

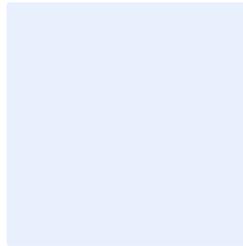


DEVELOPMENTAL DISABILITIES ADMINISTRATION
INTENSIVE HABILITATION SERVICES (IHS)
ENHANCED RESPITE SERVICES (ERS)

Person's Name Children's Stabilization Habilitation Plan

Developed by IHS / ERS on **Date Revised.**

ADD PHOTO BELOW.



Likes

Include:

- *What is important to the person.*
- *What "works."*
- *What brings the individual joy.*
- *Areas where the person excels.*
- *What makes the individual happy.*

Dislikes

Include:

- *What makes the person uncomfortable.*
- *What does the person not respond well to.*
- *What may elicit a negative response.*
- *Ways of interacting when things "don't work."*

Risks

Include all risks that present life-threatening danger to clients or others. Summarize the risk interventions (including restrictions, supervision protocols, dietary needs, or behavioral triggers). You may add notes to aid someone when supporting the person – especially information that keeps the client and those around them safe. See the risk section for more information.

Strategies Known to Work

This section will include pertinent information about strategies, interventions, and teaching skills that are known to be effective with the identified child.

Skills and Abilities

List areas where the person excels and activities the person enjoy doing. Include special talents and skills that may not be readily apparent.

Communication Style

Explain how the person best communicates (verbally, English, ASL, gesturally). Include all information someone needs to better understand the person. If they use technology include that and instructions.

Identified Risks and Interventions

Risk Issues	
Abuse / Neglect / Exploitation <input type="checkbox"/> See risk and intervention detail below. <input type="checkbox"/> No additional direction or explanation needed.	
Likelihood: Chose an item. Consequence: Chose an item.	Risks: Interventions: All staff trained in mandatory reporter responsibilities.
Behavioral <input type="checkbox"/> See risk and intervention detail below. <input type="checkbox"/> No additional direction or explanation needed.	
Likelihood: Chose an item. Consequence: Chose an item.	Risks: Interventions:
Environmental / Specialized Equipment <input type="checkbox"/> See risk and intervention detail below. <input type="checkbox"/> No additional direction or explanation needed.	
Likelihood: Chose an item. Consequence: Chose an item.	Risks: Interventions:
Falls <input type="checkbox"/> See risk and intervention detail below. <input type="checkbox"/> No additional direction or explanation needed.	
Likelihood: Chose an item. Consequence: Chose an item.	Risks: Interventions:
Medical (including allergies, skin integrity) <input type="checkbox"/> See risk and intervention detail below. <input type="checkbox"/> No additional direction or explanation needed.	
Likelihood: Chose an item. Consequence: Chose an item.	Risks: Interventions:
Other <input type="checkbox"/> See risk and intervention detail below. <input type="checkbox"/> No additional direction or explanation needed.	
Likelihood: Chose an item. Consequence: Chose an item.	Risks: Interventions:

Habilitative Goals

Client Name		Goal Date
Goal		
What skill will the client acquire, strengthen, or maintain?		
How does this relate to what is important to the client?		
Measurement		
How goal progress will be measured:	Current (baseline) measurement:	Desired (goal) measurement:
Staff Instructions		
How staff will model and/or prompt:		
How staff will provide instructions:		
How staff will reinforce:		
How staff will document:		
Timeline for review of goal progress		
Goals will be discussed at each individualized team meeting with a report of the client's progress towards the goals identified and revised when the goal is achieved, if requested by client / guardian, or if data indicates the instruction is not effective.		

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