

60-Day Assessments



When an individual is new to Waiver

1. The SC completes Part III & IV with the individual to identify initial outcomes and provides completed Parts I-IV and the SIS report to the new provider.
2. The New provider (s) reviews and identifies selected Outcomes for which they will develop supports; amends Part III by inserting Provider name in the “Who’s going to support me” column and identifies how often; signs the existing Part IV with the current date.
3. New Provider completes a 60-Day, Part V, Plan for Supports that reflects Part III and details assessment activities prior to beginning services (must include H&S outcomes).
4. New Provider sends the amended Part III, Part IV and Part V Plan for Supports to SC prior to beginning services.
5. Provider records new learning about the individual in the Support Log and Person-Centered Review Update. An ongoing Plan for Supports is completed by Day 61.

When an individual already has Waiver

1. The SC provides completed Parts I-IV and the risk assessment to the new provider (include the SIS report when the individual has a SIS).
2. New provider (s) reviews and identifies selected Outcomes for which they will provide supports; amend Part III by inserting Provider name in the “Who’s going to support me” column and identify how often; signs the existing Part IV with the current date.
3. Providers complete a 60-Day, Part V, Plan for Supports that reflects Part III prior to beginning services (must include H&S outcomes); and, includes the completion of their existing, approved assessment (when the individual does not have a SIS).
4. Providers send the amended Part III, Part IV and Part V Plan for Supports to SC prior to beginning services.
5. New learning about the individual is recorded in the Support Log and Person-Centered Review Update. An approved assessment is completed during the 60-day assessment when an individual does not have a SIS. An ongoing Plan for Supports is completed by Day 61.