

**PERSON CENTERED REVIEW**  
**RESIDENTIAL AND WAIVER PROVIDER DOCUMENTATION REQUEST**

**DOCUMENTATION REQUIRED FOR INDIVIDUAL(S) SERVICES**

- Life Plan/ISP/CFR (*current plan*)
- Staff Action Plan (*current and previous plan*)
- Individual Protective Oversight Plan/Safeguards (*current and previous plan*)
- Internal agency event/incident reports (*1 year for the individual(s) in sample*)
- Documentation demonstrating that the individual has been informed of their 633 and HCBS rights, the grievance process, complaint process and record access (*most current*)
- Documentation of the individual's satisfaction with each service received (*current year*)
- Additional documentation required for Willowbrook Class Members

**BEHAVIOR SERVICES (if applicable)**

- Behavior Support Plan (*current with any subsequent revisions*)
- Functional Behavior Assessment (*assessment with any subsequent revisions*)
- Behavior tracking/data collection/RIA reports/Time Out Room tracking (*January 2020-present*)
- Mechanical restraining device (tracking forms January 2020-present, current physician orders)
- Administration/response to the use of PRN Psychotropic medication notes, if applicable (*January 2020 to the present*)
- BSP review documentation such as summaries/six-month plan reviews (*January 2020 to present*)
- Written informed consent for restrictions in BSP (*current and prior*)
- Human Rights Committee approvals (*current and prior*)
- Training documentation in SCIP-R/PROMOTE and the Individual's BSP (*current training for staff implementing BSP's at the Residential/Day Hab site or during waiver services*)

**NURSING SERVICES (if applicable)- for Individual(s) in certified residential or day service sites and/or are receiving community delegated nursing services provided under waiver service(s).**

- Medication administration records (*January 2020-present*)
- Physician orders (*current*)
- Plan of Nursing Services (*current*)
- Medical appointment documentation/consultation forms, if applicable (*January 2020-present*)
- Annual nursing/health assessment (*current*)
- Self-medication assessment (*current*)
- Medication errors (*January 2020-present*)
- Clinical Evaluations: OT, PT, RN, Nutrition, Speech, if applicable. (*January 2020-present*)
- Bowel tracking, fluid tracking, blood glucose tracking, O2, vitals tracking, if applicable. (*the past two months completed*)
- Medication regimen review, if applicable (*current and prior*)
- Nursing notes (*January 2020-present*)
- Medication Monitoring Plan with informed consents, medication list and staff training (*current*)

**In addition to the service documentation requirements above, the following is documentation requested for the Individual(s) Waiver Services:**

**FOR ALL HABILITATION SERVICES:**

- Habilitation Plan/Staff Action Plan (*current with any subsequent revisions/addendums*)
- Monthly Summaries and semi-annual review notes (*December 2019-February 2020*)
- Daily Service note documentation, including community inclusion activities (*December 2019-February 2020*)

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**\*Additional Documentation for Site-based Prevocational Services:**

- Documentation to evidence that the individual has a demonstrated or assessed earning capacity, is less than 50% of the current prevailing minimum wage or documentation that the individual is unable to maintain that productivity level in a competitive employment setting. (*current*)

**\*Additional Documentation for Community-based Prevocational Services:**

- Documentation of the location and time of daily service delivery in the community (*December 2019-February 2020*)

**\*Additional Documentation for Supported Employment Services:**

- Documentation of wages (*most current report*)

**\*Additional Documentation for Pathways to Employment Services:**

- Pathway to Employment Service Delivery plan and Career/Vocational plan with safeguards (*current*)
- Documentation showing the staff to individual ratio during service provision (*January 2020*)

**RESPITE SERVICES**

- Service notes/attendance documentation (*most recent 10 days of service provision by the provider*)
- Documentation referenced by the program staff, regarding any needs or safeguards required for the individual during service provision (*current*)

\*Surveyors may request additional documentation based on the level of services provided.

**SELF-DIRECTED SERVICES**

**SUPPORT BROKER**

- Personal Resource Account (*current*)
- Broker Agreement (*current*)
- Evidence of attendance at circle of support meetings (*most recent and prior meeting*)

**FISCAL INTERMEDIARY**

- Personal Resource Account (*current*)
- Brokerage Agreement (*current*)
- Fiscal Intermediary documentation (approved budget, monthly expenditure reports, billing and payment of approved goods and services shown in expenditures report, MOU) (*most recent 6 months*)

**INDIVIDUAL GOODS AND SERVICES (IDGS)**

- Summary of expenses paid on behalf of the individual with supporting receipts/documents, date and amount paid (*most recent 3 months*)

\*Surveyors may request additional documentation based on the Self-Directed Services the Individual receives.

**-If an individual in the sample is no longer receiving a service, however, received the service from your Agency during the 10/1/19-present time frame, please submit the documentation in effect at the time of service provision.**

**-In addition to this request, Surveyors may contact your agency to request additional documentation for any service, as needed.**