

# Consenting to the SIS™ and Choosing a Respondent

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**Background and purpose:** The Wyoming Department of Health Behavioral Health Division is using a few sections of the Supports Intensity Scale (SIS™) for the supplement assessment tool on the new Comprehensive and Supports Waivers. In responding to questions from guardians and case managers about who to select as a respondent, the Division researched other guidance given by states using the SIS™. As a reminder, we are only using sections of the SIS for a supplemental assessment that we will use *in addition* to the information we already have on the Inventory for Client and Agency Planning (ICAP™). Therefore, multiple respondents are not needed. One will be enough, unless two are requested.

**Request to Consent:** The Division revised the ICAP checklist in order to include consent for the SIS supplemental assessment. Participants and Guardians are asked to sign a consent to comply with the assessment and approve the respondents listed.

The form is located at <http://health.wyo.gov/ddd/cmforms.html>.

**Note on Children 15 and under:** The SIS is being beta tested on this age group. The sections in the beta test are the same as the adult.

Participating in the SIS gives the state more information on a person in areas that the ICAP does not cover well, in order to determine funding for appropriate service needs. If a participant or guardian does not want to have the supplemental assessment conducted, they may submit written notification to the Division to decline the assessment.

## Choosing a Respondent for the Supplemental Assessment

- ✓ Only one (1) respondent is needed but two (2) may be selected.
- ✓ A respondent must be someone who knows you well.
- ✓ The participant or guardian may choose whether or not to be the respondent.
- ✓ The respondent must know the person from direct experience doing day-to-day things.
- ✓ A respondent must know the person for at least 3 months.
- ✓ A respondent can answer detailed questions about the person's need for support.
- ✓ Choose a respondent who accurately knows and can communicate the person's support needs at different times of the day and week, both at home or in a facility or community place, and during quiet and active periods and when the you are alone or with other people.
- ✓ The respondent should be able to answer all questions or another respondent will be contacted.
- ✓ Respondents should be able to contribute knowledge about the full range of protection, advocacy, medical and behavioral supports needed to have an everyday life.
- ✓ A respondent may include a family member, a friend and support staff.
- ✓ The participant or guardian should be comfortable with all of the respondents helping complete the interview with you.

**FMI:** For more information on the Supplemental Assessment and frequently asked questions, please review the Waiver Assessment Brochure posted to the Division's website: <http://health.wyo.gov/ddd/index.html>

Also, to read more on the SIS, go to the AAIDD website: <http://aaid.org/sis#.UijApMbkulG>