# How to Complete the QIP Employment Survey

For Employment Service Providers

Department of Developmental Services

October 2025

DDS Department of Developmental Services

# TABLE OF CONTENTS

# SECTION 1: INTRODUCTION

This user guide provides instructions on how to submit data on 1) specialized trainings/certifications received by staff members who provide employment services, and 2) employment outcomes for individuals who received employment services. The survey will be administered via Qualtrics, an online survey platform. The Department of Developmental Services (Department) Office of Quality Assurance will send an email with a unique URL link to the identified contact person (e.g., administrator) for each agency. The URL link is unique and should not be used for any other agency.

## 1.1 Before Starting Data Entry

Gather information on 1) specialized training/certifications received by staff members who provided employment services during FY 2024-25, and 2) employment outcomes (i.e., paid internships, group supported employment, and individual employment) for individuals who received employment services during FY 2024-25. To facilitate the process, the Department has provided a worksheet that can be used to organize the data needed to complete this survey.

## 1.2 Entering Data into the Survey

The survey will include two sections: 1) Staff Trainings/Certifications, and 2) Employment Outcomes. In the first section, service providers will be able to enter the names and information for each staff member that provided employment services during FY 2024-25. In the second section, the survey will be pre-populated with identifying information on all individuals to whom employment services were provided during FY 2024-25 (based on POS authorizations). Data submission/reporting is required for each individual, even if the provider does not have their detailed information. Please note that the survey does not support the ability to go back through the survey. **We strongly encourage service providers to confirm the accuracy of their responses before proceeding to the next page.**

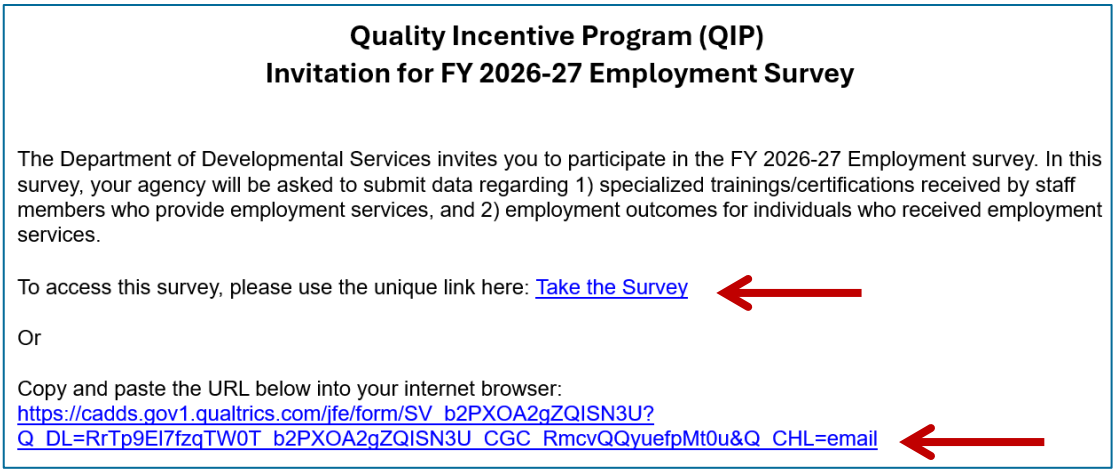
## 1.3 Contact Us

If you need help filling out this form, need to make changes to a survey that you have already submitted, or have questions regarding the QIP or incentive payments, please email QIPquestions@dds.ca.gov with the subject line “QIP – Employment FY 2026-27”. Please review the Employment Quality Measure directive and Quality Incentive Program (QIP) webpage for more information.

# SECTION 2: ENTERING DATA

## 2.1 Accessing the Survey

1) Open the email sent to you by The Department of Developmental Services Office of Quality Assurance (DDS OQA) and click on the link or copy and paste the URL into your internet browser.



**Quality Incentive Program (QIP)**
**Invitation for FY 2026-27 Employment Survey**

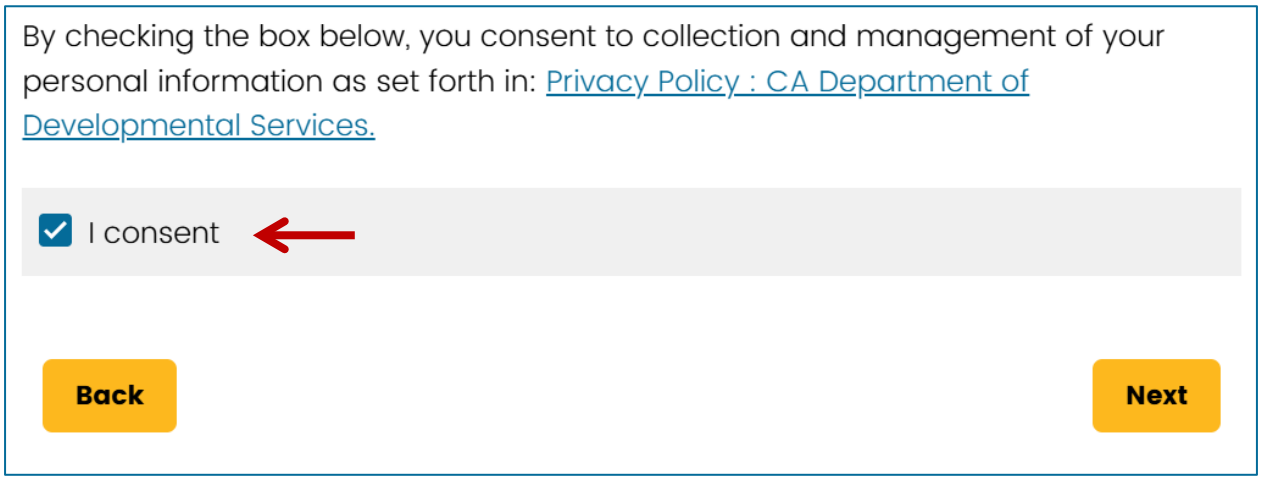
The Department of Developmental Services invites you to participate in the FY 2026-27 Employment survey. In this survey, your agency will be asked to submit data regarding 1) specialized trainings/certifications received by staff members who provide employment services, and 2) employment outcomes for individuals who received employment services.

To access this survey, please use the unique link here: Take the Survey

Or

Copy and paste the URL below into your internet browser:
https://cadds.gov1.qualtrics.com/jfe/form/SV_b2PXOA2gZQISN3U?Q_DL=RrTp9EI7fzqTW0T_b2PXOA2gZQISN3U_CGC_RmcvQQyuefpMt0u&Q_CHL=email

2) Read through the Introduction and Data Confidentiality Statement. Once you have read through the Data Confidentiality Statement, you must select "I consent" to proceed to the survey questions.



By checking the box below, you consent to collection and management of your personal information as set forth in: Privacy Policy : CA Department of Developmental Services.

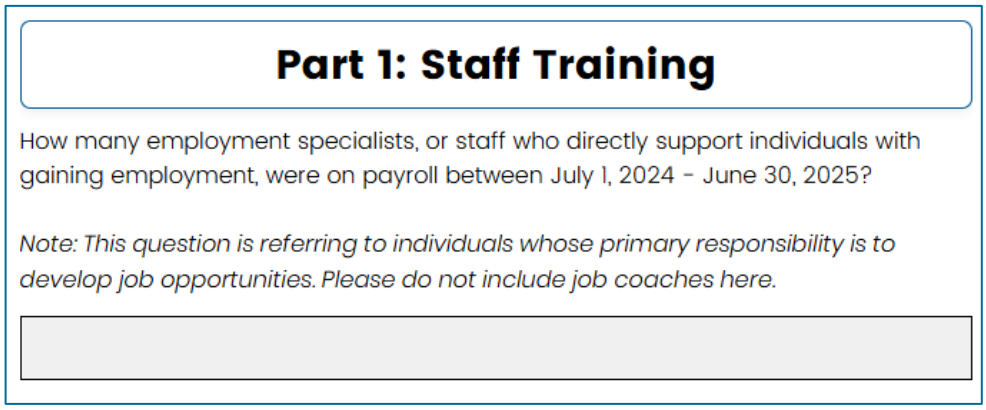
I consent

Back

Next

## 2.2 Entering Data – Staff Training

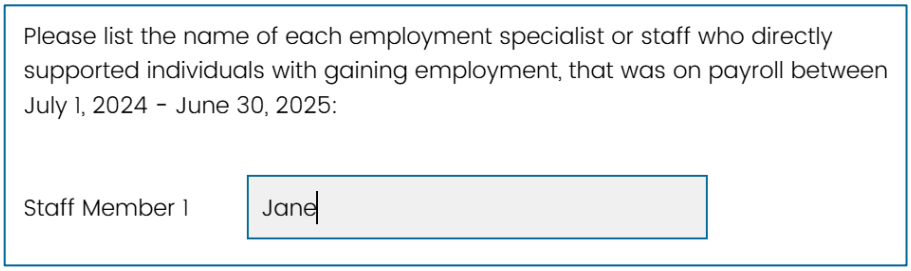
1) Upon starting the survey, you will be asked to enter the number of employment specialists or staff on payroll who directly supported individuals with gaining employment during FY 2024-25.



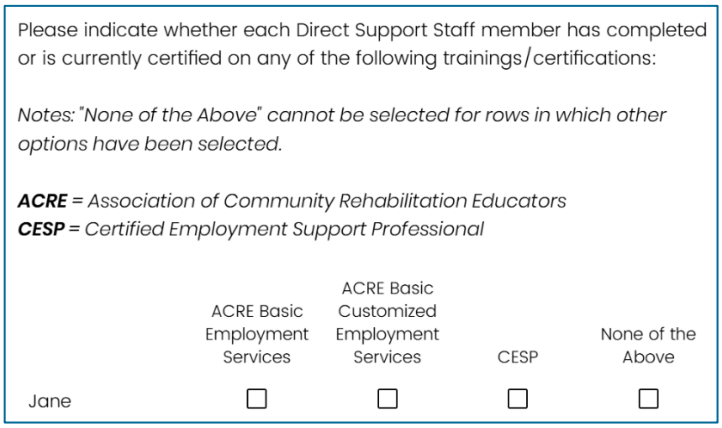

Please report the cumulative total for this question, regardless of the length of tenure or whether the employee is currently with your agency.

2) After you report the number of staff on payroll during FY 2024-25, you will next be asked to provide their names.

If the number of staff reported in the first question is greater than 100, you will be asked to provide the names of staff members across multiple questions.



3) In the final question of the Staff Training section, you will be asked to report on Association of Community Rehabilitation Educators (ACRE) trainings and Certified Employment Support Professional (CESP) certifications held by the staff members you named in the previous question.



Please indicate whether each Direct Support Staff member has completed or is currently certified on any of the following trainings/certifications:

*Notes: "None of the Above" cannot be selected for rows in which other options have been selected.*

***ACRE** = Association of Community Rehabilitation Educators*
***CESP** = Certified Employment Support Professional*

| | ACRE Basic Employment Services | ACRE Basic Customized Employment Services | CESP | None of the Above |
|---|---|---|---|---|
| Jane | ☐ | ☐ | ☐ | ☐ |

You may report on trainings/certifications that were received during this period as well as those that were still

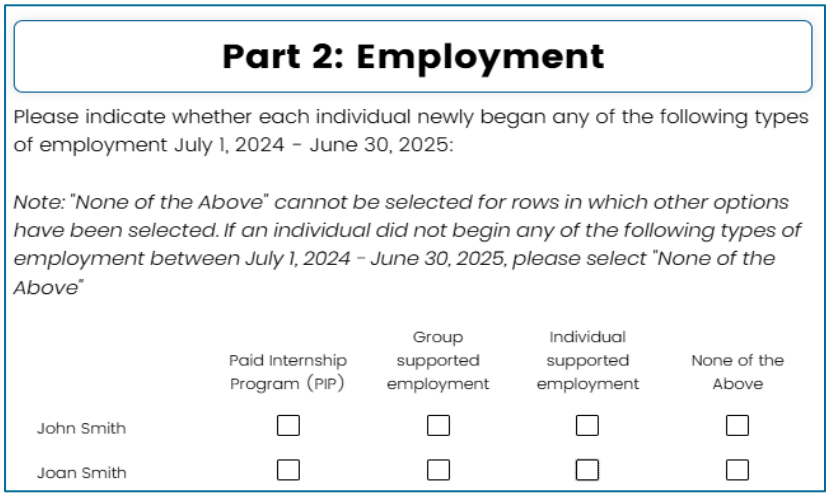
4) At this point in the survey, you will see a summary page of your responses from Part 1: Staff Training. It is important to confirm your responses before clicking "Next", because you will not be able to go back and change your responses after this point.

## 2.3 Entering Data – Employment

1) In the first question of the employment section, you will be asked to report employment outcomes for individuals for whom you provided employment services in FY 2024-25. For this question, please select **ALL** the types of employment each individual **STARTED** between July 1, 2024 and June 30, 2025.

This section will be pre-populated with the names of all the individuals with active POS authorizations for employment services during FY 2024-25.

*Note: You will only see individuals served under the specific Vendor ID associated with your survey link.*



**Part 2: Employment**

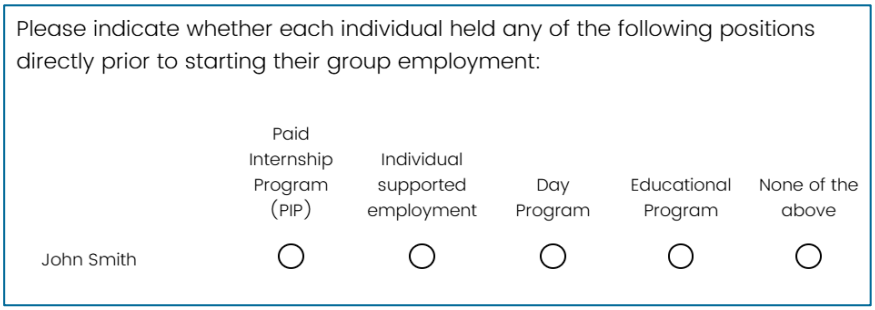
Please indicate whether each individual newly began any of the following types of employment July 1, 2024 - June 30, 2025:

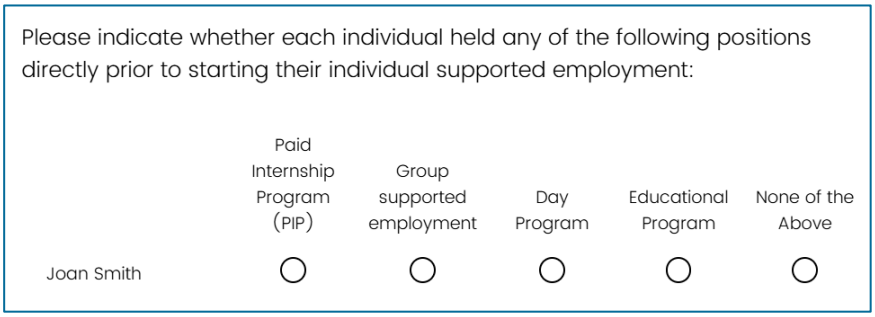
*Note: "None of the Above" cannot be selected for rows in which other options have been selected. If an individual did not begin any of the following types of employment between July 1, 2024 - June 30, 2025, please select "None of the Above"*

| | Paid Internship Program (PIP) | Group supported employment | Individual supported employment | None of the Above |
|---|---|---|---|---|
| John Smith | ☐ | ☐ | ☐ | ☐ |
| Joan Smith | ☐ | ☐ | ☐ | ☐ |

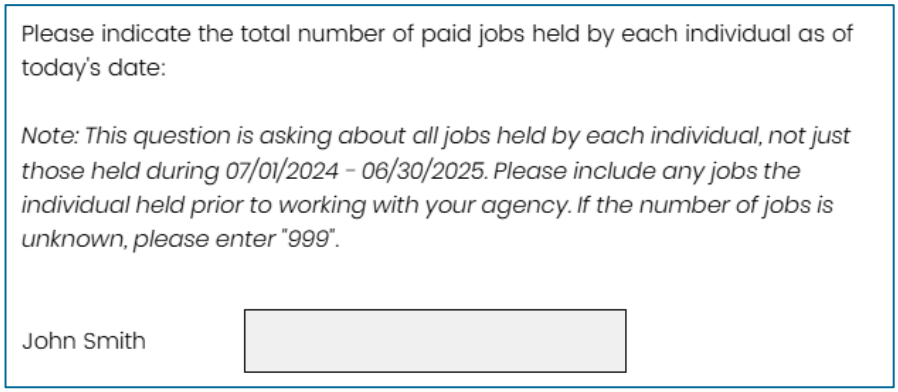
**2)** If you indicate that an individual started either **group supported employment** or **individual supported employment,** you will then be asked to report the type of position (if any) held by the individual **directly prior** to starting their group/individual supported employment position.

Report the most recent position held by each individual prior to beginning their new employment.



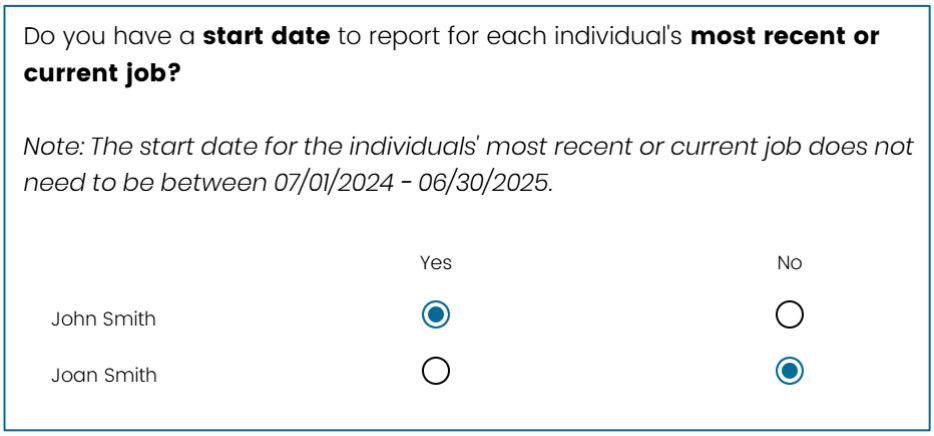

**3)** You will next be asked to report the **total number of paid jobs** held by each individual, to the best of your knowledge. Please enter the number of paid jobs you are aware of, including jobs held prior to working with your agency, if known.



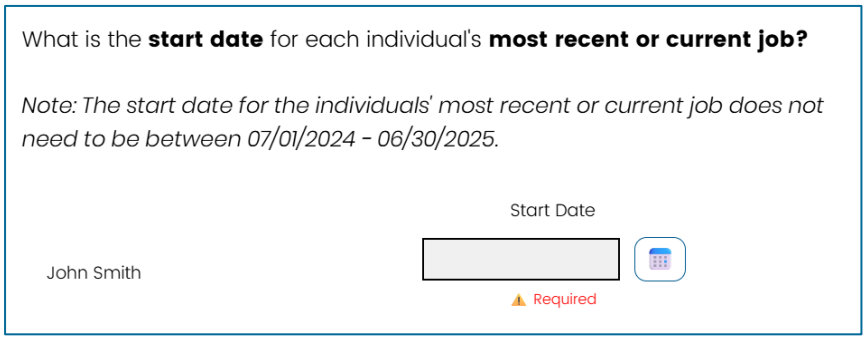

Include all known paid positions in the total number of jobs. If the number of jobs is unknown, including at your own agency, enter "999".

**4)** Next, you will be asked whether you are able to report the start date for each individual's most recent or current job.

Steps 4 – 7 will only be shown for individuals for whom you report 1 or more jobs in Step 3



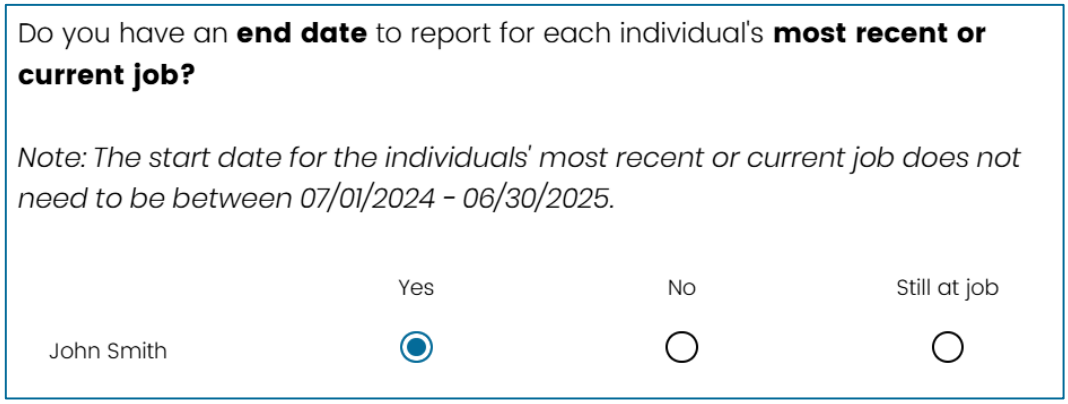

**5)** If you indicate that you have a start date to report, you will then be asked to report the start date.



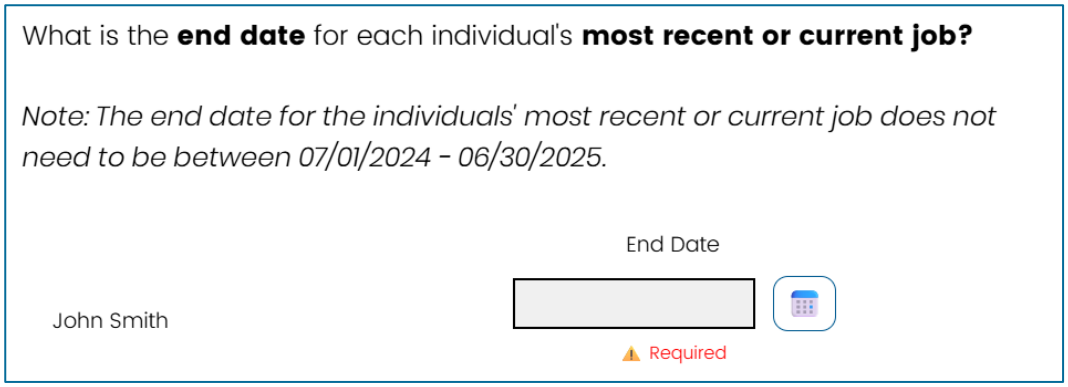

If you do not know the exact start date, please use the first day of the month that the individual started their position.

**6)** If you indicate that you have a start date to report, you will then be asked whether you can report an end date.

# SECTION 3: REVIEW AND SUBMIT

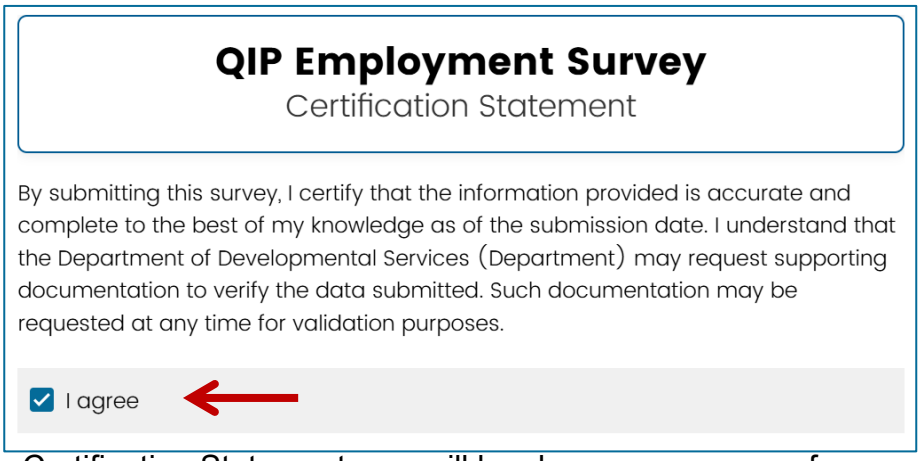



**7)** If you indicate that you have an end date to report, you will then be asked to report the end date.

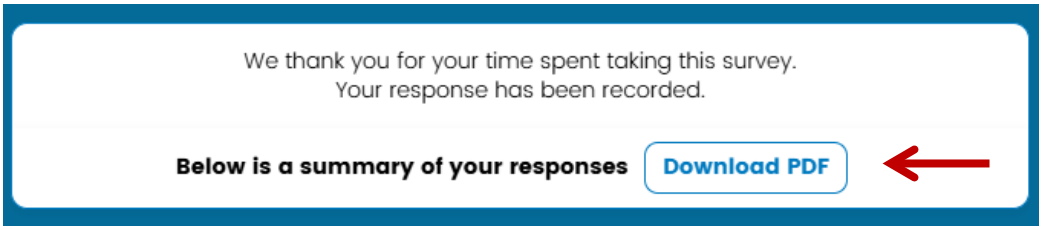



**8)** At this point in the survey, you will see a summary page of your responses from Part 2: Employment. It is important to confirm your responses before clicking "Next", because you will not be able to go back and change your responses after this point.

1) Once you have completed the reporting for each individual, you will be shown the Certification Statement. You must select “I agree” and click on the Next button to submit your responses.




2) Following the Certification Statement, you will be shown a summary of your responses. You may retain a copy of these responses by clicking on the “Download PDF” button. If you believe you have made an error in your responses, please email QIPquestions@dds.ca.gov with the subject line “QIP – Employment FY 2026-27”.



# QUESTIONS?

**Email:** QIPquestions@dds.ca.gov