

Placement Information Form

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Overview

This form is used to capture information regarding the different types of placements that may be accommodated during treatment. Options are Community Employment, Situational Assessment, and Other which can be entered as free text to describe any other type of placement.

Applicable Staff

Supportive Employment staff will complete this form. All Avatar users will have access to view the form.

Usage

The form is client and episode specific and can be accessed from the Home View, within a client chart, or by following the menu path Avatar CWS/Mercy Modeled Clinical Forms/Mercy ID Forms/Placement Information Form.

The **Placement Date** field is required and can be a future date if appropriate. In the **Placement Type** area, selecting **Other** activates the free text field adjacent to the Type field and allows entering of any type of placement desired.

The following images show the information that can be captured for placements, if known. Enter as much data as possible/required by company policy.

Placement Date

04/26/2016 T Y

Placement Type

Community Employment Situational Assessment Other

Other Placement Type

Other



EMPLOYMENT INFORMATION

Start Date
05/03/2016 T Y

Hourly Rate 15.00

Hours per Week 20

Job Title
Title

Work Schedule
M-F
10A-2P

Employer Name/Address
Name

Employer Evaluation Schedule
Monthly

Supervisor Phone Number 888-888-8888

Supervisor FAX Number 888-888-8888

Supervisor Name/Title
Name

Natural Supports at Work

Supports

Probation Period

1 Month

POSITION SPECIFIC INFORMATION

Attendance/Call Off Procedure

Pro

Time Off Request Procedure

Time

Availability of Supervision (estimate percentage of time)

10

What are the important aspects of this position?

Speed

Repetition

Independence

Judgement

Thoroughness

Variability

Teamwork

Routine

Other

Other aspect of position

other

Other
activates the
free text field
below

What are absolute dos and donts for this position?

Do -
Don't -

Describe any reading, writing and math skills needed

skills needed

Describe any physical requirements needed

req. needed

Dress Code

code

▼

Additional Comments/Observations

Obs

When all desired information is entered, click the blue **Submit** button to enter the form into the record.

Tips & FAQ

Any selections made in error can be cleared by clicking the desired entry and pressing F5 on the keyboard.

Technical Information

Menu Location (Avatar CWS/Mercy Modeled Clinical Forms/Mercy ID Forms/Placement Information

Form)

SQL Table(s) - MERCY.midspif

RAD Envelope (if applicable) - cws_c_midspif

Related Forms and Reports (data from one form feeds another report/form)

Posted by: **John Cookson** - Tue, Apr 26, 2016 at 4:03 PM. This article has been viewed 3304 times.

Online URL: <https://www.mercykb.com/article.php?id=51>