	VA	Sup	plemental	Questions
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Individual's Name:

Indicate a "yes" or "no" for each of the items below. If "NO" to numbered item skip to next numbered item. If "YES" complete	e all	
boxes. Complete <u>ALL</u> items. Item "d' requires some narrative.	V	N
1. Severe Medical Risk (Trigger Questions: 3A: 1 – 16 with a "2")	Y	N
The Individual requires exceptionally high levels of staff support to address severe medical risks related to inhalation or oxygen therapy; postural drainage; chest PT, suctioning; oral stimulation and/or jaw positioning; tube feeding; parenteral		
feeding; skin care turning or positioning; skin care dressing of open wounds; protection from infectious diseases due to		
immune system impairment; seizure management; dialysis; ostomy care; medically-related lifting and/or transferring;		
therapy services, and/or other critical medical supports?		
a. The Individual requires frequent hands-on staff involvement to address critical health and medical needs?		
b. The Individual's severe medical risk currently requires direct 24-hour professional (licensed nurse) supervision?		
c. Individual's ISP has medical care plans, in place, that are documented within the ISP process?		
d. In Section 3A, Medical Supports Needed, it is determined that extensive support is needed to manage the Individual's me	dical risk.	How
many days per week and approximately how many hours per day is the extensive support required? Number of days per week = Number of hours per day =		
2. Severe Community Safety Risk – Convicted (Trigger Questions: 3B: 1, 2 or 7 with a "2")	Y	Ν
The Individual is currently a severe community safety risk to others related to actual or attempted assault and/or injury to		
others; property destruction due to fire setting and/or arson; and/or sexual aggression and has been <b>convicted</b> of a		
crime related to these risks? a. The Individual has been found guilty of a crime, related to these risks, through the criminal justice system?		
b. The Individual's severe community safety risk to others requires a specially controlled home environment, direct		
supervision at home, and/or direct supervision in the community?		
c. The Individual has documented restrictions in place, related to these risks, through a legal requirement or order?		
d. In Section 3B, Behavioral Supports Needed, it was determined that extensive support is needed to manage the Individual		
community safety risk. How many days per week and approximately how many hours per day is the extensive support re	quired?	
Number of days per week =     Number of hours per day =		
3. Severe Community Safety Risk – Not Convicted (Trigger Questions: 3B: 1, 2 or 7 with a "2")	Y	N
The Individual is currently a severe community safety risk to others related to actual or attempted assault and/or injury to	-	
others; property destruction due to fire setting and/or arson; and/or sexual aggression and has <b>not been convicted</b> of a crime related to these risks?		
a. Individual has not been found guilty of a crime related to these risks, but displays the same severe community safety		
risk as a person found guilty through the criminal justice system?		
b. The Individual's severe community safety risk to others requires a specially controlled home environment, direct supervision at home, and/or direct supervision in the community?		
c. The Individual has documented restrictions in place related to these risks, within the ISP Process?		
d. In Section 3B, Behavioral Supports Needed, it was determined that extensive support is needed to manage the Individual	S	
community safety risk. How many days per week and approximately how many hours per day is the extensive support re		
Number of days per week =     Number of hours per day =		
4. Severe Risk of Injury to Self (Trigger Questions: 3B: 4, 5, or 6)	Y	Ν
The Individual displays self-directed destructiveness related to self-injury; pica; and/or suicide attempts which seriously		
threatens their own health and/or safety?		
a. The Individual engages in self-directed destructiveness related to self-injury, PICA, and/or suicide attempts, with the intent to harm self?		
b. The Individual's severe risk of injury to self currently requires direct supervision during all waking hours?		
c. The Individual has prevention and intervention plans, in place, that are documented within the ISP process?		
d. In Section 3B, Behavioral Supports Needed, it was determined that extensive support is needed to manage the Individual	s risk of	injury to
self. How many days per week and approximately how many hours per day is the extensive support required?		
Number of days per week=       Number of hours per day=		
5. Risk of Falling	Y	Ν
Individual displays a risk of falling, as demonstrated by an unsteady gait, active seizures, documented history of falling or		
other issue that effects falling.		
If yes, describe:		
Number of falls in last 90 days=       Number of falls in past 12 months=		
Interviewer Name: Signature: Date:		
Interviewer Natte. Date. Date.		