

State Hospital Screen

Hospital detail

Facility <input type="text"/>	Was GOSH referral made? <input checked="" type="radio"/> Yes <input type="radio"/> No
GOSH Referral date: <input type="text" value="mm/dd/yyyy"/>	Was client approved for GOSH? <input checked="" type="radio"/> Yes <input type="radio"/> No

Client Details

Demographics	<input checked="" type="checkbox"/>
Overview	<input checked="" type="checkbox"/>
Profile	<input checked="" type="checkbox"/>
Contact Details	<input checked="" type="checkbox"/>
Financial	<input checked="" type="checkbox"/>
HIPAA	<input checked="" type="checkbox"/>

Step 1: Once the GOSH referral is accepted by the provider, The LTC CM will send the completed GOSH referral form to DMS. They then will enter the GOSH Supportive Housing Provider (SHP) into the Client's Contact Details in CARE. If Client is in the state psychiatric hospital or local psychiatric unit, you will also add GOSH into the state

Treatment
Supportive Housing (HCS/AAA)

Received in the last 14 days? ☒ Yes ☐ No Need ☒ Yes ☐ No

Provider list

+	Provider	Frequency	
	Agency	PRN (as needed)	

Comments
Client is approved for GOSH services

Treatment
Housing subsidy (HCS/AAA)

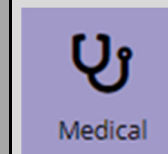
Received in the last 14 days? ☐ Yes ☐ No Need ☐ Yes ☐ No

Provider list

+	Provider	Frequency	
	Agency	PRN (as needed)	

Comments
Provider: Spokane Housing Authority
Client is receiving the ALTSA Housing Subsidy

Step 2: In CARE, you will add three treatments to the Clients Medical Screen.



Treatments:

- *Supportive Housing
- *Housing Subsidy (HC/AAA)
- Other

Note:

*If the Client's CARE plan is already current, you will need to create and Interim Assessment.
* You will only add "Housing Subsidy" if the Client is utilizing the ALTSA subsidy.
* If the Client has not yet received GOSH services and this is a new referral, The question "received in the last 14 days?" will be answered "No" on all three treatments.

Treatment
Other

Received in the last 14 days? ☐ Yes ☐ No Need ☐ Yes ☐ No

Provider list

+	Provider	Frequency	
	Agency	PRN (as needed)	

Comments
Community transition items and services as identified to assist with the client's return to independent living.

Add additional provider

ProviderOne

Resources

Contacts

Q ProviderOne Search

ID

Provider name ?

County

ProviderOne Provider ID

City

Provider type Filter by service code

Search ProviderOne

Clear

SPokane Housing Authority - 01

Paid

Spokane Housing Authority

Tasks assigned to provider

+

Housing subsidy (HCS/AAA)

-

Supportive Housing Provider Agency

Tasks assigned to provider

+

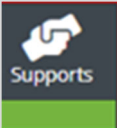
Other (Treatments)

-

Supportive Housing (HCS/AAA)

-

Step 3: Add the Providers into the Support Screen.



*Is the Client receiving the ALTSA subsidy and GOSH service with a SHP? – Add both SHP agency and Spokane Housing Authority to the Support Screen.

*Is the Client just using the Supportive Housing Service? – Add just the SHP agency to the Support Screen

*Each provider should be added as a “Paid “ provider.

Step 4: Assign applicable treatments to the providers as shown.

*Do not assign any other unassigned tasks to these two providers.

*These providers do not have to sign the service summary. Just ensure that the Client signs the Service Summary and send it to DMS.

As a reminder, please staff all GOSH cases with your local GOSH Program Manager prior to inactivating a case.

For more information on how to add GOSH Supportive Housing Services and the ALTSA Subsidy into CARE assessments, please visit our [chapter ,5b](#) in the LTC Manual. You may also reach out to your local GOSH Program Manager.