

# Project ECHO: Sunflower Health Plan Case Presentation

## Presentation Information

Series: Supports for I/DD

Session: Community Support Waiver

Name: LeeAnna Ross

Date: 3/26/2026



## Patient Information

Gender:  Male  Female

Age: 24

### Race:

- American Indian/Alaskan Native Asian  Native Hawaiian/Pacific Islander  Multi-racial Other  
 Black/African American  White/Caucasian  Prefer not to say

### Ethnicity:

- Hispanic/ Latino  Not Hispanic/Latino  Prefer not to say

## Strengths and Preferences (goals, motivators, preferences, Important to the individual)

### Member enjoys living in the home with his mom and dad.

I was home schooled by my mother.

I am extremely good with numbers.

### What's Important to Me

To live a good life

To be engaged in things I like to do

To be treated like an adult

To participate in my day program so he can keep himself busy.

## Relevant Social and Trauma History (Current living situation, employment status, pertinent legal history, level of education, relationship status, children, support system, etc.)

-Member lives with his parents in home that is owned by parents.

Sometimes I like to punch and hit others for no apparent cause. I have worked with many therapists through the years to figure out why I have this behavior, but no one has figured it out. Many times, I will hit without warning.

-Member is not currently involved with day services due to physical aggression towards mother at drop off and towards workers/staff at previous day service providers.

- recently I became physically aggressive with my PCS worker/ Mom for a couple of weeks. My parents believe this was caused by a medication alteration. However, following my dad calling the behavioral health doctor medication changes were reversed and it was reported my behavior improved.

-TCM not involved due to physical/ verbal aggression by the father directed at the TCM.

-Father gets verbally aggressive when not told information he wants to hear.

I am able to speak; but I don't openly speak to everyone all the time. I will talk but I rarely hold a long conversation with those I don't know. Although I may not speak a lot, I hear and see everything. Just because I am not engaged doesn't mean I am not paying attention. I am able to laugh, shake my head or use other body gestures to indicate my approval or disapproval.

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Relevant Medical History (Diagnosis, conditions, etc.)	Medication Summary (Name, dose, frequency, route)										
<p>Autism spectrum disorder Intellectual disability Epilepsy Sleep disorder</p> <p>Non verbal.. Member will say yes/no when he is comfortable talking.</p>	<p>Multivitamin Magnesium Omega 3 Cap 340 MG Quercetin Tab 250 mg B Complex K2 Plus D3 Zinc 50mg Depakote Tab 1000MG Trazadone 25 mg 2-3 times daily Trazadone 25mg bedtime Melatonin</p>										
Lab Summary (Test, result, date, etc.)	Toxicology Summary (Test, result, date, etc.)										
<p>8/21/25</p> <table border="1" data-bbox="110 646 769 932"> <tr> <td>Triglyceride, Serum Plasma (2571-8)</td> <td>140</td> </tr> <tr> <td>Cholesterol, Serum Plasma (2093-3)</td> <td>181</td> </tr> <tr> <td>Cholesterol in VLDL, Serum Plasma (2091-7)</td> <td>28</td> </tr> <tr> <td>Cholesterol in LDL, Serum Plasma (2089-1)</td> <td>111</td> </tr> <tr> <td>Cholesterol in HDL, Serum Plasma (2085-9)</td> <td>65</td> </tr> </table>	Triglyceride, Serum Plasma (2571-8)	140	Cholesterol, Serum Plasma (2093-3)	181	Cholesterol in VLDL, Serum Plasma (2091-7)	28	Cholesterol in LDL, Serum Plasma (2089-1)	111	Cholesterol in HDL, Serum Plasma (2085-9)	65	<p>none</p>
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Substance Use History (Substance, age of first use, age where use became problematic, longest period of sobriety, how sobriety was achieved, method of use)											
<p>none</p>											
Psychiatric History (Age of first mental health contact, past diagnosis, self-harming behavior, suicide attempts, etc.)											
<p>Click here to insert summary</p>											
Treatment Summary (Form of treatment, engagement in treatment, date entered, voluntary, etc.)											
<p>Member participated in day services at agency previously and was asked to not return due to father’s behavior as a result of the member’s behavior at day services.</p> <p>My TCM and parents are working to get me into an Outpatient Treatment Program.</p> <p>My parents are looking for a new primary physician, DO.</p> <p>My current Behavioral Health doctor has been amazing though he is leaving the practice. My parents have requested a smooth transition to new provider who has same clinical mindset.</p>											
Barriers to Treatment											
<p>Father attempts to control various providers and attempts to put his authority on providers. Providers cancel day services due to this behavior by the father. Father feels “I am the only one that can control my son.”</p> <p>Many times, if I don’t feel like I am getting the attention I want or if I am not the center of attention from everyone, I will and can get physically aggressive.</p> <p>I do not handle change well and my response is aggressive behavior.</p>											