

## TRIAL WORK EVALUATION REPORT (TWER)

### General Instructions

The expectation of the TWE is to use the information provided by the assessment to help determine eligibility for VR services and plan for future service.

- Type or handwrite responses using blue or black ink.
- Answer all questions. If a question or section does not apply, enter "Not Applicable" and explain why.
- Answers to questions should be written in a narrative format in clear, positive, descriptive English with minimal bullet points.
- The narrative summaries must indicate how and when the information was collected. For example, by discussion with the consumer's supervisor, or by direct observation of the consumer performing a skill.
- Before submitting for payment, review the document to ensure all questions have been answered.

### Person Identification Information

Last name:	First name:	Middle name:
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Street address: (include apartment and room number, if any)

City:	State:	ZIP Code:
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Primary contact number ( )	Secondary contact number: ( )	Email address:
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Does the consumer have a legal representative? ☐ YES ☐ NO

If yes, enter the name of the person:

### Alternate Contact Person's Information

Alternate contact person's name:	Alternate contact person's email address:
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Alternate's primary contact phone number: ( )	Alternate's secondary phone number: ( )
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### Trial Work Information

Trial Work Assessment Site:

**Note: All placements must be in a competitive integrated work setting.**

Address:

Assessment Date(s):

Assessment Schedule:

Person Job Position(Title):

Total Number of hours person worked during this assessment:

Daily:	Weekly:	Hourly Rate: \$
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		(Wage)										
Average Number of on-site job coaching hours required by the person: hrs/ daily                    hrs/ weekly												
Responsibilities of job position:												
Expectations of Employer:												
<b>General Considerations</b>												
<i><b>Do the following factors interfere with the person's:</b></i>	<i><b>Medication</b></i>			<i><b>Vision</b></i>			<i><b>Hearing</b></i>			<i><b>Mobility</b></i>		
	Y	N	N/A	Y	N	N/A	Y	N	N/A	Y	N	N/A
Ability to attend work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Complete work tasks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concentrate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Operate heavy machinery?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safely move through the work environment as needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Medication management (if relevant)</b> If this person takes medication, describe the extent to which this person is able to self-manage taking medication or the supports in place to help this person take medication. To what extent does this person perceive the value of taking medication? Does the medication affect this person more at certain times than others? What implications does this information have for potential job matches and/or potential job supports?												
<b>Behavior challenges (if applicable)</b> Describe in detail any behaviors that have been labeled as challenging. What specifically occurs when this person engages in the behavior? What typically happens before the behavior occurs? What happens after the behavior occurs? Are there specific, proven support strategies that have been effective in helping the consumer reduce or avoid the behavior? What strategies should be avoided? Should certain environments be avoided? What implications do this information have for potential job matches or potential job supports for this person or the employer?												
<b>Work and Life Experiences (Baseline/ First Report Only)</b>												

***Life experiences:***

Describe briefly this person's chronological life experiences (for example school, marriage, moving) and how these may impact occupational choices, work interest and support needs.

***Work history:***

Other than educational experiences, describe this person's work history in detail. Describe the job duties, hours, and circumstances for this person's leaving the job. Based on what is known about this person, did the jobs appear to be a good match for this person, and why or why not? Based on these work experiences, what has been learned about this person's skills, interests, and potential support needs for new employment?

**Learning and Performance Characteristics**

***Physical environment***

Describe the types of physical environments (indoors or outdoors) in which this person is most comfortable and functions the best, and the relevance of this information to potential job matches or support strategies for this person or the employer. Are there specific concerns about any potential physical environment? Are there specific physical environments that should be avoided because of potential health or behavioral problems?

***Cultural environment:***

Describe the types of cultural environments in which this person is most comfortable and functions the best and the relevance of this information to potential job matches or support strategies for this person or the employer. Describe any person preferences for the density of co-workers (crowded, sparse). Describe the overall pace of the environment in which the consumer is most likely to be comfortable or function best. Are there any specific cultural environments that should be avoided?

***Pace of work:***

Describe the pace and consistency of work that would best suit this person. Would he or she benefit from a fast-paced job? Slow? Would he or she perform better with consistent predictable activities, varied duties, or a combination of both? Describe what information you obtained to reach this conclusion.

***How the person learns new tasks:***

Describe the most effective way to teach this person a new task. Describe the sequence of steps or strategies that works best (for example, demonstrate first, have this person try). What type of task monitoring or supervision seems to fit this person's preferences, tolerances, and ability to respond? Describe what information you obtained to reach this conclusion.

**Person's Preferences**

***Hobbies and leisure:***

Describe the types of leisure activities this person prefers, keeping in mind the potential for discovering potential job matches and identifying passions and interests as part of this person's assets and contributions. What interests this person? What does he/she choose to do or do well? How does this person spend his/her time? What do other people say he/she enjoys doing? Be sure to include how you (ES) learned about these interests. Discuss your involvement in the community with this person and any creative strategies used to gain this information. You need to offer enough information to back up that this truly is a real interest of the job seeker.

***Vocational Skills***

Based on the interests listed above, What is this person good at? What skills does he/she possess? What kind of things does he/she do regularly?

***Work preferences:***

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

***Ideal number of hours per work week and how this was determined***

State your opinion on an appropriate number of work hours and how this decision was made. You need to present a clear idea of how many hours per week this person wants to work prior to going out to looking for a job.

**Trial Work Assessment**

General Directions: Mark all applicable responses for each of the following and include comments regarding the person's performance and any accommodations which were provided. If not applicable, please type N/A in the comments section

<b>Domain/ Area</b>	<b>Indicator</b>	<b>Comments</b>
1. Transportation Availability	<input type="checkbox"/> Transportation from outsider	
	<input type="checkbox"/> Available from others within limits. (Please specify limits in comments)	
	<input type="checkbox"/> Provides own transportation	
	<input type="checkbox"/> Transportation unavailable	
2. Independence Regarding arranging Transportation	<input type="checkbox"/> Requires assistance	
	<input type="checkbox"/> Must be picked up and left off	
	<input type="checkbox"/> Independent with reminders	
	<input type="checkbox"/> Independent	
3. Flexibility in working hours	<input type="checkbox"/> No flexibility	
	<input type="checkbox"/> Some, but requires approval from other (i.e. guardian, residential staff, adherence to court order)	
	<input type="checkbox"/> Health related considerations	
	<input type="checkbox"/> Adaptable to most hours	
4. Health maintenance (eating, sleeping, hygiene etc.)	<input type="checkbox"/> Habits likely to negatively impact other workers	
	<input type="checkbox"/> Habits likely to interfere with attendance	
	<input type="checkbox"/> Health maintenance not likely to interfere with job.	
5. Family/ significant other's support for work and rehabilitation	<input type="checkbox"/> Actively antagonistic to person's efforts to work	
	<input type="checkbox"/> Indifferent to person's efforts to work	
	<input type="checkbox"/> Inconsistent	
	<input type="checkbox"/> Supportive of this person's efforts to work	
	<input type="checkbox"/> Case manager involvement	

**WORK PERFORMANCE**

1. Work orientation	<input type="checkbox"/> States or demonstrates desire not to work	
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	<input type="checkbox"/> Demonstrates ambivalence about work	
	<input type="checkbox"/> Desire to work at some point in the future is indicated	
	<input type="checkbox"/> Demonstrates desire to work now	
2. Work initiative	<input type="checkbox"/> Avoids work even after assigned	
	<input type="checkbox"/> Accepts work when assigned	
	<input type="checkbox"/> Initiates preferred work	
	<input type="checkbox"/> Seeks meaningful work activity when assigned tasks are completed/	
3. Orientation to work site	<input type="checkbox"/> Needs assistance after orientation training	
	<input type="checkbox"/> Orients well to room/ work area	
	<input type="checkbox"/> Orients to building and grounds	
4. Attendance (Based on a 20 hour assessment)	<input type="checkbox"/> Absent 2+ days from TWE for reason not acceptable to the employer	
	<input type="checkbox"/> Absent 2+ days from TWE for acceptable reasons	
	<input type="checkbox"/> Required support and encouragement to achieve 18-20 hours of TWE	
	<input type="checkbox"/> Attended all scheduled hours of TWE	
5. Promptness	<input type="checkbox"/> Is late for reasons unacceptable to the employer	
	<input type="checkbox"/> Is late for an acceptable reason	
	<input type="checkbox"/> Requires support and encouragement to be prompt	
	<input type="checkbox"/> Self-monitors promptness	
6. Appearance	<input type="checkbox"/> Unkempt: poor hygiene	
	<input type="checkbox"/> Unkempt: clean	
	<input type="checkbox"/> Neat and clean. Clothing unmatched or inappropriate clothing.	
	<input type="checkbox"/> Neat and clean. Clothing matched or appropriate to the environment.	
7. Interaction with co-workers, employer and public	<input type="checkbox"/> Does not respond appropriately to working with or in proximity to other people	
	<input type="checkbox"/> Adapts to working with one other person	
	<input type="checkbox"/> Adapts to working with several other people	
	<input type="checkbox"/> Works effectively in groups	
	<input type="checkbox"/> Works better alone	
	<input type="checkbox"/> Works well with public	
8. Interaction with supervisor/s	<input type="checkbox"/> Does not appear to understand supervisory role	
	<input type="checkbox"/> Resistance to supervisory requests	

	<input type="checkbox"/> Seeks to please but demands excessive time	
	<input type="checkbox"/> Demonstrates respect of supervisory role	
9. Reinforcement needs	<input type="checkbox"/> Requires continued reinforcement	
	<input type="checkbox"/> Requires intermittent reinforcement	
	<input type="checkbox"/> Responds to natural reinforcement	
10. Work productivity	<input type="checkbox"/> Unaware of speed as a component of job expectation	
	<input type="checkbox"/> Recognizes speed as a component of job expectation, but does not demonstrate effort and/or ability to improve	
	<input type="checkbox"/> Recognizes speed as a component of job expectation and demonstrates efforts to meet and maintain expectations.	
11. Work quality	<input type="checkbox"/> Unaware of quality as a component of job expectation	
	<input type="checkbox"/> Recognizes quality as a component of job expectation, but does not demonstrate effort and/or ability to improve	
	<input type="checkbox"/> Recognizes quality as a component of job expectation	
12. Independence regarding work performance	<input type="checkbox"/> Requires supervision at all times	
	<input type="checkbox"/> Requires frequent supervision	
	<input type="checkbox"/> Independent with reminders to stay on task	
	Independent	
13. Handling of constructive criticism	<input type="checkbox"/> Demonstrates resistance. Becomes argumentative	
	<input type="checkbox"/> Neither responds nor changes behavior	
	<input type="checkbox"/> Acknowledges criticism, responds by withdrawal from tasks	
	<input type="checkbox"/> Makes requested changes in behavior	
14. Aggressive actions of speech	<input type="checkbox"/> Hourly	
	<input type="checkbox"/> Daily	
15. Ability to follow directions	<input type="checkbox"/> Carries out one step with cues	
	<input type="checkbox"/> Carries out one step without cues	
	<input type="checkbox"/> Carries out multiple steps with cues	
	<input type="checkbox"/> Carries out multiple steps without cues	
16. Adaptability	<input type="checkbox"/> Requires a rigid routine.	
	<input type="checkbox"/> Adapts to consistent routine after orientation.	
	<input type="checkbox"/> Adapts to changes in routine with orientation	
	<input type="checkbox"/> Adapts to change on request.	
17. Time skills	<input type="checkbox"/> Unaware of time functions	



	<input type="checkbox"/> Aware of time functions <input type="checkbox"/> Able to complete required skills in allotted time <input type="checkbox"/> Needs additional time to complete required tasks	
18. Reading skills	<input type="checkbox"/> Recognizes characters (single numbers or letters) and pictures. Qualify: cursive or block, etc. <input type="checkbox"/> Reads words and phrases. Qualify: cursive/ block etc. <input type="checkbox"/> Reads simple sentences. Qualify: cursive/ block etc. <input type="checkbox"/> Proficient reading skills	
19. Money skills	<input type="checkbox"/> Does not demonstrate money concepts <input type="checkbox"/> Conducts money exchanges, able to recognize the relative value of coins and bills <input type="checkbox"/> Recognizes the relative value of coins and bills, but does not make change. <input type="checkbox"/> Conducts money exchanges and makes change	
20. Writing skills	<input type="checkbox"/> Writes characters (single numbers or letters) and pictures <input type="checkbox"/> Write words and phrases. Qualify: cursive/ block, etc. <input type="checkbox"/> Writes simple sentences. Qualify: cursive/ block, etc. <input type="checkbox"/> Writes proficiently	
21. Math skills	<input type="checkbox"/> Does not understand number concepts (numeric relativity) <input type="checkbox"/> Counts. <input type="checkbox"/> Counts and adds. <input type="checkbox"/> Adds and subtracts. <input type="checkbox"/> Understands measurement concepts. <input type="checkbox"/> Demonstrated ability to do complex math	
22. Computer proficiency	<input type="checkbox"/> Can clock in and out for work <input type="checkbox"/> Can turn computer on <input type="checkbox"/> Is able to navigate/ browse the internet <input type="checkbox"/> Is able to use Microsoft Word and/or other software	
23. Copying data	<input type="checkbox"/> Does not copy numbers/ letters <input type="checkbox"/> Copies numbers/ letters, but needs large	



	spaces <input type="checkbox"/> Copies numbers/ letters, but has difficulty with sizing and placement <input type="checkbox"/> Copies numbers/ letters in appropriate spaces							
24. Comparing data	<input type="checkbox"/> Unable to demonstrate the making of comparative judgments <input type="checkbox"/> Ability to demonstrate the making of comparative judgments <input type="checkbox"/> Ability to compare data and things and make judgments requiring classification of two or more categories							
25. Communication – speaking/ gesturing/ signing	<input type="checkbox"/> Gestures or sounds are only understandable to persons thoroughly familiar with person <input type="checkbox"/> Information provided by simple <b>gestures or signs</b> is understandable to CRP and co-workers <input type="checkbox"/> Information provided by <b>simple sign or word</b> is understandable to CRP and co-workers <input type="checkbox"/> Can speak/ sign using simple phrases <input type="checkbox"/> Demonstrates fluent communication							
26. Providing Assistance	<input type="checkbox"/> Responds to gestures and demonstration of help needed by people <input type="checkbox"/> Responds in courteous manner to verbal requests to assist <input type="checkbox"/> Initiates providing assistance to others							
27. Worker safety (ability to understand and follow safety rules)	<input type="checkbox"/> Unaware of safety as a component of the job and requires close supervision <input type="checkbox"/> Recognizes safety as a component of the job, intermittent supervision required <input type="checkbox"/> Recognizes safety as a component of the job and demonstrates alertness to potential hazards.							
28. Environmental considerations (ability to tolerate the following conditions)	<table border="1"> <tr> <td><input type="checkbox"/> Tolerance to cold</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Tolerance to heat</td> <td><input type="checkbox"/> Tolerance to chemicals</td> </tr> <tr> <td><input type="checkbox"/> Tolerance to humidity</td> <td><input type="checkbox"/> Other:</td> </tr> </table>	<input type="checkbox"/> Tolerance to cold		<input type="checkbox"/> Tolerance to heat	<input type="checkbox"/> Tolerance to chemicals	<input type="checkbox"/> Tolerance to humidity	<input type="checkbox"/> Other:	
<input type="checkbox"/> Tolerance to cold								
<input type="checkbox"/> Tolerance to heat	<input type="checkbox"/> Tolerance to chemicals							
<input type="checkbox"/> Tolerance to humidity	<input type="checkbox"/> Other:							
<b>Conclusions</b>								
Describe accommodations needed.								

<p>Record a brief summary of the consumer's employability and support needs related to gaining and maintaining long-term, competitive, integrated employment within the community.</p>		
<b>Signature</b>		
<p>I, the Employment Specialist or _____ (describe position), certify that:</p> <ul style="list-style-type: none"> <li>• I personally completed the Trial Work Assessment Report (TWER); and</li> <li>• I documented the services and information described above in the Trial Work Assessment Report (TWER)</li> </ul>		
First and Last name of the Employment Specialist:	Signature of the Employment Specialist:	Date Report Submitted:

Encl. Trial Work Service Log

