

HAWAII DEPARTMENT OF HUMAN SERVICES – Division of Vocational Rehabilitation  
Supported Employment  
**MONTHLY PROGRESS REPORT**

Reporting Month and Year: January 2026Service Start Date in the Month: 1/4/2026Service End Date in the Month: 1/29/2026Vendor Company Name: ABC Vendor CompanyVendor Representative's Name: Rosalie RepresentativeVR Participant Name: Patty ParticipantVR Counselor Name: Jane CounselorDVR Purchase Order #: 07000003Total Hours on Purchase Order for SE: 48In-Person SE Hours Used During Reporting Month: 20Virtual/Remote SE Hours Used During Reporting Month: 4**SERVICE OBJECTIVES PROGRESS**

1. Enter the VR Participant's actual days of attendance for the reporting month.
2. State whether each objective is accomplished within the time anticipated in the Intake Plan.
3. Describe daily activities and services provided during this reporting period and any challenges/barriers/difficulties the VR Participant exhibits.

Enter VR Participant's actual hours of attendance for the reporting month:

Date	1	2	3	4	5	6	7	8	9	10	11
Start Time				12p		12p					
End Time				4p		4:15p					
Hours				4		4.25					
Location:	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input checked="" type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input checked="" type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R

Date	12	13	14	15	16	17	18	19	20	21	22
Start Time						2p			12pm		
End Time						6p			5pm		
Hours						4			5		
Location:	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input checked="" type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input checked="" type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R	<input type="checkbox"/> BIH <input type="checkbox"/> OI <input type="checkbox"/> V/R

Date	23	24	25	26	27	28	29	30	31		
Start Time		9a					1p				
End Time		11:45a					5p				
Hours		2.75					4				

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Location:	<input type="checkbox"/> BIH	<input type="checkbox"/> BIH	<input type="checkbox"/> BIH	<input type="checkbox"/> BIH	<input type="checkbox"/> BIH	<input type="checkbox"/> BIH	<input type="checkbox"/> BIH	<input type="checkbox"/> BIH	<input type="checkbox"/> BIH		
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	<input type="checkbox"/> V/R	<input type="checkbox"/> V/R	<input type="checkbox"/> V/R	<input type="checkbox"/> V/R	<input type="checkbox"/> V/R	<input type="checkbox"/> V/R	<input type="checkbox"/> V/R	<input type="checkbox"/> V/R	<input type="checkbox"/> V/R		

**Placement, Maintenance, and Transition Activities:**

## 1. Objective #1: Job Placement

Accomplished:

☒ Yes ☐ No ☐ In Progress

Describe daily activities and services provided during this reporting period: Vendor Representative called employer and discussed Patty being officially moved to new office location. Vendor Rep notified employer about potential accommodations needed when Patty's on the new job site.

Describe VR Participant progress and/or challenges/barriers/difficulties in achieving the objective: Patty was successfully placed at XY Office in Honolulu in the beginning of October but new office location was established at the end of the month. Patty will not have difficulty arriving to work given it is walking distance from Patty's home.

## 2. Objective #2: Job Maintenance

Accomplished:

☒ Yes ☐ No ☐ In Progress

Describe daily activities and services provided during this reporting period: Vendor Representative went to job site to discuss with employer how Patty was doing on the job in Honolulu. The employer disclosed the difficulty Patty was having with following instructions when in written format. Vendor Representative trained employer on how to communicate with Patty, so Patty can retain the information to carry out her job duties. Vendor Representative conversed with employer about adjusting the job role, so Patty can maintain focus and stay on task. Vendor Representative held a meeting at the job site with Patty and employer to discuss how the job is going. Employer stated instead of providing written instruction on the job site for learning new tasks, the employer is demonstrating the task a few times and then having Patty carry out the job task. Patty also let the SE Team know that their job coach also re-directs her if a task is not being completed accurately, and this has helped. Vendor Representative called VR Counselor to discuss Patty's progress and what was discussed at the meeting with SE Team and employer. VR Counselor and Vendor Representative talked about obtaining assistive technology to help Patty with her time management. Patty would benefit from a device that reminds her when to come back from a break. Patty has been having difficulty with returning back to work on time. VR Counselor stated that Patty will be provided with a device. Vendor Representative also let VR Counselor know that the job duties may need to be adjusted for this role for Patty to limit the use of typing on the computer given the database the employer uses is a bit complex for Patty. Patty can enter a new customer's information, but Patty struggles with updating notes after the customer has had their visit at the clinic. Recommendation is that Patty handles the greeting with the customer and entering the initial customer information, and the Vet Assistant will input additional customer notes if applicable. Vendor Representative met with employer to work with job duties adjustments in the role, so Patty can have better success. Vendor Representative met with Patty virtually and with Patty's mother to relay the adjustment of job duties where Patty will no longer be inputting client notes within the company's database. Patty and Vendor Representative met in-person at job site to discuss the new device Patty will be receiving to assist with scheduling reminders on when to get back to work from break. Vendor Representative worked with the employer and SE Team over zoom to discuss the implementation of the new device to alleviate late arrivals from breaks. Vendor Representative also told employer that Patty may need to be prompted to use the device to set reminders to come back to shift after break. Employer stated that simplified written instructions along with repetition in showing job duties has shown to be successful at the job site. The first couple of days with the new device has assisted with Patty arriving back to shift on time.

Describe VR Participant progress and/or challenges/barriers/difficulties in achieving the objective: Patty has been able to maintain employment at the job site. Patty will continue at the job site with support from their Long-Term Support.

## 3. Objective #3: Transition - Vendor Representative to Long-Term Support

Accomplished:

☒ Yes ☐ No ☐ In Progress

Describe daily activities and services provided during this reporting period: Vendor Representative virtually met with Patty, Patty's Mother, and Patty's RBT, Sarah. Vendor Representative discussed that Patty's Mother will be the Long-Term Support once Supported Employment services have ended. Vendor Representative met with Patty and Patty's Mother at the vendor's office location in Honolulu to discuss the transition of Patty's Mother as the long term support.

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Vendor Representative emphasized the continued use of the assistive technology and communication with employer.  
Patty's Mother confirmed she felt confident with this transition.

Describe VR Participant progress and/or challenges/barriers/difficulties in achieving the objective: Patty has  
an identified Long-Term Support and has successfully maintained employment for 90+ days.

4. Objective #4: \_\_\_\_\_

Accomplished:

☐ Yes ☐ No ☐ In Progress

Describe daily activities and services provided during this reporting period: \_\_\_\_\_

Describe VR Participant progress and/or challenges/barriers/difficulties in achieving the objective: \_\_\_\_\_

5. Objective #5: \_\_\_\_\_

Accomplished:

☐ Yes ☐ No ☐ In Progress

Describe daily activities and services provided during this reporting period: \_\_\_\_\_

Describe VR Participant progress and/or challenges/barriers/difficulties in achieving the objective: \_\_\_\_\_

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Describe any additional problems/issues that VR Participant is encountering: N/A

Describe concerns and/or recommendations: N/A

Vendor Representative Signature: Rosalie Representative Date: 1/30/26