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| Transforming Lives | | DIVISION OF VOCATIONAL REHABILITATION (DVR)  INDEPENDENT LIVING (IL) SERVICE PROVIDER  PRE-EMPLOYMENT TRANSITION SERVICES (PRE-ETS)  **Service Delivery Outcome Plan: IL Pre-ETS Self-Advocacy Training** | | | | | Page     of | |
| AFP NUMBER | |
| DVR CUSTOMER | | | IL CONTRACTOR | | | IL REPRESENTATIVE’S NAME | | |
| SERVICE DELIVERY DATES  From:To: | | | PROGRESS REPORTS REQUIRED  **The contractor shall provide monthly progress updates to be submitted to the VCR in an SDOR.** | | | | | |
| **NUMBER** | **EXPECTED OUTCOME** | | | **PARTY RESPONSIBLE** | **PURCHASE AND PAYMENT CRITERIA** | | | **COST ($)** |
|  | Pre-Employment Transition Services IL Self-Advocacy Training activities are intended to help a student gain self-advocacy skills as specified below. | | |  | **MAXIMUM TOTAL OUTCOME FEE:**  Fee per hour is $85.00 for up to  hours.  Outcome fee paid to Contractor upon receipt of invoice and outcomes achieved as described in the Service Delivery Outcome Report (SDOR).  Fee is based on direct student activities, and does not include report writing time.  SDOR must be written directly to the student, and provided to both the student and DVR VRC.  Report must include:   1. IL Provider representative name 2. Dates and hours of all activities 3. Evidence of student skill gains in identified training areas 4. Specific recommendations for further student exploration and experience | | | **$** |
|  | Student training areas may include:   * Problem-solving strategies * Assertiveness training * Strategies for exercising civil rights * Self-determination strategies | | | **IL Provider**  **Student**  **VRC** |
|  | Specific Self-Advocacy training goals for **Student First Name** include: | | | **IL Provider**  **Student**  **VRC** |
| Transportation Expenses if authorized by VRC:  Travel Time: Paid upon receipt of invoice and a written report on the Service Delivery Outcome Report (SDOR) documenting distance driven, beginning time and arrival time at destination at the rate of $37 per hour billed in 15 minute increments if actual service delivery occurs more than 50 miles from CRP’s nearest staffed office location. | | | **$** |
|  | Student will participate in all IL Self-Advocacy Training activities, and will attend all scheduled meetings. | | | **Student** |
|  | DVR counselor is responsible for approving that services are consistent with the customer’s vocational assessment. This includes discussing considerations for customer health and safety that may be inconsistent with certain kinds of work, and any factors that may require additional caution due to COVID-19. | | | **DVR** |
| Mileage: Paid upon receipt of invoice and a written report on the Service Delivery Outcome Report (SDOR) documenting beginning address, destination address, and number of miles being billed. Mileage will be paid at the current state rate determined by the Office of Financial Management. | | | **$** |
|  | IL provider is responsible for ensuring that any services provided in-person include protocols for health and safety, including any protocols for minimizing the spread of COVID-19. | | | **IL Provider** | Other Transportation Expenses: Such as Ferry System, toll fares, etc. will be paid upon receipt of invoice, receipts, and a written report on the Service Delivery Outcome Report (SDOR) documenting the reason for the expense. | | | **$** |
|  | Customers are encouraged to speak with both IL provider and DVR counselor if they have any concerns about the health and safety risks of the site where they receive services. If the customer feels unsafe, they may let their IL provider or their DVR counselor know what is making them feel unsafe. | | | **Customer** |
| CUSTOMER / LEGAL GUARDIAN SIGNATURE DATE | | | IL SIGNATURE DATE | | DVR SIGNATURE DATE | | | TOTAL  **$** |
| **Signature by each party indicates agreement to the contents of this plan.** | | | | | | | | |