

Provider to Provider Pre-Admission Transition Checklist

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|---|------------|-----------|
| Name of Individual: | | |
| Obtained from current provider | Yes | No |
| 1. Demographic information (name, DOB, nickname, parent/guardian information) | | |
| 2. Medical history and information (family history, medication history, surgical history, allergies, most recent testing/labs, current diagnoses, current list of doctors and next scheduled visits) | | |
| 3. Documentation of intellectual disability diagnosis | | |
| 4. Information about medical equipment, appliances, and/or assistive technology | | |
| 5. Mental health history and information (psychiatry, therapy/counseling, other mental health services, psychiatric hospitalizations, current diagnoses, current list of mental health providers and next scheduled visits) | | |
| 6. Current medication and treatment log information | | |
| Ensured records transfer | Yes | No |
| 1. All medical and behavioral health records are transferred from current provider to new provider. | | |
| 2. Current provider has requested current physician forward medication and treatment orders to new provider, new pharmacy, and new physician (if applicable) prior to admission. | | |
| Ensured visits to new provider | Yes | No |
| 1. The individual visits the new provider as much as possible prior to admission to meet with new housemates. (This may include inviting the individual over for lunch/dinner or activities such as movie night, parties, etc.) | | |
| 2. The individual has met with as many new caregivers as possible prior to admission. | | |
| 3. Individual is comfortable with new residence prior to admission. | | |

Signature - Home Supervisor, New Provider

Date

References:

American College of Physicians. (2016). Intellectual Disabilities/Developmental Disabilities (ID/DD). Retrieved on August 3, 2022, from https://www.acponline.org/system/files/documents/clinical_information/high_value_care/clinician_resources/pediatric_adult_care_transitions/gim_dd/idd_transitions_tools.pdf

Pennsylvania Department of Human Services. (2018, September 1). Pennsylvania Preadmission Screening Resident Review (PASRR) Evaluation Level II Form. Retrieved on August 3, 2022, from <https://www.dhs.pa.gov/providers/Providers/Documents/PASRR/Level%20II%20PASRR%20Evaluation%20Form.pdf>

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