



Functional Assessment (FA) Document Checklist

Effective June 13, 2023

(Please checkoff what you will be providing and return with documentation)

Primary Disability Diagnosis	Documentation supporting individual’s Intellectual or Developmental Disability diagnosis. Must be signed by a licensed health care provider.
Medical & Psychiatric Diagnoses	Documentation must be signed by a licensed health care provider or from the physician’s portal or on their letter head. <u>Every year</u> this documentation must be provided to SDSI prior to the assessment meeting.
Seizure Diagnosis and tracking	Must be epileptic in nature. Written tracking can be submitted in any form as long as dates are included. History of seizure disorder cannot be marked if the person is not currently taking medication to treat a seizure disorder and has not experienced a seizure in 5 years. Documentation from the physician is required stating type of seizure .
Prescribed Medication	Submit a current list of all daily medications including injections and/or prescribed topical creams. If medications are passed at an agency please provide a copy of the current MAR. If medications are passed at home we can accept evidence of them in a couple different forms. Person or family can present the bottles of medications at the meeting or bring pictures of them. Another option is to have documentation of the medications from the physician (portal/physical). <i>(This does NOT take the place of needing documentation of the diagnosis.)</i>
Special Diet	Submit a copy of the prescribed specialized diet signed by a dietician, nutritionist, or physician and dated within the last two years. This must be a diet the person is adhering to and requires individual staff support.
Individualized Education Plan (IEP) <i>if applicable</i>	Submit a copy if the IEP that is currently in use. Must include BIP if in place at school.
Person Centered Support Plan (PCSP)	Submit a current, signed PCSP .
Behavior Intervention Plan (BIP)/Behavior Support Plan (BSP) <i>If applicable</i>	Submit a copy. In order to capture a BIP on the FA, it must be written and include the 4 required conditions. It may be part of another plan – PCSP or Individual Education Plan (IEP) – but it must contain all 4 conditions. <ol style="list-style-type: none"> 1. Clear definition of the behavior(s). This statement should be very detailed and specific to the person and what behavior(s) is being exhibited. <i>Simply stating a category from the FA does not meet this condition.</i> 2. Clear definition of staff support strategies. This statement should be a comprehensive list of interventions and include, but not be limited to, strategies to prevent the behavior, warning signs, specific supports to be provided when the behavior occurs, and responses to the behavior. 3. Collection of information as to the frequency and severity of behaviors. Behavior tracking methodology is outlined. Must be written and reported daily. 4. Supports are specific to the person. All elements of the plan are detailed and specific to the individual and beyond standard teaching and guidance that is part of quality service provision. <i>Simply stating a prompt or redirection is not specific or beyond typical expectations of program staff.</i>
Behavior Tracking Required	Submit behavior tracking from all providers. Last 12 months of tracking needs to be provided to SDSI. Tracking must include person’s name, date and provider. If missing dates are due to extended circumstances please include dates and reasons for missing tracking. Extenuating circumstances include: Hospitalizations, extended vacations from day/residential providers, camps or time away from paid providers – not to include weekend visits with family or friends. Ensure you are obtaining behavior tracking when someone is switching from one agency to another. All 12 months of data are needed regardless of switching agencies.
Incident Report, <i>if applicable</i>	Submit an incident report demonstrating a physical intervention during the last year