

Implementation Plan for: Iona Ford Care ID: B0X0X0 Comp Code: 544

Service Component: Supported Employment Back-up Plan Required: yes no Date IP Developed: 5/13/13

IPC Begin Date: 7/23/2013 IPC Effective Date: 7/23/2013 IPC End Date: 7/22/2014

Desired Outcome(s)/Purpose(s) from PDP Action Plan for this Service Component:

1.	Iona wants to continue working, but is having some trouble at work following instructions.
2.	
3.	
4.	

In Addition to the PDP, Development of Implementation Strategies Based On (check all that apply):

Conversation(s) with: Iona and staff at work

Observation Formal Assessment(s):

Implementation Strategy Objectives:	Start Date:	Targeted Completion:	Calculation of Units (If applicable)	Total Units (per strategy)
SE staff will speak with Iona's supervisor, co-workers, and observe Iona and work with employer, Iona's co-workers, and Iona to eliminate the barriers to her being successful in her work.	8/15/13	2/1/14	2hrs/wk or as needed	100
Total IPC Units Needed for this Service Component:				100
Requisition Fee (if applicable)				

Signature for Implementation Plan:

Signature sheet for implementation plan(s) on file

or

Signatures below:

Iona Ford
Signature-Individual

Signature- Legally Authorized Representative
 Family Member/Advocate

Imma Goode
Signature-HCS Provider Representative

Signatures for Discontinuation of Implementation Plan:

Signature – HCS Provider Representative or Individual LAR Date