



# NorthStar Community Services

## Residential Client File Acknowledgement

Client: SK House Name: Hillside

**Check off what has been read:**

IAPP (Individual Abuse Prevention Plan)

Support Plan Addendum

CSSP

PCP (Person-Centered Plan)

SMA (Self-Management Assessment)

Support & Outcome (Goals – if applicable)

**Check off if included and read:**

Rights Restriction

Positive Support Plan

Safety Plan or Safety Protocol

Staff Name printed: Bev Foyne

Staff Signature: [Signature]

House Lead/Director name printed: Cherilyn

House Lead/Director Signature: [Signature]

Date Client File Read: 1/1/25