SELF-MANAGEMENT ASSESSMENT

Name: Jerome Welch

Date of *Self-Management Assessment* development: 11.1.2021 For the annual period from: November 2021 to November 2022

Name and title of person completing the review: Emily Elsenpeter, 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: Penicillin, the Polio Vaccine, and Seasonal *(Fall or Spring)*	☐ Yes ☒ No ☐ NA – there are no allergies	• Strengths, Skills, & Abilities: Jerome is aware of when he is feeling unwell. The symptoms of seasonal allergies bother Jerome, and he may vocalize in a distressed manner as a result. He is accepting of PRN allergy medication. • Behaviors or Symptoms: Jerome's seasonal allergies may result in sneezing, runny nose, headaches, and sinus pressure. Jerome's reaction to penicillin is unknown but may include rash, hives, anaphylactic shock, and/or respiratory distress. Jerome had a significant reaction to the Polio vaccine as a child causing high fever.

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		• Staff supports are required in this area according to the CSSP Addendum.
Seizures: Tonic Clonic/Grand Mal seizures	☐ Yes ☒ No ☐ NA – no seizures	• Strengths, Skills, & Abilities: It is unknown is Jerome has functional awareness in this area. Jerome is accepting of his seizure medications. • Behaviors or Symptoms: Jerome has seizures on a regular basis. He may be tired due to his seizure medications, requiring additional sleep. • Staff supports are required in this area according to the CSSP Addendum.
Choking	☐ Yes ☒ No	• Strengths, Skills, & Abilities: Jerome can eat independently after his meal is set up properly and with the appropriate eating equipment. Jerome uses a mother care spoon, a divided plate, a large nosey cup, and a no slip mat. • Behaviors or Symptoms: Jerome has a history of choking and difficulty with swallowing. He may put non-food items in his mouth, or food that is not prepared to the correct consistency for him. • Staff supports are required in this area according to the CSSP Addendum.
Special dietary needs: Pureed diet and thickened liquids	☐ Yes ☒ No ☐ NA – there are no special dietary needs	• Strengths, Skills, & Abilities: Jerome enjoys eating. Jerome is able to eat independently after his meal is prepared to be pureed with nectar thick liquids. • Behaviors or Symptoms: Jerome has a history of choking and difficulty with swallowing. He may put non-food items in his mouth, or food that is not prepared to the correct consistency for him. • Staff supports are required in this area according to the CSSP Addendum.
Chronic medical conditions (state condition): Hypothyroidism, cellulitis, obstructive sleep apnea, Gibbus Deformity (Kyphosis), lower leg vascular deficiency/edema, constipation, dermatitis, Osteopenia	☐ Yes ☒ No ☐ NA – there are no chronic medical conditions	• Strengths, Skills, & Abilities: Jerome is accepting of medications and treatments for his chronic medical conditions. It is unknown if Jerome has functional awareness in this area. • Behaviors or Symptoms: ○ **Hypothyroidism**: deficiency of thyroid hormones can disrupt such things as heart rate, body temperature, and all aspects of metabolism. Major symptoms include fatigue, cold sensitivity, constipation, dry skin, and unexplained weight gain. ○ **Cellulitis**: a common, potentially serious bacterial skin infection. The affected skin appears swollen and red and is typically painful and warm to the touch. Symptoms may include pain in the skin, warmness, blister, pus, red rashes, swelling, chills, fever, and/or whole-body discomfort. ○ **Obstructive sleep apnea**: intermittent airflow blockage during sleep causing fatigue, snoring and excessive daytime sleepiness.

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		○ **Gibbus Deformity (Kyphosis)**: The posterior (from behind) curve presents sharply angled; the curvature is not smooth. This deformity may result in a 'humpback' found to be more prominent when bending forward with potential of back pain and stiffness. ○ **Lower leg vascular deficiency/edema**: the venous wall and/or valves in the leg veins are not working effectively, making it difficult for blood to return to the heart from the legs and puffiness caused by excess fluid trapped in the body's tissues. ○ **Constipation**: Infrequent bowel movements, and small, hard-to-pass, stool that may cause abdominal pain or discomfort. ○ **Dermatitis**: an itchy inflammation of the skin resulting in rashes, dryness, flakiness, bumps, fissures, peeling, or redness. ○ **Osteopenia**: A condition that occurs when the body doesn't make new bone as quickly as it reabsorbs old bone. Typically, there are no symptoms, unless the condition progresses to osteoporosis. • Staff supports are required in this area according to the CSSP Addendum.
Self-administration of medication or treatment orders	☐ Yes ☒ No	• Strengths, Skills, & Abilities: Jerome is accepting of medications. • Behaviors or Symptoms: When Jerome's medication are set up for him, he takes his medications with a prepared meal or with a beverage. Due to his cognitive and physical limitations, he is not able to self-administer his medications. • Staff supports are required in this area according to the CSSP Addendum.
Preventative screening	☐ Yes ☐ No ☒ NA	PAI does not manage Preventative Screening for Jerome.
Medical and dental appointments	☐ Yes ☐ No ☒ NA	PAI does not manage Medical or Dental appointments for Jerome.
Other health and medical needs: Personal cares	☐ Yes ☒ No ☐ NA	• Strengths, Skills, & Abilities: Jerome may be aware of when he requires the use of the restroom. Jerome may vocalize when he has a soiled brief. He is able to lean forward to assist with placing his sling while seated in his wheelchair. • Behaviors or Symptoms: Jerome utilizes a brief due to incontinence. Due to his cognitive and physical limitations, he is not able independently complete his personal cares. • Staff supports are required in this area according to the CSSP Addendum.
Other health and medical needs: Urinary Retention	☐ Yes ☒ No ☐ NA	• Strengths, Skills, & Abilities: Jerome may vocalize when he has a soiled brief. He is able to lean forward to assist with placing his sling while seated in his wheelchair.

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		• Behaviors or Symptoms: Difficulty urinating and completely emptying the bladder which may lead to discomfort. • Staff supports are required in this area according to the CSSP Addendum.
Other health and medical needs: Skin Breakdown	☐ Yes ☒ No ☐ NA	• Strengths, Skills, & Abilities: Jerome can lean forward independently for short periods of time to assist with repositioning. • Behaviors or Symptoms: Jerome has a history of blisters on his backside that may cause pain or discomfort. • Staff supports are required in this area according to the CSSP Addendum.
Other health and medical needs: High tone with support of elbow splint	☐ Yes ☒ No ☐ NA	• Strengths, Skills, & Abilities: Jerome is accepting of his elbow splint and enjoys fuller utilization of his arm following its removal daily. • Behaviors or Symptoms: Due to high tone, Jerome utilizes the support of an elbow splint on his left elbow to improve his range of motion, which is removed midday. • Staff supports are required in this area according to the CSSP Addendum.
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: Chronic medical conditions increasing risk of falls	☐ Yes ☒ No ☐ NA – not at risk for falling	• Strengths, Skills, & Abilities: Jerome is accepting of his chest and safety straps. • Behaviors or Symptoms: Due to Jerome's chronic medical conditions he is at a high risk for falling. He has high tone, Gibbus Deformity (Kyphosis), and osteopenia which impact his ability to be safely mobile on his own. Jerome utilizes a wheelchair with the support of a chest and pelvic strap, pummel, and a seatbelt. He also utilizes a Hoyer and sling to transfer. • Staff supports are required in this area according to the CSSP Addendum.
Mobility issues: Chronic medical conditions limiting mobility	☐ Yes ☒ No ☐ NA – there are no mobility issues	• Strengths, Skills, & Abilities: Jerome can lean forward to assist with placing his Hoyer sling. • Behaviors or Symptoms: Due to Jerome's chronic medical conditions he has limited mobility. He has high tone, Gibbus Deformity (Kyphosis), and osteopenia which impact his ability to be mobile on his own. Jerome utilizes a wheelchair that he does not propel independently, with the support of a chest and pelvic strap, pummel, and a seatbelt. He also utilizes a Hoyer and sling to transfer. • Staff supports are required in this area according to the CSSP Addendum.
Regulating water temperature	☐ Yes ☒ No	• Strengths, Skills, & Abilities: Jerome is accepting of assistance in this area. He may vocalize if the water is not at a comfortable temperature for him.

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		• Behaviors or Symptoms: Jerome is unable to adjust the water temperature or determine a safe water temperature due to his developmental disabilities. Jerome is at risk of being exposed to extreme water temperatures if not regulated and supported. • Staff supports are required in this area according to the CSSP Addendum.
Community survival skills	☐ Yes ☒ No	• Strengths, Skills, & Abilities: Jerome enjoys spending time in the community. Jerome is accepting of assistance in the community. • Behaviors or Symptoms: Jerome has been diagnosed with developmental disabilities, physical disabilities, and lacks a formal communication system. He is not able to comprehend the potential dangers related to the community, traffic, or pedestrian safety skills. He is not able to independently propel his wheelchair. He does not have the ability to drive. He would require support if an emergency were to occur or to ask for assistance. • Staff supports are required in this area according to the CSSP Addendum.
Water safety skills	☐ Yes ☒ No	• Strengths, Skills, & Abilities: Jerome is accepting of assistance around bodies of water. • Behaviors or Symptoms: Jerome has been diagnosed with developmental and physical disabilities that put him at high risk of drowning. He does not have the cognitive or physical ability to keep himself safe in the water. • Staff supports are required in this area according to the CSSP Addendum.

Sensory disabilities:
Astigmatism, overstimulation
	☐ Yes ☒ No ☐ NA	• Strengths, Skills, & Abilities: Jerome is aware of when he is overstimulated. Jerome may be aware that he is not seeing something clearly. Jerome may vocalize if he is overstimulated. Jerome may bring items closer to his face to see them.
		• Behaviors or Symptoms:
		  ○ **Astigmatism**: causes blurred vision and may make details difficult to see. Jerome will not wear glasses.
		  ○ **Overstimulation**: Jerome may become overstimulated as shown by having distressed vocalizations when the room is too loud or busy.
		• Staff supports are required in this area according to the CSSP Addendum.

Other personal safety needs (state specific need): N/A	☐ Yes ☐ No ☒ NA	
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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**
Self-injurious behaviors: Scratching head and hands/arms	☐ Yes ☒ No ☐ NA	• Strengths, Skills, & Abilities: Jerome typically responds to redirection. • Behaviors or symptoms: Jerome may scratch his head and hands/arms for unknown reasons, causing marks and the potential for bleeding. • Staff supports are required in this area according to the CSSP Addendum.
Physical aggression/conduct (state behavior): NA	☐ Yes ☐ No ☒ NA	
Verbal/emotional aggression: Yelling/ distressed vocalizations	☐ Yes ☒ No ☐ NA	• Strengths, Skills, & Abilities: Jerome may be aware of when he is overstimulated or in need of something. Jerome typically responds to redirection. Jerome is accepting of sensory activities and preferred manipulatives. • Behaviors or symptoms: Jerome may yell or have extended, loud, distressed vocalizations if he is upset, in need of something, or overstimulated. • Staff supports are required in this area according to the CSSP Addendum.
Property destruction (state behavior): NA	☐ Yes ☐ No ☒ NA	
Suicidal ideations, thoughts, or attempts	☐ Yes ☐ No ☒ NA	
Criminal or unlawful behavior	☐ Yes ☐ No ☒ NA	
Mental or emotional health symptoms and crises (state diagnosis): N/A	☐ Yes ☐ No ☒ NA	
Unauthorized or unexplained absence from a program	☐ Yes ☐ No ☒ NA	
An act or situation involving a person that requires the program to call 911, law enforcement or fire department	☐ Yes ☐ No ☒ NA	

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Other symptom or behavior (be specific): NA	☐ Yes ☐ No ☒ NA	

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