



# NorthStar

Community Services

## Residential Client File Acknowledgement

Client: AN House Name: woodland

**Check off what has been read:**

IAPP (Individual Abuse Prevention Plan)

CSSP

SMA (Self-Management Assessment)

Support Plan Addendum

PCP (Person-Centered Plan)

Support & Outcome (Goals – if applicable)

**Check off if included and read:**

Rights Restriction

Positive Support Plan

Safety Plan or Safety Protocol

Other:

Staff Name printed: Alicia Grassel

Staff Signature: Alicia Grassel

House Lead/Director name printed: May Jensen

House Lead/Director Signature: [Signature]

Date Client File Read: 11/06/24



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Other:

Staff Name printed:           Alicia Grassel          

Staff Signature:           Alicia Grassel          

House Lead/Director name printed:           Mary Stanson          

House Lead/Director Signature:           Mary Stanson          

Date Client File Read:           11/06/24