SELF-MANAGEMENT ASSESSMENT

Name: Dirk Quistad

Date of *Self-Management Assessment* development: 3/15/2021 For the annual period from: March 2021 to March 2022

Name and title of person completing the review: Beth Blackorbay, Designated Coordinator

Within the scope of services to this person, the license holder must assess, at a minimum, the areas included on this document. Additional information on self-management may be included per request of the person served and/or legal representative and case manager. The *Self-Management Assessment* will be completed by the company's designated staff person and will be done in consultation with the person and members of the support team.

The license holder will complete this assessment before the 45-day planning meeting and review it at the meeting. Within 20 working days of the 45-day meeting, dated signatures will be obtained from the person and/or legal representative and case manager to document the completion and approval of the *Self-Management Assessment.* At a minimum of annually, or within 30 days of a written request from the person and/or legal representative or case manager. This *Self-Management Assessment* will be reviewed by the support team or expanded support team as part of a service plan review and dated signatures obtained.

Assessments must be based on the person's status within the last 12 months at the time of service initiation. Assessments based on older information must be documented and justified.

The **general and health-specific supports and outcomes necessary or desired to support the person** based upon this assessment and the requirements of person centered planning and service delivery will be documented in the *CSSP Addendum.*

Health and medical needs to maintain or improve physical, mental, and emotional well-being

Assessment area	Is the person able to self-manage in this area?	Assessment – include information about the person that is descriptive of their overall strengths, functional skills and abilities, and behaviors or symptoms
Allergies (state specific allergies): Cephalosporin, Vancomycin	☐ Yes ☒ No ☐ NA – there are no allergies	• **Strengths, Skills, and Abilities:** Dirk may be aware of his allergies. Dirk is accepting of assistance to help manage his allergies. • **Behavior and Symptoms:** Dirk is diagnosed with cerebral palsy. Dirk is not able to inform people of his allergies. • Staff supports are required in this area according to the CSSP Addendum.
Seizures (state specific seizure types): NA	☐ Yes ☐ No ☒ NA – no seizures	• Dirk is not diagnosed with a seizure disorder.

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Choking- Dysphagia, pleasure tasting, soft/mechanical soft diet or food cut into pea to dime-sized pieces, nectar thick liquids	☐ Yes ☒ No	• **Strengths, Skills, and Abilities:** Dirk is aware of when he would like to have a pleasure tasting. Dirk is able to eat small amounts of food orally. • **Behavior and Symptoms:** Dirk has been diagnosed with dysphagia, which is difficulty swallowing, or may forget to swallow. Dirk is in control of what he wants to eat or does not want to eat. Dirk receives the majority of his caloric intake through his G-tube. He is on a soft/ mechanical soft diet with nectar consistency liquids. Food that is not soft are to be cut into pea to dime-sized pieces and will be placed on one side of his mouth. • Staff supports are required in this area according to the CSSP Addendum.
Special dietary needs (state specific need): Dysphagia, pleasure tasting, soft/mechanical soft diet or food cut into pea to dime-sized pieces, nectar thick liquids	☐ Yes ☒ No ☐ NA – there are no special dietary needs	• **Strengths, Skills, and Abilities:** Dirk is aware of when he would like to have a pleasure tasting. Dirk is able to eat small amounts of food orally. • **Behavior and Symptoms:** Dirk has been diagnosed with dysphagia (which is difficulty swallowing). Dirk receives the majority of his caloric intake through his G-tube. Dirk is in control of what he wants to eat or does not want to eat. He is on a soft/ mechanical soft diet with nectar consistency liquids. Food that is not soft are to be cut into pea to dime-sized pieces and will be placed on one side of his mouth. • Staff supports are required in this area according to the CSSP Addendum.
Chronic medical conditions (state condition): Spastic Quadraparesis with Cerebral Palsy, Baclofen Pump, Harrington Rods and Spinal Fusion, GERD, Internal Hemorrhoids	☐ Yes ☒ No ☐ NA – there are no chronic medical conditions	• **Strengths, Skills, and Abilities:** Dirk is aware of his chronic medical conditions. Dirk is able to communicate if he is having discomfort from his conditions. • **Behavior and Symptoms:** Dirk is diagnosed with Cerebral Palsy with Spastic Quadraparesis, a group of disorders that affect movement and muscle tone or posture. Spasticity treated with Baclofen, a muscle relaxant medicine commonly used to decrease spasticity Harrington Rods and Spinal Fusion, Gastroesophageal reflux disease (GERD), which occurs when stomach acid frequently flows back into the tube connecting your mouth and stomach (esophagus). This backwash (acid reflux) can irritate the lining of your esophagus, heartburn or acid indigestion. Internal Hemorrhoids, are deep inside the rectum and not visible from outside. They are normally painless. Often, the first sign that internal hemorrhoids are present is rectal bleeding. • Staff supports are required in this area according to the CSSP Addendum.
Self-administration of medication or treatment orders	☐ Yes ☒ No	• **Strengths, Skills, and Symptoms:** Dirk is aware of his medications. Dirk is corporative during his medication administration. • **Behavior and Symptoms:** Due to Dirk's diagnoses he may not understand the full scope of medications and their administration including side effects, doses,

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		and following prescriber's orders. Dirk is unable to request medications or inform someone if there are issues associated with his medications. • Staff supports are required in this area according to the CSSP Addendum.
Preventative screening	☐ Yes ☒ No	• PAI does not set up or attend medical appointments with Dirk. Dirk's residence will assist him with this.
Medical and dental appointments	☐ Yes ☒ No	• PAI does not set up or attend medical appointments with Dirk. Dirk's residence will assist him with this.
Other health and medical needs (state specific need): NA	☐ Yes ☐ No ☒ NA	NA
Other health and medical needs (state specific need): NA	☐ Yes ☐ No ☒ NA	NA
Other health and medical needs (state specific need): NA	☐ Yes ☐ No ☒ NA	NA

Personal safety to avoid injury or accident in the service setting

Assessment area	**Is the person able to self-manage in this area?**	**Assessment – include information about the person that is descriptive of their overall strengths, functional skills and abilities, and behaviors or symptoms**
Risk of falling (include the specific risk): Spastic Quadraparesis with Cerebral Palsy, Harrington Rods and Spinal Fusion,	☐ Yes ☒ No ☐ NA – not at risk for falling	• **Strengths, Skills, and Abilities:** Dirk is aware of his abilities. Dirk is able to balance himself in his wheelchair. • **Behavior and Symptoms:** Due to Dirk's diagnoses he has limited use of his limbs and trunk. Dirk is not able to twist or turn his body. • Staff supports are required in this area according to the CSSP Addendum.
Mobility issues (include the specific issue): Spastic Quadraparesis with Cerebral Palsy, Harrington Rods and Spinal Fusion,	☐ Yes ☒ No ☐ NA – there are no mobility issues	• **Strengths, Skills, and Abilities:** Dirk is aware where he wants to go and when. Dirk is able to inform staff where he would like go using his communication device. • **Behavior and Symptoms:** Due to Dirk's diagnoses he is not able to propel his own wheelchair. • Staff supports are required in this area according to the CSSP Addendum.
Regulating water temperature	☐ Yes ☒ No	• **Strengths, Skills, and Abilities:** Dirk is aware of the water temperature. Dirk is able to answer yes/no to instruct staff to adjust the temperature. • **Behavior and Symptoms:** Dirk does not have the fine motor skills needed to adjust the water temperature.

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		• Staff supports are required in this area according to the CSSP Addendum.
Community survival skills	☐ Yes ☒ No	• **Strengths, Skills, and Abilities:** Dirk enjoys spending time in the community. Dirk is very friendly and likes socializing. • **Behavior and Symptoms:** Dirk may not be able to comprehend the potential dangers related to the community, traffic skills, or pedestrian safety skills. Dirk is not able to propel his own wheelchair. • Staff supports are required in this area according to the CSSP Addendum.
Water safety skills	☐ Yes ☒ No	• **Strengths, Skills, and Abilities:** It is unknown if Dirk possesses water safety skills. • **Behaviors and Symptoms:** PAI does not offer community outings that are focused around a needed demonstration of water safety skills. PAI may offer outings to local parks with water. • Staff supports are required in this area according to the CSSP Addendum.
Sensory disabilities- Near sighted, exotropia, nystagmus (left eye)	☐ Yes ☒ No ☐ NA	• **Strengths, Skills, and Abilities:** Dirk is aware of his vision and what he can see. Dirk is able to use his vision functionally and can answer yes/no questions about what he is seeing. • **Behavior and Symptoms:** Dirk is nearsighted. He has exotropia, eyes turning inward and nystagmus, side to side movement of the eye is rapid and involuntary, which only affects the left eye. In the past, attempts have been made to have Dirk wear glasses but Dirk chooses not to wear them. • Staff supports are required in this area according to the CSSP Addendum.
Other personal safety needs (state specific need): NA	☐ Yes ☐ No ☒ NA	NA
Other personal safety needs (state specific need): NA	☐ Yes ☐ No ☒ NA	NA
Other personal safety needs (state specific need): NA	☐ Yes ☐ No ☒ NA	NA
Symptoms or behavior that may otherwise result in an incident as defined in section 245D.02, subd. 11 clauses (4) to (7) or suspension or termination of services by the license holder, or other symptoms or behaviors that may jeopardize the health and safety of the person or others.		
Assessment area	**Is the person able to self-manage in this area?**	**Assessment – include information about the person that is descriptive of their overall strengths, functional skills and abilities, and behaviors or symptoms**

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Self-injurious behaviors (state behavior): NA	☐ Yes ☐ No ☒ NA	NA
Physical aggression/conduct (state behavior): NA	☐ Yes ☐ No ☒ NA	NA
Verbal/emotional aggression (state behavior): NA	☐ Yes ☐ No ☒ NA	NA
Property destruction (state behavior): NA	☐ Yes ☐ No ☒ NA	NA
Suicidal ideations, thoughts, or attempts	☐ Yes ☐ No ☒ NA	NA
Criminal or unlawful behavior	☐ Yes ☐ No ☒ NA	NA
Mental or emotional health symptoms and crises (state diagnosis): Anxiety	☐ Yes ☒ No ☐ NA	• **Strengths, Skills, and Abilities:** Dirk is aware when he is feeling anxious. Dirk is able to communicate what is causing him anxiety using his communication device. • **Behavior and Symptoms:** Dirk may communicate his anxiety by coughing to the point his skin becomes red. Dirk may need encouragement to use his communication device to communicate what is causing his anxiety. • Staff supports are required in this area according to the CSSP Addendum.
Unauthorized or unexplained absence from a program	☐ Yes ☐ No ☒ NA	NA
An act or situation involving a person that requires the program to call 911, law enforcement or fire department	☐ Yes ☐ No ☒ NA	NA
Other symptom or behavior (be specific): NA	☐ Yes ☐ No ☒ NA	NA

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