

Attachment A: In-Reach Guidance Checklist

(Pre-Visit)		(Post-Visit)	
Task	Complete	Task	Complete
Letter/fact sheet to residential facility from LME-PIHP with contact information provided.	<input type="checkbox"/>	Gather any additional resources or information/items the individual requested and determine best way to deliver them to individual.	<input type="checkbox"/>
Telephone call with facility owner/administrator to discuss the letter, in-reach, provide names of individuals needing in-reach, obtain names of guardians.	<input type="checkbox"/>	Schedule site visits to supported housing apartments, if needed to assist person in decision-making process.	<input type="checkbox"/>
Letter/fact sheet to individual or guardian as applicable from LME-PIHP with contact information provided.	<input type="checkbox"/>	Schedule site visits to settings where individuals with disabilities are living, working or receiving services in integrated settings if needed to assist person in decision-making process.	<input type="checkbox"/>
As needed, contact with local ombudsman to discuss plans and determine availability for assistance.	<input type="checkbox"/>	For individuals in State hospital facilities, follow-up with transition coordinator and LME-PIHP Hospital Liaison to discuss transition to community setting.	<input type="checkbox"/>
As needed, contact with hospital staff/LME hospital liaison/local DSS Adult Care Home Specialist.	<input type="checkbox"/>	Make referral on the individual's behalf to DHHS Transition Team.	<input type="checkbox"/>
Determine the individuals' capacity for communication and any need for assistance during the face to face meeting (e.g. interpreter, sign-language, etc.)	<input type="checkbox"/>		
Financial status.	<input type="checkbox"/>		
Contact facility or State hospital, individual or guardian as applicable by phone to schedule appointment for visit at a time that is not disruptive to individual or facility schedule.	<input type="checkbox"/>		
Gather information about Medicaid, Special Assistance, services covered under NC State Plan for Medical Assistance, Medicaid 1915(b) (c) Waiver and State funded service array, community options, supported housing, etc.	<input type="checkbox"/>		