

1. **Individual:** 28 year old female.
2. **Location:** Trumbull County
3. **SSA Contact:** Jennifer Baer JenniferBaer@tcbdd.org (330) 652-1116 ext. 161
4. **Funding Source:** IO Waiver
5. **Hours Needed:** Monday, Wednesday, Friday 8am-4pm and Saturday 10am-5pm
6. **Anticipated Start Date of Services:** ASAP
7. **Service(s) Needed:** HPC & HPC Transportation
8. **Essential service preferences:**
 - **Additional Information:** WIAT III Full scale IQ is 40
Significant delays in cognitive abilities fine and gross motor, adaptive behaviors and expressive communication, Cerebral Palsy- 1-2 person lift or-Hoyer Lift, wheelchair, lives with boyfriend who is on a level one waiver who is considered a natural support-he is able to help with lifting when at home
 - **Supervision Level:** Auditory and physical assistance as needed
 - **Medical/Medication/Health:** Cerebral Palsy, medications given by natural supports, may needs transported to doctor's appointments, or phone calls made to doctors on her behalf
 - **Behavioral/Psychiatric:** has had behavior plan in the past, attention seeking behaviors
 - **Hygiene/ADL/Personal Care:** requires total physical assistance with hygiene and in the restroom, Hoyer lift recommended
 - **Mealtime/Cooking/Household Maintenance:** requires total assistance for cooking and household maintenance, prefers food to be cut up, can eat independently
 - **Money Management:** has rep payee, does receive money for activities would need assistance with making purchases
 - **Transportation:** requires transportation to all activities and appointments
 - **Mobility/Transfers/Positioning:** requires total assistance.
 - **Equipment needs/accessibility needs:** Shower chair, Hoyer Lift, Wheelchair, Wheelchair Ramp
 - **Communication:** Verbal.
 - **Current living or day program/employment arrangement:** will begin attending ADS Tuesdays & Thursdays August 3rd
 - **Forensic supports/Criminal background:** N/A

Provider Information:

- a. **Specific provider skills/knowledge/training requests:** Hoyer lift
- b. **Type of provider requested:** HPC & HPC Transportation
- c. **Location of Services:** Trumbull County