- Vista Adult Services Organization - Employment Services

Referral Screening and Evaluation Tool

Customer Name:	DOB:	Referral received on:
	Age:	
Form completed by:		Screening completed on:
Referred by:		
Relation to Customer:		

Basic Requirements

_					
Does the referred customer meet each Basic Admissions Criterion?		Yes	No	Additional Information:	
•	(Primary) Axis I diagnosis of an Autism Spectrum Disorder				
•	Immunizations acquired per Centers for Disease Control and Prevention (CDC) Recommendations (www.cdc.gov)				
•	Documented evidence of Mantoux test confirming free of Tuberculosis				
•	Customer/legal guardian assigned with competency to make fiscal and medical decisions (specify type of substitutive decision-making)				
•	Customer/legal guardian available for ISP team meetings, program collaboration and job support services				
•	Access to eligible funding stream				
-	Resides within 20 miles of Hershey				
•	Transportation available to/from prospective employer				
•	Supports in place for medical or mental health symptoms not directly associated with autism (specify type of supports)				
•	Ineligibility determination rendered by the Office of Vocational Rehabilitation unless school age student (OVR)				

<u>Individuals on the Autism Spectrum often exhibit symptoms as indicated in the table below.</u>

Do	omain:	Description:		
•	Communication modality and effectiveness			
•	Occurrence of aggression, self-injury or property destruction			
•	Occurrence of disruptive or problematic behaviors (self- stimulation, elopement, etc.) lending to individual not being available for employment			

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•	Dependence upon others to complete activities of daily	
	living (toileting, feeding, dressing, etc.)	
•	Dependence upon others to structure free time during	
	scheduled breaks or to maintain focus on assigned	
	work-related tasks	
•	Inability to learn within a small group setting	
•	Limited interests or hobbies that lend to employment	
	opportunities	
•	Risk behaviors when accessing community	
	environments	
	Total:	

Program Consideration Rubric

Concerns		Rubric Score	
	(highlight best descriptor)		
Responsiveness to Appointments	>30 mins	15-29 mins	<15 mins
Magnitude of Behaviors	Imminent Risk of	Moderate Risk of	No Risk of
	Injury	Injury	Injury
Magnitude of Health Concerns	Imminent Risk of	Moderate Risk of	No Risk of
	Emergency	Emergency	Emergency
Safety During Vehicular Transit	Imminent Risk of	Moderate Risk of	No Risk of
	Danger	Danger	Danger
Interactions with Community Members	Imminent Legal	Moderate Legal	No Legal Risk
	Risk	Risk	
Community Endurance	< 1 Hour Per	1-2 Hours Per	> 2 Hours Per
	Location	Location	Location
Community Locations	<2 Frequented	2-4 Frequented	>4 Frequented
	Locations	Locations	Locations
Environmental Arrangement	Significant	Moderate	Minimal
	Rearrangement	Rearrangement	Rearrangement
Instructional Control by Staff	Unresponsive to	Minimally	Responsive to
	Staff	Responsive to Staff	Staff
Total Scores			

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Summary of Screening Tool Results:				
Do	as the	rofori	red custo	omer meet the majority of admissions criteria?
	Yes		No No	If No, explain:
	103	_	140	ii ito, explaini
Wo	uld the	e refe	erred cus	tomer benefit from involvement in employment services?
	Yes		No	If No, explain:
		_	_	
				omer exhibit needs that may not be appropriate?
Ц	Yes	ш	No	If Yes, explain: