ABA Agency in New Jersey

POLICIES AND PROCEDURES MANUAL

TABLE OF CONTENTS

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 ███████████████████████████████ ██
   - 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 ██ ████████████.
   - 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

The operational framework of [AGENCY NAME] integrates the manual ██████████
██
██.

1. **Core Values and Mission Alignment**
   o The manual reflects the organization's mission of fostering independence, ██████
   ██
   ████████████████████████████████████.
   o By aligning all operational practices with the organization's values, the manual
   ensures ██
   ██████████.

2. **Operational Hierarchy**
   o To promote clarity and accountability, the manual defines the roles, responsibilities,
   and reporting structures across ██████████████████████████████████
   ████████████████████████████████.
   o The integration of conflict resolution protocols and incident management procedures
   ████████████████████████████████████.

3. **Resource Allocation**
   o The manual outlines processes for the strategic allocation of resources, including
   ██
   ██.
   o By emphasizing proper resource allocation, the manual empowers staff to deliver
   ██.

4. **Continuous Improvement**
   o A dynamic feedback system embedded within the manual ensures that it remains
   responsive to the ██
   ██.
   o This commitment to improvement fosters an adaptive culture that prioritizes ████
   ████████████████████████████.

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**
   o The compliance framework outlined in the manual reflects guidance ████████
   ██
   ████████████.
   o By detailing specific regulatory requirements and corresponding organizational
   ██.

2. **Consistency in Implementation**
   o The manual establishes a standardized approach ████████████████████████
   ██.
   o 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**
   - 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. ███████████████████████████████ ████████████████████.
   - 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**
   - 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

██ ██ ██

5. ███ ████████████████

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 Capacity

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

Business Classification and Structure

Legal Structure

[AGENCY NAME] operates as a for-profit Limited Liability ███████████████████████ ██.

Conflict of Interest Management

1. **Disclosure and Prevention**
   o The Executive Director ensures that all employees disclose ██████████ ███████████████████████████████.
   o Employees are prohibited from engaging in dual relationships with clients or ████ ███████████████████████████.
2. **Resolution Process**
   o 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:

- **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**
   o The Executive Director leads an annual strategic planning session to ████
   ████████████████████████████
   ██████████
   o Input from staff, clients, and families is incorporated to ensure ████████
   ██████████████
2. **Monitoring Progress**
   o The Quality Assurance Coordinator tracks progress toward goals ████████
   ███████████████████████████.
3. **Reporting and Adjustments**
   o 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.

1. **Application Review**
   - ███
   - ███
   - ███

2. **Reference Verification**
   - ██
   - ███
   - ██e.

3. **Candidate Interviews**
   - The ██ ████████████████████████████████
   - ██

4. **Qualification Verification**
   - ██.
   - ██.

5. **Background Checks**
   - Background checks are conducted for all prospective employees, including:
     ████████████████████████████████
   - The HR Manager ensures that all background check results meet the organization's ████████████████████████████████.

6. **Training Enrollment**
   - ██.
   - ██ █████████.

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:
1. **Position Title**
   ████████████████████████████████."

2. **Supervision Authority**

    ██.

3. **Reporting Structure**

    ██.

4. **Specific Job Duties**
    Responsibilities for each role are outlined in detail, including:
    - ██████████████████████████████████.
    - ████████████████████████████████████.
    - █████████████████████████████████████.

5. **Specialized Training Requirements**

    ███.

6. **Compliance with Inspections**

    ██.

7. **Educational and Credentialing Requirements**

    ██.

8. **Age and Language Proficiency**

    ██.

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.

1. **Training Programs**
    Employees complete mandatory training within specified timeframes, including:

    ██
    ████████████████████████████.

2. **Documentation of Training**

    ███
    - ███.

3. **Ongoing Education**
    - ███.

D. Recordkeeping

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

1. **Employment Files**
    - The HR Manager maintains organized and secure files for each employee, containing:
        - ████████████████████████.
        - ███████████████████████.
        - ███████████████████████.

2. **Annual Review**
    - ███.

3. **Audits**
    - ███████████████████████████████.

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
███.

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

1. Initial and Ongoing Checks

- ██ .

- ████████████████████████████████████ .

- ████████████████████ .

2. Non-Compliance or Disqualifications

- If ███
  ███
  ███
  ███.
- ███
  ███.

3. Record Retention

- ███
  ███.

D. Drug Testing (Stephen Komninos' Law)

1. Testing Protocols

- **Pre-Employment Testing:** ███████████████████████
  ███
  ███████████.
- **Random Testing:** ████████████████████████████████
  ███
  ███████████████████████████.
- **For-Cause Testing:** ██████████████████████████████
  ███
  ███████████████████████████.

2. Positive Results Management

- ███
  ███
  ███████.
- ███
  ███.

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

- ██ .

2. Compliance Actions

- ██ .

3. Documentation

- ██ .

H. NJ Division of Consumer Affairs Licensure Database (As Applicable)

1. Verification Steps

- ██ .

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**
- **Medicaid Newsletter, Volume 26 Number 14, September 2016**
- **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.

██

B. ██.

C. ██.

██

E. ██.

III. Procedure

A. College of Direct Support (CDS)
1. Administrator Training and Compliance

- ██.

- ██.

2. Technical Assistance

- 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:
  ████████████████████████████████ ████████████████████████ ████████████████████████

- HR tracks the completion of these trainings and schedules periodic ██████████ ████████████████.

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

- ███████████████████████████████████████
  █████████████████.

- ██.

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

New Employee Orientation Training Checklist - Template

Employee Name:	Job Title:		Date of Hire:	

Required Trainings	Trainer Initials	Employee Initials	Date Completed
Pre Service Trainings			
Applicable Services: *Behavioral Supports *Career Planning *Comm. Based Supports *Comm. Inclusion Services *Day Habilitation *Prevocational Training * Respite * Supported Employment * Individual Supports *Support Brokerage			
████████████████████████████████			
Trainings To Be Completed Within 90 Days of Hire			
Applicable Services: *Behavioral Supports *Career Planning *Comm. Based Supports *Comm. Inclusion Services *Day Habilitation *Prevocational Training * Respite * Supported Employment * Individual Supports *Support Brokerage			
████████████████████████████████			
CDS Maltreatment Prevention and Response (5 CDS Lessons)			
████████████████████████████████			
Provider Developed Orientation			
████████████████████████████████			
Trainings to Be Completed Within 90 Days of Hire and <u>Before Working with Individuals.</u>			
Applicable Services: * Comm. Based Supports *Comm. Inclusion Services * Day Habilitation * Prevocational Training * Respite * Individual Supports			
████████████████████████████████			
Required Trainings	Trainer Initials	Employee Initials	Date Completed

Trainings To Be Completed Within 90 Days of Hire and as needed			
Applicable Services: ☒ Career Planning ☒ Supported Employment			
Trainings To Be Completed Prior to Assuming Responsibility of an Individual and every 2 years			
Applicable Services: * Comm. Based Supports *Comm. Inclusion Services * Day Habilitation * Prevocational Training * Respite * Individual Supports *Support Brokerage			
Trainings To Be Completed Prior to Administering Medication			
Applicable Services: * Comm. Based Supports *Comm. Inclusion Services * Day Habilitation * Prevocational Training * Respite * Individual Supports *Support Brokerage			
Trainings To Be Completed Prior to Implementing Behavior Supports			
Applicable Services: *Comm. Based Supports *Comm. Inclusion Services * Day Habilitation * Prevocational Training * Respite * Individual Supports			
Professional Development Hours			
Applicable Services: *Behavioral Supports *Career Planning *Comm. Based Supports * Comm. Inclusion Services * Day Habilitation * Prevocational Training * Respite * Support Coordination * Supported Employment * 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:** ███████████████████
  █████████████.

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

2. Meet and Greet

- 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:
  - o **Physical Site Services:** ██████████████████████ ██████████████████████████████████ ████.
  - o **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:
  - o **Marketing Materials:** ██████████████████████████████ ██.
  - o **Program Activity Calendars:** █████████████████████████████████ ██.
  - o **Staff Training and Competencies:** ██████████████████████████ ████████.
  - o **Individual Rights and Grievance Procedures:** ██████████████████████ █████████████.

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:
  - o **Orientation:** ████████████████████████████████████ ██████████████████████.
  - o **Health and Safety Documentation:** ██████████████████████████ ████.
  - o **Supervision and Skill Assessment:** ██████████████████████████ ██████████████████████.

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:
  ███████████████████████████████████
  ██

2. Appeal Review Process
██
█████████████████████████████████████
██
████████████████████████

E. Waitlist Process
1. Referral Tracking
██
- ███
  ████████████████████████████████████.

2. Capacity Review
- The Quality Assurance Coordinator conducts quarterly assessments of service capacity. These reviews focus on:
  - ████████████████████.
  - ██████████████████████████████████.
  - ████████████████████████████████.

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:

- ██.
- ██.

C. **Process Overview**
███
███
███

D. **Appeal Process**
███
███████████████████████████████████.

III. Procedure

A. Warning Procedures

1. Initial Concern Identification

██

- ██.

2. IDT Meeting and Communication

- ██
██.

- ██
████████████████████████.

- ██
█.

3. Formal Notification

- ███
████.

- ██
█.

4. Monitoring and Follow-Up

- ██
███.

- ██
█.

B. Suspension Procedures

1. Criteria Assessment

- ██
██.

2. Documentation and Decision

- ████████████████████████████████████
████.

- ██
███.

3. Communication of Suspension

- The Program Director communicates the suspension decision in writing to the individual, caregiver, guardian, and SC.
- The notification includes:

  ██████████████████████████
  ██████████████████████████
  ██████████████████████████

4. Suspension Duration and Conditions for Return

- ███████████████████████████████████████.
- Conditions for return include completing corrective actions, such as:

  ██████████████████████████████████
  ██
  ████████████████

- An IDT meeting is scheduled before resuming services to confirm ███████████████
  ███

5. Transition to Discharge

- ██
  ████.

- ██
  ██.

C. Appeals Process

1. Filing an Appeal

- ██.
- ██.

2. Appeal Review Process

- ██.
- ████████████████████████.

3. Communication of Decision

- ████████████████████████████████.
- ██████████████████████████████.
- ████████████████████████████.

IV. Additional Notes

[AGENCY NAME] ensures that suspension procedures prioritize ████████████████████ ██ ████████████████████.

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

Discharge
Policy Number: **(008)**
Section: **Admission, Suspension & Discharge**
Reference Source: **Community Care Program and Supports**
Program Manuals **Effective Date:** **TBD**
Revision Date: **TBD**
DDD Review Completed/Compliance Date: **TBD**

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:
  - ███████████████████████████
  - ██████████████████████████████
- The written notice is sent to the individual, guardian, SC, and DDD at least 30 ████████ ███████████.

4. IDT Meeting and Final Decision

- ██ ████████████████████████.
- ███ ██████████████████████).

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:

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The Write Direction Team