

*Community Care, Inc. is seeking interested providers to work with Community Care, Inc. to create a supportive environment and meaningful life experiences for individuals. If your agency has interest in learning more about the following member and conduct an assessment please send an interest email to [contractinquiries@communitycareinc.org](mailto:contractinquiries@communitycareinc.org)*

If you are not already a contracted provider, you will need to ensure you can meet all our requirements prior to contract consideration. Please refer to the "Join-our-Network" section on our website <http://www.communitycareinc.org/providers/join-our-network>

### **Member Profile**

Member is a 26 year old semi-ambulatory developmentally disabled male who currently resides at Central Wisconsin Center. On good days, he enjoys listening to music and singing with staff. He also enjoys coloring with markers, especially scented markers. He finds comfort in playing with bottles filled with water, food coloring and glitter. A few of his favorite activities are swimming and riding the van around the campus when he is doing well and does not have any blisters outbreaks.

Member is seeking a residential program preferably within two hours of Milwaukee County, other areas outside of this will be considered.

- Member will require interdisciplinary care for ongoing medical and behavioral changes. Member must have involved primary care physician, psychiatrist and the involvement of local hospital physicians and nurses to achieve continuity of care. Access to care should be close by the residence.
- Member will require an RN to be on staff at the home during all shifts. RNs should be experienced in medication management, psychiatric nursing, G tubes, wound care and have experience with persons who are developmentally disabled. Member receives all medications and nutrition via his G tube, which he pulls out making G tube re-insertion a regular part of his care.
- Member behaviors require a least a 2:1 staffing ratio including the RN. Staff should have experience managing complex and behavioral clients.

### **Environmental Modifications/Requirements**

- Home must be wheelchair accessible as member uses wheelchair at times for health and at other times is semi-ambulatory.
- No glass windows-recommendation for Lexan or Plexi-glass
- Washable surfaces throughout the home, no carpeting through out the home.
- All furniture should be secured
- Bed frame adjustable (wooden frame type) as member has been known to destroy hospital beds...
- Room or area where member can participate in activities

### **Additional needs:**

- Transportation quickly accessible Member is 2:1 for van rides.
- Ability to train staff in using Crisis Prevention Institute protocols or other crisis de-escalation protocols. Holds may be necessary for medical care so provider must have the ability to train staff in regards to this as well. Provider should be experienced in restrictive measures with State of WI.
- Member will do best in a very structured environment that has a set up where he has his own private room or living area that he can access.

- Member is not considered to be an appropriate candidate for a day program, so structured activities must be provided during waking hours. Community integration and structured enrichment activities should be the focus of daytime hours. Program flexibility is important.

**Member has the following behavioral challenges:**

1. Self Injurious Behaviors such as head banging, hand biting, self-scratching, tipping over his wheelchair, rectal digging, and hitting himself.
2. Physical aggression such as pinching, grabbing, kicking, spitting pushing, scratching, head butting or slapping others with enough force to injure others.
3. Property Destruction which includes tipping his wheelchair with enough force to damage items as well as tipping other chairs. He will also attempt to destroy furniture and any other item he can grab or bite
4. Disruptive and offensive behaviors such as vomiting, non cooperative/obstructive behavior to prevent task completion. This could include sitting on the floor while dressing/undressing or positioning his legs to prevent dressing to occur. Other offensive/disruptive behaviors include fecal smearing, stripping/disrobing in public areas exposing his chest, thighs, buttocks or groin. Voiding urine or bowels in inappropriate places when upset.
5. Elopement

**Member has the following medical concerns\*:**

1. Autistic disorder
2. Epidermolysis Bullosa Dowling Meara variant
3. Myopia severe
5. Emesis recurrent
5. Gastroparesis
6. Gastroesophageal reflux disease
7. Scelerodactyly with phalangeal thinning
8. Palmoplantar keratoderma
10. Incontinence
11. G-tube\*\*
12. Constipation
13. Genodermatoses
14. Opioid use.

PM 09/15/17