| Person's Age: 30 |
|---|
| City of Residence: Warsaw |
| Funding Source: □ I.O. Waiver |
| Type of Services requested: □ Homemaker/Personal Care ***Must be certified for Residential Respite*** |
| Projected schedule for services: flexible |
| Is this schedule flexible: \square Yes \square No \boxtimes Somewhat- explain: Residential respite provider would coordinate with OSL provider and guardian for schedule, no more than 12 hours a day, not to exceed 52 hours a month |
| The best way to communicate with me is: Talk to him. Z can make choices with eye gaze at times. He has a good sense of humor. He's very laid back. He smiles when he's happy and may cry or grimace when he's sad or uncomfortable. |
| Things I like to do: Watching sports, especially the Sabres and the Bills, Listening to opera, rock n roll music, Going outside to get fresh air and take a stroll |
| Things I need help with: Z needs help with all aspects of personal care and household chores. He depends on a lift for transfers. |
| Any other important information to know: Z has a g-tube and recurring pressure sores and wounds. |
| SSA's contact information: |

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