

1. **Individual:** Male Child, age 11
2. **Location:** Mineral Ridge, Trumbull County
3. **SSA Contact:** Sarah Rudd, SSA Sarahrdudd@tcbdd.org 330-652-1116 ext. 130
 - Funding Source: Enrolled on I.O. Wavier
4. **Hours Needed:** 40 hours a week with Medical Add on: Typical schedule

Monday	8am-5pm
Tuesday	8am-5pm
Wednesday	8am-5pm
Thursday	8am-5pm
Friday	8am-5pm
5. **Anticipated Start Date of Services:**
6. **Service(s) Needed:** Homemaker Personal Care (HPC) with Medical add on
7. **Essential service preferences:** HPC staff that is knowledgeable about g-tubes/seizure protocol. Someone who is experienced with very physically involved children.

Additional Information: He is non-verbal, but knows a couple signs. He loves to watch cartoons, especially Looney Tunes and Tom & Jerry. He also likes to push a ball, especially a beach ball back and forth at therapy. He loves to be rocked in a rocking chair.
8.
 - **Supervision Level:** He needs constant supervision and physical assistance for all care
 - **Medical/Medication/Health:** Tube feeding, medication management per g-tube, seizure management. ROM exercises daily. Suctioning as needed. **Would need delegated nursing services.**
 - **Behavioral/Psychiatric:** N/A
 - **Hygiene/ADL/Personal Care:** Bathing, dressing, total personal care
 - **Mealtime/Cooking/Household Maintenance:** Tube feeding, assist with changing his bed and keeping his room and bathroom clean. He does not eat by mouth, except pleasure feeds of pureed foods.
 - **Money Management:** None (completed by family)
 - **Transportation:** N/A
 - **Mobility/Transfers/Positioning:** assist with all transfers, wheelchair use. Needs assistance with positioning. Wears orthotics
 - **Equipment needs/accessibility needs:** Wheelchair, stander, Adaptive chair, recliner chair, bath chair, orthotics
 - **Communication:** Nonverbal, uses a couple signs
 - **Current living or day program/employment arrangement:** lives with parents and brother in a one story home. Very clean home, two small dogs, will be doing online schooling this year.
 - **Forensic supports/Criminal background:** no issues
9. **Provider Information:**
 - a. **Specific provider skills/knowledge/training requests:** tube feeding and seizure management
 - b. **Type of provider requested:** Agency or independent
 - c. **Location of Services:** In Home care