

SUPPORT PLAN ADDENDUM – INTENSIVE SERVICES

Agency Details

	Name	Jackson County DAC
	Address	224 Main Street, PO Box 805, Lakefield, MN, US, 56150
	Phone Number	(507) 840-0644
	Email ID	jody_rizzi@jacksoncountydac.com

Client Details

	Name	Joel Katz
	Address	PRL 5- 602 22nd St., , Windom, MN, , 56101
	Phone Number	(507) 832-8310
	Email ID	jkatz@noemail.com

Overview

Date of Development	08/05/2025
Start Date	08/05/2025
End Date	01/31/2026
Name of the person completing the Document	Josie Veigel
Legal Representative	Joel Katz
External Case Manager	Andrea Henning - SWHHS

Services and Supports

Services to be provided	The DAC will provide Day Support Services (DSS) to Joel. DSS are Individualized, community-based training and support services that help a person develop and
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	<p>maintain essential and personally enriching life skills so they can access and participate in activities they prefer in their community. They may participate in unpaid activities such as social/leisure/recreation activities/opportunities that help maintain physical and mental well-being. These activities are for habilitation purposes and are not paid, as understood by Joel and his support team. Joel will also receive one-way transportation to and from the DAC.</p>
<p>Service details</p>	<p>In general, services will be provided 1-2 days a week between the hours of 9:00 a.m. - 3:00 p.m. with transportation being provided to and from the service.</p>
<p>Service providing</p>	<p>Direct Support Staff, Program Director & Supervisor, Activity Coordinator, and DAC Management including Designated Coordinators and Executive Staff when needed.</p>
<p>Service provided method</p>	<p>Staff provide services to Joel that supports his preferences, daily needs and activities, and accomplishments of his personal goals and service outcomes. Joel does not have a preference to the staff that work with him. Staff respect Joel's history, dignity, and cultural background. Staff provide support so that Joel has the self-determination to develop and exercise functional and age-appropriate skills, decision making and choice, personal advocacy, communication, and affirmation and protection of her civil and legal rights. Staff provide support in the most integrated setting available that supports, promotes, and allows inclusion and participation in the community as Joel desires that enables him to interact with nondisabled persons to the fullest extent possible and develops and maintains his role as a valued community member. Staff also provides opportunities to promote Joel's self-sufficiency as well as develops and maintains his social relationships and natural supports. Staff assist in providing a balance between risk and opportunity to support Joel in activities of his own choosing that may otherwise present a risk to his health, safety, or rights. Joel has the ability to verbally</p>

	<p>communicate his likes and dislikes to staff. Joel will speak with staff about his preferences for services and supports. Joel will meet semi-annually with his support team where he will to the best of his abilities actively participates in setting his preferences for how services and supports are provided. Joel will also complete a person-centered planning and service delivery checklist to better allow staff to understand his service preferences.</p>
Services coordinated across 245D licensed providers	Yes
Describe service coordinated across 245D licensed providers	Joel receives case management services through SWHHS.
Need for service coordination between providers	SWHHS, Andrea Henning, 507-537-6747, Case Manager; Jackson County DAC, Sandy Swanson (PD), 507-662-6156 or 507-840-1354, Day Services Program Director; Jackson County DAC, Josie Veigel (DC), 507-936-5608 or 507-327-5481, Designated Coordinator for Day Services Jackson County DAC.
Person require a restriction of their rights	No
Indicate what right(s) are restricted	NA
Can person use dangerous items	Yes
Any concerns or limitations	Joel may use scissors, microwaves, and other equipment while at the DAC with staff supervision. Joel is trained in the proper use of all equipment before he uses it
Emergency use of manual restraint	No
Opportunities to develop and maintain essential and life-enriching skills, abilities, strengths, interests, and preferences	Joel will have outcomes implemented to help him develop and maintain essential & life-enriching skills, abilities, strengths, interests and preferences. Staff and Joel will work on these outcomes to complete the outcomes together to encourage his ability to be independent and contribute to his independence. Staff also utilize teachable moments to develop self-preservation skills.
Opportunities for community access, participation, and inclusion in preferred	DAC staff will drive Joel to any community participation and preferred activities he wants

community activities	to do in the community during his DSS hours. DAC also offers activities in the community that Joel may choose to participate in through his DSS which could strengthen his personal relationships with other persons.
Opportunities to develop and strengthen personal relationships with other persons of the person's choice in the community	Staff offer ideas and choice to Joel to help him develop and strengthen personal relationships with other persons in the community. Joel also goes to community events within his community.
Opportunities to seek competitive employment and work at competitively paying jobs in the community	Joel has made the choice to not actively seek community employment.
What is Important to this person?	It is important for Joel to stay in contact with his mom, dad and brother, to attend community activities, have choices and staff that are fun to be around. It is also important for Joel to reside in a handicap accessible home to maintain his independence.
A discussion of how technology may be used to meet the person's desired outcomes has occurred	
Provide a summary that describes decisions made regarding the use of technology and a description of any further research that needs to be completed before a decision regarding the use of technology can be made	
The person's preferences for how services and supports are provided including positive support strategies and how the provider will support the person to have control of their schedule	Staff will provide services to Joel that supports his preferences, daily needs and activities, and accomplishments of his personal goals and service outcomes. Joel, staff, and his team advocate on his behalf his preferences, wants, and needs. Joel does not appear to have a preference to the staff that work with him. Joel will have the opportunity to participate in integrated activities such as going out to eat, going to the movies, etc. Staff respect Joel's history, dignity, and cultural background. Staff provide support so that Joel has the self-determination to develop and exercise functional and age-appropriate skills, decision making and choice, personal advocacy, communication, and affirmation and protection of his civil and legal rights. Staff provide support in the most

	<p>integrated setting available that supports, promotes, and allows inclusion and participation in the community as Joel desires that enables him to interact with nondisabled persons to the fullest extent possible and develops and maintains his role as a valued community member. Staff also provides opportunities to promote Joel's self-sufficiency as well as develops and maintains his social relationships and natural supports. Staff also assist in providing a balance between risk and opportunity to support Joel in activities of his own choosing that may otherwise present a risk to the person's health, safety, or rights. Joel will meet semi-annually with his support team where he'll participate in setting his preferences for how services and supports are provided.</p>
<p>Is the current service setting the most integrated setting available and appropriate for the person?</p>	<p>Yes</p>
<p>The person currently receives services in (check as applicable)</p>	<p>Day services</p>
<p>Provide a summary of the discussion of options for transitioning the person out of a community setting controlled by a provider and into a setting not controlled by a provider (residential services). Include a statement about any decision made regarding transitioning out of a provider-controlled setting.</p>	<p>Joel resides in a group home setting. His residential provider continues to support him in looking for independent living.</p>
<p>Provide a summary of the discussion of options for transitioning from day services to an employment service. Include a statement about any decision made regarding transitioning to an employment service.</p>	<p>Joel does not want to pursue community or in house employment at this time.</p>
<p>Describe any further research or education that must be completed before a decision regarding this transition can be made</p>	<p>NA</p>
<p>Does the person require the presence of staff at the service site while services are being provided?</p>	<p>Yes</p>
<p>If no, please provide information on when staff do not need to be present with this person (include community, home, or work)</p>	<p>Staff are on-site at all times when service recipients are present.</p>

and for the length of time. If additional information regarding safety plan is needed, also provide	
Services and Supports General Notes	The DAC will support Joel for whatever is necessary to meet his individual needs and preferences.

Health and Medical Needs - Allergies

Does the person need or want support in this area?	Yes
Overall Strengths, Functional Skills and Abilities in this area.	Joel is allergic to Sulfa. Joel has the overall strength to report that he has allergies, although he cannot report the specific allergy. Joel has the functional skill and ability to cooperate with staff and medical professionals in regard to his allergies.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	When Joel ingests Sulfa medication, he may exhibit the following symptoms: Skin rash, hives, itching. More serious reactions can involve swelling of the tongue/throat, difficulty breathing and even anaphylaxis.
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Health and Medical Needs - Seizures

Does the person need or want support in this area?	No
Overall Strengths, Functional Skills and Abilities in this area.	Joel has no diagnosed seizure disorder and is not at risk in this area.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Health and Medical Needs - Choking

Does the person need or want support in this area?	No
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Overall Strengths, Functional Skills and Abilities in this area.	Joel is able to feed himself and has no history of choking,
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Health and Medical Needs - Special Dietary Needs

Does the person need or want support in this area?	Yes
Overall Strengths, Functional Skills and Abilities in this area.	Joel follows a diabetic diet. Joel has the overall strength and ability to cut up his food into bite sized pieces and eat independently. Joel does not have the skill to follow his diabetic diet; he relies on staff family for carb counting.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	Joel has the ability to plan his meals but needs staff assistance with all meal preparations.
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Health and Medical Needs - Chronic Medical Conditions

Does the person need or want support in this area?	Yes
Overall Strengths, Functional Skills and Abilities in this area.	Joel has Mild Intellectual Disabilities, Spina Bifida with hydrocephalus, Dysthymic disorder, depression, and anxiety. Joel has the overall strength to take his medications to assist with his medical conditions. He has the functional skill and ability to be cooperative with following medical guidelines in regard to his chronic medical conditions with help and reminders from staff and caregivers.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	Staff watch for signs or symptoms of discomfort, or changes in behavior, swelling, and other changes to Joel's health and report concerns to his staff and caregivers.

Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No
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Health and Medical Needs - Self-Administration of Medication or Treatment Orders

Does the person need or want support in this area?	Yes
Overall Strengths, Functional Skills and Abilities in this area.	Joel is typically compliant when taking his medications. Joel has the ability to take his medications and will do so with visual or verbal reminders from caregivers.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Health and Medical Needs - Preventative Screening

Does the person need or want support in this area?	Yes
Overall Strengths, Functional Skills and Abilities in this area.	Joel has the overall strength to be compliant with medical professionals during preventative screenings. Joel has the ability to refuse procedures or participate willingly. Joel has the functional skill and ability to report concerns and answer questions for his medical providers.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A. Joel's residential staff schedule, provide transportation, and attend all appointments with him. They also assist him with any follow up as needed.
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Health and Medical Needs - Medical and Dental Appointments

Does the person need or want support in this area?	Yes
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Overall Strengths, Functional Skills and Abilities in this area.	Joel has the overall strength to be compliant with medical professionals during medical and dental appointments. Joel has the ability to refuse procedures or participate willingly. Joel has the functional skill and ability to report concerns and answer questions for him medical and dental providers.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A. Joel's residential staff schedule, provide transportation, and attend all appointments with him. They also assist him with any follow up as needed.
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Health and Medical Needs - Other Health and Medical Needs

Does the person need or want support in this area?	Yes
Overall Strengths, Functional Skills and Abilities in this area.	Joel has the overall strength to know he has doctor orders to cath every 2-3 hours, Joel has the ability to verbally let staff know when he needs to use the bathroom. Joel has the skill and ability to complete most of his toileting task himself, he will have his supplies in the bathroom cupboard staff will ensure Joel has gloves, his urinal and catheter supplies. Staff will give Joel his privacy during this process. Staff will empty Joels urinal clean/sanitize before putting it away. Joel may have a bowel movement and need assistance with cleaning up; staff will use the EZ stand lift for transfers in and out of his wheelchair and assist Joel with his needs, extra briefs and clothing will be kept at DAC to use as needed.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	Joel is unaware when he needs to have a bowel movement, he will have supplies and extra clothing at the DAC.
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Personal Safety - Risk of Falling

Does the person need or want support in this area?	Yes
Overall Strengths, Functional Skills and Abilities in this area.	Joel is non-ambulatory at this time and would fall without support from staff, railings, etc. Staff use the EZ Stander lift to transfer Joel in and out of his wheelchair. Joel has the overall strength to know that he is dependent on a wheelchair for mobility and will not stand or transfer without staff present and the necessary support. Joel does not have functional skill and ability to stand and bear weight and complete transfers independently. Joel has the functional skill and ability to tell staff if he needs assistance with transferring out of his wheelchair. Joel wears a seatbelt while in his wheelchair for safety. He has the functional skill and ability to unbuckle it for transfers and buckle it once seated. Staff are trained on proper use of the EZ Stander.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	Joel is aware he has no weight bearing restrictions at this time and will ask for assistance for all transfers when needed.
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Personal Safety - Mobility

Does the person need or want support in this area?	Yes
Overall Strengths, Functional Skills and Abilities in this area.	Joel has the overall strength to independently propel his manual wheelchair to travel through his environment. Joel has the functional skill and ability to utilize his manual wheelchair independently.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Personal Safety - Regulating Water Temperature

Does the person need or want support in this area?	No
Overall Strengths, Functional Skills and Abilities in this area.	Joel can regulate water temperature independently.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Personal Safety - Community Survival Skills

Does the person need or want support in this area?	Yes
Overall Strengths, Functional Skills and Abilities in this area.	Joel has the overall strength to know to utilize cross walks and to look both ways before crossing streets. Rodney has the functional skill and ability to utilize his electric wheelchair independently.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Personal Safety - Water Safety Skills

Does the person need or want support in this area?	Yes
Overall Strengths, Functional Skills and Abilities in this area.	Joel has the overall strength to swim independently and will need staffs' assistance to be lowered into the pool using a pool lift. Joel understands he should not go near pools/lakes without a staff present. Joel has the functional skill and ability to float/swim independently Joel also has the functional skill and ability to verbally request assistance from staff as needed when in or near water.

Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Personal Safety - Sensory Disabilities

Does the person need or want support in this area?	Yes
Overall Strengths, Functional Skills and Abilities in this area.	Joel has the overall strength to wear his glasses and clean them as necessary. Joel has the skill and ability to let staff know when his glasses are need of repair.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	When Joel does not wear his glasses, he may squint to read or look at something
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Personal Safety - Other Personal Safety Needs

Does the person need or want support in this area?	No
Overall Strengths, Functional Skills and Abilities in this area.	N/A
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Self-Management of Symptoms or Behaviors - Ability to self-manage symptoms or behavior that may otherwise result in an incident

Does the person need or want support in this area?	Yes
Overall Strengths, Functional Skills and Abilities in this area.	Joel has the overall strength to tell staff when he is upset or angry about something or if

	there is something bothering him. Joel has the skill and ability to report any issues or concerns he has to staff that may be making him anxious or upset. He listens to staff and can be redirected to calm down with verbal cues and given time alone.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	Joel can become easily frustrated or agitated. He may raise his voice and yell or threaten another person. Joel may remove himself from the situation as a means to calm down.
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Self-Management of Symptoms or Behaviors - Ability to self-manage symptoms or behavior that may otherwise result in suspension or termination of services

Does the person need or want support in this area?	No
Overall Strengths, Functional Skills and Abilities in this area.	N/A. Joel has no history of symptoms or behavior that may result in suspension or termination of services.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Self-Management of Symptoms or Behaviors - Other symptoms or behaviors that may jeopardize the health and safety of the person or others

Does the person need or want support in this area?	No
Overall Strengths, Functional Skills and Abilities in this area.	N/A
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Self-Management of Symptoms or Behaviors - Other Symptoms or Behaviors

Does the person need or want support in this area?	No
Overall Strengths, Functional Skills and Abilities in this area.	N/A Joel has no history of other symptoms or behaviors.
Behaviors and symptoms affecting the person's ability to self-manage needs in this area (state behavior):	N/A
Does the person need or want to set an outcome related to acquiring, retaining or improving skills in this area?	No

Health Needs

Health service responsibilities	N/A. Jackson County DAC is not responsible for meeting the health needs for this person. Health needs are not assigned to the Jackson County DAC in the Coordinated Service & Support Plan (CSSP) or Support Plan Addendum (SPA).
Health service assigned responsibilities	N/A
Assigned responsibility for medication assistance	
Information report to the legal representative/case manager	

Psychotropic Medication monitoring and use

Is person prescribed Psychotropic Medication?	Yes
Assigned responsibility of the Psychotropic Medication?	Yes
Describe target symptoms the psychotropic medication	Anxiety, Depression, Mood stabilizer.
Prescriber require documentation to monitor	No
Data according to the prescriber's instructions	N/A

Permitted Actions and Procedures

To calm or comfort a person	Yes
Explain calm or comfort details	Staff give Joel a "side" hug, "high fives", handshake and/or a touch on the shoulder to calm or comfort him.
Protect a person known to be at risk of injury due to frequent falls	Yes
Explain risk due to falls details	To protect Joel from the known risk or injury of frequent falls as a result of his Spina Bifida medical condition, staff will assist Joel as needed when he is transferring in/out of his wheelchair.
Person's completion of a task with minimal resistance	Yes
Explain minimal resistance task details	Staff may provide Joel hand-over-hand assistance with his needs to complete a task, if he doesn't resist.
To control person's behavior within 60 seconds of staff contact	Yes
Explain control behavior details	Staff may block or redirect Joel to prevent injury to self or others if Joel is kicking or hitting to keep him and others safe.
Person's behavior when the behavior does not pose a serious threat	No
Explain serious threat details	N/A
Provide medical treatment	No
Explain treatment details	N/A
Assist in safe evacuation	Yes
Explain assist evacuation details	In case of an emergency and Joel is in imminent risk of harm, staff will assist Joel in safely evacuating that location. This may include pushing Joel in his wheelchair to a safe location.
Restraint needed	No
Explain restraint needed details	N/A
Positive verbal correction	No

Explain verbal correction details	N/A
Temporary withholding	No
Explain temporary withholding details	N/A
Adaptive aids ordered by a licensed health professional	Yes
Explain adaptive aid details	Due to Joel's diagnosis of Spina Bifida and Type 2 Diabetes, he uses a manual wheelchair for mobility.

Staff Information

Additional requirements requested for staff	No
Specify requirements	NA
Medical needs that require a staff person	No
Staff Information General Notes	All staff are trained in CPR and First Aid.
For facility-based day services only – please indicate the staff ratio required for this person. Additional information on how this ratio was determined is maintained in the person's service recipient record	OTHER
If Other - Please specify	DAC provides a 1:1 or 1:2 for Joel for DSS.

Frequency

Frequency of Progress Reports and Recommendations	Semi-Annually
Frequency of service plan review meetings	Semi-Annually
Frequency of receipt of Psychotropic Medication Monitoring Data Reports	NA
Frequency of medication administration record reviews	NA
Incident or emergency occurring while services are being provided	
Frequency of receiving a statement that itemizes receipt	NA

Meeting Minutes

Meeting Minutes	<p>Joel admission meeting was held on 8/27/2025 @ 10:00am @ JCDAC in attendance was Joel Katz, Debbie Lopez (PS), Andrea Henning (CM) Josie Veigel (DC) & Sandy Swanson (PD). Outcomes will be implemented after initial planning meeting. The team reviewed the Admissions & Data sheet, Face Sheet, Support Plan Addendum, and IAPP. Signatures were obtained for the approval. Joel's mothers' phone number and address were added to the Admission & Data sheet, and face sheet as Joel's emergency contact. Joel stated that he is excited to start coming to the DAC. Joels family and his independence are important to him. Joel also enjoys playing chess, swimming, going for walks, and fishing. Joel is excited to be going to the Clay County fair on 9/10/2025. No rights restrictions. Joel understands he needs to self cath every 2-3 hours and can complete most of the task independently. Joel will bring in one months' worth of his needed supplies to be left at the DAC. Joel will take his 130pm medications at the DAC with verbal reminders from staff. If Joel feels he needs Tylenol, he will let staff know, Debbie will get a copy of his standing orders to DAC. Joel will come to the DAC Wednesdays and Fridays. Staff will pick Joel up at his home in Windom by 830am and drop him off at home at 330pm PM. Joel would like to work on a financial outcome. Initial Planning/Annual Meeting is scheduled for October 8th @ 10:00 AM @ DAC.</p>
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Notes

Document Notes	
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Notes History

Document Notes History	<p>29-Aug-2025 12:49 - Josie Veigel - Updates and meeting notes completed</p> <p>28-Aug-2025 09:25 - Josie Veigel - Meeting minutes, updates completed.</p> <p>18-Aug-2025 13:43 - Josie Veigel - Progress in works</p>
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	12-Aug-2025 14:36 - Josie Veigel - Progress in works
	08-Aug-2025 11:01 - Josie Veigel - Progress in works
	06-Aug-2025 09:12 - Josie Veigel - Progress in works
	05-Aug-2025 16:11 - Josie Veigel - Progress in works

Signatures

Signature of the person completing the Document	JV
Client Signature	JK