

ADOLESCENT TRANSITION PROFILE







NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_ DOB: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

**Underline items achieved. Circle items needed. Put Priority Numbers in Left hand Box**

**Date Profile Completed:** \_\_\_\_\_ **Transition Coordinator:** \_\_\_\_\_

**Date Profile Revised:** \_\_\_\_\_

 <p>EDUCATION</p>	<p><b>ELIGIBILITY:</b></p> <p><b>Current Placement:</b></p> <p><b>IEP/504:</b></p>	<p><b>ASSESSMENT:</b></p> <p><b>Assessment Resources:</b></p>	<p><b>STUDENT GOALS:</b></p> <p>HS Graduation Student/Faculty Vocational School Community College College GED Other:</p>	<p><b>TRANSITION TEAM:</b></p> <p>Student Family School Staff Adult Agencies BVR Advocate Case Manager</p>	<p><b>TRANSITION PLAN FOCUS:</b></p> <p>Student's vision Academic course Work/Career College Prep Self-determination Adult Living Community</p>
 <p>EMPLOYMENT</p>	<p><b>VOCATIONAL ASSESSMENT:</b></p> <p>Interest Survey Aptitude Battery Strengths Preferences &amp; needs Community based</p>	<p><b>HOME:</b></p> <p>Chores; Hobbies Allowance Work habits; Talents</p> <p><b>VOLUNTEER:</b></p> <p>Community; School</p>	<p><b>SCHOOL:</b></p> <p>Career Planning School work-study Community work-experience</p> <p>Employability Skills Assistive devices</p>	<p><b>WORK:</b></p> <p>Job Shadowing Summer job Part-time job Vocational training BVR/BSVI Accommodations Other:</p>	<p><b>SUPPORT:</b></p> <p>Job Coach; Family Transportation Follow Along; MRDD Personal Assistant Level of Support:</p>
 <p>HEALTH CARE</p>	<p><b>MEDICAL STATUS:</b></p> <p><b>Functional Impact:</b></p> <p><b>Assistive Devices:</b></p>	<p><b>ADULT HEALTH CARE PROVIDERS:</b></p> <p>Primary Care Mental Health Specialty care Dentist -Therapies Transfer Plan</p>	<p><b>HEALTH MANAGEMENT:</b></p> <p>Has information re disability Understands health needs Shares medical facts Administer medication</p>	<p><b>WELLNESS:</b></p> <p>Information Fitness Program Stress management Recreation Conflict management Nutrition</p>	<p><b>DEVELOPMENT OF SKILLS:</b></p> <p>Self-determination: health decisions Sexuality/ Parenting Communication with providers Informed Consent</p>
 <p>LONG TERM HOME</p>	<p><b>CURRENT:</b></p> <p>Family Foster home Apartment Shelter/homeless Nursing Home</p>	<p><b>GOAL:</b></p> <p>Family; Apartment College Residence Group Home Supported Living Home Ownership</p>	<p><b>SUPPORTS:</b></p> <p>Training Funding Personal Assistant Home Modification Assistive Equipment Subsidized Housing</p>	<p><b>CHOICES:</b></p> <p>location roommate size cost pet</p>	<p><b>SKILLS:</b></p> <p>Assessment Training Resources Training focus: self-care; home-care; mobility; shopping</p>
 <p>COMMUNITY CONNECTIONS</p>	<p><b>RELATIONSHIPS:</b></p> <p>Family School friends Neighborhood Dating Other:</p>	<p><b>SUPPORTS:</b></p> <p>Personal assistant Family; Mentor Funding Neighbors Church</p>	<p><b>ACTIVITIES:</b></p> <p>Club Recreation Sports Church Hobbies</p>	<p><b>RESOURCES:</b></p> <p>Case Manager Driver's License Transportation Spending money</p>	<p><b>SKILLS:</b></p> <p>Social Skills Phone; E-mail Answering machine Daytimer Calendar; Clock</p>
 <p>INCOME &amp; GOVERNMENT SUPPORT</p>	<p><b>HEALTH CARE INSURANCE:</b></p> <p>Medical:</p> <p>Dental:</p>	<p><b>FUNDING:</b></p> <p>SSI/SSDI Food Stamps Section 8/HUD Family Resources [ARC]</p>	<p><b>SUPPORT:</b></p> <p>Guardian Representative Payee Trustee Other:</p>	<p><b>WORK INCENTIVES:</b></p> <p>PASS IRWE 1619A/B; SEIE Individual Service Contract [MR/DD] SS Subsidy</p>	<p><b>SKILLS:</b></p> <p>Budgeting Banking Personal Security Record Keeping Reporting</p>

This profile is a user friendly, at a glance, assessment of what a student has already accomplished for transition and what still needs to be done. It can be used for initial and updated assessment. It also is a prompt to review the wide range of adult life domains. It can be used with families and youth or as a joint planning tool with school and professionals.

**Guidelines: Underline what is achieved; circle what is needed**

1<sup>st</sup> Domain: **EDUCATION:**

Box 1: Eligibility: disability or condition; e.g. learning disability; severe asthma; cerebral palsy

*Current Placement*: educational category: e.g., MH (Multiple Handicapped)

*IEP/504*: underline plan name for “yes”

Box 2: Assessment: describe adequacy; e.g. complete; out of date; needs mental health assessment

*Assessment Resources*: e.g. school, CHMC clinic, CCDD

Box 3: Education: goal of student and family

Box 5: Transition Focus: areas addressed in school transition IEP or other agency transition plan

2<sup>nd</sup> Domain: **HEALTH CARE:**

Box 1: Medical Status: chronic health concerns: e.g. obesity; seizures; monitory hearing acuity

Functional Impact: on independent function; e.g. poor stamina for work, needs frequent prompt for ADL

Assistive Equipment: needed to support adult living: e.g. dynavox, power chair; electronic reminder

Box 2: note “Adult” health care resources; can be restricted by insurance type

Box 3: Health Management: includes consumer skills

Box 4: Wellness: resources to maintain good health

Box 5: Skills: life skills; adolescent mastery: often overlooked for youth with disabilities

3<sup>rd</sup> Domain: **EMPLOYMENT:**

Box 1: Vocational Assessment can be done at a disability facility &/or at a community work site

Box 4: Work: *BVR*: State Bureau for Vocational Rehabilitation or Voc Rehab;

*BSVI*: State Bureau of Services for the Visually Impaired

Accommodations: job modifications based on disability/health conditions

Box 5: Level of Independence: amount of help needed for work; e.g. independent; daily job coach; behavior management; memory/task prompts; occasional follow up

4<sup>th</sup> Domain: **COMMUNITY CONNECTIONS:**

Box 2: Supports: *personal assistance*: a staff person or aide to help make social connections

*funding*: for staff, memberships, transportation, etc

Box 3: Activities: used on a regular basis

Box 4: Resources: to help access social life, activities

5<sup>th</sup> Domain: **INCOME AND GOVERNMENT SUPPORTS:**

Box 1: Insurance: after age 18 or when leaves school

Box 2: Funding: publicly supported financial assistance for persons with disabilities; note: income limits apply

*Family Resources*: a family support funding source; varies by state

Box 3: Support: *Guardian*: appointed through Probate Court; *Representative Payee*: receives benefit and other checks; can be person or agency; *Trustee*: of a fund: need to be careful of income eligibility for publicly funded supports and resources..

Box 4: Work Incentives: Federal or state approved strategies to keep financial eligibility for benefits like SSI, SSDI, Medicaid

6<sup>th</sup> Domain: **LONG TERM HOME:**

Box 3: Supports: *Funding*: for home ownership or rent; for staff support; for daily living expenses or utilities, etc.

For further information contact: Career Connections, Lighthouse Youth Services: 513-475-5500.