has a Ticket-to-Work, is presumed to be eligible for VR. Notation of how this status was verified is required. Verification of this status may include a Ticket, an SSA award letter, a current check stub, the KMIS interface, or other verifiable evidence. Eligibility should be completed as soon as receipt of benefits is verified.
- Evidence that the eligibility determination was made as soon as possible, but no later than 60 days from the date of application (date stamped date). If the determination was not made within 60 days, there must be documentation of the reason for the delay, and evidence that the applicant agreed to a specific time extension. The KMIS time extension screens must be completed and the KMIS printout filed in the service record. Evidence of the individual's agreement may include a completed and signed form, or a counselor's narrative of a conversation. The extension must be completed, including the applicant's agreement, prior to expiration of the original 60 days.

Order of Selection

Documentation requirements include:

- Completion of the functional limitation's worksheet, including the counselor's rationale for identifying each limitation selected. List services that will address the limitations in terms of employment.
- Appropriate documentation supporting that the individual has a significant or most significant disability.

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- Evidence that the individual was informed of their category designation. This may be conveyed in person or by phone, followed up with the appropriate brief narrative entry. This information may also be conveyed in writing, with a copy placed in the service record.
- Evidence that individuals receiving SSI/SSDI, or individuals with a Ticket, are automatically in at least Category 2.
- Documentation of referrals made on behalf of individuals who are placed on a waiting list. This may be conveyed in person or by phone, followed up with the appropriate brief narrative entry. This information may also be conveyed in writing, with a copy placed in the service record.

See Section 2 / Part 5.

Comprehensive Assessment

- Documentation of any additional impairments and associated substantial impediments to employment that were not described during determination of eligibility and Order of Selection category.
- Information from a strengths-perspective which describes the assets (skills and abilities, interest in working, etc.), and resources the individual brings to the employment arena.

Individualized Plan for Employment

- The IPE and amendments have been signed and dated by the individual (or if appropriate, by the individual's representative) and the counselor. A copy of the original IPE and any amendments have been given to the individual.
- Evidence that the plan was developed as soon as possible, but no later than 90 days from the date of eligibility (Status 10). If the IPE was not signed within 90 days, there must be documentation of the reason for the delay, and evidence that the applicant agreed to a specific time extension. The KMIS time extension screens must be completed and the KMIS printout filed in the service record. Evidence of the individual's agreement may include a completed and signed form, or a counselor's narrative of a conversation. The extension must be completed, including the applicant's agreement, prior to expiration of the original 90 days.
- Narratives which clearly document how the client was involved in developing the IPE. Notes that describe the client's interests and employment goals. Evidence that the individual had informed choice in selecting the vocational objective. Information regarding availability of employment related to the VO. Evidence that the individual had sufficient information regarding alternatives to make informed choices about services and providers.
- The service record must support that the vocational objective is consistent with the assessment of the individual and his/her primary employment factors.
- A narrative discussion of how the services on the IPE address the individual's needs and relate to the individual's vocational objective. (This should result in evidence that all services listed on the IPE are necessary to achieve the employment goal.)
- Identification of the criteria that will be used to evaluate progress.
- Evidence that comparable benefits were considered and used as appropriate.
- IPE amendments are completed whenever a service was added or deleted. IPE amendments are also required whenever the vocational objective is changed. However, no amendment would be required if the individual accepts a job during the placement phase that is different

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than the job listed on the IPE. Such a change should be documented specifically in the closure letter. The letter must be labeled "IPE Amendment."

- Were annual reviews of the IPE conducted? Is there evidence that the individual took part in such reviews?
- Documentation that the individual's progress is regularly updated/reviewed, and that sufficient contact is maintained with the client according to the individual circumstances of the case.
- Documentation of the Ticket-to-Work assignment process and outcome.
- For students receiving special education services, notation that the IPE is consistent with the transition portion of the student's Individualized Education Plan (IEP).

For supported employment cases, the record of services must include:

- Description of the time limited services, not to exceed 18 months, to be provided by VR.
- Description of the ongoing services needed by the individual and identification of the provider of ongoing support. In the event that identification of the source of ongoing services is not possible at the time the IPE is written, a statement explaining the basis for concluding that there is a reasonable expectation that such ongoing services will become available.
- A provision for periodic monitoring to ensure satisfactory progress toward meeting the work goals by the time of transition to extended ongoing services.
- The client's goal for the number of hours to work.
- The criteria for job stabilization. Job stabilization shall be individually determined for each client. This criteria should describe the methodology that will be used to determine when VR funding should cease and ongoing support should take over.
- Projection of the number of hours of job coaching needed for the client to reach stabilization and case closure.

See Section 3 / Part 14.

Substantial Counseling and Guidance

Documentation of substantial counseling and guidance (Service Code 370) must address specific, substantial counseling services provided directly by the VR counselor. These services must be vocational in nature and specifically designed to assist the individual in participating in the rehabilitation process or in reaching an employment outcome.

Documentation must show multiple sessions, and show that issues such as the following were addressed:

- Vocational exploration.
- Career decision-making.
- Establishment of a career path, including short- and long-term goals.
- Self-advocacy in the workplace.
- Development of problem-solving skills.
- Use of community resources related to employment.

Documentation should address outcomes achieved as a result of such counseling and guidance.

See Section 3 / Part 4.

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Progress Notes

Documentation must include identification of client's progress, and interventions or action plans used to address issues or concerns, if any. Progress notes may be found in counselor narratives or in reports from service providers.

Frequency of Contact

Frequency of contact should be determined by individual circumstances and at critical points in the rehabilitation process. As a general rule, contact on a monthly basis is appropriate. More frequent contact should typically happen during assessment for eligibility, IPE development, initiation of services, and when employment begins. Less frequent contact might reasonably occur after the client has stabilized in longer term services, such as when an individual has established good performance in a training program.

If services are interrupted or there is a loss of contact, the reasons must be entered in case narrative. The narrative should also reflect what is being done to resume the rehabilitation process.

Employment Outcomes (Rehabilitated)

Documentation must address the following questions and issues:

- Did the services provided contribute significantly to achieving the employment outcome? (What substantial services were provided? Did the services provided by the agency make it possible for the person to be employed or achieve the specific job they have?)
- Was the employment outcome consistent with the individual's primary employment factors (strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice)?
- Did the individual maintain the employment outcome for an appropriate period of time, but not less than 90 days, necessary to ensure the stability of the employment outcome? (The date when employment began must be clearly identified.)
- Is there evidence that the individual no longer needs VR services?
- Was the employment in the most integrated setting possible, consistent with the individual's informed choice?
- Did the individual and the counselor agree that the employment outcome was satisfactory and the individual was performing well on the job?
- Discussion of the need for post-employment services.
- Evidence of the individual's wage, that the wages/benefits were comparable, that the work was in an integrated setting, and the work was the choice of the client.
- Closure letter is titled IPE Amendment, and specifically states the services provided, individual's dates of employment, wage, benefits, place of employment, views regarding closing the case, appeal rights including Client Assistance Program (CAP) services.

See Section 5 / Part 1 and [Forms Part 42](#).

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Supported Employment Outcomes

In addition to the employment closure requirements described previously, such closures should be based upon the following factors:

- The client was provided appropriate and substantial services in accordance with the IPE.
- The client is in paid employment.
- The client has made substantial progress toward working the number of hours per week specified in the IPE.
- The client's workplace offers opportunities for integration with non-disabled persons (not paid service providers) who may be supervisors, co-workers or customers.
- The community service system has assumed the responsibility for funding and providing the extended ongoing support services necessary to maintain employment.
- The client's performance meets the criteria for job stabilization defined in the IPE. Stabilization must be based on the following factors:
 - The client has reached a maximum level of work performance.
 - The agreed upon hourly work goal has been reached.
 - Job coaching and related support services have decreased to a level necessary to maintain the individual in employment through ongoing support.
 - If the individual is stabilized in employment at a level of hourly work that is less than the goal established on the IPE, the client and counselor agree that the situation may be considered substantial and suitable employment.
- Placement is maintained for at least 90 days after making the transition to extended ongoing services. The ongoing supports being provided are adequate to meet the client's needs with respect to maintaining employment.

See Section 5 / Part 1 and [Forms Part 42](#).

Other Outcomes

- The counselor has provided a rationale for closing the record of services.
- Rationale for ineligibility decisions. If ineligibility was based on severity of disability, was there clear and convincing evidence (based on more than assessments or testing) that the individual is incapable of benefiting from VR services in terms of an employment outcome.
- The client was given a written notice of case closure, which included reference to appeal rights and CAP services.
- The client has been referred to other appropriate services which then are documented in the case narrative.

See Section 5 / Part 2 and Section 5 / Part 3.

Records Retention

Service records will be retained for five years after the closure of the case. Service records containing HIPAA information will be retained for six years.

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At the end of each month and each calendar year, the Administration Office will send the Field Office Records Retention Officers a list of cases closed during that period. These lists should be retained for future reference in determining which files can be destroyed.

At the end of each calendar year, the Field Office Records Retention Officers should prepare a list of records they intend to destroy. This list will be sent to the RS Administration Office Records Retention Officer for approval prior to destroying any records.

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Section 1 Administrative Issues

Part 13 Miscellaneous Administrative Issues

This section contains the following topics:

Kansas Residency
Non-Discrimination
Out-of-State Services
Prior Authorization
Reporting Child Abuse and Neglect
Transfer of Cases
Use of Toll-Free Numbers (in lieu of accepting collect calls)
Acceptance of Verbal/Electronic Signatures

Kansas residency

Consistent with federal regulations, RS may not impose any duration of residence requirements as part of determining eligibility for VR services or that exclude from services any individual who is present in the state. In addition, per a federal directive, RS may not require eligible individuals receiving out-of-state services through an IPE to maintain or verify Kansas residency status.

Non-Discrimination

All services shall be provided without regard to sex, race, age, creed, color, national origin or type of disability.

Out-of-State Services

Prior to including any out-of-state services in an IPE, the counselor must complete an analysis which:

- Identifies the specific rehabilitation need to be addressed by the services.
- Compares the ability of in-state and out-of-state services to meet the identified rehabilitation needs.

See [Forms Part 33 for Out of State Comparative Analysis Worksheet](#).

Before an out-of-state service to be funded by RS is included in the IPE, the Comparative Analysis Worksheet must be completed by the Counselor and forwarded for approval according to the Region's procedures. Each RS Program Administrator will establish a procedure for routing such exception requests through the RS Managers, RS Program Administrator or both. The worksheet indicating final action taken should be filed in the record of services.

If the analysis shows that comparable services are available in-state, the client may choose out-of-state services with the additional cost to be paid by the client. RS Regional Program Administrator approval is not required in this circumstance.

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Prior Authorization

Prior approval/authorization is required before RS will pay for any goods or services. After the IPE is in place (Status 12) and in very limited circumstances, such as medical emergencies when it was not feasible for the client to get prior approval and no other source of funding is available, an exception may be approved. Each RS Program Administrator will establish a procedure for routing such exception requests through the RS Managers, RS Program Administrator or both.

Reporting Child Abuse and Neglect

RS staff that has reason to suspect that a child has been injured as a result of physical, emotional, or sexual abuse or neglect shall report such situations. Reason to suspect means that there is credible evidence or a discrepant or inconsistent history in explaining a child's injury. Reporting is a request for an assessment into the condition of a child. The determination of whether abuse or neglect has actually occurred is the responsibility of DCF or appropriate law enforcement agencies. The report may be made orally and followed by a written report if requested by DCF or law enforcement agencies. Reports should include the name and address of the child, the child's parents or other individuals responsible for the child's care; the child's location; the child's condition, including the nature or extent of the injury; whether the alleged perpetrator has access to the child; and any other helpful information. Reports should be made to DCF or to a law enforcement agency if DCF is not open for business. Reports may also be made to the Child Abuse Hotline at 1-800-922-5330 or the Attorney General's Office at 785-296-2215.

Reference: KSA 38-1522

Transfer of Cases

A record of services may be transferred to another office or counselor with the approval of the RS Regional Program Administrators/Managers for the offices involved. Among the factors to be considered are:

- Residence of the client.
- The nature of the client's disability.
- The availability of services.
- The client's choice.

Prior to requesting a transfer, the transferring counselor must document recent contact with the client, the client's views on the transfer, the client's intention to continue VR services, and the client's new address, phone and contact information. The transferring counselor should also document counseling and guidance provided to the client related to the possibility that all current IPE services may not be available in the new community.

Use of Toll-free Numbers (in lieu of accepting collect calls)

With the availability of the Kansas Department for Children and Families (DCF) toll-free number, 1-888-369-4777 and the toll-free relay center number for persons with speech and hearing impairments, 1-800-766-3777, Rehabilitation Services (RS) will not accept collect calls from clients or applicants.

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PART Miscellaneous Administrative Issues

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Acceptance of Verbal/Electronic Signatures

Due to social distancing and provision of virtual services as a result of the COVID-19 pandemic, physical signatures may not be readily obtainable from clients/students in a timely manner for the provision of services. We have expanded this to allow verbal signatures at this time and will continue to review this allowance.

Email signatures from clients/students will be allowed. Detailed case narratives must accompany such signatures. If a client/student is giving approval through an approval/agreement statement by email, the email must be clear and specific about what document is referenced. If the original request for approval is specific, and then forwarded as part of the approval response, then it is considered part of the record and does not have to be repeated.

Signatures obtained by fax, photo, electronic keypad, etc. are considered to be physical signatures and not subject to the requirements applicable to verbal or virtual/email signatures.

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PART Internal Controls

SECTION NO. 1-14
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Section 1 Administrative Issues

Part 14 Internal Controls

RS will implement a wide range of internal controls to assure the integrity of fiscal, program, compliance, and service documentation requirements. Internal controls are designed to assure quality, prevent deficiencies in these critical areas, promote accountability, improve operational efficiency and implement corrective actions if necessary. Training of staff is an essential component of the RS internal control practices. RS will also consult with technical assistance centers and/or RSA to assure that the agency implements best practices consistent with Rehabilitation Act requirements.

Internal control practices implemented by RS include:

- Comprehensive case (service record) reviews.
- Review of expenditures.
- Participation in the state's single audit process.
- Monitoring compliance with timeliness standards.
- Performance evaluation procedures.
- Monitoring achievement of outcomes.
- Service authorization policies requiring tracing of expenditures from the IPE, to service authorization (purchase order), to verification of receipt of goods and services, invoicing, and payments.

RS also complies with the accounting and purchasing requirements implemented by the Department for Children and Families (the DSA) and the Kansas Department of Administration. The DSA fiscal unit collaborates with RS to assure the tracking of VR funds, including the Pre-ETS set-aside.

Internal control practices/findings are discussed and evaluated regularly at management team meetings.

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SECTION Administrative Issues
PART Credential Attainment & Measurable Skill Gains

SECTION NO. 1-15
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Section 1 Administrative Issues

Part 15 Credential Attainment & Measurable Skill Gains

The Workforce Innovation and Opportunity Act (WIOA) Common Performance Measures, outlined in Section 116, for Credential Attainment (CA) and Measurable Skill Gains (MSG) rates are reported to the Rehabilitation Services Administration (RSA) quarterly, as they are achieved. VR Counselors will record CAs and MSGs that occur in conjunction with a training goal agreed to in the Individual Plan for Employment (IPE). Third party documentation of CA and MSGs must be included in the client record in conjunction with updating the appropriate documentation in KMIS.

DEFINITION:

1. **Participant:** In accordance with 34 C.F.R § 361.150(a)(1), a “Participant” is a reportable individual who has an approved and signed Individualized Plan for Employment (IPE) and has begun to receive services.
2. **Program Year:** The Program Year (PY) is the reporting period for WIOA performance. It begins on July 1 and ends on June 30. For example, PY 19 is July 1, 2019 to June 30, 2020.
3. **Measurable Skills Gains (MSG):** MSG are milestones that participants achieve on the path toward attainment of an educational credential or employment training goal as indicated in an Individualized Plan for Employment (IPE).
4. **MSG Rate:** The percentage of program participants who, during a program year, are in an education or training program that leads to a recognized credential or employment and who are achieving documented academic, technical, occupational, or other forms of progress towards such a credential or employment.
5. **Credential Attainment (CA):** Credential Attainment is a WIOA Common Performance Measure (CPM) that documents the successful completion of an industry recognized diploma, degree, certificate, certification or licensure during participation in **or** within one year after exit from the program.
6. **CA Rate:** The percentage of those participants enrolled in an education or training program (excluding those in On-the-Job Training (OJT) and customized training) who attained a recognized post-secondary credential or a secondary school diploma, or its recognized equivalent, during participation in, or within one year after exit from, the program. *Note: OJT and customized training cannot be counted toward CA rate but can be an MSG.*
 - a. A participant who has attained a secondary school diploma or its recognized equivalent is included in the percentage of participants who have attained a secondary school diploma or its recognized equivalent only if the participant also is employed or is enrolled in an education or training program leading to a recognized postsecondary credential within one year after exit from the program.

REPORTING CA:

The Credential Attainment Rate measures attainment of two types of credentials: either a recognized **postsecondary credential**, or a **secondary school diploma or its recognized equivalent**. A credential should be recorded as soon as it is achieved, and the counselor has the documentation of the CA. Appropriate documentation should be inputted into KMIS and hard copy filed in case file.

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KRS accepts third party verification of Credential Attainment from entities including:

1. State Educational Agency, including Public Career and Technical Education Facilities
2. Higher Education Institutions and programs eligible to participate in the Federal student financial aid programs. This includes community colleges and universities both public and private and programs that are FAFSA eligible.
3. Higher education institutions that are formally sanctioned or chartered by the governing bodies of Native American Tribes.
4. A professional industry, employer organization or product manufacturer/developer using a valid reliable assessment of an individual's knowledge, skill and abilities. Examples include Microsoft It Professional (MCITP), National Institute for Metalworking Skill, Inc., Machining Level I credential.
5. The Office of Apprenticeship (State and Federal)
6. A public regulatory agency which awards a credential or license that is necessary to obtain employment in a particular profession or occupation. For example, licenses awarded by the Kansas State Board of Technical Professions (<https://www.ksbtp.ks.gov/>) or the Kansas State Board of Nursing (<https://ksbn.kansas.gov/>).
7. Programs approved by the Department of Veterans Affairs to offer education benefits
8. Job Corps, which issues certificates for completing career training programs that are based on industry skills standards and certification requirements

When documenting credentials:

- Credentials attained should correspond to the training goals identified on the IPE even if comparable benefit.
- Input Enrollment date.
- The date of Credential Attainment should correspond to the date the credential was awarded or the last date of attendance (if credential award date is not available).
- Record of Credential Attainment should be documented on the Tracking Education Completion Page in KMIS (Figure 1.1) as the credentials are achieved.
- Credentials can be attained during program participation or within one year following exit from the program. If a Counselor receives verification of a credential attained post-exit, notify KMIS Data through supervisory channels.
- Credential Attainment includes the following:

Types of Accepted Credentials	Example
Secondary School diploma or recognized equivalent	<ul style="list-style-type: none"> • High School Diploma • GED • High School Equivalency Test
Associate Degree	<ul style="list-style-type: none"> • AS in Marketing
Bachelor's Degree	<ul style="list-style-type: none"> • BS in Social Work
Graduate Degree	<ul style="list-style-type: none"> • MS Rehabilitation Counseling

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<p>Occupational Licensure</p> <p>License refers to a credential awarded by a licensing agency based on predetermined criteria. Occupational Licensure is awarded by a public regulatory agency that awards a credential or license necessary to obtain employment in a particular profession or occupation. The criteria for licensure may include some combination of degree attainment, certifications, certificates, assessment, apprenticeship programs, or work experience. Licenses are time-limited and must be renewed periodically.</p>	<ul style="list-style-type: none"> • Registered Nurse • Barbering License
<p>Occupational certificate, including Registered Apprenticeship and Career and Technical Education educational certificates</p> <p>Occupational certificates are awarded by an education institution based on completion of all requirements for a program of study, including coursework and test or other performance evaluations.</p>	<ul style="list-style-type: none"> • Welding Certificate • Plumbing Registered Apprenticeship
<p>Occupational certification</p> <p>Occupational certification is a credential awarded by a certification body based on an individual demonstrating through an examination process that he or she has acquired the designated knowledge, skill, and abilities to perform a specific job. The examination can be either written, oral, or performance based.</p>	<ul style="list-style-type: none"> • Automotive Service Excellence Certification • Job Corps – Career Technical Training Certification
<p>Other recognized certificates of industry/occupational skills completion sufficient to qualify for entry-level or advancement in employment</p>	<ul style="list-style-type: none"> • Other

WHO IS EXCLUDED FROM CA CALCULATIONS?

- Participants who exited a program and who were enrolled in the following are excluded from the credential attainment rate:
 - OJT
 - Customized training

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- Participant who is enrolled in a special education program, under an Individualized Education Program (IEP), leading toward a Certificate of Completion.
- Participants not enrolled in education or training leading to a recognized credential.

Examples that Do NOT Meet the WIOA Definition of Credential
Special Education Certificate of Completion
Work/Career Readiness Certifications (workforce development boards)
Completion of Orientation and Mobility Training
OSHA 10, CPR, First Aid – Other common job-related safety and health hazard training certifications
VRS sponsored On-the-Job Training (OJT) or Customized Training
Transportation skills attainment
Soft skills training
General computer and security certificates
Comprehensive transition programs (CTP) that may not lead to a recognized post-secondary credential

Note: Certificates awarded by workforce development boards (WDBs), and work readiness certificates are not included in this definition because neither type of certificate is recognized industry-wide nor documents the measurable technical or industry/occupational skills necessary to gain employment or advance within an occupation. Certificates must recognize technical or industry/occupational skills for the specific industry/occupation rather than general skills related to safety, hygiene, etc., even if such general skills certificates are broadly required to qualify for entry-level employment or advancement in employment.

REPORTING MSG:

Measurable Skill Gains (MSG) are interim progress participants achieve on the path toward attainment of an educational credential or employment training goal. An MSG should be recorded as soon as it is achieved, and counselor has documentation. Appropriate documentation should be inputted into KMIS and a hard copy filed in case file.

Documenting MSG:

- An MSG shall only be recorded if training, including OJT, is listed as a goal in the IPE even if comparable benefit.

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- Input enrollment date. The MSG Enrollment date entered should correspond to the actual enrollment date of the education or training program (or IPE date if already enrolled at time of initial IPE).
- MSG is not exit based.
- Once documented, the Tracking Education Completion Page in KMIS (Figure 1.1) should be updated and the MSG recorded as an Educational Goal Outcome or Skill Gain, as appropriate. The MSG Date entered (Figure 1.3) should correspond to the date the MSG was completed, and file in hard copy file.
- The MSG description should be recorded (Figure 1.3) as one of the five major categories, described below:

Five Types of Measurable Skill Gains

To receive an MSG, one of the following needs to occur:

1. Educational Functioning Level (EFL) Gain (refer to [Adult Basic Education](#) for assistance in this MSG) is the documented achievement of at least one educational functioning level of a participant who is receiving instruction below the postsecondary education level. An EFL can be documented in three ways:
 - a. Documenting an EFL gain through a pre and post-test showing the participants measured progress (such as an increased Reading Level measured through a TABE, ABLE, or BEST);
 - b. Documenting an EFL gain while enrolled in adult high school programs that lead to a secondary school diploma or its recognized equivalent may measure and report educational gain through the awarding of credits or Carnegie units; or
 - c. Documenting an EFL gain for participants who exit a program below the postsecondary level and enroll in postsecondary education or training during the program year. This applies to participants enrolled in a basic education program. *Note: Concurrent enrollment in post-secondary training and adult education does not meet the definition of increase in educational functioning level.*
2. Secondary High School Diploma or Recognized Equivalent:
 - a. Documented achievement of High School diplomas and General Education Diplomas (GED) awarded by secondary schools as well as Adult Education Programs. *Note: Special Education certificates are not considered a Credential, therefore MSG are not applicable and should not be recorded.*
3. Secondary and Postsecondary Transcript or Report Card
 - a. Secondary Education
 - i. Successful completion of a semester in a secondary school program: This includes only students who are seeking a high school diploma or General Education Diploma (GED). VRS should review the participant's transcript/report card to ensure that the student has successfully passed all courses. Passing refers to the minimum grade required to receive credit hours for completion of a course. The minimum grade required to pass a course with the Kansas Department of Education is a "D." If the report card indicates the participant dropped out of school, was removed from the institution, or any other conditions that indicate removal on academic or conduct grounds, then the individual does not receive an MSG.
 - b. Postsecondary Education
 - i. Full-time students must complete at least 12 hours/credits for one semester at a 2.0 GPA or higher.

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- ii. Part-time students must complete at least 12 hours/credits over the course of two consecutive semesters at a 2.0 GPA or higher. (i.e., 6 credits received during the Fall 2017 semester and 6 credits received during the Spring 2018 semester) For a part-time student, the achievement of a MSG occurs in the program year that the 12th credit hour is obtained.
- iii. Other recognized education program in which the participant is enrolled including, but not limited to, semesters quarters, and clock hours for the calculation of credit hours when they achieve the equivalent of this MSG.
- 4. Employer based training milestone achieved by satisfactory performance:
 - a. Examples include an apprenticeship program or OJT. *Note: Pre-Employment Transition Services Work Based Learning Experiences are excluded from this measure.*
 - b. Documentation includes progress reports by the employer/trainer validating the skills attained by the participant. Must use KRS forms where applicable.
 - i. Progress reports may include training reports on milestones completed as the individual masters the required job skills, or steps to complete an OJT or apprenticeship program. Increases in pay resulting from newly acquired skills or increased performance also can be used to document progress.
- 5. Skills Progression by completion of occupational exam or trade-related benchmarks:
 - a. Documentation includes exam results indicating a passing score on a certification or licensure exam. Successful passage of an exam that is required for a particular occupation, or progress in attaining technical or occupational skills as demonstrated through a trade-related benchmark such as knowledge-based exams.

Types of Accepted MSG	Example
1. Educational Functioning Level (EFL)	<ul style="list-style-type: none"> • Increased Reading level from 8th grade to 9th grade documented by TABE Pre and Post Test
2. Secondary High School Diploma or its Recognized Equivalent;	<ul style="list-style-type: none"> • High School Diploma • High School Equivalency Test • GED
3. Secondary and Postsecondary Transcript or Report Card	<ul style="list-style-type: none"> • Secondary Report Card (passing semester) • Postsecondary Transcript (12 credits)
4. Training Milestone Achieved by Satisfactory Performance	<ul style="list-style-type: none"> • OJT Successful Completion • Registered Apprenticeship Progress Report
5. Skills Progression	<ul style="list-style-type: none"> • NCLEX Exam Results • HVAC Exam Results

WHO IS EXCLUDED FROM MSG CALCULATIONS?

- Participants not enrolled in education or training leading to a recognized credential or employment.
- Participant who is enrolled in a special education program, under an Individualized Education Program (IEP), leading toward a Certificate of Completion. Do not enroll them for either MSG or Credential Attainment.
- Potentially Eligible (PE): Students with disabilities receiving Pre-Employment Transition Services (Pre-ETS).

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Examples that Do NOT Meet the Definition of a WIOA MSG

Yearly progression in Special Education while working toward a Certificate of Completion

Transportation Skill Attainment (e.g., Mastering use of public transportation)

Mastery of Orientation and Mobility Skills

General skills gained as part of the Individualized Plan for Employment (IPE) for activities that do not relate to training and education

Vocational Evaluation Assessments and Aptitude Tests

Documentation of attainment of Microsoft Office skills in JAWS

Soft skills training

Vocational Rehabilitation Counselors are responsible for ensuring the following items are completed:

- Input all required information on tracking education completion page (Figure 1.1), education/training page and measurable skill gains page in KMIS (Figure 1.3)
- Document an educational or training goal in the IPE to list all necessary training and education services that leads to a recognized secondary or postsecondary credential or employment before inputting Credential Attainment and MSG data into KMIS (Figure 1.3).
- Education information is complete, accurate, and up to date in KMIS on Tracking Education Completion Page (Figure 1.1). *Note: Highest educational accomplishment in the Tracking Education Completion page (Figure 1.1) at Plan must be entered prior to the first IPE to reflect the participant's highest level of education completed at the time of IPE.*
- For a new Educational Goal, the "Begin Date" is the date that the participant enrolls in education or employment training after the IPE is created. *Note: If the individual was already enrolled in an education or training program leading toward a postsecondary credential or employment PRIOR to the development of the IPE, the "Begin Date" of that Educational Goal should be the same as the IPE date.*
- When a MSG is achieved, VRS shall:
 - Obtain the documentation to confirm successful completion.
 - Record in KMIS (Figure 1.3) and file in hard copy case file *Note: Report MSG attainment date accurately by inputting the actual "Skill Gain Date" in the MSG record. Data should be entered as soon as a MSG is attained and documentation has been received.* Once documents are received, update the Measurable Skills Gain record in the applicable Educational Goal by entering the "Skill Gain Date". *Note: MSG should be counted using the date on which they occur, not the date on which they are recorded, or documentation is received.*
 - Document MSG in case notes to provide specific details about the participant progress and the reason for the update to the MSG.
 - Ensure Tracking Education Completion page (Figure 1.1) and MSG (Figure 1.3) are completed before providing support for the next service.

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IMPORTANT REMINDER: Although it is highly recommended that MSGs are recorded as soon as it is attained and documentation has been received or within 3 days, VRS staff should make it a common practice to ensure that, on a monthly basis, all MSGs are recorded.

Note: VRS shall be aware of the educational and training status of all participants at the time of initial enrollment, during participation and at closure.

- Credential Attainment:
 - When the participant enrolls in an education or training program that leads to a credential, document enrollment and in the IPE even if comparable benefit;
 - When the participant achieves a credential,
 - Complete all MSG information as stated above
 - Update the applicable Educational Goal with the “Actual End Date”, “Outcome”, “Degree/Certificate Earned”, and “Degree/Certificate Title”.
 - Documentation shall be recorded in KMIS and hard copy case file.
- Closure:
 - Complete the Forms [Closure Checklist Part 42](#) to ensure all information is in KMIS and documentation in the case file prior to closing the case.
 - Tracking Education Completion page (Figure 1.1) information in KMIS is complete and accurate for each participant who is closed in competitive integrated employment or closed unsuccessfully.

Quality Assurance

- On a quarterly basis, monitor the number of data entries for CA and MSG into KMIS. This will be sent out to the regions for the statewide number of CA’s and MSG to provide a reminder to complete the data entries.
- Maintain an FAQ of questions, with answers, related to MSG and CA.
- Quality Assurance will be monitored through case reviews of random sample of pulled files to ensure include questions to determine the data entry is correct for CA and MSG compliance. Review results will be documented in QA report and information provided to VRS, Rehabilitation Managers, and Program Administrators.

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Figure 1.1

EDUCATION COMPLETION DATES

```
*****
RSIPES05                KANSAS REHABILITATION SERVICES                RSIPEM20
USERID                  INDIVIDUAL PLAN FOR EMPLOYMENT                January 25, 2021
037F                   TRACKING EDUCATION COMPLETION                00:00:01 AM

CLIENT: JOHN           J JINGLEHEIMER           AMEND: XX CSLD: XXXX SSN: xxx-xx-xxxx

LEVEL OF EDUCATION - ENTER DATES AS: MM/DD/YYYY
HIGH SCHOOL DIPLOMA:                DATE:  __ / __ / ____
HIGH SCHOOL EQUIVALENCY (GED):      DATE:  __ / __ / ____
SPECIAL ED CERTIFICATE OF COMPLETION:  DATE:  __ / __ / ____
VOCATIONAL/TECHNICAL LICENSE (NON-DEGREE):  DATE:  __ / __ / ____
VOCATIONAL/TECHNICAL CERTIFICATE (NON-DEGREE):  DATE:  __ / __ / ____
COMPLETED SOME POSTSECONDARY NO DEGREE/CERTIFICATE):  (X)  -
ASSOCIATES DEGREE:                DATE:  __ / __ / ____
BACHELOR'S DEGREE:                DATE:  __ / __ / ____
MASTER'S DEGREE:                  DATE:  __ / __ / ____
GRADUATE (PH.D., ED.D., J.D., M.D. ETC):  DATE:  __ / __ / ____
PARTICIPANT COMPLETED/ENDED EDUCATION/TRAINING PROGRAM LEADING TO
  RECOGNIZED POSTSECONDARY CREDENTIAL/EMPLOYMENT:  DATE:  __ / __ / ____
OTHER RECOGNIZED CREDENTIAL:        DATE:  __ / __ / ____
                                     PRESS ENTER TO CONTINUE

F1 =          F2 = NEXT          F3 =          F4 =          F5 =
F6 =          F7 =              F8 =          F9 = SUB MENU  F10= MAIN MENU
*****
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Figure 1.2

EDUCATION

```
*****
RSIPES04                KANSAS REHABILITATION SERVICES                RSIPEM14
USERID                  INDIVIDUAL PLAN FOR EMPLOYMENT                January 25, 2021
037F                    EDUCATION/TRAINING (SCREEN 1 OF 2)                00:00:01 AM

CLIENT: JOHN           J JINGLEHEIMER           AMEND: xx   CSLD: xxxx
DATE COMPLETED ON:   xx/xx/xxxx   COMPLETED BY: <counselor name>
DATE ORIGINAL IPE COMPLETED:  xx / xx / xxxx

HIGHEST GRADE COMPLETED AT APPLICATION (GRADES 1-12)
NO GRADES COMPLETED?                                (X)  _

IS EDUCATION A GOAL ON HIS/HER IPE? (REQUIRED FOR ENROLLMENT DATES) (Y/N)  _

ENROLLED IN SECONDARY EDUCATION:
INDIVIDUAL IS ENROLLED IN SECONDARY EDUCATION AT OR ABOVE THE
9TH GRADE LEVEL?                                     (Y/N)  _
ENROLLMENT DATE IN SECONDARY EDUCATION:              (MM/DD/YYYY)  _ / _ / _
INDIVIDUAL IS ENROLLED IN A RECOGNIZED SECONDARY EQUIVALENCY
PROGRAM AT OR ABOVE THE 9TH GRADE LEVEL?             (Y/N)  _
ENROLLMENT DATE IN RECOGNIZED SECONDARY:             (MM/DD/YYYY)  _ / _ / _
PRESS ENTER TO CONTINUE

F1 =                F2 = NEXT                F3 =                F4 =                F5 =
F6 =                F7 =                F8 =                F9 = SUB MENU      F10= MAIN MENU
*****
```

```
*****
RSIPES04                KANSAS REHABILITATION SERVICES                RSIPEM15
USERID                  INDIVIDUAL PLAN FOR EMPLOYMENT                January 25, 2021
037F                    EDUCATION/TRAINING (SCREEN 2 OF 2)                00:00:01 AM

CLIENT: JOHN           J JINGLEHEIMER           AMEND: xx   CSLD: xxxx
DATE ORIGINAL IPE COMPLETED:  xx / xx / xxxx

* PLEASE NOTE:  WHEN ENTERING DATES ON THIS SCREEN THEY MUST BE ON
OR AFTER THE DATE THE ORIGINAL IPE WAS COMPLETED AND
MUST BE A GOAL ON HIS/HER IPE

ENROLLED IN A POSTSECONDARY EDUCATION PROGRAM THAT LEADS TO A
CREDENTIAL OR DEGREE FROM AN ACCREDITED INSTITUTION OR PROGRAM? (Y/N)  _
ENROLLMENT DATE:              (MM/DD/YYYY)  _ / _ / _

ENROLLED IN A CAREER OR TECHNICAL TRAINING PROGRAM? (Y/N)  _
LEADS TO A RECOGNIZED POSTSECONDARY CREDENTIAL? (Y/N)  _
ENROLLMENT DATE:              (MM/DD/YYYY)  _ / _ / _

PRESS ENTER TO CONTINUE

F1 = PREV SCRIN    F2 = NEXT                F3 =                F4 =                F5 =
F6 =                F7 =                F8 =                F9 = SUB MENU      F10= MAIN MENU
*****
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Figure 1.3

MEASURABLE SKILL GAIN

```
*****
RSKP2000          KANSAS REHABILITATION SERVICES          RSRDEM01
USERID           INDIVIDUAL PLAN FOR EMPLOYMENT          January 25, 2021
037F             MOST RECENT DATE OF MEASURABLE SKILL GAIN 00:00:01 AM

CLIENT: JOHN          J JINGLEHEIMER          CSLD: XXXX          SSN: XXX-XX-XXXX
DATE ORIGINAL IPE COMPLETED:  XX / XX / XXXX

ADULT ED EDUCATIONAL FUNCTIONING LEVEL:
  (TEST RESULTS/CREDITS AWARDED)          DATE:  00 / 00 / 0000

SECONDARY SCHOOL DIPLOMA OR RECOGNIZED EQUIVALENT:          DATE:  00 / 00 / 0000

SECONDARY AND POST-SECONDARY TRANSCRIPT/REPORT CARD:          DATE:  00 / 00 / 0000

EMPLOYER BASED TRAINING MILESTONE ACHIEVED BY SATISFACTORY
  PERFORMANCE: (OJT, APPRENTICESHIP, ETC.)          DATE:  00 / 00 / 0000

SKILLS PROGRESSION BY COMPLETION OF OCCUPATIONAL EXAM
  OR TRADE-RELATED BENCHMARKS:          DATE:  00 / 00 / 0000

                                           PRESS ENTER TO CONTINUE
F1 =          F2 = NEXT          F3 =          F4 =          F5 =
F6 =          F7 =          F8 =          F9 = SUB MENU  F10 = MAIN MENU
*****
```