

# Supporting a Self Determined Life!

## Self Directing Supports & Services

Employer of Record /  
Sponsoring Person  
Responsibilities

# Where to start...

Individuals who choose to self-direct their services must also understand the important roles of the Employer of Record and Sponsoring Person, and how to best fulfill employer responsibilities.

# Sponsoring Person

**A Sponsoring Person may be needed to understand, sign, and carry out the responsibilities identified in the Self-Direction Agreement. The sponsoring person may not be a paid employee of the person they sponsor. They serve as a “helper” in the process of Self Directing services & supports.**

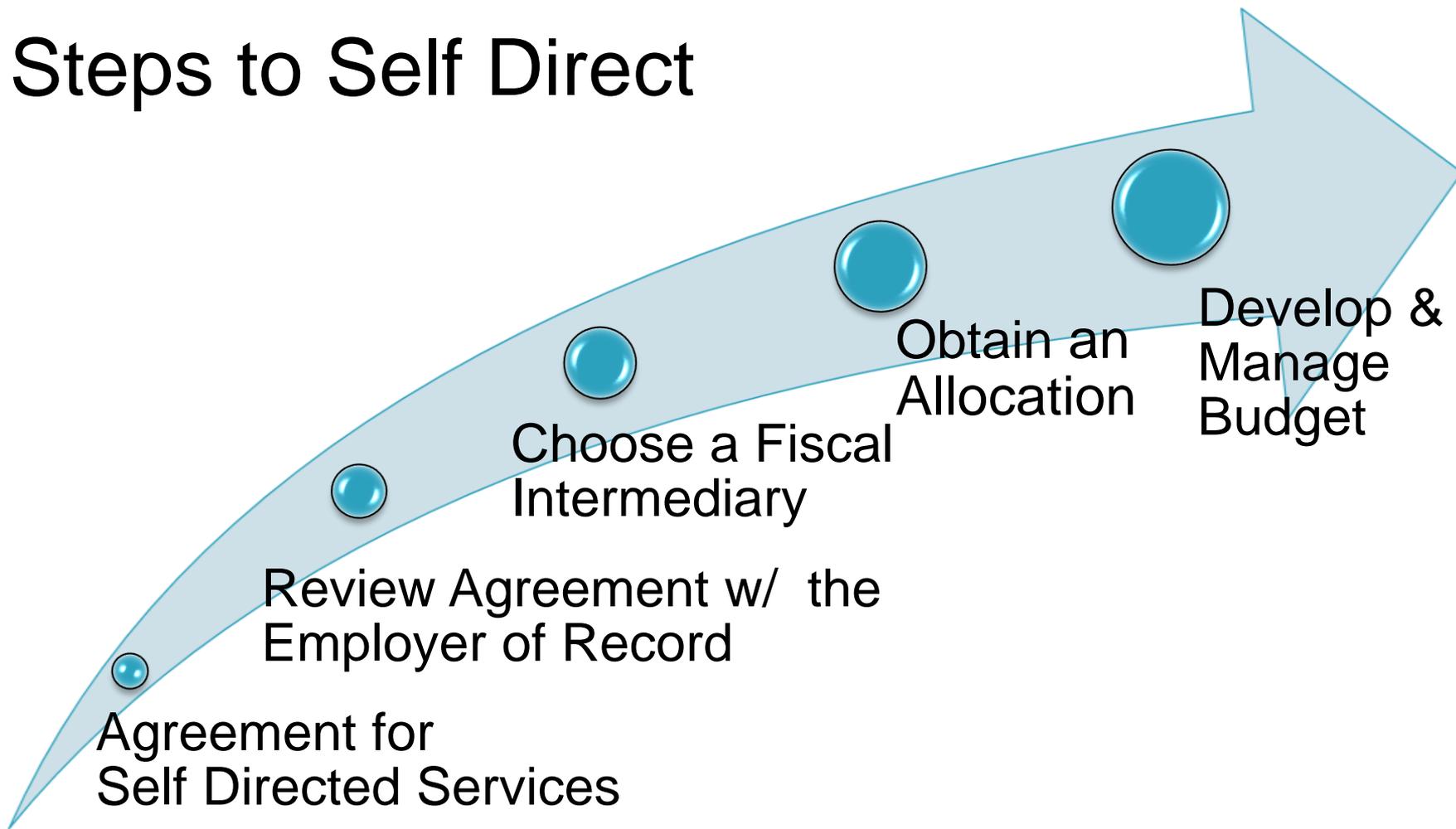
# Employer of Record (EOR)

- ▶ **The Employer of Record (EOR) is responsible to have a tax ID number officially assigned. (The FI will assist with this.) The EOR is many times also considered to be the Sponsoring Person.**
- ▶ **The EOR may not be a paid employee of the person they sponsor.**

## **What is the Employer of Record / Sponsoring Person Responsible for?**

- Reviews and signs the Agreement for Self Direction, and assists in the hiring process.
- Reviews and signs the Employee/Employer Agreement Form.
- Signs employee timesheets, and ensures that they are accurate and reflect the waiver services as described in the Individual Plan.

# Steps to Self Direct



# Agreement For Self Directed Supports

**The Self-Directed Support Agreement is the tool that DDS uses to ensure that individuals who choose to self-direct their services fully understand their employer responsibilities.**

- This agreement identifies what supports the person may need to effectively implement Self Directed Supports.
- If adequate supports are not identified in the Self-Directed Support Agreement, DDS will not authorize self directed supports.

# What does the Agreement For Self Directed Supports look like?

You must be able to meet the responsibilities listed below. If you are not able to meet these responsibilities independently, you must have additional support identified in the Individual Plan for the areas where support is needed.

Self Directed Responsibilities	Need Assistance	Do not need Assistance	Assistance to be provided by:
To participate in the development and implementation and review of the Individual Plan.	<input type="checkbox"/>	<input type="checkbox"/>	
To hire, train and supervise my staff to meet the outcomes outlined in my individual Plan	<input type="checkbox"/>	<input type="checkbox"/>	
To verify and approve time sheets, receipts, mileage logs, and invoices on the required forms and send to the Fiscal Intermediary.	<input type="checkbox"/>	<input type="checkbox"/>	
To review the Fiscal Intermediary expenditure reports provided to me and notify my case manager and Fiscal Intermediary of any questionable expenditure.	<input type="checkbox"/>	<input type="checkbox"/>	
To complete all forms provided by the Fiscal Intermediary that are required by federal and state laws to become the employer of record.	<input type="checkbox"/>	<input type="checkbox"/>	
To ensure each candidate who is being considered for employment fills out a standard employment application provided by the Fiscal Intermediary.	<input type="checkbox"/>	<input type="checkbox"/>	
To offer employment to any new employee <u>on a conditional basis</u> until the Criminal History Background Check, Drivers License Check, and DDS Abuse Neglect Registry Check has been completed.	<input type="checkbox"/>	<input type="checkbox"/>	
To follow the department's procedure for candidates with a criminal history conviction record. Anyone on the DDS Abuse Neglect Registry <u>cannot</u> be employed to provide support to the individual.	<input type="checkbox"/>	<input type="checkbox"/>	
To enter into an agreement with the individual support worker(s) I hire. The Individual Family Agreement with Employee provided by the Fiscal Intermediary identifies the type of supports the employee will provide and the hourly rate of pay.	<input type="checkbox"/>	<input type="checkbox"/>	
To ensure that each employee I hire has read the required	<input type="checkbox"/>	<input type="checkbox"/>	

Revised 01.01.11

Self Directed Responsibilities	Need Assistance	Do not need Assistance	Assistance to be provided by:
training materials and completed any specific training in the Individual Plan prior to working alone with the person			
To ensure that employees I hire complete the department's College of Direct Supports internet based training requirements.	<input type="checkbox"/>	<input type="checkbox"/>	
To ensure that each employee documents the start and end time for each date of service worked with the consumer and documents the activities and services provided for each date worked.	<input type="checkbox"/>	<input type="checkbox"/>	
To ensure there is financial oversight and accountability of the individual's personal funds and entitlements by someone other than the employee.	<input type="checkbox"/>	<input type="checkbox"/>	

Signed: Consumer \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_  
By signing above I agree to follow the self direction requirements and responsibilities in this agreement.

Signed: Sponsoring Person \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_  
By signing above I agree to follow the self direction requirements and responsibilities in this agreement.

Revised 01.01.11

# Self Directed Responsibilities

Need  
Assistance

Do not need  
Assistance

Assistance to  
be provided  
by:

To participate in the development and implementation and review of the Individual Plan.

To hire, train and supervise my staff to meet the outcomes outlined in my individual Plan.

To verify and approve time sheets, receipts, mileage logs, and invoices on the required forms and send to the Fiscal Intermediary.

To ensure each candidate who is being considered for employment fills out a standard employment application provided by the Fiscal Intermediary.

To offer employment to any new employee on a conditional basis until the Criminal History Background Check, Drivers License Check, and DDS Abuse Neglect Registry Check has been completed.

To follow the department's procedure for candidates with a criminal history conviction record. Anyone on the DDS Abuse Neglect Registry cannot be employed to provide support to the individual.

To enter into an agreement with the individual support worker(s) I hire. The Individual Family Agreement with Employee provided by the Fiscal Intermediary identifies the type of supports the employee will provide and the hourly rate of pay.

To ensure that each employee I hire has read the required training materials and completed any specific training in the Individual Plan prior to working alone with the person.

To ensure that employees I hire complete the department's College of Direct Supports internet based training requirements.

To ensure that each employee documents the start and end time for each date of service worked with the consumer and documents the activities and services provided for each date worked.

To ensure there is financial oversight and accountability of the individual's personal funds and entitlements by someone other than the employee.

▶ **Signed: Individual** \_\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

- ▶ By signing above I agree to follow the self direction requirements and responsibilities in this agreement. Failure to adhere to the self-direction responsibilities and requirements can result in removing the ability for you to participate in self directing your services.

▶ **Signed: Sponsoring Person /Employer  
of Record**\_\_\_\_\_

**Date:**\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

- ▶ By signing above I agree to follow the self direction requirements and responsibilities in this agreement. Failure to adhere to the self-direction responsibilities and requirements can result in removing the ability for you to participate in self directing your services.

# Self Directed Support Agreement

**As an individual receiving Self-Directed Supports and/or the sponsoring person for Self Directed Supports, I agree to abide by the following Department of Developmental Services requirements:**

- ▶ To enroll in the DDS Home and Community Based Services Medicaid Waiver.
- ▶ To maintain Medicaid eligibility while participating in the DDS Home and Community Based Services Medicaid Waiver.
- ▶ To meet all documentation requirements that the department requires for self directed services.

- ▶ I agree to stay within the DDS budget allocation established for my supports and services. If for any reason I exceed my DDS budget, I understand I am financially responsible for the overage.
  - ▶ I agree to require my staff to cooperate and provide requested information pertinent to any investigation concerning services and supports being provided through this DDS Self Directed Support Agreement.
- 

- ▶ All payments by the Fiscal Intermediary must be made directly to the provider of the service. Third party payments and advanced payments are not allowed. The Fiscal Intermediary will only make payments for services in the budget authorized by DDS. (Prior Approval)
- ▶ Any purchase of supports, services, or goods from a party that is related to me through family, marriage, business association or a consensual relationship must be prior approved by DDS.

-Budget adjustments are limited to a maximum of one time per quarter. (Jan-March, April -June, July - September, October - December) and are only for a change in the supports and services that are included in the Individual Plan.

- ▶ All employees I hire must meet the DDS pre-employment requirements prior to their hire date and complete the DDS required trainings within 90 days. (CDS Terms)

- ▶ All supports and /or services provided by a family member must be reviewed through the Family Hire process. A family member/relative/significant other may not be hired when they: are the legal guardian of the individual; are the legally responsible relative of the individual, are the employer of record, are the parent of a child under 18 who is receiving the service (up to age 21 for VSP parents). **No exceptions shall be made to these restrictions on who may be hired by individuals who self-direct their services.**

**-Funds held by the Fiscal Intermediary that are not expended within the budget period are returned to the Department. Utilization Reviews are conducted by Central Office & CM's.**



- ▶ **Funds allocated by the department are only to be used for the direct benefit of the person receiving the allocation. Indirect (non face-to-face) services are not allowed unless specifically identified as an indirect service in the waiver manual or in the Individual Plan. Funds allocated by the department are only to be used for services identified in the Individual Plan and cannot be used for any other supports or services unless included in the Individual Plan. All supports must be provided and recorded on each employee's timesheet according to the definitions for each service type.**

- ▶ Three bids are required for items, equipment, or home and vehicle modifications over \$2500.
  - ▶ To enter into an agreement with a Fiscal Intermediary who is under contract with DDS.
  - ▶ To actively participate in the ongoing monitoring of supports and services and to participate in the department's quality review process.
- 

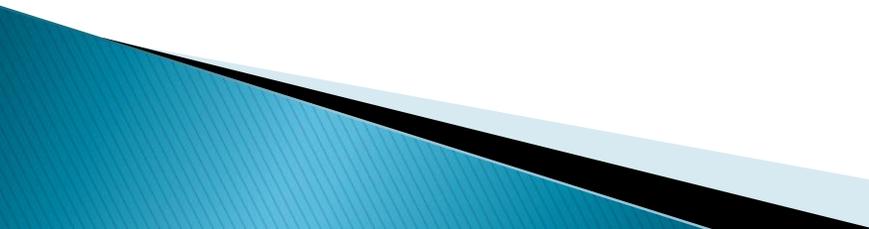
- ▶ Any special equipment, furnishings, or items purchased under this agreement are the property of the service recipient and will be transferred to his or her new place of residence or day program should the person move or be returned to the state when the item is no longer needed.

- ▶ To review and follow the DDS False Claims Act Policy provided by the Fiscal Intermediary.
- ▶ I acknowledge that the authorization and payment for services that are not rendered could subject me to Medicaid fraud charges under state and federal law. Breach of any of the above requirements with or without intent may disqualify me from self-directing-services.

**I acknowledge that the department may terminate funding for any employee who violates any of the following work rules:**

- ▶ **Commits any acts of physical, sexual verbal, or psychological abuse or neglect of a persons with disabilities;**
  - ▶ **demonstrates abusive, immoral, indecent, or racially derogatory conduct toward consumers, family members, coworkers, or members of the public;**
- 

- ▶ **commits any act of discrimination or harassment included but not limited to those based on religion, race, color, ancestry, national origin, sex, age, physical disability, mental disability, or sexual orientation;**
- ▶ **uses an individual's resources for personal gain;**
- ▶ **brings illegal drugs or alcohol to work and/or is under the influence of illegal drugs or intoxicating liquors while at work;**

- ▶ **brings firearms or weapons to work;**
  - ▶ **commits theft of funds or other property from a consumer, family or coworker;**
  - ▶ **is convicted of a felony.**
  - ▶ **To notify my case manager if I am no longer able to meet the department's requirements for Self-Direction.**
- 

# Role of the Fiscal Intermediary



**Individuals who chose to self direct their services must select a Fiscal Intermediary (FI) to help them manage their employer responsibilities, and manage their budget.**

**FI's help individuals with the following tasks associated with the Budget:**

- Complete state and federal employer forms, pay staff, purchase Worker's Compensation, ensure tax compliance, and prepare end of year reports.
- They also perform background checks on new employees, ensure employees complete required training, pay vendor bills, and assist individuals to stay within their budget.

# Information that Fiscal Intermediaries Provide:

- **EMPLOYER START-UP PROCESS**-One of the most important tasks that FIs help individuals do is to complete all of the paperwork that is needed to become an official employer with the state and federal government. The FI will provide timesheets, employee training materials, tax materials, expense reports and other information.
- **BASIC EMPLOYMENT LAWS**-The FI can assist the individual to understand basic employment law before they begin hiring employees. This includes information regarding discrimination, disability laws, harassment, and wrongful termination.

# What is the DDS CM/Broker's Role in Creation of the Individual Budget?

- CM/Brokers assist individuals & teams to identify support and service needs, and document this information in their Individual Plan and in their budget.
- CM/Brokers also negotiate for needed funds, and are responsible for creating and designing each budget.
- CM/Brokers ensure sure that each line item adheres to the overall allocation, and the waiver Cost Guidelines/Cost Standards.



# What is the Individual Budget?

**The Individual Budget is a “database” document that notes the following information:**

- The services and/or supports that are being purchased or provided. These are referred to as “Line Items”.
- The amount, duration, and cost of the services and/or supports being purchased or provided.
- The cost totals of each line item and the total of the overall budget.
- The date of the budget period, regional approvals, and identified Fiscal Intermediary.
- Comment Section-Explanations regarding specific line items.



# Appearance of the Individual Budget Input Screen (CM/Broker View)

IP-6 Version: Production

One Time   
  Service Type   
  Funding   
  Service   
  Vendor   
  Other Rate   
  Rate   
  Unit   
  Duration

Comments:   
 Benefit %:    
 Current:    
 Annual:    
 Add

Day Services	Vendor	Rate	Units Per Day	# Of Days	Total/Month	Total/Year	Adj Amt	Adj Total
Individual Day Support	SELF HIRE	16.00	30.00	50.00	2000.00	26880.00		
OW - Activity Fee - Empl	OTHER	400.00	1.00	1.00	33.00	400.00		
OW - Background Check	OTHER	35.00	1.00	1.00	3.00	35.00		
OW - Office Supplies	OTHER	100.00	1.00	1.00	8.00	100.00		
OW - Workers Comp	OTHER	1355.00	1.00	1.00	113.00	1355.00		
Respite - Daily out home	SELF HIRE	244.95	1.00	7.00	143.00	1920.00		
SF - Activity fee Consume	OTHER	400.00	1.00	1.00	33.00	400.00		
Staff Training CDS	SELF HIRE	180.00	1.00	1.00	15.00	202.00		
Transportation Per Mile	SELF HIRE	0.85	95.00	50.00	336.00	4038.00		
Web Mod/Maint	OTHER	200.00	1.00	1.00	25.00	200.00		

IP 6 Number:  1200   
 Waiver:    
 Status:  A Approved   
 OK

1st Approved:  Amy Blazaw   
 Date:  1/6/2012   
 2nd Approved:  Tracie Casp   
 Date:  1/23/2012

Res Annual	Res One Time	Day Annual	Day One Time	Total	Day Current Budget	Day Annual Amt	Day One Time
<input type="text"/> 0	<input type="text"/> 0	<input type="text"/> 35630	<input type="text"/> 0	<input type="text"/> 35630	<input type="text"/> 37314	<input type="text"/> 37314	<input type="text"/> 0

FI Assigned:  SUNSET SHORES   
 Start Date:  1/1/2012   
 End Date:  12/31/2012

Res Current Budget:  0   
 Res Annual Amt:  0   
 Res One Time:  0

Day Current Budget:  37314   
 Day Annual Amt:  37314   
 Day One Time:  0

BO - Individual Client Report   
 Individual Client Report   
 Vendor Service Authorization   
 Print   
 Disbursement   
 Reset   
 Return

# Examples of Day, Residential, and Case Management Line items...

Residential Services	Vendor	Rate	Units Per Wk	# Of Wks	Total/Month	Total/Year
Individualized Home Sup	SELF HIRE	23.65	8.00	50.00	788.00	10595.00
O'w - Activity Fee - Empl	OTHER	349.00	1.00	1.00	29.00	349.00
O'w - Workers Comp	OTHER	944.22	1.00	1.00	79.00	944.00
Personal Support	SELF HIRE	15.75	6.00	50.00	394.00	5292.00
Personal Support	SELF HIRE	16.22	6.00	50.00	406.00	5450.00
SF - Activity Fee Consum	OTHER	350.00	1.00	1.00	29.00	350.00
SF - Other (Explain)	OTHER	500.00	1.00	1.00	42.00	500.00
SF - Therapy n/c by T-19	OTHER	1704.00	1.00	1.00	142.00	1704.00
Case Management	Vendor	Rate	Units	Duration	Total/Month	Total/Year

Day Services	Vendor	Rate	Units Per Day	# Of Days	Total/Month	Total/Year
Individual Day Support	SELF HIRE	16.00	30.00	50.00	2000.00	26880.00
O'w - Activity Fee - Empl	OTHER	400.00	1.00	1.00	33.00	400.00
O'w - Background Check	OTHER	35.00	1.00	1.00	3.00	35.00
O'w - Office Supplies	OTHER	100.00	1.00	1.00	8.00	100.00
O'w - Workers Comp	OTHER	1355.00	1.00	1.00	113.00	1355.00
Respite - Daily out home	SELF HIRE	244.95	1.00	7.00	143.00	1920.00
SF - Activity fee Consum	OTHER	400.00	1.00	1.00	33.00	400.00
Staff Training CDS	SELF HIRE	180.00	1.00	1.00	15.00	202.00
Transportation Per Mile	SELF HIRE	0.85	95.00	50.00	336.00	4038.00

# The Comment Section

The comment section provides detailed information pertaining to each line item.

Comments
Wage has been \$23.65 for several years (acting in the capacity of an "Ind and Good
For staff to accompany consumer to rec events, movies, dinning, etc
3 employees PT
Second PS staff, up to 6 hours per week.
First PS staff person. Up to 6 hours per week
Act Fee for consumer: recreation, movies, dinning events w/ staff, etc.
\$500 for personal support /IHS to State funded for 2 weeks while in rehavyb facility.
Counseling through Connection. \$71.02 hr, 2x mo.  Sheryl Kemp adjusted budget las

# Appearance of the Individualized Budget Output Screen (Consumer/Sponsoring Person View)

2/2/2012

IP-6 + Form 223

ClientName [REDACTED]	IP 6 Date 3/18/2011	Region NR	DOB 7/5/1975	CaseManager Walsh-Brahoney Christina (860) 263-2686
DDS ID [REDACTED]		Current Res Amount 25,184	Current Day Amount 0	
Start Date 4/1/2011	End Date 3/31/2012	Res Annual 25,184	Day Annual 0	FI ALLIED COMMUNITY RESOU

IX	Service Description	Provider	Rate	Unit	Duration	Amount
<b>Residential</b>						
	OW - Workers Comp 3 employees PT	OTHER	944.22	1.00	1.00	944
	SF - Therapy n/c by T-19 Counseling through Connection. \$71.02 hr, 2x mo. Sheryl Kemp adjusted budget last FY and made this change to St Funded.	OTHER	1,704.00	1.00	1.00	1,704
	Personal Support Second PS staff, up to 6 hours per week.	SELF HIRE	15.75	6.00 Hrs / Week	50.00 Weeks /Yr	5,292
	Personal Support First PS staff person. Up to 6 hours per week	SELF HIRE	16.22	6.00 Hrs / Week	50.00 Weeks /Yr	5,450
	SF - Other (Explain) \$500 for personal support /IHS to State funded for 2 weeks while in rehab facility.	OTHER	500.00	1.00 Unit	1.00 Duration	500
	OW - Activity Fee - Employee For staff to accompany consumer to rec events, movies, dining, etc	OTHER	349.00	1.00	1.00	349

# What are Cost Standards and Cost Guidelines?

- ▶ **Cost Standards:** The cost standards were created to let individuals know what can be included in an IP-6 Budget. The cost standards provide parameters to ensure appropriate use of state funds and that expenditures submitted for federal reimbursement are approved in the Home and Community Based Waivers.
- ▶ **Cost Guidelines:** The cost guidelines outline the rates and cost caps that DDS and the Medicaid Waiver will allow payment for when looking at each service or support in the IP-6 budget. Sometimes these rates change, so it is important that the Broker uses the most recent version of the waiver rates and cost guidelines when helping an individual create a budget.

# The Individual Budget Review

- ▶ Budgets are reviewed and updated annually and as needed by the CM/Broker (based on the continued or changing needs of the individual). This process is seamless when there are no changes from the previous year. This is referred to as a “Rollover”.



# Changes to the Line Items Noted in the Individual Budget?

- **Adjustments**: Line items may need to be changed based on the changing needs of the person, but the bottom line of the allocation remains the same.
  - **Amendments**: At times, an individual may need to request additional funds to support their needs. Additional funding must be requested, approved, and entered into the overall allocation by PRAT; then, the CM/Broker must enter the additional supports into the Individual Budget
- 

# Individual Budget Authorization Process

- **Approval Process** - The budget is approved by a Case Management Supervisor, then finally authorized by the DDS Resource Management Division. (This division manages and monitors the quality of all services that are purchased or provided through DDS funding).
- **Prior Approval** - Expenses outside of the Cost Standards and/or above the set rates, will not be authorized in an Individual Budget without prior approval and should only be considered when the supports do not fit into our waiver definitions. The CM/Broker may also need to help individuals negotiate an increase in an allocation and justify a requested expense. All of these things must occur before an Individual Budget can be authorized.



# Steps to Hiring & Managing Staff



Finding  
Employees

Choosing  
Employees

Offering  
the Job

Keeping  
Employees

Managing  
Staff

# FINDING EMPLOYEES

- One of the most challenging aspects of being an employer is finding good employees!
  - Develop an employee job description with needed qualifications.
  - Sponsoring Persons /EOR's/ Brokers can also help individuals learn effective marketing techniques and teach them how to use natural support systems to recruit employees.
- 

# Recruitment Techniques

- Word of Mouth
- Local Flyers (Colleges, places of worship, libraries, etc...)
- Paid Advertisements
- Internet Employment Services (“Rewarding Work”, “Care.com” or other employment services such as “Monster.com”).

DDS contracts with :

- **REWARDING WORK.COM**



# **REWARDING WORK.COM**

**Call toll-free :**

**1-866-212-WORK (9675) or**

**Email:**

**[eparker@rewardingwork.org](mailto:eparker@rewardingwork.org)**



Go to [www.RewardingWork.org/CT](http://www.RewardingWork.org/CT). Click on **“Register and hire someone today.”**

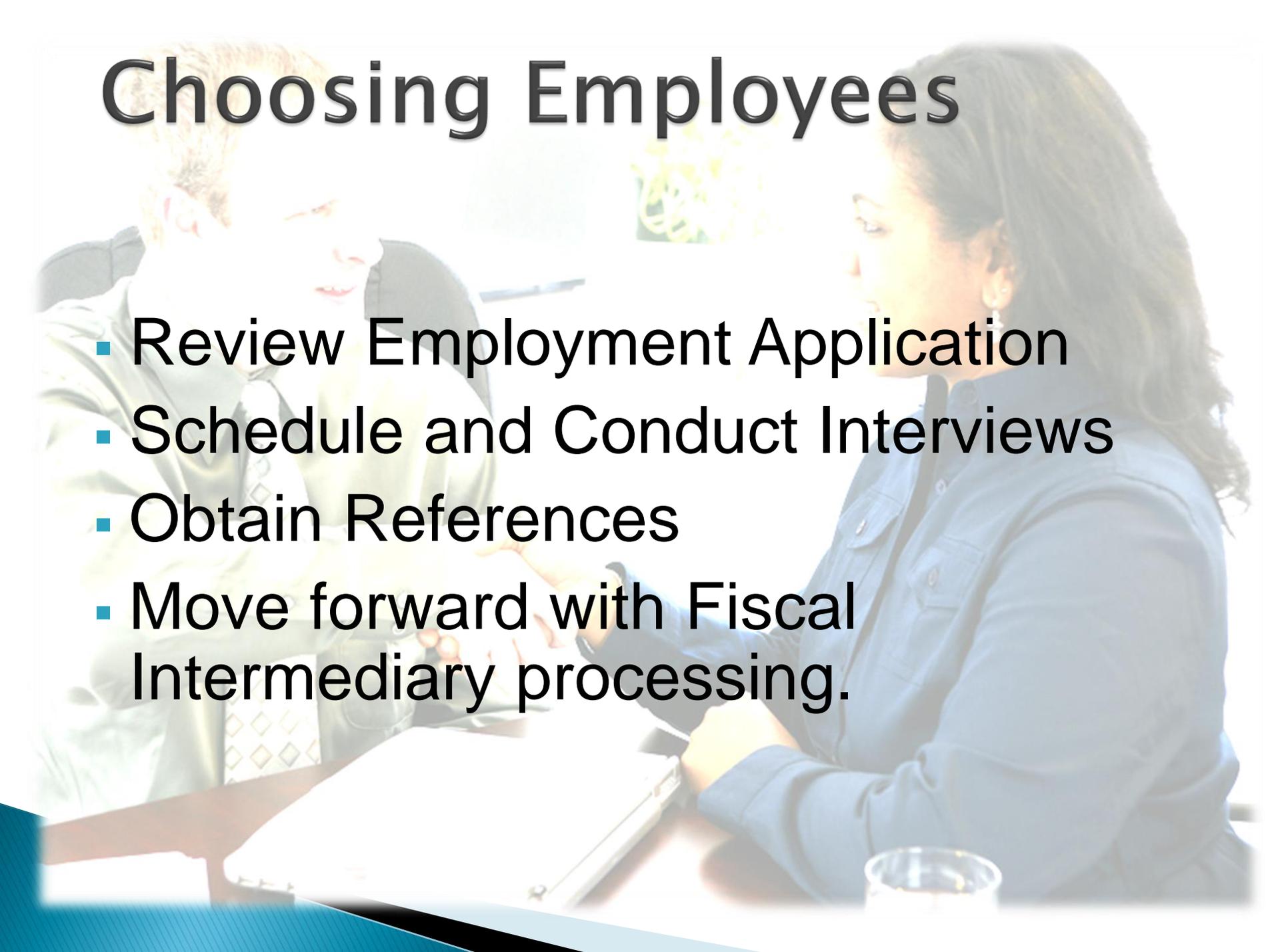
- ▶ Complete all required fields marked with an asterisk (\*).
- ▶ Remember to check that you agree to “Terms and Conditions.”
- ▶ Enter your email address as your username.
- ▶ Enter the Access Code associated with your DDS Region:

**North Region: 345231**

**South Region: 813732**

**West Region: 882733**

# Choosing Employees

A man and a woman in business attire are sitting at a desk, looking at a document together. The man is on the left, wearing a light-colored shirt and a patterned tie. The woman is on the right, wearing a blue button-down shirt. They are both looking at a document on the desk. The background is slightly blurred, showing a computer monitor and some office supplies.

- Review Employment Application
- Schedule and Conduct Interviews
- Obtain References
- Move forward with Fiscal Intermediary processing.

# Hiring Restrictions:

**Hiring Restrictions: Before an individual even begins to think about recruiting employees they need to know and understand whom they cannot hire.**

**Individuals cannot hire the following persons:**

- They cannot hire themselves
- They cannot hire anyone on the DDS registry or who has been convicted of a felony
- They cannot hire a spouse or civil union partner
- They cannot hire their sponsoring person
- Every family member or guardian considered for hire needs to complete a Family Hire Form with the CM and EOR/Sponsoring Person.

# Offering the Job

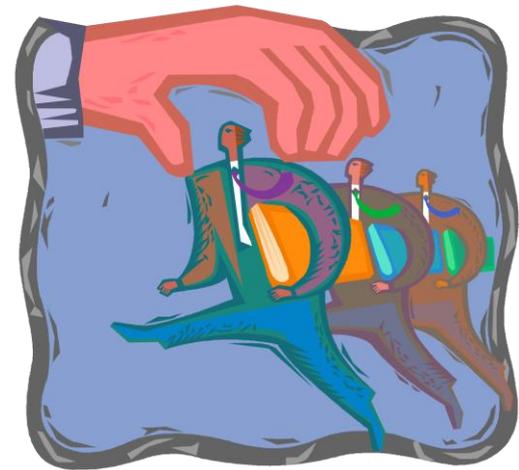
**Once the employer has identified a person they wish to hire, the Fiscal Intermediary will complete the following tasks prior to official hire:**

- **DDS Registry Checks**
- **Criminal Background Checks**
- **Motor Vehicle Checks**

# Hiring Employees

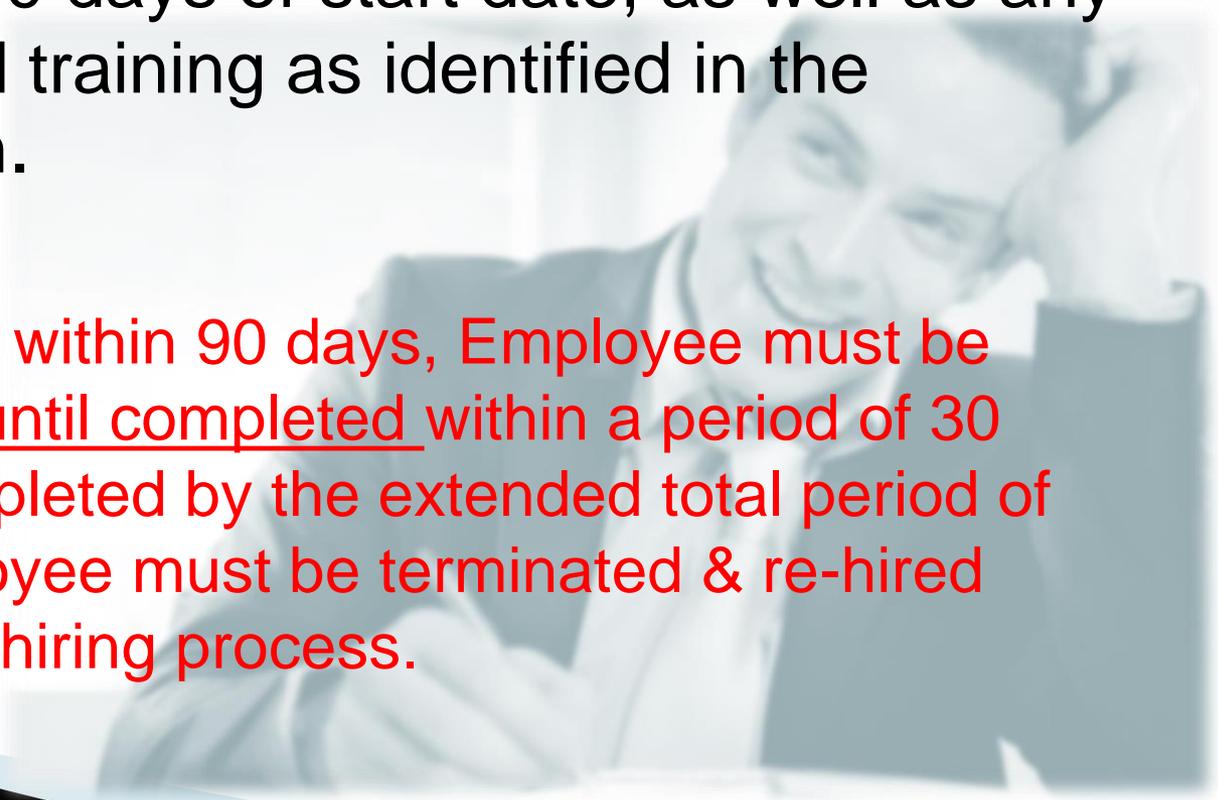
The Fiscal Intermediary will send the employee a “Pre-Hire Packet” consisting of the following documents that must be completed by the employee.

- State and Federal Forms
- Training materials
- False Claims Act
- DSS Provider Agreement
- Workers Compensation information



# Employer Responsibilities In the Hiring Process

- Complete Employer/Employee Agreement
- Ensure completion of College of Direct Supports (CDS) within 90 days of start date, as well as any other specified training as identified in the Individual Plan.
- **If not completed within 90 days, Employee must be placed off duty until completed within a period of 30 days. If not completed by the extended total period of 120 days, employee must be terminated & re-hired through original hiring process.**



# Managing and Keeping Employees

- Keep a list of Emergency Contacts and have a Back-Up Plan
- Assure that timesheets are accurate and include hours worked and types of waiver services provided as identified in the Individual Plan
- Follow process for reimbursements as identified in the Individual Plan and budget
- Submit Incident reports as required
- Provide Employee with Feedback
- Avoid stress, and celebrate success

# Individual Goods and Services Supervisor

**Individual Goods and Services waiver service may be used by an individual to hire an employee to assist with the day-to-day coordination of services and with day-to-day supervision of direct hire employees.**

Examples of acceptable activities to occur through the Individual Goods and Services waiver service include the following:

- ▶ \*Assistance with day-to-day supervision of staff to meet the outcomes outlined in the Individual Plan

- \*Training and assistance with daily oversight of staff including the completion of timesheets and documentation of services provided
  - \*Training and assistance with implementing an emergency back-up plan;
  - \*Training and assistance with accessing community services and day-to-day coordination of approved services;
  - \*A Self Direction Supervisor cannot be a legal guardian of a person or an immediate relative (mother, father or sibling).
- 

# **TIMESHEETS & DOCUMENTATION**

## BIWEEKLY EMPLOYEE TIMESHEET (see reverse for instructions)

<b>EMPLOYEE NAME</b> Alice Jones							<b>PHONE #</b> 555-1111					<b>SERVICE CODE</b> (See back)			
<b>CONSUMER NAME</b> John Doe							<b>PHONE #</b> 555-2222					<b>PAY PERIOD DATES</b> 9/21/09-10/4/09			
	<b>Mon</b>	<b>Tue</b>	<b>Wed</b>	<b>Thur</b>	<b>Fri</b>	<b>Sat</b>	<b>Sun</b>	<b>Mon</b>	<b>Tue</b>	<b>Wed</b>	<b>Thur</b>	<b>Fri</b>	<b>Sat</b>	<b>Sun</b>	<b>Total Hours Below</b>
<b>Date</b>	9/2				9/2			9/2				10/02			
<b>Time In</b>	4p				5p			8p				4p			
<b>Time Out</b>	m 8pm				m 8pm			m 8pm				m 8pm			
<b>Subtotal</b>	4				4			4				4			
<b>Time In</b>															
<b>Time Out</b>															
<b>Subtotal</b>															
<b>Total Hours</b>	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 2<sup>nd</sup>. I reviewed his check book with him on the 25<sup>th</sup> and the 2<sup>nd</sup> 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](mailto: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



# When it Doesn't Work...

- **Voluntary Separation**
- **Terminating Employees**



# The Heart of the Matter



- People are in control of their own lives
- People determine their supports and services and actively participate in building their future
- People are empowered to hire and manage their own staff and supports while working within a defined budget
- Case Managers/Brokers support the individual to live the life they choose