

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

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:

The member described in the following profile has an interesting history and presentation which includes substantial progress as well as ongoing complexities. The member is 35 year old Caucasian female who is currently residing at Southern Wisconsin Center for treatment and stabilization related to mental health diagnosis and Intellectual/Developmental Disability Disorder. This member is protectively placed and it is anticipated this will continue. Her mother is actively involved and is her legal decision maker.

The member has a lengthy placement history which includes several Adult Family Home placements and Southern Wisconsin Center. She has experienced periods of stable behavior but can become triggered by medical issues, inconsistent staff responses, if boundaries or restrictions are removed and environmental triggers. The member has exhibited SIB, physical aggression, verbal aggression, urination and defecation outside the bathroom and elopement behaviors.

The member is a delightful and engaging young lady who can form relationships with others. She has a sense of humor and enjoys time limited, supervised periods with peers. She struggles with perseveration and anxiety and this can increase when boundaries are blurred, she is able to split staff, she experiences pressures due to expectations, she is testing others or is uncomfortable with relationships.

The member has made progress during her admission to SWC and participates in multiple activities, therapies and work when she chooses. The member requires assistance with weather appropriate clothing, reminders to use the restroom, meal preparation, medication administration and management, money management, laundry and chores. She is fully ambulatory.

Member Diagnosis: Autism Spectrum Disorder; Intellectual Disability (Mild); Pervasive Developmental Disorder; Mood Disorder; History of Tourette's; History of MMR; Chronic Mood and Behavioral Dysregulation; Cognitive Deficits.

Placement History: The member has resided with her mother as well as in multiple AFH placements. She has been admitted twice to Southern Wisconsin Center and has required inpatient psychiatric admissions. Placements have ranged from four bed to one bed homes with a restrictive measures waiver in place for physical holds. The member tends to sabotage placement and the ideal situation would be an environment with a provider who is able to understand and anticipate her needs and appreciate her potential.

A Meaningful Day for this member would include: This member is most successful when she is allowed control and choices in specific areas where and when it is safe to do so. She benefits from a predictable, structured routine within which there is regulated flexibility. She is able to let staff know what she wants to do during the day. Providing several flexible options within given parameters and then setting the schedule for the day can be effective. The member likes to watch videos, paint her nails, put on makeup and do different activities. She does enjoy shopping and community access but this must be implemented carefully. The member can fluctuate regarding her preferences from one day to the next. A variety of known activities and options is optimal.

Environmental Modifications/Requirements: This member requires a sterile environment which should include plexi glass windows, locks removed from the bedroom door and bathroom, door alarms on each exit, locked cabinets and furniture that is secured to the floor or walls.

Location Considerations: The member can reside within a three to four hour drive from Racine where her guardian lives.

Setting Considerations: This member requires a one bed, individualized placement with a magnetic locking system to prevent elopement. There is the potential for the member to have a housemate with similar needs in the future. This would not be recommended until a significant period of stabilization has occurred in a one bed environment.

Additional needs: The member will require 2:1 staffing and 24/7 supervision due to her behaviors. She will require two person physical holds at her placement and in the community. Two staff are also needed due to benefits of switching out staff throughout the day. Staff will need to be trained in use of Crisis Prevention Intervention or similar modality and have resources for ongoing training.

A Restrictive Measure Waiver application that includes a Behavior Support Plan, Elopement Protocol and plan for use of holds will be needed. This will require a yearly renewal which is completed as a team. The holds are primarily needed to prevent physical aggression and self-injurious behaviors. Client Rights Limitations/Denials will also be needed for phone, locking possessions and privacy due to the member's risks.

Member has the following behavioral challenges:

Physical Aggression: This member has exhibited physical aggression which includes hitting, kicking, and scratching. She usually targets staff but may also target a peer if upset at that person.

Verbal Aggression: This member has threatened to harm others, threatened to engage in negative behaviors or elope. She may raise her voice, shout for help or use profanity.

Self-injurious behavior: This member has a pattern of hitting herself, banging her head against walls or other objects, rectal digging, and biting herself.

Property Destruction: This member has shown behaviors such as throwing objects and pushing objects off tables. She may use objects as weapons.

Elopement: This member has a history of elopement which includes high risk behaviors during the process. During elopement member may attempt to enter private property, sit in the street, disrobe, become physically aggressive and urinate/defecate.

Member has the following medical concerns:

The member had a prolapsed rectum that was addressed surgically, but due to behaviors of pushing this could be an issue in the future. The member is currently prescribed very carefully adjusted psychotropic medications. Some medications have not been effective for her and consistent psychiatric care is essential. Member has the nasal septum perforation that was decided to not be repaired. The member was also recently diagnosed with seizure disorder.