Meeting Summary

Name: Christine Burger
Date of Birth: 3/24/1968

Date Pre Packet Sent: 7/3/2025
Date of Meeting: 8/12/2025
Date Final Packet Sent: 8/13/2025

Meeting Type: Semi-Annual Meeting

Individual's Updates, Concerns, or Requested Discussion Topics: Chris' team asked her if she likes where she lives, her response was yes. She likes that she doesn't have to share a home with anyone else. Chris has been working on not sleeping as much. She has stayed up until 8pm a few nights lately. Chris has been enjoying puzzle books, watching game shows, going to the fair, out to eat, and visiting friends. She helps with chores around her room to the best of her ability.

Medical Updates or Concerns: Chris is current on all of her medical appointments and there are no concerns at this time.

ISSA: The team reviewed and agreed.

IAPP: The team reviewed and agreed.

Employment Updates or Concerns: Chris goes to STEP half days, four days a week. She completes various tasks such as folding towels, shredding paper, sweeping, and mopping. Chris stated she is making friends and enjoying her time at STEP. She also likes riding the bus to and from work. She brings a snack to work every day since she eats lunch at home.

List the scope of services to be provided to support the person's daily needs and activities: Staff set up and administer Chris' medications to her and follow medical provider's orders/recommendations. Chris is provided options for activities within the community, such as personal needs shopping, banking, eating out, and any other activity that she is interested in or would like to attend. Staff can provide transportation to and from any activity and event outside of her home that she would like to attend. Chris helps with chores around her home to the best of her ability. She helps with dishes, cleaning her bathroom, laundry, dushing, watering her plants, filling the bird feeders and other things.

Personal Outcomes: The team agreed to continue the behavior support plan.

Indicate how services are coordinated with other service providers and members of the support team or expanded support team to provide continuity of care for the person: The team will contact each other via phone, email, in person, or through letter.

Technology discussion of how technology might be used to meet the person's desired outcomes including any further research needed: The team agreed that there is no need for new technology at this time.

Does the person have rights restriction in place? No

Person Centered Planning:
Has this program provided services in response to your identified needs, interests, preferences and desired outcomes as specified in the CSSP and CSSP addendum? Yes

Has this program provided services to you in a manner that supports your preferences, daily needs, and activities and accomplishment of your personal goals? Yes

Has this program provided services to you consistent with the principles of person centered service planning and delivery that:
1. Identify and support what is important to you as well as important for you, including your preferences for when how and by whom direct support service is provided to you? Yes
2. Uses that information to identify outcomes you desire? Yes
3.Respects your history, dignity, and cultural background? Yes

Is this programs service setting the most integrated setting and most appropriate for you? Yes

Does your home need any adaptations to meet your needs? No

Are your financial resources adequate? Yes

Discussion/Explanation: Chris' primary way to communicate with others is through verbal English

How often would the team like to meet? Semi annually

How often would the team like to receive reports? Semi annually

How often would the team like to receive psychotropic medication monitoring data? As requested

Next meeting: Annual Meeting February 25th, 2026 at 10am at Chris' home

Christine Burger

Semi-Annual Meeting

August 12th, 2025

HEALEY HOMES COVER SHEET

NAME: Christine Burger
DATE OF BIRTH: 03/24/1968
ADDRESS: 308 E. 10th Street Blue Earth, MN 56013
PHONE: 507-526-2884

ADMISSION DATE: 03/06/2025
ADMITTED FROM: CRS Home in Eagle Lake

DIAGNOSIS: Seizure Disorder, Mild Cerebral Palsy (right side), Mild developmental delay, personality disorder, Depression, Anxiety Disorder, Osteoporosis, mild cataracts, photophobia visual discomfort light sensitivity, Ocular allergies, Constipation
ALLERGIES: Penicillin, Amoxicillin, Percocet, Seasonal, Ocular Allergy

GUARDIAN: Athena Williams - Wings Guardianship Services
ADDRESS: P.O. Box 2303
North Mankato, MN 56003
OFFICE PHONE #: 507-810-0857; Emergencies: 507-327-4947; Fax: 507-344-8803
EMAIL: awilliams@wingsmankato.com

CASE MANAGER: Amanda Ruby-Larson (Martin County Human Services)
ADDRESS: 115 W. 1st St. | Fairmont, MN
PHONE: 507-238-1574
Email: amanda.ruby-larson@fmchs.com

FAMILY CONTACT: Jessica Hueper
ADDRESS:
PHONE: (507) 525-5866
Email:

HEALEY HOMES CONTACTS
OWNER/OPERATOR: Charles Healey (507)382-9660
ADDRESS: 306 W. 10th Street Blue Earth, MN 56013

CHIEF ADMINISTRATIVE OFFICER: Danielle Healey (507) 508-5873

PRIMARY PHYSICIAN: Dr. Peller
ADDRESS: 1421 Premier Drive Mankato, MN 56001
PHONE: 507-625-1811

OPTOMETRIST: Dr. Eiselt
ADDRESS: 220 E. Main St. Mankato, MN 56001
PHONE: 507-345-5087

DENTAL: Dr. Sorenson
ADDRESS: 121 St. Andrews Ct. Mankato, MN56001
PHONE: 507-345-4259

PHARMACY:
ADDRESS:
PHONE:

PHYSICAL THERAPY: Travis Mattson
ADDRESS: 1230 E. Main St. Mankato, MN 56001
PHONE: 507-625-1811

PSYCHIATRIST: Dr. Danielle Wellmann
ADDRESS: 1400 Madison Ave. Suite 352; Mankato, MN 56013
PHONE: 507-388-1878

NEUROLOGIST: Dr. Reeves
ADDRESS: 1324 5th St. N. New Ulm, MN 56073
PHONE: 507-217-5000

OBGYN: Dr. Goerish
ADDRESS: 1230 E. Main St. Mankato, MN 56001
PHONE: 507-625-1811

THERAPY: Melissa Keltgen
ADDRESS: 1207 Caledonia St. Mankato, MN 56001
PHONE: 507-625-6311

HEALTH NEEDS RECORD

Name: Christine Burger

Completed by: Danielle Healey, CAO

Date: 7/10/2025

This program is responsible for meeting the health needs for the person as assigned in the coordinated service and support plan or the coordinated service and support plan addendum. It must be updated when changes occur in the coordinated service and support plan or coordinated service and support plan addendum.

Medication Administration and Assistance
Requirements for medication administration and assistance are found in Minnesota Statutes, sections 245D.05, subdivisions 1a, 1b, 2, and 4 and section 245D.051. This program will meet any medication administration and assistance needs as identified on the "Medical Authorization" form.

☐ Medication administration

Monitoring Health Conditions
This program must document the procedures for monitoring health conditions according to the written instructions of a licensed health professional and as assigned in the coordinated service and support plan or coordinated service and support addendum.

Health Condition	**Written Instructions for Monitoring the Health Condition from a Licensed Health Professional (Insert or attach to this form the written instruction)**	**Procedures the Program will Follow to Meet These Instructions**
Seizure Disorder	Medications as prescribed. Medical appointments with providers as requested by medical providers.	Healey Homes follows a structured procedure to ensure the safety and well-being of Chris. All staff receive seizure response training, covering types of seizures, first aid, medication administration, and post-seizure care. Preventative measures

		include ensuring medication adherence, maintaining a seizure-safe environment, and monitoring potential triggers. During a seizure, staff prioritize safety by timing the episode, protecting Chris from injury, avoiding restraint, and placing her on her side if possible. Emergency services are contacted if a seizure lasts longer than five minutes, occurs in water, involves injury, or leads to breathing difficulties. Post-seizure, Chris is monitored, reassured, and given time to recover, with all details recorded in the Seizure Log. Medication management is strictly followed, with documented administration and side effect monitoring. Chris' team and healthcare providers are kept informed, with regular reviews of the seizure action plan. Continuous training and documentation ensure adherence to best practices.
Mild Cerebral Palsy (right side)	Medications as prescribed. Medical appointments with providers as requested by medical providers.	Healey Homes supports Chris with her mild cerebral palsy affecting the right side. Ensuring her safety, independence, and well-being are top priority. Staff receive training on cerebral palsy care, mobility assistance, adaptive strategies, and emergency response. Daily support includes encouraging

		independence while assisting with tasks that may be challenging, such as dressing, grooming, and meal preparation. Healey Homes staff encourage Chris to walk daily to maintain muscle mass and flexibility. Staff assist with medication management and monitor for any changes in mobility, muscle stiffness, or discomfort. Emergency procedures include responding to falls or fatigue-related incidents and ensuring Chris' comfort and safety. Open communication with Chris' team and healthcare providers ensures coordinated care, while regular evaluations help update support plans as needed. Continuous staff training and adherence to best practices promote an inclusive and supportive living environment for Chris.
Personality disorder	Medications as prescribed. Medical appointments with providers as requested by medical providers.	Healey Homes ensures a stable, therapeutic, and supportive environment for Chris. Staff receive specialized training in managing symptoms, de-escalation techniques, emotional regulation strategies, and crisis intervention. Chris' daily routine focuses on structure and consistency to promote emotional stability, with staff encouraging healthy social interactions, personal responsibility, and

		constructive coping mechanisms. Medication adherence is monitored when prescribed, with side effects and behavioral changes documented. Conflict resolution strategies are implemented to reduce tension, and staff use trauma-informed care to create a safe and non-judgmental environment. In case of emotional or behavioral crisis, staff follow established crisis intervention protocols, providing immediate support and contacting mental health professionals if necessary. Continuous staff training, regular resident assessments, and adherence to mental health care best practices ensure a therapeutic and structured living environment for residents with personality disorders.
Depression/Anxiety Disorder	Medications as prescribed. Medical appointments with providers as requested by medical providers.	Healey Homes supports Chris with her depression and anxiety disorders, ensuring a safe, stable, and therapeutic environment. Staff receive specialized training in mental health awareness, de-escalation techniques, active listening, and supportive interventions. A structured daily routine is maintained to provide stability, incorporating activities that promote engagement, self-care, and emotional well-being. Staff monitor mood

		changes, social withdrawal, sleep patterns, and behavioral shifts, offering support and intervention as needed for Chris. Medication adherence is overseen when prescribed, with side effects and responses documented. In cases of heightened distress or crisis, staff follow established intervention protocols, providing immediate emotional support. Open communication with Chris' team, therapists, and healthcare providers ensures a coordinated approach to care.
Osteoporosis	Medications as prescribed. Medical appointments with providers as requested by medical providers.	Healey Homes supports Chris with her osteoporosis, ensuring her safety, bone health, and overall well-being. Staff receive specialized training in fall prevention, mobility assistance, nutrition management, and emergency response for fractures. Chris is encouraged to engage in low-impact weight-bearing exercises, such as walking or gentle stretching, to maintain bone strength and mobility. A calcium- and vitamin D-rich diet is provided, along with hydration monitoring to support bone health. Medication adherence is strictly followed, with staff monitoring for side effects or complications. In case of

		a fall or injury, staff follow emergency response protocols, ensuring immediate medical attention and post-injury monitoring.
Mild cataracts	Medications as prescribed. Medical appointments with providers as requested by medical providers.	Healey Homes supports Chris with her mild cataracts. Staff receive training in fall prevention, and adaptive assistance to help Chris navigate her daily activities. Chris attends her regular eye check-ups for monitoring cataract progression. Staff assist with daily activities if vision impairment affects tasks like reading, meal preparation, or mobility. Nutritional support includes a diet rich in antioxidants, vitamin C, and omega-3 fatty acids to promote eye health. Medication and eye drops, if prescribed, are administered and monitored for effectiveness. Fall prevention measures are implemented to reduce the risk of accidents. If vision deterioration progresses significantly, staff coordinate with healthcare providers for potential options.
Photophobia visual discomfort (light sensitivity)	Medications as prescribed. Medical appointments with providers as requested by medical providers.	Healey Homes supports Chris with her photophobia (light sensitivity), ensuring her comfort, safety, and overall well-being. Chris is encouraged to wear tinted glasses, sunglasses, or hats indoors and outdoors as

		needed. Staff assist with daily activities and mobility when light sensitivity affects normal functioning, ensuring Chris' comfort in various environments. Regular eye check-ups are scheduled to monitor any changes in vision or discomfort. If medications (such as lubricating eye drops) are prescribed, staff ensure adherence and monitor for side effects.
Constipation	Medications as prescribed. Medical appointments with providers as requested by medical providers.	Healey Homes supports Chris when she is experiencing constipation. Staff are always ensuring good digestive health, comfort, and well-being. Staff receive training in dietary management, hydration monitoring, physical activity encouragement, and medication administration to help prevent and manage constipation. Chris is provided with a fiber-rich diet, including whole grains, fruits, vegetables, and legumes, while limiting processed and low-fiber foods. Staff ensure Chris maintains adequate hydration, encouraging regular water intake and monitoring for signs of dehydration. Physical activity, such as walking or light stretching, is incorporated into daily routines to promote bowel motility. Staff track bowel movements using a Bowel

		Movement Log, noting frequency, consistency, and any signs of discomfort. If Chris experiences ongoing constipation, staff implement gentle interventions, such as increasing fiber intake, offering warm fluids, and encouraging movement. When necessary, over-the-counter stool softeners or laxatives are administered under medical supervision. If severe constipation, bloating, or pain occurs, staff notify healthcare providers for further evaluation.

Health Service Appointments
This program is assigned in the coordinated service and support plan or the coordinated service and support plan addendum to assist with or coordinate medical, dental or other health service appointments.

Type of Health Service Appointment	**Procedures the Program will Follow to Assist or Coordinate Health Service Appointments**
PRIMARY PHYSICIAN: Dr. Peller ADDRESS: 1421 Premier Drive Mankato, MN 56001 PHONE: 507-625-1811	Chris is seen at least yearly by her primary physician. Staff schedule and transport Chris to all of her appointments. They assist Chris in relaying the correct information to the medical professionals so the right care plan can be made. Staff bring a current list of medications and a medication visit form. All health appointments are discussed with Chris' team.
OPTOMETRIST: Dr. Eiselt ADDRESS: 220 E. Main St. Mankato, MN 56001 PHONE: 507-345-5087	Chris is seen at least yearly by her Optometrist. Staff schedule and transport Chris to all of her appointments. They assist Chris in relaying the correct information to the medical professionals

Type of Health Service Appointment	Procedures the Program will Follow to Assist or Coordinate Health Service Appointments
	so the right care plan can be made. Staff bring a current list of medications and a medication visit form. All health appointments are discussed with Chris' team.
DENTAL: Dr. Sorenson ADDRESS: 121 St. Andrews Ct. Mankato, MN56001 PHONE: 507-345-4259	Chris is seen at least yearly by her dentist. Staff schedule and transport Chris to all of her appointments. They assist Chris in relaying the correct information to the medical professionals so the right care plan can be made. Staff bring a current list of medications and a medication visit form. All health appointments are discussed with Chris' team.
PHYSICAL THERAPY: Travis Mattson ADDRESS: 1230 E. Main St. Mankato, MN 56001 PHONE: 507-625-1811	Chris is seen as needed by her physical therapist. Staff schedule and transport Chris to all of her appointments. They assist Chris in relaying the correct information to the medical professionals so the right care plan can be made. Staff bring a current list of medications and a medication visit form. All health appointments are discussed with Chris' team.
PSYCHIATRIST: Dr. Danielle Wellmann ADDRESS: 1400 Madison Ave. Suite 352; Mankato, MN 56013 PHONE: 507-388-1878	Chris is seen at least yearly by her psychiatrist. Staff schedule and transport Chris to all of her appointments. They assist Chris in relaying the correct information to the medical professionals so the right care plan can be made. Staff bring a current list of medications and a medication visit form. All health appointments are discussed with Chris' team.

Type of Health Service Appointment	Procedures the Program will Follow to Assist or Coordinate Health Service Appointments
NEUROLOGIST: Dr. Reeves ADDRESS: 1324 5th St. N. New Ulm, MN 56073 PHONE: 507-217-5000	Chris is seen at least yearly by her Neurologist. Staff schedule and transport Chris to all of her appointments. They assist Chris in relaying the correct information to the medical professionals so the right care plan can be made. Staff bring a current list of medications and a medication visit form. All health appointments are discussed with Chris' team.
OBGYN: Dr. Goerish ADDRESS: 1230 E. Main St. Mankato, MN 56001 PHONE: 507-625-1811	Chris is seen at least yearly by her OBGYN. Staff schedule and transport Chris to all of her appointments. They assist Chris in relaying the correct information to the medical professionals so the right care plan can be made. Staff bring a current list of medications and a medication visit form. All health appointments are discussed with Chris' team.
THERAPY: Melissa Keltgen ADDRESS: 1207 Caledonia St. Mankato, MN 56001 PHONE: 507-625-6311	Chris is seen at least monthly by her therapist. Staff schedule and transport Chris to all of her appointments. They assist Chris in relaying the correct information to the medical professionals so the right care plan can be made. Staff bring a current list of medications and a medication visit form. All health appointments are discussed with Chris' team.

MEDICAL EQUIPMENT, DEVICES, AIDS, TECHNOLOGY

This program is assigned in the coordinated service and support plan or coordinated service and support plan addendum to assist or administer the safe and correct use of any medical equipment, devices, adaptive aids, or adaptive technology according to the written instructions of your licensed health professional.

Type of Medical Equipment, Devices, Adaptive Aids, Adaptive Technology Used	Written Instructions from Licensed Health Professional (Insert or attach to this form the written instructions)	Procedures the Program will Follow to Meet These Instructions
Walker	Chris uses her walker as the doctor recommended.	Staff assist Chris in the daily care of her walker. Staff will remind her to use the walker carefully and to take care of it. Staff assist Chris in navigating uneven terrain and slippery surfaces. Staff check Chris' walker daily for damages / needed repairs. Chris is not always an accurate reporter, so staff will assist her in relaying information to medical professionals. Staff will bring a current medication list to medical appointments.
Gait Belt	Chris wears her gait belt whenever using her walker.	Staff assist Chris in the daily care of her gait belt. Staff assist Chris in navigating uneven terrain and slippery surfaces. Staff check Chris' gait belt daily for damages / needed repairs. Chris is not always an accurate reporter, so staff will assist her in relaying information to medical professionals. Staff will bring a current medication list to medical appointments.
Eye glasses	Chris will attend vision appointments as doctor recommended and wear her eye glasses as doctor recommended.	Staff assist Chris in the daily care of her eye glasses. Staff will remind her to put them in a designated safe spot when she is not wearing them.

		Staff assist Chris in making vision appointments and transporting her to those appointments. Chris is not always an accurate reporter, so staff will assist her in relaying information to medical professionals. Staff will bring a current medication list to medical appointments.
Wheel Chair	Chris attends all regular health appointments.	Staff assist Chris in the daily care of her wheelchair. Staff will remind her to use the wheelchair carefully and to take care of it. Staff check Chris' wheelchair daily for damages / needed repairs. Chris is not always an accurate reporter, so staff will assist her in relaying information to medical professionals. Staff will bring a current medication list to medical appointments.

Medical Appointment Type and Date	**Correspondence from Medical Provider**
03/10/2025 Mankato Marriage and Family Therapy Center	Continue to work on structure within the home, anxiety and participating in activities other than watching TV. New objective: Try something new at least once a week. Ex: New food, new activity, meeting new people, ect.
03/11/2025 Vision - Optometrist: Rasmussen	Routine eye exam. Continue with glasses.
03/26/2025 Mankato Marriage and Family Therapy Center Melissa Keltgen, MS, LMFT	CBT around trying new things. Normalized anxiety and provided psychoeducation around anxiety with exposure. Cope ahead for craft day and plan to reduce potential conflict.

04/07/2025 Mankato Marriage and Family Therapy Center Melissa Keltgen, MS, LMFT	Worked on emotion, identification and button up processing to notice thoughts, body sensations and action urges. Anxiety, anger and sadness explored. Released some sadness with tears. Chris is to practice expressing emotion names or how she is experiencing emotion with staff to help her navigate it instead of shutting down or isolating.
04/07/2025 Theresea Ludewig	Return 5/09/2025
04/15/2025 Dr. Pellar	No change in meds or labs.
04/18/2025 Psychiatrist Dr. Magnus	Less time in bed/sleeping. Risperidone possibly able to switch to 8 pm meds and maybe d/c. Monitor for agitation. Give bedtime meds at 8 pm.
04/21/2025 Mankato Marriage and Family Therapy Center Melissa Keltgen, MS, LMFT	Discussed working on staying up later - closer to 8 pm and not sleeping/laying in bed for 14 plus hours a day. Also discussed helping out with chores around the house and how that can help to make her feel less tired. Talked about wanting to build her relationships with family but worried about how that could look. Encouraged to work on reaching out to family more.
05/09/2025 OFC	Discontinue Fosamax. No other concerns.
06/05/25 Dental	6 month cleaning completed. Return 12/11/2025. No concerns.
06/24/2025 Psych w/ Dr. Magnus	Stable. Continue Celexa, Reperidone and Ativan.
7/15/2025 Theresa Ludwig	Eventy injection.
8/6/2025 Melissa Keitgen (Therapy)	Explored relationships with family and co-worker. Perspective taking ok today. Identified emotions of anxiety holding her back from talking with cousin. Normalized anxiety and looked at what makes communication hard and easy. Had the client talk about expectations for conversation how often she wants

	communication (every 2 weeks). Decided time to call is after supper.

Individual Abuse Prevention Plan (IAPP)

Person's Name: Christine Burger Date: 4/15/2025

Program: Healey Homes

Instructions: For each area, assess whether the person is susceptible to abuse by others and the person's risk of abusing other vulnerable people. If susceptible, indicate why by checking the appropriate reason or by adding a reason. Identify specific measures to be taken to minimize the risk within the scope of licensed services and identify referrals needed when the person is susceptible outside the scope or control of the licensed services. If the person does not need specific risk reduction measures in addition to those identified in the program abuse prevention plan, document this determination, and identify the area of the program prevention plan that addresses the area of susceptibility.

A. Sexual abuse

Is the person susceptible to abuse in this area? ✓Yes (if any area below is checked)
No

Lack of understanding of sexuality
Likely to seek or cooperate in an abusive situation
✓ Inability to be assertive
Likely to seek or cooperate in an abusive situation
✓ Victim history exists

Specific measures to minimize risk of abuse for each area checked:

Chris has a history of sexual abuse and may not always be able to express discomfort, which puts her at potential risk. To ensure her safety, staff will regularly check in with her regarding her comfort in various situations. If she appears distressed, staff will promptly assist her in leaving the situation and relocating to a safe, comfortable space.

Due to challenges with assertiveness, Chris may struggle to voice discomfort if a situation escalates beyond her comfort level. Staff should remain vigilant, proactively recognizing signs of distress and intervening when necessary.

Chris resides in a supervised setting and does not have unsupervised time in the community or at home. She prefers that male staff do not assist with personal care tasks such as bathing and changing. Over time, Chris becomes more comfortable with staff, making rapport-building essential to her well-being.

Any suspicion of sexual abuse will be reported and investigated immediately in accordance with established protocols.

Referrals made when the person is susceptible to abuse outside the scope or control of this program (Identify the referral and the date it occurred). N/A

B. Physical Abuse

Is the person susceptible to abuse in this area? ✓ Yes (if any area below is checked) No

✓ Inability to identify potentially dangerous situations
✓ Lack of community orientation skills
✓ Inappropriate interactions with others
✓ Inability to deal with verbally/physically aggressive persons
✓ Verbally/physically abusive to others
"Victim" history exists
Other:

Specific measures to minimize risk of abuse for each area checked:

Chris is moving to a new community and will require assistance navigating new environments. She has a history of verbal aggression in previous settings, though this is not common. When overwhelmed, she may struggle to express emotions and become verbally aggressive.

To support Chris, staff will engage her in discussions to help de-escalate situations and address her concerns. She attends therapy bi-weekly to develop emotional awareness and learn strategies for managing anger and resentment.

While in the community, staff provide supervision and assistance. Chris may not always recognize social cues indicating frustration or aggression from others. Staff will help her identify these cues and, if necessary, redirect her to a safer space to prevent potential injury.

Referrals made when the person is susceptible to abuse outside the scope or control of this program (Identify the referral and the date it occurred). N/A

C. Self Abuse

Is the person susceptible to abuse in this area? ✓ Yes (if any area below is checked) No

✓Dresses inappropriately

✓Inability to care for self-help needs
✓Lack of self-preservation skills (ignores personal safety)
Engages in self-injurious behaviors
Neglects or refuses to take medications
Other:

Specific measures to minimize risk of abuse for each area checked:

Chris requires staff assistance with daily living activities, including verbal support in selecting appropriate clothing for the weather. Staff will inform her of the daily forecast and provide guidance on suitable attire.

Chris requires staff assistance with various daily living activities. This includes help with getting into and out of the bathtub, cooking, maintaining cleanliness in her home, and completing tasks such as laundry. Staff will provide guidance and support to ensure her well-being and independence.

Chris has difficulty recognizing and responding to situations that may pose a risk to her safety and well-being. She may struggle with risk awareness, such as crossing the street without checking for traffic or engaging with unfamiliar individuals in unsafe ways. Additionally, she has challenges with personal safety and may not always recognize personal boundaries, making her vulnerable in social interactions. Chris also faces difficulties with physical safety, as she may not identify environmental hazards like hot surfaces, sharp objects, or slippery floors, which could lead to injury. In emergencies, such as fire alarms or medical situations, she may not instinctively know how to respond appropriately. Furthermore, she can be impulsive, sometimes engaging in actions without fully considering the consequences. Due to these challenges, staff provide supervision and proactive guidance to help Chris navigate her environment safely and make decisions that protect her well-being.

Referrals made when the person is susceptible to abuse outside the scope or control of this program (Identify the referral and the date it occurred). N/A

D. Financial Exploitation

Is the person susceptible in this area? ✓Yes (if any area below is checked) No

✓ Inability to handle financial matters

Other:

Specific measures to minimize risk of abuse for each area checked:

Chris has a representative payee who assists with managing her finances. While she has access to her funds at any time, she receives a personal needs check on a monthly basis. Her representative payee is responsible for paying all of her bills to ensure her financial obligations are met.

Referrals made when the person is susceptible to abuse outside the scope or control of this program (Identify the referral and the date it occurred).

E. Is the program aware of this person committing a violent crime or act of physical aggression toward others? Yes ✓ No

Specific measures to be taken to minimize the risk this person might reasonably be expected to pose to visitors to the program and persons outside the program, if unsupervised:

Referrals made when the person is susceptible to abuse outside the scope or control of this program (Identify the referral and the date it occurred).

Intensive Support Self-Management Assessment
Person Name: Chris Burger
Program Name: Healey Homes
Date of Service Initiation: 3/6/2025
Date of Assessment (within 45 days of service initiation): 7/1/2025

The following assessment must be based on the person's status within the last 12 months at the time of service initiation. An assessment based on older information must be documented and justified. Assessments must be conducted annually at a minimum or within 30 days of a request from the person or the person's legal representative or case manager. The results must be reviewed by the support team or expanded support team as part of a service plan review.

The information produced as a result of this assessment must describe the person's overall strengths, functional skills and abilities, and behaviors or symptoms. The assessment information provides the basis for identifying and developing supports to be provided to the person and methods to be implemented to support the accomplishment of outcomes related to acquiring, retaining or improving skills.

Use the program's Person-Centered Planning Checklist to assist in the assessment process and when developing supports and outcomes.

Health and Medical Needs Assessment of the person's ability to self-manage health and medical needs to maintain or improve physical, mental, and emotional well-being				
Assessment Area	Does the person need or want supports in this area:	Overall strengths, functional skills, and abilities in this area:	Behaviors and symptoms affecting the person's ability to self-manage needs in this area:	Does the person need or want to set an outcome related to acquiring, retaining, or improving skills in this area?
Allergies Penicillin, Amoxicillin, Percocet, Seasonal, Ocular Allergy	Yes	Chris knows that she has allergies. She is able to tell medical professionals some information at health appointments.	Chris may forget exactly what her allergies are. Staff need to verbally remind her of her allergies at appointments as needed.	No
Seizures	Yes	Chris knows that she has a seizure disorder. She knows that it is important to attend neurology appointments and to be safe in her surroundings.	Staff document Chris' seizures in a log and report them to her neurologist. Chris' team discusses any changes that are needed to her care plan. Staff	

			ensure that Chris' surroundings are safe and healthy for her.	
Choking	No	Chris is able to independently cut and chew her food.	N/A	N/A
Special Dietary Needs	No	Chris knows she should eat a healthy vitamin-enriched diet.	N/A	N/A
Chronic Medical Conditions	Yes	Chris is able to somewhat self manage her chronic medical conditions. She accepts assistance from staff when needed.	Staff assist Chris with her daily medications and her health appointments. They ensure she follows health professionals recommendations .	No
Self-Administration of Medication or Treatment Orders	Yes	Chris willingly takes her daily medications.	Staff assist Chris with her daily medications and her health appointments. They ensure she follows health professionals recommendations .	
Preventative Screening	Yes	Chris is cooperative at preventative screenings.	Staff set up and transport Chris to all of her preventative screenings. They relay all pertinent information to health professionals. Staff let Chris'	

			team know of any changes made.	
Medical and Dental Appointments	Yes	Chris is cooperative at medical and dental appointments.	Staff set up and transport Chris to all of her medical and dental appointments. They relay all pertinent information to health professionals. Staff let Chris' team know of any changes made.	
Other Health and Medical Needs:	NA	NA	NA	NA
Personal Safety Assessment of the person's ability to self-manage personal safety to avoid injury or accident in the service setting				
Assessment Area	Does the person need or want supports in this area:	Overall strengths, functional skills, and abilities in this area:	Behaviors and symptoms affecting the person's ability to self-manage needs in this area:	Does the person need or want to set an outcome related to acquiring, retaining, or improving skills in this area?
Risk of Falling	YES	Chris knows how to use her wheeled walker.	Staff ensure that Chris uses her wheeled walker and gait belt. They also ensure that she uses the wheelchair when she is gone for	No

			long periods of time so she does not become fatigued. Staff are trained in CPR and first aid should Chris have an injury.	
Mobility	YES	Chris knows how to use her wheeled walker.	Staff ensure that Chris uses her wheeled walker and gait belt. They also ensure that she uses the wheelchair when she is gone for long periods of time so she does not become fatigued. Staff are trained in CPR and first aid should Chris have an injury. Staff remind Chris to exercise and stretch for health and muscle strength.	No
Regulating Water Temperature	NO	Chris knows how to regulate her water temperature.	N/A	N/A
Community Survival Skills	YES	Chris is moving to a new community and will ask for guidance on where things are located.	Staff are with Chris at all times in the community and ensure her safety. They remind her of community skills.	No

Water Safety Skills	YES	Chris likes to be in water.	Staff are with Chris at all times around bodies of water. They ensure she has a proper fitting life jacket on and that she is following safety measures at all times. Staff are trained in CPR and first aid.	No
Sensory Disabilities	YES	Chris knows she should wear her eye glasses daily.	Staff make sure that Chris's glasses are clean and taken care of. They transport her to her vision appointments and relay all needed information. They report any changes to Chris' team.	
Self-Management of Symptoms or Behaviors				
Assessment Area	Does the person need or want supports in this area:	Overall strengths, functional skills, and abilities in this area:	Behaviors and symptoms affecting the person's ability to self-manage needs in this area:	Does the person need or want to set an outcome related to acquiring, retaining, or improving skills in this area?
Ability to self-manage symptoms or behavior that may otherwise result in an incident	YES	Chris knows she should take deep breaths and try to self regulate her behaviors when she becomes upset.	To support Chris, staff will engage her in discussions to help de-escalate situations and address her concerns. She attends therapy bi-weekly to	

			develop emotional awareness and learn strategies for managing anger and resentment.	

Healey Homes Goal Behavioral Support Plan

Name: Christine Burger

What does this person being served want to achieve? Chris wants to live a happy life and decrease her behaviors

Effective Date: 4/23/2025 Target Date: 2/28/2026

Objective: Chris will be supported to use one preferred coping tool (e.g., quiet space, "I feel" statements) when upset or overwhelmed each time she has a behavior 50% of all trials by 2/28/2026.

Methodology: Staff will document each behavior under the correct documentation placement and give a brief description of the behavior and what coping strategies, if any, Chris used for this behavior.

1. Monitoring Physical Complaints and Emotional Awareness

    - When physical complaints are voiced, staff will help Chris assess whether symptoms may be stress-related, documenting all instances. Staff will encourage Chris to move her body throughout the day as that will aid in the discomfort of stiffness.

2. Withdrawal/Isolation

    - When withdrawing or isolating, Chris will be offered gentle staff prompts or preferred sensory/calming items to re-engage. Chris will accept redirection or support to return to a task or activity. Chris and house manager will discuss how many withdrawals/isolations happened between each appointment with Chris's psychiatrist and therapist in the hopes of gaining insight and assisting in living a more social and active

lifestyle.

3. Verbal outbursts

    - When Chris is visually/verbally agitated about something; staff will give her ten minutes to calm down. Staff will then say again “it is time to ____”. If Chris is still agitated, staff will encourage her to complete a calming activity such as reading, listening to music, etc. Then try again in 30 minutes. If Chris is rude or yelling at staff, staff will look at Chris and say “I do not appreciate the way you are speaking to me. I will speak to you when you are calm.” Chris and the house manager will discuss how many verbal outbursts happened between each appointment with Chris’s psychiatrist and therapist in the hopes of gaining insight and assisting in living a more social and active lifestyle.

The physical environment in which the program will occur: Chris’s home; the community

Needed equipment and materials: Books, music, etc.
The techniques used to meet the person's preferred communication and learning styles: Chris’s preferred way to communicate is verbal English and she can read well

How is the data collected and charted, and how often does this occur: Staff will document every time a behavior happens

Outcome reviewed and authorized by:

Print name & title	Signature
Print name & title	Signature
Print name & title	Signature
Print name & title	Signature

PERSON-CENTERED PLAN -

(Created by Danielle Healey)

1. What are your goals for service outcomes? I don't know
2. What are your preferences related to:
    a. When do you wake up in the morning? 8am
    b. Time you go to bed? 7pm
    c. What are your favorite foods? Did not answer
    d. What are foods you don't like? Did not answer
    e. Whom do you prefer to have direct support provided from? Jessica and Brittany and Olivia
3. Do you take any medications? Yes Do you need help with them? Yes
4. What are some of your interests? Price is Right
5. Do you have any hobbies? No
6. What are things you like to do in your community? I don't know
7. Is there a new activity or skill you would like to learn? No
8. Do you have any special relationships? I dont know
9. Do you work in the community? Yes at STEP
10. Do you feel your relationships are supported by staff? Yes
11. What do you like about your home? It's quiet
12. Is there anything that bothers you about your home? No
13. Do you like the people you live with? N/A
14. Do you feel the house you live in is safe? Yes
15. Do you feel any rules in your house are unfair? No

16. Do you have a private place to go to at home? Yes

17. Do you have goals to meet at home? Yes

18. Do you want to work? Yes

19. Is there anything that bothers you at work? No

20. Do you have specific goals you have to meet at work? No

21. Do you feel that staff treats you with dignity and respect? Yes

22. Do you feel that your privacy is respected? Yes

23. Do you feel that the decisions you make are respected? Yes

24. Do you feel that you are given the opportunity to be as independent as possible? Yes

Progress Review Report

Name: Christine Burger	Date of Progress Review Report: 8/12/2025
Type of Progress Review Report: ___Annual _X__Semi-Annual ___Quarterly ___ Monthly	Date Progress Review Report was distributed to the team: 8/12/2025

How often has the team requested formal progress review reports (minimum of annually):

	Monthly		Quarterly	X	Semi-Annually
	Annually [minimum requirements]		Other: [as requested]		

Team request to receive the Progress Review Report: _X__ at the time of the team meeting; or ___ at least 5 days before the team meeting.

Outcome #1:

Outcome Statement (with measurable and observable criteria for outcome achievement): Objective: Chris will be supported to use one preferred coping tool (e.g., quiet space, “I feel” statements) when upset or overwhelmed each time she has a behavior 50% of all trials by 2/28/2026.
Summary of progress toward achieving this outcome: May- Chris displayed 4 behaviors. I recommend continuing this outcome. June- Chris displayed 7 behaviors. I recommend continuing this outcome. July- Chris displayed 8 behaviors. I recommend continuing this outcome.
Recommendation for implementing this outcome: ___X__ Continue _____ Change _____ Discontinue
Rationale for the recommendation: I recommend continuing this outcome as Chris would like to continue feeling non stressed and happy.

If there are additional outcomes, please attach additional page(s) as needed.

Date:	**Name:**	**Title**
		Person
		Legal Representative
		Case Manager

This report was reviewed and approved by:

_____

Name and signature of Designated Coordinator Date