

Residential Descriptors

Basic
Functional: Independent in self-care, daily living activities; or requires supervision, intermittent verbal direction or physical prompts to perform self-care, daily living skills.
Behavioral: No formal behavioral intervention necessary except redirection; may be non-compliant at times, medication refusal, elopement, baker act.
Physical: Health issues under control through medication or diet. Ambulatory or independent in use of wheelchair/walker. May need staff supervision to self-administer medications
Other: This level will be used to provide residential habilitation training for individuals residing in a non-APD licensed facility that is responsible for basic supervision and care, such as an Assisted Living Facility (ALF). Assisted Living Facilities may provide a higher level of support if approved by the Agency.
Minimal
Functional: May require consistent verbal and physical help to complete self care/daily living tasks, including physical assistance and mealtime intervention to eat safely, may require mealtime interventions and/or devices, requires scheduled toileting or use of incontinent briefs. Walks independently or independently uses a manual or power wheelchair. May require assistance to change positions. Needs physical assistance of one person to transfer to change positions.
Behavioral: May exhibit behaviors that require formal and informal intervention; requires frequent prompts, instruction or redirection, some environmental modifications or restrictions on movement may be necessary.
Physical: If individual has seizures, no interference with functional activities; may require medication for bowel elimination, may require a special diet, and may require staff supervision to self-administer medications.
Moderate
Functional: Requires substantial prompting and/or physical assistance to perform self-care/daily living activities. May be totally dependent on staff for dressing/bathing. May require mealtime intervention and/or devices OR receives all nutrition through a gastrostomy or jejunostomy tube. Incontinent of bowel or bladder. May require scheduled toileting or use of incontinent briefs. Independently uses a powered wheelchair, may need assistance with a manual chair. May require assistance to change positions. Disability prevents sitting in an upright position, has limited positioning options. Needs physical assistance of one person to transfer or to change position.
Behavioral: May exhibit behaviors that require frequent planned, informal and formal interventions. Assistance from others may be necessary to redirect the recipient. May require psychotropic medication for control of behavior. Self-injury or aggression towards others or property results in broken skin, major bruising/swelling or significant tissue damage requiring physician/nurse attention. May have threatened suicide in past 12 months. May have required use of reactive strategies 5 or more times per month in last 12 months. May routinely wear protective equipment to prevent injury from self-abusive behavior.
Physical: May have seizures that interfere with functional activities; receives 2 or more medications to control seizures. May have experienced a pressure sore requiring medical attention in the past 6 months. May require medication and daily management, including enemas, for bowel elimination. May be nutritionally at risk and require a physician/dietitian prescribed special diet.

<p>Extensive 1</p>
<p>Functional: Totally dependent on staff for self-care/daily living activities; Disability prevents sitting in an upright position, has limited positioning options. Requires two person lift or lifting equipment to transfer. Independently uses a powered wheelchair, needs assistance with a manual chair. Requires daily monitoring and frequent hands-on assistance to stay healthy. Health issues result in inability to attend outside programs 5-10 days a month; health condition is unstable or becoming progressively worse.</p>
<p>Behavioral: Frequent planned, informal or formal interventions necessary. Assistance from others may be necessary to redirect the recipient. Requires psychotropic medication for control of behavior. Use of physical/mechanical restraint. Self-injury or aggression towards others or property results in significant tissue damage, scarring, damage to bones that requiring physician attention. May have attempted suicide in past 12 months. May have required the use of reactive strategies 5 or more times per month in last 12 months. May routinely wear protective equipment to prevent injury from self abusive behavior at least 12 hours per day. Has received emergency medication to control behavior in last 12 months. May meet criteria of Intensive Behavioral Residential Habilitation.</p>
<p>Physical: May have uncontrolled seizures that have required hospital or emergency room intervention during past 12 months; receives medications to control seizures. May have been hospitalized for medication toxicity in past 12 months. May have experienced a pressure sore requiring recurrent medical attention or hospitalization in the past 6 months. May require medication and daily management, including enemas, for bowel elimination. May have been hospitalized for impaction in last 12 months. May be at high nutritional risk and requires intensive nutritional intervention. Has a condition that requires physician prescribed procedures (Cannot be delegated to a non-licensed staff.).</p>
<p>Other: If the recipient's primary need is to receive visual supervision based on a documented history of inappropriate sexual behavior or sexually provocative behavior, assignment to this level is appropriate.</p>
<p>Extensive 2</p>
<p>Functional: Requires total physical assistance in self-care, daily living activities. May require mealtime interventions and/or devices OR receives all nutrition through a gastrostomy or jejunostomy tube. Incontinent of bowel or bladder. May require scheduled toileting or use of incontinent briefs. May have indwelling catheter or colostomy managed by staff. Disability prevents sitting in an upright position, has limited positioning options. Requires two person lift or lifting equipment to transfer. Totally dependent on others to stay healthy. Health issues result in inability to consistently attend outside programs; health condition is unstable or becoming progressively worse.</p>
<p>Behavioral: Frequent planned, formal interventions necessary. Assistance from others necessary to redirect recipient. Receives multiple psychotropic medications for control of behavior, possibly frequent medication changes. Use of physical/mechanical restraint. Meets the criteria of Intensive Behavioral Residential Habilitation.</p>
<p>Physical: Self-injury or aggression towards others or property results in significant tissue damage, scarring, damage to bones requiring physician attention. May have attempted suicide in past 12 months. May have engaged in sexual predatory behavior in the past 12 months. May have been restrained 5 or more times per month in last 12 months. May routinely wear protective equipment to control self abuse at least 12 hours per day. Receives 2 or more medications to control behaviors that have been changed in the last year; is still unstable or showing side effects of the medications. Has received emergency medication to control behavior 4 or more times in last 12 months. May have uncontrolled seizures that have required hospital or emergency room intervention during past 12 months; receives 2 medications to control seizures that have been changed in the past 12 months. May have been hospitalized for medication toxicity in past 12 months. May have experienced a pressure sore requiring recurrent medical attention or hospitalization in the past 6 months. May require medication and daily management, including enemas, for bowel elimination. May have been hospitalized for impaction in the last 12 months. May be at high nutritional risk and requires intensive nutritional intervention. Has a condition that requires physician prescribed procedures (Cannot be delegated to a non-licensed staff.). Requires 4 or more physician visits per month; may have been admitted to the hospital through emergency room visit; may have been admitted to ICU.</p>
<p>Other: If the recipient's primary support need is to receive visual supervision due to a history of engagement in sexual predatory behavior or sexual aggression and the recipient is currently identified as having active predatory tendencies by the Area Certified Behavior Analyst, this support level is appropriate.</p>

IB Matrix

Scoring Level	Behavior Freq.	Behavioral Impact	Medical conditions	Behavioral Prosthetics	Staffing Ratio/ Level of Supervision	Procedures Per Behavioral Occurrence	Day Activity
VI	≥120 X per month	<ol style="list-style-type: none"> 1. Physical aggression to self with tissue damage requiring emergency medical care or hospitalization 2. Physical aggression to others with tissue damage requiring emergency medical care or hospitalization 3. Police involvement with arrest or detainment/Baker act detainment 4. Property destruction ≥ \$1000 5. Elopement/Wandering, no specific location, secured/alarmed environment to prevent 6. History of illegal sexual behavior with an occurrence in the past 12 months (includes exhibition of precursor behaviors during probe trials) 7. History of setting a fire with an occurrence in the past 12 months 8. Pica/dangerous eating <16x/month, protective equipment to prevent 	<ol style="list-style-type: none"> 1. Requires medical care by a specialist > 4x per day 2. Requires advanced medical care or hospitalization >1x per month 	<ol style="list-style-type: none"> 1. No items or individuals in area 2. All activities require close supervision 3. Protective equipment to prevent unwanted behavior at all times 4. locked environment 24/7 	<ol style="list-style-type: none"> 1. 2:1 2. Within Arms Reach 	<ol style="list-style-type: none"> 1. Seclusion >61 min. 2. Mechanical restraints >61 min. 3. Manual restraint >30 min. 4. Requires increase in staffing to >3:1 	<ol style="list-style-type: none"> 1. No ADT, Work, School or Other Meaningful Day Activity 2. Resists or refuses to participate unless mandated, requiring additional staff
V	≥30 X per month	<ol style="list-style-type: none"> 1. Bx that has resulted in immediate risk to life of the individual or others 2. Physical aggression to self with tissue damage requiring medical attention greater than first aid 3. Physical aggression to others with tissue damage requiring medical attention greater than first aid 4. Police involvement without arrest or detainment 5. Property destruction < \$1000 6. Elopement/Wandering, no specific location, restricted environment to prevent 7. History of illegal sexual behavior 8. History of setting a fire 9. Pica/Dangerous eating <4x/Month protective equipment to prevent 	<ol style="list-style-type: none"> 1. Medical attention by licensed professional >1x per day 	<ol style="list-style-type: none"> 1. Limited proximity to others 2. Protective equipment to prevent unwanted behavior during specific times/activities 3. Locked environment at night 	<ol style="list-style-type: none"> 1. 1:1 ≥ 6 hrs 2. Within Line of Sight 	<ol style="list-style-type: none"> 1. Seclusion ≤ 61 min 2. Mechanical restraints ≤61 min. 3. Manual restraint ≤30 min. 4. Behavioral Protective Equipment 5. Dietary Manipulations 6. Requires increase in staffing to ≤ 3:1 	<ol style="list-style-type: none"> 1. Has ADT, Work, School or Other Meaningful Day Activity (2 hrs./day) 2. Community day activity regularly canceled or interrupted due to client behavior

IV	≥16 x per month	<ol style="list-style-type: none"> 1. Physical aggression to self with tissue damage requiring first aid only 2. Physical aggression to others with tissue damage requiring first aid only 3. Property destruction ≤\$750 4. Elopement/Wandering, no specific location, enhanced supervision 5. Pica/Dangerous eating <4x/Month, restricted environment to prevent 6. Public masturbation 	<ol style="list-style-type: none"> 1. Medical attention by licensed professional >4x per week 2. Requires protective equipment due to medical condition 	<ol style="list-style-type: none"> 1. Restricted access to all items 2. ADT and ADL's only with close supervision 3. Alarmed environment 	<ol style="list-style-type: none"> 1. 1:1 < 6 hrs 2. Within Same Room or Area 	<ol style="list-style-type: none"> 1. Seclusion ≤45 min. 2. Mechanical restraints ≤45 min. 3. Manual restraint ≤20 min. 4. Requires increase in staffing to 2:1 5. Requires staff to clean/sanitize environment due to smearing of bodily fluids 6. Contingent effort ≤10 min. 	<ol style="list-style-type: none"> 1. Has ADT, Work, School or Other Meaningful Day Activity (3 hrs./day) 2. Requires additional staffing to participate
III	≥4x per month	<ol style="list-style-type: none"> 1. Physical aggression to self with tissue damage requiring no medical care 2. Physical aggression to others with tissue damage requiring no medical care 3. Property destruction ≤\$500 4. Elopement/Wandering, no specific location, no community safety skills 5. Pica/Dangerous eating <4x/Month, enhanced supervision to prevent 6. Smearing of feces and other bodily fluids in public areas 7. Disrobing in public 	<ol style="list-style-type: none"> 1. Medical attention by licensed professional >1x per week 	<ol style="list-style-type: none"> 1. Restricted access to specific items 2. Living/work environment modified to prevent damage due to behavior 	<ol style="list-style-type: none"> 1. 1:2 ≥ 6 hrs 2. 5 min. Room Checks 	<ol style="list-style-type: none"> 1. Seclusion ≤30 min. 2. Mechanical restraints ≤30 min. 3. Manual restraint ≤15 min. 4. Requires increase in staffing to 1:1 5. Requires staff to assist individual in changing clothes due to destruction/soiling 	<ol style="list-style-type: none"> Has ADT, Work, School or Other Meaningful Day Activity (4 hrs./day)
II	≥3xs/month	<ol style="list-style-type: none"> 1. Physical aggression to self with no tissue damage 2. Physical aggression to others with no tissue damage 3. Property destruction ≤\$250 4. Elopement/Wandering, going to a specific location, no community safety skills 5. Pica/Dangerous eating <2x/month, enhanced supervision to prevent 	<ol style="list-style-type: none"> 1. Medical attention by licensed professional >2x per month 	<ol style="list-style-type: none"> 1. Private room 2. Regular environmental sweeps to remove specific items. 	<ol style="list-style-type: none"> 1. 1:2 < 6 hrs 2. 15 min. Room Checks 	<ol style="list-style-type: none"> 1. Time Out ≤15 min. 2. Mechanical restraints ≤15 min. 3. Manual restraint ≤10 min. 4. Requires staff to intervene with peers to protect person from harm 	<ol style="list-style-type: none"> Has ADT, Work, School or Other Meaningful Day Activity (5 hrs./day)
I	≥2x/month	<ol style="list-style-type: none"> 1. Property destruction ≤\$100 2. Elopement/Wandering, going to a specific location, has community safety skills 3. Pica/Dangerous eating <2x/month, no special accommodations 	<ol style="list-style-type: none"> 1. Medical care by trained staff ≤ 2x per month 	<ol style="list-style-type: none"> 1. Requires staff initiated verbal or visual prompts to maintain behavior 	<ol style="list-style-type: none"> 1. 1:3 2. Occasional Room checks, >q30 min. 	<ol style="list-style-type: none"> 1. Time Out ≤10 min 2. Mechanical restraints ≤5 min 3. Manual restraint ≤5 min 4. Response Cost 	<ol style="list-style-type: none"> Has ADT, Work, School or Other Meaningful Day Activity (6 hrs./day)