

Case Study 3: Melvin Thurber

Melvin Thurber is a 30-year-old man who has little involvement with his natural family. Both of Mr. Thurber's parents have passed away, and his siblings have no contact with him. He is currently living alone in a one-bedroom apartment with the assistance of 24-hours-a-day, 7-days-a-week direct support person. He is currently unemployed but has previously held jobs including mowing lawns, bagging groceries, checking tickets at a movie theater, and cleaning offices. He volunteers once a week at a local hospital, and, though he frequently calls to cancel, he appears to get a lot of satisfaction volunteering.

Mr. Thurber never completed high school and reports hating school and all his teachers. Mr. Thurber's intellectual functioning assessments on the WAIS-III consistently reveal that his Full Scale IQ is 63 ± 5 . He also presents significant limitations across all areas of adaptive skills and obtained a SIB-R (Bruininks et al., 1996) Broad Independence score of 58 ± 2 . He has been previously diagnosed with a mood disorder and borderline personality disorder. He has a history of arson. Overall, although being 40 pounds overweight, he is physically healthy.

He lived on his own in the community for the past 6 years and is currently receiving community supports from a local support provider. He has a long history of institutionalizations at local psychiatric hospitals. He has been admitted for inpatient hospitalizations for severe depression, suicidal threats, and self-injurious behaviors; more specifically, inserting objects into his penis and rectum with a stated goal of killing or hurting himself. Mr. Thurber also served time in a correctional facility 10 years ago for starting a fire that caused significant damage to a neighborhood home. He has confessed to starting other fires as well.

Mr. Thurber also has challenging self-injurious behavior (SIB). Initially Mr. Thurber's SIB involved insertion of objects into his penis, the function of which was hypothesized to be an attempt to gain attention from medical personnel. The implementation of several behavioral and environmental interventions over the past 3 years has led to successfully reducing this behavior; however, Mr. Thurber began inserting objects into his rectum. Similar procedures were identified and implemented for this topography, and Mr. Thurber ceased this behavior but then began engaging in pica, or swallowing noncomestible objects but at a much lower frequency than the previous topographies of SIB.

Mr. Thurber is accompanied by a direct support person at all times when in the community. This supervision is necessary to monitor Mr. Thurber's fire-starting behavior, as well as to ensure he is not collecting items that he then uses to hurt himself. He is extremely clever in collecting objects that he later eats (pica) and thus requires intense observation.

The aforementioned behavioral and environmental interventions have been carried out in conjunction with ongoing individual therapy working with Mr. Thurber on dealing

with his mood and teaching him better communication and coping strategies. The pica behavior led to a life-threatening situation this past year, when he swallowed a piece from his eye-glasses, causing internal injury that required surgical repair. Mr. Thurber was hospitalized for several days following the surgery but has recovered well. His completed profile is presented as Figure 3.7.

Supports Intensity Scale

Interview and Profile Form

Adult Version (ages 16 and up)

27CR1105

ID/TRACKING NUMBER

Name	Thurber	Melvin	M.	Date SIS Completed
	LAST	FIRST	MIDDLE	
Address	626 Washington Ave.			2003 / 12 / 05 /
				YR MO DAY
City, State, Zip	Greenville, NC 44321			Date of Birth
				1973 / 03 / 02 /
				YR MO DAY
Phone	252 / 555 / 2931	Language Spoken at Home	English	Age 30
Individuals or Organizations Providing Essential Supports:				Gender ☒ Male ☐ Female
Name	Dan Wolf	Relationship	State Guardian	Phone 252 / 555 / 3831
Name	Nellie Windsombacker	Relationship	Arc Counselor	Phone 252 / 555 / 2664
Name	Taylor Watts	Relationship	Support Staff	Phone 252 / 555 / 2535
Other Pertinent Information				

Respondent Name	Relationship to Individual	Language Spoken
1. Melvin Thurber	Self	English
2. Dan Wolf	State Guardian	English
3. Nellie Windsombacker	Arc Counselor	English
Taylor Watts	Direct Support Worker	English

Interviewer	Carolyn Driver	Position	Case Worker
Agency/Affiliation	N.C. Dept. of Health & Human Services	Phone	304 / 555 / 2861
Address	1001 Navaho Drive, Raleigh, NC 27609	Email	cdriver@dd.state

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1

Figure 3.7. Completed SIS for Melvin Thurber.

Section 1. Support Needs Scale

INSTRUCTIONS: Identify the Frequency, Daily Support Time, and Type of Support that is reported necessary for the person to be successful in the six activity domains (Parts A–F). **Circle the appropriate number (0–4) for each measurement** (i.e., Frequency, Daily Support Time, Type of Support). (See rating key below.) Add across each line item to obtain the Raw Scores. Sum the Raw Scores down to obtain the Total Raw Score for each Part.

1. This scale should be completed without regard to the services or supports currently provided or available.
2. Scores should reflect the supports that would be necessary for this person to be successful in each activity.
3. If an individual uses assistive technology, the person should be rated with said technology in place.
4. Complete ALL items, even if the person is not currently performing a listed activity.

Part A: Home Living Activities	Frequency					Daily Support Time					Type of Support					Raw Scores
1. Using the toilet	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
2. Taking care of clothes (includes laundering)	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	7
3. Preparing food	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5
4. Eating food	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
5. Housekeeping and cleaning	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
6. Dressing	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
7. Bathing and taking care of personal hygiene and grooming needs	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5
8. Operating home appliances	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
TOTAL Raw Score Home Living Activities															47	

Enter the Raw Score (max. = 92) on the SIS Profile, on page 8, Section 1A, Part A, Home Living Activities

RATING KEY

FREQUENCY:

How frequently is support needed for this activity?

- 0 = none or less than monthly
- 1 = at least once a month, but not once a week
- 2 = at least once a week, but not once a day
- 3 = at least once a day, but not once an hour
- 4 = hourly or more frequently

DAILY SUPPORT TIME:

On a typical day when support in this area is needed, how much time should be devoted?

- 0 = none
- 1 = less than 30 minutes
- 2 = 30 minutes to less than 2 hours
- 3 = 2 hours to less than 4 hours
- 4 = 4 hours or more

TYPE OF SUPPORT:

What kind of support should be provided?

- 0 = none
- 1 = monitoring
- 2 = verbal/gestural prompting
- 3 = partial physical assistance
- 4 = full physical assistance

Section 1. Support Needs Scale, continued

Circle the appropriate number (0–4) for each measurement. (See rating key.) Complete ALL items, even if the person is not currently performing a listed activity. Add the scores across to get a Raw Score. Add the Raw Scores down to get a Total Raw Score.

Part B: Community Living Activities	Frequency					Daily Support Time					Type of Support					Raw Scores
1. Getting from place to place throughout the community (transportation)	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	9
2. Participating in recreation/leisure activities in the community settings	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
3. Using public services in the community	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
4. Going to visit friends and family	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	9
5. Participating in preferred community activities (church, volunteer, etc.)	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
6. Shopping and purchasing goods and services	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	7
7. Interacting with community members	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	8
8. Accessing public buildings and settings	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
TOTAL Raw Score Community Living Activities															57	

Enter the Raw Score (max. = 91) on the SIS Profile, on page 8, Section 1A, Part B, Community Living Activities

Part C: Lifelong Learning Activities	Frequency					Daily Support Time					Type of Support (TS)					Raw Scores
1. Interacting with others in learning activities	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5
2. Participating in training/educational decisions	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5
3. Learning and using problem-solving strategies	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	7
4. Using technology for learning	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
5. Accessing training/educational settings	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	7
6. Learning functional academics (reading signs, counting change, etc.)	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
7. Learning health and physical education skills	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	7
8. Learning self-determination skills	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
9. Learning self-management strategies	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	7
TOTAL Raw Score Lifelong Learning Activities															56	

Enter the Raw Score (max. = 104) on the SIS Profile, on page 8, Section 1A, Part C, Lifelong Learning Activities

Section 1. Support Needs Scale, continued

Circle the appropriate number (0–4) for each measurement. (See rating key.) Complete ALL items, even if the person is not currently performing a listed activity. Add the scores across to get a Raw Score. Add the Raw Scores down to get a Total Raw Score.

Part D: Employment Activities	Frequency					Daily Support Time					Type of Support					Raw Scores
1. Accessing/receiving job/task accommodations	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5
2. Learning and using specific job skills	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5
3. Interacting with co-workers	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	7
4. Interacting with supervisors/coaches	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	7
5. Completing work-related tasks with acceptable speed	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5
6. Completing work-related tasks with acceptable quality	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5
7. Changing job assignments	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	4
8. Seeking information and assistance from an employer	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5
TOTAL Raw Score Employment Activities															43	

Enter the Raw Score (max. = 87) on the SIS Profile, on page 8, Section 1A, Part D, Employment Activities

Part E: Health and Safety Activities	Frequency					Daily Support Time					Type of Support					Raw Scores
1. Taking medications	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
2. Avoiding health and safety hazards	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	11
3. Obtaining health care services	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	10
4. Ambulating and moving about	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
5. Learning how to access emergency services	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
6. Maintaining a nutritious diet	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
7. Maintaining physical health and fitness	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
8. Maintaining emotional well-being	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	8
TOTAL Raw Score Health and Safety Activities															59	

Enter the Raw Score (max. = 94) on the SIS Profile, on page 8, Section 1A, Part E, Health and Safety Activities

RATING KEY

FREQUENCY:

How frequently is support needed for this activity?

- 0 = none or less than monthly
- 1 = at least once a month, but not once a week
- 2 = at least once a week, but not once a day
- 3 = at least once a day, but not once an hour
- 4 = hourly or more frequently

DAILY SUPPORT TIME:

On a typical day when support in this area is needed, how much time should be devoted?

- 0 = none
- 1 = less than 30 minutes
- 2 = 30 minutes to less than 2 hours
- 3 = 2 hours to less than 4 hours
- 4 = 4 hours or more

TYPE OF SUPPORT:

What kind of support should be provided?

- 0 = none
- 1 = monitoring
- 2 = verbal/gestural prompting
- 3 = partial physical assistance
- 4 = full physical assistance

Section 1. Support Needs Scale, continued

Circle the appropriate number (0–4) for each measurement. (See rating key.) Complete ALL items, even if the person is not currently performing a listed activity. Add the scores across to get a Raw Score. Add the Raw Scores down to get a Total Raw Score.

Part F: Social Activities	Frequency					Daily Support Time					Type of Support					Raw Scores
1. Socializing within the household	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5
2. Participating in recreation/leisure activities with others	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	7
3. Socializing outside the household	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	8
4. Making and keeping friends	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5
5. Communicating with others about personal needs	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	8
6. Using appropriate social skills	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	7
7. Engaging in loving and intimate relationships	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
8. Engaging in volunteer work	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6
TOTAL Raw Score Social Activities															52	

Enter the Raw Score (max. = 93) on the SIS Profile, on page 8, Section 1A, Part F, Social Activities

Section 2. Supplemental Protection and Advocacy Scale

Circle the appropriate number (0–4) for each measurement. (See rating key.) Complete ALL items, even if the person is not currently performing a listed activity. Add the scores across to get a Raw Score. Rank the Raw Scores from highest to lowest (1 = highest). Enter the four highest ranked activities (1–4) and their scores on the SIS Profile.

Protection and Advocacy Activities	Frequency					Daily Support Time					Type of Support					Raw Scores	Rank Raw Scores from highest to lowest
1. Advocating for self	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5	4
2. Managing money and personal finances	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	10	1
3. Protecting self from exploitation	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	8	2
4. Exercising legal responsibilities	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6	3
5. Belonging to and participating in self-advocacy/support organizations	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6	3
6. Obtaining legal services	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6	3
7. Making choices and decisions	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	6	3
8. Advocating for others	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	5	4

List the four Protection and Advocacy Activities with the highest Raw Score (from highest to lowest) on the SIS Profile, on page 8, Section 2.

Section 3. Exceptional Medical and Behavioral Support Needs

Circle the appropriate number to indicate how much support is needed for each of the items below. Subtotal the circled 1's and 2's. Total the subtotals. (See rating key.) Complete ALL items.

Section 3A: Medical Supports Needed	No Support Needed	Some Support Needed	Extensive Support Needed
Respiratory care			
1. Inhalation or oxygen therapy	0	1	2
2. Postural drainage	0	1	2
3. Chest PT	0	1	2
4. Suctioning	0	1	2
Feeding assistance			
5. Oral stimulation or jaw positioning	0	1	2
6. Tube feeding (e.g., nasogastric)	0	1	2
7. Parenteral feeding (e.g., IV)	0	1	2
Skin care			
8. Turning or positioning	0	1	2
9. Dressing of open wound(s)	0	1	2
Other exceptional medical care			
10. Protection from infectious diseases due to immune system impairment	0	1	2
11. Seizure management	0	1	2
12. Dialysis	0	1	2
13. Ostomy care	0	1	2
14. Lifting and/or transferring	0	1	2
15. Therapy services	0	1	2
16. Other(s)—Specify: _____	0	1	2
Subtotal of 1's and 2's		0	0
Total (Add Subtotal of 1's and 2's)			0

Enter Total on the SIS Profile, on page 8, Section 3A:
Support Considerations Based on Exceptional
Medical and Behavioral Support Needs, *Medical*

Section 3. Exceptional Medical and Behavioral Support Needs, continued

Circle the appropriate number to indicate how much support is needed for each of the items below. (See rating key.)
Complete ALL items.

Section 3B: Behavioral Supports Needed	No Support Needed	Some Support Needed	Extensive Support Needed
Externally directed destructiveness			
1. Prevention of assaults or injuries to others	0	1	2
2. Prevention of property destruction (e.g., fire setting, breaking furniture)	0	1	2
3. Prevention of stealing	0	1	2
Self-directed destructiveness			
4. Prevention of self-injury	0	1	2
5. Prevention of pica (ingestion of inedible substances)	0	1	2
6. Prevention of suicide attempts	0	1	2
Sexual			
7. Prevention of sexual aggression	0	1	2
8. Prevention of nonaggressive but inappropriate behavior (e.g., exposes self in public, exhibitionism, inappropriate touching or gesturing)	0	1	2
Other			
9. Prevention of tantrums or emotional outbursts	0	1	2
10. Prevention of wandering	0	1	2
11. Prevention of substance abuse	0	1	2
12. Maintenance of mental health treatments	0	1	2
13. Prevention of other serious behavior problem(s) Specify: _____	0	1	2
Subtotal of 1's and 2's		2	12
Total (Add Subtotal of 1's and 2's)			14

Enter Total on the SIS Profile, on page 8, Section 3B:
Support Considerations Based on Exceptional
Medical and Behavioral Support Needs, Behavioral

RATING KEY

- 0 = no support needed
1 = some support needed (i.e., providing monitoring and/or occasional assistance)
2 = extensive support needed (i.e., providing regular assistance to manage the medical condition or behavior)

Supports Intensity Scale (SIS) Scoring Form & Profile

27CR1105

ID/TRACKING NUMBER

Name
Melvin Thurber

Date SIS Completed
2003 / 12 / 05
YR MO DAY

Name of Interviewer
Carolyn Driver

Section 1A: Support Needs Ratings

1. Enter the Raw Scores for parts A–F from pages 2–5.
2. Enter the Standard Scores and Percentiles using Appendix 6.2.
3. Enter the SIS Support Needs Index using Appendix 6.3.

Activities Subscales	Total Raw Scores (From pages 2–5)	Standard Scores (See Appendix 6.2)	Subscale Percentiles (See Appendix 6.2)
A. Home Living	47	9	31
B. Community Living	57	10	50
C. Lifelong Learning	56	10	50
D. Employment	43	9	31
E. Health & Safety	59	11	63
F. Social	52	10	50

Standard Scores TOTAL (sum) 59

SIS SUPPORT NEEDS INDEX (Composite Standard Score) (See Appendix 6.3) 99

Percentile of Support Needs Index (See Appendix 6.3) 47

Section 1B: Support Needs Profile

Circle the Standard Score for each Activities Subscale and the SIS Support Needs Index. Then connect the subscale circles to form a graph.

Percentile	A. Home Living	B. Community Living	C. Lifelong Learning	D. Employment	E. Health & Safety	F. Social	SIS Support Needs Index	Percentile
99	17–20	17–20	17–20	17–20	17–20	17–20	> 131	99
	15–16	15–16	15–16	15–16	15–16	15–16	124–131	
90	14	14	14	14	14	14	120–123	90
	13	13	13	13	13	13	116–119	
80							113–115	80
	12	12	12	12	12	12	110–112	
70							108–109	70
							106–107	
60	11	11	11	11	11	11	105	60
							102–104	
50	10	10	10	10	10	10	100–101	50
							98–99	
40	9	9	9	9	9	9	97	40
							94–96	
30							92–93	30
	8	8	8	8	8	8	90–91	
20							88–89	20
	7	7	7	7	7	7	85–87	
10	6	6	6	6	6	6	82–84	10
	5	5	5	5	5	5	75–81	
1	1–4	1–4	1–4	1–4	1–4	1–4	< 74	1

Section 2: Support Considerations Based on Protection and Advocacy Scores

List the 4 highest ranked Protection and Advocacy Activities from page 5.

Activity	Raw Score
1. Managing Money	10
2. Protection from exploitation	8
3. Legal Responsibilities	6
4. Self Advocacy	6
Choices & Decisions	6

Supports Intensity Scale ©AAMR

Section 3: Support Considerations Based on Exceptional Medical and Behavioral Support Needs

A. MEDICAL

1. Enter the number of Total points from page 6. 0
2. Is this Total larger than 5? Yes No
3. Is at least one "2" circled for Medical Supports Needed on page 6? Yes No

B. BEHAVIORAL

1. Enter the number of Total points from page 7. 14
2. Is this Total larger than 5? Yes No
3. Is at least one "2" circled for Behavioral Supports Needed on page 7? Yes No

If "yes" has been circled on any of the questions above, it is highly likely that this individual has greater support needs than others with a similar SIS Support Needs Index.

8

Individualized Support Plan for Melvin Thurber

Name: Melvin Thurber

Age: 30 years

Date: 12/2/03

Current Daily Activities and Environments:

Mr. Thurber lives on his own in a one-bedroom apartment in a complex of approximately 50 units. Mr. Thurber is currently unemployed. He spends most of his day in his apartment watching television and occasionally goes to run errands accompanied by his one-on-one direct-support staff. Mr. Thurber does not drive, so they use the support staff's automobile to run errands and for Mr. Thurber's general transportation supports. Mr. Thurber occasionally mows the lawn and tends to the yard work for three homes. This work requires approximately one half-day a week. He also volunteers his services every Friday afternoon at the local hospital. Aside from these activities, Mr. Thurber is fairly sedentary and frequently chooses to stay home during the day and evenings when he does not have any lawn work, volunteer work, or health-care appointments.

Interests, Preferences, and Desired Outcomes:

Mr. Thurber enjoys living on his own. He prefers not to have any roommates. His general social interests are fairly limited. He has few friends and expresses little desire in meeting new people or making new friends. He does enjoy occasionally going to the movies (once a month) and likes eating out. He particularly enjoys eating Mexican food. He also likes visiting his provider agency's corporate offices, where he likes socializing with the office personnel and is occasionally asked to do some copying and shredding. Mr. Thurber says that he would like to find a job at the local grocery store or movie theater but is not currently actively looking for work. He wants to continue and potentially increase his lawn-mowing activities and increase volunteer work by working at a second local area hospital.

He continues to participate in individual psychotherapy on a weekly basis and rarely misses his appointments. The therapeutic goal is to reduce Mr. Thurber's self-mutilation, use of the hospital emergency room, and increase his communication of feelings of anger and frustration. Mr. Thurber does not express any desire to reduce his one-on-one supervision. He expresses some anxiety when the possibility of less staff supervision is raised.

With respect to his family, he does admit that he would like to visit his sister more often but she frequently cancels their planned meetings. Health-wise, Mr. Thurber is content with his current health and has no immediate goals or concerns in this area.

Needed Supports:

During his support planning meeting, Mr. Thurber's personal goals and desires and *SIS* results were reviewed and discussed. Mr. Thurber and the participating team members supporting him agreed on the following:

1. Overall, Mr. Thurber has good adaptive skills and is relatively independent in most areas of everyday living skills. However, information obtained during the *SIS* administration was critical in helping the team members realize that Mr. Thurber's needs for supports are increased significantly as a result of the significant presence of exceptional behavioral needs.

2. Mr. Thurber requires very little supports with respect to completing home living tasks. He is capable of cooking for himself, doing his own laundry and errands. However, due to Mr. Thurber's risk of self-injury, the *SIS* clearly indicates the needs for constant supervision in the home.
3. He requires support in getting around in the community. Mr. Thurber has limited access to public transportation and lives too far from the mall to walk or ride a bike. Taking cabs would be a prohibitive expense and not an option considering his current income.
4. Mr. Thurber requires constant supervision while in the community and at home due to his history of fire-starting behavior and his self-injurious behavior.
5. Mr. Thurber will continue to benefit from therapeutic support in learning to cope with stressors and to better communicate about events and situations that he experiences as frustrating and anger provoking.
6. The *SIS* profile informed the team members that Mr. Thurber will require, relative to other areas, less frequent and intense supports to ensure his success in Employment Activities. Also, largely as a result of his exceptional behavioral needs, he will require greater support needs in Health and Safety Activities.
7. With respect to medical needs, Mr. Thurber's only support needs are related to transportation support to get to and from appointments.

Progress Evaluation Plan:

Ms. Driver and Mr. Thurber will be in regular communication regarding the progress toward Mr. Thurber's personal outcomes and the effectiveness of supports in place or need of supports. Mr. Thurber has limited contact with his natural family and prefers to obtain his support services through a provider agency rather than natural supports. Mr. Thurber consented to his therapist giving a yearly progress report to his team regarding his therapeutic outcomes and how these may impact Mr. Thurber's need for supports. This plan should be reviewed in 180 days.