

10A NCAC 71J .0103 SCOPE OF SERVICES

Health support services are casework services designed to motivate individuals and families to utilize information and resources which will promote and preserve their optimum level of health thus increasing their potential to be happy and productive citizens:

- (1) Helping individuals and families to recognize health needs includes the provision of counseling, individual or group instruction and educational materials focused on the following:
 - (a) basic health needs such as nutrition, exercise, rest, cleanliness, regular physical examinations, necessary immunizations, perinatal care, maternal and child health, and family planning;
 - (b) noticeable physical problems or developmental disabilities such as speech impediments, crossed eyes, hearing difficulties, orthopedic irregularities, disfiguring scars or birth marks, skin allergies, dental cares, need for dental plates or braces, obesity, cerebral palsy, muscular dystrophy, etc.;
 - (c) identifiable mental health related problems, such as mental retardation, mental illness, emotional disturbance, alcohol or drug abuse;
 - (d) suspected chronic disease such as arthritis, emphysema, heart disease, kidney disease, diabetes, cancer, etc.;
 - (e) communicable disease such as tuberculosis, measles, mumps, polio, venereal diseases, etc.;
 - (f) physical and occupational therapy;
- (2) Helping individuals and families secure needed health services includes the following:
 - (a) referring them to appropriate resources for services and treatment to meet their individual needs;
 - (b) providing help, as needed, with applying for assistance with the costs of medical and health care;
 - (c) arranging for supportive services such as transportation and child care to enable them to utilize available resources for diagnosis and treatment;
- (3) Counseling and planning with individuals, families and health providers to assure continuity of treatment and carrying out of health recommendation includes the following:
 - (a) counseling with individuals and families as needed, about accepting and adjusting to health limitations;
 - (b) counseling with individuals and families regarding the importance of adhering to prescribed treatment plans by following doctors' orders and meeting all appointments for check-ups, treatment and therapy;
 - (c) help to individuals and families in scheduling appointments for continued treatment and services and in arranging for supportive services to enable them to keep scheduled appointments;
 - (d) assistance as needed in having prescriptions for medication filled and refilled including exploration of resources available to help with the cost of medication;
 - (e) assistance in locating and utilizing ancillary services to support the health plan such as in-home aide services, day care, preparation and delivery of meals, services to meet the special needs of the elderly, disabled or handicapped, transportation, etc.;
 - (f) coordinated planning with health providers to identify needs, locate resources and develop strategies for motivating the individual and his family to carry out health recommendations;
 - (g) follow-up periodically with the individual and his family to assess progress toward reaching service goals and the need for continued health support services;
- (4) Helping individuals to secure admission to medical institutions and children to secure admission to other health facilities includes the following:
 - (a) counseling with the individual and his family to help them accept the need for the recommended level of care and to work through any negative feelings they may have about such a move;
 - (b) assistance in locating appropriate resources and applying for admission;
 - (c) help in exploring resources available for assistance with the cost of care;
 - (d) arranging for supportive services such as appliances, equipment, supplies, transportation, etc.;

(e) follow-up after admission and continuation of health support services as needed.

History Note: Authority G.S. 143B-153;
Eff. March 1, 1977;
Readopted Eff. October 31, 1977;
Amended Eff. March 1, 1994; June 1, 1982;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. May 20,
2017.