

# I-CAN

VERSION 6

## Instrument for the Classification & Assessment of Support Needs (I-CAN) Report

<b>Name:</b>	John Baker
<b>Address:</b>	123 Four Street Bakerville NSW 2022
<b>Phone:</b>	0438 123 456
<b>DOB:</b>	01-04-1970
<b>Date of interview:</b>	26-04-2022
<b>Assessor:</b>	Katherine
<b>Participants:</b>	John, Patrick (brother) and Celina (house manager)
<b>Client ID:</b>	ABC1234

### Reason for assessment

John moved into his current Supported Independent Living (SIL) placement 5 years ago. At the time he was living with his brother. His supporters have reported concerns about his mood and that his support needs have changed as a result. An updated assessment was requested to document his current support needs and new goals in preparation for his upcoming NDIS planning meeting.

### About me

John is a cheeky character who likes to joke with others. He enjoys watching Home and Away, listening to country music, going to concerts at the local club, riding his bike and swimming at the town pool. On weekends he likes to visit his older brother Patrick who lives on a few acres nearby. They like to go horse-riding together and John likes to help mow the lawn. Sometimes his brother takes him away camping or to events like the Tamworth Country Music Festival.

### Disabilities

Down Syndrome, Intellectual Disability (source: Letter from Dr Diva 01/01/2011)

### Medical conditions

Depression (source: Letter from Dr Pharr 02/02/2022)

### Current life situations

John lives in a SIL placement with 3 other housemates. The house is run by A+ Ability Services. The house is staffed 24/7 with an active night shift. John attends a Community Participation Program with Life Choices 5 days a week from 9am-3pm. John visits his brother Patrick roughly every second weekend. John was recently diagnosed with depression and has just started taking medication for this. He is well supported by his team of supporters from A+ Ability Services and Life Choices, his NDIS therapy team and relevant medical professionals.

### I can contribute

John can help to prepare dinner when it is his turn to cook - he makes the best curried sausages! He can pack his lunch to take to Life Choices. When he visits his brother Patrick he loves to feed the horses and mow the lawn.

### Long term goals, dreams & aspirations

John would like to explore opportunities for volunteer or paid work that build on his interest in horses and gardening. John would like more opportunities to explore new activities of his choosing.

### Support network

John is supported by A+ Ability Services and Life Choices. Between these 2 services he has access to support workers 24 hours a day, 7 days a week. He spends every second weekend with his brother. He also has a team of medical and NDIS allied health professionals who work with him to build his independence and support him to achieve his goals.

### Assessment observations

John actively participated in the I-CAN assessment with his brother Patrick and house manager Celina.

## Results

## Statistical summary

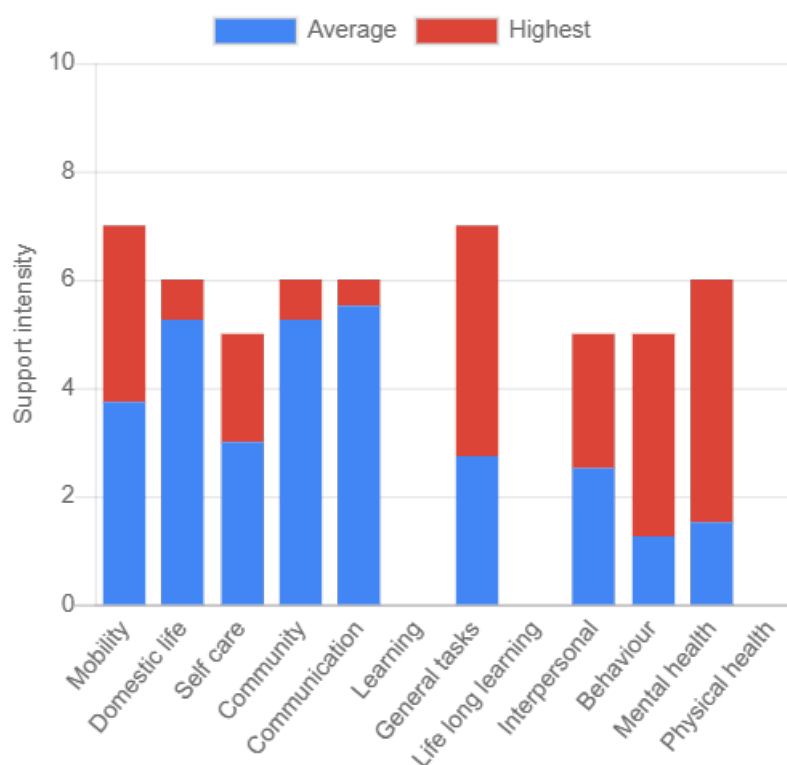


Figure 1. Highest and average support intensity

## Rating scales

## Frequency of support

5 Continuously  
4 Frequently  
3 Daily  
2 Weekly  
1 Occasionally  
0 Never

## Level of support

5 Pervasive  
4 Extensive  
3 Moderate  
2 Minor  
1 Managed  
0 Independent

## Combined support intensity

10 Continuous/ Pervasive  
8 Frequent/ Extensive  
6 Daily/ Moderate  
4 Weekly/ Minor  
2 Occasional/ Managed  
0 No support

Questions in the I-CAN are rated using two 0-5 point scales. The Frequency of Support scale asks how often support is needed. The Level of Support scale asks how much support is needed. These two scales are added to give a 0-10 Combined Support Intensity scale. Figure 1 shows the average support intensity within each domain in blue. The highest support intensity gained on any item is also displayed in red.

## Support needs breakdown- activities &amp; participation

## Mobility

## Transfers &amp; positioning:

3. Daily

1. Managed

John can independently transfer from one surface to another. In the bathroom he uses a grab rail to transfer on/off the toilet.

## Carrying, moving &amp; handling objects:

2. Weekly

2. Minor

John can independently carry items such as the bag he takes to his community participation program. He can experience difficulty with opening jars and some packaging. When this happens a supporter will help to loosen the lid or open the item.

## Walking &amp; moving:

0. Never

0. Independent

John can independently mobilise around the home and in the community.

## Transport:

3. Daily

4. Extensive

John accesses the community in the A+ Ability Services van. His supporters at A+ Ability Services drive the van and arrange the transport for John to access the community, his community participation program and any appointments.

**Domestic life**

<b>Shopping:</b>	<b>2. Weekly</b>	<b>3. Moderate</b>
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John likes to go shopping for personal items. His supporters help him to write a list before they go shopping. With verbal prompting he can select the correct items from the shelf.

<b>Cooking:</b>	<b>3. Daily</b>	<b>3. Moderate</b>
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John likes to help cook. There is a weekly meal plan displayed on the fridge and a roster that tells John the day of the week that he gets to help. For recipes that he has cooked previously John can get the items he needs out of the fridge or pantry. John can peel and chop items like potatoes and carrots with verbal prompting. He can stir items on the cooktop with supervision and prompting. All other food preparation tasks are completed on his behalf. On week days John makes a sandwich to take to his community participation program. His supporters lay out the ingredient options and provide verbal prompting and physical assistance as required.

<b>Cleaning &amp; domestic tasks:</b>	<b>2. Weekly</b>	<b>3. Moderate</b>
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John can sort his washing and place it in the washing machine with verbal prompting. His supporters select the correct wash cycle and let John know when the load has finished. John can hang the washing out, bring it in, fold it and put it away with prompting from his supporters.

<b>Household maintenance</b>	<b>1. Occasionally</b>	<b>4. Extensive</b>
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All household maintenance tasks are completed on John's behalf.

<b>Domestic life goal:</b>	<b>1. Occasionally</b>	<b>4. Extensive</b>
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**Start Date:**    **Review Date:**

John likes to mow the lawn when he visits his brother. He would like to assist with mowing the lawn at his own house. Celina will need to complete a risk assessment and speak to the Service Manager about how to support John to achieve this goal. Patrick will discuss opportunities for increased 1:1 support for John to achieve his goals at his upcoming NDIS planning meeting.

**Self care**

<b>Eating &amp; drinking:</b>	<b>3. Daily</b>	<b>2. Minor</b>
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John can feed himself. He uses built up cutlery and always drinks from a mug. He will eat quickly and needs to be reminded to slow down. He has a current mealtime management plan which was developed by his Speech Pathologist.

<b>Personal care</b>	<b>3. Daily</b>	<b>1. Managed</b>
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John can shower himself and apply moisturiser. He has a visual aid in the bathroom to remind him of each of the steps involved.

<b>Toileting</b>	<b>0. Never</b>	<b>0. Independent</b>
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John is continent of urine and faeces. He can clean himself after opening his bowels.

<b>Dressing</b>	<b>1. Occasionally</b>	<b>2. Minor</b>
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John can independently dress himself. He likes to choose his own clothes. He will often choose thongs and shorts in winter but will happily change into more weather appropriate clothing when his supporters remind him that it is going to be a cold day.

**Community, social & civic life**

<b>Money &amp; economic life:</b>	<b>2. Weekly</b>	<b>4. Extensive</b>
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John can use his debit card to "tap and go" for purchases under \$100. His supporters check the amount is correct before he pays. John's brother Patrick is his financial manager and manages all other financial affairs on John's behalf.

<b>Community life:</b>	<b>2. Weekly</b>	<b>3. Moderate</b>
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John attends Life Choices community participation program 5 days a week from 9am-3pm where he participates in group activities. His supporters report that he enjoys the activities offered including delivering pamphlets and participating in zumba, swimming and bowling. He can participate in these activities with supervision. John was recently diagnosed with depression.

His supporters from Life Choices have reported that his level of engagement has reduced in the last 12 months and there are times that he is requiring reassurance and redirection.

<b>Leisure &amp; recreation:</b>	<b>1. Occasionally</b>	<b>4. Extensive</b>
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John enjoys watching Home and Away and listening to country music. When he is at home he can turn on the television or choose a CD to listen to on his CD player. John also enjoys going to concerts at the local club. He has 1:1 time once a fortnight with his key worker and they often enjoy a meal and concert together. John has a modified bike from Freedom Wheels which he likes to ride on the local river track.

<b>Advocacy:</b>	<b>1. Occasionally</b>	<b>4. Extensive</b>
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John's brother Patrick is his best advocate. Patrick advocates on John's behalf when required.

<b>Community, social &amp; civic life goal:</b>	<b>2. Weekly</b>	<b>4. Extensive</b>
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**Start Date:**    **Review Date:**

John would like to have more variety in the activities he participates in and more opportunities to do activities that he chooses. John's Speech Pathologist recently facilitated a conversation about his interests using Talking Mats and John indicated that he likes horses, gardening and music; activities that are not currently available to him. His ability to participate individually in a broader range of activities is currently limited by the staffing ratios funded in his NDIS plan. Patrick will talk to the NDIS planner about increasing John's 1:1 supports and John's service providers about offering new choices in his programs.

## Communication

<b>Receiving basic communication:</b>	<b>3. Daily</b>	<b>2. Minor</b>
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John can understand his communication partners when they talk to him using simple language and key word sign. There are a number of visual aides used within his home and community participation program including a 'who is here today?' board and a visual schedule

<b>Expressing basic communication:</b>	<b>3. Daily</b>	<b>2. Minor</b>
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John can communicate with others using single words and short phrases. Supporters who know him well use contextual cues to understand him. When his supporters cannot understand him or don't know what he is talking about they will ask him to say it again or show them what he is talking about.

<b>Expressing Feelings and Emotions:</b>	<b>3. Daily</b>	<b>3. Moderate</b>
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John communicates that he is happy through smiling and laughing. He will laugh and joke with others. His emotions are constantly fluctuating at the moment and he can be difficult to understand when he is upset. When he is distressed or upset, his supporters will comfort him and redirect him to a preferred activity.

<b>Conversation &amp; complex communication:</b>	<b>3. Daily</b>	<b>3. Moderate</b>
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John has a photo album full of mementoes and photos from activities he has participated in with prompts about each item to guide the interaction with a communication partner. This 'chat book' has been implemented by his Speech Pathologist and helps John to engage in conversations with others. John's supporters keep the chat book updated and he is encouraged to share it with Patrick and when he returns from a weekend at Patrick's house. John's supporters report that in the last 12 months he has been less likely to initiate communication with others. His Speech Pathologist reported that this may be linked to his recent diagnosis of depression and has encouraged his supporters to continue to update his chat book and engage with John even if this involves increased prompting.

<b>Communication goal:</b>	<b>1. Occasionally</b>	<b>4. Extensive</b>
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**Start Date:**    **Review Date:**

John would like to access a Speech Pathology review. His needs have changed in the last 12 months and he has been diagnosed with depression.

## General tasks & demands

<b>Daily routines:</b>	<b>0. Never</b>	<b>Not Applicable</b>
John can follow his visual schedule and showering routine with verbal prompting. This has been scored under the relevant personal care and communication domains.		
<b>Medication management:</b>	<b>3. Daily</b>	<b>4. Extensive</b>
John's supporters at A+ Ability Services organise and administer John's medication. He takes his medication with breakfast and dinner.		
<b>Safety &amp; risk of abuse:</b>	<b>2. Weekly</b>	<b>2. Minor</b>
John's supporters provide him with supervision in the community because he requires assistance with road safety.		
<b>Life long learning</b>		
<b>Life long learning goal:</b>	<b>2. Weekly</b>	<b>3. Moderate</b>

**Start Date:    Review Date:**

John would like to explore opportunities for volunteer or paid work that build on his interests in horses and gardening. Peter and Celina will discuss opportunities for increasing John's 1:1 supports with his NDIS planner during his upcoming plan review meeting to support John to achieve this goal.

### Interpersonal interactions & relationships

<b>Social skills:</b>	<b>3. Daily</b>	<b>2. Minor</b>
John can follow general social courtesies such as greeting others, taking turns and waiting in line with verbal prompting.		
<b>Seek assistance &amp; cooperate:</b>	<b>3. Daily</b>	<b>2. Minor</b>

John can ask for help. His supporters have reported that over the last 12 months he has been asking for help less frequently. When his supporters don't understand what he needs help with they will ask for more information or for him to show them. He cooperates with others including his co-residents and group members at Life Choices most of the time.

### Behaviour of concern

John has an interim behaviour support plan. It is currently being updated by his Behaviour Support Practitioner.

<b>Disruptive or offensive behaviour:</b>	<b>2. Weekly</b>	<b>3. Moderate</b>
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John is jealous of his co-residents when they are given more attention than him (e.g. when a resident is taken to an appointment). When this happens he may go to his room and slam the door. His supporters will check in on him, reassure him and support him to join with the other residents.

### Mental & emotional health

John was recently diagnosed with depression. Over the 12-18 months prior, the people who know him well reported that he was increasingly becoming withdrawn and upset. He was supported to access a Mental Health Intellectual Disability Psychiatrist who made the diagnosis.

<b>Mood:</b>	<b>3. Daily</b>	<b>3. Moderate</b>
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John's mood will fluctuate throughout the day. He may become withdrawn or upset. When this happens his supporters follow the strategies listed in his interim behaviour support plan. This includes reassuring him and directing him to a preferred activity. John's supporters at both Life Choices and A+ Ability Services have reported that this is happening more often and that it can be hard to provide the right amount of support to John given the staffing ratio.

<b>Mental &amp; emotional health goal:</b>	<b>3. Daily</b>	<b>3. Moderate</b>
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**Start Date:    Review Date:**

John would like to access increased staffing ratios in his SIL and community participation programs to help him to regulate his mood. Current funding for John's supports makes it difficult for staff to support him at times when he is emotionally dysregulated. Celina and A+ Ability Services will provide a proposed roster of care to the NDIS in preparation for John's upcoming NDIS plan review and Patrick will advocate for John's needs at this meeting.

**Mental & emotional health goal:**

**1. Occasionally**

**4. Extensive**

**Start Date:    Review Date:**

John would like to access a Psychologist to support him to develop skills with regulating his mood.

## Physical health

**Skin & related functions:**

**0. Never**

**Not Applicable**

John's skin can become dry and itchy. He can independently apply moisturiser as part of his daily personal care routine when he follows the visual schedule for his personal care routine. This has been scored under the personal care domain.

## Circle of support

**Brother**

**2. Weekly**

John's sees his brother Patrick on weekends. Patrick is his decision maker, financial manager and advocate.

**Supporters**

**3. Daily**

John's supporters from A+ Ability Services assist me to achieve my goals and live my best life every day.

**Medical and allied health professionals**

**1. Occasionally**

John's team of medical and allied health professionals support him to achieve his goals, build his independence and stay healthy.

## Summary and Recommendations

John has a good team around him, with his brother, SIL provider, community participation program and therapy/health team. He is settled in his current accommodation however his brother and staff have recently noticed a change in his mood and needing increasing support from staff to reassure him and re-direct him to preferred activities. John has subsequently been diagnosed with depression by a psychiatrist. John has advised he would like to explore opportunities for volunteer or paid work, as well as try new activities. To achieve his goals John requires a NDIS planning meeting to review his current plan for increased funding for community and 1:1 supports. He would also benefit from a review from a speech pathologist to assist with his communication and social engagement, as well as psychologist input to help with his depression and low mood. Increased supports will help John explore opportunities for volunteer or paid work that build on his interests in horses and gardening and overall engagement. It is also recommended John to have access to increased staffing ratios in his SIL and community participation programs to help regulate his mood and provide support when he is emotionally dysregulated.

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