

1. **Individual:** 20 year old male
2. **Location:** Trumbull County
  - **SSA Contact:** Carolyn Fernberg 330-652-1116 x148
  - **Funding Source:** I/O Waiver
3. **Hours Needed:** M-F 3pm-7pm and Saturday/Sunday 8am-8pm Shared services 1:2 ratio with sibling
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 his sister (shared services)

**Additional Information:**

- **Supervision Level:** *Constant Visual*
- **Medical/Medication/Health:** Client has a seizure disorder. Does require administration of Emergency seizure medications if needed
- **Behavioral/Psychiatric:** Has a history of behaviors
- **Hygiene/ADL/Personal Care:** Requires physical assistance with some ADL's. Some total support.
- **Mealtime/Cooking/Household Maintenance:** Requires total support but can feed self independently
- **Money Management:** N/A
- **Transportation:** Requires total support
- **Mobility/Transfers/Positioning:** Independent, may need some physical assistance
- **Equipment needs/accessibility needs:** has an I-Pad/I-Phone that is able to use as a communication device but does not always utilize it.
- **Communication:** Non-Verbal uses a combination of sign language, gestures, and vocalizations to communicate.
- **Current living or day program/employment arrangement:** Lives at home with his mother and siblings, attends ADS 5x week
- **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