

1. **Individual:** 15 year old female
2. **Location:** Trumbull County
  - **SSA Contact:** Stephanie Blakeley 330-652-1116 x162/stephanieblakeley@tcbdd.org
  - **Funding Source:** I/O Waiver
3. **Hours Needed:** M-F 2:30pm-9:30pm, Saturday & Sunday 11am-7pm
4. **Anticipated Start Date of Services:** ASAP
5. **Service(s) Needed:** HPC & HPC transportation
6. **Essential service preferences:** Looking for staffing to provider services in home and out in the community. Individual requires assistance with activities of daily living.

**Additional Information:**

- **Supervision Level:** *Constant Visual Supervision*
- **Medical/Medication/Health:** *Medication is administered before meals and during the day- currently handled by natural supports. Staff are required to administer emergency nasal spray for seizures if required.*
- **Behavioral/Psychiatric:** *Has proactive strategies and restrictive measures in her plan.*
- **Hygiene/ADL/Personal Care:** *Requires partial assistance*
- **Mealtimes/Cooking/Household Maintenance:** *Eats independently. Full assistance for meal preparation and cooking/purchasing of a meal when out in the community*
- **Money Management:** *Requires full assistance*
- **Transportation:** *Requires full assistance*
- **Mobility/Transfers/Positioning:** *Independent*
- **Equipment needs/accessibility needs:** *N/A*
- **Communication:** *Verbal, but at times needs prompting/coaching*
- **Current living or day program/employment arrangement:** *Lives at home with family and attends school*
- **Forensic supports/Criminal background:** *N/A*

**Provider Information:**

- a. **Specific provider skills/knowledge/training requests:** *Training in behavior support strategies. NO MALE STAFF.*
- b. **Type of provider requested:** *Independent/Agency*
- c. **Location of Services:** *Home & Community*