

ABOUT ME

ROBERT J STEWART

Preferred Name: Bob

Assessment Date: 03/04/2021

Plan Dates: 05/01/2021 to 04/30/2022

Developed by: Stephanie Brown (651) 275-7285

Address: 4489 McMemeny Street
Vadnais Heights, MN 55127

County: Washington

Home: (651) 415-1702

Work:

Other: (612) 607-9954

General Plan Notes:

STRENGTHS, ROUTINES, & DREAMS: Robert is a 66 year old with a great sense of humor. He had lived in Mains'l Corporate home in Oak Park Heights for 5 years until moving to a home with Mains'l in Vadnais at the end of 2019. Robert attends a work program through Phoenix Alternatives Inc (PAI). Robert attends 3 days per week around his dialysis schedule. He prefers to work and not do leisure activities. Robert maintains a busy schedule. He goes to Davita dialysis in Arden Hills three days a week, on Tuesdays, Thursdays, and Saturdays.. Dialysis affects his energy levels and can be draining. Robert attends dialysis by himself with transportation on Metro Mobility. Robert's dialysis are only 3 hours long but with travel time is gone longer. Robert reported that for his hopes and dreams, he would like to go travel and go on vacation to be in a different environment. Robert also wants to have a decent job that will keep him busy and build a work bench for his room. Robert would like to make money. Robert's strength are that he likes taking care of his dog and he is laid back.

DREAMS AND ASPIRATIONS: Robert wishes he could go to the Apollo Center and participate in groups and activities there like he did in the past. He would like help work on his woodworking hobby.

SOCIAL, LESIURE AND RELIGIOUS ACTIVITIES: Robert enjoys fixing things and working with his hands. He likes woodworking, fishing, watching television and listening to country music.

RITUALS AND ROUTINES/PREFERENCES: While his routine is impacted by COVID 19 emergency protocols, he still goes to dialysis 3 days/week (Tues, Thurs and Sat) and goes to PAI Commerce 3 days/week (Mon, Wed, Fri). Robert likes to follow his routine.

IMPORTANT TO: Robert says it is important to him to talk to his sister on the phone.

OPPORTUNITIES FOR CHOICE: Robert is his own guardian. He gets help and encouragement from his family and his staff to gather and understand information and options before making choices.

CURRENT HEALTH STATUS: Robert has received both COVID vaccines.

Case Manager Update: Annual meeting held via Zoom due to COVID-19 Emergency Protocol on 4/26/2021. Robert likes work and does greeting cards. He does participate he does an afternoon classes even though he prefer to work but work has been slow. Robert will be encouraged with a work goal to take a break from work and find something to do during his break. Robert stated he is a bit frustrated with his bedroom changes but his happy with his current room. Bentley, Robert's Dog lives with the company nurse Heidi and comes to visit, as he wasn't a good fit in the house. Robert's staff are helping him with trying to get a new hospital bed and wheelchair. Robert had a recent swallow study but no changes were recommended. Robert's staff mentioned that he seems to be more forgetful and his cognitive skills may be declining.

PERSON INFORMATION

Date of Birth: 01/06/1955 **Age:** 66 yrs

Emergency Contacts

Name	Relationship	Phone
Mains'L - Kelly Paar	Other Non-Relative	(612) 607-9954
Stephanie Brown (Washington County DD Case Manager)	Other Non-Relative	(651) 275-7285
Patty Petty	Sibling	(651) 774-2456

Notes/Comments**Decision Making Representatives**

Name	Type of Authority	Address	Phone
Robert Stewart- own guardian	Other	4489 Mc Menemy St Vanais Heights Mn	(651) 415-7102

Notes/Comments**Health Insurance & Payers**

Is the person certified disabled by Social Security or through the State Medical Review Team (SMRT) process? Yes

Is the person on medical assistance? Yes

Type	Describe	Policy Number	Effective Date
Medicare - Part B			12/01/1981
Medicare - Part D			11/11/2006
Medical Assistance	DX	00020344	06/01/2014
Medicare - Part A			12/01/1981
Managed Care	(SNBC Medica)		

Notes/Comments**Providers**

Health Care Providers	Phone	Comments
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Health Care Providers	Phone	Comments
Specialty Clinic		Davita Arden Hills (Dialysis)
Other	(651) 439-1234	Dr. Stormont - Stillwater Medical Group / 1500 Curve Crest Blvd., Stillwater, MN 55082
Urologist		
Primary Physician	(651) 439-1234	Stillwater Medical Group / 1500 Curve Crest Blvd., Stillwater, MN 55082
Specialty Clinic	(651) 457-2232	Dr. Kristine Johns / Fresen medical clinic, 1590 S. Robert St., #130, West St Paul, MN 55118 (Nephrologist)

Notes/Comments

St. John's Hospital is Robert's hospital of choice. His staff nurse is encouraged to talk to him about a health care directive.

WHAT'S IMPORTANT TO THE INDIVIDUAL**Short and Long-Term Goals**

Goal Statement	Target Date	Provider & NPI (if applicable)	Frequency of Reporting
Robert wants to continue to attend PAI where he can work to earn money and socialize with his friends.	04/30/2022		annually

Short and Long-Term Goals

Goal Statement	Target Date	Provider & NPI (if applicable)	Frequency of Reporting
Robert would like to do shopping more independently including going to the store by himself. Due to living on a busy road, staff will get him to the store but allow him to shop independently while in the store and then meet him at the register to check out.	04/30/2022	MAINS'L SERVICES INC -- M606270900	Semi- annual

Action Steps for Goals:

What will the person do?

Robert will actively discuss his services and goals with his interdisciplinary team, and decide what he thinks would be most beneficial. Robert will continue to identify and advocate for his preferences, and identified outcomes.

Robert will shop independently in the store and get a basket for items he need.

What will the case manager do?

Robert's case manager will provide ongoing support, encouragement, advocacy, coordination of services, and access to additional supports and resources, as available and appropriate, to support his goals. Case manager will continue to advocate for his preferences, and identified outcomes.

What will others do?

Robert stays connected with his sister, Patty Petty via phone, who provides informal supports and encouragement to Robert.

What will the provider do?

Mains'l provides an adaptive home that can accommodate Roberts needs and access for his wheel chair, 24 hours staff to address his ADLS and IADLs, a van to transport Robert with his wheel chair. They work with Robert and his Case Manager to develop his CSSP and coordinate services and set up appointments, attend appointments with him. Staff will assist Robert to the store and allow him to shop independently but help with his financial transaction as needed.

PAI will continue to find and offer Robert work opportunities.

Robert's Rep Payee can support him in saving money and finding resources for traveling to Arizona. Robert's staff can also assist him in finding some hands on hobbies.

SUMMARY OF PROGRAMS AND SERVICES

Program Type	Start Date	End Date	Annual Amount	Total Plan Cost	Avg Monthly
Developmental Disability Waiver	05/01/2021	04/30/2022	\$0.00	\$24,693.24	\$2,057.77
Case Manager/Care Coordinator Stephanie Brown		Case Manager/Care Coordinator Provider ID A991643200		Responsible Party Name	
Program Notes Robert will access the Developmental Disability Waiver for Case management, para-professional case management, community residential services, day support services, prevocational services, and transportation.					

Service							
Case Management - 15 Minutes							
Start Date 05/01/2021	End Date 04/30/2022	Procedure Code T1016 UC	Frequency	Units 120	Rate \$23.19	Avg Monthly \$231.90	Total Service \$2,782.80
NPI/UMPI 1700969334	Status Approved	Provider Name WASHINGTON COUNTY COMMUNITY SERVICE		Funding Source DD Waiver		County of Service Washington	
Areas of Need Supportive Services							
Support Instructions Case manager will provide a minimum of two visits per year. Case manager will provide support planning, setting up and coordination of services, and monitoring of services. Case manager will make changes to the CSSP in regards to plan changes and changes can be made by calling Stephanie at 651-275-7285. 2.5 hours per month							
Service Notes							

Service							
Case Management Aide (Paraprofessional) - 15 Minutes							
Start Date 05/01/2021	End Date 04/30/2022	Procedure Code T1016 TF UC	Frequency	Units 60	Rate \$9.39	Avg Monthly \$46.95	Total Service \$563.40
NPI/UMPI 1700969334	Status Approved	Provider Name WASHINGTON COUNTY COMMUNITY SERVICE		Funding Source DD Waiver		County of Service	
Areas of Need Supportive Services							
Support Instructions Paraprofessional case management for out of county screening approvals and service planning/authorizations. To be billed by family service worker supporting case manager as needed. 1.25 hours per month.							
Service Notes							

Service							
Community Residential Services - Adult							
Start Date	End Date	Procedure Code	Frequency	Units	Rate	Avg Monthly	Total Service
05/01/2021	04/30/2022	S5140 UC U9		120			
NPI/UMPI	Status	Provider Name		Funding Source		County of Service	
M606270900	Pending	MAINS'L SERVICES INC		DD Waiver		Washington	
Areas of Need							
Support Instructions							
<p>Robert requires staff assistance to prep and serve a meal as well as monitor for choking. He is on a Renal diet and needs to ensure food served meets his dietary needs. Robert requires physical for bathing, transferring, dressing, grooming and toileting. Robert may require assistance wheeling as well. Staff should assist with medication ordering and administration and setting up appointments. Robert does use mnet for dialysis but staff would transport to other appointments. Robert may need assistance with money management but likes to carry a small amount of cash. Mains'L is his Representative Payee. Robert is not able to manage most home management activities but will assist as he would like or is able. Robert requires assistance with paperwork. Robert does get frustrated at times and needs staff redirection in those times. Robert requires daily 24 hour awake supervision as he may be aware of an emergency situation but may not be able to react in a fast manner. Robert would like staff to help him support his dog. Support will be provided to Robert daily.</p>							
Service Notes							

Service							
DT&H Transportation							
Start Date 05/01/2021	End Date 04/30/2022	Procedure Code T2002	Frequency	Units 312	Rate \$30.80	Avg Monthly \$800.80	Total Service \$9,609.60
NPI/UMPI A984668900	Status Approved	Provider Name PHOENIX ALTERNATIVES INC-COMMERCE		Funding Source DD Waiver		County of Service Ramsey	
Areas of Need Employment/Training/Skill Building							
Support Instructions Transportation for one way trips to and from work.							
Service Notes							

Service							
Day Support Services - 15 Minutes							
Start Date 05/01/2021	End Date 04/30/2022	Procedure Code T2021 UC	Frequency	Units 1716	Rate \$3.42	Avg Monthly \$489.06	Total Service \$5,868.72
NPI/UMPI A984668900	Status Approved	Provider Name PHOENIX ALTERNATIVES INC-COMMERCE		Funding Source DD Waiver		County of Service Washington	
Areas of Need Personal Assistance, Quality of Life, Employment/Training/Skill Building							
Support Instructions Robert will attend PAI and engage in center based work. Staff will assist Robert with eating, and transfer/mobility while in center. Robert will choose any community activities but prefers to work. He will attend start 3 days per week for 3 hours.							
Service Notes							

Service							
Prevocational Services - 15 Minutes							
Start Date 05/01/2021	End Date 04/30/2022	Procedure Code T2047	Frequency	Units 1716	Rate \$3.42	Avg Monthly \$489.06	Total Service \$5,868.72
NPI/UMPI A984668900	Status Approved	Provider Name PHOENIX ALTERNATIVES INC-COMMERCE		Funding Source DD Waiver		County of Service Ramsey	
Areas of Need Employment/Training/Skill Building							
Support Instructions Robert will attend in center 3 days per week. He will engage in on site work. Robert will engage 3 hours in prevocational work.							
Service Notes							

RISKS

How will Health and Safety Issues be Addressed?

Robert needs a 24-hour plan of care, and receives DD Waiver services to meet this need. His support service provides this level of care for him. Robert needs a rep payee, and staff to help ensure his basic needs are met. Case manager and support services work together to ensure Robert's basic needs, i.e. food, shelter, and clothing. He has an IDD case manager that works with the team to ensure his service needs are being met by providers. While Robert is his own guardian, his team works together to protect Robert as a vulnerable adult from physical, sexual, emotional or financial abuse.

Robert does not have any alone time and does need physical support for his personal care needs, home management tasks, transportation/community access support and medical support. Robert would not be able to manage this by himself.

The following table documents and acknowledges any risks that exist based on identified remaining needs above.

Identified risk and choice regarding services	Negative outcome that may result	Alternative measure that may be implemented
No refused services.		

Summary plan/agreement reached to address the identified risks:

Emergency & Back Up Plans

Plan for unforeseen events (e.g, weather, storms, power outages)

Robert lives in a group home that have 24 hour awake supervision. Mains'L would be responsible to plan for any unforeseen events. They would use a hotel or another Mains'L home in the event the home could not be accessed.

Key Contact Name	Relationship	Phone Number
Angela Lester	Program Supervisor	(612) 940-4470
Angie Smith	House Manager	(000) 000-0000

Plan for emergency health events

Robert his own guardian and will determine his course of care. It may be helpful for staff to be aware of any medical treatment that Robert choose so they can assist as needed. He does give staff to act in the event of an emergency

Key Contact Name	Relationship	Phone Number
Angie Smith	House Manager	(000) 000-0000
Angela Lester	Program Supervisor	(612) 940-4470

Plan for unavailable staffing that puts the person at risk

If staff were to not be present for a shift, house manager will be responsible to arrange or provide care and next in line would be the house manager, Angela

Key Contact Name	Relationship	Phone Number
Angela Lester	Program Supervisor	(612) 940-4470