



## Vocational Rehabilitation | VR Best Practices Checklist



## ESRD Networks VR Best Practices Checklist

### Facility Operations

- Develop a comprehensive plan to promote VR (see [Building Quality of Life: A Practical Guide to Renal Rehabilitation](#) - employment module).
- Review your facility's policies and practices to determine if they are work-friendly:
  - Do you prioritize schedules for in-center dialysis, home training, and home dialysis clinics for people who work or attend school?
  - Do you and your staff encourage and support home dialysis options and refer patients to other clinics for options you don't offer?
  - Does your facility offer in-center dialysis treatments early in the morning, after 5 p.m. or overnight, and weekends?
  - Does your facility allow patients to use laptops and/or cell phones during dialysis?
  - Do doctors consult with the social worker before signing disability forms?
- Include rehabilitation themes in corporate websites, newsletters, and educational materials.
- Keep brochures and other materials on rehabilitation in public areas.
- Distribute information on rehabilitation resources to all patients.
- Encourage staff to attend rehabilitation seminars.
- Use the data from the network annual facility survey to set vocational facility goals and assess activities (see employment section in the [Unit Self-Assessment Manual for Renal Rehabilitation](#)).
- Collaborate with rehabilitation and vocational personnel in the community and educate them about dialysis patients' vocational needs.
- Educate employers and advocate for patients' jobs and needed workplace accommodations (job changes) as requested/needed.
- Include rehabilitation in patient assessments and plan of care forms.
- Collect and report patient rehabilitation status for patients ages 18 through 54 on the ESRD facility survey (CMS 2744) in CROWNWeb.
- Assess each patient's health-related quality of life (HRQOL).

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## Patient Care

Upon admission, meet with the patient and:

Encourage working patients to continue to work.

From day one, team members need to believe and let patients know they can work on dialysis. If patients have doubts, encourage them not to make any quick decisions, to take a leave of absence to get used to dialysis, and/or to ask for job accommodation. [The Family & Medical Leave Act \(FMLA\)](#) and [Americans with Disabilities Act \(ADA\)](#) protect dialysis patients.

Educate patients about the benefits of employment (see [Keeping Your Job When You Need Dialysis](#)):

- SSDI pays about 35 percent of what the average patient earns at work, less for those making a higher income.
- People on dialysis who work have less financial stress, are less depressed, have a higher physical functioning, less pain, and better general health and energy.
- People who work have fewer and shorter hospital stays – and live longer.
- People who work are more likely to get and keep transplants.

Discuss each patient's personal rehabilitation goals, including but not limited to:

- Employment/School
- Hobbies
- Physical activities
- Social activities
- Volunteering activities

Educate yourself and patients about employment support listed below for SSDI and SSI recipients (see the Social Security Administration (SSA) [Red Book](#) for explanations).

- SSI/SSDI: Subsidy and special conditions
- SSI/SSDI: Unsuccessful work attempt
- SSI/SSDI: Impairment-related work expenses (IRWE)
- SSI/SSDI: Plans to Achieve Self-Support (PASS)
- SSI/SSDI: Ticket to Work (TTW)
- SSI/SSDI: Continued payment under VR or similar program (Section 301)
- SSI/SSDI: Expedited reinstatement
- SSDI only: Trial work period (TWP)
- SSDI only: Substantial Gainful Activity (SGA)
- SSDI only: Extended period of eligibility (EPE)
- SSDI only: Unincurred business expenses (self-employment)
- SSDI only: Continuation of Medicare for persons with disabilities who work



- SSDI only: Medicaid buy-in (AK, OR, WA) for SSDI recipients
  - SSI only: Earned income exclusions
  - SSI only: Student earned income exclusions
  - SSI only: Property Essential to Self-Support (PESS)
  - SSI only: Payments for people who work – Section 1619(a)
  - SSI only: Reinstating SSI eligibility without a new application
  - SSI only: Medicaid while working – Section 1619(b) and state thresholds
  - Blind only: Substantial Gainful Activity (SGA) (higher)
  - Blind only: Blind work expenses
- Tell every working-age patient the care team believes they can work and will support their efforts.
- Before each plan of care meeting , ask patients:
- How satisfied are you with your current level of physical, social, and vocational activity?
  - How has your school, job or work status changed since the last time we talked?
  - If you went back to work, what would you like to do and what you need to get that job?
  - If you went back to school, what would you like to study and where? What would it take to do that?
  - What are your personal goals for returning to activities you enjoyed before you started dialysis?
  - What can our facility do better to support those goals?
  - Have you considered home dialysis or transplant that may work better with your goals?
- During each plan of care meeting , with the patient and rest of the interdisciplinary team:
- Use health-related quality of life (HRQOL) survey results (responses and scores) for care planning
  - Plan interventions to achieve patient’s rehabilitation goals
- In each quality assessment and performance improvement (QAPI) meeting with the team:
- Compare facility rehabilitation outcomes from the prior year, set improvement goals for the year and brainstorm interventions

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