

# Individual Form B

## NORTH CAROLINA TRANSITIONS TO COMMUNITY LIVING INFORMED DECISION-MAKING TOOL

**Name &  
Contact  
Information:**

**Guardian Name  
and Contact  
Information  
(if applicable):**

The purpose of this form is to support you in making an informed decision about where you want to live with the help of conversations, experiences and reflections.

This form is to be completed with the support of the In-Reach Specialist/Staff, your guardian (if applicable), and any other person you wish to include. It will remain with you after each conversation or be mailed to you shortly after the visit.

### I. Exercising Your Right to Choose

1. What does it mean to you that you have a right to choose where you live?

2. Do you want to choose where you live? Why or why not?

3. How have you made important choices in the past?  
(examples: ask family and friends, read about choices, try something on a trial basis)

4. How far along are you with making a choice about where you live?

Not thought about it     Thinking about it     Close to choosing

Made a choice    What is the choice?

Date:

5. If you have made a decision, how did you go about making that decision?

6. How can you gain more confidence about this choice?

**Support for Your Decision:**

Who else is involved?

What option do they prefer?

Is the person pressuring you?

How can they support you?

In what ways can the In-Reach Specialist/Staff help you?

What role do you prefer in making the choice?

Share the decision with ...

Decide myself after hearing views of...

Someone else decides...

## II. Exploring Your Options

During your conversation with the In-Reach Specialist, you will be invited to explore your living options. On the chart below, you can list these options, the reasons for choosing or avoiding these options and how much these things matters to you.

	Reasons to Choose this Option (Benefits/Advantages/Pros)	How much it matters to you: 0 ♦ =not at all 5 ♦ =a great deal	Reasons to Avoid this Option (Risks/Disadvantages/Cons)	How much it matters to you: 0 ♦ =not at all 5 ♦ =a great deal
LIVING OPTION #1		Choose an item.		Choose an item.
		Choose an item.		Choose an item.
		Choose an item.		Choose an item.
LIVING OPTION #2  <i>continued next page</i>		Choose an item.		Choose an item.

LIVING OPTION #2 <i>continued</i>		Choose an item.		Choose an item.
		Choose an item.		Choose an item.
LIVING OPTION #3		Choose an item.		Choose an item.
		Choose an item.		Choose an item.
		Choose an item.		Choose an item.

Which option(s) do you prefer?  Option 1     Option 2     Option 3

### III. Reflecting on Your Preferred Option(s):

- Knowledge: Do you know the benefits and risks of each option?  Yes  No
- Values: Are you clear about which benefits and risks matter most to you?  Yes  No
- Support: Do you have enough support and advice to make a choice?  Yes  No
- Certainty: Do you feel sure about the best choice for you?  Yes  No

### IV. Planning Next Steps on Each of Your Preferred Options (as listed on the chart)

1. Knowledge – If you feel you do NOT have enough facts
  - Find out more about the options with the assistance of the In-Reach Specialist/Staff
  - List your questions
  - List where to find the answers (For example, the library, counselors, etc.)
  
2. Values – If you are NOT sure which benefits and risks matter most to you
  - Review the diamonds in the chart to see what matters most to you
  - Find people who know what it is like to experience the benefits and risks
  - Talk to others who have made the decision
  - Visit and learn from others that have transitioned to the community
  - Read stories of what mattered most to others
  - Discuss with others what matters most to you
  
3. Support – IF you feel you do NOT have enough support
  - Discuss your options with a trusted person (example: health professional, counselor, family, friends)
  - Find help to support your choice

If you feel pressure from others to make a specific choice:

- Focus on the views of others who matter most
  - Share your guide with others
  - Ask others to fill in this guide (See where you agree. If you disagree on facts, get more information. If you disagree on what matters most, consider the other person's views. Take turns to listen to what the other person says & what matters most to them)
  - Find a person to help you and get others involved
4. Certainty – If you feel UNSURE about the best choice for you
    - Work through steps two (II) and four (IV), focusing on your dreams and needs.

### NOTES:

Barriers making the decision difficult or unclear:

Strategies that may overcome these barriers:

## V. Summary, Reflections, and Signatures

**Summary** of what was discussed today and next steps, including date of follow-up visit:

### Reflections on In-Reach Visit:

- I was provided information and resources about community services and supports, including supported housing settings not provided by the operator of the adult care home where I live (if applicable).  Yes  No  N/A
- I was offered the opportunity to visit such settings in the community.  Yes  No  N/A
- I was offered the opportunity to meet with other individuals with disabilities who are living, working and receiving services in integrated setting, with their families, and with community providers.  Yes  No  N/A
- I learned that in-reach is provided to individuals living in an adult care home or state psychiatric hospital regularly and not less than on a quarterly basis.  Yes  No  N/A

### Signatures *(Names and Date)*:

Individual: \_\_\_\_\_

Guardian: \_\_\_\_\_

In-Reach Specialist: \_\_\_\_\_

Support/Team Member: \_\_\_\_\_