



Referrals & Goals Module

Key	
Bold Blue Highlight:	Module narrative and directions – assessment level instructions and/or help
Orange:	Items, responses, and other language specifically for participants 0-17 unless otherwise indicated
Green:	Skip patterns
Red:	Additional instructions for assessors – item level help
Purple:	Section level help
Light Blue:	Notes for automation and or configuration
	Denotes a shared question with another module (one way only unless otherwise indicated)
Gray Highlight:	Responses/Text Boxes to pull forward to Assessment Output
Yellow Highlight:	Populate and/or pull forward to the Support Plan from another module or section within the Support Plan itself
Green Highlight:	Populate and/or pull forward from the member record to an assessment or from an assessment to the member record
	Denotes mandatory item
	Item populates forward for Reassessment
Teal Highlight:	Items for Revision and CSR Support Plan Only
<i>Italics:</i>	Items from FASI (CARE) -Department use only

Commented [SL1]: The module document is a reference for automation. If the CCM tool provides a different method to improve user efficiency (e.g. navigation, workflow, layout) this should be reviewed with the Department for optimization within the CCM platform. This document is a not intended to be automated as is.

The purpose of the Referral & Goals module is to document what the participant would like to see happen for maintaining or improving his/her life as a result of services and supports and identify referrals or other follow-ups that will occur. The module should be used to capture all referrals and goals the participant, supports, and/or assessor identify throughout the assessment process.

Notes/Comments are present at the end of each section. These are used to:

1. Document additional information that was discussed or observed during the assessment process and was not adequately captured.
2. Document unique behavioral, cognitive or medical issue that were not captured in the assessment items that may increase the need for supervision or support. This narrative can provide additional justification in the event of a case review

1. REFERRALS IDENTIFIED IN THE ASSESSMENT

1. Identify referrals that the participant and/or their supports may need to improve their health, safety, and other outcomes  Pull all items chosen to the referrals section in the support plan

- ADA assistance
- Addiction counseling (e.g., 12 Step programs)

Commented [SL2]: Within the CCM tool numbering for sections and questions does not need to match document, however format needs to be determined by the Department based on CCM design.

- Adult/Child Protective Services
- Advocacy services
- Aging and Disability Resources for Colorado (ADRC)
- Area Agency on Aging (AAA)
- Arrange for day treatment
- Arrange for/assist in obtaining substance abuse counseling or AA
- Arrange supports needed for mentorship
- Assistance to meet reasonable accommodation needs
- Arrange transportation for appointments with behavioral health providers
- Assistance with and/or training and follow up for management of medical condition at home
- Assistance with financial management or Social Security Benefits
- Assistive Technology
- Behavioral Health Organization (BHO)/ diagnostic assessment by a Mental Health Professional
- Behavioral health set-up needs
- Behavioral support services/therapies, management/education, and/or transition
- Benefits counseling, including information about Medicaid buy-in
- Caregiver Training and Education
- CCB for DD Determination
- Centers for Independent Living (CIL)
- Child care assistance
- Colorado Chapters of The Arc
- Cognitive Diagnostic Evaluation
- Colorado Center for the Blind
- Colorado Cross-Disability Coalition (CCDC)
- Colorado Gerontological Society
- Colorado Quit Line
- Colorado School for the Deaf and Blind
- Colorado Works
- Community education program
- Contact with agency, advocate or peer-advocate to provide additional information or navigation assistance
- Counselor
- County Department of Human Services
- County Offices of Emergency Management (e.g., Training on emergency preparedness, fire safety services)
- County Public Health Department
- Crisis intervention/services or emergency services
- Deaf Blindness Services
- Dentist
- Department of Vocational Rehabilitation (DVR)
- Disability Law Colorado
- Early Intervention Services
- Employment counseling and/or assessment- Non-DVR
- Employment support provider- Non-DVR
- Environmental Accessibility Consultation
- Equipment and Supplies
- Establish new pharmacy or arrange for obtaining medications on a timely basis



- Family counseling
- Family Support Services Program
- Financial assistance
- Functional behavior assessment
- Further testing for evaluation, identify referral: _____
- Gambling Evaluation
- Health/Disease Education Services
- Hearing Loss Resource Center
- Hearing Specialist (audiologist, ENT)
- Home Health
- Home Repair Assistance
- Homecare
- Housekeeping
- Housing assistance
- Independent Living Skills Training (ILST)
- Insurance Assistance/Information
- Interpreter Services
- Legal assistance for financial management (e.g., payee, guardian, trustee, etc.)
- Life Coach
- Meal Prep. Training
- Medical Specialist
- Medicare Part B prevention information
- Medication management
- Mental Health Services
- Neuropsychological Assessment
- Nutritionist/Dietician
- Occupational Therapy
- Ombudsman
- One-Stop Career Centers
- Optometrist/Ophthalmologist
- Personal budget counseling or assistance
- Pest control
- Physical Therapy
- Primary Health Care Provider
- Public Housing Authority
- (Re) Establish dental/oral care relationship
- (Re) Establish new behavioral health provider relationship
- (Re) Establish primary care or specialty care relationships
- Representative Payee
- Respite
- School counsellor
- School Health Services
- Shopping Assistance
- Skilled Nurse or Aide Visits
- Social Security Administration
- Special training for staff
- Specialized training for paid workers

- Speech/Language Therapy
- State Supported Living Services
- Stress management/self-care (e.g., counseling, training, support group)
- Substance abuse or mental health education
- Support to develop emergency, disaster (e.g., FEMA), and/or community plan (e.g., Smart911)
- System navigation assistance
- Telephone Equipment Assistance
- Training for unpaid caregiver(s) concerning behavioral health needs
- Training to increase self-advocacy capabilities
- Transitional Housing
- Transportation assistance
- Transportation for medical, dental or therapy appointments
- Victims' Advocates
- Vision Loss Resource Center
- Vision Specialist (optometrist, ophthalmologist, etc.)
- Volunteer coordination assistance
- Other
Describe Other Referral (1): _____
- Other: _____
Describe Other Referral (2): _____
- Other: _____
Describe Other Referral (3): _____
- None

2. Notes/Comments: Referrals Identified the Assessment

2. PERSONAL GOALS IDENTIFIED IN THE ASSESSMENT

1. Identify Personal Goals from the Assessment ⓘ (This table should pull forward into the Support Plan) ⓘ Shared with Personal Story Module (Bi-Directional)

Goal Number	Description of Goal	Participant Rating of How Meaningful Goal Is	Legally Recognized Representative Rating of How Meaningful Goal Is	How Progress Towards Goal Will be Measured	Timeframe for Achieving Goal (S)= Short term, Accomplish Within Support Plan Year
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					(O)= Long Term, Ongoing Goal (F)= Future Goal
1 (Each goal should have a unique identifier used to pull forward into the Support Plan)	Text Field	<input type="radio"/> Extremely Meaningful <input type="radio"/> Very Meaningful <input type="radio"/> Meaningful <input type="radio"/> Somewhat Meaningful <input type="radio"/> Not Meaningful <input type="radio"/> Unable to respond	<input type="radio"/> Extremely Meaningful <input type="radio"/> Very Meaningful <input type="radio"/> Meaningful <input type="radio"/> Somewhat Meaningful <input type="radio"/> Not Meaningful	Text Field	<input type="checkbox"/> (S)= Short term, Accomplish Within Support Plan Year <input type="checkbox"/> (O)= Long Term, Ongoing Goal <input type="checkbox"/> (F)= Future Goal

Allow for additional goals to be added

2. Notes/Comments: Personal Goals Identified in the Assessment