



Related Service Ticket Needs Assessment for New Service Recipients

Directions: Numbers in parentheses indicate answers that have points assigned. Circle the points and write them in the space provided on the left side

1. Name of consumer: _____ 2. Age: _____

3a. Persons involved in this discussion: _____

3b. Staff completing this form: _____

<i>Staff Representative's Name</i>	<i>Agency</i>	<i>Program</i>
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4. What level of support is required for the individual to successfully participate in a recreation/socialization program? 1:10 (1) 1:5 (2) 1:1 (3) _____ Points

5. Does this individual have any memory/physical/medical/sensory/age related limitations that are obstacles in their full participation in recreation/socialization activities? _____ Points

no (0) yes

If yes, please explain the level of support needed: _____

_____ Please circle points: (1) (2) (3)

6. Are you involved in any activities outside of home/school/work? yes (0) no (1) _____ Points

7. What is your mode of transportation? (only choose one)

- | | | |
|--|--|--|
| <input type="checkbox"/> has a car (0) | <input type="checkbox"/> uses bus independently (0) | <input type="checkbox"/> uses bus with assistance (1) |
| <input type="checkbox"/> DD Resources Funded Door-to-Door Transportation (3) | <input type="checkbox"/> finds rides with family/friends (1) | |
| <input type="checkbox"/> walks/bikes (1) | <input type="checkbox"/> uses Call-A-Ride/Cab (3) | <input type="checkbox"/> no access to transportation (3) |

_____ Points

8. Are there special circumstances to be considered in determining the individual/family need for related services?

Using discretion, case manager can assign up to 3 additional points for extenuating circumstances (i.e. inadequate living arrangements, elderly parent/sick caregiver, etc.) _____

_____ Please circle points: (1) (2) (3)

Total Related Service Points: _____

Directions: Total the points to determine the range of annual hours an individual is eligible for. To determine the estimated monthly hour average, divide the amount of annual hours by 12.

1 Point = 23 Hours	2 Points = 46 Hours	3 Points = 69 Hours	4 Points = 92 Hours	5 Points = 115 Hours
6 Points = 138 Hours	7 Points = 161 Hours	8 Points = 184 Hours	9 Points = 207 Hours	10 Points = 230 Hours
11 Points = 256 Hours	12 Points = 279 Hours	13 Points = 295 Hours		

Monthly Average: _____ **Annual Hours:** _____

Individual if 18 or above and Own Legal Guardian

Date

Parent/Primary Caregiver/Legal Guardian

Date

Legal Guardian if Different from Above i.e. DFS

Date

SLRO Service Coordinator/DD Resources Service Advocate

Date

Agency Staff Representative Signature

Date