

## I/DD Employment Supports Acuity Tool

1. Name: _____ Date: _____	2. Support Level: <b>Low</b> <b>Med</b> <b>High</b> Point Total: <b>9-22</b> <b>23-36</b> <b>37+</b>
Con ID: _____	
3. Supports Coordinator: _____	4. Support Level Score: _____

Instructions: Please circle the most accurate responses in the columns below. Please total the responses and enter this score in box 4. Then circle the corresponding low, medium or high category in box 2. Remember that for questions 5-9 a score of "Hi" on one or more questions will automatically result in a Support Level of "High" being indicated/circled in box 2.

Columns  
I.    II.    III.

<b>Circle One</b>			
<b>1</b>	<b>2</b>	<b>3</b>	<b>1. Sensory Functioning (Vision / Hearing)</b> No Sensory Impairment. Impairment is corrected with glasses or hearing aid. Impairment is not correctable.
<b>1</b>	<b>5</b>	<b>9</b>	<b>2. Language and Communication</b> Able to use intelligible speech to communicate; usually in sentences. Communicates verbally using a few words and/or short phrases. Communicates using an augmentive system or has no formal system of communication.
<b>1</b>	<b>2</b>	<b>3</b>	<b>3. Ability to Read and Write</b> Reads and writes or uses alternative system (e.g. Braille, large print). Reads and writes single words or simple phrases used in daily activities. Does not read or write.
<b>1</b>	<b>2</b>	<b>3</b>	<b>4. Community Travel</b> Can drive or use public transportation without training or assistance. Accesses community with training and/or some assistance. Always requires assistance/supervision from others to access community.
<b>A rating in the third column for factors listed below, automatically results in a Support Level rating of Hi</b>			
<b>1</b>	<b>5</b>	<b>Hi</b>	<b>5. Medical</b> No current medical needs, or manages current medical needs without assistance. Current medical needs can be managed with intermittent assistance by non-medical staff. Is Medically fragile and requires staff available at all times.
<b>1</b>	<b>5</b>	<b>Hi</b>	<b>6. Mobility and Personal Care</b> Ambulatory without assistance. Ambulatory with adaptive aides/occasional staff help. Or, requires regular help w/personal care. Unable to ambulate independently and requires continuous assistance.
<b>1</b>	<b>5</b>	<b>Hi</b>	<b>7. Skills Development</b> Can master complex skills independently (e.g. 10 or more steps). Can master tasks and routines with intensive training. Currently requires assistance to complete majority of tasks.
<b>1</b>	<b>2</b>	<b>Hi</b>	<b>8. Adaptive Devices</b> Does not require any job adaptations. Able to work independently with adaptive equipment (e.g. jigs, etc.). Unable to work independently & requires personal assistance to complete majority of tasks.
<b>1</b>	<b>12</b>	<b>Hi</b>	<b>9. Behavioral Support</b> Able to work independently. Any interfering behaviors are redirectable by employer's staff. Able to work independently with intermittent intervention from CMH network staff. Unable to work independently without regular intervention by CMH network staff.
			<b>Support Level Total</b>