In-Service Training Log – Oakdale

Date: 9/20/2022

Type of Meeting: All-Staff

NOTE: INFORMATION IN GRAY SHADED AREAS MUST BE TYPED IN

Training Time	Trainer Name	Training ID	Area	Content/Description
.5	Maurita Sweeney			DS comp quiz
.25	Ashleigh Shirley			RM semi annual review

Make up Date	Initial	EE ID	Last Name
	MBP	MBP	Basurto-Poferl, Mari
	SB	SB	Berglund, Sara
		AD	Diaz, Amanda
		PD	Dyer, Paris
	AFM	AFM	Fierro-Montes, Alfredo
	TG		Gould, Trey
		LH	Hartman, Lisa
	TL	TL	Lorsung, Tristen
			~~Berry, Kathy~~
	MS	MS	Sweeney, Maurita

Make up Date	Initial	EE ID	Last Name
	ZW		Weinmann, Zach
	KY		Yang, Katrina

Make Up Date	Initial	EE ID	Managers/Admin
			~~Hiland, Lindsay~~
	AS		Shirley, Ashleigh
	CK		Cortney Kelly

Make up Date	Initial	EE ID	Other Attendees

Competency Tracking Form
Oakdale

Participant: Destiny Smith **Annual Service Span: August 2022- August 2023**

Annual Meeting Date: **Date Assigned to Lead:** **Quiz Due:** _____

Documents Reviewed: Support Plan Addendum, IAPP, SMA, One-Page Profile, Outcomes.

*Your initials below indicate you have reviewed and understand all assigned documents and have completed a competency quiz on the individual. This document is to be done in conjunction with on-site instruction on how to implement the reviewed plans and your demonstration of the understanding of the person as a unique individual.

Date Completed	Initials	Full Name
9/20	MBP	Basurto Poferl, Mari
9/23	SB	Berglund, Sara
9/20	AD	Diaz, Amanda
9/20	PD	Dyer, Paris
9/20	AFM	Fierro-Montes, Alfredo
9/20	TG	Gould, Trey
9/20	LH	Hartman, Lisa
9/20	CK	Kelly, Cortney
9/20	TL	Lorsung, Tristen
9/20	MS	Sweeney, Maurita
		~~Perry, Kathy~~
	AS	Shirley, Ashleigh
9/20	ZW	Weinnman, Zach

Date Completed	Initials	Full Name
9.20	KY	Yang, Katrina

Date Uploaded to LMS: 9/23/2022

PAI-Oakdale Team Meeting

9.20.2022

Welcome

Sign In

Introductions

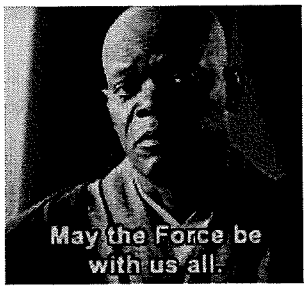
A moment of gratitude

Wrap Up

Thoughts and feedback on new All-Staff
- Agenda
- Objectives
- Suggestions for continued improvement

Is there information you would like to provided at next meeting?

Any final thoughts?



[redacted]

Is this person able to self-manage according to the **IAPP, SMA & CSSPA** – check yes or no below

Allergies: ☒ No ☐ Yes	List & Describe Supports: Bee stings, iodine, and contrast dye. Monitor for any symptoms of redness, swelling, respiratory distress, and anaphylactic shock. PRN Benadryl will be administered per her allergy plan. EpiPen for any signs of anaphylactic reaction and 911 will be called.
Seizures: N/A ☐ No ☐ Yes	Describe Supports: N/A
Choking: ☒ No ☐ Yes	Describe Supports: risk of choking- offer drink, pureed diet, visually monitor, abdominal thrusts and 911 if choking
Specialized Diet: ☒ No ☐ Yes	Describe Supports: pureed diet, eats independently using a regular spoon, clothing protector, and a bowl or deep plate. To drink she uses a plastic cup with a lid and straw.
Chronic Medical Conditions: ☒ No ☐ Yes	List & Describe Supports: Aortic Valve Disorder (symptoms include shortness of breath, dizziness, fainting, chest pain, fatigue), Intellectual Disability , Osteoporosis putting her at increased risk for fracture, Scoliosis causing curvature of the spine, Trisomy 9 (chromosomal disorder with characteristics including failure to grow or gain weight, small head size, arched roof of mouth, abnormalities of eyes and ears. Any concerns with Destiny colliding with an object or with peers will be communicated to parents/guardians. DNR/DNI: ☒ No ☐ Yes
Medication at PAI: ☒ No ☐ Yes	Describe Supports: Destiny does not take daily medications at PAI. She takes Benadryl for allergies and has an EpiPen for anaphylactic reaction. Destiny takes her medications in liquid form.
Personal Cares: ☒ No ☐ Yes	Describe Supports: Destiny is able to independently use the toilet; however, she may need support cleaning up after a bowel movement or during her menses. Destiny is encouraged to use the restroom every two hours. She may indicate she needs to use the restroom in public by putting her hand to her pubic area. Staff will sign bathroom when Destiny indicates she wants to use the restroom in public and encourage her to sign bathroom and walk with staff to the restroom.

[redacted]

Mobility/Fall Risk: ☒ No ☐ Yes	Describe Supports: Appears to have awareness that she may fall. She may become cautious transitioning from floor or ground and reach out for hand of staff, doorway, or chair. When navigating stairs, Destiny needs a railing for assistance. Destiny may become tired walking long distances and require the use of a wheelchair.
Community Support: ☒ No ☐ Yes	Describe Supports: Destiny is not able to comprehend potential dangers in the community. Staff will provide supervision and offer full verbal, gestural, and physical support to practice all pedestrian safety skills. Staff observe what is occurring around Destiny and intervene on her behalf if a potentially dangerous situation were to happen. Staff will call 911 in the event of an emergency.
Sensory Support: ☒ No ☐ Yes	List & Describe Supports: Auditory and visual impairment. Destiny has significant hearing loss and has hearing aids for both ears that she may be resistant to wearing. Destiny has functional vision with her glasses and can navigate her environment. Staff will offer a hand or arm when Destiny is transitioning flooring or terrain and assistance in cleaning her glasses. Destiny wears her glasses without issue and when choosing not to wear her hearing aids will put them away in her bag. Any concerns with hearing or vision will be reported to parents/guardians.
Behavior Support: ☐ No ☐ Yes ☐ N/A	List & Describe Supports: N/A
Unsupervised Time: ☐ No ☐ Yes ☐ N/A	Describe Supports: N/A

Staff: Katrina
Date: 9.20.22

Service Recipient: Destiny S.
Service Span: Aug 2022-23

Outcomes:

Outcome #1 Desting will put cards away in designated container w/2 or less verbal prompts in 75%
Outcome #2: Desting will bring cup to table in 90%
Communication Style: nonverbally w/body language, gestures, some ASL signs
Learning Style: routine, repetition, physical prompts

Is this person able to self-manage according to the **IAPP, SMA & CSSPA** – check yes or no below

Allergies: ☑ No ☐ Yes	List & Describe Supports: bee stings, iodine, contrast dye; follow allergy plan PRN benadry
Seizures: ☐ No ☐ Yes	Describe Supports: n/a
Choking: ☑ No ☐ Yes	Describe Supports: puree diet, offer drink, visually monitor
Specialized Diet: ☑ No ☐ Yes	Describe Supports: puree diet, eats ind; cup/straw for drinks
Chronic Medical Conditions: ☑ No ☐ Yes	List & Describe Supports: DNR/DNI: ☑ No ☐ Yes scoliosis, trisomy 9 Aortic valve disorder, intellectual disability, osteoporosis
Medication at PAI: ☑ No ☐ Yes	Describe Supports: none @PAI; Benadry/epipen for allergies, liquid form
Personal Cares: ☑ No ☐ Yes	Describe Supports: q2h ind w/toilet but assist w/BM or menses
Mobility/Fall Risk: ☑ No ☐ Yes	Describe Supports: aware of fall risk, may be cautious w/transitions, tired w/ long dist
Community Support: ☑ No ☐ Yes	Describe Supports: staff will provide supervision and model pedestrian skills
Sensory Support: ☑ No ☐ Yes	List & Describe Supports: auditory/visual impairment; wears glasses, may resist hearing aids
Behavior Support: ☐ No ☐ Yes	List & Describe Supports: n/a
Unsupervised Time: ☐ No ☐ Yes	Describe Supports: n/a
Important to: opportunities to help, be ind, access to pics/books of family,	
Important for: use communication skills, consume liquids, wears glasses, social support	
Likes: games w/buttons, touch screen, sorting items, "girly" activities,	
Dislikes: being told no, when communication isn't understood	

Lead Review Completed: Maura Sweeney

Staff: Zach Weinmann

Date: 9-20-22

PAI

Service Recipient: Destiny Smith

Service Span: Aug 22 → 23

Outcomes:

Outcome #1	Cards in designated container ~~Der~~ 75% VP
Outcome #2:	Bring cup to table 90% ASL communicate
Communication Style:	Non verbal, body language, ASL, short phrases
Learning Style:	Routine / Repetition, physical prompts, modeling stand in front

Is this person able to self-manage according to the **IAPP, SMA & CSSPA** – check yes or no below

Allergies: ☒ No ☐ Yes	List & Describe Supports: Bee stings, iodine, contrast dye PRN Benadryll, Epi-pen
Seizures: ☐ No ☐ Yes	Describe Supports: N/A
Choking: ☒ No ☐ Yes	Describe Supports: offer drink, Pureed diet, 911 for Heimlich
Specialized Diet: ☒ No ☐ Yes	Describe Supports: Pureed, regular spoon, Deep bowl/Plate, Cup w/ Straw
Chronic Medical Conditions: ☒ No ☐ Yes	List & Describe Supports: Aortic Valve disorder, I.D, Osteoporosis, scoliosis Tri-79, Abnormal eyes/ears, DNR/DNI: ☒ No ☐ Yes
Medication at PAI: ☒ No ☐ Yes	Describe Supports: None – Benadryll, epi-pen
Personal Cares: ☒ No ☐ Yes	Describe Supports: Cleaning up after BM or Menses
Mobility/Fall Risk: ☒ No ☐ Yes	Describe Supports: Cautious, offer hand, railings on stairs,
Community Support: ☒ No ☐ Yes	Describe Supports: Model safety skills, Full supervision
Sensory Support: ☒ No ☐ Yes	List & Describe Supports: Albino - visual impairments, hearing aids, offer hand or arm
Behavior Support: ☐ No ☐ Yes	List & Describe Supports: N/A
Unsupervised Time: ☐ No ☐ Yes	Describe Supports: None
Important to:	Be helpful, access to pictures, games, sorting, Community outings
Important for:	Practice Communication Liquids, socializing
Likes:	games, cars, coloring, girly activities thumbs up or Clap/smile
Dislikes:	"NO" if shes not understood. Rapid arm movements, games in large groups, big dogs, if its not appropriate to help w/ tasks

Lead Review Completed: Mandy Sweeney

Staff: Paris D
Date: 9-20-22

Service Recipient: Destiny S.
Service Span: 8-22 / 8-23

Outcomes:

Outcome #1 Destiny would put cards in container and place on book shelf when she is done
prompt to put cards away

Outcome #2: Destiny will bring cup to the table
point and use asl communication

Communication Style:
Sign language, gestures, short verbal phrases

Learning Style:
routine repetition, physical prompt

Is this person able to self-manage according to the **IAPP, SMA & CSSPA** – check yes or no below

Allergies: ☒ No ☐ Yes	List & Describe Supports: Bee stings (pen for benedryl) epipen - call 911
Seizures: ☐ No ☐ Yes	Describe Supports: N/A
Choking: ☒ No ☐ Yes	Describe Supports: offer drink, pureed diet
Specialized Diet: ☒ No ☐ Yes	Describe Supports: eat independently using regular spoon
Chronic Medical Conditions: ☒ No ☐ Yes	List & Describe Supports: aortic valve disorder, scoliosis — DNR/DNI: ☒ No ☐ Yes
Medication at PAI: ☒ No ☐ Yes	Describe Supports: No current meds at pai
Personal Cares: ☒ No ☐ Yes	Describe Supports: Able to go independently go - staff will walk with her
Mobility/Fall Risk: ☒ No ☐ Yes	Describe Supports: Aware she may fall, may get tired walking long distances
Community Support: ☒ No ☐ Yes	Describe Supports: Staff support and supervision needed
Sensory Support: ☒ No ☐ Yes	List & Describe Supports: Auditory and visual impairment (assist with cleaning glasses if needed)
Behavior Support: ☐ No ☐ Yes	List & Describe Supports: N/A
Unsupervised Time: ☐ No ☐ Yes	Describe Supports: N/A

Important to:
Being helpful, being independent, having pictures, book of family

Important for:
using communication skills

Likes:
Playing games with buttons, matching items, coloring

Dislikes:
Being told no

Lead Review Completed: Maurita Sweeney

Staff: Ashleigh S
Date: 9.20.22

PAI

Service Recipient: Destiny S.
Service Span: Aug 22 Aug 23

Outcomes:

Outcome #1 Destiny will put cards away in spot 2 less verbal prompts in 75% trials
done w/ card prompt to put away

Outcome #2: bring cup to table in 90% opp.
staff gesture/point or ~~cue to continue~~ to bring cup

Communication Style: ASL, visual auditory impairment, nonverbal w/ body language, gesture some sign short verbal phrases enhanced w/ ASL/pictures

Learning Style: routine, repetition, physical modeling,

Is this person able to self-manage according to the **IAPP, SMA & CSSPA** – check yes or no below

Allergies: ☒ No ☐ Yes	List & Describe Supports: allergic bee stings, codeine, contrast dye, PRN benadryl - epi pen - call 911 if epipen used
Seizures: ☐ No ☐ Yes	Describe Supports: N/A
Choking: ☒ No ☐ Yes	Describe Supports: drink offer, pureed diets, visually monitor, perform AI if choking
Specialized Diet: ☐ No ☐ Yes	Describe Supports: pureed diets, regular spoon, deep bowl, plastic cup w straw
Chronic Medical Conditions: ☒ No ☐ Yes	List & Describe Supports: Aortic valve disorder DNR/DNI: ☒ No ☐ Yes ID, osteoporosis, scoliosis, trisomy 9, small head, arched mouth.
Medication at PAI: ☒ No ☐ Yes	Describe Supports: PRN's for allergies, no regular meds
Personal Cares: ☒ No ☐ Yes	Describe Supports: able to use toilet, needs help cleaning after BM & during menses, may indirate bathroom by putting hand up, encourage bathroom sign
Mobility/Fall Risk: ☒ No ☐ Yes	Describe Supports: awareness, if not may fall, needs railing on stairs, may be tired on long outings
Community Support: ☒ No ☐ Yes	Describe Supports: model ped safety skills & monitor for unsafe situations - unable to comprehend potential danger
Sensory Support: ☒ No ☐ Yes	List & Describe Supports: auditory & visual impair - hearing loss in both ears, able to see w/ glasses, wears hearing aid,
Behavior Support: ☐ No ☐ Yes	List & Describe Supports: N/A
Unsupervised Time: ☐ No ☐ Yes	Describe Supports: N/A
Important to: opp to be helpful & independent, pics of family, pamphlets to hold, games matching, sorting etc	
Important for: use comm skills, to advocate, drink liquids, wear glasses	
Likes: games, w/ buttons, iPad/ smartboard games, active activities	
Dislikes: being told no, not being understood, not being independent not in tv/ music, large dogs / games in large groups	

Lead Review Completed: Maunda Sweeney

Staff: Tristen Lossing
Date: 9/20/22

Service Recipient: D.S.
Service Span: 8.22 - 8.2023

Outcomes:

Outcome #1 Will put away her cards in the designated container & place with 2 or less verbal prompts · when done - prompt
Outcome #2: Bring her cup to table · gesture point · Asl
Communication Style: nonverbally body lang., facial gestures, & some signs.
Learning Style: Routine, repitition, physical prompts & modeling.

Is this person able to self-manage according to the IAPP, SMA & CSSPA – check yes or no below

Allergies: ☒ No ☐ Yes	List & Describe Supports: Bee stings, iodine, contrast dye epipen
Seizures: N/A ☐ No ☐ Yes	Describe Supports: N/A
Choking: ☒ No ☐ Yes	Describe Supports: pureed diet, office drink, visual monitor
Specialized Diet: ☒ No ☐ Yes	Describe Supports: eats independently, spoon, bowl/ deep plate, plastic cup straw/ lid
Chronic Medical Conditions: ☒ No ☐ Yes	List & Describe Supports: Aortic Valve disorder, Osteoporosis, I.D., DNR/DNI: ☒ No ☐ Yes scoliosis, trysomy 9,
Medication at PAI: ☒ No ☐ Yes	Describe Supports: Benadryll for allergies, and Epipen for anaphylatic shock. NO Daily meds.
Personal Cares: ☒ No ☐ Yes	Describe Supports: Able to independently toilet, support cleaning up after, staff sign Bathroom to comm. with her to go.
Mobility/Fall Risk: ☒ No ☐ Yes	Describe Supports: may become curious, use railing for stairs, may need wheel chair for long distances.
Community Support: ☒ No ☐ Yes	Describe Supports: 1:1 in community
Sensory Support: ☒ No ☐ Yes	List & Describe Supports: Auditory & visual impairment, significant hearing loss.
Behavior Support: ☐ No ☐ Yes N/A	List & Describe Supports: N/A
Unsupervised Time: ☐ No ☐ Yes N/A	Describe Supports: N/A
Important to: opportunities to be helpful, access to her picture books, outings.	
Important for: use comm. skills to advocate for herself, wear glasses, drink liquids.	
Likes: sorting items, being around others, matching cards	
Dislikes: told "no", t.v. & music, around larger jumping dogs.	

Lead Review Completed: Marita Sweeney

Staff: Trey G.
Date: 9/20/22

Service Recipient: Destiny Smith
Service Span: August 22 - Aug 23

Outcomes:

Outcome #1	Destiny will put away cards in designated container with 2 or less verbal prompts
Outcome #2:	Destiny will bring cup to table in 90% or more opportunities
Communication Style:	Visual and Auditory Impairment. Communicates nonverbally.
Learning Style:	routine, repetition, physical prompts, modeling. Stand in front when asking questions

Is this person able to self-manage according to the **IAPP, SMA & CSSPA** – check yes or no below

Allergies: ☒ No ☐ Yes	List & Describe Supports: Bee stings, Iodine, and Contrast dye. PRN for Benadryl. Epipen for anaphylactic shock
Seizures: N/A ☐ No ☐ Yes	Describe Supports: N/A
Choking: ☒ No ☐ Yes	Describe Supports: risk of choking, offer drink, pureed diet, Abdominal thrusts
Specialized Diet: ☒ No ☐ Yes	Describe Supports: pureed diet, eats independently using regular spoon, Clothing Protector
Chronic Medical Conditions: ☒ No ☐ Yes	List & Describe Supports: Aortic valve disorder, DNR/DNI: ☒ No ☐ Yes Intellectual disability, Osteoporosis, Trisomy 9, Any Collision Concerns reported
Medication at PAI: ☒ No ☐ Yes	Describe Supports: does not take daily meds at pai. taken in liquid form. Takes Benadryl
Personal Cares: ☒ No ☐ Yes	Describe Supports: able to use toilet independently, may need support Cleaning after BM/menses
Mobility/Fall Risk: ☒ No ☐ Yes	Describe Supports: appears to have awareness that she may fall. when using stairs needs railing.
Community Support: ☒ No ☐ Yes	Describe Supports: not able comprehend dangers in the Community. Staff provide Supervision.
Sensory Support: ☒ No ☐ Yes	List & Describe Supports: Auditory and Visual Impairment. significant hear loss.
Behavior Support: ☐ No ☐ Yes N/A	List & Describe Supports: N/A
Unsupervised Time: ☐ No ☐ Yes N/A	Describe Supports: N/A
Important to:	Be helpful, Independence, Cutings, Games, marching, Sorting,
Important for:	Signs, Consume Enough liquids, glasses, and Socializing
Likes:	Games, Sorting, Cards, Coloring, Yard Games, make up, hair
Dislikes:	Being told no, limted interest in television / music, ~~Big dogs / dogs that jump~~.

Lead Review Completed: Maura Sweeney

Staff: Alfredo Jerez-Montes
Date: 9/20/22

Service Recipient: Destiny Smith
Service Span: Aug 22 - Aug 23

Outcomes:

Outcome #1 Destiny will put away her cards in the designated container and place in 2 or fewer prompts.

when destiny is done with her cards, staff prompt her to put away.

Outcome #2: Destiny will bring her cup to the table.

Communication Style:
Non-verbally using body language, gestures, some signs.

Learning Style:
Routine, repitition, physical prompts, modeling.

Is this person able to self-manage according to the **IAPP, SMA & CSSPA** – check yes or no below

Allergies: ☑ No ☐ Yes	List & Describe Supports: Bee stings, iodine, contrast dye. PRN Benadryl. Epi pen.
Seizures: ☐ No ☐ Yes	Describe Supports: N/A
Choking: ☑ No ☐ Yes	Describe Supports: At risk of choking, offer drink, pureed diet, visually monitor.
Specialized Diet: ☑ No ☐ Yes	Describe Supports: Pureed diet, eats independently, clothing protector, bowl.
Chronic Medical Conditions: ☑ No ☐ Yes	List & Describe Supports: Scoliosis, Trisomy 9, arched roof of mouth. DNR/DNI: ☑ No ☐ Yes Aortic valve disorder, Intellectual Disability, Osteoperosis.
Medication at PAI: ☑ No ☐ Yes	Describe Supports: No daily meds, takes benadryl for allergies, Epi-pen.
Personal Cares: ☑ No ☐ Yes	Describe Supports: Independently use toilet. May need help cleaning after BM.
Mobility/Fall Risk: ☑ No ☐ Yes	Describe Supports: Awareness that she may fall, she uses railings for stairs.
Community Support: ☑ No ☐ Yes	Describe Supports: Not able to comprehend dangers in community. Staff assist.
Sensory Support: ☑ No ☐ Yes	List & Describe Supports: Auditory/visual impairment, Glasses, Staff offer hand for transition
Behavior Support: ☐ No ☐ Yes	List & Describe Supports: N/A
Unsupervised Time: ☐ No ☐ Yes	Describe Supports: N/A

Important to:
Opportunity to help/be independent, outings, games, family.

Important for:
Use comm. skills, consume an appropriate amount of liquids.

Likes:
Games with buttons/touchscreen, sorting, cards, girlie activities,

Dislikes:
Being told "no", large group games, large dogs that jump.

Lead Review Completed: Maura Sweeney

Staff: Amanda Diaz
Date: 9/20/2022

Service Recipient: DS
Service Span: Aug 22 - Aug 23

Outcomes:

Outcome #1	Destiny will put away her cards in designated container and Place with 2 or more verbal prompts
Outcome #2:	Destiny will bring her cup to the table
Communication Style:	Visual and some auditory impairment. Non verb communication body language, some sign
Learning Style:	Routine & Rep, physical prompts & modeling

Is this person able to self-manage according to the **IAPP, SMA & CSSPA** – check yes or no below

Allergies: ☑ No ☐ Yes	List & Describe Supports: Bee stings & Iodine. PRN Benadryl & Epipen
Seizures: ☐ No ☐ Yes	Describe Supports: NA
Choking: ☒ No ☐ Yes	Describe Supports: Risk of choking, pureed diet,
Specialized Diet: ☒ No ☐ Yes	Describe Supports: pureed diet, Reg spoon, deep plate and bowl
Chronic Medical Conditions: ☒ No ☐ Yes	List & Describe Supports: Aortic valve disorder (symptoms shortness of breath) intellectually Disability, Osteoporosis scoliosis, Trisomy 9 DNR/DNI: ☒ No ☐ Yes
Medication at PAI: ☒ No ☐ Yes	Describe Supports: No meds @ PAI Does have PRN Benadryl EpiPen
Personal Cares: ☒ No ☐ Yes	Describe Supports: Able to use Restroom alone may need help cleaning after BM or men
Mobility/Fall Risk: ☒ No ☐ Yes	Describe Supports: Knows that she may fall, asks for help when in new location
Community Support: ☑ No ☐ Yes	Describe Supports: Staff will provide supervision and offer full verbal support
Sensory Support: ☒ No ☐ Yes	List & Describe Supports: Auditory and visual impairment. significant hearing loss, wears glasses
Behavior Support: ☐ No ☐ Yes	List & Describe Supports: NA
Unsupervised Time: ☐ No ☐ Yes	Describe Supports: NA
Important to:	opportunities to do things alone, photos of family, Pamphlets sorting options, community outing
Important for:	wear glasses, communication skills, has enough liquids
Likes:	playing games, buttons or touch screen computers, smart board "girlie" things yard games picture books
Dislikes:	being told "no" not being understood, television, large dogs

Lead Review Completed: Maurita Sweeney

Staff: Cortney Kelly
Date: 9/20/22

Service Recipient: Destiny S
Service Span: Aug 22 - July 23

Outcomes:

Outcome #1 Destiny will put away her cards. -end of day prompt, designated container, put away
Outcome #2: Destiny will bring cup to table. -staff gesture, point
Communication Style: visual, auditory impairment nonverbally - body language, some gestures, understands short phrases
Learning Style: routine, repetition, physical prompts, modeling

Is this person able to self-manage according to the **IAPP, SMA & CSSPA** – check yes or no below

Allergies: ☒ No ☐ Yes	List & Describe Supports: Bee stings, iodine, contrast dye - monitor, allergy PRN, epi pen
Seizures: ☐ No ☐ Yes	Describe Supports: N/A
Choking: ☒ No ☐ Yes	Describe Supports: offer drink, pureed diet, visually monitor
Specialized Diet: ☒ No ☐ Yes	Describe Supports: " " regular spoon, clothing protector, bowl or deep plate, plastic cup & lid
Chronic Medical Conditions: ☒ No ☐ Yes	List & Describe Supports: DNR/DNI: ☒ No ☐ Yes Aortic valve disorder, osteoporosis, scoliosis, trig - Contact home w/ concerns
Medication at PAI: ☒ No ☐ Yes	Describe Supports: Currently no meds, PRN Benadryl & Epi-pen, takes liquid meds
Personal Cares: ☒ No ☐ Yes	Describe Supports: Ind., may need support cleaning after BMs & menses
Mobility/Fall Risk: ☒ No ☐ Yes	Describe Supports: may fall on uneven ground, may need a hand or rail, tires on long walks
Community Support: ☒ No ☐ Yes	Describe Supports: trans., supervision, pedestrian safety
Sensory Support: ☒ No ☐ Yes	List & Describe Supports: Auditory & visual impairment - hearing aids/glasses
Behavior Support: ☐ No ☒ Yes	List & Describe Supports:
Unsupervised Time: ☒ No ☐ Yes	Describe Supports: N/A
Important to: independence, being helpful, picture books, games, community outings	
Important for: communication skills, liquids, social experiences, glasses	
Likes: buttons/touchscreens, coloring, books, games, getting hair done	
Dislikes: being told "no", rapid arm movements & facial expressions, little interest in TV & music	

Lead Review Completed: Marita Sweeney

Staff: Mari BP

Date: 9-20-22

Service Recipient: Destiny

Service Span: August 22-23

Outcomes:

Outcome #1	Destiny will put her cards in designated container and place w/ 2 or less verbal prompts - when done will put it on bookshelf
Outcome #2:	Destiny will bring her cup to the table - staff will gesture, point or use ASL to communicate.
Communication Style:	Has visual and auditory impairment- communicates nonverbally using body language & gestures
Learning Style:	routine, repetition, physical prompts, and modeling stand directly in front of destiny when trying to communicate

Is this person able to self-manage according to the **IAPP, SMA & CSSPA** – check yes or no below

Allergies: ☒ No ☐ Yes	List & Describe Supports: Bee stings, iodine, and contrast dye. PRN for benadryl and epipen
Seizures: ☐ No ☐ Yes	Describe Supports: NA
Choking: ☒ No ☐ Yes	Describe Supports: risk of choking after drinks, pureed diet, visually monitor her
Specialized Diet: ☒ No ☐ Yes	Describe Supports: pureed diet, eats independently using regular spoon uses plastic cup w/ lid & straw
Chronic Medical Conditions: ☒ No ☐ Yes	List & Describe Supports: DNR/DNI: ☒ No ☐ Yes Aortic valve disorder, can cause shortness of breath or fainting osteoporosis, scoliosis, history of intellectual disability
Medication at PAI: ☒ No ☐ Yes	Describe Supports: Doesn't take daily meds, takes benadryl for allergies & epipen. would take meds in liquid form.
Personal Cares: ☒ No ☐ Yes	Describe Supports: can independently use the toilet, needs support cleaning up, may indicate needing to use bathroom
Mobility/Fall Risk: ☒ No ☐ Yes	Describe Supports: Has awareness she may fall, may become cautious when transitioning
Community Support: ☒ No ☐ Yes	Describe Supports: cannot comprehend potential dangerous in community staff provide supervision & physical support
Sensory Support: ☐ No ☐ Yes	List & Describe Supports: Auditory and visual impairment. significant hearing loss has functional vision w/ glasses. Assistance in cleaning her glasses
Behavior Support: ☐ No ☐ Yes	List & Describe Supports: NA
Unsupervised Time: ☐ No ☐ Yes	Describe Supports: NA
Important to:	Have opportunities to be helpful & do tasks for herself having cards to her pictures & care of parents & family
Important for:	using her communication skills to advocate for preferences consuming liquids throughout day & wearing her glasses
Likes:	games w/ buttons or touch screen, sorting items, playing cards, matching items, coloring, yard games, girly activities
Dislikes:	being told "no", may become frustrated. Limited interest in tv & music, doesn't like playing games in groups or large dogs.

Lead Review Completed: Maurita Sweeney

Staff: Lisa Hartman
Date: 9/20/22

Service Recipient: Destiny Smith
Service Span: Aug-22-23

Outcomes:

Outcome #1	put away her cards in designated area (container when done cards put in designated container + put on shelf
Outcome #2:	Bring her cup to table staff gesture, point or use ASL - when lunch time - bring cup to table
Communication Style:	visual > auditory imp. - nonverbal - Body language gestures some signs.
Learning Style:	routine repetition physical prompts modeling

Is this person able to self-manage according to the **IAPP, SMA & CSSPA** – check yes or no below

Allergies: ☑ No ☐ Yes	List & Describe Supports: bee stings, iodine, contrast dyes - monitor PRN Benadryl; Epi pen
Seizures: N/A ☐ No ☐ Yes	Describe Supports: N/A
Choking: ☑ No ☐ Yes	Describe Supports: offer drink, pureed diet, usually monitor chd. throats - 911
Specialized Diet: ☑ No ☐ Yes	Describe Supports: pureed diet, eats ind. c reg. spoon, clothing protect. deep plate reg. bowl drink c cup c lid + straw
Chronic Medical Conditions: ☑ No ☐ Yes	List & Describe Supports: Aortic valve disorder, Osteoporosis, scoliosis, Trisomy 9 concerns to parents DNR/DNI: ☑ No ☐ Yes
Medication at PAI: ☑ No ☐ Yes	Describe Supports: O at PAI - Benadryl + Epi pen liquid form med if needed
Personal Cares: ☑ No ☐ Yes	Describe Supports: ind. toilet assist after BM/menses - use every 2hrs staff sign toilet
Mobility/Fall Risk: ☑ No ☐ Yes	Describe Supports: cautious seeking for assistance c stairs wc possible - long distances
Community Support: ☑ No ☐ Yes	Describe Supports: staff demonstrate safety + pedestrian skills 911 in emergency
Sensory Support: ☑ No ☐ Yes	List & Describe Supports: Auditory + Visual - hearing aids (may not wear glasses (will wear) concerns to parents
Behavior Support: N/A ☐ No ☐ Yes	List & Describe Supports: N/A
Unsupervised Time: N/A ☐ No ☐ Yes	Describe Supports: N/A
Important to:	app. to be helpful, tasks done indep., activities - sorting hair pictures/pamphlets
Important for:	use comm. skills, consumes a lot of liquids, wears glasses. be supported in comm.
Likes:	playing games, coloring, being around others, "girlie" activities
Dislikes:	being told no, not being understood, large groups, dogs that are large or jump

Lead Review Completed: Maureen Sweeney

Staff: Sara B
Date: 9/23/22

PAI

Service Recipient: Destiny
Service Span: _____

Outcomes:

Outcome #1: B Put cards away in designated container with 2 or less verbal prompts 75%

Outcome #2: Will bring cup to table 90%

Communication Style:
nonverbal w/ body language gestures some ASL

Learning Style:

Is this person able to self-manage according to the **IAPP, SMA & CSSPA** – check yes or no below

Allergies: ☑ No ☐ Yes	List & Describe Supports: Bee stings, iodine, contrast dye;
Seizures: ☐ No ☐ Yes	Describe Supports: N/A
Choking: ☑ No ☐ Yes	Describe Supports: puree diet, offer drink, visually monitor
Specialized Diet: ☑ No ☐ Yes	Describe Supports: puree diet, uses ind. cup/straw for drinks
Chronic Medical Conditions: ☑ No ☐ Yes	List & Describe Supports: scoliosis trismony DNR/DNI: ☑ No ☐ Yes aortic valve disorder intellectual disability osteoporosis.
Medication at PAI: ☑ No ☐ Yes	Describe Supports: none @ PAI Benadryl / epipen (liquid) for allergies
Personal Cares: ☑ No ☐ Yes	Describe Supports: ind. w/ toilet assist w/ BM / menses
Mobility/Fall Risk: ☑ No ☐ Yes	Describe Supports: aware of risk/fall risk (maybe cautious w/ transitions through daily routine)
Community Support: ☑ No ☐ Yes	Describe Supports: Staff will provide supervision model pedestrian skills
Sensory Support: ☑ No ☐ Yes	List & Describe Supports: auditory visual impairment wears glasses (may resist hearing aids)
Behavior Support: ☐ No ☐ Yes	List & Describe Supports: N/A
Unsupervised Time: ☐ No ☐ Yes	Describe Supports: N/A

Important to:
opportunities to help, be independant access to pics/books family

Important for:
use communication skill, liquids wears glasses social support

Likes:
games w/ buttons touch screen sorting items "giving" activities

Dislikes:
being told NO when communication isn't understood

Lead Review Completed: _____