



State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

DATE: October 5, 2015 CCT GL: #15-007
TO: California Community Transitions Program Director
SUBJECT: Obtaining an In-Home Supportive Services (IHSS) Assessment for CCT Enrollees Prior to Discharge from an Inpatient Facility

PURPOSE

The purpose of this Guidance Letter (GL) is to provide CCT Lead Organizations (LOs) with instructions on working with a county IHSS office to conduct an IHSS assessment for a CCT Enrollee in an inpatient facility.

BACKGROUND

For many CCT Enrollees, securing in-home personal care services is fundamental to ensuring the sustainability and success of their transitions. After living in an inpatient facility for more than 90 consecutive days, some consumers lose varying degrees of their ability to manage activities of daily living (ADL) and reintegrate into social settings without the types of supports provided through IHSS.

IHSS is a Medi-Cal state plan benefit and encompasses services such as, but not limited to: housecleaning, meal preparation, laundry, grocery shopping, personal care, accompaniment to medical appointments, and protective supervision for persons who are mentally impaired.

To ensure IHSS is in place on the day of transition, CCT Transition Coordinators (TCs) must collaborate with the county IHSS office's social worker to conduct the IHSS assessment while the individual is still residing in the facility.

Local county IHSS offices are overseen by the California Department of Social Services (CDSS). CDSS has issued two directives to IHSS Program Managers outlining their

responsibility to conduct preliminary assessments for CCT IHSS applicants being discharged from an inpatient facility prior to their discharge to the community.

- ❖ All-County Letter No.: 02-68, issued on August 30, 2002
- ❖ All-County Information Notice No.: I-43-06, issued on June 08, 2006

Both documents stress the need for, and the responsibility of, each county IHSS office to perform preliminary assessments for identified CCT Enrollees in the inpatient facility prior to discharge.

For more information on the IHSS Program, including: eligibility requirements, county IHSS office contact information, and IHSS enrollment instructions, visit the CDSS website at: <http://www.cdss.ca.gov/agedblinddisabled/PG1296.htm>

GUIDANCE

If a CCT LO has difficulty working with a county IHSS office that are required to conduct an assessment of a CCT Enrollee prior to discharge from the inpatient facility, CCT LOs shall immediately contact their assigned DHCS CCT nurse for assistance.

The CCT LO will need to provide their assigned DHCS CCT nurse with the following information:

1. Enrollee's name
2. Enrollee's CIN
3. Enrollee's current residence (address, city, county, etc.)
4. Enrollee's planned residence (address, city, county, etc.)
5. Name(s) and contact information of the staff with whom the LO has spoken at the county IHSS office, as well as the time(s), date(s), and outcome of the conversation(s)

The CCT Project Director or assigned DHCS CCT nurse will notify the CDSS liaison, who will work with the local county IHSS office to resolve the issue. Upon resolution, the CDSS liaison will provide the CCT Project Director or assigned DHCS CCT nurse with the outcome and the anticipated date of assessment.

RESOURCES

CDSS's current All-County Information Letter - [ACIN I-43-06 \(June 8, 2006\)](#)

List of County Public Authority / IHSS Office Contact Information

QUESTIONS

If you have any questions regarding this Guidance Letter, please contact Karli Holkko at: karli.holkko@dhcs.ca.gov or (916) 322-5253.

Sincerely,

(original signed by)

Rebecca Schupp, Chief
Long-Term Care Division