

# North Carolina Support Needs Assessment Profile (NC-SNAP)

## I. Background Information

Consumer's Name: \_\_\_\_\_  
 Social Security No.: \_\_\_\_\_  
 Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: (\_\_\_\_) \_\_\_\_\_  
 County/Area Program: \_\_\_\_\_  
 Case Reviewed by Single Portal Coordinator? Yes No  
 Examiner: \_\_\_\_\_  
 Phone: (\_\_\_\_) \_\_\_\_\_  
 (relationship to consumer: \_\_\_\_\_)  
 Date of Assessment: \_\_\_\_\_

## III. NC-SNAP Profile

- A. After completing all three grids:
- find the level marked for each column on Pages 2 and 3 and circle the corresponding column of the chart below.
  - draw a line connecting the circles in each domain on the chart below.
  - record the **highest** level scored for **each** grid in the appropriate box below.
  - write the **highest** of these three scores in the "Overall Level of Eligible Support" box.
  - calculate the cumulative domain and raw scores and enter these in the spaces below.
  - then, proceed to Page 4, the NC-SNAP Support Summary.

	Daily Living Domain			Health Care Domain			Behavior Domain				
	Superv	Assist	Age	Struct	MD	RN	Allied	Equip	M.H.	Severity	Interven
1	1	1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5	5	5

## II. Checklist Instructions

Using the Domain grids on Pages 2 and 3, start at the top of each column and read down until you locate the level that best describes the consumer's current needs. When you find that level, make an "X" in the box. Then proceed to the next column. Repeat the process for each grid. After completing all three grids, proceed to Section III, the "NC-SNAP Profile" at right.

**Note:** Focus only on this particular consumer's needs. Do not make comparisons to other consumers. Also, do not base your answers solely on what services the consumer is or is not receiving; focus on what supports the consumer truly needs. For example, the consumer may reside in a setting that provides 24-hour staff coverage; consider only whether this level of support is actually needed for the consumer.

Daily Living Supports = \_\_\_\_\_

Health Care Supports = \_\_\_\_\_

Behavioral Supports = \_\_\_\_\_

**Overall Level of Eligible Support = \_\_\_\_\_**

Cumulative Score (add all scores)

- A. Domain Scores (range = 3 to 15) = \_\_\_\_\_  
 (Sum of the highest levels in each domain)
- B. Raw Scores (range = 11 to 46) = \_\_\_\_\_  
 (Sum of all levels in all domains)

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## Daily Living Supports

Level	Supervision	Assistance Needed	Age-Related	Degree of Structure Provided by Others
1	less than 8 hours per day on average	<ul style="list-style-type: none"> <li>No assistance needed in most self-help and daily living areas</li> <li>Minimal assistance needed in some self-help and daily living areas</li> <li>Minimal to complete assistance needed to complete complex skills such as financial planning and health planning</li> </ul>	Adult (16.01 years and above)	<p><b>None or Minimal</b></p> <ul style="list-style-type: none"> <li>Few special activities need to be planned for the person</li> </ul>
2	9-16 hours daily on average	<ul style="list-style-type: none"> <li>No assistance in some self-help, daily living areas</li> <li>Minimal assistance for many skills</li> <li>Complete assistance needed in some basic skills and all complex skills</li> </ul>	Child/Teen (6.01 to 16 years)	<p><b>Moderate to Extreme</b></p> <ul style="list-style-type: none"> <li>Some or all daily activities need to be planned for the person</li> </ul>
3	24 hour (does not require awake person overnight)	<ul style="list-style-type: none"> <li>Partial (hands on assistance) to complete assistance needed in most areas of self-help, daily living, and decision making</li> <li>Cannot complete complex skills</li> </ul>	Young Child (2.01 to 6 years)	<p><b>Intensive</b></p> <ul style="list-style-type: none"> <li>All activities must be planned and initiated for the person</li> </ul>
4	24 hour with awake person overnight	<ul style="list-style-type: none"> <li>Partial to complete assistance is needed in all areas of self-help, daily living, decision making, and complex skills</li> </ul>	Infant (Birth to 2 years)	
5	<b>Extreme Need:</b> 24 hour, awake person trained to meet consumer's particular needs; continuous monitoring	<ul style="list-style-type: none"> <li><b>Extreme Need:</b> All tasks must be done for the consumer, with no participation from the consumer</li> </ul>		

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## Health Care Supports

## Behavioral Supports

Level	Physician Services	Nursing Services	Allied Health Professionals	Equipment Supports	Mental Health Services	Behavioral Severity	Direct Intervention
1	For routine health care only	For routine health care only	Less than weekly	Less than monthly	None or Periodic E.g., counseling, motivation or self-help programs	• None	• None
2	Up to quarterly consultation or treatment for chronic health care need	1 - 3 times per month	Weekly or more	Monthly or more	<b>Consultation</b> E.g., to develop and/or monitor guidelines or reinforcement procedures plus counseling if needed	• Non-tissue damaging -but- • Mildly disruptive	• Intervention necessary using routine techniques (e.g., interruption of behavior and redirection) • May require individualized staffing on a part-time basis
3		Weekly			<b>Consultation by psychologist</b> <ul style="list-style-type: none"> <li>to develop and/or monitor a formal behavior intervention program</li> </ul>	• Tissue damaging -or- • Severely disruptive	• Application of protective devices which may be restraining -or- • Standard preventive intervention techniques
4	More than quarterly for consultation or treatment	Daily			<b>Treatment by psychologist</b> (experienced with life threatening behavior problems) <ul style="list-style-type: none"> <li>comprehensive intervention plan based on analysis, frequent assessment, and structuring of interactions</li> <li>direct oversight of plan by psychologist</li> </ul>	• Life threatening	• Application of contingent restraint -or- • Specialized preventive intervention techniques
5	<b>Extreme Need:</b> Chronic medical condition requires immediate availability and frequent monitoring	<b>Extreme Need:</b> Several times daily or continuous availability			<b>Extreme Need:</b> <b>Treatment by psychology team</b> (with advanced experience with life threatening behavior problems) <ul style="list-style-type: none"> <li>daily contact</li> <li>24 hour on call</li> <li>complex intervention plan providing continuous assessment and refinement</li> </ul>	• <b>Extreme Need:</b> Severity of behavior requires specially controlled environment which prohibits unauthorized leaving	• <b>Extreme Need:</b> Intervention procedures require continuous 24-hour 1:1 or greater staffing

# North Carolina Support Needs Assessment Profile (NC-SNAP)

## IV. NC-SNAP Support Summary

Use this grid to summarize the results of this NC-SNAP. List the support needs that were identified, as well as any services that are currently in place to meet these needs. Indicate "Yes" if there is an unmet need. Also note consumer or family preferences for particular supports. [See example below.] This information should be helpful to the planning team as it prepares to develop the person-centered plan.

**EXAMPLE**

Daily Living Domain: Supervision: 24-hour awake staff	Parents	Aide, 2 hr / wk		Assistive Living Apartment with 24-hour aide
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Needs	Current Natural Supports	Other Current Services	Need Is Unmet	Preferences or Requested Services
<b>Daily Living Domain:</b>				
Supervision:				
Assistance:				
Age-Related:				
Structure:				
<b>Health Care Domain:</b>				
Physician (MD):				
Nursing:				
Allied Prof.:				
Equipment:				
<b>Behavior:</b>				
Mental Health:				
Severity:				
Intervention:				
<b>Other:</b>				