NorthStar
Community Services

Residential Client File Acknowledgement

Client : [redacted] V.S. House Name: Birch

Check off what has been read:

X IAPP (Individual Abuse Prevention Plan)
X CSSP
X SMA (Self-Management Assessment)
X Support Plan Addendum
X PCP (Person-Centered Plan)
X Support & Outcome (Goals – if applicable)

Check off if included and read:

X Rights Restriction (court rights restriction, Mary and/or George Saarela)
X Positive Support Plan
____ Safety Plan or Safety Protocol

Staff Name printed: Jennifer Gorden
Staff Signature: Jennifer Gorden

House Lead/Director name printed: Jesse Lend
House Lead/Director Signature: Jesse Lend

Date Client File Read: 12/9/24