

Direct Hire Documentation



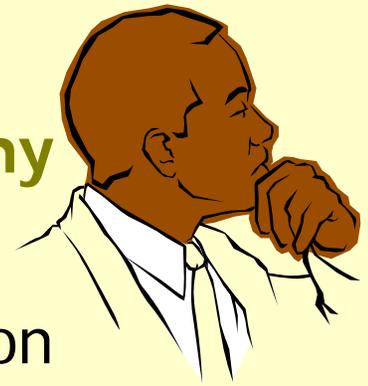
Presented By:

Greg McMahon

Robin Wood

Beth Aura Miller

The logo for Direct Hire Documentation (DDS) features the letters "DDS" in a bold, blue, sans-serif font. The logo is positioned on a white rectangular background with a thin black border on the right side.



What is Direct Hire Documentation and why do we need to do it?

CT's waivers have always required documentation of any supports and services provided or funded by DDS. The documentation needs to match the person's Individual Plan (IP) and the expectations of the person and their Personal Support Team.

In order to receive funding from the federal government the state must be able to demonstrate that we are doing what we say we will do in each persons IP



WHAT'S NEW?



- Consistency in Timesheets
 - The FIs will be using the similar formats
- Documentation will be on the timesheet that reflects the IP Action Plan
- Employees will be clearer about their responsibilities and they will document their supports weekly on their timesheets



WHAT'S NEW?



- Employers will have documentation at their fingertips – on the timesheet!
- Easier to monitor progress
- Provides consistent documentation for case managers and brokers
- FIs will have back-up documentation of progress



How Will Direct Hire Documentation Work?



- Each direct hire staff will be required to read the **IP Actions Plan** of the person they support
- They will need to know and understand what outcomes in the Action Plan section (IP.5) of the IP that they are responsible for supporting
- Staff will enter comments on the bi-weekly timesheet of what activities they did with and for the person to support the individual's outcomes that are in their IP



Sample IP.5

State of Connecticut
Department of Developmental Services
Individual Plan

IP.5 Action Plan

Name: John Doe	DDS# 1234
-----------------------	------------------

IP.5 - Action Plan

Issues or Needs (Why is this Important? Current Status?)	Desired Outcome (What Do You Hope to Accomplish?)	Actions and Steps	Responsible Person(s)	By When
1. John has recently moved into a new community, He knows few people there	1. John will meet new people in his local community and expand his circle of support	1A: John will join the local gym and	John and Alice	ongoing
		1B: workout there 2 times per week		
		1C: John will eat breakfast at O'Hares on Mondays		
		1D: John will participate in community		
		1E: events, activities, and town meetings		

Issues or Needs (Why is this Important? Current Status?)	Desired Outcome (What Do You Hope to Accomplish?)	Actions and Steps	Responsible Person(s)	By When
2. John has moved into his own apartment for the first time and would like to learn to pay his bills	2. John we be able to balance his own checkbook and pay his bills independ- ently	2A: John will meet with Money Bank to learn	John, Money Bank, Alice	1/1/10
		2B: banking skills 2 times per month for three		
		2C: months	John, Alice	4/1/10
		2D: After 3 months John will pay bills with		
		2E: Alice's Support		

Issues or Needs (Why is this Important? Current Status?)	Desired Outcome (What Do You Hope to Accomplish?)	Actions and Steps	Responsible Person(s)	By When
3.	3.	3A:		
		3B:		
		3C:		
		3D:		
		3E:		



BIWEEKLY EMPLOYEE TIME SHEET (see reverse for instructions)

EMPLOYEE NAME Alice Jones							PHONE # 555-1111					SERVICE CODE (See back)			
CONSUMER NAME John Doe							PHONE # 555-2222					PAY PERIOD DATES 9/21/09-10/4/09			
	Mon	Tue	Wed	Thur	Fri	Sat	Sun	Mon	Tue	Wed	Thur	Fri	Sat	Sun	Total Hours Below
Date	9/21				9/25			9/28				10/02			
Time In	4pm				4pm			4pm				4pm			
Time Out	8pm				8pm			8pm				8pm			
Subtotal	4				4			4				4			
Time In															
Time Out															
Subtotal															
Total Hours	4				4			4				4			16

Bi-weekly IP Outcome progress note: What did you do for the hours you worked? Enter comments below (required):

I supported John to go to the following community based activities this period, shopping, square dancing, and to the town hall meeting

John and I met with Mary Debanker on October 2nd. I reviewed his check book with him on the 25th and the 2nd and assisted him in writing checks while on shopping trips for groceries and clothing.

MAIL TO: Carol Agria, Sunset Shores FI Services
67 Bridgeport Ave.
Milford, CT 06460-3931

FAX: Local :
203-882-1339

Toll Free :
1-866-390-0149

Email PDF file to:
pavroll@sunsetshoresfi.com

By Signing below, I certify that I have provided services to the consumer during the time reported on this timesheet.

By Signing below, I certify the consumer has received the supports as reported on this timesheet.

EMPLOYEE SIGNATURE

Date

EMPLOYER SIGNATURE

Date



Part I: Employee Information

Employee FIRST Name											
A	L	I	C	E							
Employee LAST Name											
J	O	N	E	S							
Employee Number:						Pay Period Ending Date					
0	0	0	0	0		10	02	09			

Part II: Employer Information

Employer FIRST Name											
J	O	H	N								
Employer LAST Name											
D	O	E									
Employer Number:						DDS Number:					
0	0	0	0	0		0	0	0	0	0	

Service Code Key	Ind. Home Support: IHS	Individual Day Support: IND	Adult Companion: COMP
	Independent Broker: INDB	Personal Support: PER	Respite: Flat Rate (24hr): RES Respite Hourly RES2

Part III: Timesheet YOU MUST OBTAIN YOUR EMPLOYER'S SIGNATURE BELOW

WEEK 1	Date Mo/Day	Service Code	Time In		Time Out		Time In		Time Out		Total Hrs
			AM	PM	AM	PM	AM	PM	AM	PM	
Saturday											
Sunday											
Monday	9 21	I H S	4	00	8	00					4
Tuesday											
Wed											
Thursday											
Friday Ends Midnight	9 25	I H S	4	00	8	00					4
WEEK 2											
Saturday											
Sunday											
Monday	9 28	I H S	4	00	8	00					4
Tuesday											
Wed											
Thursday											
Friday Ends Midnight	10 02	I H S	4	00	8	00					4

PROGRESS NOTES: *Must be related to the outcomes (goals) documented on the date(s) of service above.*
 I supported John to go to the following community based activities this period, shopping, square dancing, and to the town hall meeting
 John and I met with Mary Debanker on October 2nd. I reviewed his check book with him on the 25th and the 2nd and assisted him in writing checks while on shopping trips for groceries and clothing.

By signing below, I certify that I provided the services to the consumer for the times recorded on this timesheet.

_____	_____
Employee Signature	Date

I certify that the consumer has received the hours of service recorded on this timesheet.

_____	_____
Employer Signature	Date





What Happens Next to the Timesheet?

- Timesheets are faxed to the FI at the end of each pay period to assure payment to the employee
- Employers need to keep copy of Timesheets
 - Keeps documentation of employee support of the IP and can be used for 6 month and yearly review
 - Keeps running documentation of hours of support which can be compared to the FI quarterly report



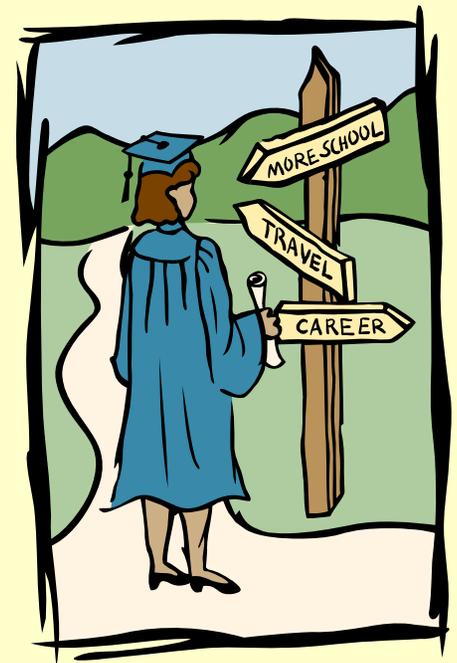


What Happens Next to the Timesheet?

- FI maintains a file of each employee's timesheet
- CM/Brokers can access Timesheets, if not available from the employer, from the FI to support any documentation needed to reflect waiver services for 6 month and yearly reviews



What Next??



- Case Managers complete online training
- Fact Sheet distributed, by the FI, to families/individuals and employees
- Begin December 1, 2009





Questions??

Contact your Regional Self Determination Director:

South – Greg McMahon – 203-294-5063

West – Beth Aura Miller – 203-805-7430

North – Robin Wood – 860-263-2449

