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Division of	Health Service Re	egulation			
STATEMENT ( AND PLAN OF	STATEMENT OF DEFICIENCIES (X1) PRO AND PLAN OF CORRECTION IDEN	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
		MHL071-035	B. WING		R 05/16/2019
NAME OF FRC	NAME OF PROVIDER OR SUPPLIER	STREETADI	DRESS, CITY, S	STREET ADDRESS, CITY, STATE, ZIP CODE	
A SPECIAL TOUCH II	TOUCHI	305 SOUT BURGAW	305 SOUTH SMITH STREET BURGAW, NC 28425	RET	
(X4) ID PREFIX - TAG	SUMMARY STA (EACH DEFICIENCY REGULATORY OR LI	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
	INITIAL COMMENTS	LS.	V 000		
< ○	vn ennual and follo m May 16, 2019. E	An annual and follow up survey was completed on May 16, 2019. Deficiencies were cited.		RECEIVED	
	his facility is licens ategory: 10A NCA iving for Adults wit	This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.		By DHSR - Mental Health Lic. & Cert. Section at 1:08 pm, Jun 05, 2019	@)
V 112 2	27G .0205 (C-D) Assessment/Treatn	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan	V 112		
	<ul> <li>10A NCAC 27G. 0205 ASSE3</li> <li>PLAN</li> <li>PLAN</li> <li>(c) The plan shall be developed tassessment, and in partnership wellogally responsible person or both of admission for clients who are ereceive services beyond 30 days.</li> <li>(d) The plan shall include:</li> <li>(f) strategies;</li> <li>(d) a schedule for review of the plan unually in consultation with the oresponsible person or both;</li> <li>(f) basis for evaluation or asses outcome achievement; and</li> <li>(f) written consent or agreement responsible party, or a written starprovider stating why such conserothated.</li> </ul>	<ul> <li>10A NCAC 27G. 0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</li> <li>(c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days.</li> <li>(d) The plan shall include:</li> <li>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</li> <li>(2) strategies;</li> <li>(3) staff responsible;</li> <li>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</li> <li>(5) basis for evaluation or assessment of outcome achievement; and</li> <li>(6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained.</li> </ul>			
Division of Hea LABORATORY E	ith Service Regulation DIRECTOR'S OR PROVIL	Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	NATURE	ALLE THE SAL	(Xe) Dare
STATE FORM	ANNA ANA NA ANA ANA ANA ANA ANA ANA ANA			4WSH	ignuation atreet 1 of 6

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		MHL.071-035	B. WING		R 05/16/2019
AME OF I	NAME OF PROVIDER OR SUPPLIER	STREET ADD	DRESS, CITY, S	STREET ADDRESS, CITY, STATE, ZIP CODE	
SPECI,	A SPECIAL TOUCH II	305 SOUTH SA BURGAW, NC	305 SOUTH SMITH STREET BURGAW, NC 28426	REET	
(X4) ID PREFIX TAG	SUMMARY STA (EACH DEFICIENC) REGULATORY OR L	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	CI PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	COMPLETE COMPLETE
V 112	Continued From page	ige 1	V 112		
	This Rule is not met a Based on record revie facility failed to implen assessment affecting (#1). The findings are:	This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to implement strategies based on assessment affecting one of two audited clients (#1). The findings are:	-		
	Review on 5/09/19 of client #1'-27 year old male. -27 year old male. -Admission date of 10/09/13. -Diagnoses of moderate intelle reactive attachment disorder. -1:1 support required due to in behaviors.	Review on 5/09/19 of client #1's record revealed: -27 year old male. -Admission date of 10/09/13. -Diagnoses of moderate intellectual disability and reactive attachment disorder. -Treatment plan dated 1/01/19. -1:1 support required due to inappropriate sexual behaviors.	•		
	Interview on 5/14/1 -There was 1 staff i shift.	5/14/19 client #1 stated: staff working with both clients each			
	Interview on 04/04/ -There was 1 staff shift. -She was aware of 1:1 staffing but no for the home. She ensure wording act needs in home. Sh	Interview on 04/04/19 the Licensee stated: -There was 1 staff working with both clients each shift. -She was aware of day program requirements for -She was aware of day program requirements for 1:1 staffing but no 1:1 staffing had been specified for the home. She would review treatment plan to ensure wording accurately reflected supervision needs in home. She would forward a copy of treatment plan by end of business day 5/16/19 if			
	1:1 supervision in program. No copy received by close c	1.1 supervision in plan was specific to day program. No copy of treatment plan had been received by close of business day 5/16/19.			
V 118		27G .0209 (C) Medication Requirements	V 118		
-	10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (1) Prescription or non-prescription di	10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (1) Prescription or non-prescription drugs shall			

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ND PLAN	STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	DIVISION OF DEFICIENCIES (X1) PROVIDER/SUPPLIEV/CLIA STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIEV/CLIA AND PLAN OF CORRECTION IJDENTIFICATION NJJMBER:	(X2) MULTIPLE A. BUILDING:	(X2) MULTIPLE CONSTRUCTION A, BUILDING:	(X3) DATE SURVEY COMPLETED
		MHL071-036	B. WING		R 05/16/2019
VAME OF P	NAME OF PROVIDER OR SUPPLIER	STREET AD	STREET ADDRESS, CITY, STATE, ZIP CODE	ATE, ZIP CODE	
A SPECI	A SPECIAL TOUCH II	305 SOUT BURGAW	305 SOUTH SMITH STREET BURGAW, NC 28425	KEET	
(X4) ID PREFIX TAG	SUMMARY STA (EACH DEFICIENC) REGULATORY OR L	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	10 PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(XS) COMPLETE DATE
V 118	Continued From page 2	ige 2	V 118		
	only be radministered to a client order of a person authorized by drugs. (2) Medications shall be self-ad client's physician. (3) Medications, including inject administered only by ficensed p administered only by ficensed by administered on the regally qual pharmacist or other legally qual (4) A Medication Administration all drugs administer recorded immediately after adm MAR is to include the following: (A) client's name; (B) name, strength, and quantit (C) instructions for administerin (D) date and time the drug is ac (E) name or initials of person a drug. (5) Client requests for medicati checks shall be recorded and k file followed up by appointment with a physician.	only be administered to a client on the written order of a person authorized by law to prescribe drugs. (2) Medications shall be self-administered by clients only when authorized in writing by the client's physician. (3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legatly qualified person and privileged to prepare and administer medications. (4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medicately after administering the drugs administered to each client must be kept current. Medicately after administration. The MAR is to include the following: (A) client's name; (B) name, strength, and quantity of the drug; (C) instructions for administering the drug. (5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.			
	This Rule is not m Based on record re facility failed to adn ordered by the phy MARs for 2 of 2 cliv The findings are:	This Rule is not met as evidenced by: Based on record review and interviews, the facility faited to administer medications as ordered by the physician and maintain accurate MARs for 2 of 2 clients audited (clients #1, #2). The findings are:		ť	
	Finding #1: Review on 5/09/19	Finding #1: Review on 5/09/19 of client #1's record revealed:			

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	05/16/2019			(XS) COMPLETE DATE				<u> </u>					
(X2) MULTIPLE CONSTRUCTION A. BUILDING:		ATE, ZIP CODE	REET	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		'		A A		Ľ			
A. BUILDING:	B, WING	STREET ADDRESS, OTTY, STATE,	305 SOUTH SMITH STREET BURGAW, NC 28425	ID PREFIX TAG	V 118				~~~~~				
IDENTIFICATION NUMBER:	WHL071-035	STREET ADD	305 SOUTI BURGAW,	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ge 3	-27 year old male admitted 10/09/13. -Diagnoses included moderate intellectual disability and reactive attachment disorder. -Order dated 1/04/19 for Trazadone 300 milligrams (mg) AM. (Used to treat depression).	Review on 5/09/19 of client #2 MARs for March, April, and May 2019 revealed medication to be administered 300mg at bedtime.	Interview on 5/9/19 staff #1 contacted pharmacy for clarification. Additional clarification was required from prescribing physician to ensure accuracy.	Finding #2: Review on 5/9/19 of client #2's record revealed: -20 year old male admitted 6/25/17. -Diagnoses included disruptive mood disorder, mild intellectual disabilities; attention deficit hyperactive disorder (ADHD), combined type. -Order dated 10/1/18 for Clonidine 0.1 mg, 2 tablets (=0.2 mg) at bedtime. (Used to treat ADHD.)	Review on 5/9/19 of client #2's MARs for May 2019 revealed there was no documentation client #2 had the Clonidine 0.2 mg administered from 5/1/19 - 5/8/19.	Interview on 5/9/19 Staff #1 stated he was sure he administered client #2's Clonidine at bedtime in May 2019, but failed to document on his MAR.	Due to the failure to accurately document medication administration it could not be determined if clients received their medications as ordered by the physician.	
AND PLAN OF CORRECTION		NAME OF PROVIDER OR SUPPLIER	A SPECIAL TOUCH II	SUMMARY STAI (EACH DEFICIENCY REGULATORY OR LS	Continued From page 3	-27 year old male ac -Diagnoses includec disability and reactiv -Order dated 1/04/11 milligrams (mg) AM.	Review on 5/09/19 of client #2 N April, and May 2019 revealed m administered 300mg at bedtime	Interview on 5/9/19 4 for clarification. Add required from presc accuracy.	Finding #2: Review on 5/9/19 of client #2's reco -20 year old male admitted 6/25/17 -Diagnoses included disruptive mo mild intellectual disabilities; attentio hyperactive disorder (ADHD), com byperactive disorder (ADHD), com com hyperactive disorder (ADHD), com hyperactive disorder (ADHD), com hy	Review on 5/9/19 of 2019 revealed there #2 had the Clonidin 5/1/19 - 5/8/19.	Interview on 5/9/19 he administered clis in May 2019, but fai	Due to the failure to accurat medication administration it determined if clients receive as ordered by the physician.	Division of Health Service Regulation
AND PLAN		NAME OF P	A SPECIA	(X4) ID PREFIX TAG	V 118								Division of He

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e survey Pleted	R 05/16/2019			(X5) COMPLETE DATE			
(X2) MULTIPLE CONSTRUCTION (X3) DATE SURVE) A. BUILDING: COMPLETED	05/	ате, ziP соре	LEET	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		Z	ALL S
(X2) MULTIPLE ( A. BUILDING;	B. WING	STREET ADDRESS, CITY, STATE, ZIP GODE	305 SOUTH SMITH STREET BURGAW, NC 28425	D FREFIX TAG	V 118	V 784	
(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	MHL071-035	STREET ADD	305 SOUTH SMITH S BURGAW, NC 28425	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	Continued From page 4 This deficiency has been cited 3 times since the original cite on 5/5/16 and must be corrected within 30 days.	27G .0304(d)(12) Therapeutic and Habilitative Areas	10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (d) Indoor space requirements: Facilities licensed prior to October 1, 1988 shall satisfy the minimum square footage requirements in effect at that time. Unless otherwise provided in these Rules, residential facilities licensed after October 1, 1988 shall meet the following indoor space requirements: (12) The area in which therapeutic and habilitative activities are routinely conducted shall be separate from sleeping area(s). This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to provide a sleeping area(s). Based on observations and interviews, the facility failed to provide a sleeping area for staff separate from the areas in which habilitative activities are routinely conducted. The findings are: . There was a kitchen and dining room combination, laundry/bathroom, hall bathroom, living room, and office. . There was no separate room for staff to sleep separate from areas used by clients. There was no separate room for staff to sleep separate from areas used by clients.
STATEMENT OF DEFICIENCIES (X1) PRO AND PLAN OF CORRECTION (1DEN		NAME OF PROVIDER OR SUPPLIER	A SPECIAL TOUCH II	SUMMARY STAT (EACH DEFICIENCY REGULATORY OR LS	Continued From page 4 This deficiency has bee original cite on 5/5/16 ar within 30 days.	27G .0304(d)(12) TF Areas	10A NCAC 27G .0304 FACILITY DESI EQUIPMENT (d) Indoor space requirements: Facilitie prior to October 1, 1988 shall satisfy th square footage requirements in effect a time. Unless otherwise provided in the residential facilities licensed after Octo 1988 shall meet the following indoor sp requirements: (12) The area in which therapeutic and habilitative activities are routinely cond be separate from sleeping area(s). This Rule is not met as evidenced by failed to provide a sleeping area(s). Based on observations and interviews, failed to provide a sleeping area for sta from the areas in which habilitative acti routinely conducted. The findings are observations on 5/9/19 at approximate arm revealed: There was a kitchen and dining room with current clients. There was no separate room for staff separate from areas used by clients. Telephone interview on 5/9/19 Staff #4 -She had worked at the facility for abou
STATEMENT AND PLAN C		NAME OF P	A SPECIA	(X4) ID PREFIX TAG	V 118	V 784	

FORM APPROVED	I SURVEY RETED	R	6102/01/00			(XS) COMPLETE DATE		· · · · · · · · · · · · · · · · · · ·	If continuation sheet 6 of 6
FORM	IRUCTION (X3) DATE SURVE COMPLETED			IP CODE	a sa	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		i to the i	
	(X2) MULTIPLE CONSTRUCTION	CMMA B		STREET ADDRESS, CITY, STATE, ZIP CODE 306 SOUTH SMITH STREET		PREFIX TAG	V 784		* T4WS11
Division of Heatth Service Regulation	VIDER/SUPPLIER/CLIA TIFICATION NUMBER:		WHE071-035	NAME OF PROVIDER OR SUPPLIER A SPECIAL TOHICH II 306 SOUTH	BURGAW, N	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	Continued From page 5	-She worked week ends. Her shift usually started on Friday night at 9 pm and ended at 4 pm on Saturday. She would return on Sunday night at 11 pm and gets off at 7:30 am Monday. -Staff were allowed to sleep. -They slept on the sofa in the living room. Telephone interview on 5/9/19 Staff #5 stated: -She had worked at the facility for about 9 months. -She had been employed about 8 years by the Licensee and worked at a sister facility. -She would work from Friday at 2 pm until Saturday at 4 pm, or from Saturday at 4 pm and get off on Sunday at either 4 pm or 8 pm. -They were provided a couch in the living room to sleep. There was also a couch in the office.	Division of Health Service Regulation STATE FORM
Division c	STATEMENT AND PLAN (			A SPECIA		(X4) ID PREFIX TAG	V 784		Division of Hea

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#### Susie Hayes, Owner A Special Touch II, Inc. 305 SOUTH SMITH STREET BURGAW, NC 28425 JUNE 3, 2019

Re: Date of Survey 05/16/2019 A Special Touch II MHL -071-035

# **Re: PLAN OF CORRECTIONS**

### V 112-27G.0205 (C-D)

### **INITIAL DEFICIENCY:**

A Special Touch II failed to Implement strategies based on assessment affecting one of two audited clients.

### PLAN OF CORRECTION:

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#1 ISP was discussed during the survey and determined that client #1 ISP does not require a 1:1 support to be required at the group home but at the day program that The explanation of this deficiency determined that no deficiency occurred. Client he attends. The confirmation of this noted deficiency is in the ISP document on pages 8,15,16, and 17.

It should be noted, that the facility is attaching a copy of client requested #1 ISP for review and for clarity.

#### Monitoring

A Special Touch II Management will ensure that if any changes to client #1 ISP will be discussed with his treatment team and adjusted as required -

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### INITIAL DEFICIENCY:

A Special Touch II failed to administer medications as ordered by the physician and maintain accurate MARs for 2 of 2 clients audited (client # 1, #2)

### PLAN OF CORRECTION:

### **Correction:**

#### Client #1

shall be administered as prescribed by client # 1 doctor's prescription. The facility Pharmacy, although the attending physician, Dr. Carlson prescribed the Trazadone Trazadone 300 mg for client #1. Dr. Carlson confirmed that the PM is the correct time frame for administering client #1 medication of Trazodone 300 mg with the requested a conformation that the correct time frame for the administering of the did administer client # 1 medication of Trazadone 300 mg at the PM time frame, A Special Touch II will ensure that client #1 medication of Trazadone 300 mg 300 mg for the AM time frame. The facility contacted Dr. Carlson office and consistent with the PM administer time frame as designated by Southern attached note from Dr. Carlson.

#### Client #2

administering medication. The Executive Director received confirmation from the A Special Touch II Executive Director conducted an exploratory session with the staff that did not follow the proper instructions on signing the MAR when staff member that recording of medications on the MAR will be adhered.

#### Monitoring

A Special Touch II Executive Director will be responsible for the monitoring of all medication prescriptions ensuring that all medications are administered as prescribed by the attending physicians and signed when administered. ~

Prevention
At this time, all clients' medications are prescribed on a three months distribution. Based on this time frame, the Executive Director shall conduct monthly inspections of all client's MARs to ensure correct administering and recording. However, to ensure a more accurate review of all MARs, the House Manager shall review each MAR to ensure accuracy on a weekly basis.
TRAINING:
A Special Touch II management will conduct an in-house refresher by the Executive Director with the House Manager on reviewing the MARs, including a refresher to all staff members within 30 days of this POC.
V 784-27G.0304 (d) (12)
INITIAL DEFICIENCY
A Special Touch II failed to provide a sleeping area for staff separate from the areas in which habilitative activities are routinely conducted.
PLAN OF CORRECTION:
Correction:
A Special Touch II shall provide a designated sleeping area for staff providing staff over night work at the group home. The designated sleeping area will be separate from the areas in which habilitative activities are routinely conducted. However, A Special Touch II is not considered a sleeping facility at this time based on the requirement that one of the clients is required to be supervised for 24-hours. It should be noted, however, that this 24-hour requirement is only in effect as long as there is a client whose ISP requires this designation.

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#### Monitoring

A Special Touch II Qualified Professional shall be responsible for the overseeing of this 24-hour requirement.

#### Prevention

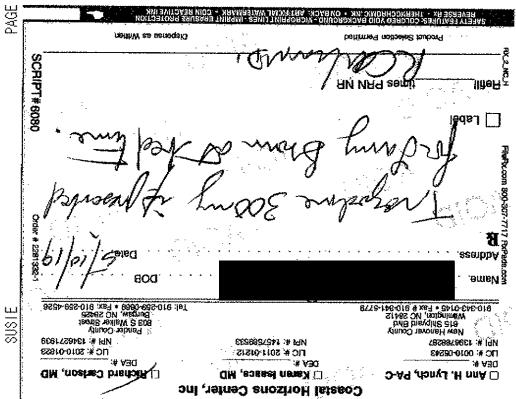
A Special Touch II is discussing the anticipation of adjusting the weekend shift for future consideration.

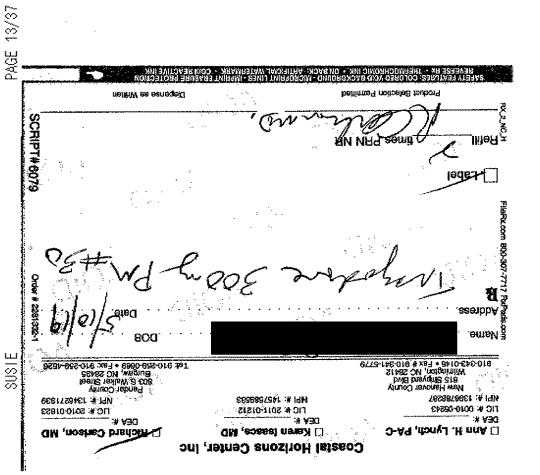
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ISP (4/3/17) Record #: WHAT PROPLETING AND ADMIRE ABOUT ME... Medicaid ID# I am speaking up more for myself and engaging a lot more. WHAT'S INFORTANT TO ME ... To not be treated differently because of my disability. For expectations to be clearly communicated to me. **Effective Date: Individual Support Plan For:** DOB: am very nurturing and helpful to others. 1/1/19 and other team members: and other team members: am friendly and care about others. My desire to be independent. North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services have sympathy for others. Attending my day program. have a great personality. My reading has improved. care about my sister. am sweet and kind. HEALTH RESOURCES am a hard worker. Having consistency. am a good singer. am a loyal friend. have a nice smile. To feel respected. like to have fun. ISP Meeting Date: 10/10/18 am thoughtful. am very polite. am energetic. am outgoing. Staying busy. am helpful. have style. Name: According to According to

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Transforming Lives

09/14/2018

•	Having a job
•	Saving my monay and chanding it no thinge that I want
•	
•	Collecting coins
•	Being as independent as possible.
*	I want to five in my own house.
•	I want to get married.
•	I want to get a driver's ficense and buy a car, preferably a sports car or a truck.
•	Drawing and playing on my tablet.
•	Talking to and seeing my biological sister
•	My housemate ( and my "dad" (Alex-QP)
•	t staff
•	Snencing time with my friends/socializing with others
• •	
•	
•	Being on social media-instagram. FB. and Twitter
•	avo", "Alf
	"Family Matters", "Super Na
	and "ICarly". I'd like to have my own reality television show.)
*	Listening to music (Lespecial Witke his hos music Wix Favorite musicians are Usher, Future the
1	Rapper, Chris Brown, and Rick Ress)
*	Singing and dancing (I want to be on "The XHaptor")
•	Drum Circle
•	Special Olympics bowling (especially so rean socialize with all of my peers)
•	Playing on the computer/surfing the internet.
•	Shopping (my favorite storesare The Dollar Tree, Dollar General, Wal-Mart, and the mail).
•	Visiting car dealerships (especially Nissan and Hummer)
•	Going to church
•	Being in control of the situation.
•	Going out to eat (My favorite foods are Subway, pizza, salad, and sweets).
•	Being in style" and alkof my clothes matching from head to toe. (I like to wear the color purple.
	WIY Tavorite clothes to wear are suit jackets, hats, boots, and Adidas track suits).
*	Having alone time.
•	do not like when I do not get my way.
•	l do not like to be told what to do.
•	do not like to feel rushed.
•	l do not like to be followed around. It makes me feel uncomfortable.
•	I do not like to be criticized.
•	I do not like needles and/or getting shots.
	I do not like going to the dentist.
North Car Disabilitie	North Carolina Divizion of Mental Health, Developmental Disabilities and Substance Abuse Services

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Marken, Umable and Community Supports       Pail of Supports            • Friends from Coastal Enterprises           • A Special Touch I), Inc.             • my biological sister           • A Special Touch I), Inc.             • my biological sister               • my biological sister               • my biological sister               • my biological sister               • model               • my biological sister               • model               • model               • my biological sister	Name:	DOB:	Wedloald III Store and the second with the second s
<ul> <li>WHAT DOTHERS NEED. TO KNOW TO BEST SUPPORT ME</li> <li>Life Situation</li> <li>According to product ream members?</li> <li>My longtime caretaker passed away in higust 2013 and, therefore lawas moved into home (A Special Touch II, Inc.) ihave been living there since October 2013. They are the droup home (A Special Touch II, Inc.) ihave been living there's biological daught home (A Special Touch II, Inc.) ihave been living there's biological daught inserted group home point equations with invarian supports, outside of my friends and my biological used to be in regular communication with my deceased caretaker's biological daught resides in Seattle. Washington, however, she has not make any efforts in contacting long time. I was removed into my my biological patient's resides in Seattle. Washington, NC Since she has moved more locally, I am able to see her m often: I lusually see 'her ai the informative supports' caretaker's biological daught resides in Seattle unvisitive were placed of any free see has moved more locally. I am able to see her m often: I lusually see 'her ai the informative's passit in seattle. Just and the bowing alley on Thi segual worker through 955 will also corresponding the seattle up often visits on the file important that I am able to talk to her on the phone periodically as well. I had ne seguated from mysighter untillike were placed in different residential settings after of our adopted mother.</li> <li>I have arginterest in males, especially younger males and males of the reston path inappropriate behaviors with others. I require 24 hour supervision are called to my by allogical was to make the phone periodically as the information and on or ecclusive to males. I like females too, and will inappropriate behaviors with others. I require 24 hour supervision are of our adopted mother.</li> <li>I have arginterest in males, and the phone periodically as the indiverse of our staff at night to ensure there are no inappropriate behaviors with others. I require 24 hour supercodid not</li></ul>		I. Unpaid, and Community Supports: ends from Coastal Enterprises -friend -my biological sister	Paid Supports:         • Trillium Health Resources         • A Special Touch II, Inc.         • A Special Touch II, Inc.         • Coastal Enterprises of Wilmington         • New Hanover County DSS         • Horizons Health Primary Care         • Coastal Horizons         • UNC Chapel Hill Dental Clinic         • Burgaw Vision Center         • Kelly Medical
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<ul> <li>or i will get off track. When I have too much down time, I also find myself getting in trouble because of attempts to have instructions with neuron starf, firends, and firends, and fartendor, have a tendency to overstep relationship boundaries. I do not have a good understanding of a tendency to overstep relationship boundaries. I do not have a good understanding of the a tendency to overstep relationship boundaries. I do not have a good understanding of a tendency to overstep relationship boundaries. I do not have a good understanding of a tendency to overstep relationship boundaries. I do not have a good understanding of a boundaries in generation. Additionally, I may tamper with their personal being gray with some authoring figures and the nojekter play. Certain ind/wells! in all setting and enterines on without asking for permission. Additionally, I may tamper with their personal neutroments, septedly the tuge's play. Certain ind/wells! in all setting and enterines on entroments, septedly the my layer. Have a tendency to be made and velocity and velocity that they are the entering and the myself. I may tamper with them, log the try and change and the neutron more specific play in the good proteen more with the firends, and firends, and firends, and wells and wells. The play on the neutron more specific play in the good proteen my wath. The trans and velocity the trans of the following rules and guidelines pati in player (trans each dist) of the entering and trans and velocity of the trans of the specific trans and velocity of the set of the trans of the set on the following rules and guidelines pati in play on the neutron specific trans on the protein the trans of the set on the following rules and guidelines and the player dist. In play the mater or the set of the set on the following rules and guidelines and the set on the following rules and guidelines of the set on the set on the prove dist on the set on the protein the set on the provide the set on the player day. I the set on the set on t</li></ul>		
<ul> <li>because of attempts to have inappropriate interactions with others.</li> <li>Inave difficulty identifying the difference between staff, friends, and family and, therefore, have a tendency to oversete preditionship boundaries. I do not have a good understanding of boundaries in general and therefore i will get in other people's faces when taking into non-extent permosation.</li> <li>Inave difficulty identifying the difference between staff, friends, and family and, therefore, have also orgage without asking for permission. Additionally, imay tamper with their personal belongings without asking for permission. Additionally, imay tamper with their personal and evelopment to know that they avoid be disrepsecting to those program, and variably and write personal selongings without tasking for permission. Locas.</li> <li>I also struggle with some authority genes and the single horms and day program, and variably and write personal polongings without tasking for permission. Locas.</li> <li>I also struggle with some authority the diskic fram giving the giving horms and day program, and variably the mission to do as.</li> <li>I also struggle with some authority the uskics' the giving horms and day program, and variably prompts to fourth trough with them. Ingitis reading its in which and variably the uskics of a structing and environments, specially the uskics' the giving horm and day program, and variably the uskics of the giving horm to say digit. How what the rules of expectations are, but that I don't care and the distribution the case.</li> <li>I cath thy tollowing tusks and guidelines to the distribution the graup form exiting. I fourthough the uskic program and day these tasking I down to say digit. How what the rules of expectations are, but that I down transpirate factor, and and any drain and avoid program and day problem state.</li> <li>I cath thy tollowing transpirate interded day day of the distribution the conversion of a say of a state with the distribution the appr</li></ul>		Į
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<ul> <li>directed to look both ways before crossing a street or parking for. Once alm methode to stop and look both ways before arcoss if ann having a bad day 1 will disrepart of stanger and will stop part of the methode to procreptive to transfer and removed to give out my personal information to strangers. I have no concert of stranger and will stop the door for someone i do not know. I have been known to give out my personal information to strangers i require support to ensure i am not taken advantage of financially as i head to be reminded to could not do. On the other hand, it should be knowed gat i will attempt to study and budgeting my money. I am guilble and can be wichmized by being talked into doing things that i should not do. On the other hand, it should be knowed gat i will attempt to study and budgeting my money. I am guilble and can be wichmized by being talked into mosel i am nould into doi ways. Now to evacuage where a single ender showed, other knowed go.</li> <li>Nowolud ike to form the days being called and the giday vanting form with the next ourse offered at Coastal Enterpayes and really and indiggetent with the could like to continue with the next ourse offered. When earling cubic opticat my could difficultation with the next ourse offered. When earling will show and molecular show and minde and the days stop of the safety. In the next ourse offered at Coastal Enterpayes and really entities to more with the next ourse offered. When earling will show and will be provide the continue with the next ourse offered. When earling will show and the continue with the next ourse of the safety is singler very to mode and the very fast will be and will not contem with the next ourse offered. When earling will be interest ourse offered at Coastal Enterpayes and really ending to a rout will be used to molect and well will be and the test ourse offered. To adjour state and the interval state out the contemptive out will be and will not conter myterity for an early an the sage at very trans will</li></ul>		
<ul> <li>and look both ways, I will stop and look for oncoming traffic and can correctly judge when it appropriate to cross. If an my nois a bad day, I will disregard sinkly as it needs. I will also open the abor it someone I do not know. I have been known to give out my personal information to stranger require support to ensure I am not taken advantage of finantagin as the agor. I will support to count my personal information to stranger require support to ensure I am not taken advantage of finantage after making a purchass. I also bave all instead understanding via insert do most two were, other takes advantage of minus the someone is playically agressive powards me.</li> <li>When it comes to fire safety, I know to evacuate where I am in the event of a fire and to me disgranted area, however, other knowledge difficant really with repertionated it conding things the someone is playically agressive towards me.</li> <li>When it comes to fire safety, I know to evacuate where I am in the event of a fire and to me disgranted area, however, other knowledge difficant real with the to ordinate with the to continue with the next course offered. When acting out an early orthood the stop of the advantage of minate the advantage of minate with the some ofference of the safety. I would like to learn how to cook more tran real without the too ordinate with the too ordinate with the too ordinate with the too ordinate with distro to mass portent if the and will most correctly signated area shorts. The advantage of the advantage of</li></ul>	-	directed to look both ways before crossing a street or parking lot. Once I am reminded to stop
<ul> <li>appropriate to cross if i am having a bad day, I will diregard safety directives. I have no connected in one know, the we been known to give out my personal information to strange require support to ensure I am not taken advantage of financially as I need to be reminded tround morely. Tam guille and can be victimized by being taked into directing any money. Tam guille and can be victimized by being taked into the other hand, it should be known gate view in the event of a fire and to me designated any non-y. Tam guille bad can be victimized by being taked into the other hand, it should be known gate sive view in the event of a fire and to me designated any non-y. Tam guille bad can be victimized by being taked into the directing visual of the other hand, it should be known gate sive visual to the directing where I am guille bad can be victimized by being taked into the directing of sive supports sive in the event of a fire and to me designated as however, other knowledge of fire state), suchnown at this time. I practecting on the directing of sive supports size and the directing of sive supports size in the event of a fire and to me designated as however, other knowledge of fire states. I would like to common the directing of sive supports size to the continue will not cover mynioith, or say exclusion indigenents), but need constant reminders to use appropriate able hearers's will take with "mounth fill but part table and will not cover mynioith, or say exclusion indigenents, but as gottan the event of a strateging and the direction of a strateging will be to any or any strate state of an table able will be to an show at table and will not cover mynioith, or say exclusion and the will be to early through the to an show at table and will not cover mynioith, or say exclusion and the will be the connecting the table to the state at the connecting at table and will be the connecting the table to the state at the connection at table and will be the connecting the table table sto the state of the state at the</li></ul>		and look both ways. I will stop and look for oncoming traffic and can correctly iudge when it's
<ul> <li>concept of stranger danger and will accent sy the form a stranger. I will also open the door it somerner I do not know. Thave ben known to taken advantage of financially as I need to be reminded to court my change after making a purchase. I also have a limited understanding of saving and budgeting my money. I am guilble and can be wichmized by being taken into doing things this synaptic stranger reminded the court my channel are ther hand, it should be known with at I will attempt to stick up for mys smooth if not do. On the other hand, it should be known with at I will attempt to stick up for mys smooth if not do. Nowever, other knownedge of fire safety, is unhound and to. When it comes to fire adely as it moves the monethy fire chals boart at nowned be knownedge of the safety. I know to evacuate where a dard follows mole recipes. I participated it cooling class offered at Coastal franchigas and reging supports setting.</li> <li>When it comes to fire adiety. I know to evacuate where a dard follows mole recipes. I participated it cooling class offered at Coastal franchigas and reging up to week, the really on the near dard constant reminders to use appropriate table highles, will soften physical suptements (Farue). In would fike to continue with the advantage of the minimular stranger and the single strange table and will not course offered. When eating own hood indigenerativ, in work the analysic ofference of a strangener to a strangener to a strangener to a strangener to any the need of the will not course offered. When eating own houd in the event of a fire and to me adset of state in the strangener to a strangener to an strangener to any the meal to offere physics wills offer with will offere physics will offere physics will be addinge attembridge participated it could be several control of the physic ofference to a strangener to any strangener to any will offere physic and show the strangener to any strangener to any strangener to and the strangener to any strangener to any strangener to a</li></ul>		ammonriate to moss if I am having a had day I will disrepart safety directives. I have no
<ul> <li>someone I do not know. Have been known to give out my personal information to stranger require support to ensure I am not taken advantage of innealty as i need to be reminded to court my onerwy. I am guilble and can be known that i will attempt to study of the provident of the contrary and public strange of innealty as i need to be innuded to court my convext. The taken advantage of innealty as i need to be innuded to and to. On the other hand, it should be known that i will attempt to study a garesine and the work of the safety. I know to evacuage where I am in the event of a fire and to me outshort for the and not and in the py support setupes. I participated it cooking class offered at coastal Enterprises and really enjoyed the work of the taken in the vent of a fire and to me designated area, however, other knowledge of the safety. I will safe sifty, su unud like to continue with the cooking class offered at Coastal Enterprises and really enjoyed the work of the constant remunders to use appropriate tability any intervel. When it cooking class offered at Coastal Enterprises and really enjoyed the work of the taken of the cooking class offered the coastal transition of the tage of the diversity of the week. I will safe these forces when been at the enter course offered with the work of the work of the work of the tability and the tability at the work of the work of the work of the tability of the week of the tability of the week of the tability of the tability of the week of the tability of the week of the tability of the tability of the tability of the tability of the week of the tability of the week of the tability of the tability of the tability at a tability at a tability to unit at the community. I require support to assist that the tability of the week of the tability of the week of the tability of the tability of the tability of th</li></ul>		concent of stranger danger and will accent a ride from a stranger. I will also open the door for
<ul> <li>require support to ensure I am not taken advantage of financially as I need to be reminded to contrury change after making a purchase. I also have a limited understanding of saving and budgeting my morest. I am guilble and can be vicinitized by being taked into doing things the should not do. On the other hand, it should be known fight I will attempt to stick up for mys someone is physically agressive towards me.</li> <li>When it cornes to fire safety, I know to execute where I am in the event of a fire and to me dy gingated area. I however, other knowledge of fire safety, is unlowed.</li> <li>When it cornes to fire safety, I know to execute and not lowed.</li> <li>I consist treamolets to use appropriate salt following class of the and to me dy specim.</li> <li>I would like to learn how to cook more and my how following class of the and to me dy signated area.</li> <li>I would like to learn how to cook more and more sharm and and following class of the and the next course offered. When eating out in the specimity but need constant reminders to use appropriate salt may and relative and.</li> <li>I would like to learn how to cook more and much share and the next course offered. When eating out in the community. I require support temperation and will be to constant reminders to use a pipropriate and the and the prome plane plane apple to a sinter support to assetue that i a making in the gpropriate and to the intervention.</li> <li>I also and curre signations and the growing synthe supports with a thorm, plane at the plane and of the more community. Trequire support to assetue the a making and currents daily.</li> <li>I also and curre resplate a doing. There of the more continue will offer to assetue that i a making in the growing day list intervided and currents daily.</li> <li>I also and curre resplate and of the more control will and the plane.</li> <li>I also and curre reside show and show and and the more control and the rest. The more control and the rest</li></ul>		someone I do not know. I have been known to give out my personal information to strangers.
<ul> <li>count my change after making a purchase. I also have a limited understanding of saving and budgering thy money. I an guilble and can be vicinizing dy being talked into doing things the should not co. On the other hand, it should be known hald it will attempt to stick up for mys someone is physically aggressive towards me.</li> <li>When it comes to fire asley. I know to evacuate write a min, the event of a fire and to me designated area, however, other knowledge of the safety. I know to evacuate write a min, the event of a fire and to me designated area, however, other knowledge of the safety. I know to evacuate write an iter and the mediation of the other moust be the astronomedate of the event work the neated. When a to fire and the mediation of associate transformers to use appropriate table may evaluate an evolution with the next course offered at Coastal frincingly seared and follow simple recipes. I participated it constant reminders to use appropriate table may eving at number thy. While it has gotten fraguent, I will "swift how only real to constant terminders to use weight through the use of nurthons, upplements (frauur). I mouth the participated it constant to a safe while with "furtitious meals while at to me, but will often putch adjout the dja, I am gottofiate and the writt "furtheus meals while at tome, but will often putch adjoin the gjar and "table and one" on the art or east supports amount of nurthents dint.</li> <li>I do not currently feeter and well-being. I will softletimes choose to not east or east will often putch real give probate a mount of nurthents dint.</li> <li>I do not currently feeter and well-being a submet and the work the writt. I near stick to naticate a point to stick the area appropriate amount of nurthents dint.</li> <li>I do not currently feeter and well-being and and will on cover to a start and process and and bow will often putch adjoin the dja, I am gotten integrate.</li> <li>I do not currently feeter area and of one secontands.</li></ul>		require support to ensure I am not taken advantage of financially as I need to be reminded to
<ul> <li>budgeting my money. I am gulible and can be known ghat I will attempt to stick up for mys senould not do. On the other hand, it should be known gart I will attempt to stick up for mys senould not do. On the other hand, it should be known gart will attempt to stick up for mys senould not do. On the other hand, it should be known gart will attempt to stick up for mys senone is physically aggressive towards me.</li> <li>When it comes to fire safety, i know to evacuate/where I am in the event of a fire and to me designated area, however, other known each of the safety, is unknown at this time. I practice monthly fire drills both at them and not the gay supports sitting.</li> <li>I would like to learn how to cook more? Kan read and follow simple recipes. I participated it cooking class offered at Coastal Enterprises and really enjoyed th, kould like to continue with the event of an interversource offered. When attine out on other may on hood midgeneouth, but need constant reminders to use appropriate could other myson hood midgeneouth. I would like to continue with table and will not cover mynouth or say excuse me (unless prompted). Monile it has gotten frequent, twill "swish" food again fut, will pikit play and the properties at table to gain some veging in the gapropriate amount of nutrines dates. I now only reducing day to majoid, properties and on the and in the superimental frequent, i require support to assign the properious of the areal play in the support of assign if the support as a play and the support of assign at the play specific state and the and in the superimental frequent, i require support to assign at a plan to specific state and the maximum support of assign at the play light play and the support of assign at the play specific state in the and individual to major. I up will of them.</li> <li>I do not currently reserve stry supports with mutritious meals while at home, unit of the support of assign at the play splay and the support as a threat on a play store will of them</li></ul>	-	count my change after making a purchase. I also have a limited understanding of saving and
<ul> <li>should not do. On the other hand, it should be known that I will attempt to stick up for mys someone is physically agressive towards me.</li> <li>When it comes so the safety, itowa to evacuage where I an in the event of a fire and to me designated area, however, other knowledge of fire safety, is unknown at this time. I practice monthly fire drills both at how were, other knowledge of fire safety, is unknown at this time. I practice ansumothly fire drills both at how to cook more stand read and follow signing.</li> <li>I would like to learn how to cook more stand read and follow signings.</li> <li>I would like to learn how to cook more stand read and following the recording the next course offered. When eating out, order my own food independently, but need cook and the will not cover my mouth and eating out, order my own food independently, but need the next course offered. When eating out, noter my own food independents, but need to stat the next course offered. When eating out, noter my own food independents, but need the next course offered. When eating out, noter my own food independents, but need to constant reminders to use appropriate table high signar and fat. While will offer prove the table to gain some weight through the use of nutritonal supplements (Ensure). I now only ne drink/day to majote at the polery set of again in the sphrone but will often publicities that an able to gain some weight through the use of nutritonal supplements (Ensure). I now only ne drink/day to majote at the analysing of again and the sphrone publicities and the sphrone publicities and any support with mitutity to an applet to gain some weight through the use of nutritonal supplements (Ensure). I now only ne drink/day to majote and the sphrone but will often publicities the single at the poly supplements.</li> <li>I do not currently feelively supports the use of nutritonal supplements (Ensure). I now only ne drink/day to majote at daging. The recent by support of the mains the support to assite</li></ul>		budgeting my money. I am gullible and can be victimized by being talked into doing things that I
<ul> <li>when it comes to fire safety. I know to evacuate where I am in the event of a fire and to me designed area, however, other knowledge of fire safety, is unknown at this time. I practect monthly fire dralls both at home and in the day supports setting.</li> <li>I would like to learn how to cook more shan really enjoyed (b, bould like to continue with the activity softend. When acting out gorder my youn food indégendently, burn pat cooking class offered at Coastal Enterphase and really enjoyed (b, bound like to continue with the actors offered. When eating out gorder my your food indégendently, burn pat table and will not cover my myouth, or sey excusise in the instance the next curres offered. When eating out gorder my your food indégendently, burn eat table and will not cover my myouth, or sey excusise in unhase printe and will not cover my myouth or sey excusise in unhase link. The with "mymouth full, have been dong the use of nutritional supplements (Ensure). I now only ne drawflady to mainstain my health support the day. I am provide with nutritious meals while at home, buy will offend to predice day at and flat with some on the next of nutritions meals while at home, buy will offend to provide a dong. There can be a dong that are high in Singer and flat with nutritious meals while at home, buy will of the publicable at dong. There can be ever apply on the nating.</li> <li>I do not currently frequire game appropriate amount of nutrients daily.</li> <li>I do not currently frequire game appropriate amount of nutrients daily.</li> <li>I do not currently frequire game appares of the military south an east of my support to asset with a done size of dong that are high in yos or harming.</li> <li>I have simile data the militar sole or any or dot or many to a support to asset that a single of the military more or any or dot or malk avers (military and the size of dot game or dong. There can be a support to asset the area, urently factor to asset the second tor to asset the area. The m</li></ul>		should not do. On the other hand, it should be known that I will attempt to stick up for mysel
<ul> <li>When it comes to fire safety. I know to evacuate where I am in the event of a tire and to me designated area, however, other knowledge of fire safety is unknown at this time. I practice monthly fire for alls both at home acting out, locder myown food independently, but need cooking class offered at Coastal Enteripties and really enjoyed. The twould like to continue with the artills both at home acting out, locder myown food independently, but need constant course offered. When eating out, locder myown food independently, but need constant reminders to use appropriate table frequent. Jwill "swish" food adjourning in my mouth and well-peinse, J will but any at table and will not cover my mouth at eat very rapid. Recently, have been able to gain some weight through the use of nutritions supplements (Ensure). I now only re dimk/date programe amount of nutritious meals while at home, but will often pricepase forod signar with a wells, firstime, a participate to asset shrenghout the day. I am provided with nutritious meals while at home, but will often pricepase forod signar of the supporpriate amount of nutritions and mount will burn a dimk/date to asset.</li> <li>I do not currently fosting in the appropriate amount of nutritients daily.</li> <li>I have a timeted attention span and have difficulty focusing as I have a tendency to worry abb while the need to asset through or the and in the community. I require support to asset to asset with a three dimk of the program amount of nutritients daily.</li> <li>I do not currently fosting in the amount of mutrients daily.</li> <li>I abo not currently fosting and the work of the need of the dimension of the support of a muse. While the the asset of the need of the dimension of the and the continue with the tendency to worry abb with a three dimensions and an extendency to more starts.</li> <li>I do not currentity fosting to the acting of the desinguinereston as the dimens</li></ul>		someone is physically aggressive towards me.
<ul> <li>anothy fire drills both at home and in the fay supports setting.</li> <li>I would file to learn how to cook more, if an read and follow simple recipes. I participated it cooking class offered at Coastal Enterprises and really enjoyed its would like to continue with the mext course offered. When asting out joinder my own hood indigendently, but need constant reminders to use appropriate another with my mouth full, burn at table and mill not cover my month of an indiverse sectors me (unless prompted). While it has gottem frequent, I will "swish" food around many mouth and eat very rapidly. Recently, i have been been indived to gain some weight through the use of nutritional supplements (Ensure). I now only ne drink/day to maintain my health and weil-being, I will softietimes choose to not eat or east unhealthy stradek through the use of nutritional supplements (Ensure). I now only ne drink/day to maintain my health and weil-being. I will softietimes choose to not eat or east unhealthy stradek through the use of nutritional supplements (Ensure). I now only ne drink/day to maintain my health and weil-being. I will softietimes choose to not eat or east unhealthy stradek through the use of nutritional supplements (Ensure). I now only ne drink/day to maintain my health and weil-being. I will softietimes choose to not eat or east unhealthy stradek the area (infinited and infinited mouth of nutritional supplements (Ensure). I now only ne will often provide a drink mitting in the option of near indication of nutritional supplements is travers.</li> <li>I have at imple to fatten in on all of them.</li> <li>While a mape to dominate and in the option of maring.</li> <li>I have a transfort the day. There chips e several oneed or of any softiet in the second more drink mouth and in the option of maring.</li> <li>I have a transfort the analytic of them.</li> <li>While a map to domin the second of a domin will of not wart to dolla most. Market, these with mark to do and onthead to the second</li></ul>		When it comes to fire safety, I know to evacuate where I am in the event of a fire and to meet
<ul> <li>nould like to learn how to cook more if an read and follow simple recipes. I participated it cooking class offered at Coastal Enterphyse, and really enjoyed it, iwould like to confinue with the next course offered. When eating out locider my own food independently, but need constant reminders to use appropriate table haynes. I will such with "nymouth full, but need the next course offered. When eating out locider my own food independently, but need constant reminders to use appropriate table haynes. I will such with "nymouth full, but need table to gain some weight through the use of nutritional supplements (Ensure). I now only ne dink/day to malitapin my health and well beins, unal swill often prichase foods that are high in \$Ngar and "Bitwinie out in the community. I require support to assume that a ran sking in the gopropriate amount of nutritious meals while at home, but will often prichase foods that are high in \$Ngar and "Bitwinie out in the community. I require support to assume that are acting in the gopropriate amount of nutriting daily.</li> <li>I have a intrinsion of assume that are high in \$Ngar and "Bitwinie out in the community. I require support to assume that are acting to the gopropriate amount of nutritions daily.</li> <li>I have a intrinsion of a source in the gopropriate amount of nutrition daily.</li> <li>I have a intrinsion of them.</li> <li>Will often provide with mutations going on around me and "make it a point to assume the origin of them.</li> <li>Will often provide the origin are not act or east indication is starting to wear off or I have bar with a start in a solar for the area, throw things, and or sourd and how or walk away from the area, throw things, and or sourd and how or walk away from the area, throw things, and/or "size" you up: I amond.</li> <li>Mage to mage to make fores, cry stick up my middle finger, stop listening/cover mears, and or shore store and and and or how or soury about the sate with a starting to wear off or I have barea.</li></ul>		designated area, however, other knowledge of the sarety is unknown at this time. I practice
<ul> <li>I would nike to learn now to dook more, sear nead and not not waither structure with the need cooking class offered at Coast Enterphies and really enjoyed the twould like to continue with the need constant reminders to use appropriate table ingven fould. When eating our is order my own food indégenently, burn eat table and will not cover mymouth outh and eas and really enjoyed the two only need to norstant reminders to use appropriate table ingvents? I will sak with the would like to constant the next course offered. When eating our is order my own food indégenently, burn eating our some weight through the use of nutritional supplements (Ensure). I now only ne at table to gain some weight through the use of nutritionial supplements (Ensure). I now only ne drink/day to maintain my health and well-being, unill sometimes choose to not eat or east is unhealthy snacks throughout the day. I am provided with mutritious meals while at home, buwile although supplements (figural to more and will often puckness e foods that are high is signat and flaw/will out in the community. I require support to assive that I are althin in the some provided with mutritions meals while at home, buwile at the not constant to a structure and any often puckness e foods that are high in signat and flaw/will out in the community. I require support to assive that I are althin and hay vision or hearing.</li> <li>I have a function and any hour of mutritions meals while at home, buwile at the ontic currents and have afficulty focusing as I have a tendency to worry abort while to the reschere and many approximate and have difficulty focusing as I have a tendency to worry abort what other people are doing. There can be several conversations going on around me and in the error and any other means.</li> <li>Wills an able to communicate more or any model any bioding has a struct a structure and any bibary and any bibarting behaviors my periodication is starting to wear off or I have had much mechanter and any bibarting behaviors</li></ul>		monthly file artists both at nome and in taken ay supports setting.
<ul> <li>the next course offered. When eating out " order myown ord indiggedently, but need constant reminders to use appropriate table inpanets 1 will talk with myour and the next constant reminders to use appropriate table inpanets. I will somethims would inconstant reminders to use appropriate table in a gotten if feaguent. I will swith food and appropriate table in a gotten if requent. I will swith food and appropriate table in a fragment in the section would and the program apple to gain some weight through the use of nutritional supplements (Ensure). I now only ne at high a single to gain some weight through the use of nutritional supplements (Ensure). I now only ne at high is single in a ple to gain some weight through the use of nutritional supplements (Ensure). I now only ne at high is single in the gotten is that gotten is the gotten is the gotten is the gotten is single in a ple to gain some when the day.</li> <li>I have a function on the and in the community. I require support to assue that I are taking in the gopropriate amount of nutrients daily.</li> <li>I have a function and any support to assue that I are taking in the gopropriate amount of nutrients daily.</li> <li>I have a function and mitting the conjust or haring.</li> <li>I have a function and mitting the are doing. There can be several conversations going on around me and i make it a point tabilisten informal of them.</li> <li>Wills I am able to communicate most or all of my vascential needs, it is important to note the myo before. There can be several conversations going on around me and i make it a point tabilisten informal of them.</li> <li>Wills I am able to communicate provided to do something I do not want to do/i am upset. When the area, throw things, and/or stres. I have been directed to do something I do not want to do/i am upset. When the area, throw things, and/or size 'you up: I am and.</li> <li>School/Vocational</li> <li>According to matching behaviors: my medication is starting to wer off or I have areas, anuch star andor st</li></ul>		i would like to learn now to cook more; tean read and lollow suiture recipes. I participated in t cooking class offered at Coestal Enternities and really enforced in teaming like to continue with
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<ul> <li>table and will not cover my mouth and eat very rapidly. Recently, i have been able to gain some weight through the use of nutritional supplements (Ensure). I now only ne drink/day to maintain my health and well-being. J will sometimes choose to not eat or eat srumenalithy snacks throughout the day. I am provided with nutritious meals while at home, buy will often putchase to date that and well-being. J will sometimes choose to not eat or eat srume and in often putchase that a mathend in the sphone putchase that an exist strong bout the day. I am provided with nutritious meals while at home, buy will often putchase that an exist strong bout to a strong the target of the day. I am provided with nutritious meals while at home, buy will often putchase that an exist strong support to asset that are highly supports with my vision or hearing.</li> <li>I have a infrited attention span addhave difficulty focusing as I have a tendency to worry abte. What other people are daing. There can be several conversations going on around me and I may that other people are daing. There can be several conversations going on around me and its what other people are daing. There can be several conversations going on around me and its what other people are daing.</li> <li>Using / has goot and how when it let a point tailsten my voice, cry, sitk up my middle finger, stop listening/cover the my Behaviors and matherisms abels of citherm.</li> <li>Wite I am able to ogning behaviors: my medication is starting to wear off or I have become hyper/start exhibiting behaviors: my medication is starting to wear off or 1 have become hyper/start exhibiting behaviors: my medication is starting to wear off or 1 have bac much uses. When complex and one curve start and or curve the area, throw things, and/or "size" you up: I am mad.</li> </ul>		the next course offered. When eacing out, forcer my own rood integendency, out need constant reminders to lise appropriate table manners. I will talk with my mouth full, burn at th
frequent, I will "swish" food around: In my mouth and east very rapidly. Recently, I have been able to gain some weight through the use of nutritional supplements (Ensure). I now only ne drink/day to maintain my health and well being, I will soften purchase foods that are high in support with inturtitous meals while at home, buy will often purchase foods that are high in the sopropriate amount of nutrients daily. <ul> <li>I do not currently frequest strong point in the sopropriate amount of nutrients daily.</li> <li>I do not currently frequest any supports with, my vision or hearing.</li> <li>I have a thermologiout the east and have difficulty focusing as I have a tendency to worry abor what other people are doing. There can be several conversations going on around me and I fragke it a point to listen in one and strong difficulty focusing as I have a tendency to worry abor what other people are doing. There can be several conversations going on around me and I fragke it a point to listen in or all of them.</li> <li>Withe and other people are doing. There can be several conversations going on around me and I fragke it a point to listen in or all of my essential needs, it is important to note the my before. When I walk a very fast walk away from the server and of curres I have been directed to do something I do not want to do/I am upset. Whe become hyper/start exhibiting behaviors: my medication is starting to wear off or I have had much sugar. If I make faces, roli my yes: I am annoyed. When I walk a very fast walk away from the area, throw things, and/or "size" you up: I am mad.</li> </ul> School/Y occaring Manuch sugar. If I make faces, roli my yes: I am and is the area, throw things, and of starting to wear off or I have had much sugar. If I make faces, roli my yes: I am and. I have starting to wear off or I have had much sugar. If I make faces, roli my yes: I am and. I have starting to wear off or I have had much sugar. If I make faces, roli my vest. I am mad. I attended		table and will not cover my mouth or say excuse me (unless prompted). While it has gotten les
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Community activities to ensure that I follow the rules and exhibit appropriate social norms. North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services		equire assistance in accessing the community. Support is also needed in participating in
	8	mmunity activities to ensure that I follow the rules and exhibit appropriate social norms.
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• runter Medical/Bel	their classes.	their classes.
According to	a currently volumeet at the manual of numbers, when we have a second of the second of	ral years ago, Reactive
• My phy	Attachment Disorder. My physician supports are as follows: Profession Name/Clinic	
<u></u>	Primary Care Physician Horizons Health Primary Care Psychiatrist Coastal Horizons Dentist UNC Chapel Hill Bental Clinic	y Care Clinic
	ist	L.
• My pro	y professional supports are as follows:           Profession         Name Clinic           Dutpatient Therapist         Claine Caropreso, LCSW	sw sw
• Wy me	My medications consist of the following: Name & Modication What Is It For? Adderail YP ADHD	
	Anti	
<ul> <li>Fatten</li> <li>Row</li> <li>Know</li> <l< td=""><td>Pattend all appointments and take my medications with the support of my residential providers. I know the names of my medications and what they are for. I sometimes need to be reminded when to take my medications. I am very afraid of needles and therefore will not allow my blood to be drawn for any tests to be run. My BCBA is trying to help me work on this fear. I receive sedation dentistry also as I will not allow the dentist or hygienist to clean my teeth or even look</td><td>of my residential provid- mes need to be reminde ore will not allow my blc rk on this fear. I receive ilean my teeth or even lc</td></l<></ul>	Pattend all appointments and take my medications with the support of my residential providers. I know the names of my medications and what they are for. I sometimes need to be reminded when to take my medications. I am very afraid of needles and therefore will not allow my blood to be drawn for any tests to be run. My BCBA is trying to help me work on this fear. I receive sedation dentistry also as I will not allow the dentist or hygienist to clean my teeth or even look	of my residential provid- mes need to be reminde ore will not allow my blc rk on this fear. I receive ilean my teeth or even lc
in my r am pr	in my mouth without it. I have seasonal allergies. I am prescribed 2 Ensure/day.	
Igo to     benefi	l go to outpatient therapy every Monday. My team and I all feel like this continues to be beneficial for me. I have also been receiving consistent SCS services from a BCBA with Delta	this continues to be from a BCBA with Delta
Behavi SCS/m BCBA. monity implen	Behavioral Group since January 2018. Lauren Huggins is my BCBA and provides 8 hours of SCS/month. The LPA with Delta has developed a treatment plan with contributions from my BCBA. My BCBA provides ongoing implementation training of my behavior plan to staff, ongoing monitoring, data collection, analysis and progress reviews and ensures integrity in implementation of the plan as well as attends team meetings.	d provides 8 hours of 1 contributions from my havior plan to staff, ongo es integrity in

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	is important for others to know that I have been known to target younger males and males
the	at are severely impaired as I am attracted to them. I have never been charged for sexual
e u	harassment and/or inappropriate behavior; however, there was an incident that occurred in the
sc	nool bathroom a few years ago between another male student and me. The details of this
ļuc	incident are unclear; however, my teacher and school staff immediately implemented protective
ů 	measures by not allowing me to go to the bathroom alone. I was also closely monitored
- th	throughout the school day. In 2014, there was an incident with a young child while I was at
÷ 1	urch with residential staff where I touched the child and asked the child to take his shirt off.
	This was reported appropriately and no charges were ruled in have had incluence at the day
	program where i mappropriately couched a young easy. This is an ongoing concern whe continues to require 1:1 supervision. It is important to note that my factal expression changes
)	and I will stare when I am interested in another person.
Ŭ - •	I can become verbally and physically combative when configured with something or when I am
ou	t able to do something I am excited about. I may become defiant and argumentative when
10	told to do something I do not want to do or when I do not get what I want. I will ignore you like
σ	on't hear you at all. Other behaviors f'display include: cursing, sucking up my middle inger,
fro	crying, covering my ears, raising my voice, rounds my eyes, making races, a very tast wain away from the situation and throwing things. I struggle with maintaining physical boundaries. I have a
2	hard time showing respect for my housemates and others around me in regards to listening to
Ē	my music too loud or having the TV too loud, however, this has gotten slightly better.
•	I am extremely talk and I try to intimidate others with my height. I will "size them up". I become
<u>}</u>	per, talk very last; and will repeat myself when my medication (Adderall) is wearing off. My
λų	peractivity will turn into behaviors it am not given my medication as prescribed. I do not like
, let	aving desired community outings and as a result I may become upset. To help prevent me
fro.	om becoming upset, staffishould informine of how long I will have for the desired outing and
99:20 0	discuss the possible consequences that can occur if I exhibit behaviors. Staff should also discuss
	waat is expected of me duting the outling and they should nouny me when I have to minutes we maining hefered have to leave the outling
	if semportant for mixing the trade to take staff to avoid helps confrontational. but to remain stern with
	e. Do not use the word "consequences". This is a trigger for me. It is also important for my
'n	direct carestaff not to show that they are scared and/or mad as I will feed off of the signs which
WÎ	will prolorigand increase my behavior. In addition, ignoring my negative behaviors has been
kn kn	known to be effective. Wusic can be a calming mechanism for me, but, at times, can also be a
	trigger and escalate my behaviors. It's important for staff who are supporting me during those
tín	times to read my body language and use their best judgement if music should be offered.
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ISP (4/3/17)

Name: DOB; Medicaid ID: Record #:	<ul> <li>My volunteer efforts</li> <li>Getting to see my friends</li> <li>Having New Hanover County DSS as my legal guardian</li> <li>My current living situation</li> <li>My current living situation</li> <li>Having consistent services</li> <li>Having 24 hour supervision (including awake staff)</li> <li>Going to Coastal Enterprises</li> <li>Attending community events</li> <li>Seeing my sister more regularly</li> <li>I have made great progress in my willingness to actively participate in my goals</li> <li>I do not consistently respect authority figures</li> <li>I display negative behaviors often</li> </ul>	<ul> <li>There has been turnover with my directicare staff at Coastaf thiterprises</li> <li>The police have been called on me twice over the last year because of assault</li> <li>I will display inappropriate sexual behaviors towards others</li> <li>I will display inappropriate sexual behaviors towards others</li> <li>I wild display inappropriate sexual behaviors towards others</li> <li>Crisis Prevention and Intervention</li> <li>Significant Lycau(s) That May Cause Increased Stress / Trigger Crisis</li> <li>Significant Lycau(s) That Way Cause Increased Stress / Trigger Crisis</li> <li>Complexanter any ensures tooliders note chains include leaves learned formation with all social males that are severely impaired and/or non-verbal. I need supervision with all social interactions because I do not limit my romantic interests. My facial expression will change and interactions because I do not limit my romantic interests. My facial expression will change and interactions become verbally combative when confronted and when I am not able to will stare at someone am interest in.</li> </ul>	<ul> <li>participate in or complete a desired activity. I may also stick up my middle finger, cry, and cover my ears so to not hear you. Although it is infrequent, I may get physical by pushing, trying to hit, or throwing objects at pathers.</li> <li>Crisis Prevention and Early Intervention Strategies:         <ul> <li>(Descript what are be done to be path this poster. AVOLD a mixing the base to be and the base to be base</li></ul></li></ul>
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Name:	DOB: Medicaid ID: Record #:
N	2. Staff should review my daily schedule with me at the beginning of each day/shift and they should explain what is expected of me. Staff should also notify me in advance when I will not be able to participate in or complete a desired activity in an effort to allow me adequate time to process the information. In addition, staff should educate me on the fact that I will not always be able to do things that I prefer. Last but not least, staff should never be confrontational when they confront me and he/she should clearly explain why they are confronting me so that I can have a better understanding of the situation. Staff should also remove me from the area/situation before confronting me. Do not use the word "consequences".
Strateg (Focus fine case of con	Strategies for Crisis Response and Stabilization: (Focus first on menual and community supports. Begin with least restrictive steps, include protess for obtaining back up in case of emergency and planning for use of respire, if an option. East exerviting you know the has worked to help this person to become stable)
	<ol> <li>Immediately make a report and remove me from the situation.</li> <li>In the event that I become verbally combative, staff should be stern and consistent with me and not give in. They should also remind me to use my calm words, encourage me to take deep breaths, and allow me alone time, if warranted. Take me for a walk. Additionally, staff may ignore my behavior, do not make eye contact, do not acknowledge me, and may turn on the radio as music is a calming mechanism for me. I also like to write, draw, or color with crayons, just something to keep me busy. Know that if I need emergency medical treatment, it is preferred that I am taken to Pender Memorial Hospital. Truay also be transported to New</li> </ol>
**Stt 910-`	Hanover Regional Medical Center if needed: **Staff should contact my Social Worker, with New Hanover County DSS, by dialing 910-798-3506 (O), to discuss any incident**
	<ul> <li>A Special Touch Wstaff should contact the Executive Director of A Special Touch II, Susie Hayes, by dialing 910-602-2769 (C). If Susie is not available, staff should contact Cardell Hayes with A Special Touch II, by dialing 910-471-4013 (C). If Cardell is not available, staff should contact the group home QP, Alex Dobson, by dialing 828-244-4271 (C).</li> </ul>
• • • •	<ul> <li>For paid back up staff with A Special Touch II, contact Antonio Powers by dialing 910-228-0908 (C). If Antonio is not available, contact Jammie Royes by dialing 910-271-1611 (C).</li> <li>Please note that formot have any local natural supports and therefore I do not have non-paid back-up staff.</li> <li>My outpatient therapist may also be contacted at may contact Mobile Crisis by dialing 1-855-345-1200. if warranted.</li> </ul>
Ser	Specific Recommendations For Interacting With The Person Receiving a Crisis Service:
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<ul> <li>Staff should remain calm as my behaviors will secalate if they show they are scared and/or mat.</li> <li>Staff should be stem, yet consistent with me.</li> <li>Staff should and me to use my calm words.</li> <li>Staff should and and the conformation with me and they should remove me from the struction/area before confronting me.</li> <li>Staff should and and we are any staff words in the struction/area before confronting me.</li> <li>Staff should and and we are and a my staff should and and they should remove me from the struction/area before confronting me.</li> <li>Staff should and the conformational with me and they should remove me from the struction/area before confronting me.</li> <li>Staff should the conformational with me and they should remove me from the struction/area before confronting me.</li> <li>Staff should the conformational with me and they should remove me from the struction/area before confronting me.</li> <li>Staff should the conformational with me and they should remove me from the struction/area before confronting me.</li> <li>Offer me the opportunity to write. Color, or draw.</li> <li>Offer me the opportunity to write. Solarden they are s</li></ul>	• Sta			
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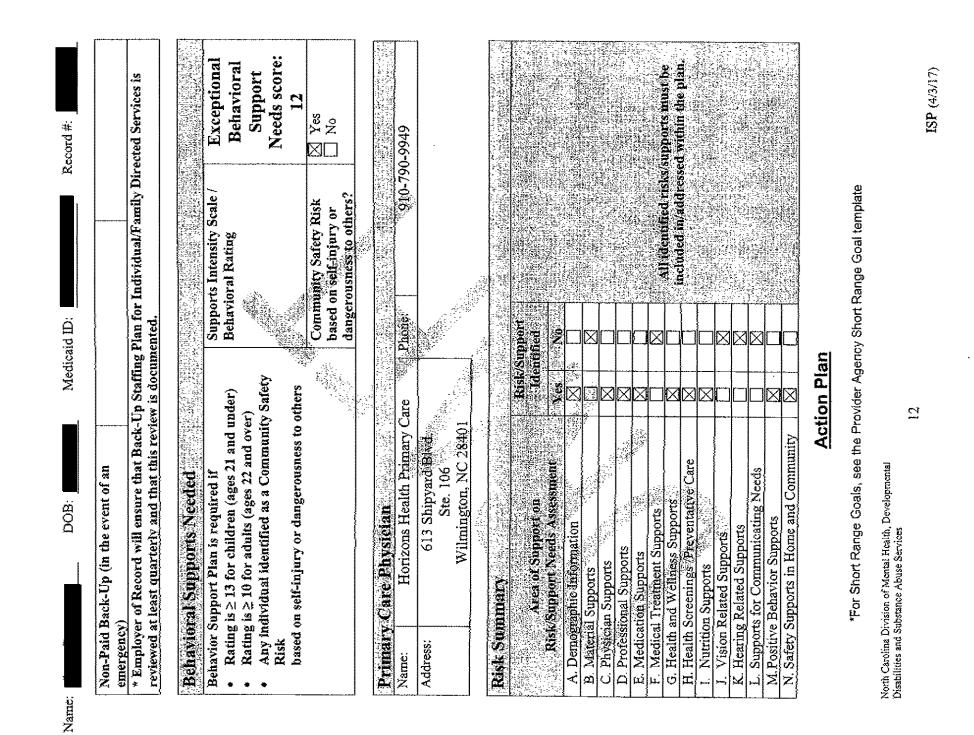
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1. Multi receive Residential Supports in order to become more independent in all areas of daily living, seff-help, health, safety, and appropriate social interactions and behaviors. Where an in low in Reationship to the Outcome? (Reason for outcome/Lustification) in their adassistance in harming how to respect my housemate's physical space as like to are his before the resonal belongings. In the more the remothance to emind en low, to respect my housemate's physical space by reaching and the inportance of a saking to use and/or touch fifter there are a software and in the inportance of a saking to use and/or touch fifter there are inportance of an antication shall be avoid and the indoxed or saking to use and/or touch fifter there are a software and in the indoxed or saking to use and/or touch fifter the same thing over and or area doer not want me to enter short and subtroare and not enter the fifter the same thing over and or area doer not want me to enter and instance). The same thing over and or area and areas and/or use their physical space or from, their personal belongings. Staff continues to work with me to asy "thank your "individual is is non-areas, but to one enters anyone else's rooms; we can see each offer. The continues to work with me to asy "thank your "individual is is non-aread, personal belongings. Is meatimes remember to say spinsh your their physical space and or taking on total spinsh personal phone and/or continues on the antitra struction. Staff will be a stranger staff with them are a result in we at the end or at a stranger staff with the stranger staff with the stranger staff with the stranger staff with the stranger staff with stranger staff with strangers and are stranger with his stranger. The stranger staff with stranger staff as well as a stranger the person willing by teaching at the stranger staff with stranger staff	Long Range Outcome:	
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There assistance in learning how to respect my housemate's physical space as little to enter his bedroon without asking for permission. Staff is working with me on keeping my distance and not entering other's without asking for permission. Staff is working with me on keeping my distance and not entering other in porsonal space. I often have use and/or touch their personal belongings. My group home has a policy that housemate share on a sing to use and/or touch their personal belongings. My group home has a policy that housemate are not allowed to enter sarying size and/or touch their personal belongings. Staff continues to work with me to not callowed to enter agoit physical space or touch their personal belongings. Staff continues to work with me to not callowed to enters anyone else's rooms: Staff will also teach me how to respond if my housemate does not wart me to enter their physical space or touch, their personal belongings. Is an addition to write and, rather, to walk away and respect their physical space or touch their personal belongings. The formate a some and over an advertised to respond the person willing up to way and respect their physical physic over and ov	Where am I now in Relationship to the Outcome	7 (Reason for outcome/Justification)
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by teaching me the importance of asking to use and/or touch frieir personal belongings. My group home has a policy that housenters are not allowed to enter early after it for one areas, but no one enters anyone else's rooms: Staff will also teach me how to respond if my housemate does not want the to enter their physical space or fough their personal belongings. Staff to common areas, but no one enters anyone else's rooms: Staff will also teach me how to respond if my housemate does not want the to not continuously ask inty housemate does not want the to not evant their physical space or fough their personal elongings. Isother and very fitting their personal elongings. Isother and very close to other swhen conversing and need to learn to keep 1 arm's length also working on not taking possession of another pestonal allowed to entit to the same thing yous. The and your busing the standards and point them and you bus operations in the aver them the structon. Staff will also stand very close to other when conversing and need to learn to keep 1 arm's length and y from them. I will also stand very close to others when conversing and need to learn to keep 1 arm's length and y from them. To address thigh the address will also teach me that after it is as group of my direct care staff is to provide take dy britch materias, will also teach me that after it is as group of my direct care staff is to provide take dy britch materias, will also teach me that the relove that veryone is my fined. Thave a second in this areas. To address the aber rightflucht expected me that a friend is asserted to more it have a more when the enter them in the start age is to provide take dy britch materias end address the asserted by britch materias are and the address of the and it is at a prevision to the start with the start after the and its area area of the address with a start age is to provide take dy britch materias are any independence, while a stranger is to provide tat a dy breaching and the start is hould not to perinvide the addre	progress with this, however, staff continues to remind	the how to respect my housemate's physical spa
has a policy that housemates are not allowed to enter each other's rooms; we can see each other in common areas, but no one enters anyone eles's comes, staff for the same thing over and communes to work with me to enter their physical space or fouch their personal belongings. Staff continues to work with me to not continuously askiny housematelogy staff for the same thing over and over and, rather, to walk away and respect their physical space or fourth their personal belongings. Staff continues to working with me to not continuously askiny housematelogy staff for the same thing over and over and, rather, to walk away and respect their physical space or fourth their personal appear and/ use their personal space and/ use their personal parts is sometimes to say "thank whousematelogy reading with their personal appear and/ use their personal on out aking possession of another personal space and/ use their personal appear and use their personal belongings. Integrate the instruments a taxo and respect the difficence between their to me. I will also stand very dose to other member to say "thank, whousematelogy the and the anger and an any from them. I control the to have a tendency to overstep relationship with she domenoer is know well, like, trust, and she common intre that a friend is and formity by taach me that a friend is a friend is an family by taach me that a friend is a friend is singleri "take" and strangers is to projeksion who is strange. For example, particular the afficult progresh in the area control in the common individual with here common interest staff is an exit should not be provided with any personal ignet. Thing 1 am velocity and then are staff or the area of the stranger and a staff as which me that there are cartain the strange is to projeksion and the strange for the strange is not projeksion who in a provide staff should their with therefore should not be provided with any personal ignet. There are are staff who with each me that the reale or the instrange to the strange is to projeksion	by teaching me the importance of asking to use and/or	couch their personal belongings. My group hom
common areas, but no one enters anyone elses rooms spart mue ther personal belongings. Staff common areas but no one enters anyone elses rooms spart mue me now to respond it my housemate does not want me to enter their physical space or touch their personal belongings. Staff continues to work with me to asy 'thank you' if my housemate allows me to enter their personal appea eand, use their personal belongings. I sometimes remember to say thank you, burge were handle is an still working with me to asy 'thank you' if my housemate allows me to enter their personal appea eand, use their personal belongings. I sometimes remember to say thank you, burge methes I need reminde is an still working on traking possession of another bestween triends, family, staff, and strangers and away from them. I continue to any 'thank you' if my housemate allows me to enter any independence, their personal place and start to me. I will also stand very close to others when converging and need to learn to keep 1 arm's length it to me. I will also stand very close to others when converge and an any from them. I continue to any 'thirthy marited in a bot bestim me that a family by teach as a result 1 have a tendency to overstep "delationship but hay by teach as a result thave a tendency to overstep" delationship but hy teach me that a thirty by teach are closely related by hith maritege or adoption. Staff will teach me that the role of my direct care staff is to address this goal-staff. Supervision, and to neblewe the any advelore of whith any are closely related by thirthy maritege, or adoption. Staff will teach me that the role of my direct care staff on the that a firend is sometone interests, with real fart and the role of my direct care is to provide. Staff will teach me that 1 should not ask or share with my staff or strangers. For example, staff should teach me that should not as k my direct care staff about their "Stranger dage" has been any shore of the nonitored for mapproprise behaviors towards my housemates or other individuals	has a policy that housemates are not allowed to enter e	ach other's' rooms; we can see each other in
To notes mate does not waith me to enter their physics space or hough their personal belongings. Start continues to work with me to not continuously askiny housemateds staff for the same thing over and over and, rather, to wait away and respect their physics in continue to struggle with this stuation. Staff also working with me to say "thank you" if my nousemated allows me to struggle with this stuation. Staff also working with me to say "thank you" if my nousely askiny housemated allows me to struggle with the stuation. Staff also working with me to say "thank you" if my nousemated allows me to struggle with this stuation. Staff also working on not taking possession of another person's belongings unlies the person willingly gi th to me. It will also staff ward to a struggle with phy tacin a way from them. To address this garbestaff mill reach me that family is defined as a group of individuals with are that a friend is someone I have a mutual relationship with and someone I know well, like, trust, and that a friend is someone I have a mutual relationship with, therefore should not be provided with any are closely related by birth; marindse, or adoption, Staff will leach me that that the role of my direct care str is to provide whom i da not tarpiliar with, therefore should not be provided with any are closely related by birth; marindse, or adoption, Staff will leach me that there are extrain things i may sisk and share with my family and friends that i should not as a group of individuals with ingremation nor egiven anything of mine. I am guilble and believe that everyone is my friend. "Stranger daper "has been afficulty themily and frends that i should not be provided with any is someone whom i da not know, and an not tarpiliar with, therefore should not be provided with any is someone whom interestis with staff a should not ask or share with my staff or stranger. For example, staff should teach me that i should not ask or share with my staff or stranger. For example, staff should teach me that i should not a	common areas, but no one enters anyone else's rooms	Staff will also teach me how to respond if my
over and, rather, to walk away and respect their prisons. Stati also working with me to say "thank you" if my housemate allows me to exter their personal space and/ use their personal belongings: i sometimes remember to say thank you, but sometimes I need reminde I am still working on not taking possession of another person's belongings unless the person willingly gi It am still working on not taking possession of another person's belongings unless the person willingly gi I am still working on not taking possession of another person's belongings unless the person willingly gi It to me. Livill also stand very close to others when conversing and need to learn to keep 1 arm's length away from them. I continue to have difficulty distinguishing the bifference between friends, family by teach me that a friend is songene in have a mutual registionship with; and someone I know well. Jike, trust, and share common interests with. Staff will also teach me that family by teach me that a friend is songene in have a mutual registion to the methan the role of my direct care stil some provide gase. Supervisors, and to help/teach me that family by teach me that a friend is songene and to have a more taking to note a provided with any personal information norigine anything of mine. I am guilble and believe that everyone is my then. "Stranger danger" has been applied teach me that I should not as work my there is someorie like. Turb are writtion? The anoth the area are cartain things I may agk and share writtion? The mould not ask or share with my staff or strangers. For example, staff should teach me that I should not ask or share with my taef is someorie whom I do not ken with the cartain requests from staff (i.e. to turn my must or its areaging in activities or behaviors that do then are individuals in from engaging in activities or behaviors that the role of not use and staff as well as well from engaging in activities or behaviors that the role or burb at the funst tead or or upset with staff or my housemate. I must have a t	housemate does not want me to enter their physical sp continues to work with me to not continuously askimy (	sce or touch their personal belongings. Staff ousemarkeins staff for the same thing over and
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use their personal belongings. I sometimes remember to say thank you, but sometimes I need reminde I am still working on not taking possession of another person's belonging unless the person willingly gi t to me. I will also stand very close to others when conversing and need to learn to keep 1 arm's length awwy from them. I continue to have difficulty distinguishing the difference between friends, family, staff, and strangers a as a result I have a tendency to overstep relationship boundaries thave made very little progress in thi away from them. I continue to have difficulty distinguishing the difference between tart friends, and faring by teach me that a friend is someone I have a multip so diffice to come I know well, like, trust, and share common interests with. Staff will teach me that family is defined as a group of individuals w are closely related by birth manings, and to help teach me that family is defined as a group of individuals w are closely related by birth many stage, adoption. Staff will teach me that the role of my direct care strang is someone whom i do net know and an mor familie a with, therefore should not be provided with any personal information nor given anything of mine. I am guilble and believe that everyone is my fined. "Stranger whom i do net know and an mor familie and believe that everyone is my fined. "Strangers" has been with my familyband friends that I should not as k or share with my staff or strangers. For example, staff should tach are that I should not as k or share with my staff or strangers. For example, staff should tach are that I should not as k or share with my staff or strangers. For example, staff should tach are that discuss towards my housemates or other individuals in the community. I need to learn how to respect my housemates for any direct care staff dout their personal life. I must also be monitored for inappropriate behaviors towards my house endender thing I may sexhibit appropriate and need to learn how tor respect my nouted with any down, to complete cho	also working with me to say "thank you" if my houseme	te allows me to enter their personal space and
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Any other them. I continue to have difficulty distinguishing the difference between friends, family, staff, and strangers a way from them. I continue to have a tendencyto overstep rejetionship with and someone liknow well, like, trust, and strangers a result i have a tendencyto overstep rejetionship with and someone liknow well, like, trust, and share common interests with. Staff will leach me that a friends, and family by teach me that a friend is someone liknow well, like, trust, and share common interests with. Staff will also teach me that family is defined as a group of individuals with any bare common interests with. Staff will also the as more closely related by birth; maritage, or adoption. Staff will leach me that the role of my direct care strips to provide are, supervision, and to help freach me skills to increase my independence, while a strang is someone liknow well like, trust, and strangers and share common interests with. To work and an mortanging to increase my independence, while a strang is someone liknow well like. In usis the action mortgiven anything of mine: I am gullible and believe that everyone is my friend. "Stranger danger" has been a difficult volacept for me to grasp. Staff will teach me that there are certair prings I may ask and share with my tamily band friends that I should not ask or share with my staff or strangers. For example, staff should teach me that I should not ask or share with my vision. "Stranger shows and share with my tamily band friends that I should not ask or share with my staff or stranger with consistently following through with certain requests from staff (i.e. to turn my music or T down, to complete chores, etc.) without definace. I must learn to utilize my coping skills when I get furstrated or upset with staff or my housemates. I have a tendency to burp at the down, to complete chores, etc.) without definace. I must learn to utilize a side and and the dom or down, to complete chores, etc.) without definace I must learn to utilize a domot	t attraction working out trout taking possession of another p it to me 1 will also stand very close to attear when con	itsoms beforigings unress the person withingly g artiger and read to learn to been 1 arm's longit
I continue to have difficulty distinguishing the difference between friends, family, staff, and strangers a as a result I have a tendency to overstep reliationsing boundaries; have made very little progress in this area. To address this goal' staff will teach me that family is defined as a group of individuals with me that a friend is someone I haves mutual relationship to increase my independence, while a strang is are common interests with. Staff will also teach me that family is defined as a group of my direct care str is to provide state, supervision, and to help teach me staff them is that the role of my direct care str is to provide state, supervision, and to help teach me staff to increase my independence, while a strang is someone whom I do not know any a mything of mine. I am gullible and believe that everyone is my friend. "Stranger danger" has been addit to help teach me that I should not ask or share with my staff or strangers. For example, staff should trands that I should not ask or share with my staff or strangers. For example, staff should through whousemates or other things I may ask and share with; with antive to grasp. Staff will teach me that there are certain things I may ask and share with; my family and fittends that I should not ask or share with my staff or strangers. For example, staff should through with certain requests from staff (i.e. to turn my music or T down, to complete chores, etc.) without definere. I must learn to utilize my coping skills when I get from engaging in activities or behaviors that disturb my housemates for up the down, to complete chores, etc.) without definere. I must learn to utilize my coping skills when I get frustrated or upset with consistently following through with chertain requests from staff (i.e. to turn my music or T down, to complete chores, etc.) without definere. I must learn to utilize my coping skills when I get frustrated or upset with staff or my housemate. I do not always exhibit appropriate manners when I eart house and in the community. I	a with the stand with and stand with wood with the stand with the stand with the stand stand the stand stan stand st	AND A THE ALL TO A A A A A A A A A A A A A A A A A A
as a result I have a tendency to overstep rejetionsing boundaries, have made very little progress in this area. To address this goaly staff will teach me the difference between staff, friends, and family by teach me that a friend is someone I have a mutual relationship with and someone I know well, like, trust, and share common interests with. Staff will also teach me that family is defined as a group of individuals will are closely related by birth, marriage, or adoption. Staff will teach me that the role of my direct care statis to provide dare, supervising, and to more family to increase my independence, while a strange is someone whom i do not know and an not farinilar with, therefore should not be provided with any personal information norigiven anything of mine. I am guilible and believe that everyone is my friend. "Stranger danger' has been'a difficult concept for me to grasp. Staff will teach me that there are certain things I may ask and share with my familyand friends that I should not as k or share with my staff or strangers. For example, staff should teach me that I should not ask or share with my staff or strangers. For example, staff should teach me that listurb my housemates and staff as well as refrait provided with actividuals in the community. I need to learn how to respect my housemates and staff as well as refrait providuals in the community. I need to learn how to respect my housemates or other individuals in the consistently following through with certain requests from staff (i.e. to turn my music or 1 to on engaging in activities or behaviors that disturb my housemates (i.e. having my music or 1 down, to complete chores with wousemates. This goal may be addressed through real life situations and through month, fidget and tap the table or my housemate. I do not always exhibit appropriate manners when i eat meals/snacks. I have a tendency to burp at the dimer table fand to cover my mouth, fidget and tap the table manners. This goal may be addressed through real life situations and through i	I continue to have difficulty distinguishing the differenc	: between friends, family, staff, and strangers a
area. Io address this goals staff will teach me the difference between staff, friends, and family by teach me that a friend is someone I know well, like, trust, and share common interests with. Staff will also teach me that family is defined as a group of individuals with are common interests with. Staff will also teach me that the role of my direct care states to provide and the large war adoption. Staff will teach me that the role of my direct care states is to provide and information norigiven anything of mine. I am gullible and believe that everyone is my friend. "Stranger danger" has been addifficult concept for me to grasp. Staff will teach me that there are certain things I may ask and share with my family and friends that I should not ask or share with my staff or strangers. For example, staff should teach me that I should not ask or share with my staff or strangers. For example, staff should teach me that I should not ask or share with my staff or strangers. For example, in the community, i need to learn how to respect my housemates and staff as well as refrain flow duals in the community. I need to learn how to respect my housemates and staff as well as refrain flow duals in the community. I need to learn how to respect my housemates and staff as well as refrain flow or strangers. For example, staff on my busemates with my staff or strange or upset with correspect my housemates and staff as well as refrain flow or up or advess while table when a star individuals in the community. I need to learn how to respect my housemates and staff as well as refrain flow ergange in activities of the whousemates with my music or 1 do not always exhibit appropriate manners when I eat meals/snacks. I have a tendency to burp at the dimer table (and not cover my mouth or say excuse me), talk with my mouth fidget and tap the table when easing with others, and east at a fast pace. I do not use a napkin my mouth, fidget and tap the table when easing with others, and east at a fast pace. I do not use in any success and inde	as a result I have a tendency to overstep relationship by	undaries have made very little progress in thi
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dinner table (and not cover my mouth or say excuse me), talk with my mouth full, "swish" food around my mouth, fidget and tap the table when eating with others, and eat at a fast pace. I do not use a napki In an effort to increase my success and independence at home and in the community, I will work on learning appropriate table manners. This goal may be addressed through real life situations and through North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services 13	I do not always exhibit appropriate manners when I eat	meals/snacks. I have a tendency to burp at the
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North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services 13	In an effort to increase my success and independence a learning appropriate table manners. This goal may be a	home and in the community, I will work on dressed through real life situations and through
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Name: Medicard LD: Medicard LD: Medicard LD: Medicard H:	
role-play. I have made very little progress with my manners. I require constant reminders to display	
appropriate table manners in any setting. My support staff will continue to work with me on remembering	ring
how to eat meals and handle my bodily functions appropriately. I also need to increase my healthy living	60
habits. I enjoy drinking soda and eating candy/junk food and would benefit from learning about the food	ğ
pyramid and eating meals that contain foods from all food groups.	
I require minimal physical assistance in completing household chores and in cleaning up after myself;	
however, I need to be reminded and encouraged to complete household chores. I also need to be	
monitored to ensure that I complete my chores thoroughly. I am responsible for cleaning my bedroom	
and bathroom, sweeping, mopping, vacuuming, taking out the trash, and taking the outside trashcan to	~
the street when scheduled. My household chores are posted in my bedroom as a reminder and to assist	÷
me in ensuring that I complete them. Even with that visual reminder, I require constant verbal prompting	ස ප
to follow through with the assigned task. I do want to start learning to cook. I recently completed a	-
cooking course at Coastal Enterprises and am signed up for the next one. Team discussed my residential	-
staff giving me more responsibilities in the kitchen by helping with dishes, setting the table, preparing	r
some of the ingredients, and creating a menu of meals. I can independently wash my harlus out need to the harden to wash them at summer the throughout the dated when to wash them at summer the times throughout the dated when to wash them at summer the times.	<u>_</u>
about washing my hands: therefore. I need to be monitored to ensure that I complete this task. I also	ł
need to be reminded and encouraged to bathe or I willing bathe at all. I can complete and will follow	
through with all bathing tasks independently once in the shower. Occasionally I have to be told to go back	ЗС,
and re-wash a body part, but that is rared will take my medications with no refusal; however, do require	e
reminders and monitoring when doing so I will continue to see my psychiatrist every other month to	
ensure that they are continuing to work for me.	Ę
I enjoy earning my own money and spending it on desired items. I have limited money management skills	≣ 1
and have unitative understanding the iniportance of budgeting and saving my money to purchase desired items it was arread more fix my triotmost to be a hole and four to budget my money by book	о 9 ч
The how to save towards a difference of hwy choice Seeing as how I am differently not working it has been	م
more difficult to save because ham struggling with the concept of not having additional funds coming to	· _
me, besides my SSI income. Staff will assist me in figuring out how much money I should put aside each	5
time I receive my funds to help me save towards my desired purchase in a given timeframe. Staff will also	Iso
teach me how to stay within my budget when making small purchases by setting a pre-established budget	ŝet
with me (\$20/week). This will teach me how to better budget my money for future purchases. I currently	≯
know when my monthly bank statements are available. I need to learn how to maintain a checking	
eccount. It was agreed upon by my treatment team to teach me now to maintain a checking account by history the harkwards chammerhod. To here with staff will teach me how to confirm when wy co	
money is demosified into my account. Staff will teach me how to log on to my colling backing strigg.	
bank statements, and/or call the bank to verify my deposits. At this time 1 have been reviewing my bank	
statements and they are paper. Staff then helps me keep track of my allowance and my budget by writing	ы С
everything in a ledger.	)
I require one on one support and supervision to not engage in inappropriate sexual behaviors. As	
previously indicated, I have a history of engaging in inappropriate sexual behaviors with minors or those	<b>6</b> 1
who I perceive are lower functioning than me. I have history of incidents where inappropriate interactions occurred between myself and others (male and female). Receive of these ontoing concerns, 1 will account	sus
North Carolina Division of Mental Health, Developmental	
Disabilities and Substance Abuse Services	
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Service(s), Support(s)         Who will provide the Support         Target Data           Residential Supports: Level 4         A Special Touch II-3, 4         Daily         12.3119           Leader Consumers from software store software		others.		(commun)
Residential Supports: Level 4         A Special Touch 1: 3, 4         Daily         12311           Example requency for Each Location: (e.g., 15% of hours, 3 out of 5 days, 2 hoursday)         Example years of the state of the stat	Service(s) / Support(s)		Estimated Frequency**	Target Date
Testimated Frequency for Each Location: (e.g. 75% of hours, 3 out of 5 days, 2 hours/day) Long Range Outcome: Long Range Outcome: C. The model of the state of the state outcome of the state outcome state of the state outcome		rel 4 A Special Touch II – 3, 4 8 Home 2-Day Program 3-Residential Facility Worker's Home 8-Other (Please specify)	Daily 4-Community 5-Place of	12.31.19
4. Improve the functional academics, prevocational skills, personal skills, safet and socialization skills by continuing his attendance at a day program. Where an I now in Relationshipt of the Outcome? (Föascon for outcome/Justification) It is important to me that I attend a day program. Jaywe ben attending Coasta Enterprises for almost years. Currently, I attend Monday-Friday, 30 haurs/week. I require '11, support and monitoring for safe and to prevent inappropriate sexual behaviors and interactions with magge and females; also to stay on topic and termin focused during class discussions and individual work times, although this has improve alightly. I frequently get distracted by my big dreams and place for my stories. Staff may also need to let me tal a break from my activity to refocus. It is important times, redirect me to keep to proving fancy cars, etc.). I will frequently make up stories. Staff may also need to let me tal a break from my activity to refocus. It is important that: 1.1 staff is looking distructions and let me know that there is gained place for my stories. Staff may also need to let me tal a break from my activity to refocus. It is important that: 1.1 staff is looking classmates, especially when attrugging with reamenering the directions an message/progress with understand what is being well with membering to turn it off and check units my time at Coastal Enterprises. I struggle with making and following through with classmates, especially with sensiting and strugging with something is a strained an assignment. I need to learn the during my time at Coastal Enterprises and with something else. I struggle with making and following through with message/protectmene of the strate and editing the weekly cooking classmates. I struggle with making and following through with metabolic moving on the computer or going for a with something like playing and following through with metabolic moving on the computer or going for a starting an assignment. I need to sk and theck is allowed with me educati	ng Fre	1 Location: (e.g. 75% of hours, 3 out of 5 days,	2 hours/day)	
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| ensure no inappropriate interviewing the frequency.         Service(s) / Supports       Winowill provide the supprises - 2, 4 30 hours/week       Target Date         Day Supports       Estimated       Target Date         Community       Estimated       Target Date         Day Supports       Monitorial front       Service(s) / Supports       Service(s) / Supports       Target Date         Day Supports       Monitorial front       Estimated       Target Date       Target Date         Community       Estimated frequency.       Constant       Service(s) / Supports       Support       12.31.19         Component Sylointers Site       Xylointers Strong (pass 2 dout)       Constant       Support       12.31.19         Estimated frequency for Each Location: (e, g, 75% of hours') out of 5 days, 2 hours/day)       Estimated frequency (pass 2 dout)       12.31.19         Estimated frequency for Each Location: (e, g, 75% of hours') out of 5 days, 2 hours/day)       12.31.16       12.31.19         Estimated frequency for Each Location: (e, g, 75% of hours') out of 5 days, 2 hours/day)       12.31.16       12.31.19         Estimated frequency for Each Location in order to develop meaningful community       12.31.16       12.31.16         Mill receive Community Networking in order to develop meaningful community       12.31.16       12.31.16       12.31.16       12.31.1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | give people I do not know any pers                                                                                        | onal information, etc. Due to m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Whistory, 1:1 suppor                  | rts is needed to                      |
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| Day Supports-Individual: thourty)       Coastal Enterprises - 2, 4       30 hours/week       12.31.19         "Leation Coless: 1-formane Stateme State Prices specify       1.2.30.10       1.2.31.19         "Entimated: Frequency for Each Location: (e.g. 75% othours) a out of 5 days, 2 hours/day)       1.2.31.10       1.2.31.10         "Long Range Outcome:       3.0 not of 5 days, 2 hours/day)       1.2.31.10         "Estimated: Frequency for Each Location: (e.g. 75% othours) a out of 5 days, 2 hours/day)       1.2.31.10         "Estimated: Frequency for Each Location: (e.g. 75% othours) a out of 5 days, 2 hours/day)       1.2.31.10         "Estimated: Frequency for Each Location: (e.g. 75% othours) a out of 5 days, 2 hours/day)       1.2.31.10         "Estimated: Frequency for Each Location: (e.g. 75% othours) a out of 5 days, 2 hours/day)       1.2.31.10         "Estimated: Frequency for Each Location: (e.g. 75% othours) a out of 5 days, 2 hours/day)       1.2.31.10         "Estimated: Frequency for Each Location: (e.g. 75% othours) a out of 5 days, 2 hours/day       1.2.31.10         "Estimated: Frequency for the Outcome?       (Feaso for outcome/Justification)       1.2.31.10         "I am very interested in move and gaining community relationships outside my volud benefit from increasing my natural supports and gaining community relationships outside my vesidential setting and daysprogram. I am interested in attending a dance, music, or cooking class at the local community time management in order to schedule my transportation and ensure that I am                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Service(s) / Support(s)                                                                                                   | Who will provide the Support & Location(s)*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Estimated<br>Frequency**              | Target Date                           |
| <ul> <li>*Location Codes: 14:Consumer's Home's Program 3-Bestdential Facility 4-Community 5-Place of Employment Systemers Silvers (Please speedy)</li> <li>*Estimated Frequency for Each Location: (e.g. 75% of hours' 3 out of 5 days, 2 hours/day)</li> <li>*Estimated Frequency for Each Location: (e.g. 75% of hours' 3 out of 5 days, 2 hours/day)</li> <li>*Estimated Frequency for Each Location: (e.g. 75% of hours' 3 out of 5 days, 2 hours/day)</li> <li>*Estimated Frequency for Each Location: (e.g. 75% of hours' 3 out of 5 days, 2 hours/day)</li> <li>*Estimated Frequency for Each Location: (e.g. 75% of hours' 3 out of 5 days, 2 hours/day)</li> <li>*Estimated Frequency for Each Location: (e.g. 75% of hours' 3 out of 5 days, 2 hours/day)</li> <li>*Long Range Outcome:</li> <li>Will receive Community Networking in order to develop meaningful community relationships and engage in volunteer work.</li> <li>Where am I now in Relationship to the Outcome? (Reason for outcome/Justification)</li> <li>I am very interested in meeting new people and engaging with others who are typically developing. I would benefit from increasing my natural supports and gaining community relationships outside my residential setting and daysprogram. I am interested in attending a dance, music, or cooking class at the local community time management in order to schedule my transportation and ensure that I am able to attend the class appropriately. I recently obtained a regular volunteer position at the Habitat for Humanity Resale Store. Over the summer I obtained a gym membership. I am interested in joining available classes there, specifically Zumba. I continue to need support in learning how to appropriately give upwing available classes there.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                   | Day Supports-Individual (hourly)                                                                                          | E Coastal Enterprises - 2, 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 30 hours/week                         | 12.31.19                              |
| Ity Networking in order to develop meaningful convolunteer work. I volunteer work. to the Outcome? (Reason for outcome/Justifice beeple and engaging with others who are typically decorral supports and gaining community relationships of am interested in attending a dance, music, or cookin munity location specializing in those areas. I need to the schedule my transportation and ensure that I amontly obtained a gym membership. I am interested in mba. I continue to need support in learning how to all while having the supervision to ensure I remain safe arbitile there.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | * Location Codes: 1,Consumer & Home 2<br>Employment & Volumer Site 7-Workers +<br>**Estimated Frequency for Each Location | . Day Program 3-Residential Facility .<br>tome 8.00ther (Please specify)<br>1: (e.g. 75%:00thours, 3 out of 5 days,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | LCommunity 5-Place of<br>2 hours/day) |                                       |
| Where am I now in Relationship to the Outcome? (Reason for outcome/Justification)<br>I am very interested in meeting new people and engaging with others who are typically developing. I<br>would benefit from increasing my natural supports and gaining community relationships outside my<br>residential setting and dayprogram. I am interested in attending a dance, music, or cooking class at the<br>local community college or other community location specializing in those areas. I need to learn<br>tocal community time management in order to schedule my transportation and ensure that I am able to<br>attend the class appropriately. I recently obtained a regular volunteer position at the Habitat for<br>Humanity Resale Store. Over the summer I obtained a gym membership. I am interested in joining<br>available classes there, specifically Zumba. I continue to need support in learning how to appropriatel<br>use the equipment and get healthy, while having the supervision to ensure I remain safe and do not<br>display any inappropriate behaviors while there.<br>North Carolina Division of Mental Health, Developmental<br>Dissolities and Substance Abuse Services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Long Range Outcome:<br>3. Long Range Outcome:<br>3. Longe Communication Ships and engage                                  | Inity Networking in order to<br>the volunteer work.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | develop meaning                       | ful community                         |
| I am very interested immeeting hew people and engaging with others who are typically developing. I would benefit from increasing my natural supports and gaining community relationships outside my residential setting and day program. I am interested in attending a dance, music, or cooking class at the local community time management in order to schedule my transportation and ensure that I am able to attend the class appropriately. I recently obtained a regular volunteer position at the Habitat for Humanity Resale Store. Over the summer I obtained a gym membership. I am interested in joining available classes there, specifically Zumba. I continue to need support in learning how to appropriately use the equipment and get healthy, while having the supervision to ensure I remain safe and do not display any inappropriate behaviors while there.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Where am I now in Relationsh                                                                                              | in to the Outcome? (Reasoning the second | n for outcome/Just                    | tification)                           |
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| local community college or other community location specializing in those areas. I need to learn<br>community time management in order to schedule my transportation and ensure that I am able to<br>attend the class appropriately. I recently obtained a regular volunteer position at the Habitat for<br>Humanity Resale Store. Over the summer I obtained a gym membership. I am interested in joining<br>available classes there, specifically Zumba. I continue to need support in learning how to appropriatel<br>use the equipment and get healthy, while having the supervision to ensure I remain safe and do not<br>display any inappropriate behaviors while there.<br>North Carolina Division of Mental Health, Developmental<br>Disabilities and Substance Abuse Services<br>I for the supervision of Mental Health, Developmental                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | residential setting and dayprogram                                                                                        | o. I am interested in attending a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | i dance, music, or co                 | oking class at th                     |
| community time management in order to schedule my transportation and ensure that I am able to attend the class appropriately. I recently obtained a regular volunteer position at the Habitat for Humanity Resale Store. Over the summer I obtained a gym membership. I am interested in joining available classes there, specifically Zumba. I continue to need support in learning how to appropriatel use the equipment and get healthy, while having the supervision to ensure I remain safe and do not display any inappropriate behaviors while there.<br>North Carolina Division of Mental Health, Developmental                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | local community college or other o                                                                                        | ommunity location specializing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | in those areas. I nee                 | id to learn                           |
| attend the class appropriately. I recently obtained a regular volunteer position at the Habitat for<br>Humanity Resale Store. Over the summer I obtained a gym membership. I am interested in joining<br>available classes there, specifically Zumba. I continue to need support in learning how to appropriatel<br>use the equipment and get healthy, while having the supervision to ensure I remain safe and do not<br>display any inappropriate behaviors while there.<br>North Carolina Division of Mental Health, Developmental<br>Disabilities and Substance Abuse Services<br>I display any inappropriate behaviors while there.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | community time management in o                                                                                            | rder to schedule my transporta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | tion and ensure that                  | : I am able to                        |
| Humanity Resale Store. Over the summer I obtained a gym membership. I am interested in joining<br>available classes there, specifically Zumba. I continue to need support in learning how to appropriate<br>use the equipment and get healthy, while having the supervision to ensure I remain safe and do not<br>display any inappropriate behaviors while there.<br>North Carolina Division of Mental Health, Developmental<br>Disabilities and Substance Abuse Services<br>I 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | attend the class appropriately. I rec                                                                                     | cently obtained a regular volum                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | eer position at the l                 | Habitat for                           |
| use the equipment and get healthy, while having the supervision to ensure I remain safe and do not<br>display any inappropriate behaviors while there.<br>North Carolina Division of Mental Health, Developmental<br>Disabilities and Substance Abuse Services<br>I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Humanity Resale Store. Over the su<br>available risease there enorification                                               | ummer I obtained a gym memb                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ership. I am interest                 | ed in joining                         |
| vhile there.<br>I 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | use the equipment and get healthy                                                                                         | while having the supervision t                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | o ensure l remain sa                  | to appropriate<br>ife and do not      |
| 16                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | display any inappropriate behavior                                                                                        | s while there.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                       |                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | North Carolina Division of Mental Health, Developme<br>Disebilities and Substance Abuse Services                          | hta)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                       |                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                           | 16                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                       |                                       |

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| 10 hours/week         1 unit/annually         -Community 5-Place of         -commons         -community 5-Place of         -commons         -commons         -commons         -commons         -constor <th></th> <th>Service(s) / Support(s) Who Will provide the Support<br/>Location(s)*</th> <th>ion(s)*</th> <th>Frequency</th> <th>I alget vate</th>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                       | Service(s) / Support(s) Who Will provide the Support<br>Location(s)*      | ion(s)*                                     | Frequency                                             | I alget vate              |
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| Community Networking-         Withmigton YMCA-B         1 unitamutally         7.31.1           Community Networking-         Withmigton YMCA-B         1 unitamutally         7.31.1           Leasting Conferences         Not with recelence         Not with recelence         1 unitamutally         7.31.1           Leasting Conferences         Not with recelence         Not with recelence         1 unitamutally         7.31.1           Leasting Conferences         Not recelence         Not with recelence         1 unitamutally         7.31.1           More and now in Relationship to the Outcome?         Not recelence         1 unitame         1 unitame         1 unitame           Where and now in Relationship to the Outcome?         Not recelence         1 unitame         1 unitame         1 unitame           Where and now in Relationship to the Outcome?         Respondence         1 unitame         1 unitame         1 unitame           Supports. It is important for me to have accessible is represented to a diverse behaviored and vector is the readence         1 addition of the presenter accessible is represented to the control of the presenter acting with the resenter where in the presenter acting is strained and vector is the readence         1 addition of the presenter acting in the readence           Supports. It is important for meet acting is strained strained strained strained strained strained strained stratenter presente where in the presenter acting is trained and vect                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Community Networking-Inc                                                              |                                                                           | erprises-4, 6                               | 10 hours/week                                         | 12.31.1                   |
| <sup>1</sup> Contention Costes: In Community 5-Place of Englishing Storm Community 5-Place of Englishing Structurer Site 7-Vioners Hume & Comer (Plasse specify). Community 5-Place of Englishing Structurer Site 7-Vioners Hume & Comer (Plasse specify). The same specify in the end in own in Relationship to the Outcome? (Registing Conterns in all settings. The end of the end in own in Relationship to the Outcome? (Registing And Viewer Will received Forder Stabilization Due to incidents where outside supports meet to be contactive (R) (I), other ream members/ supports the outcome? (Registing And Viewer Will Relationship to the Outcome? (Registing And Viewer Will and Viewer Minessel that would benefit from Colsensable sign Sile withressed that would be at the police, etc.), in yean determined that I would benefit from Colsensable sign Sile withressed that would be at the police, etc.), in yean determined that I would benefit from Colsensable sign Sile withressed that would be at the police ster, in yean determined that I would benefit from Colsensable sign Sile withressed that would be at the setting. That settings a well as to support the during Singetural crisis, and the community 5-Place of the end of the Community 5-Place of the relation of the setting. If Stabilization Colsens the store (Placeasistics) of the Community 5-Place of the end of the Community 5-Place of the end of the Community 5-Place of the formed of the Community 5-Place of the Community 5                                                                      | Community Networkir<br>Classes/Conference                                             | ig- Witmingto                                                             | n YMCA-8                                    | 1 unit/annually                                       | 12.31.1                   |
| Long Range Outcome:       4wull receive Crisis intervention and Stabilization Supports to address behavioral concerns in all settings.         A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | * Location Codes: 1-Consumer's<br>Employment 6-Volunteer Site 74                      | s Home 2-Day Program 3-Res<br>Norker's Home 8-Other (Pleas                | idential Facility 4-Com<br>e specify)       | munity 5-Place of                                     |                           |
| concerns in all settings.         concerns in all settings.           Where a m inow in Relationship to the Outcome? (Research (OP, other team members/support state be to redeents where euclide supports be able to redeent and stabilization Supports. It is important for mer to have access polyservice where my day supports OP is trained and variate that sould benefit from Crisis intervention and Stabilization Supports. It is important for mer to have access polyservice where my day supports OP is trained and variate that setting.           Supports. It is important for mer to have access polyservice where my day supports OP is trained and variate the potential crisis as well as to support in a crisis/when observable signs are well as to support to the potential crisis as well as to support to the access polyser at a crisis/when observable signs are well as to support to the prevent a crisis/when observable signs are well are supported at the reduter of a constrained and variate the potential crisis as well as to support to the prevent a crisis/support and cress of the prevent a crisis of the potential crisis as well as the prevent a crisis when observables is a class of the prevent a crisis of the prevent and cress of the prevent a crisis of the prevent and cress of the prevent a crisis of the prevent and the addition of the prevent and the addition of the prevent at the prease of the credeents and creassis the prevent a conthe prevent                                                                                                                                                                 | Jgn                                                                                   | Crisis Intervention and                                                   | Stabilization Sup                           | ports to address b                                    | ehavioral                 |
| Where and inov in Relationship to the Outcome? (Reasonifs outcome/Justification<br>Due to incidents where outside supports need to be constated (OP or her team members/support state<br>police, etc.), my team determined that I would benefit from Crists (In additions, It is that supporting mei<br>supports, it is innortant for me to have access that a service where my day supports OP is trained and<br>supports, it is innortant for me to have access that a service where my day supports OP is trained and<br>be able to respond in order to prevent a crists/when observable signs are witheness of<br>the setting.         Target Date           Stabilization Supports         Supports         Coastal Echepriness, T. (Somerovida the<br>that setting.)         Target Date         Target Date           Stabilization Supports         Coastal Echepriness, T. (Somerovida the<br>that setting.)         Target Date         Target Date           Stabilization Supports         Coastal Echeprines, T. (Somerovida the<br>the setting.)         Estimated Frequency**         Target Date           Stabilization Supports         Coastal Echeprines, T. (Somerovida the<br>the setting.)         Estimated Frequency**         Target Date           Stabilization Supports         Coastal Echeprines, Somerovida the stability of the set stabil                                                                                                                                                                                                                                                                                                                                                                      | concerns in all set                                                                   | ttings.                                                                   |                                             |                                                       |                           |
| Due to includents where outside supports aread to be contacted (DP, other team members/support sale upports, and stabilization be a to have access to a service where mg/day supports OP is trained and be above the to respond in order to have access to a service where mg/day supports OP is trained and be above the to respond in order to prevent a crisis when observable signs are writtenessed that would lead to be able to respond in order to prevent a crisis when observable signs are writtenessed that would lead to be able to respond in order to prevent a crisis when observable signs are writtenessed that would be at the atting optimization Supports of is trained and that setting). Supports of Consumers, Support Supports of Supports of Supports of Support of                                                                            | Where am I now in Relatic                                                             | onship to the Outcome? (                                                  | Reason for outcom                           | e/Justification)                                      |                           |
| Supports, It is important for me to have access to a service where 'mg, day supports OP is trained and be able to respond in order to prevents a crisis, when observable signs dire witnessed that would lead to be able to respond in order to prevents a crisis, when observable signs dire witnessed that would lead that setting.         Intail setting.       Intail setting.         Intail setting.       Intail setting.         Intail setting.       Intail setting.         Intail setting.       Supports, It is important for me to have access to a service where 'mg, day supports OF is trained and support and order to prevention and order to prevent a crisis, when will provide the setting.       Imaget Date         Stabilization Supports       Supports, It is important of reast I Enterprises 2.4       5 hours/year       12.31.19         Clisis intervention and Coastal Enterprises 2.4       5 hours/year       12.31.19         Stabilization Supports       Class intervention and coastal Enterprises 2.4       5 hours/year       12.31.19         Stabilization Supports       Class intervention and coastal Enterprises 2.4       5 hours/year       12.31.19         Stabilization Supports       Class intervention and coastal Enterprises and other prise of hours/year       12.31.19         Stabilization Supports       Class intervention and coastal Enterprises and other prise of hours/year       12.31.19         Stabilization Supports       Class intervention and coastand other preventis prouted prevention and other prise and other p                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Due to incidents where ou                                                             | tside supports need to be                                                 | contacted (QP, oth                          | ter team members/s                                    | upport sta<br>tion        |
| Be able to respond in order to prevent a cristis when observable signs are when our any outports. It is affit supporting me that setting.         First setting.       First setting.         First setting.       Supports         Supports       Supports         Tocastal Energiprises 2.4       Shours/year         Supports       Supports         Tocastal Energiprises 2.4       Shours/year         Supports       Supports         Tocastal Energiprises       12.31.19         Target Date       Supervise         Target Date       Supports         Target Date       Supports         Supports       Supports         Tocastal       Sup                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | police, etc.), my team dete                                                           | rmined that I would bene                                                  |                                             | vention and statitude<br>versions of is tra           | suon<br>aned and          |
| potential crisis as well as to support me during an actual crisis (in addition to 1:1 staff supporting me<br>that setting).<br>Service(s) / Supports<br>Supports<br>Supports<br>More and Coastal Enterprises 2,4<br>Supports<br>Crisis Intervention and Coastal Enterprises 2,4<br>Subports<br>Supports<br>Crisis Intervention and Coastal Enterprises 2,4<br>Subports<br>Leaden Codeas: 1-Community 5-Place of<br>Enterprises 2,4<br>Multi receive Specialized Consultative Services to address behavioral concerns an<br>"Leaden codeas: 1-Community 5-Place of<br>Enterprises 2,4<br>Multi receive Specialized Consultative Services to address behavioral concerns an<br>assist treatment corrand behavior plan.<br>Where and in low in Reclationship (at the Outcoin) (Reason for outcome)Justification)<br>I have been receively going and consistent SCS services through Delta Behavioral Group since Janue<br>2018. My BCS<br>Entillar with additionship (the Outcoin) (Reason for outcome)Justification)<br>I have been receiving ongoing and consistent SCS services through Delta Behavioral Group since Janue<br>2018. My BCS<br>Entillar with additionship for the Outcoin) (Reason for outcome)Justification)<br>I have been receiving ongoing and consistent SCS services through Delta Behavioral Group since Janue<br>2018. My BCS<br>Entillar with additionship (the Outcoin) (Reason for outcome)Justification)<br>I have been receiving ongoing and consistent SCS services through Delta Behavioral Group since Janue<br>2018. My BCS<br>Entillar with additionship (the Outcoin) (Reason for outcome)Justification)<br>I have been received and consistent SCS services through Delta Behavioral Group since Janue<br>2018. My BCS<br>Entillar with addition and consistent SCS services through the LPA's involvement bein<br>and to obtain a torners or high (the Outcoin) and the LPA's involvement bein<br>a minimum accident through real frine electronics or phone calls. The Awill Berevice the behavioral for the town with the LPA's involvement behavioral and a collection, analysis and continue providing implementation training to staff, ongoing monitori<br>data | be able to respond in orde                                                            | r to prevent a crisis when                                                | observable signs a                          | ey supports of 15 ur                                  | ould lead t               |
| Iterat setting).         Target Date           Service(s) / Support(s)         Support Support(s)         Extimated Frequency**         Target Date           Service(s) / Support(s)         Support Support(s)         Support Support(s)         Target Date           Crisis Intervention and<br>Crisis Intervention and<br>Crisis Intervention and<br>Sististion Supports         Constrait Effect Prises 2.4         5 hours/year         12.31.19           Station Codes:         -Consumer & Voursets         Some Super Supe                                                                                                                                                                                                                                                                                                              | potential crisis as well as to                                                        | o support me during an ac                                                 | tual crisis (in addit                       | on to 1:1 staff suppo                                 | orting me                 |
| Service(s) / Support(s)         Who will growne the segments         Extimated requency         i aget uses           Crisis Intervention and Coastal Eligiprises-2,4         5 hours/year         12.31.19           Crisis Intervention and Coastal Eligiprises-2,4         5 hours/year         12.31.19           Stebilization Supports         Export Reconstruct A community 5 Place of Stays         12.31.19           Temporter (S) (Supports         Stebilization Supports         12.31.19           Stepinization Supports         Scher/Please \$600(1)         5 hours/year         12.31.19           "Estimated Frequency for Frank Community 5 Place of Supports         Scher/Please \$600(1)         12.31.19           "Estimated Frequency for Supports         Scher/Please \$600(1)         12.31.19         12.31.19           "Estimated Frequency for Frank Community 5 Place of Supports         Scher/Please \$600(1)         12.31.19           "Estimated Frequency for Frank Community 5 Place of Supports         Scher/Please \$600(1)         12.31.19           "Estimated Frequency for Frank Community 5 Place of Supports         Scher/Place of Supports         12.31.19           "Estimated Frequency for Frank Community 5 Place of Supports         Scher/Place of Supports         12.31.19           Scher Place         Scher Place         Scher Place         12.31.19           Scher Place         Scher Place                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | that setting).                                                                        |                                                                           |                                             | Napole States.<br>Napole States 2:<br>States 2: 2: 2: | -+ D-+-                   |
| Crisis Intervention and       Coastal Effect Prises 2,4       5, hours/year       12.31.19         Stabilization Supports       Employment 4-Voluments Home 2.04 Forgram 3-Regidential Factommunity 5-Flace of Employment 5-Volusion Codes: 1-Communers Home 2.04 Four 6-0, 75% of hours, 3 out of 3 eays, 2 hours day)       12.31.19         *Learning bound of the Cutoment (e.g., 75% of hours, 3 out of 3 eays, 2 hours day)       12.31.19         *Long Range Outcomed       5.       multi receive Specialized Consultative Services to address behavioral concerns an assist team members and other natural supports in learning how to best work with hill and to obtain a formal behavior plan.       12.31.19         Where and thous for outcome?       Exervices through Delta Behavior for outcome/Ustification)       11.10         I have been receiving ongoing and consistent SCS services through Delta Behavioral Group since Janua 2018. My BCB/Emembers and consistent SCS services through Delta Behavioral Group since Janua 2018. My BCB/Emembers and consistent SCS services through Delta Behavioral Group since Janua 2018. My BCB/Emembers and consistent SCS services through Delta Behavioral Group since Janua 2018. My BCB/Emembers and consistent SCS services through Delta Perloval Areatment plan         I have been receiving ongoing and consistent SCS services through Delta Behavioral Group since Janua 2018. My BCB/Emembers and consistent SCS services through Delta Behavioral Group since Janua 2018. My BCB/Emembers and consistent SCS services through Deta All revervice Annue and construction and conclusing the Leo All revervice Annue and construction and a collection, analysis and providing implementation training to staff, ongoing monitorin and a collector m                                                                                                                                                                                                                                                                                                                                                                          | Service(s) / Support(s)                                                               | Who will provide the<br>Support & Location(s)*                            | Estimated Frequ                             | -                                                     | jet uate                  |
| <ul> <li>Location Codes: 1-Consumers From: 2-Day Program 3-Residential Facility 4-Community 5-Place of Equivalents Sile Trivolegies home efforte hours; 3 out of 5 days, 2 hours/day)</li> <li>Estimated Frequency for Facin Location: (e.g. 75% of hours; 3 out of 5 days, 2 hours/day)</li> <li>Econg Range Dutcome</li> <li>Gong Range Dutcome</li> <li>Facin In Now in Relationship to the Outcoming (Reason for outcome)/Justification)</li> <li>I have been receiving ongoing and consistent SCS services through Delta Behavioral Group since Janua</li> <li>2018. My BCBA</li> <li>Dave Been receives State Concerner Sci Range Range</li></ul>                                                                                                                                                                                                                           | Crisis Intervention and<br>Stabilization Supports                                     | Coastal Enterprises-2,4                                                   | 5 hours/yes                                 | <b></b>                                               | .31.19                    |
| Where aim I now in Relationship to the Outcome? (Reason for outcome/Justification)<br>I have been receiving ongoing and consistent SCS services through Delta Behavioral Group since Janua<br>2018. My BCBA contract which is a comfort. My team is requesting 10 hours of SCS: BCBA in order for<br>familiar with each other, which is a comfort. My team is requesting 10 hours of SCS: BCBA in order for<br>the BCBA to meet and convene with the team for assessment activity with the LPA's involvement bein<br>remote through real time electronics or phone calls. The LPA will develop an updated treatment plan<br>a minimum each year with contributions from the BCBA. This plan will be revised throughout the year<br>needed. The BCBA will review the assessment with the team. I will receive 8 hours of SCS: BCBA per<br>month in order for my BCBA to continue providing implementation training to staff, ongoing monitorin<br>data collection, analysis and progress reviews and to ensure integrity in implementation of the plan as<br>well as attend team meetings.<br>I continue to struggle with behaviors at home that are disruptive to the home environment. These<br>behaviors have increased in frequency and severity in recent weeks. The police have been called on m<br>twice over the last year due to assault behaviors I have committed against group home staff. My team<br>twice over the last year due to assault behaviors I have committed against group home staff. My team<br>twice over the strues of support and training to learn the best ways to support me through times of<br>Distabilities and Subsenate Abuse Savies                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Long Range Outcome<br>5. will receive<br>assist team memb<br>and to obtain a fo       | Specialized Consultativ<br>vers and other naturals<br>rmal behavior plan. | e Services to addr<br>upports in learni     | ess behavioral cor<br>ng how to best wo               | icerns and<br>rk with hi  |
| I have been receiving ongoing and consistent SCS services through Delta Behavioral Group since Janua 2018. My BCBA methods with me previously when I attended TPYA so we are very familiar with each other, which is a comfort. My team is requesting 10 hours of SCS: BCBA in order for the BCBA to meet and convene with the team for assessment activity with the LPA's involvement bein remote through real time electronics or phone calls. The LPA will develop an updated treatment plan a minimum each year with contributions from the BCBA. This plan will be revised throughout the year meeded. The BCBA to meet and convene with the team for assessment activity with the LPA's involvement bein remote through real time electronics or phone calls. The LPA will develop an updated treatment plan a minimum each year with contributions from the BCBA. This plan will be revised throughout the year meeded. The BCBA to form we become a minimum each year with continue providing implementation training to staff, ongoing monitorin data collection, analysis and progress reviews and to ensure integrity in implementation of the plan as well as attend team meetings. I continue to struggle with behaviors at home that are disruptive to the home environment. These behaviors have increased in frequency and severity in recent weeks. The police have been called on m twice over the last year due to assault behaviors   have committed against group home staff. My team continues to be in need of support and training to learn the best ways to support me through times of the future Developmental meeting.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Where am I now in Relativ                                                             | onship to the Outcome?                                                    | (Reason for outc                            | ome/Justification)                                    |                           |
| familiar with each other, which is a comfort. My team is requesting 10 hours of SCS: BCBA in order for<br>the BCBA to meet and convene with the team for assessment activity with the LPA's involvement bein<br>remote through real thme electronics or phone calls. The LPA will develop an updated treatment plan<br>a minimum each year with contributions from the BCBA. This plan will be revised throughout the year<br>needed. The BCBA will review the assessment with the team. I will receive 8 hours of SCS: BCBA per<br>month in order for my BCBA to continue providing implementation training to staff, ongoing monitori<br>data collection, analysis and progress reviews and to ensure integrity in implementation of the plan as<br>well as attend team meetings.<br>I continue to struggle with behaviors at home that are disruptive to the home environment. These<br>behaviors have increased in frequency and severity in recent weeks. The police have been called on m<br>twice over the last year due to assault behaviors I have committed against group home staff. My team<br>continues to be in need of support and training to learn the best ways to support me through times of<br>Distabilities and Subsence Abuse Services.<br>I continues to be in need of support and training to learn the best ways to support me through times of<br>Distabilities and Subsence Abuse Services.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | l have been receiving ongo<br>2018. My BCBA                                           | ingrand consistent SCS ser                                                | vices through Delta<br>eviously when I attu | a Behavioral Group s<br>anded TPYA so we ar           | ince Janua<br>'e very     |
| remote through real time electronics or phone calls. The LPA will develop an updated treatment plan<br>a minimum each year with contributions from the BCBA. This plan will be revised throughout the year<br>needed. The BCBA will review the assessment with the team. I will receive 8 hours of SCS: BCBA per<br>month in order for my BCBA to continue providing implementation training to staff, ongoing monitori<br>data collection, analysis and progress reviews and to ensure integrity in implementation of the plan as<br>well as attend team meetings.<br>I continue to struggle with behaviors at home that are disruptive to the home environment. These<br>behaviors have increased in frequency and severity in recent weeks. The police have been called on m<br>twice over the last year due to assault behaviors I have committed against group home staff. My team<br>Continues to be in need of support and training to learn the best ways to support me through times of<br>Diamilities and Substance Abuse Services<br>I continues to be in need of support and training to learn the best ways to support me through times of<br>Diamilities and Substance Abuse Services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | tamiliar with each other, w                                                           | hich is a comfort. Wy tear<br>renewith the team for as                    | n is requesting 10 f<br>iessment activity W | ith the LPA's involve                                 | n or aer ror<br>ment bein |
| a minimum each year with contributions from the BCBA. This plan will be revised throughout the year needed. The BCBA will review the assessment with the team. I will receive 8 hours of SCS: BCBA per month in order for my BCBA to continue providing implementation training to staff, ongoing monitorid data collection, analysis and progress reviews and to ensure integrity in implementation of the plan as well as attend team meetings.<br>I continue to struggle with behaviors at home that are disruptive to the home environment. These behaviors have increased in frequency and severity in recent weeks. The police have been called on m twice over the last year due to assault behaviors I have committed against group home staff. My team continues to be in need of support and training to learn the best ways to support me through times of the biabilities and Subsence Abuse Services 17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | remote through real time e                                                            | lectronics or phone calls.                                                | The LPA will develo                         | op an updated treatr                                  | nent plan                 |
| needed. The BCBA will review the assessment with the team. Twill receive 8 hours of 50.50 burds per<br>month in order for my BCBA to continue providing implementation training to staff, ongoing monitori<br>data collection, analysis and progress reviews and to ensure integrity in implementation of the plan as<br>well as attend team meetings.<br>I continue to struggle with behaviors at home that are disruptive to the home environment. These<br>behaviors have increased in frequency and severity in recent weeks. The police have been called on n<br>twice over the last year due to assault behaviors I have committed against group home staff. My tean<br>continues to be in need of support and training to learn the best ways to support me through times o<br>Net Carolina Division of Mental Health, Developmental<br>Disabilities and Substance Abuse Services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | a minimum each year with                                                              | contributions from the BC                                                 | BA. This plan will b                        | te revised throughou                                  | it the year               |
| data collection, analysis and progress reviews and to ensure integrity in implementation of the plan a well as attend team meetings.<br>I continue to struggle with behaviors at home that are disruptive to the home environment. These behaviors have increased in frequency and severity in recent weeks. The police have been called on n twice over the last year due to assault behaviors I have committed against group home staff. My tean continues to be in need of support and training to learn the best ways to support me through times o Next Carolina Division of Mental Health. Developmental Disabilities and Substance Abuse Services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | needed. The BUBA WIII reve<br>month in order for my BCB                               | ew the assessment with ti<br>A to continue providing in                   | recernentation train                        | ive a nours of sucs. B<br>ning to staff, ongoine      | tex per<br>tempitori      |
| well as attend team meetings.<br>I continue to struggle with behaviors at home that are disruptive to the home environment. These<br>behaviors have increased in frequency and severity in recent weeks. The police have been called on n<br>twice over the last year due to assault behaviors I have committed against group home staff. My tean<br>continues to be in need of support and training to learn the best ways to support me through times o<br>Nerth Carolina Division of Mental Health, Developmental<br>Disabilities and Substance Abuse Services<br>17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | data collection, analysis an                                                          | d progress reviews and to                                                 | ensure integrity in                         | implementation of t                                   | he plan a:                |
| I continue to struggle with behaviors at home that are disruptive to the home environment. These<br>behaviors have increased in frequency and severity in recent weeks. The police have been called on n<br>twice over the last year due to assault behaviors I have committed against group home staff. My tean<br>continues to be in need of support and training to learn the best ways to support me through times o<br>Nerth Carolina Division of Mental Health, Developmental<br>Disabilities and Substance Abuse Services<br>17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | well as attend team meetin                                                            | igs.                                                                      |                                             |                                                       | ì                         |
| twice over the last year due to assault behaviors I have committed against group home staff. My team continues to be in need of support and training to learn the best ways to support me through times or North Caroline Division of Mental Health, Developmental Disabilities and Substance Abuse Services 17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                       | behaviors at home that ar<br>1 frequency and severity i                   | e disruptive to the<br>n recent weeks. Th   | home environment.<br>e police have been c             | These<br>alled on m       |
| continues to be in need of support and training to learn the best ways to support me through times of<br>North Carolina Division of Mental Health, Developmental<br>Disabilities and Substance Abuse Services<br>17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | twice over the last year due                                                          | e to assault behaviors I ha                                               | ve committed agai                           | nst group home staf                                   | f. My team                |
| ivision of Mental Health, Developmental<br>Substance Abuse Services<br>17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | continues to be in need of :                                                          | support and training to lea                                               | arn the best ways t                         | o support me throug                                   | gh times of               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | North Carolina Division of Mental Health<br>Diadbilities and Substance Abuse Service. |                                                                           |                                             |                                                       |                           |

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| personal responsibilities w                                                                          | ic very louary and an invery w                                                                                                                                                                                                                                   | will play music very loudly and am likely to refuse to participate in nousehold chores and | sehold chores and                     |
|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|---------------------------------------|
| •                                                                                                    | ponsibilities when it comes to personal hygiene and cleaning my own space. It is important                                                                                                                                                                       | iene and cleaning my own s                                                                 | oace. It is importan                  |
| to know that I manipulate                                                                            | to know that I manipulate team members against each other. My team feels as though continued BCBA                                                                                                                                                                | other. My team feels as tho                                                                | igh continued BCB/                    |
| services are needed to obs                                                                           | services are needed to observe my behaviors in all settings and make recommendations that I and my<br>team can agree with then provide training and observation ongoing. It is important that I and my team                                                      | ngs and make recommenda<br>tion ongoing. It is importan                                    | that I and my tean                    |
| receive training on the bes                                                                          | receive training on the best way to support me. It is important that I know my team members are all                                                                                                                                                              | ortant that I know my tean                                                                 | members are all                       |
| receiving the same training                                                                          | receiving the same training as I may engage in some behaviors in one setting and not another                                                                                                                                                                     | raviors in one setting and n                                                               | ot another.                           |
| It is important to know that                                                                         | It is important to know that I have engaged in inappropriate sexual behaviors with a minor in the                                                                                                                                                                | riate sexual behaviors with                                                                | minor in the<br>weekly thereavy with  |
| community. In addition, it                                                                           | community, in addition, it should be noted that in turn entry supported to attend wooky distribution.                                                                                                                                                            | that my emotions remain fo                                                                 | gulated as I am like                  |
| to engage in behaviors tha                                                                           | to engage in behaviors that could potentially hurt myself or others.                                                                                                                                                                                             | for others.                                                                                | \$                                    |
| Service(s)/Support(s) Who will provide the Sirrord & Control Si                                      |                                                                                                                                                                                                                                                                  | Estimated Frequency*                                                                       | Target Date                           |
| Specialized Consultative<br>Services: RCRA                                                           | Delta Behavioral Group-8                                                                                                                                                                                                                                         | 10 hours/year                                                                              | 12.31.19                              |
| Specialized Consultative<br>Services: SCBA                                                           | Delta Behavioral Group-8                                                                                                                                                                                                                                         | 8 hours/month                                                                              | 12.31.19                              |
| *Location Codes: 1-Consumer<br>Employment 6-Volunteer Site 7:<br>**EstImated Frequency for Eac       | *Location Codes: 1-Consumer's Home 2-Day Program 3-Residential Facility 4-Community 5-Place<br>Employment 6-Volunteer Site 7-Worker's Home 9-Other (Please specify)<br>**Estimated Frequency for Each Location: (Eg. 75% of hours, 3 out of 5 days, 2 hours/day) | ther Facility 4-Community 5-Blac<br>becky)<br>ut of 5 days, 2 hours/day)                   | ło ę                                  |
| Long Range Outcome:<br>6. bill receive                                                               | le Outcome: A complements to maintain his health and well-being.                                                                                                                                                                                                 | a maintain his health and                                                                  | well-being.                           |
| Where am I now in Ref.                                                                               | Where am I now in Relationship to the Outcome? (Reason for outcome/Justification)<br>I require the use of mitritional summements eachday to maintain my health and well-heine. I will often                                                                      | P. (Reason for outcome/J<br>maintain my health and we                                      | ustification)<br>II-being_1 will ofte |
| choose to not eat or eat sn                                                                          | choose to not eat or eat small unhealthy snacks throughout the day. I am provided with nutritious                                                                                                                                                                | tout the day. I am provided                                                                | with nutritious                       |
| meals while at home, but i                                                                           | meals while at home, but usually prefer to stop and purchase foods that are high in sugar and fat while                                                                                                                                                          | chase foods that are high ir                                                               | sugar and fat while                   |
| out in the community. I rea                                                                          | out in the community. I require support to assure that I am taking in the appropriate amount of                                                                                                                                                                  | am taking in the appropriat                                                                | e amount of                           |
| nutrients needed daily. MI<br>cans/dav.460 cans/month)                                               | nutrients needed daily. While I was previously prescribed 3 cans/day, this has been reduced to 2<br>cans/day.(G) cans/month) as I have been able to gain and maintain a little bit of weight. 24 cans come in                                                    | id 3 cans/day, this has been<br>nd maintain a little bit of we                             | reduced to 2<br>ight. 24 cans come    |
| 1 case, therefore, 60 cans                                                                           | 1 case, therefore, 60 cans per month/24 cans per case=2.5 cases/month; 2.5 cases per month x 12                                                                                                                                                                  | =2.5 cases/month; 2.5 case                                                                 | per month x 12                        |
| months=30 cases for the y                                                                            | months=30 cases for the year.1 prefer strawberry and vanilla flavors. My treatment team and I are<br>requesting putritional supplements through the Innovations waiver.                                                                                          | anilla flavors. My treatmen<br>dons waiver.                                                | team and l are                        |
| Service(s) Support(s)                                                                                | ort(s) Vho will provide the Subbort & Location(s)*                                                                                                                                                                                                               | vide the Estimated cation(s)* Frequency*                                                   | Target Date                           |
| Assistive Technology-Supplies Monthly                                                                | plies Monthly Kelly Medical-8                                                                                                                                                                                                                                    | E O                                                                                        | th 12.31.19                           |
| * Location Codes: 1-Consumer<br>Employment 6-Volunteer Site 7-<br>**Estimated Frequency for Eac      | Prograr<br>8-Othe                                                                                                                                                                                                                                                | itial Facility 4-Community 5-Place<br>lecify)<br>ut of 5 days, 2 hours/day)                | ō                                     |
| Long Range Outcome :<br>7. health and well-b                                                         | ge Outcome :<br>will follow recommended medical appointments in an effort to maintain his<br>th and well-being throughout his plan year.                                                                                                                         | ointments in an effort to<br>ear.                                                          | maintain hís                          |
| Where am I now in Relati                                                                             | Where am I now in Relationship to the Outcome? (Reason for outcome/Justification)                                                                                                                                                                                | eason for outcome/Justifica                                                                | ion)                                  |
| North Carolina Division of Mental Kealth, Developmental<br>Disabilities and Substance Abuse Services |                                                                                                                                                                                                                                                                  |                                                                                            |                                       |
|                                                                                                      | 8                                                                                                                                                                                                                                                                |                                                                                            |                                       |

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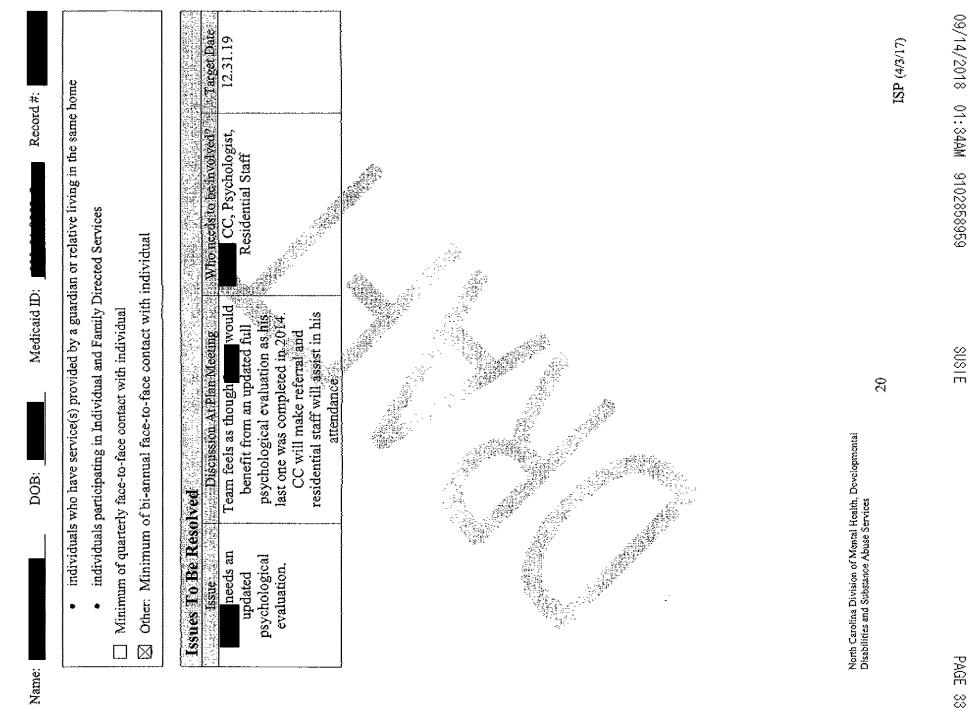
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| Weekly.                                                                           |                                      | Who will assuida tha                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Fatimated                                                   | Tarret Date                                                                                                    |
|-----------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| a laboration                                                                      | •                                    | Support & Location(s)*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Frequency**                                                 |                                                                                                                |
| Primary/Preventative Medical<br>Appointments                                      | dical                                | Horizons Health Primary<br>Care-8                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Annually                                                    | 12.31.19                                                                                                       |
| Primary/Preventative Medical<br>Appointments                                      | dical                                | UNC Chapel Hill Dental<br>Clinic-8                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Annually                                                    | 12.31.19                                                                                                       |
| Primary/Preventative Medical<br>Appointments                                      | dical                                | Burgaw Eye Center 8                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Annually                                                    | 12,31.19                                                                                                       |
| Primary/Preventative Medical<br>Appointments                                      | dical                                | Coastal Horizons-8                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Every ather month                                           | 12.31.19                                                                                                       |
| Primary/Preventative Medical<br>Annointments                                      | dical                                | Coastal Hortzons-8                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Weekly                                                      | 12.31.19                                                                                                       |
| * Location Codes: 1-Consumer's<br>Employment 6-Volunteer Site 7-W                 | Home 2-D<br>/orker's Ho<br>Location: | * Location Codes: 1-Consumer's Home 2-Day Program 2-Residential Facility 4-Community<br>Employment 6-Volunteer Site 7-Worker's Home 8-Other (Please specify)<br>**Estimated Frequency for Each Location: (e.g. 75% of hours, 3 out of 5 days, 2 hours/day),                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 4-Community 5-Place of<br>2 hours/day)                      |                                                                                                                |
| Status of Individual and Family Direction                                         |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |                                                                                                                |
| X                                                                                 | tly involý                           | Currently involved with Individual/Fainity Direction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | tion                                                        | Sec. Sec. Sec. Sec. Sec. Sec. Sec. Sec.                                                                        |
| NoN                                                                               | ation to In                          | (II yes, sup the next or questions)<br>Orientation to Individual/Family Direction Given                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                             | والمراجع المراجع المراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والم |
| Yes No                                                                            | lual/Famil                           | Individual/Family Choise Not To Reserve Orientation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ation                                                       |                                                                                                                |
|                                                                                   | ted in Indi                          | Interested in Individual/Family Direction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | الم التي التي التي التي التي التي التي التي                 | و میں میں اور                                                              |
| Care Coordination                                                                 |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |                                                                                                                |
| Your Care Coordinator can                                                         | assist you                           | Coordinator can assist you in the following ways:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | NOTIFIED AND A THIRD AND AND AND AND AND AND AND AND AND AN | र महर्मित कर्मकर इन्द्रिय न स्वती स्वतन्त्र हि. स्वती स्वतन्त्र                                                |
| <ul> <li>Assisting you with a</li> <li>Assistance with deve</li> </ul>            | ssessmen                             | Assisting you with assessment and documentation of your suppor<br>Assistance with development of your plan and Individual Budget.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | your support needs.<br>dual Budget.                         |                                                                                                                |
| Monitoring services                                                               | to ensure                            | Monitoring services to ensure that you are receiving services to meet your needs and that you are                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | es to meet your needs a                                     | md that you a                                                                                                  |
| <ul> <li>Mappy with them.</li> <li>Monitoring to ensure</li> </ul>                | sthat VOII                           | happy with them. We have a second set of the |                                                             |                                                                                                                |
| Helping you to recei                                                              | ve inform                            | Helping you to receive information on directing your own services.<br>Helping you with mobileme or complaints about services if necessary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | services.                                                   |                                                                                                                |
| Montoring Plan (Valtuat apply)                                                    | hat apply                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |                                                                                                                |
| On months that face-to-face contact dc<br>are no issues that need to be addressed | intact does<br>ddressed.             | that face-to-face contact does not occur, the Care Coordinator has telephone contact to ensure that there s that need to be addressed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | r has telephone contact to                                  | ensure that th                                                                                                 |
| Minimum of monthly face-to-face contact                                           | e-to-face c                          | contact                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                             |                                                                                                                |
| Required for the following:                                                       | wing:                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |                                                                                                                |
| <ul> <li>individuals living</li> </ul>                                            | in resider                           | individuals living in residential placements, including alternative family living homes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | native family living home                                   | 51                                                                                                             |
| <ul> <li>individuals new to</li> </ul>                                            | o the waiv                           | individuals new to the waiver for the first six months                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                             |                                                                                                                |

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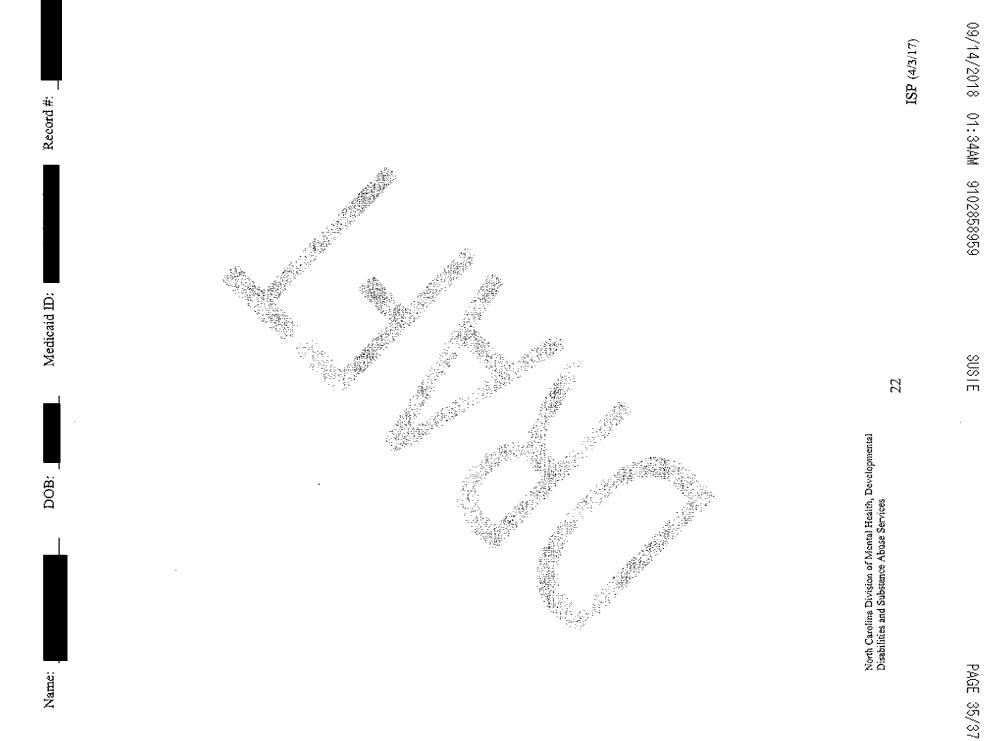
Record #:

| formation<br>Medicaid/County New Hanover County                                      | Medicare & N/A<br>Institute Carter Medicaid | Private Residence (residence rented/leased or owneed), individual or family) | Alternative Family Living AFL Home ( Unlicensed ) Licensed for beds) | ce leased or owned by provider)                               |                             | Self 🛄 Paront (muzor enid). 🖂 Légai Guardian<br>Other (describe) | New Hanover County DSS | ally responsible person five in the home with person supported? 🔲 Ves 🛛 No<br>df no provide address and phone # of legally responsible person helow)   | 1650 Greenfield St. | Wilmington, NC 28402 | 910-798-3400 | A A A A A A A A A A A A A A A A A A A | Roxanne Craven: QP, Coastal Enterprises | Social Worker, New Hanover                       | County Department of Social Services<br>BCBA Delta Behavioral Groun | S: G                                            | Assessments/Reports Utilized in Plan Development (wark all that apply) | 🛛 🛛 Risk/Support Needs Assessment | 🛛 Other (describe) Formal Behavior Plan | Other (describe)                 |            | Description | Intellectual Disability, Mild |
|--------------------------------------------------------------------------------------|---------------------------------------------|------------------------------------------------------------------------------|----------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------|------------------------------------------------------------------|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|----------------------|--------------|---------------------------------------|-----------------------------------------|--------------------------------------------------|---------------------------------------------------------------------|-------------------------------------------------|------------------------------------------------------------------------|-----------------------------------|-----------------------------------------|----------------------------------|------------|-------------|-------------------------------|
| Demographic Information           Name         Medic           Address         Medic | Criy, State, Zip<br>Daterof Bridi           | Stuation Private Residence (residence rened/)                                |                                                                      | Non-Private Residence (residence leased or owned by provider) | A CARACTER Other (describe) | I.egally Responsible Berson 🛄 Self 🛄 Paront (m                   | Name                   | Does the legally responsible person five in the home with person supported?<br>If no. provide address and phone # of legally responsible person fields |                     | CUV/State Zap: 1 1 2 |              | Name/Relationship                     | J/DD Care Coordinator, Trillium         | Susie Hayes: Executive Director, A Special Touch | Larry Brown: Menuber                                                | Dean Carter: Support staff, Coastal Enterprises | Assessments/Reports Utilized in P                                      | 🛛 Supports Intensity Scale        | Community Guide Assessment              | 🛛 Other (describe) Psychological | Diagnostic |             | F70 Intellectual C            |

North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services

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ISP (4/3/17)



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| Record #:    |                                        | nderstand that if emolled<br>m Individuals with<br>inver services, an<br>ure to use a waiver                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ous Walver Services                                                                                                                                                      |                                      | with the following leanes                                                                                                                                    |  | ISP Signature Page (43/17)                                                                           |
|--------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------|
| Medicaid ID: | Individual Support Plan Signature Page | Choike<br>a Waiver is strictly voluntary. I also u<br>loss in an Intermediate Care Facility fi<br>is norder to be determined to need w<br>at in order to be determined to need w<br>it is order to be determined to need with<br>the waiver service monthly and that fail                                                                                                                                                                                                                                                                                                                                  | a [] i have not chosen NC Inpovation<br>1 / R/ / (5)<br>rson Date / /                                                                                                    |                                      | ng this plan have concerns or disagree                                                                                                                       |  | S ASI                                                                                                |
| Matme:       | Individual Suppor                      | NC Innovations Waiver / Freedom of Choice<br>I understand that enrollment in the NC Innovations Waiver is strictly voluntary. I also understand that if enrolled<br>I will be receiving Waiver services instead of services in an Intermediate Care Facility for Individuals with<br>Intellectual Disabilities (ICF-IID). I understand that in order to be determined to need waiver services, an<br>individual must require the provision of at feast one weiver service monthly and that failure to use a weiver<br>service monthly will jeopardize my continued aligibility for the Ianovations waiver. | I have chosen NC innovations Waiver Sorgices 1 have not chosen NC innovations Waiver Services<br>1 / R/ / 6<br>Senatime of Individual or Legally Responsible Person Date | Statement of Concern or Disagreement | I, the individual/Legally Responsible Person signing this plan have concerns or disagree with the following issues<br>related to my Individual Support Plan: |  | North Carolina Divitina of Maanal Health, Davelopmantal<br>Diatkijitias end Suhstance Abuse Services |

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| Plan Signatures<br>By signing this plan, 1<br>understand that I can                       | یک اور این این<br>اور این اور این                                                                                                                                       |                                                          |                                                                        |                                                |
|-------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------|
| By signing this plu<br>understand that I (                                                |                                                                                                                                                                                                                                                                                                                                                                         |                                                          |                                                                        |                                                |
| Mry Care Core                                                                             | By signing this plan, I am indicating agreement with the bulleted statements fisted here unless crossed through I<br>understand that I can cross through any statement with which I disagree.<br>• Mee Coordinates believed me know whit services are available.                                                                                                        | the bulleted str<br>th which I disa                      | dements listed have an<br>gree.<br>Me.                                 | less crossed through. I                        |
| I was informe<br>plan and freel                                                           | I was informed of the range of providers in my community qualified to provide the service(s) included in my<br>plan and freely chose the providem who will be providing services/supports.                                                                                                                                                                              | canmunity qual<br>providing servic                       | ified to provide the ser<br>cestsupports.                              | vice(s) included in my                         |
| I participated     I understand th                                                        | t us pair increases are not were appreced in the plan.<br>I participated in the development of this plan.<br>I understand that Trillium Health Resonness will be coordinating my care with the network providers listed in                                                                                                                                              | be coordinating                                          | g my care with the net                                                 | acth providers listed i                        |
| this plan.<br>• I understand th<br>Living, should<br>individual's by<br>• I understand th | this plan.<br>I understand that all services under the Innovations Waiver, including Residential Supports and Supported<br>Living, should be requested to the full extent of the individual's level of medical necessity, regardless of the<br>individual's budgeting category.<br>I understand that services may be authorized in excess of the Individualized Budget. | as Waiver, incl<br>fie individual's<br>access of the Ind | uding Residential Sup<br>level of medical mees<br>lividualized Budget. | ports and Supported<br>sity, regardless of the |
| Starbares of Tadiv                                                                        | Simhere of Individual or Lezalty Responsible Person                                                                                                                                                                                                                                                                                                                     |                                                          | 1/ 24/10                                                               |                                                |
|                                                                                           | V DA OD District signed by Kent Jones, th, OP                                                                                                                                                                                                                                                                                                                           | kunes, BA,OP                                             | A MURA A                                                               |                                                |
| Signature Creden                                                                          | NULLI JOLICO, DA, U. Butta 2018.11.2019:11:<br>Signature/Gredentials of Caro Coordinator                                                                                                                                                                                                                                                                                | 15-0500                                                  | Date                                                                   |                                                |
| J.                                                                                        | 0 0/58 -                                                                                                                                                                                                                                                                                                                                                                |                                                          | 11/20/18                                                               |                                                |
| Signature/Oreden                                                                          | Signature/Credentials of Service Provider                                                                                                                                                                                                                                                                                                                               |                                                          | Date                                                                   | -                                              |
| Signature/Creden                                                                          | NUN Credentielle of Service Hovider                                                                                                                                                                                                                                                                                                                                     | Pander                                                   | Dere                                                                   |                                                |
| Signature/Creden                                                                          | Signature/Credentials of Service Provider                                                                                                                                                                                                                                                                                                                               | an a                 | Date                                                                   | Abort A                                        |
| Signature/Creden                                                                          | Signature/Credentials of Service Provider                                                                                                                                                                                                                                                                                                                               |                                                          | Date                                                                   | Y MARINA AND AND AND AND AND AND AND AND AND A |
| ALEN DUNN                                                                                 | June, Oros Broug Home                                                                                                                                                                                                                                                                                                                                                   | That                                                     | 11-27-2018<br>Date                                                     |                                                |
| Other Signature (Optional)                                                                | (ptional)                                                                                                                                                                                                                                                                                                                                                               |                                                          | Date                                                                   |                                                |

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### A SPECIAL TOUCH GROUP HOME, INC. 5925 NC HWY 11 WILLARD, NC 28478

(910) 285-7717 FACILUTY

(910) 285-8959 FAX

aspecial touch @intrstar.net

### FAX COVER SHEET

| DATE: 10-5-19 TIME: 905A<br># OF PAGES INCLUDING THIS COVER SHEET: 31<br>SENDER'S NAME: 21 CE HOLFS<br>SENDER'S NAME: 21 CE HOLFS<br>RECEIVER'S NAME: 21 CHULM<br>RECEIVER'S COMPANY NAME: 21 CAUJIN<br>RECEIVER'S FAX #: 919-715 SD18<br>RECEIVER'S FAX #: 919-715 SD18<br>RECE |
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