

Care Plan

14-15 Years Old

Plan for staying healthy and preventing secondary disabilities. Address Sexuality.

Health Condition Management: ____ • _____

Plan for access to primary & specialty care, pediatric to adult. Review public & private insurance options.

Health Insurance/ Medical Care: ____ • _____

Plan for increasing functional independence. Review need for adaptive equipment, technology, OT, PT, etc.

Functional Independence: ____ • _____

Plan for high school. Review IEP or 504 plan.

HighSchool/Plans: ____ • _____

Plan for career/vocation & education/training needed. Review resources such as VR, SSI, PASS programs.

Post Secondary Plans: ____ • _____

Plan for volunteer, part or full-time employment. Review VR & SSI work incentives.

Work Experience: ____ • _____

Plan for independent living. Review transportation, need for attendant care, housing options, need to get on waiting list for services.

Independent Living: ____ • _____

Plan for participation in social activity, peer support, etc.

Community Inclusion: ____ • _____

16 Years Old

Health Condition Management: ____ • _____

Health Insurance/ Medical Care: ____ • _____

Functional Independence: ____ • _____

High School Goals/ Plans: ____ • _____

Post Secondary Plans: ____ • _____

Work Experience: ____ • _____

Independent Living: ____ • _____

Community Inclusion: ____ • _____

