

1. **Individual:** 18 year old female
2. **Location:** Trumbull County- Cortland
 - **SSA Contact:** Stephanie Blakeley 330-652-1116 x162
 - **Funding Source:** I/O Waiver
3. **Hours Needed:** M-F 10am-5pm- shared service 1:2 ratio, No Sunday's
4. **Anticipated Start Date of Services:** ASAP
5. **Service(s) Needed:** HPC
6. **Essential service preferences:** Looking for staffing to provide services in home for client and her brother (shared services)

Additional Information:

- **Supervision Level:** *Constant Visual*
- **Medical/Medication/Health:** Client has a seizure disorder. Does require administration of Emergency seizure medications, all other medications are handled by natural supports
- **Behavioral/Psychiatric:** *N/A*
- **Hygiene/ADL/Personal Care:** Requires total support and some physical assistance with all ADL's
- **Mealtimes/Cooking/Household Maintenance:** Requires total support
- **Money Management:** Requires total support
- **Transportation:** Requires total support
- **Mobility/Transfers/Positioning:** Independent but physical assistance with transfers
- **Equipment needs/accessibility needs:** I-pad to communicate in school , depends, stair railings, May need to utilize a wheelchair or another assistive device to help her ambulate after having a seizure.
- **Communication:** Non-verbal -uses a combination of gestures, pointing, sounds, showing, and the use of a communication app installed by her school district onto a district provided mini iPad to communicate her wants and needs. She is able to say a few words and shake her head "yes" or "no" to simple questions.
- **Current living or day program/employment arrangement:** Lives at home with her mother and siblings
- **Forensic supports/Criminal background:** None

Provider Information:

- a. **Specific provider skills/knowledge/training requests:** Experience working with non-verbal individuals
- b. **Type of provider requested:** HPC Waiver provider
- c. **Location of Services:** In home