**JOB COACHING PROGRESS REPORT – DAY 30**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Person Information** | | | | | | | | | | | | | |
| Name of Person: | | | | | | Authorization number: | | | | | | | |
| Provider: | | | | | | Reporting Period: | | | | | | | |
| **Employment Information** | | | | | | | | | | | | | |
| Person’s job title: | | Start Date: | | | | | | | | Full time Part time | | | |
| Employer Name: | | Address: | | | | | | | | City, State: | | | ZIP code: |
| Hours per week: | | Days per week: | | | | | | | | Hourly rate: $ | | | |
| **Job Coaching Information** | | | | | | | | | | | | | |
| Dates of actual Job coaching:      ,      ,      ,      ,      ,      ,      ,       ,      ,      ,      ,      ,      ,      ,  Frequency of Job Coaching:  2x/week  3x/week  4x/week  Other  Hours per day: | | | | | | | | | | | | | |
| **\*Job Analysis** | | | | | | | | | | | | | |
| Number of employees in this company at this location:  Number of employees without disabilities in immediate area(50 ft. radius):  Number of other employees with disabilities:       In immediate area (50 ft. radius):  Number of other employees in this position:  ***General Directions:*** Please do not leave any item unanswered.  Indicate the most appropriate response for each item based on the observations of the job and interview with employers, supervisors, and coworkers. Record special instructions, regulations or comments in each item for greater detail. | | | | | | | | | | | | | |
| *AREA/ DOMAIN* | *INDICATORS* | | | | | | *YES* | | *NO* | | | *COMMENTS* | |
| 1. Schedule | Weekend work required | | | | | |  | |  | | |  | |
| Evening work required | | | | | |  | |  | | |  | |
| 1. Travel | Public transportation | | | | | |  | |  | | |  | |
| Private transportation | | | | | |  | |  | | |  | |
| 1. Job benefits | None | | | | | |  | |  | | |  | |
|  | Sick leave | | | | | |  | |  | | |  | |
|  | Medical/ health benefits | | | | | |  | |  | | |  | |
|  | Paid leave | | | | | |  | |  | | |  | |
|  | Dental benefits | | | | | |  | |  | | |  | |
|  | Employee discounts | | | | | |  | |  | | |  | |
|  | Free or reduced meals | | | | | |  | |  | | |  | |
|  | Other: | | | | | |  | |  | | |  | |
| 1. Strength – Lifting and Carrying | Very light work (<10 lbs)  Light work (10-20-lbs)  Average work (30-40 lbs)  Heavy work (>50 lbs) | | | | | | | | | | |  | |
| 1. Endurance | Work required for:  < 2 hours  2-3 hours  3-4 hours >4 hours | | | | | | | | | | |  | |
| 1. Orientation to Place | Small area one room several rooms  Building wide building and grounds | | | | | | | | | | |  | |
| 1. Accessibility | Fully accessible site  Accessibility issues | | | | | | | | | | |  | |
| 1. Work Pace | Slow pace Average space  Sometimes fast pace Continual fast pace | | | | | | | | | | |  | |
| 1. Appearance Requirements | Grooming of little importance  Cleanliness only required  Neat and clean required  Grooming very important | | | | | | | | | | |  | |
| 1. Communication Required | None/ minimal  Key words/ signs needed  Unclear speech accepted  Clear speech in sentences/ signs needed | | | | | | | | | | |  | |
| 1. Social Interaction | Social interactions:  Not required  Appropriate responses required Required infrequently Required frequently | | | | | | | | | | |  | |
| 1. Attention to Task Perseverance | Frequent prompts available  Intermittent prompts/ low supervision available  Intermittent prompts/ high supervision available  Infrequent prompts/ low supervision available | | | | | | | | | | |  | |
| 1. Sequencing of Job Duties | Only 1 task required at a time  2-3 tasks required in sequence  4-6 tasks required in sequence  7 or more tasks required in sequence | | | | | | | | | | |  | |
| 1. Initiation of Work Motivation | Initiation of Work required  Volunteering helpful  Coworker support available | | | | | | | | | | |  | |
| 1. Daily Changes in Routine | 7 or more changes  2-3 task changes  4-6 task changes  No task change | | | | | | | | | | |  | |
| 1. Reinforcement Available | Frequent reinforcement available  Reinforcement intermittent (daily)  Reinforcement infrequent (weekly)  Minimal reinforcement (pay check) | | | | | | | | | | |  | |
| 1. Coworker Supports Available | None available Low to minimum potential  Intermittent potential  High potential | | | | | | | | | | |  | |
| 1. Supportive of Job Accommodations | Very supportive  Supportive with reservations  Indifferent Negative  Unknown | | | | | | | | | | |  | |
| 1. Opportunity for Career Advancement | Low to minimum  Average  Most probable  Procedures in place  No procedures in place | | | | | | | | | | |  | |
| 1. Object Discrimination | Does not need to distinguish between work supplies  Must distinguish between work supplies with an external cue  Must distinguish between work supplies | | | | | | | | | | |  | |
| 1. Time Factor | Time factors not important  Must identify breaks/ meal/ etc.  Must tell time to the hour  Must tell time to the minute | | | | | | | | | | |  | |
| 1. Functional Reading | None Sight words/ symbols  Simple reading Fluent reading | | | | | | | | | | |  | |
| 1. Functional Math | None  Simple counting  Simple addition/subtraction  Complex computational skills | | | | | | | | | | |  | |
| 1. Visibility to Public | Person not visible  Occasionally visible  Regularly visible  Visible throughout the day/ongoing | | | | | | | | | | |  | |
| 1. Level of Social Contact | Employment in an integrated environment on a shift or position which is isolated. Contact with coworkers or supervisor is minimal. Example: night janitor  Employment in an integrated environment on a shift or position which is relatively isolated. Contact with coworkers or supervisor is available at lunch or break. Example: Data entry position  Employment in an integrated environment in a position requiring a moderate level of interdependent tasking and coworker interaction. Example: Office Service Aide – copying documents.  Employment in an integrated environment in a position requiring a high degree of interdependent tasks and coworker interactions and/or high level of contact with business customers. Example: Walmart greeter | | | | | | | | | | |  | |
| **JOB TASKS IDENTIFICATION** | | | | | | | | | | | | | |
| List the job tasks required for this position: | | | | | | | | | | | | | |
| JOB TASK | | | PERFORMING? | | | | | ACHIEVEMENT LEVEL | | | BASIS | | |
| YES | | NO | | |
|  | | |  | |  | | | Limited  Average  Above Average Excellent | | | Direct Observation  Person self-report  Supervisor report | | |
|  | | |  | |  | | | Limited  Average  Above Average  Excellent | | | Direct Observation  Person self-report  Supervisor report | | |
|  | | |  | |  | | | Limited  Average  Above Average  Excellent | | | Direct Observation  Person self-report  Supervisor report | | |
|  | | |  | |  | | | Limited  Average  Above Average  Excellent | | | Direct Observation  Person self-report  Supervisor report | | |
|  | | |  | |  | | | Limited  Average  Above Average  Excellent | | | Direct Observation  Person self-report  Supervisor report | | |
|  | | |  | |  | | | Limited  Average  Above Average  Excellent | | | Direct Observation  Person self-report  Supervisor report | | |
|  | | |  | |  | | | Limited  Average  Above Average  Excellent | | | Direct Observation  Person self-report  Supervisor report | | |
|  | | |  | |  | | | Limited  Average  Above Average  Excellent | | | Direct Observation  Person self-report  Supervisor report | | |
| **Person Performance** | | | | | | | | | | | | | |
| Describe how this person has adjusted to his/her job, including any problematic issues or concerns that emerged and how they were addressed: | | | | | | | | | | | | | |
| Describe the evidence to support this person’s and, if applicable, this person’s legal representative’s (family member or other) satisfaction with the job and the work environment. | | | | | | | | | | | | | |
| Identify areas of performance or behavior that require improvement and note strategies that will address these areas. Describe what types, methods, and strategies were used in training this person and the effectiveness of the training provided: | | | | | | | | | | | | | |
| What new support or accommodation needs (if any) were identified during this period, and how were they addressed? | | | | | | | | | | | | | |
| Identify and list potential natural supports: | | | | | | | | | | | | | |
| Next Steps: | | | | | | | | | | | | | |
| **Signature** | | | | | | | | | | | | | |
| I, the Job Coach, certify that:   * The above dates, times, and services are accurate; * I personally provided all services or supervised the Job Skills Trainer who provided the services; * I documented the services and information described above in the report. | | | | | | | | | | | | | |
| First and Last name of Job Coach: | | | | Position Title: | | | | | | | | | |
| Signature: | | | | Date: | | | | | | | | | |

*\*Job Analysis adapted from manual developed by VCU-RRTC: Supported Employment: A Customer-Driven Approach (1997)*

Encl. Job Coaching Service Log

**JOB COACHING SERVICE LOG**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Identifying Information** | | | | |
| Person’s Name: | | | VR Specialist: | |
| Provide a summary of each contact, including a description of the job coaching activities performed, level of the person’s participation and any necessary follow-up required/ performed, etc. The Job Coaching Service Log must be signed by the Employment Specialist / Job Coach and the Provider Administrator/ Program Coordinator/ Designee. Attach additional sheets as necessary. | | | | |
| **Date** | **Service Hours** | **Summary of Contact** | | |
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| **CERTIFICATION** | | | | |
| I, the Job Coach, certify that:   * The above dates, times, and services are accurate; * I personally provided all services or supervised the Job Skills Trainer who provided the services; * I documented the services and information described above in the report. | | | | |
| Job Coach Signature: | | | | Date: |
| Provider Administrator/ Designee’s Signature: | | | | Date: |