# ABA Agency in New Jersey POLICIES AND PROCEDURES MANUAL

# **TABLE OF CONTENTS**

Policy 1: Purpose, Operational Framework, and Compliance Manual	5
Section 2: Organizational Governance	8
Policy 002: Organizational Governance	
	9
Section 3: Personnel Policies and Procedures	12
Policy 003: Applicant Education & Experience Policy	13
I. PURPOSE	13
II. POLICY	13
III. PROCEDURE	14
A. Hiring Process	14
B. Job Descriptions	14
C. Training and Credentialing	15
D. Recordkeeping	15
IV. REFERENCES	16
Policy 004: Background Checks	17
I. Purpose	17
II. Policy	17
III. Procedure	
References	
Policy 005: Staff Training & Professional Development	21
I. Purpose	21
II. Policy	21
III. Procedure	21
IV. References	23
Section 4: Admission, Suspension & Discharge Policies and Procedures	
Policy 006: Admission	27
I. Purpose	27
II. Policy	27
III. Procedure	
IV. References	
Policy 007: Suspension	
I. Purpose	
II. Policy	
III. Procedure	
IV. Additional Notes	
V. References	

Policy 008: Discharge	34
I. Purpose	34
II. Policy	34
III. Procedure	34
IV. References	37
Section 5: Incident Management*	39
Policy 009: Incident Reporting and Management	40
I. Purpose	40
II. Policy	40
III. Procedure	41
IV. References	44
Policy 010: Complaint Investigation	45
I. Purpose	45
II. Policy	45
III. Procedure	46
IV. Rights of Individuals Served	49
V. Roles and Responsibilities	49
VI. References	49
Section 6: Administrative Policies & Procedures	50
Policy 011: HIPAA & Protected Health Information (PHI)	51
I. PURPOSE	51
II. POLICY	51
III. PROCEDURE	52
IV. Rights of Individuals Served	53
Policy 012: Financial Management and Billing Policy	54
I. Purpose	54
II. Policy	54
III. Procedure	55
IV. Ongoing Monitoring and Improvement	56
V. Rights and Protections	57
Policy 013: Reporting Medicaid Fraud, Waste, and Abuse	58
I. Purpose	58
II. Policy	58
III. Procedure	58
V. Commitment to Ethical Practices	60
Policy 014: Quality Management Plan	61
I. Purpose	61
II. Policy	61
III. Procedure	62
IV. Commitment to Excellence	63
Policy 015: Complaint, Grievance Resolution & Appeal	64

I. Purpose	64
II. Policy	64
III. Procedure	64
References	66
Section 7: Individual Rights Policies and Procedures	67
Policy 016: Rights of Persons Served	68
I. Purpose	68
II. Policy	68
III. Procedure	68
Policy 017: Human Rights Committee	71
I. Purpose	71
II. Policy	71
III. Procedure	71
References	75
Section 8: Emergency Procedures	76
Policy 018: Emergency Procedures	77
I. Purpose	77
II. Policy	77
III. Procedure	77
A. Emergency Procedures	77
B. Life-Threatening Emergencies	79
IV. Training and Competency	80
V. Monitoring and Review	81
Section 10: Medication Administration & Management	82
Policy 019: Medication Administration and Management Policy	83
I. Purpose	83
II. Policy	83
III. Procedures: Medication Monitoring	85
A. Medication Monitoring Overview	85
B. Documentation of Medication Administration Records (MAR)	
C. Medication Administration Process	90
D. Handling Medication Changes	92
E. Medication Administration and Off-Site Storage for Community Outings	93
F. Addressing Medication Errors	96
G. Over-the-Counter (OTC) Medications – As Needed (PRN)	
H. Administration of PRN (As Needed) Medication	101
I. Medication Disposal	103
J. Medication Storage	105
K. Self-Administered Medication	108
L. Individual Refusal to Take Prescribed Medication	111
References	113

# Policy 1: Purpose, Operational Framework, and Compliance Manual

#### I. Purpose of the Manual

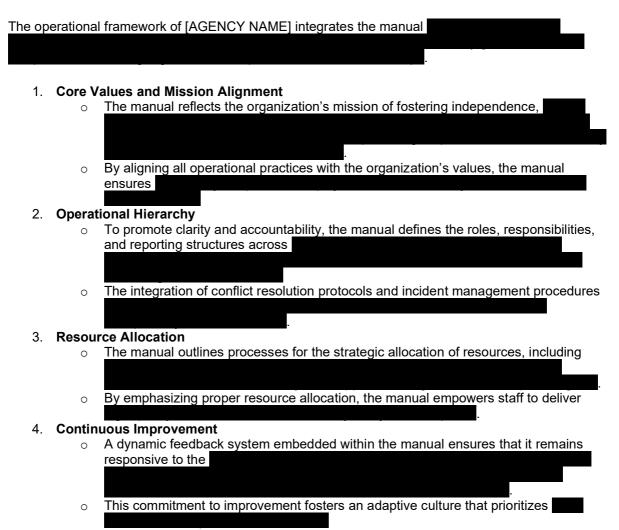
The Policies and Procedures Manual serves as the cornerstone of [AGENCY NAME]'s

- 1. Operational Clarity and Standardization
  - [AGENCY NAME] relies on the manual as a singular, centralized resource for all
  - The manual provides step-by-step processes and detailed instructions that guide employees in executing their
  - $\circ$   $\,$  By serving as a definitive guide, the manual reduces the risk of errors caused by

#### 2. Regulatory Compliance

- The Policies and Procedures Manual acts as a regulatory compass, ensuring that all organizational
- This manual is not a static document. It evolves annually to reflect updates in
- o In addition to compliance, the manual serves as a proactive resource, guiding staff
- 3. Quality Assurance
  - [AGENCY NAME] integrates the manual into its quality improvement initiatives by
  - By providing detailed documentation processes, the manual supports audits, reviews, and investigations, ensuring
  - Through comprehensive documentation and monitoring, the manual enhances the organization's ability to

#### II. Operational Framework



#### III. Compliance Manual Overview

The compliance section of the manual ensures that all operational practices align with the legal, regulatory, and ethical standards governing [AGENCY NAME]. It serves as a protective mechanism, safeguarding the organization against risks associated with non-compliance.

#### 1. Adherence to Regulations

• The compliance framework outlined in the manual reflects guidance

o By detailing specific regulatory requirements and corresponding organizational

#### 2. Consistency in Implementation

- The manual establishes a standardized approach
- Uniform implementation reduces variability in service delivery, enhancing

#### 3. Audit and Review Processes

- Internal controls outlined in the manual facilitate routine audits and compliance checks. These processes ensure
- The manual includes detailed instructions for documenting and addressing audit findings, promoting accountability and continuous improvement.

#### 4. Staff Accountability

0

- By delineating individual and collective responsibilities, the manual fosters a culture of accountability.
- Clear delineation of responsibilities ensures that no aspect of compliance is

#### Integration into Organizational Culture

- 1. Accessibility and Training
  - The manual is designed to be accessible to all staff members, both digitally and in print.
  - o Comprehensive training programs familiarize staff with the manual, ensuring

#### 2. Continuous Engagement

 Leadership actively engages with staff to address questions, clarify policies, and gather feedback.

#### 3. Enhanced Service Delivery

o By integrating the manual into all aspects of operations, [AGENCY NAME] ensures

Section 2: Organizational Governance

# Policy 002: Organizational Governance

Mission Statement, Philosophy, Values, and Goals

#### **Mission Statement**

[AGENCY NAME] exists to improve the quality of life for adults with developmental disabilities by

The Mission Statement serves as the foundation for every decision, policy, and action taken by [AGENCY NAME]. It underscores the organization's commitment to empowering

#### Philosophy

[AGENCY NAME] embraces a person-centered philosophy that places the individual at the heart of all decisions. This approach prioritizes individual

#### **Core Values**

- 1. Respect for Individuality:
- 2. Empowerment:
- 3. Integrity:
- 4. Inclusivity:
- 5. Continuous Improvement:

#### Goals



#### Provider Overview

#### **Organizational Background**

[AGENCY NAME] was established in 2022 to address the need for high-quality support services for adults

[AGENCY NAME] focuses on community-based,

#### **Populations Served**

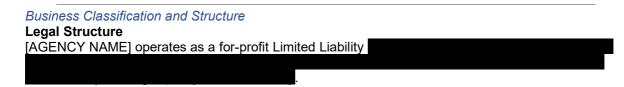
The organization provides services to adults with developmental and intellectual disabilities. These individuals often require varying levels of support to navigate daily life, integrate

#### Services Offered

[AGENCY NAME] specializes in:

1.	Community-Based Supports:
2.	Individual Supports:
3.	Behavioral Supports:
Service	e Capacity

The organization maintains a 1:1 staff-to-client ratio to ensure personalized attention and high-quality care.



#### **Conflict of Interest Management**

- 1. Disclosure and Prevention
  - The Executive Director ensures that all employees disclose
  - Employees are prohibited from engaging in dual relationships with clients or
- 2. Resolution Process
  - The Executive Director reviews reported conflicts of interest

#### **Ethical Management of Operations**

The leadership team at [AGENCY NAME] prioritizes transparency, fairness, and ethical behavior in all operations. Decision-making processes are guided by the organization's Mission Statement, values,

#### Organizational Chart

The organizational structure of [AGENCY NAME] is designed to clearly define roles, responsibilities,

#### Table of Organization:

**Executive Leadership:** 

- Executive Director (Name):
- Chief Financial Officer (CFO) (Name):

#### **Operations Management:**

<sup>10</sup> | POLICIES AND PROCEDURES

- **Program Director** (Name):
- Quality Assurance Coordinator

**Direct Support Services:** 

Direct Support Professionals (DSPs):

Support Coordination:

• Service Coordinators:

**Training and Compliance:** 

- Training Coordinator:
- Compliance Officer:

#### Processes for Governance Strategic Planning

- 1. Annual Goal Setting
  - The Executive Director leads an annual strategic planning session to

o Input from staff, clients, and families is incorporated to ensure

#### 2. Monitoring Progress

- The Quality Assurance Coordinator tracks progress toward goals
- 3. Reporting and Adjustments
  - The Executive Director prepares an annual report summarizing

#### **Policy Development and Review**



#### **Quality Assurance**



# Section 3: Personnel Policies and Procedures

# Policy 003: Applicant Education & Experience Policy

Applicant Education & Experience Policy Number: 003 Section: Personnel Policies and Procedures Reference Source: CCP & SP Manuals Effective Date: TBD Revision Date: TBD DDD Review Completed/Compliance Date:

#### I. PURPOSE

The purpose of the applicant education and experience policy is to ensure that [AGENCY NAME] complies

#### **II. POLICY**

[AGENCY NAME] enforces strict adherence to

[AGENCY NAME] performs these actions to ensure compliance:



**Policy Highlights:** 



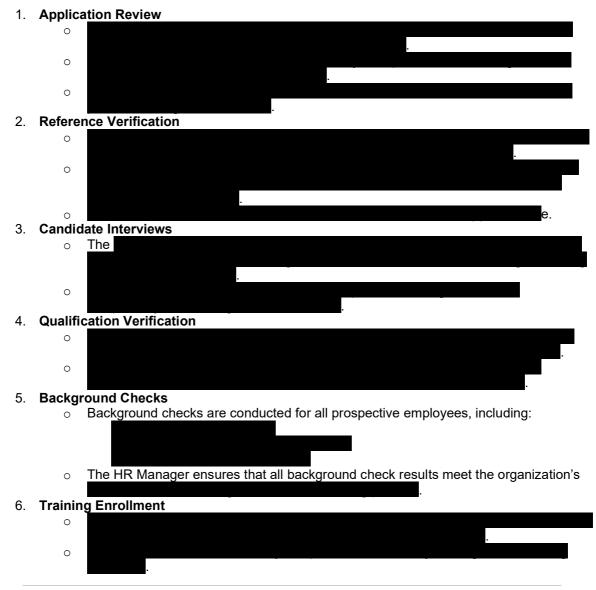
#### **III. PROCEDURE**

The following procedures outline the detailed steps taken by [AGENCY NAME] to verify and ensure



#### **A. Hiring Process**

The hiring process for [AGENCY NAME] is managed collaboratively by the Human Resources (HR) Manager, the Training Coordinator, and the Program Directors. This process is designed to ensure that all candidates meet or exceed the minimum qualifications for their respective positions.

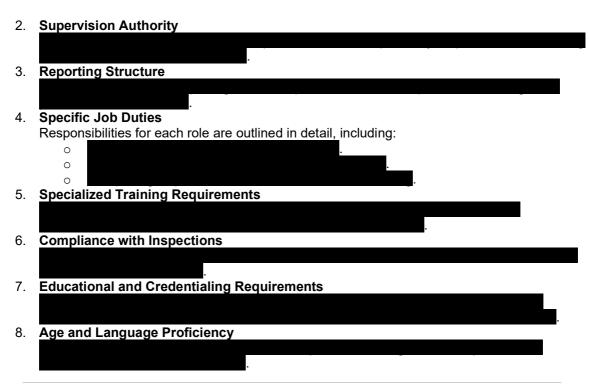


#### **B. Job Descriptions**

Job descriptions for all positions at [AGENCY NAME] are meticulously developed and maintained to ensure alignment with organizational and regulatory standards. These descriptions are reviewed annually and updated as necessary to reflect changing policies or service needs.

#### Key Elements of Job Descriptions:





#### C. Training and Credentialing

To ensure that all employees are prepared to deliver high-quality services, [AGENCY NAME] implements a structured training program managed by the Training Coordinator.

 Training Programs Employees complete mandatory training within specified timeframes, including:
 Documentation of Training
 Ongoing Education

 Ongoing Education
 Ongoing Education

#### D. Recordkeeping

[AGENCY NAME] ensures that all employee qualifications and compliance documents are securely stored and readily accessible for audits or reviews.



#### **IV. REFERENCES**

- Community Care and Supports Program Manuals
- Supports Program Waiver Manuals
- College of Direct Support Training Guidelines
- Medicaid Documentation Standards

# Policy 004: Background Checks

#### **Background Checks**

Policy Number: 004 Section: Personnel Policies and Procedures Reference Source: N.J.S.A. 30:6D-63 et seq., Criminal Background Checks N.J.A.C. 10:44D, Central Registry of Offenders N.J.S.A. 30:6D-73 et seq, Child Abuse Record Information (CARI Checks) P.L.2017, c 238, Stephen Komninos' Law Community Care Program and Supports Program Manuals; Appendix I Effective Date: TBD Revision Date: TBD DDD Review Completed/Compliance Date: TBD

#### I. Purpose

The purpose of this policy is to ensure [AGENCY NAME] complies fully

#### II. Policy

[AGENCY NAME] conducts comprehensive background checks for all potential employees who have

#### A. Required Background Checks:

Employment is contingent upon completion and clearance of the following:



#### **B. Compliance and Documentation:**

Background checks are initiated, reviewed, and documented within the timeframes mandated by

#### C. Notification and Appeals Process:

[AGENCY NAME] provides all applicants and employees with information about any adverse findings

#### <sup>17</sup> | POLICIES AND PROCEDURES

#### III. Procedure

- A. Criminal History Background Check (Fingerprinting & Archive Requests)
- 1. Initiation and Timeframe
  - Upon acceptance of a conditional offer, the HR Manager coordinates
  - The candidate must complete the fingerprinting process
  - Once the fingerprinting process is complete, the results are sent d

#### 2. Assessment of Findings

- The HR Manager reviews the report provided by ECCU to identify any
- If the ECCU report identifies disqualifying information, the HR Manager informs
- HR ensures compliance with ECCU directives. If the ECCU recommends immediate

#### 3. Documentation and Retention

#### B. Central Registry of Offenders

#### **1. Initial Check Process**

- Before hire, each prospective employee completes the "Employee/Volunteer Consent for Employers to Check Form."
- The HR Manager submits the signed form and conducts the registry check within 24 hours of

#### 2. Ongoing Compliance

•			
•			
•			

#### 3. Documentation

•		
•		compliance.

### C. Child Abuse Record Information (CARI) Checks

2. Non-Compliance or Disqualifications
• If
3. Record Retention
D. Drug Testing (Stephen Komninos' Law)
Testing Protocols     Pre-Employment Testing:
<ul> <li>Random Testing:</li> </ul>
For-Cause Testing:
2. Positive Results Management
•
• I a second
3. Documentation
•
E. State of New Jersey Debarment List Checks
1. Initial and Ongoing Screening  •
2. Action on Matches
3. Recordkeeping
F. Federal Exclusions Database Checks
1. Screening Process
2. Termination Procedures
•
3. Retention of Results

G. NJ Treasury Exclusions Database Checks
1. Initial and Periodic Checks
• International sector of the
2 Compliance Actions
2. Compliance Actions
3. Documentation
•
H. NJ Division of Consumer Affairs Licensure Database (As Applicable)
1. Verification Steps
•
2 Non Compliance Handling
2. Non-Compliance Handling
3. Recordkeeping
•
I. NJ Department of Health Database Checks (As Applicable)
1. Screening Process
2. Ineligibility Management
•
3. Retention of Documentation
J. Driver Abstract Checks (As Applicable)
1. Initial and Periodic Checks
2. Disqualification Management
•
3. Retention of Records
References
• N.J.S.A. 30:6D-63 et seq.
• N.J.A.C. 10:44D
Stephen Komninos' Law
Community Care Program and Supports Program Manuals
<ul> <li>Medicaid Newsletter, Volume 26 Number 14, September 2016</li> </ul>

• ECCU Directive Guidelines

# Policy 005: Staff Training & Professional Development

Staff Training & Professional Development Policy Number: 005 Section: Personnel Policies and Procedures Reference Source: Appendix E in CCP or SP Manual Effective Date: TBD Revision Date: TBD DDD Review Completed/Compliance Date: TBDC

#### I. Purpose

The purpose of this policy is to ensure compliance with the mandatory staff training and professional development requirements

#### II. Policy

[AGENCY NAME] adheres to all service-specific training and professional development requirements outlined in Appendix E of the CCP and SP manuals. The organization implements a robust training program that ensures every employee achieves the competencies necessary to provide safe, effective, and person-centered services.



#### **III. Procedure**

A. College of Direct Support (CDS)

#### 1. Administrator Training and Compliance

•			
•		-	

#### 2. Technical Assistance

<sup>21</sup> | POLICIES AND PROCEDURES

CDS Administrators seek technical assistance by

#### 3. Monitoring and Tracking

CDS Administrators assign, monitor, and verify employee training

#### B. Provider-Developed Orientation for New Hires

#### **1. Orientation Process**



#### 2. Health and Safety Training



#### C. Staff Training and Professional Development

#### 1. Mandatory Training Requirements

•

• [AGENCY NAME] ensures employees complete all mandatory training as outlined in Appendix E of the CCP and SP manuals. This includes:



# 2. Service-Specific Training Enhancements

#### 3. Documentation and Verification

•

#### D. CPR and First Aid Training

#### 1. Selection of Training Entities



#### 2. Competency Validation

• . • .

#### 3. Re-Certification Process

•		
	•	
٠		

#### E. Monitoring and Continuous Improvement

#### 1. Quality Assurance Reviews



#### 2. Family and Client Feedback

• [] \_\_\_\_\_\_.

#### 3. Reporting and Documentation



#### **IV. References**

- Community Care Program Manual, Appendix E
- Supports Program Manual, Appendix E
- Emergency Cardiovascular Care (ECC) Guidelines, American Heart Association
- The Boggs Center Workforce Development Resources

Employee Nome	0	ecklist - Ten	ipiale	
Employee Name:	Job Title:		Date of Hi	re:
Required Trainings		Trainer Initials	Employee Initials	Date Complete
Pre Service Trainings				
Applicable Services: *Behavioral Sup	ports *Career Planning *Comm.	Based Supports *	Comm. Inclusion S	ervices
*Day Habilitation *Prevocational Training *	Respite * Supported Employmen	nt * Individual Sup	ports *Support	Brokerage
Trainings To Be Completed With	in 90 Days of Hire			
Applicable Services: *Behavioral Sup	ports *Career Planning *Comm.	Based Supports *	Comm. Inclusion S	ervices
*Day Habilitation *Prevocational Training *	Respite * Supported Employmen	nt * Individual Sup	ports *Support	Brokerage
<b>CDS</b> Maltreatment Prevention an	d Response (5 CDS Les	sons)		li .
Provider Developed Orientation				
Documentation and record records	n 90 Days of Hire and F	Refore Worki	a with Indivi	iduals
	•			
Applicable Services: * Comm. Based Supp	•			
Applicable Services: * Comm. Based Supp	•			
Applicable Services: * Comm. Based Supp	•			
Applicable Services: * Comm. Based Supp	•			
Trainings to Be Completed Withi Applicable Services: * Comm. Based Supports * Respite * Individual Supports	•			

# 24 | POLICIES AND PROCEDURES

Trainings To Be Completed Within 90 Days of Hire and as	needed		
Applicable Services: 🛛 Career Planning 🖾 Supported Employmen	ıt		
Trainings To Be Completed Prior to Assuming Responsibility of	an Individual	and every 2 y	ears
Applicable Services: * Comm. Based Supports *Comm. Inclusion Service	ces * Day Habilitat	tion * Prevocatio	nal Training
* Respite * Individual Supports *Support Brokerage			
Trainings To Be Completed Prior to Administering Medica			
Applicable Services: * Comm. Based Supports *Comm. Inclusion Services	* Day Habilitation	* Prevocational	Training
* Respite * Individual Supports *Support Brokerage	~		
Trainings To Be Completed Prior to Implementing Behavio	or Supports		
Applicable Services: *Comm. Based Supports *Comm. Inclusion Service		ion * Provocation	al Training
* Respite * Individual Supports	es Day Habilitat		iai manning
Respite individual supports			
Professional Development Hours			
Applicable Services: *Behavioral Supports *Career Planning *Comm. Bas	sed Supports * Cor	mm. Inclusion Ser	vices
* Day Habilitation * Prevocational Training * Respite * Support Coordination * S	upported Employn	nent * Individual	Supports

# Section 4: Admission, Suspension & Discharge Policies and Procedures

# Policy 006: Admission



#### I. Purpose

The purpose of [AGENCY NAME]'s admission policy is to ensure

#### II. Policy

[AGENCY NAME] is committed to providing a transparent and inclusive admission process, ensuring every prospective individual and their support team are fully informed and supported throughout the process. The organization ensures adherence to all DDD requirements and maintains comprehensive documentation for each admission.

#### A. Referral Process

The organization accepts referrals from support coordination agencies or DDD intake offices. Referrals are reviewed promptly to determine compatibility with the organization's services.

#### **B. Documentation Requirements**

The required documentation includes but is not limited to:



#### C. Exclusion Criteria

[AGENCY NAME] identifies conditions or circumstances that fall outside its service scope. These include:



#### D. Admission Process Overview

The admission process includes the following steps:





#### E. Informed Choices and Individual Rights

The organization ensures prospective individuals receive sufficient information to make informed d

#### **III. Procedure**

#### A. Pre-Admission Screening Procedure Steps

1. Initial Contact and Information Gathering

- When a potential participant, their Support Coordinator (SC), or family initiates
- During this contact, Megan listens attentively to the needs and preferences of the individual and gathers detailed information, including:
  - Acuity Level:
     Tier Level:
     Desired Service Hours:
     Location Preferences:
     Megan ensures this interaction provides clarity to the family or SC about the services offered,
- •

#### 2. Pre-Screening Assessment

- Once initial information is gathered, the Program Director conducts a thorough eligibility review. This step involves verifying:
  - Medicaid and DDD Linkage:
  - Diagnosis Documentation:
  - Age Criteria:
- Megan evaluates compatibility with the organization's service offerings by comparing the

		•	

B. Admission Procedure

- 1. Documentation Collection and Review
  - The applicant or their SC submits a detailed referral packet, which includes:
    - Updated Individualized Service Plan (ISP):
    - Proof of Medicaid and DDD Eligibility:

- **Diagnosis Documentation:** 0
- Medical and Behavioral Reports: 0
- The Program Director assembles an internal review committee that includes the Quality

#### 2. Meet and Greet

0

- After documentation review, a meet-and-greet session is scheduled to establish rapport and evaluate compatibility further. This step is tailored based on the service type:
  - Physical Site Services: Community-Based Services:
- These interactions are designed to foster trust, answer questions, and gather additional input from the individual's support team.

#### 3. Sharing Information for Informed Choices

- Prospective participants and their families are provided with:
  - Marketing Materials: 0
  - Program Activity Calendars: 0
  - Staff Training and Competencies: 0
  - Individual Rights and Grievance Procedures: 0

#### C. Decision to Accept or Decline

- 1. Communication of Decision
  - After completing the review process, the Program Director communicates the
  - For accepted individuals, the communication outlines the service

#### 2. Acceptance Process

- Once an individual is accepted, the intake process begins. This includes:
  - Orientation: 0
  - Health and Safety Documentation: 0
  - Supervision and Skill Assessment: 0

#### 3. Declined Applicants

For applicants who cannot be accommodated, the Program Director provides a •

#### D. Appeals Process

#### 1. Filing an Appeal

• Families or SCs may submit a written appeal to the Program Director within 10 business days of receiving a decision. The appeal should include:



### E. Waitlist Process



#### 2. Capacity Review

• The Quality Assurance Coordinator conducts quarterly assessments of service capacity. These reviews focus on:

0			
0			
0			

#### F. Acuity and Enhanced Needs

#### 1. Addressing Enhanced Needs

- For participants with complex needs, the Program Director completes the Addressing Enhanced Needs Form (AENF), ensuring the individual's safety and support are prioritized.
- Section 2 of the AENF outlines:
  - Staffing Requirements:
  - Equipment and Training:
  - Clinical Support Plan:
- The completed form is reviewed by the Quality Assurance Coordinator and stored securely in

#### **IV. References**

- Community Care Program and Supports Program Manuals.
- DDD Requirements for Admission, Suspension, and Discharge.
- Addressing Enhanced Needs Form Guidelines.

# Policy 007: Suspension



#### I. Purpose

The purpose of [AGENCY NAME]'s suspension policy is to provide a structured and consistent approach for addressing

#### II. Policy

[AGENCY NAME] ensures that suspensions are handled in a fair, respectful, and non-punitive

#### A. Criteria for Suspension

Suspension decisions are considered only when:



#### **B. Circumstances Requiring Immediate Suspension**

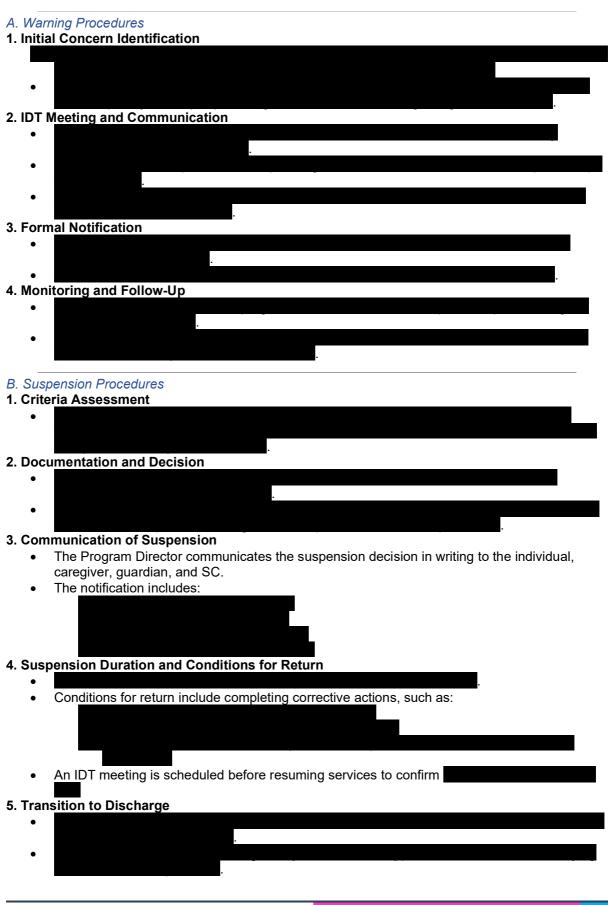
Immediate suspension is considered only in critical situations, such as:

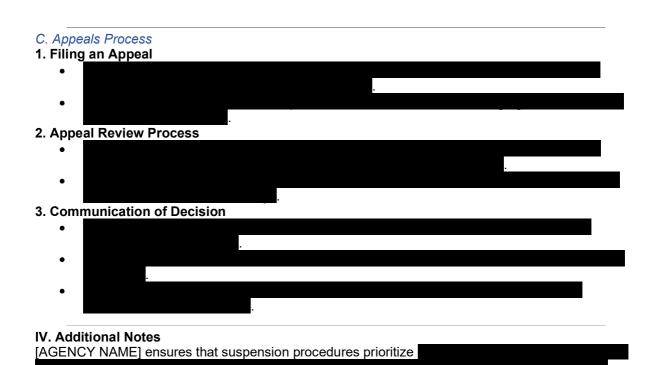
International statements and the second statements and th

#### C. Process Overview

#### D. Appeal Process

#### **III. Procedure**





#### V. References

- Community Care Program and Supports Program Manuals
- Division of Developmental Disabilities Standards for Suspension and Discharge
- Individualized Service Plan Guidelines

# Policy 008: Discharge

#### I. Purpose

The discharge policy at [AGENCY NAME] serves to establish a comprehensive framework for both voluntary and involuntary discharges.

#### II. Policy

[AGENCY NAME] is committed to ensuring that every discharge, whether voluntary or involuntary, is

A. Voluntary Discharge

B. Involuntary Discharge

C. Discontinuation in Residential Settings

D. Appeal Process

**III. Procedure** 

A. Voluntary Discharge

1. Communication of Intent



#### 2. Review and Approval

#### 3. Exit Interview



#### 4. Documentation

• . • .

#### 5. Reentry into Services

•		
•		

#### B. Involuntary Discharge

**1. Criteria for Involuntary Discharge** Involuntary discharges occur when:

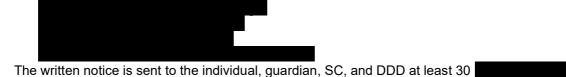


#### 2. Warning and Suspension Process



#### 3. Communication and Notification

• If discharge is deemed necessary, the Program Director prepares a detailed written notice outlining:



#### 4. IDT Meeting and Final Decision

٠

• . • .

#### 5. Documentation and Support Continuity

•	

#### C. Discontinuation of Residential Supports

#### 1. Notification to the Division



#### 2. Continuity of Support



#### 3. Communication of Move



#### 4. Notice Period and Appeals

- D. Appeal Process
- 1. Submitting an Appeal

•

#### 2. Review Process



#### 3. Final Decision and Communication

• . • .

#### 4. Documentation

•

#### **IV. References**

- Community Care Program and Supports Program Manuals
- Division Circular #36
- Individualized Service Plan Guidelines
- [AGENCY NAME] Complaint Resolution and Appeals Policy

#### Note to Readers:

Thank you for exploring this sample of our work. To keep our online showcase concise, we have provided only a selection from this piece.

Should you be interested in viewing the complete work or explore more of our portfolio, please don't hesitate to reach out. We're more than happy to provide additional samples upon request.

Thank you, **The Write Direction Team**