State of Florida
Agency for Persons with Disabilities

iConnect
DDMC Training Manual Version 2
09/05/2024

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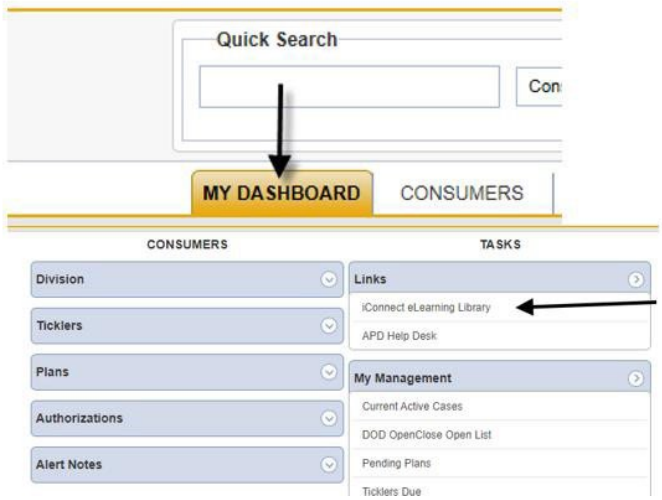
Preceding Training Guide

- This training manual and links to FAQ's for user self-help are available via My Dashboard > My Links > iConnect eLearning Library.



Summary

This training guide covers all aspects of clients enrolling into the DDMC Pilot Program along with documenting the Person-Centered Support Plan, HCBS Waiver Eligibility Worksheet and maintaining the client's record.

Learning Objectives for Case Management Module Training Guide:

- ✓ Develop a working knowledge of the various components of a consumer record, and the navigation thereof.
- ✓ Understand the function of roles within iConnect and how to use them with an established workflow.
- ✓ Understand how to complete tasks associated with the user's daily job responsibilities.

Chapter 1 | Developmental Disabilities Managed Care (DDMC) Pilot Program Enrollment

Introduction

This Chapter outlines the workflow from the point in time when a client on Pre-Enrollment is approved for iBudget Waiver enrollment or the Developmental Disabilities Managed Care (DDMC) Pilot Program.

The process begins with steps completed externally to iConnect when the APD State Office team evaluates and makes a determination of Pre-Enrollment to iBudget Waiver Enrollment Eligibility.

APD State Office will mail interest letters to eligible APD clients (combination interest letters for Pre-Enrollment clients in categories 3, 4, and 5, who reside in the pilot counties and who are eligible for enrollment in the Managed Care Pilot and iBudget Waiver, iBudget Waiver letters for individuals in categories 3, 4, 5 statewide and pilot interest letters for individuals who are in Pre-Enrollment category 6 in pilot counties). Pilot counties include Hardee, Hillsborough, Miami-Dade, Manatee, Monroe, Polk and Highlands. Copies of these interest letters will be uploaded to a Note in the client's record within iConnect.

Regional Pre-Enrollment staff will identify individuals who are approved for iBudget Waiver enrollment in categories 1 and 2 in pilot counties that are age 18 or older. Once identified a notification is sent outside iConnect via the APDEnrollments inbox. State Office monitors the inbox to process interest forms, respond to inquiries, and region's requests to send interest letters to individuals in categories 1 and 2.

State Office staff will mail combination interest letters to individuals in categories 1 and 2 that are 18 years old or older and reside in pilot counties. State Office staff will update the client's iConnect record by uploading the letter to a Note and updating their Pre-Enrollment status from "2 – Waiting" to "3 – Offered".

The individual submits the interest form by mail or email to the APDEnrollments inbox.

State Office will date stamp interest forms for individuals accepting the offers and enter time of receipt on the master spreadsheet along with the individual's response (acceptance or decline).

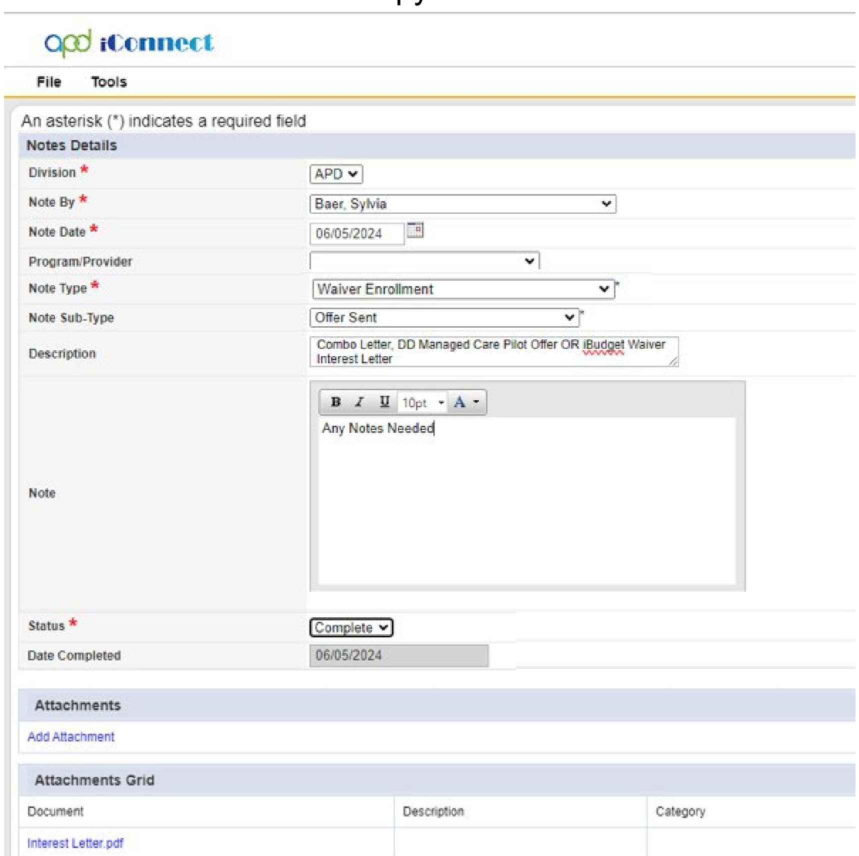
Chapter 2 | iConnect Steps

Document Combo Letter Sent /Update Pre-Enrollment Record

Role: State Office Worker or **State Office Enrollment**

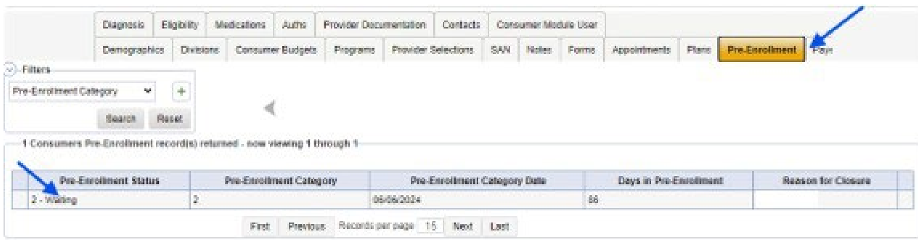
State Office will monitor the APDEnrollments inbox daily to identify clients who need a "Combo Letter" mailed out, prepare combo letter packet and mail out immediately.

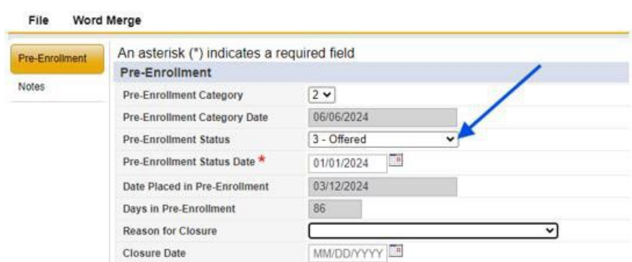
1. State Office will upload each interest letter (those mailed out by State Office) to the client's record in iConnect by adding a new Note record and updating the following fields:
   a. Division = APD
   b. Note Type = Waiver Enrollment
   c. Note Sub-Type = Offer Sent
   d. Description = Combo Letter, DD Managed Care Pilot Offer OR iBudget Waiver Interest Letter
   e. Status = Complete
   f. Attachment = Copy of Offer Letter



2. When finished, click **File > Save and Close Notes**

3. Navigate to the client's **Pre-Enrollment** tab in iConnect, open the existing Pre-Enrollment record and update the following fields:
    a. Pre-Enrollment Status = 3-Offered
    b. Pre-Enrollment Status Date = enter date





4. When finished, click **File > Save Pre-Enrollment** and **File > Close**

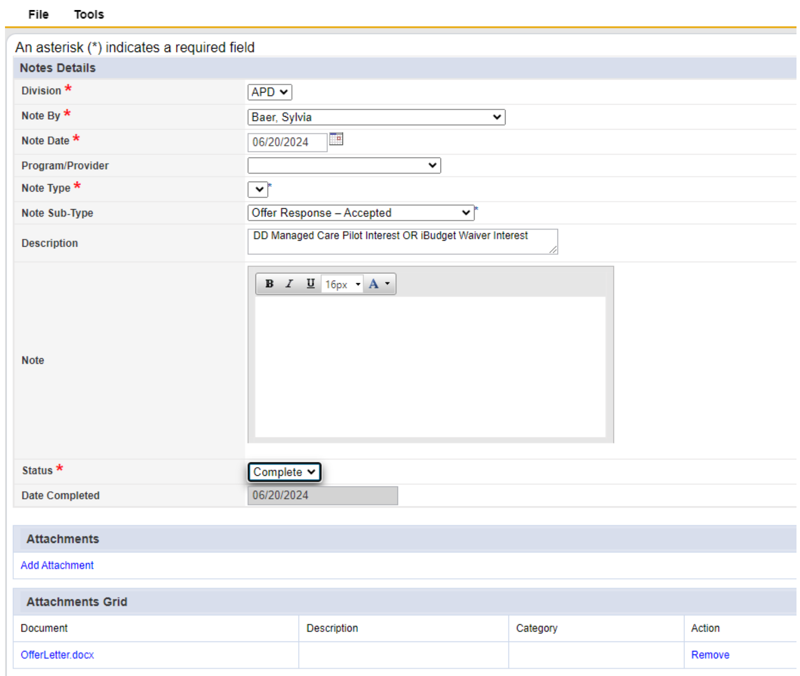
Document Interest Form Received

Role: State Office Worker or **State Office Enrollment**

As the interest forms are **received:**

1. Date stamp all acceptance forms with **postmark date and time 8:00am** or **date/time of email** and enter the **postmark date or email/date time** the interest forms were received in the Master Tracking Spreadsheet for both, the DD Managed Care Pilot and the iBudget Waiver.
2. If the client **accepts** either one of the programs, navigate to the **Notes** tab in the client's record in iConnect. (If the client declines, proceed to step 7.)
   Add a new Note and update the following fields:
    a. Division = APD
    b. Note Type = Waiver Enrollment
    c. Note Sub-Type = Offer Response – Accepted
    d. Description = DD Managed Care Pilot Interest OR iBudget Waiver Interest

e. Status = Complete
f. Upload the client's acceptance document and click **File > Save Notes**

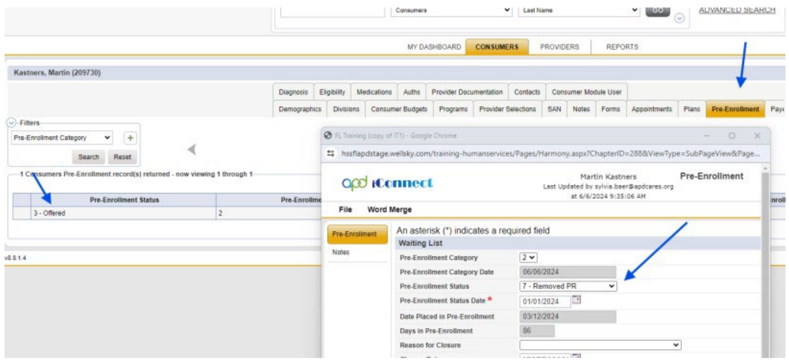


3. Verify that the Questionnaire for Situational Information (QSI) is current.
    a. If the QSI is current, proceed to the next step.
    b. If there is no QSI or the QSI was completed more than 3 years ago, notify the Regional Clinical supervisor by email, request an expedited QSI evaluation, and enter the date the request for the QSI was made in the Master Tracking Spreadsheet.
    c. Once the QSI is complete, the Regional Clinical supervisor will respond to the original email to notify State Office that the QSI is complete. State Office will enter the QSI completion date in the Master Tracking Spreadsheet and proceed to the next step.
4. Verify completion of the Home and Community-Based Services (HCBS) Waiver Eligibility Worksheet (coordinate completion with the Regional Pre-Enrollment Workstream supervisor, if needed) and track the completion in the Master Tracking Spreadsheet.
5. Verify that the client has Medicaid.
    a. If the client already has Medicaid, proceed to the next step.
    b. If the client needs to apply for Medicaid, notify the Regional Pre-Enrollment Workstream supervisor by

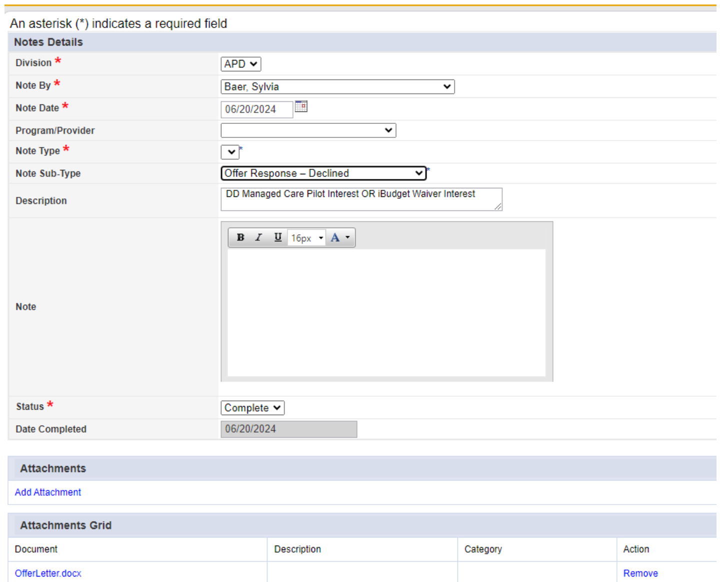
email and request their assistance with guiding the client /legal representative through the Medicaid application process and sending the Form 2515 to DCF as part of this process. Notify APD State Office immediately when the client has been approved for Medicaid.

   c. State Office will provide DCF with a list of clients applying for Medicaid for assistance, as needed, and will track the Medicaid eligibility process in the Master Tracking Spreadsheet.
   d. Once the client has obtained Medicaid, then proceed to the next step.

6. Navigate to the client's **Pre-Enrollment** tab and update the Pre-Enrollment Status to "7-Removed PR" ("PR" = "Pilot Recipient") (Do not change if person requests iBudget Waiver enrollment. This only applies to persons interested in enrolling in the DD Managed Care Pilot.)



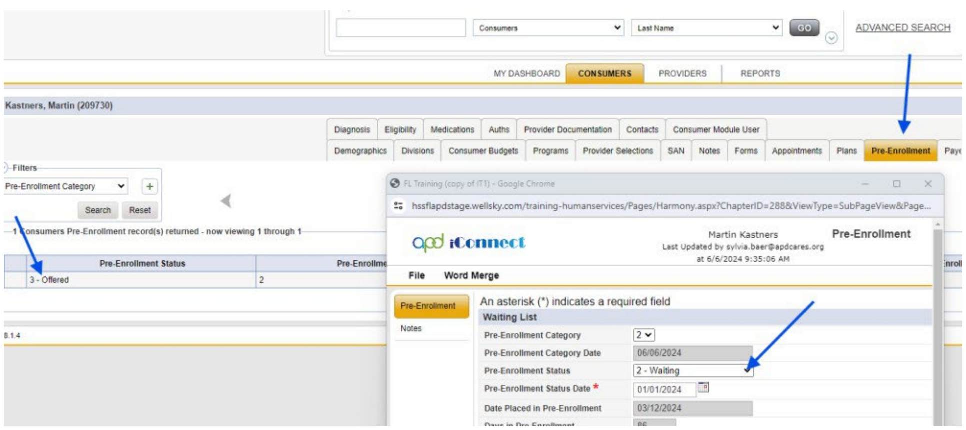
7. If the client **declines** either one of the programs:
   a. Navigate to the **Notes** tab in the client's record in iConnect record, **add a new Note** and update the following fields:
      i. Division = APD
      ii. Note Type = Waiver Enrollment
      iii. Note Sub-Type = Offer Response – Declined
      iv. Description = DD Managed Care Pilot Declined or iBudget Waiver Declined
      v. Note = Explain client's reason for declining the offer and indicate whether the client wishes to remain in Pre-Enrollment status.
      vi. Status = Complete
      vii. When finished, click **File > Save and Close Note**



b. If the client elects to remain in Pre-Enrollment, navigate to the **Pre-Enrollment** tab, open the existing Pre-Enrollment record, and update the following fields:

  i. Pre-Enrollment Status = 2-Waiting

  ii. When finished, click **File > Save Pre-Enrollment** and **File > Close Pre-Enrollment**



c. If the client elects to be removed from the Pre-Enrollment, notify the Regional Pre-Enrollment Workstream Lead by email and request that they follow established closure procedures.

If the interest letter <u>**is returned**</u> due to an incorrect address, State Office staff will follow normal contact procedures to determine if the case should be closed or if the address needs updating in the system.

Every interest letter response will be handled on a first-come-first-serve basis until the maximum number of enrollments has been reached. State Office staff will keep a record of the order in which they were received as described above for possible enrollment in the DD Managed Care Pilot or the iBudget Waiver.

For individuals who meet the enrollment criteria for the DD Managed Care Pilot and are identified as such on the Pre-Enrollment record, the Data Unit will include all clients with a Pre-Enrollment Status = "7-Removed PR" in their daily file to the Florida Agency for Health Care Administration (AHCA) as an indication that those clients meet the criteria for enrollment in the DD Managed Care Pilot on the first of the next month.

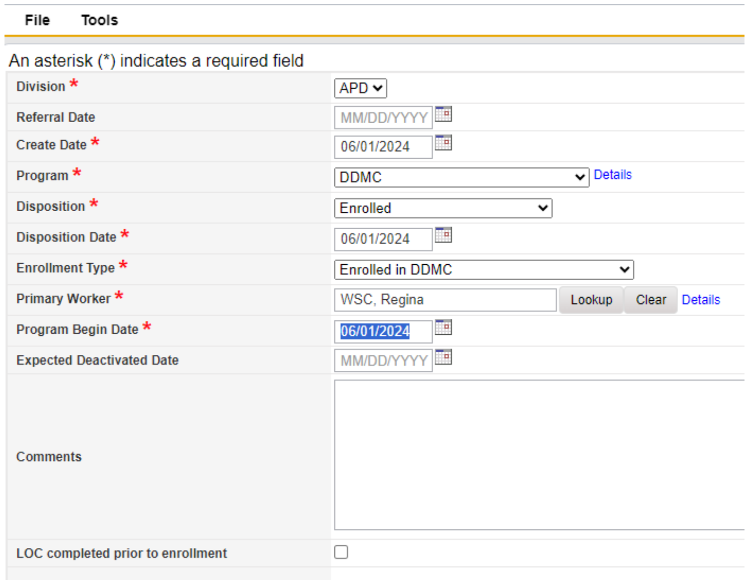
AHCA will send an auto assignment letter to the client once they are officially enrolled onto the pilot program and AHCA will provide APD State Office with the names of all clients enrolled in the DD Managed Care Pilot on a monthly basis.

DDMC Coordinator is Assigned to Client's Record

Role: Role: State Office Worker or **State Office Enrollment**

Once a DDMC Coordinator is assigned to a client, State Office will need to add a Program.

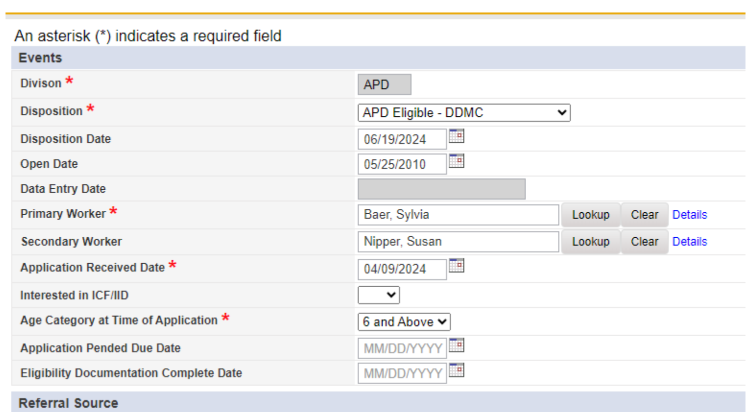
1. Navigate to the client's record and click the **Program** tab. Go to **File** and select **Add Program**. Update the following fields:
    a. Create Date = enter date
    b. Program = DDMC
    c. Disposition = Enrolled
    d. Disposition Date = enter date
    e. Enrollment Type = Enrolled in DDMC
    f. Primary Worker = choose the DDMC Coordinator
    g. Program Begin Date = enter date
    h. File > Save and Close Program



Role: State Office Enrollment

Once the client's record has been updated, the State Office Enrollment will update the Division tab of the client's record.

2. Navigate to the client's record and click the **Division** tab and select the Division in the list view grid. Update the following fields:
    a. Primary Worker = DDMC Coordinator's name
    b. Secondary Worker = Region Pre-Enrollment Lead's name
    c. Disposition = APD Eligible – DDMC
    d. Disposition Date = enter date
    e. File > Save and Close Divisions



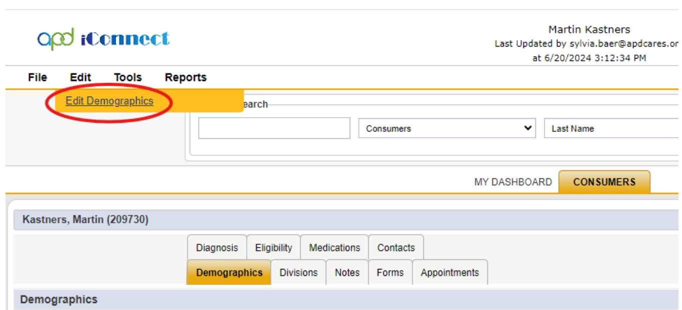
Chapter 3 | Demographics and Contacts

The Care Coordinator must ensure that the Consumer Demographics within iConnect are up to date. The Care Coordinator is responsible for entering, updating and ensuring the accuracy of all demographics and recipient-related information pertinent to the recipient in iConnect. Information includes recipient address, type of residence, living setting, legal representative name, and address (if applicable), employment information and type of benefits received.

The Care Coordinator must update this information within 7 days of becoming aware of the change.

Updating Basic Demographics

1. To begin, log into iConnect and set Role = **DDMC**. Click **Go**
2. Navigate to the Consumer Demographics record and click **Edit > Edit Demographics**

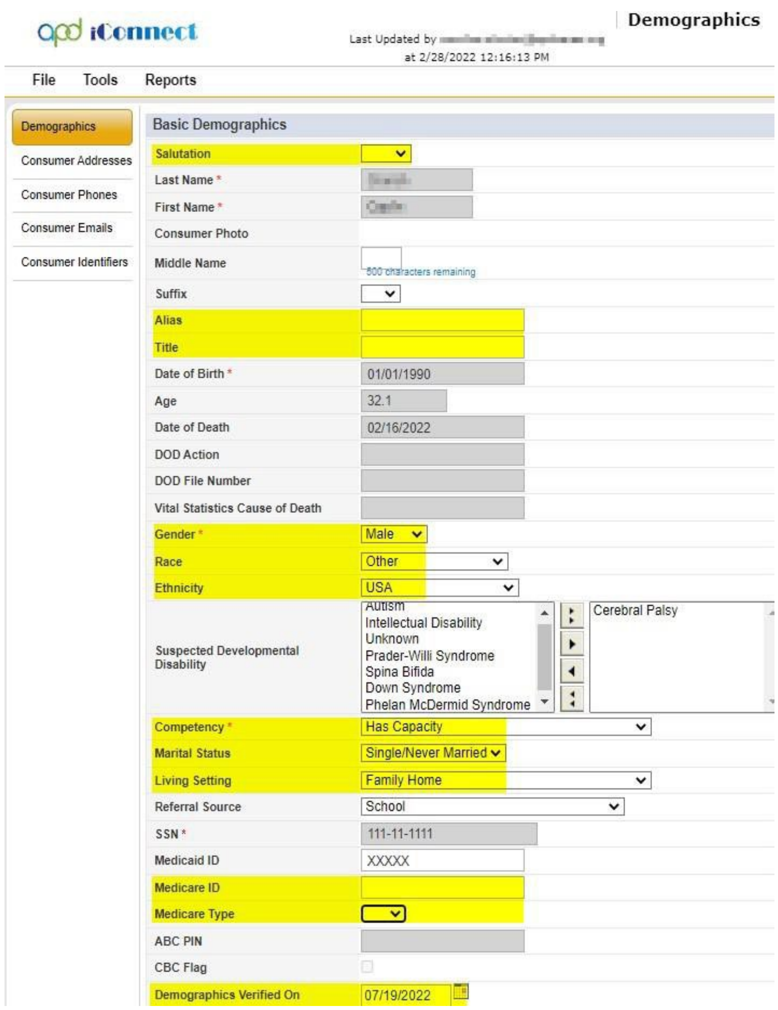


3. The Consumer Demographics Details page is displayed. Update the following fields, as needed:
   a. Salutation = select the client's salutation (Dr., Miss, Mr., Mrs., or Ms.)
   b. Alias = add the client's alias when applicable
   c. Title = add the client's title when applicable
   d. **Gender*** = select male or female
   e. **Race** = select the client's race when known
   f. **Ethnicity** = select the client's ethnicity when known
   g. **Competency*** = select the client's competency
      i. Has been Adjudicated Incapacitated
      ii. Has Capacity
      iii. Incompetent, Guardian Available
      iv. Information not Available
      v. Legally Competent, Cannot Give Consent
      vi. Legally Competent/ Guardian Advocate Appt.
      vii. Minor
      viii. Minor Adjudicated Dependent

ix. Minor, Not Adjudicated Dependent, Parent Available
x. Minor, Not Adjudicated Dependent, Parents Unknown

h. **Marital Status*** = select the client's marital status (Divorced, Married, Separated, Single/Never Married or Widowed)
i. **Living Setting*** = select the client's living setting (see list of definitions in Living Settings Defined)
j. Medicare ID (required* if client has Medicare)
k. Medicare Type (required* if client has Medicare)
l. **Demographics Verified On*** = enter date the Demographics were verified.

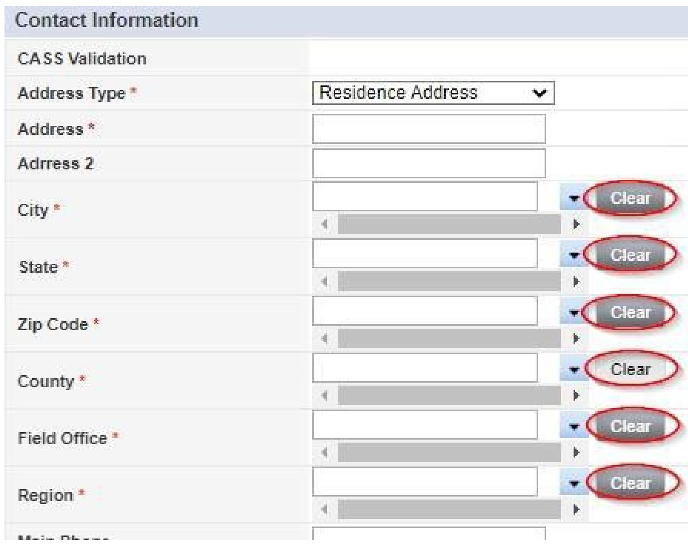
** Best Practice ** If there are no changes to the above listed Demographics, update the "Demographics Verified On" field at the time of the Support Plan to acknowledge that demographics are current and accurate.



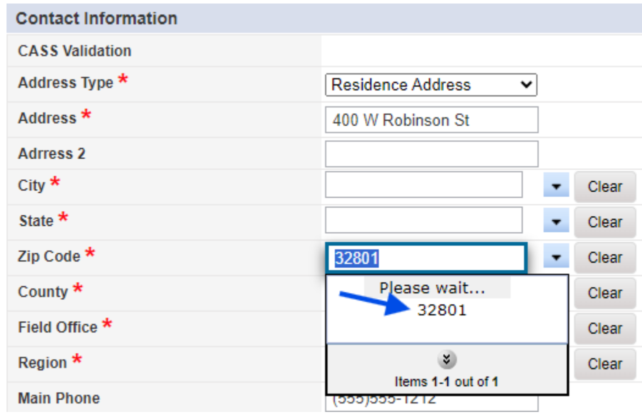
4. Proceed to the next section to update the client's contact information. If no additional information is needed go to **File > Save and Close Demographics**

Updating Consumer Contact Information (ie. Addresses)

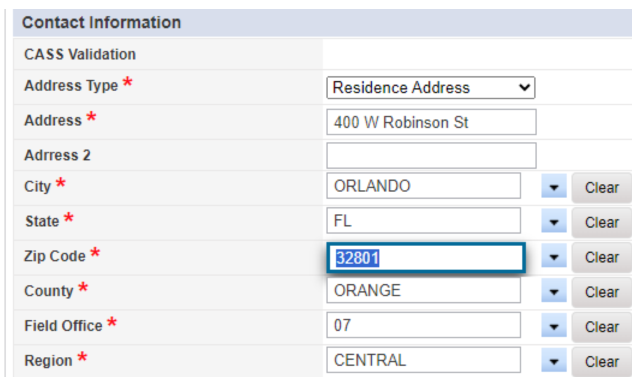
5. If contact information needs to be updated, the Care Coordinator must delete the existing address and use all 6 clear buttons to remove existing data.



6. Update the following fields:
    a. Address Type = The "Residence Address" must always appear here for ALL clients (waiver, pre-enrollment, DDMC Managed Care Pilot Program or other active) and must reflect the individual's physical address. Allow iConnect to auto-populate as indicated. (For further instructions on how to fill out this section for clients without a permanent "Residence Address" (DDDP, ICF, jail, etc.) proceed to the "As Needed: Individuals without a Residential Address.")
    b. Address = current residential address for client (use USPS standard Addresses, for ex. 1234 Felper Rd. or 43210 W. End Ave.)
    c. Address 2 = leave blank unless Apt. or Suite is necessary
    d. Skip to Zip Code = type in current zip code and select the zip code in the selection menu when it appears

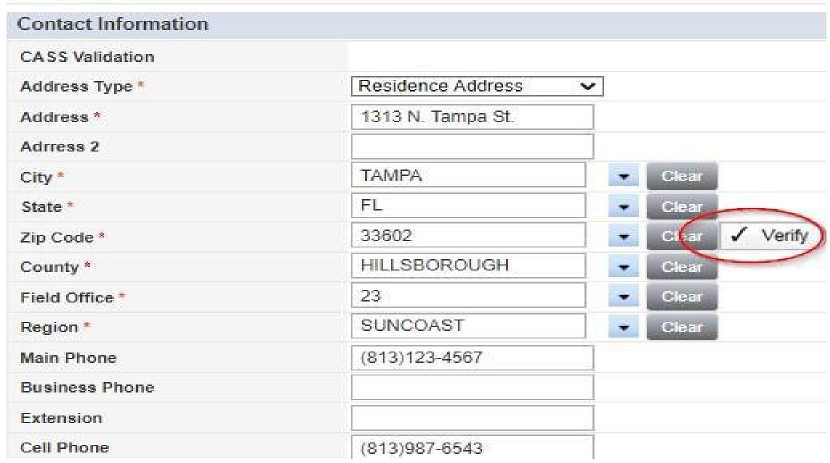


e. The following will auto-populate after entering the zip code. Verify that the information is accurate.
   i. City
   ii. State
   iii. County
   iv. Field Office
   v. Region

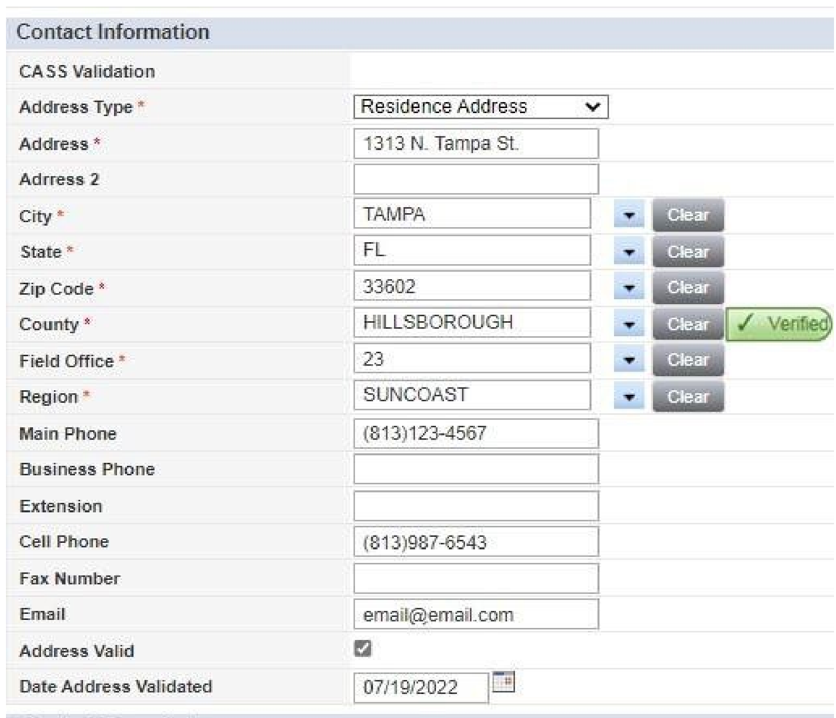


*** Allow time for the address utility to provide the selection. Do not override the system. ***

f. Main Phone = current phone number
g. Business Phone = as applicable
h. Extension = as applicable
i. Cell Phone = current phone number
j. Fax Number = as applicable
k. Email = current email address
l. **Verified** = click Verify



7. This is a valid USPS address so the record updates as valid and the date validated as today.

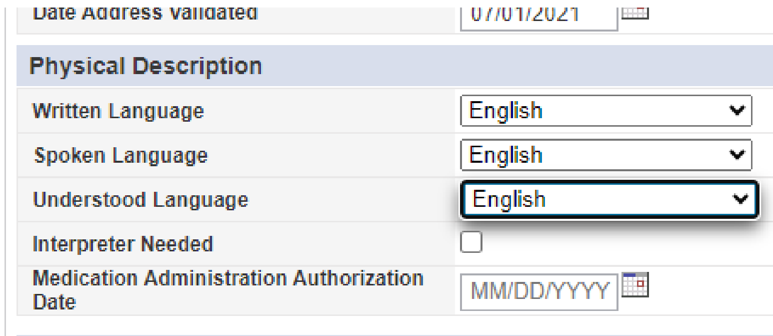


8. Proceed to the next section to update the client's Physical Description fields. If no additional information is needed go to **File > Save and Close Demographics**

Updating Physical Description Fields

9. Update the following fields:
    a. Written Language
    b. Spoken Language

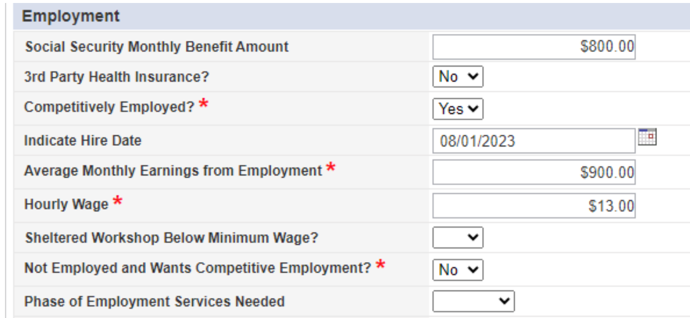
   c. Understood Language
   d. Interpreter Needed
   e. Medication Administration Capacity Date = leave blank



10. Proceed to the next section to update the client's Employment fields. If no additional information is needed go to **File > Save and Close Demographics**

Update Employment Fields

11. Benefit and employment information is required for all APD active clients (Waiver, PE, DDMC Managed Care Pilot, and other active). Update the following fields:
    a. Social Security Monthly Benefit Amount
    b. 3rd party Health Insurance? = select yes or no
    c. Competitively Employed? = select yes or no
        i. If yes, fill out the additional fields:
            1. Indicate Hire Date
            2. Average Monthly Earnings from Employment
            3. Hourly Wage
    d. Not Employed and Wants Competitive Employment = select yes or no
        i. If yes, fill out the additional fields:
            1. Phase of Employment Services Needed = Phase 1 or Phase 2
            2. Referred to VR? = select yes or no
                a. If yes, fill out the additional fields:
                    i. Date of VR Referral
                    ii. VR Response

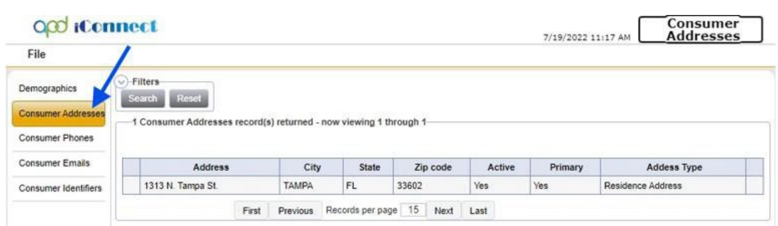


12. Proceed to the next section to update the client's mailing address, if their mailing address is different than their residence. If no additional information is needed go to **File > Save and Close Demographics**

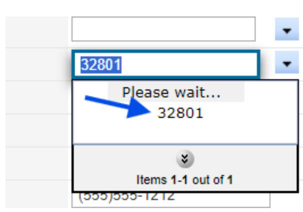
As Needed: Adding/Updating the Mailing Address

1. If a client's mailing address is different than the residence, an additional address must be included within the Consumer's Demographics. Navigate to the client's record and go to **File > Edit Demographics**. Click **Consumer Address** to open a list view grid of address listed for the individual.

2. To enter the Legal Representatives,' contact information proceed to "As Needed Adding Legal Representatives into Contacts Tab" section.



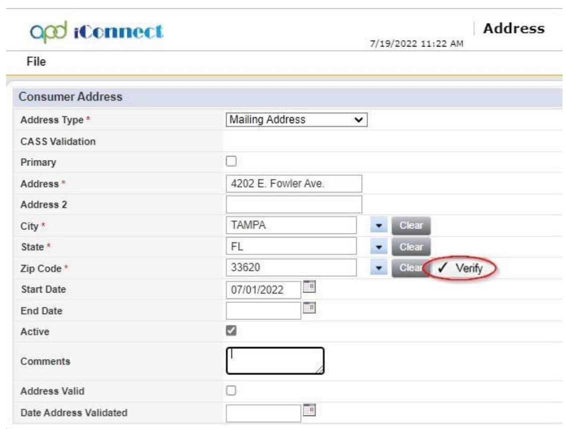
3. The Address page is displayed. Update the following fields as needed:
   a. Address Type = select Mailing Address
   b. Address = current mailing address for client
   c. Address 2 = leave blank unless Apt. or Suite is necessary
   d. Skip to Zip Code and enter the current zip code. Select the zip code that appears in the selection box.



e. The following should auto-populate after entering the zip code. Verify that the information is accurate.
   i. City = current city
   ii. State = current state

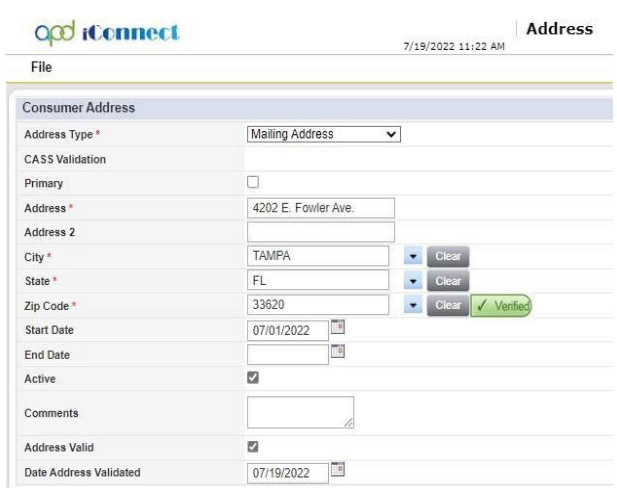
*** Allow time for the address utility to provide the selection. Do not override the system. ***

f. Start Date = start date of mailing address
g. End Date = as applicable
h. Active = check if Active
i. Comments = as needed
j. Address Valid



4. This is a valid USPS address so the record updates as valid and the date validated as today.

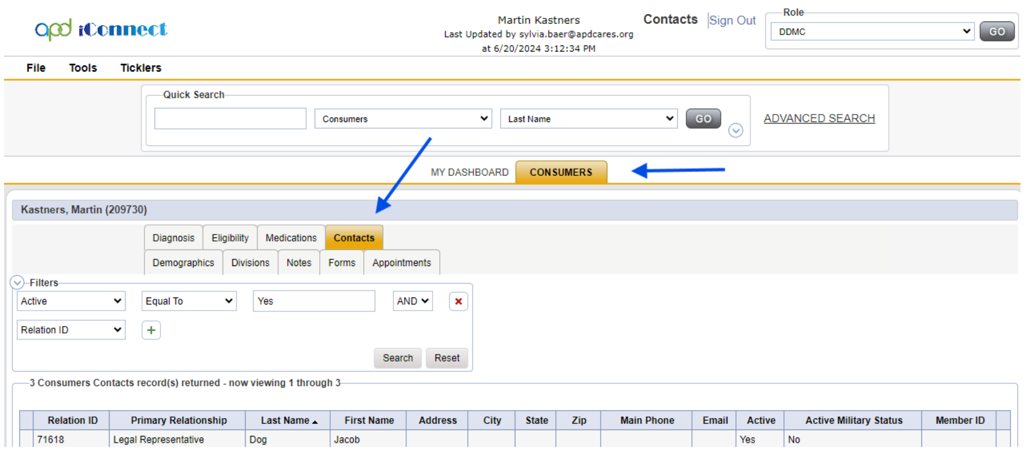
5. Once completed navigate to **File** > **Save and Close.**



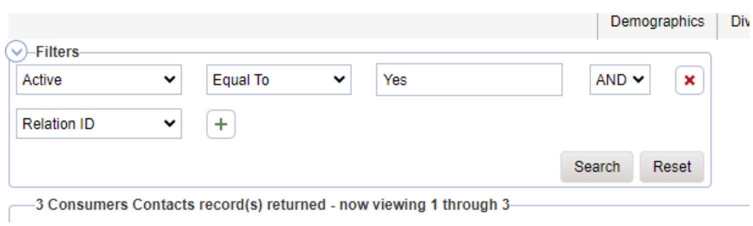
*** To deactivate a mailing address, navigate to the Consumer Addresses bookmark and uncheck the Active box. Once completed, go to File and select Save and Close. ***

As Needed: Adding Legal Representatives into Contacts Tab

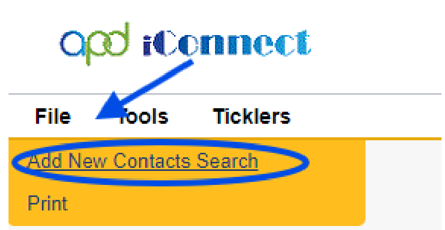
1. If the client has a legal representative or if there is a change in the legal representative, the Care Coordinator will make the necessary updates in iConnect. Navigate to the client's record and click the **Contacts** tab.



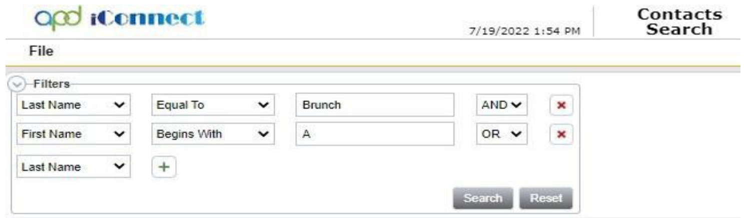
2. The list view grid will display showing the current contacts associated with the client's record. It is important to note that the filters feature is automatically activated, and the list view grid will only show the Active contacts. The filters can be edited as needed.



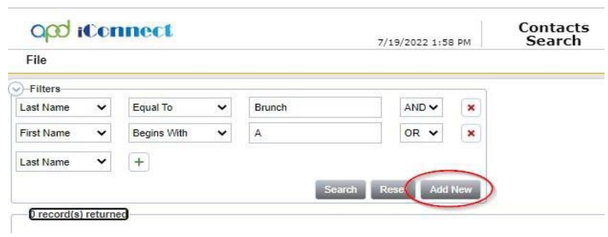
3. To add a new Contact, navigate to **File > Add New Contact Search**



4. iConnect requires a search to be done to avoid duplication. Enter the Last Name and First Name of the Contact. Press **Search**.

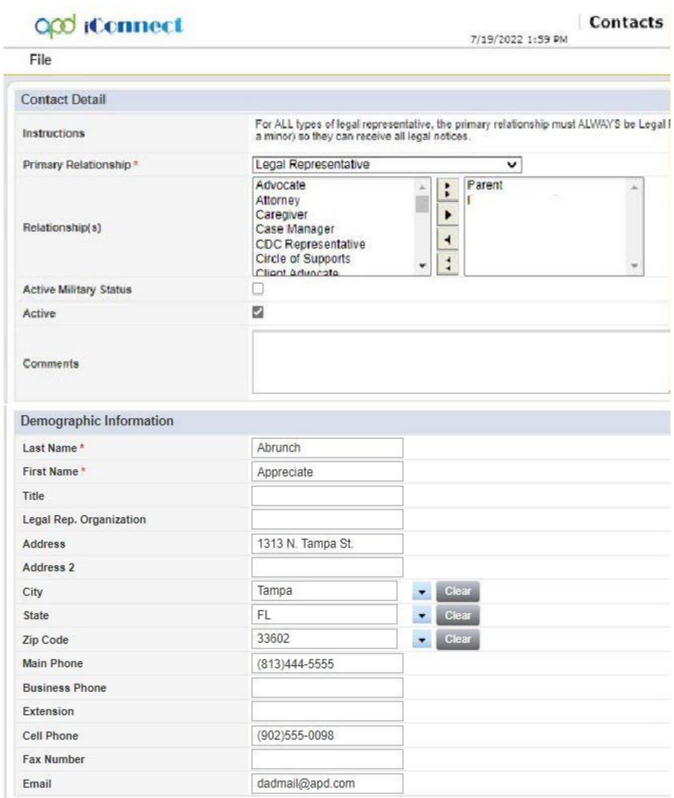


5. The user has searched for an existing contact record but did not find a match in iConnect. A new contact record will be added. Select the **Add New** button.



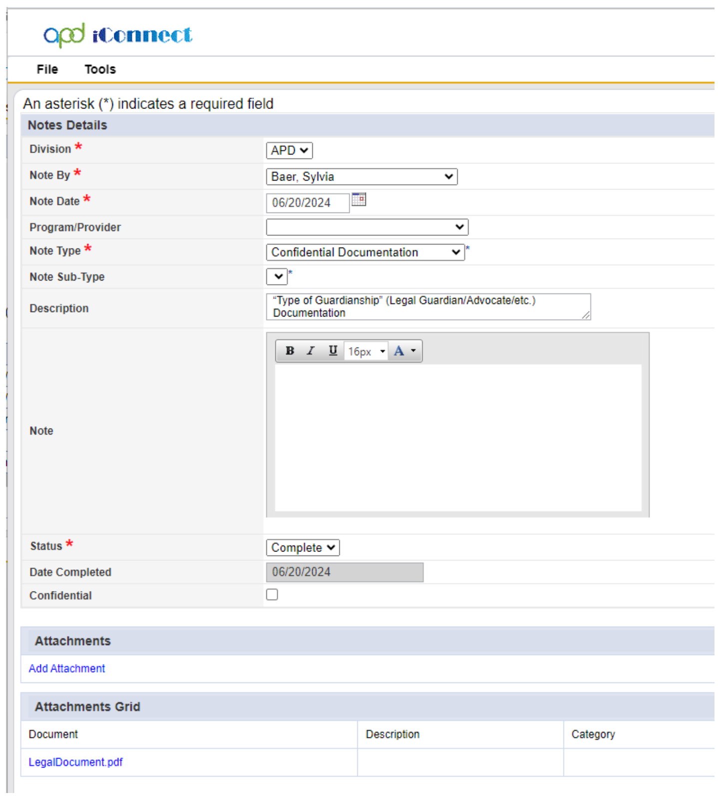
6. The Consumer Contacts Details page is displaced. Update the following fields as needed:
   a. Primary Relationship = Legal Representative
      i. Always use Legal Representative as the Primary when the client has a Legal Representative. However, if an adult client does not have a Legal Representative, please select the appropriate Primary Relationship that is **not** Legal Representative.
   b. Relationship(s) = select one of the following applicable relationships:
      i. Guardian
      ii. Guardian Advocate
      iii. Power of Attorney
      iv. Durable Power of Attorney
      v. Parent – If the consumer is a minor, the Primary Relationship should still be selected as Legal Representative and then Parent may be selected from the Relationship(s) menu. **Do not select this option for adults from whom the parent is not the legal representative.**
      vi. Medical Proxy
   c. Active Military Status
   d. Active
   e. Comments
   f. Last Name
   g. First Name
   h. Title

i. Legal Representative Organization
j. Address
k. Address 2
l. City
m. State
n. Zip Code
o. Main Phone
p. Business Phone
q. Extension
r. Cell Phone
s. Fax Number
t. Email



7. **File > Save and Close Contacts.**
8. The Care Coordinator will then upload the legal documentation showing that the client has a legal representative if the client is not a minor or if the client is a minor, the legal representative is not their parents.
9. The Care Coordinator will navigate to the **Notes** tab of the client's record.
    a. In the Notes tab, go to **File > Add Notes**
    b. The Notes detail page will display. Fill out the following fields:
        i. Division = APD
        ii. Note By = defaults to worker's name

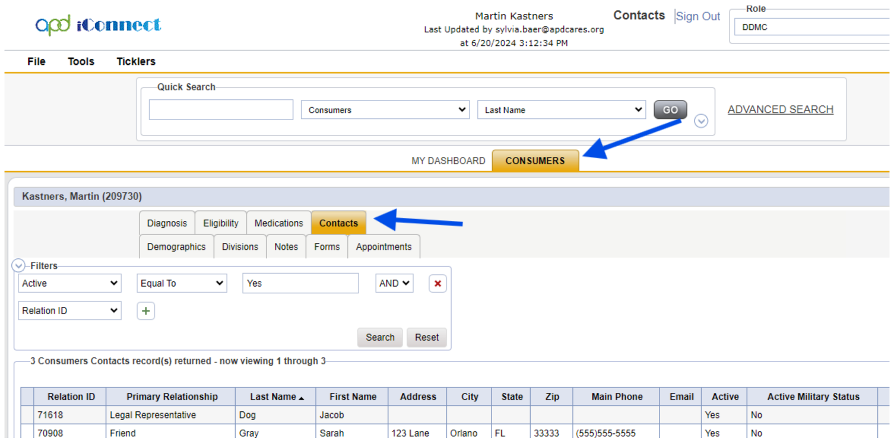
iii. Note Date = today’s date
iv. Note Type = Confidential Documentation
v. Description = “Type of Guardianship” (Legal Guardian/Advocate/etc.) Documentation
vi. Note = as needed
vii. Status = Complete
viii. Attachment = add the legal documentation of the client’s guardianship/legal representative. For further instructions on how to add an attachment precede to [“Notes in iConnect.”]



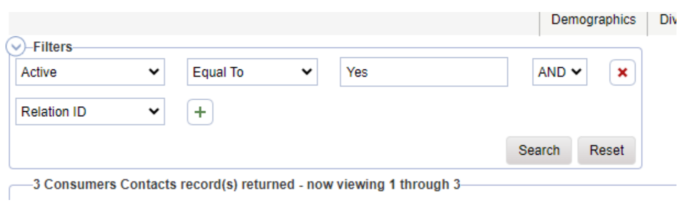
c. File > Save and Close Notes

As Needed: Adding New Contacts into Contacts Tab

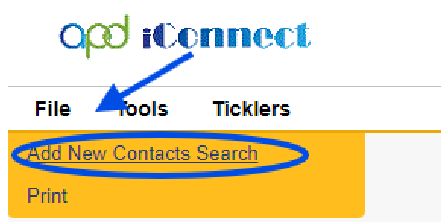
1. If the client has a new Contact, the Care Coordinator will make the necessary updates in iConnect. Navigate to the client’s record and click the **Contacts** tab.



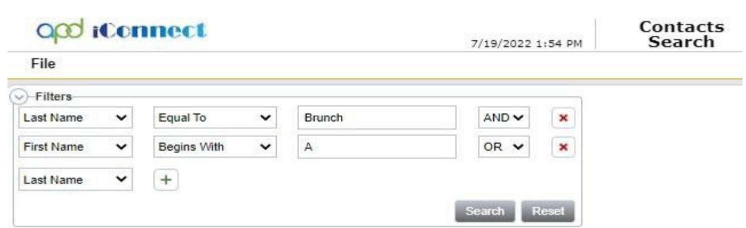
2. The list view grid will display showing the current contacts associated with the client's record. It is important to note that the filters feature is automatically activated, and the list view grid will only show the Active contacts. The filters can be edited as needed.



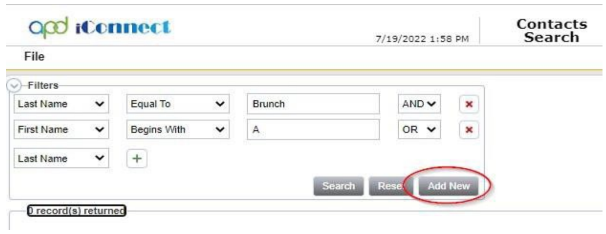
3. To add a new Contact, navigate to **File > Add New Contact Search**



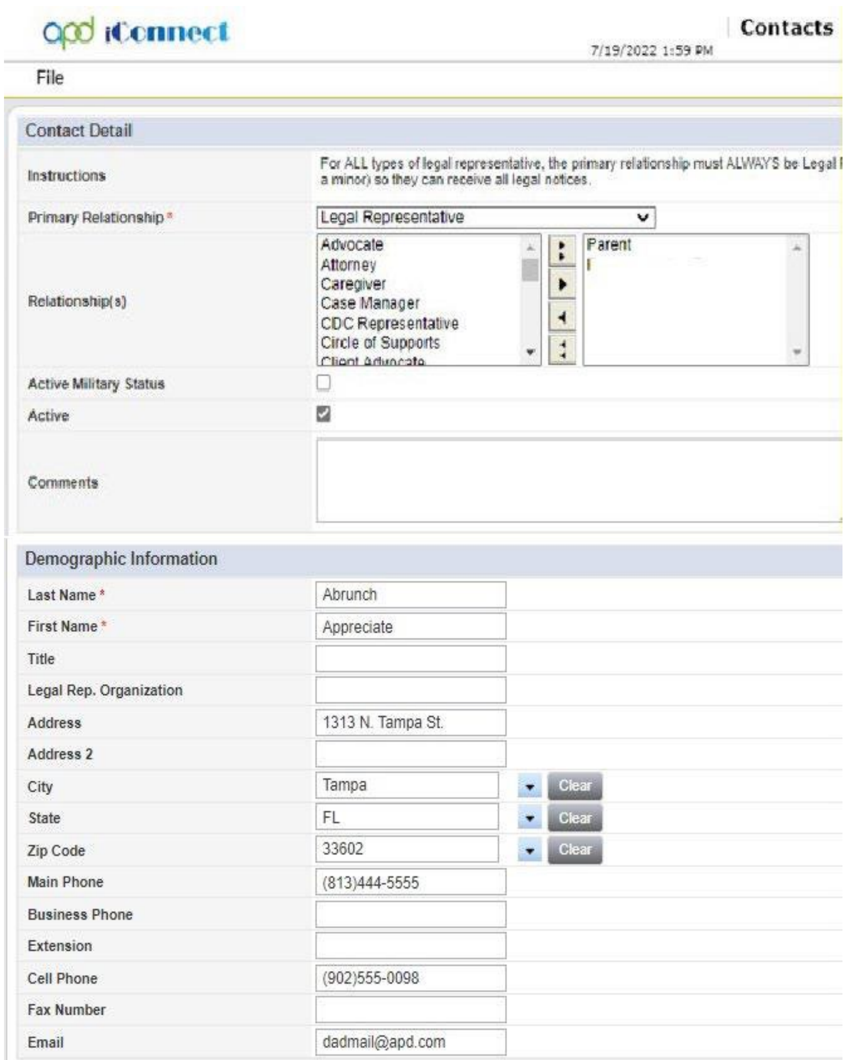
4. iConnect requires a search to be done to avoid duplication. Enter the Last Name and First Name of the Contact. Press **Search**.



5. The user has searched for an existing contact record but did not find a match in iConnect. A new contact record will be added. Press the **Add New** button.



6. The Consumer Contacts Details page is displayed. Update the fields as needed.



7. **File > Save and Close Contacts**

Living Settings Defined

Agency for Persons with Disabilities (APD) iConnect Living Settings Released 2/10/2020

Please choose the appropriate living setting in iConnect based on the definitions below.

AHCA Licensed Adult Family Care Home: A residential Adult Family Care Home designed to provide personal care services to individuals requiring assistance. The provider must live in the home and offers personal services for up to 5 residents.

AHCA Licensed Assisted Living: An Assisted Living Facility designed to provide personal care services in the least restrictive and most home-like environment. These facilities can range in size from one resident to several hundred and may offer a wide variety of personal and nursing services designed specifically to meet an individual's personal needs.

AHCA Licensed Private ICF: A privately owned and operated Intermediate Care Facility in Florida.

AHCA Licensed Nursing Home: A nursing home operated in Florida.

APD Developmental Disabilities Center: A public Intermediate Care Facility, owned and operated by APD, at either the Sunland Center (in Marianna) or Tacachale (in Gainesville).

APD Developmental Disabilities Defendant Program: A secure APD-operated residential facility (located on the grounds of Florida State Hospital in Chattahoochee or the Pathways program in Marianna) to which individuals are court-ordered for placement as a result of felony charges.

APD Licensed Facility - Foster Home (Capacity 1-3): An APD licensed foster home with the capacity of no more than 3 individuals.

APD Licensed Facility - Large Group Home (Capacity 7-15): An APD licensed group home with the capacity of 7 to 15 individuals.

APD Licensed Facility - Residential Habilitation Center: An APD licensed facility which includes either the Duvall

Home's Allgair Cottage in Volusia County or the United Community Options Hope Center in Dade County.

APD Licensed Facility - Small Group Home (Capacity 4-6): An APD licensed group home with the capacity of 4 to 6 individuals.

DCF Licensed Home - Foster Home (Capacity 1 to 3): A foster home licensed by DCF with the capacity of no more than 3 individuals.

DCF Licensed Home - Small Group Home (Capacity 4 to 6): A facility licensed by DCF with a capacity of 4 to 6 individuals.

DCF Licensed Home - Large Group Home (Capacity 7 to 15): A facility licensed by DCF with a capacity of 7 to 15 individuals.

DCF Commitment Facility: A forensic facility operated by DCF for individuals who are found incompetent to proceed on a felony offense or acquitted of a felony offense by reason of insanity, such as Florida State Hospital.

Department of Juvenile Justice Facility: A residential program or detention facility for youth required by the court system to stay in the care of the Department of Juvenile Justice.

Family Home: The primary residence occupied by the client and member(s) of the family including parents and siblings, including stepchildren, stepparents, stepsiblings and in-laws.

Hospital – Non-Psychiatric: A hospital placement for medical treatment.

Hospital – Psychiatric: A hospital placement for the purpose of treatment and the implementation of interventions to reduce symptoms of mental illness.

Independent Living: A client's own home where they live without Personal Supports or Supported Living Coaching.

Jail/Prison: Incarcerated in a state prison or county jail.

Supported Living: A client's own home where they live and receive Personal Supports and/or Supported Living Coaching, and that home is available for lease or sale to individuals in the community.

As Needed: Individuals without a Residential Address

How to add a Residence Address in iConnect for APD consumers without a Residence Address

Below are instructions on how to document residence address and “home” Region for clients who are homeless or in a different Region at DDDP, in an ICF, jail, hotel, etc. iConnect is programmed to only show a “Region” designation when there is a “Residence Address” type. In the example below, the client is at DDDP in Chattahoochee with a “Temporary Address,” but his home region is Suncoast, so DDDP cannot be designated as the “Residence Address,” or it will incorrectly designate Northwest as his home Region:

Contact Information	
Address Type	Temporary Address
Address	PO Box 1000
Address 2	Dddp
City	Chattahoochee
State	FL
Region	
Zip Code	32324

The details in the Consumer Address screen show that he has two “Temporary Addresses” (one for DDDP and one for the jail in Tampa). This client has no real residence address and no legal representative:

2 Consumer Addresses record(s) returned - now viewing 1 through 2

Address	City	State	Zip code	Active	Primary	Addess Type
520 Falkenburg Road	TAMPA	FL	33619	No	No	Temporary Address
PO Box 1000	Chattahoochee	FL	32324	Yes	Yes	Temporary Address

<< First < Previous Retrieve 15 Records at a time Next > Last >>

When State Office runs reports his Region designation is blank because he does not have a “Residence Address”:

Contact Information			
Address Type	Temporary Address	County	
Address	PO Box 1000	Field Office	
Address 2	Dddp	Main Phone	(813) 247-8300
City	Chattahoochee	Business Phone	
State	FL	Cell Phone	
Region		Email	
Zip Code	32324		

Below are the instructions on how to document a “Residence Address” for someone who does not have one:

For clients with no home residence address and no legal representative:

1. Add the Regional APD address as the client's "Residence Address"

2. Update the following fields:
   a. Address = enter the corresponding Regional Street Address
   b.
   c. Address 2 = enter the word: "Non-Residence"
   d. City = enter the Regional APD city
   e. State = FL
   f. Zip Code = "home" Region Zip Code
   g. Main Phone = enter APD Regional office main phone

3. The correct "home" Region will show up in iConnect

4. The "Residence Address" must be updated when (or if) a client moves into a more permanent living setting (such as family home, group home, own home, supported living, etc.) in the "home" Region.

For clients with no home residence address who have a legal representative residing in the "home" Region:

1. Add a "Residence Address"
2. Enter the legal representative address
3. Validate address as usual
4. The correct "home" Region will show up in iConnect

For clients with no home residence address who have a legal representative residing in another Region (or State) enter the Regional APD address as indicated in "A" above.

Add as many "Temporary Addresses" as necessary and mark the client's physical location as "primary.

Chapter 4 | Support Plan

Introduction

The Person-Centered Support Plan (PCSP) must be created in iConnect. Based on the Consumer/Legal Representative's responses to questions in the QSI Assessment, iConnect uses Copy Shared Responses functionality to import QSI responses directly into the PCSP. The Care Coordinator will review the QSI responses and address those needs during person-centered planning.

Once the Care Coordinator has completed the PCSP process, the PCSP will be created in a form in iConnect.

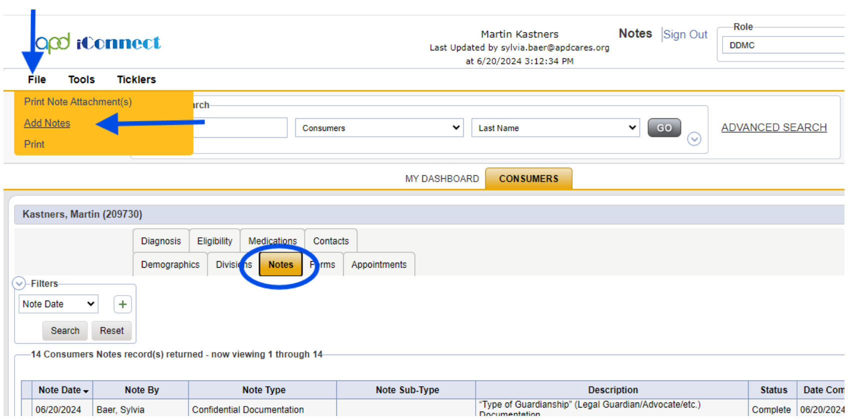
Schedule the Support Plan

Role: DDMC

Upon enrolling the client into the DDMC Pilot Program the Care Coordinator will schedule the initial face to face meeting within 5 days of enrollment and begin the support planning process.

1. Contact the individual to schedule the PCSP meeting and to identify PCSP participants. Document each contact in a Note in the client's record.

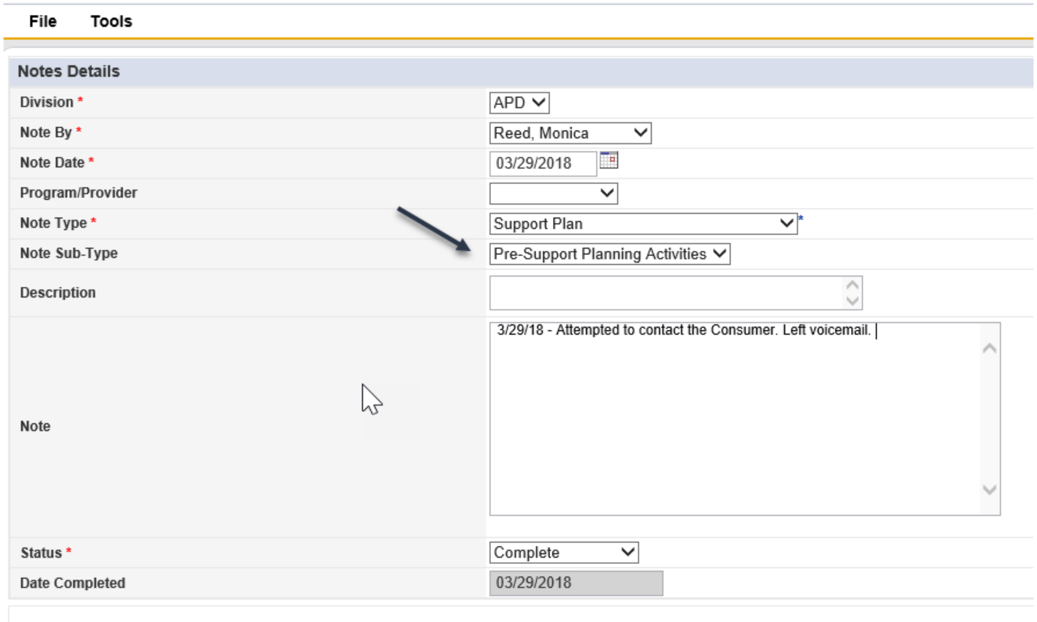
2. To do so, navigate to the Consumer's record and click on the **Notes** tab > **File > Add Note**:



3. In the new Note record, update the following fields:
    a. Division = APD
    b. Note Type = Support Plan
    c. Note Sub-Type = Pre-Support Planning Activities

d. Status = Complete

4. When finished, click **File** > **Save and Close Note.**



5. Upon identifying Consumer Participants, add them to the client's record. Use [“As Needed: Adding New Contacts into Contacts Tab”]() for further instructions.

6. Upon identifying the client's PCSP participants, reach out to invite them to participate in the PCSP meeting. Document each participant outreach attempt in a Consumer Note. To do so, navigate to the client's record and click on the **Notes** tab **> File > Add Note**.
   a. In the new Note record, update the following fields:
   b. Division = APD
   c. Note Type = Support Plan
   d. Note Sub-Type = Pre-Support Planning Activities
   e. Status = Complete
   f. When finished, click **File** > **Save and Close Note.**

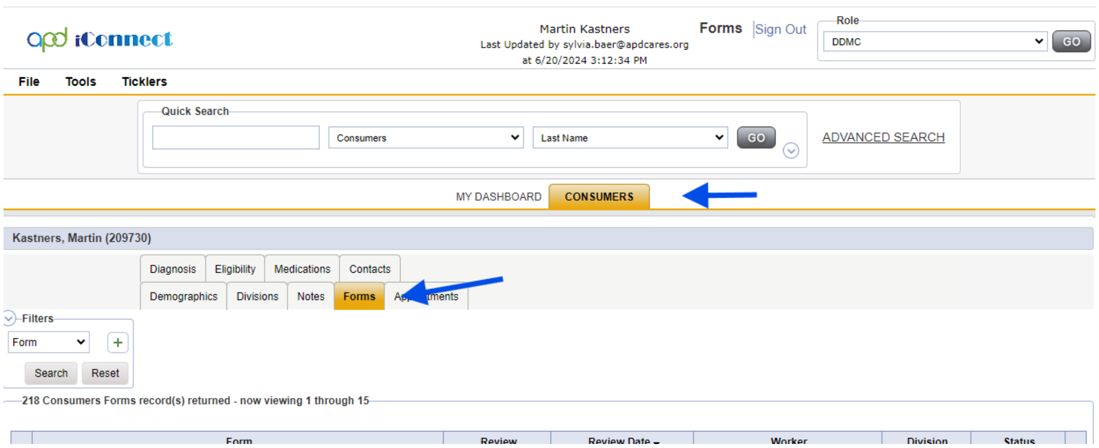
7. Prior to conducting the Initial Support Plan/Support Plan meeting, the Care Coordinator will prepare the documentation. Care Coordinators will take a meeting signature sheet to the Initial Support Plan/Support Plan meeting with the client. A blank PCSP output report is printed. It will be filled out when face to face with the consumer and then keyed into the PCSP form in iConnect.

Create the Support Plan

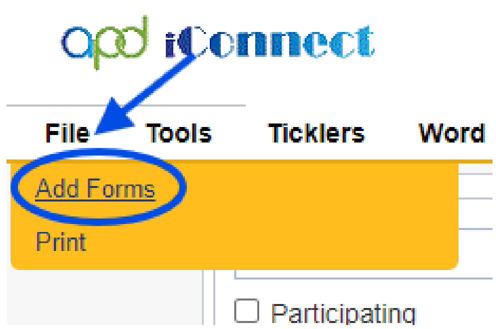
Role: DDMC

1. To begin, log into iConnect and set Role = **DDMC**. Click **Go.**

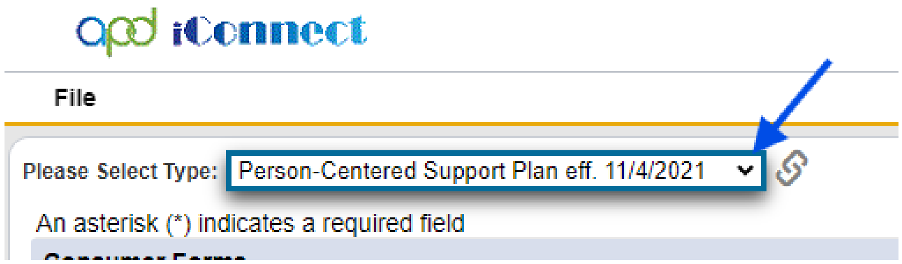
2. Navigate to the client's record and click on the **Forms** tab:



3. To add a new PCSP, use **File** and select **Add Form**.



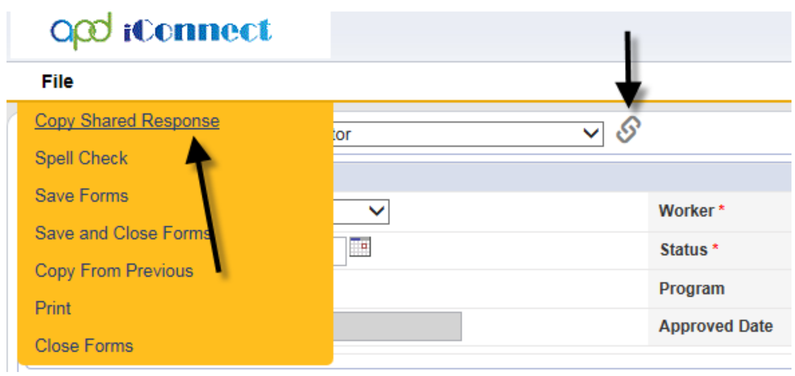
4. A new Form Details window displays. In the "Please Select Type:" dropdown, choose the Person-Centered Support Plan eff. 11/4/2021



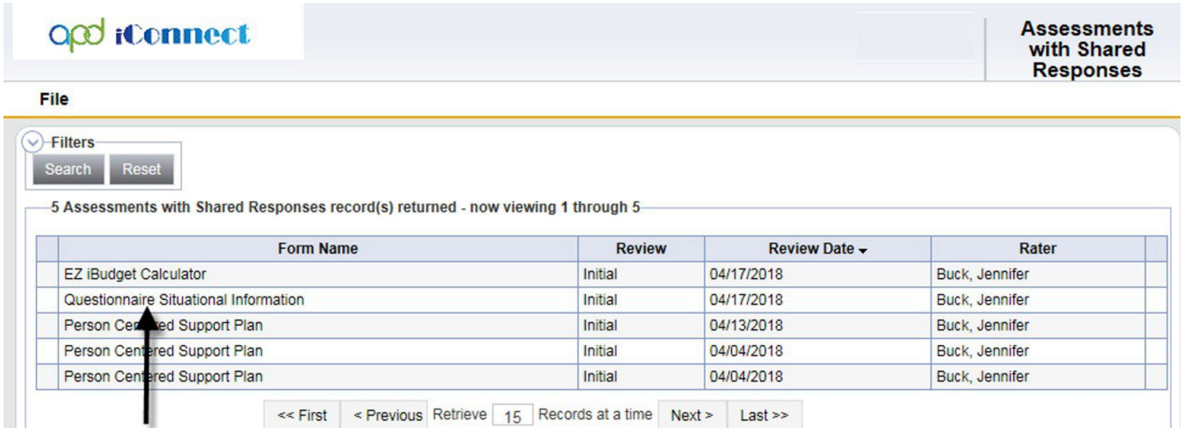
5. Complete the header information. In the header of the form, update the following fields:
   a. Review = Initial
   b. Status = Open

NOTE: There should be only one PCSP for the year. The Care Coordinator will leave the status = Open and make changes to the same form when there is an update vs. creating a new form each time there is an update.

6. Information from other forms such as the QSI Assessment can be copied over into the PCSP record automatically using the Copy Shared Response functionality in iConnect.
7. The Care Coordinator will select **File > Copy Shared Response** and select the QSI Assessment from the list of available forms.



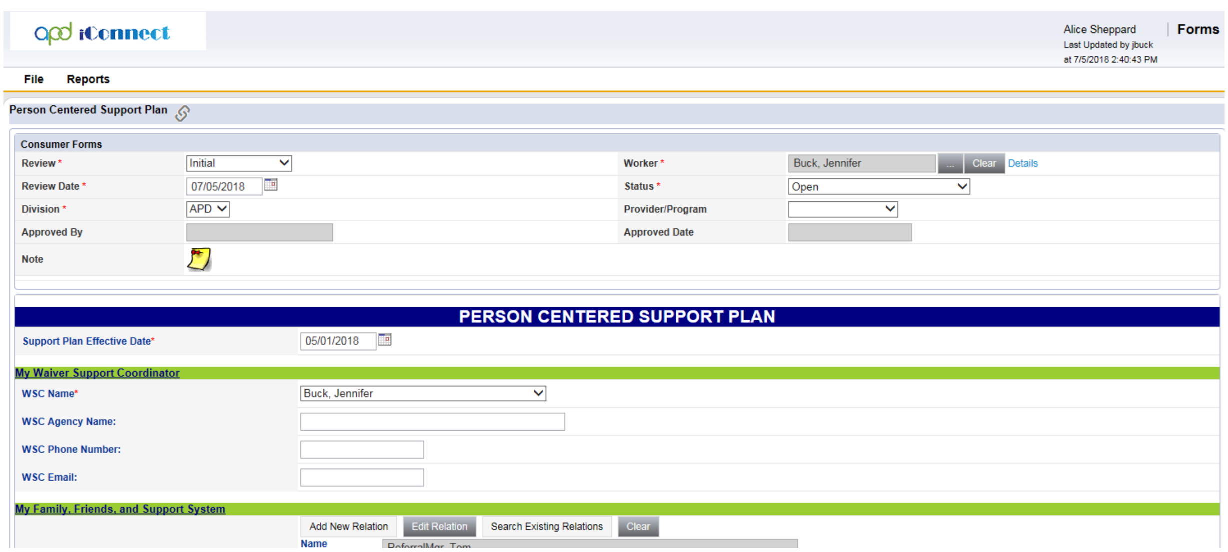
8. A list of Assessments with Shared Responses is displayed. Select the QSI form.



9. Once selected, the system will pull the information from the QSI to fill in the scores of the QSI section on the PCSP form.

10. Please note that the PCSP in iConnect should be filled out in the same way as the hard copy PCSP. For questions related to what type of information should be included in the various sections of the PCSP, please refer to the Person-Centered Support Plan Training modules found on the APDcares.org website.

11. Update all remaining fields.



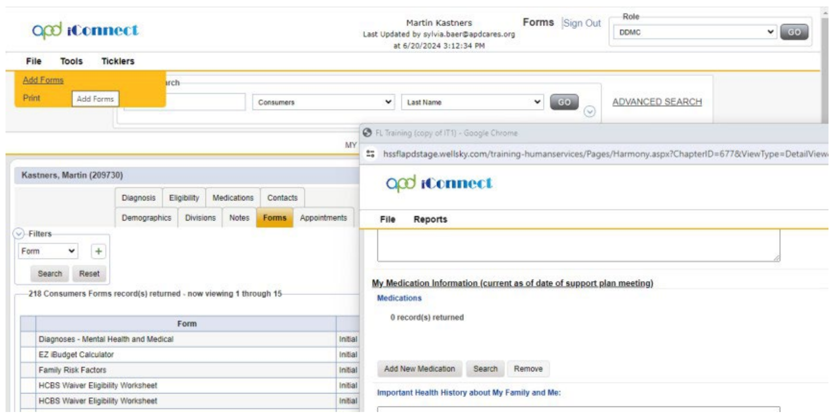
12. When finished, click **File** > **Save and Close Forms**.

Add Medication

The Care Coordinator can add a medication in the Medication tab of the client record or add a medication from the PCSP form, which will go to the Medication tab of the client record.

Add a new Medication from a Form

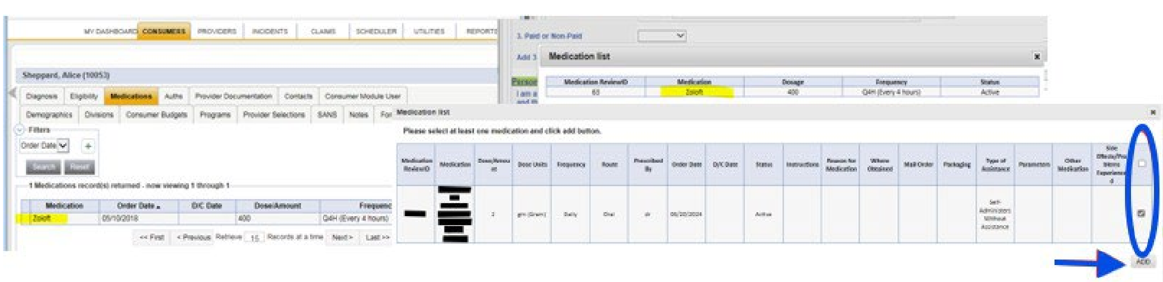
1. To add a new medication from within the PCSP, the Care Coordinator will either add a new PCSP or open the existing PCSP.



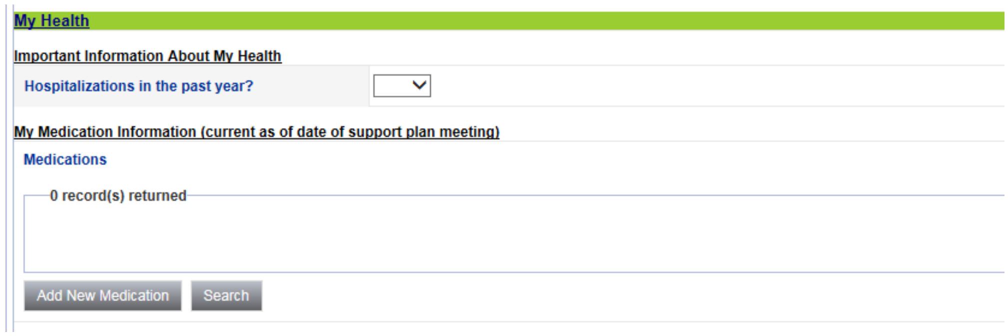
2. Medications are captured in the Medications tab of iConnect and can be added to the PCSP without the Care Coordinator re-typing the information.

3. Care Coordinators can also add new medications from the PCSP form and the medication will be added to the PCSP and the Medications tab of iConnect.

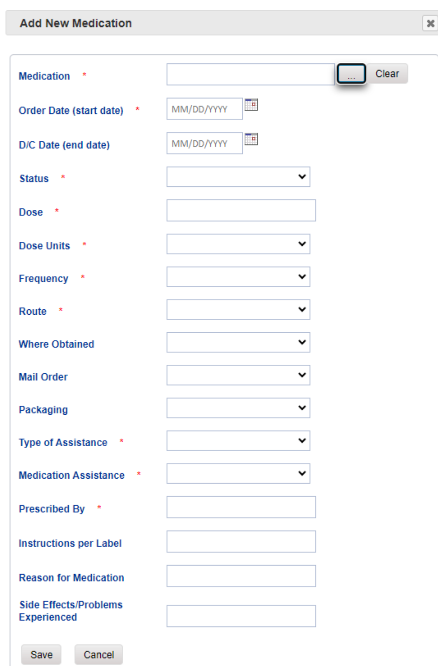
4. To add an existing medication from the Medication tab to the PCSP, select **Search** and a list of medications from the Medications tab of the client's record will be displayed. Select the check box for each medication that needs to be added to the PCSP. Click ADD to insert the medication into the PCSP.



5. To add a new medication from the PCSP that will be added to the PCSP form and to the Medication tab, use the Medication Control on the PCSP form.
6. In the My Health section of the PCSP form, select **Add New Medication.**



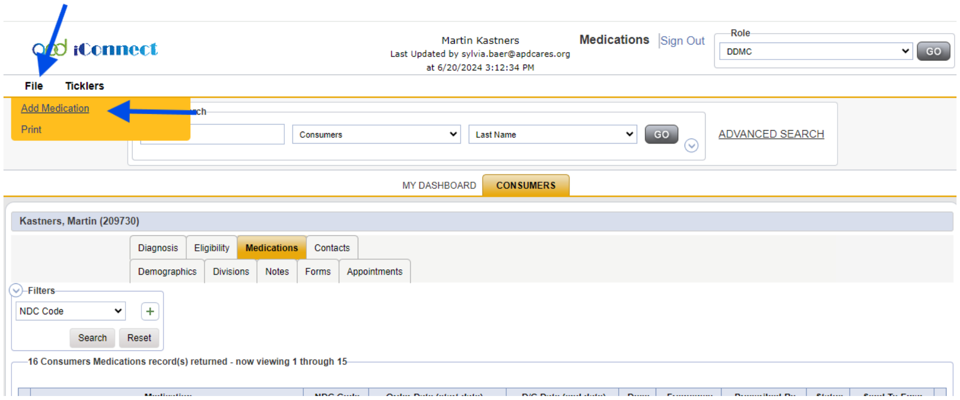
7. The Medication search window opens. Begin typing the name of the medication. Matching values are displayed. Select the medication and complete the remaining fields. If the medication does not auto populate in search, type in "Other" in the Medication search. Select "Other" and then a new text box will display "Other Medication." Type in the name of the Medication in the text box.



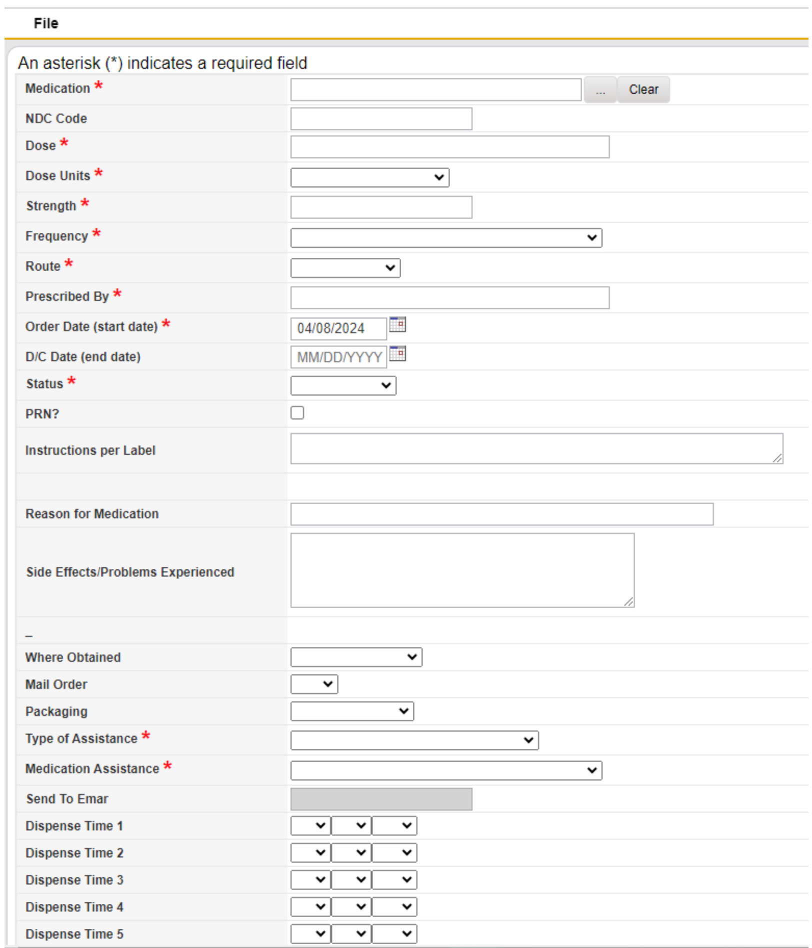
8. Once complete, select **Save and Close**. The page will refresh with the medication information section completed.
9. **Save and Close the PCSP** form.

Add Medication to the Medication Tab

1. Navigate to the **Medication** tab on the client's record.
2. Go to **File > Add Medication**.



3. Complete the Medication details page.



4. If the medication does not auto populate in search, type in "Other" in the Medication search. Select "Other" and then a new text box will display "Other Medication." Type in the name of the Medication in the text box.

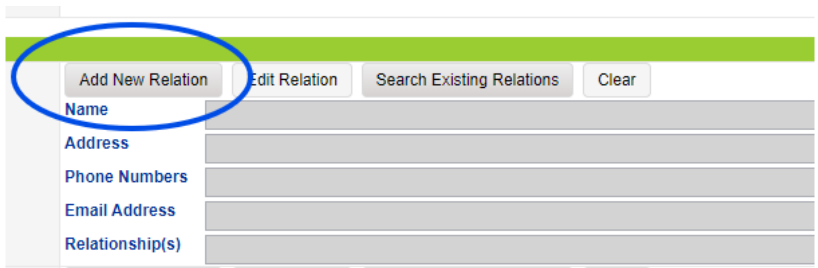
5. When complete, select **File** > **Save and Close Medication**. Repeat this process for each Medication.

Add Contacts

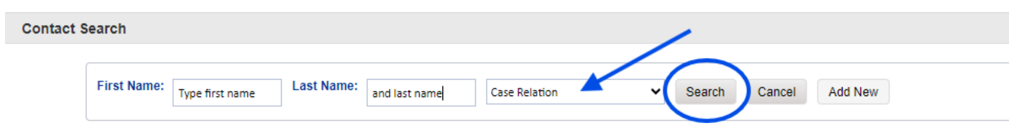
Similar to adding the Medication, a Contact can be added into the Contacts tab or in the PCSP. When adding a Contact into the PCSP, that Contact will also be added to the Contacts tab.

Add a new Contact from a Form

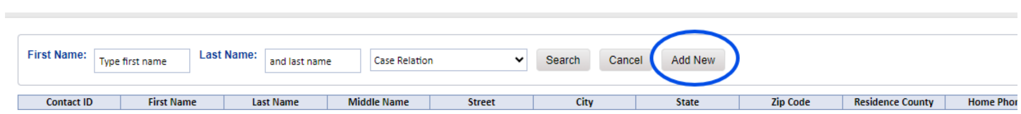
1. In the PCSP, there are buttons that say Add New Relation and Search Existing Relations. To add a new relation, select the **Add New Relation** button.



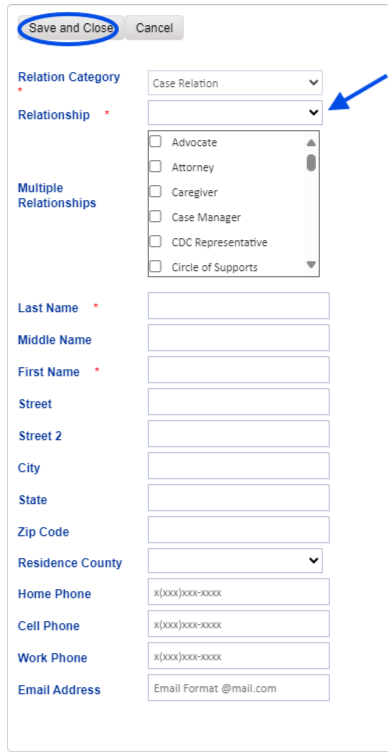
2. Enter the Name of the new contact in the text box as instructed. Change the Family Relation to Case Relation. **Every Relation in iConnect is a Case Relation**. Press **Search.**



3. After the Search, a list view grid will appear. If there are no contacts with that name, select the **Add New** button.



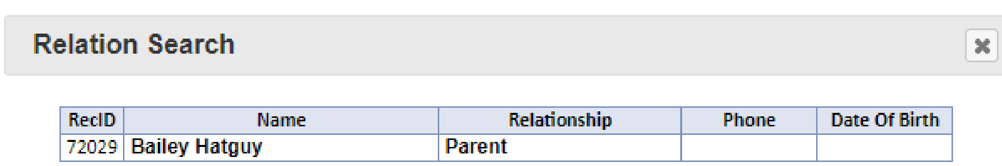
4. Fill out the New Relation as indicated. Choose the primary relationship from the drop-down menu titled “Relationship.” Once completed, press **Save and Close**.



Search an Existing Contact from a Form

1. To add an existing contact to a form, select the **Search Existing Relations** button.

2. Click the proper contact to add them to the form.

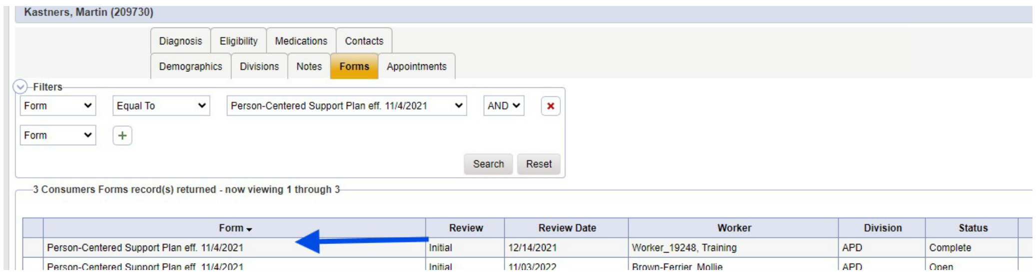


3. The form will update with their information.

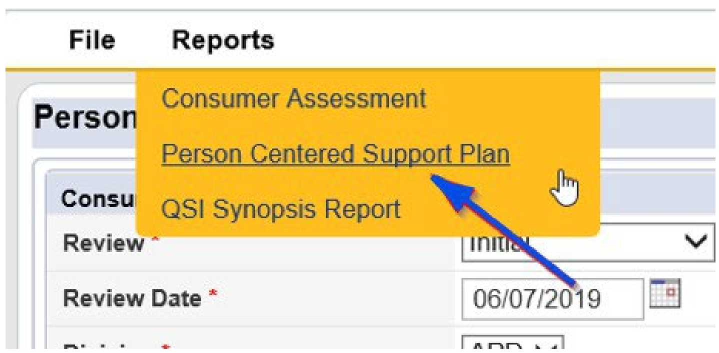
Complete the Support Plan Process

There will be a second meeting with the client. The completed PCSP report output is printed from iConnect. The PCSP is signed by the client and added as an attachment to Notes in iConnect.

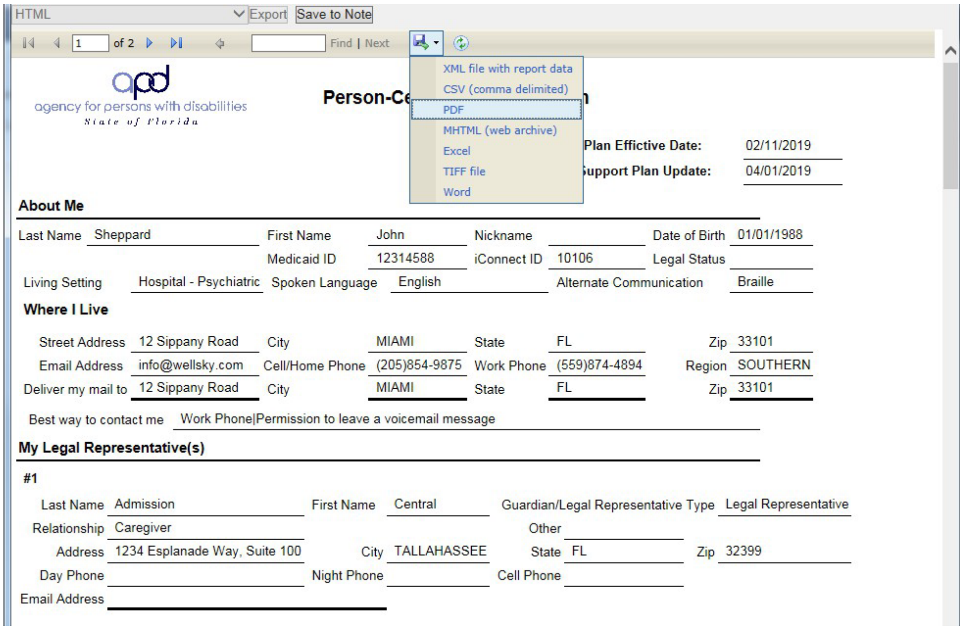
To print the PCSP, navigate to the **Forms** tab. Open the PCSP form from the list view grid.



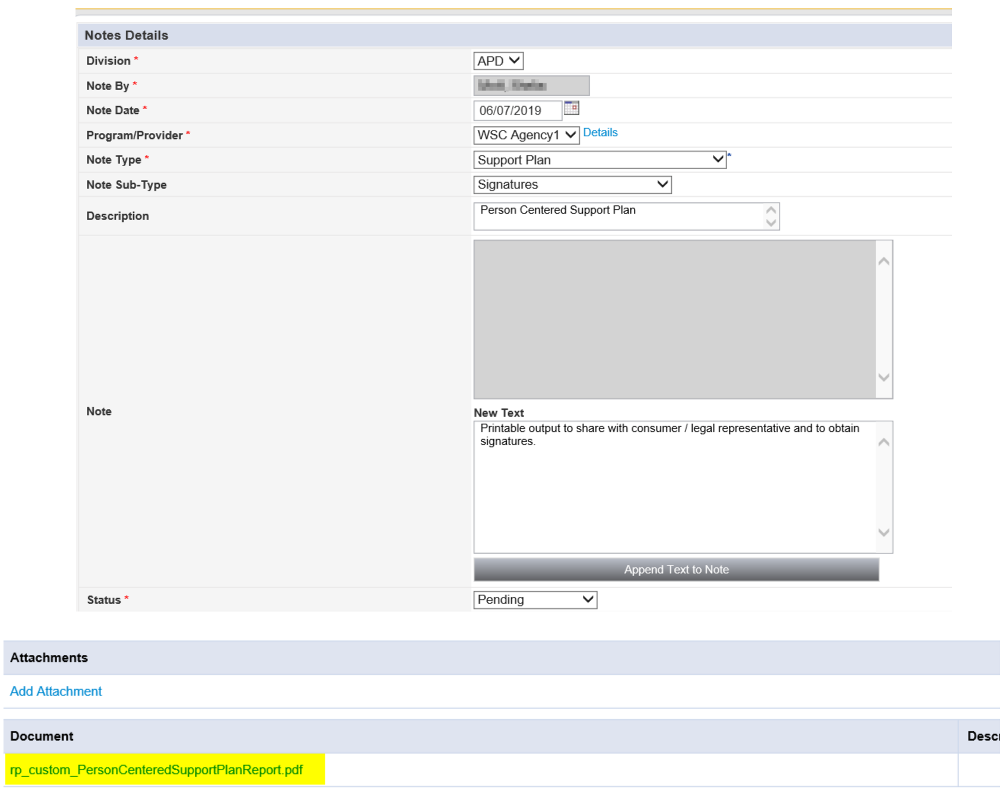
1. From within the PCSP form, select **Reports > Person Centered Support Plan**.



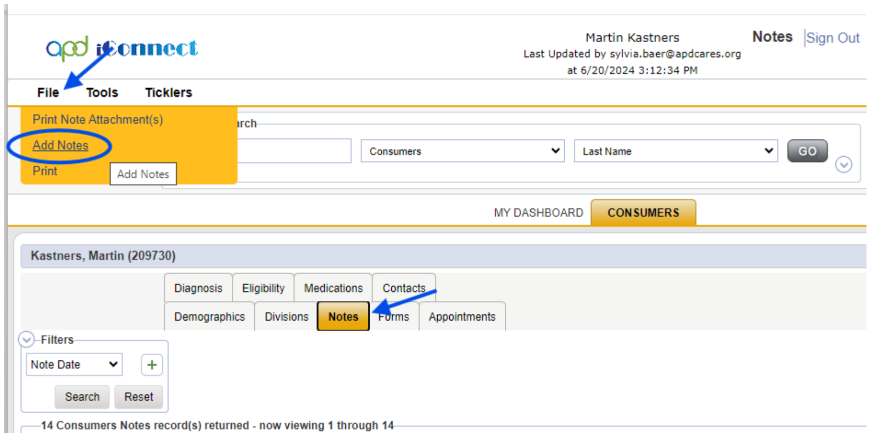
2. This will launch a new window. The Care Coordinator can either save directly to Note or save as pdf to their computer. Either option will give the Care Coordinator a printable pdf version of the PCSP to be used when gathering client/legal representative signatures.



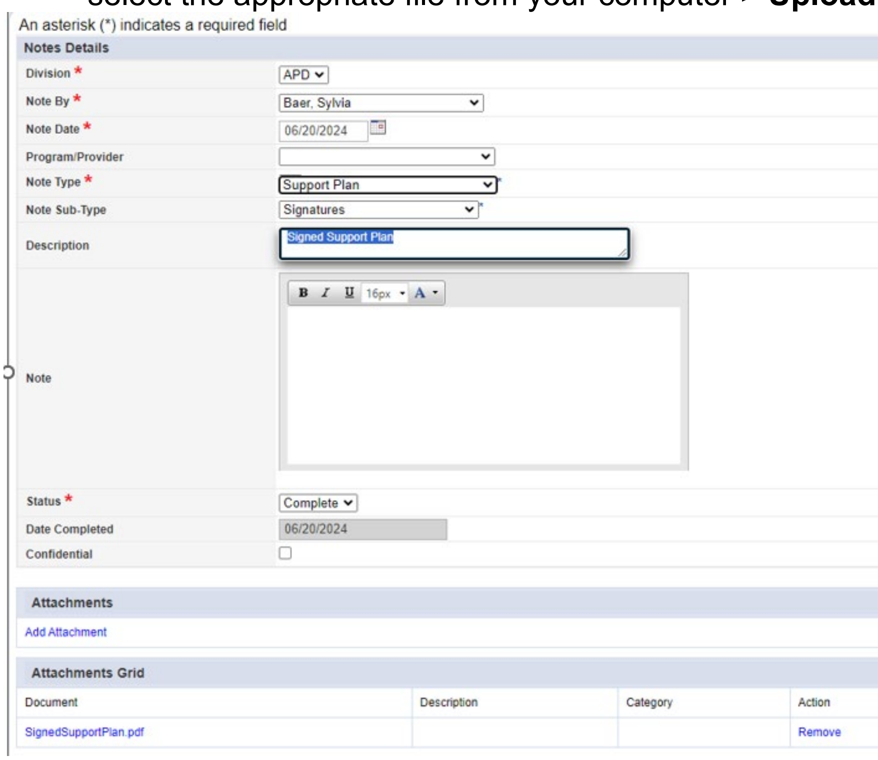
3. If the Save to Note option is chosen, a Note window will launch with the pdf output listed as an attachment. Type in any additional information and click the **Append Text to Note** button. The signed signature page of the PCSP will need to be attached. Skip to step 5.



4. Attach a copy of the signed PCSP to a Note in iConnect. On the client's record, click on **Notes > File > Add Note:**



5. In the new Note record, update the following fields:
   a. Note Type = Support Plan
   b. Note Sub-Type = Signatures
   c. Status = Complete
   d. Attach the signed Person-Centered Output Report to the Note record by clicking **Add Attachment > Browse >** select the appropriate file from your computer > **Upload**



6. When finished, click **File > Save and Close Note**

Support Plan Update

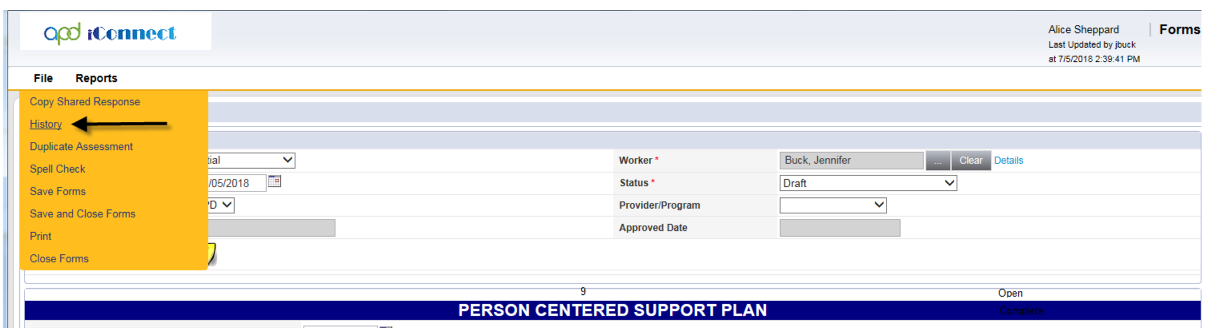
1. Throughout the PCSP year, the Care Coordinator may need to update the existing PCSP based on changes in the client's needs or desires. The existing PCSP form will be amended/updated. A new PCSP form will not be created.

2. The Care Coordinator will locate the PCSP form from the Consumer's record > **Forms** tab and select the form to edit.

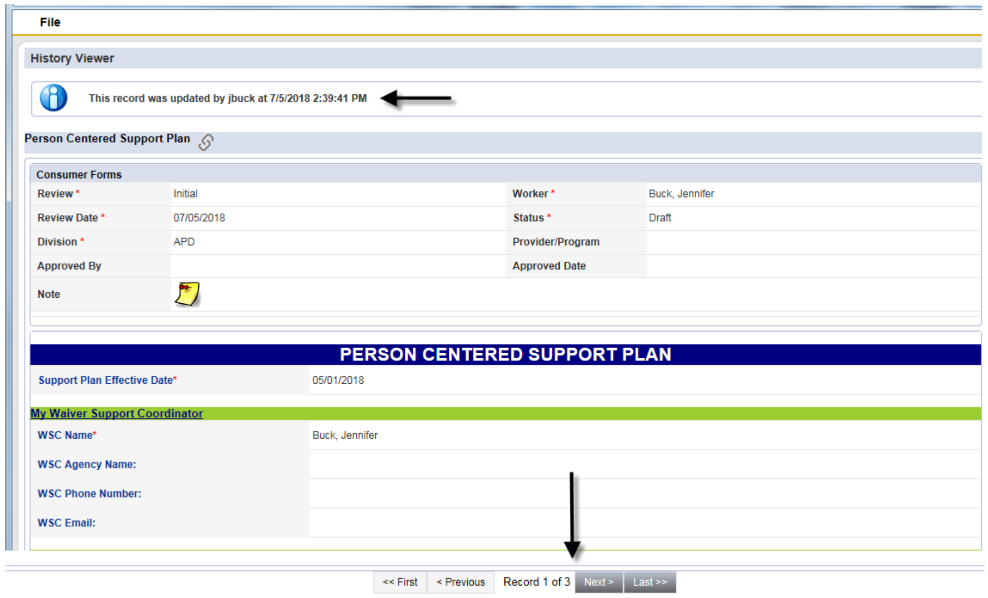
3. The form must be in Draft, Pending or Open status to be editable. Forms in the Complete status are read only and cannot be edited. Forms in the Draft status are perceived to not be done and should only be used when in the drafting stages.

4. Update the fields as needed. Click **File** > **Save and Close Forms**.

5. Every time a form is saved, a snapshot of the form is saved in the History Records. Select **File** > **History** to review previous versions of the PCSP



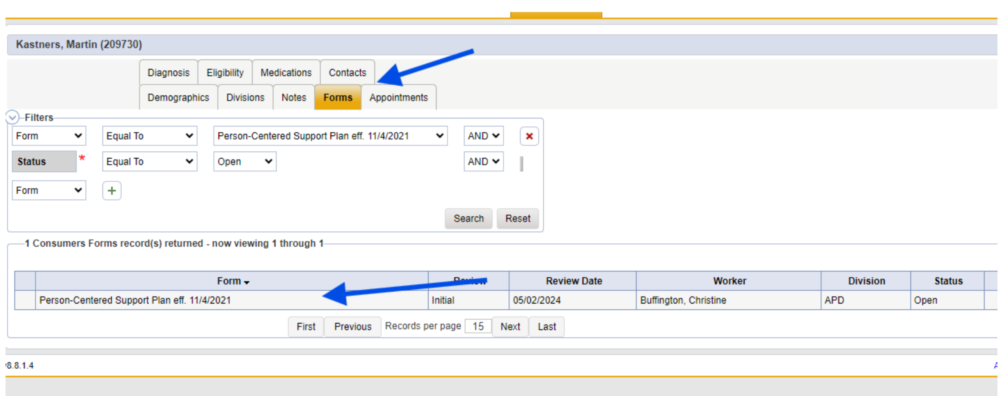
6. If more than one history record exists, click the Next or Last buttons at the bottom of the page to view each entry.



Annual Support Plan Review

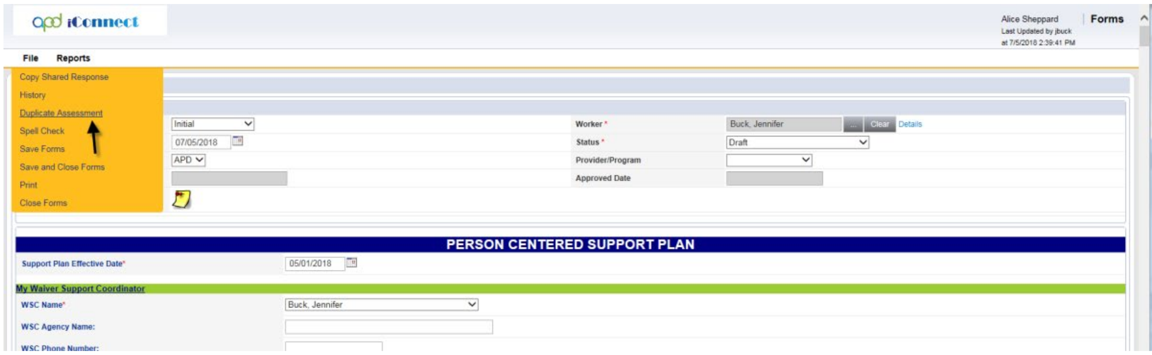
1. The PCSP expires after a year. The Care Coordinator usually begins the process 90 days in advance.

2. Navigate to the client's record and click on the **Forms** tab. Click the **PCSP** form with Status = Open.



3. Care Coordinators should never utilize the same PCSP form year to year. However, some information may not change. While goals, needs, and other important factors must be reviewed and updated each year, Care Coordinators may use the **Duplicate Assessment** feature to copy information such as the social history. However, the Care Coordinator must update all sections of the PCSP with new information and change the effective date of the plan.

4. Click **File** > **Duplicate Assessment**. A notification window displays. Click OK. The new PCSP form that is a copy of the existing PCSP form will be displayed.



   a. In the Form header, change the Review Type = Annual
   b. Update the PCSP effective date.
   c. Make updates to goals, needs, and other important factors.
   d. When finished, update Status = Open
   e. Click **File > Save and Close Forms**

5. The Forms list view grid displays. Select the existing (previous year's) PCSP form.
   a. In the header, update the Status = Complete.
   b. Click **File > Save and Close Forms**

Chapter 5 | Level of Care

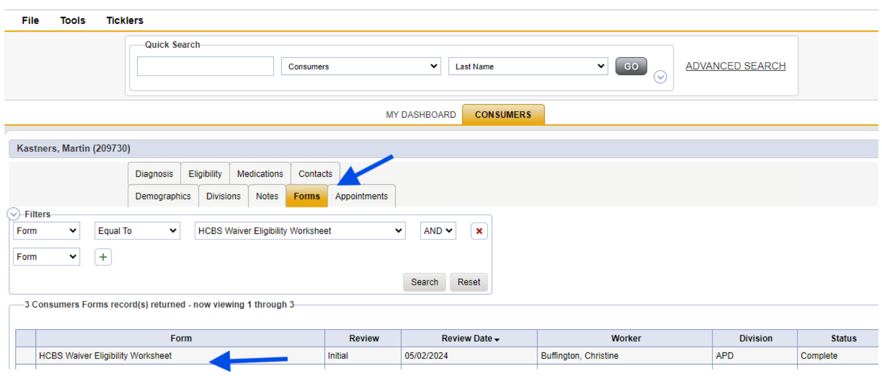
Introduction

Level of Care (LOC) assessments are completed by the Care Coordinator, to assist in determining if an individual meets eligibility requirements and to what level of service is required to accommodate the client's needs. The Care Coordinator will utilize the HCBS Waiver Eligibility Worksheet to document the LOC determinations. The initial HCBS Waiver Eligibility Worksheet will be done by APD staff and thereafter the annual HCBS Waiver Eligibility Worksheet will be done by the Care Coordinator due in 365 days.

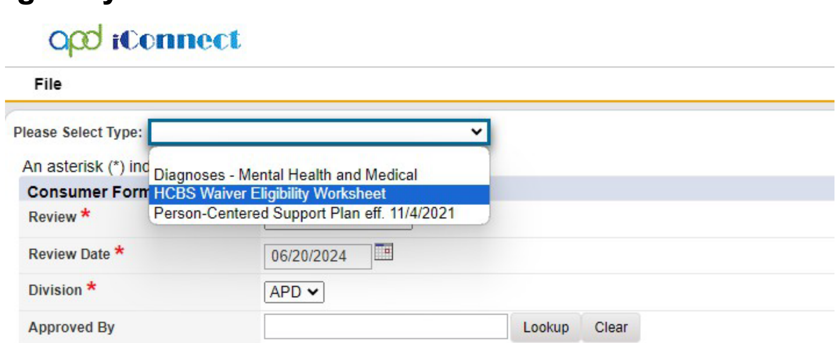
Complete Waiver Eligibility Worksheet

1. To begin, the Case Coordinator will log into iConnect and set Role = **DDMC**. Click **Go.**

2. The client's initial HCBS Waiver Eligibility Worksheet will be available by navigating to the client's record and clicking on the **Forms** tab.



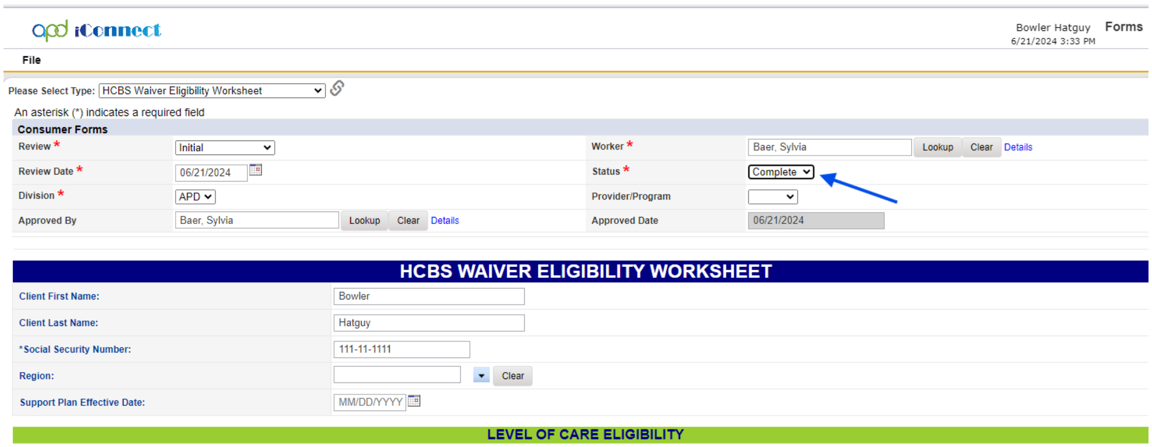
3. To add a new form, annually, click **Forms > File > Add Form** and in the "Please Select Type" field select the **HCBS Waiver Eligibility Worksheet**



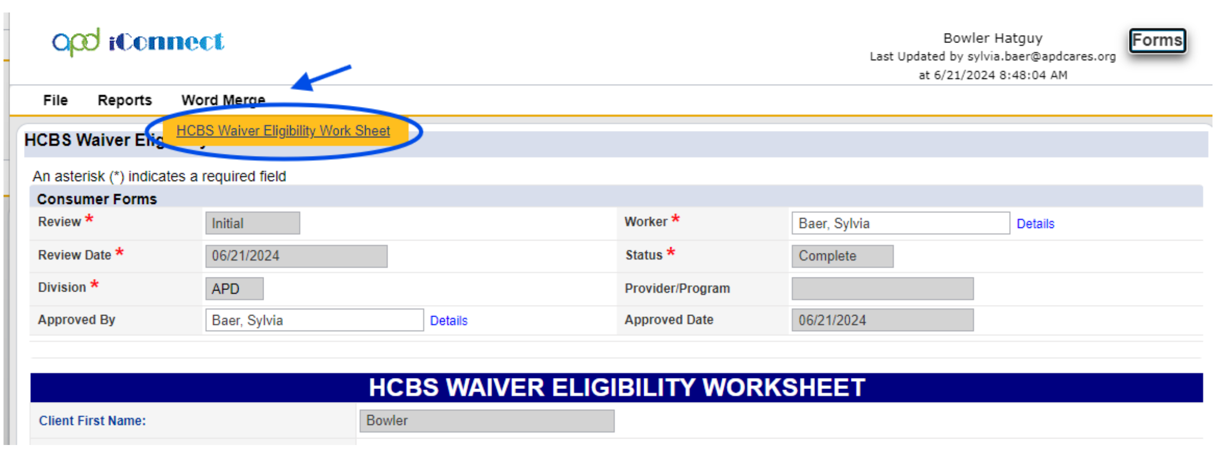
4. In the new HCBS Waiver Eligibility Worksheet, complete all relevant fields

5. Update the fields in the header:
    a. Review = Annual
    b. Division = APD
    c. Status = Complete

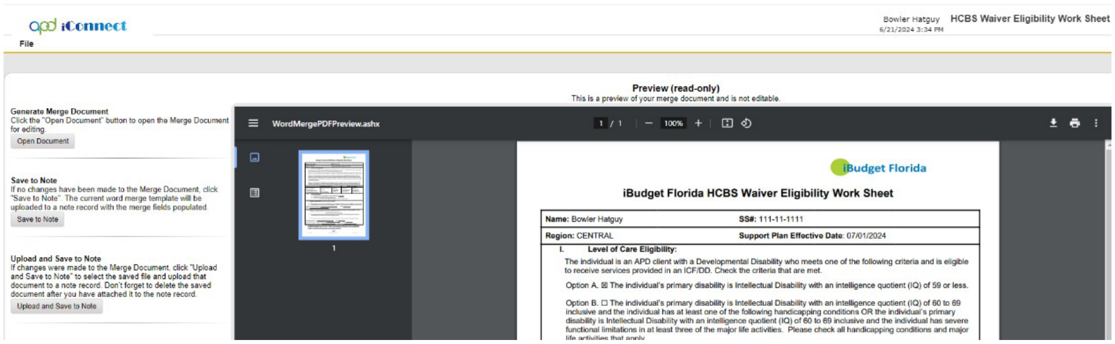
6. When finished, click **File > Save Forms**



7. To print the form, navigate to the **Word Merge** menu and select **HCBS Waiver Eligibility Work Sheet**.



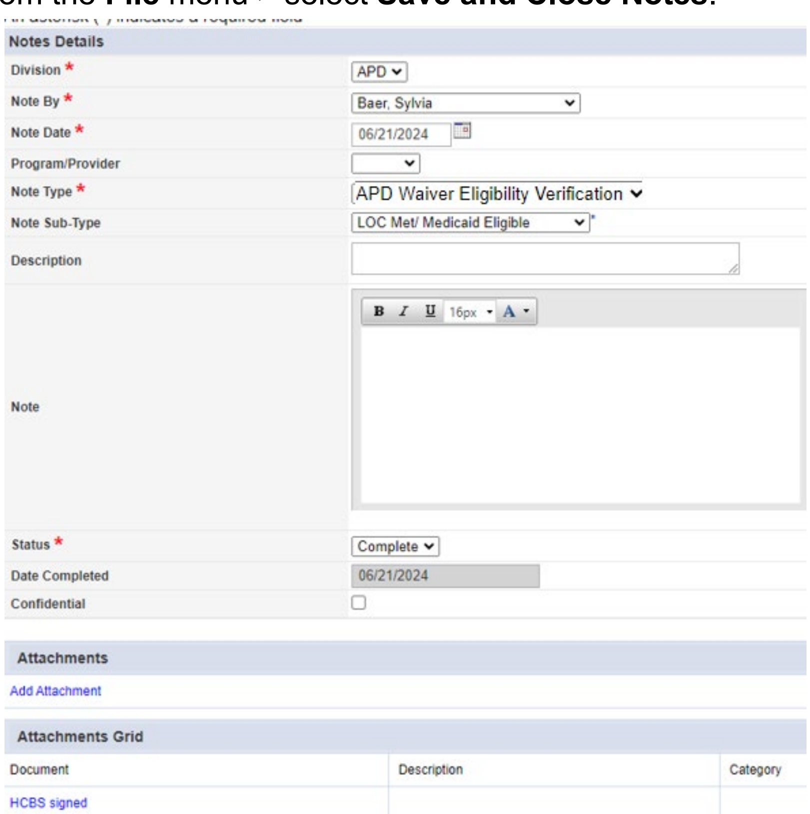
8. The Word Merge will be displayed. Download and print the Word Merge to obtain the necessary signatures.



9. After obtaining the necessary signatures, attach the signed HCBS Waiver Eligibility Worksheet to the consumer's record. To do so, navigate to the consumer's record and click on **Notes > File > Add Note**:

10. In the new Note record, update the following fields:
    a. Division = APD
    b. Note Type = APD Waiver Eligibility Verification
    c. Note Sub-Type = LOC Met/Medicaid Eligible
    d. Status = Complete
    e. Attachments = Signed HCBS Eligibility Work Sheet

11. From the **File** menu > select **Save and Close Notes**.



Chapter 6 | Other Non-Waiver Eligible Settings – Admission

1. The Care Coordinator or Pre-Enrollment Worker will document the client's admission to a jail, nursing home, rehab center, hospital. To begin, log into iConnect and set **Role = DDMC** or Region Pre-Enrollment Workstream Worker. Click **Go.**

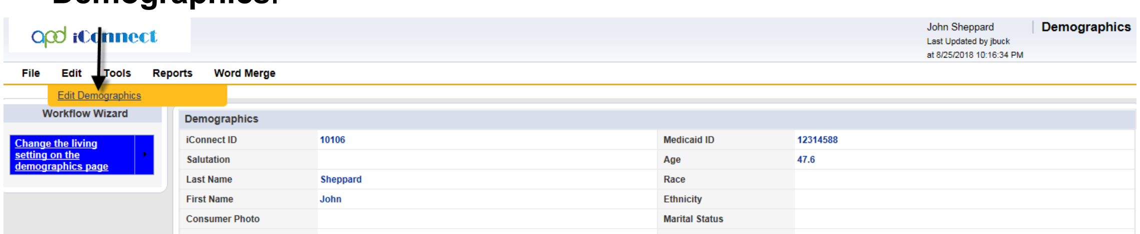
2. Navigate to the client's record and click on the Notes tab. Click **File** > **Add Note**.

3. In the new Note record, update the following fields:
   a. Division = APD
   b. Note Type = Facility Placement
   c. Note Sub-Type = Consumer Admitted
   d. Status = Alert
   e. Enter details about the facility placement
   f. Then click **File > Save and Close Notes**

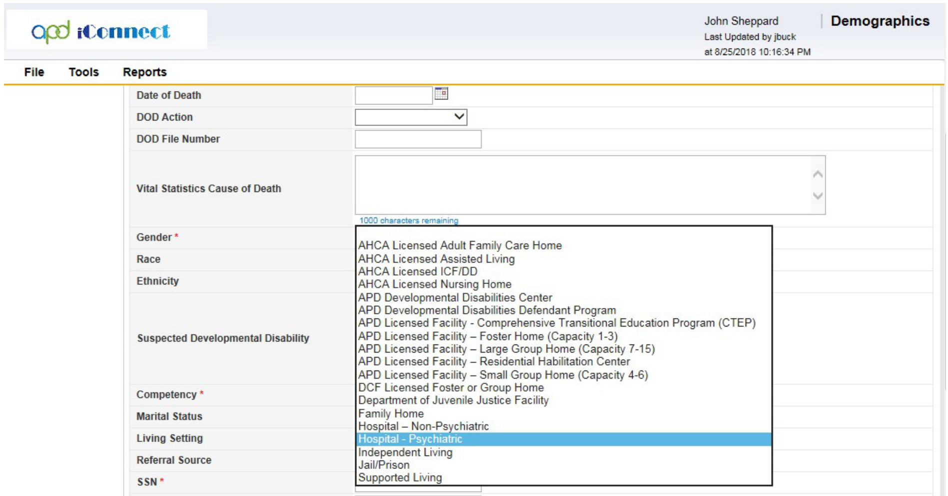
4. Saving a Note with Note Type = Facility Placement and Sub Type = Consumer Admitted, triggers a Workflow Wizard with two ticklers for the secondary worker on the Division record:
   a. Change the living setting on the demographics page (due immediately)
   b. Verify Consumer to Remain on DD Managed Care Pilot (due in 60 days and visible via My Dashboard)

5. Click the Change the living setting on the demographics page tickler to open the demographics list view page.

6. From the **Edit** menu in the top toolbar > select **Edit Demographics**.



7. Update the following fields:
   a. Living Setting = select applicable value



8. When complete, click **File** > **Save and Close Demographics.**

9. Navigate to the client's record to verify that the client is Medicaid eligible, and all other criteria have been met to enroll in the iBudget waiver.

10. If the consumer will not remain in Pre-Enrollment or the DD Managed Care Pilot, the Care Coordinator will contact the Pre-Enrollment Worker (secondary worker).

11. If the client will remain in Pre-Enrollment or DD Managed Care Pilot, send a note to the Pre-Enrollment or Waiver Workstream Worker (Secondary Worker).

12. Navigate to the client's record and click **Notes > File > Add Note.**

13. In the new Note record, update the following fields:
    a. Division = APD
    b. Note Type = Facility Placement
    c. Description = Remains on Pre-Enrollment or DD Managed Care Pilot
    d. Note = enter details
    e. Note Status = Complete
    f. Note Recipient = search for and select the Pre-Enrollment or DDMC Care Coordinator.

14. When finished, click **File > Save and Close Notes**

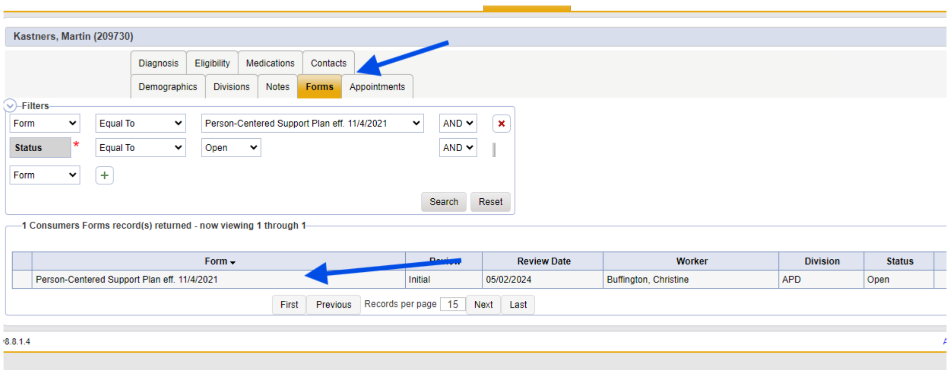
Chapter 7 | Safety Plan

Introduction

In some cases, clients exhibit behavior that indicates the need for a monitored plan of care. These behaviors include but are not limited to a documented history of engaging in sexual aggression, sexual battery or otherwise engaged in nonconsensual sexual behavior with another individual, with or without police involvement. A plan is needed to address their unique needs and create a safe environment for everyone and facilitate successful community living. In these instances, a Safety Plan developed by the Care Coordinator with consultation from the authorized behavior analysis (BA) provider or Area Behavior Analyst (ABA), when needed. These plans are integrated into the PCSP and implemented where the client resides. The following Chapter outlines how the Safety Plan should be documented within iConnect.

1. To begin, the Care Coordinator will log into iConnect and set Role = **DDMC**. Click **Go.**

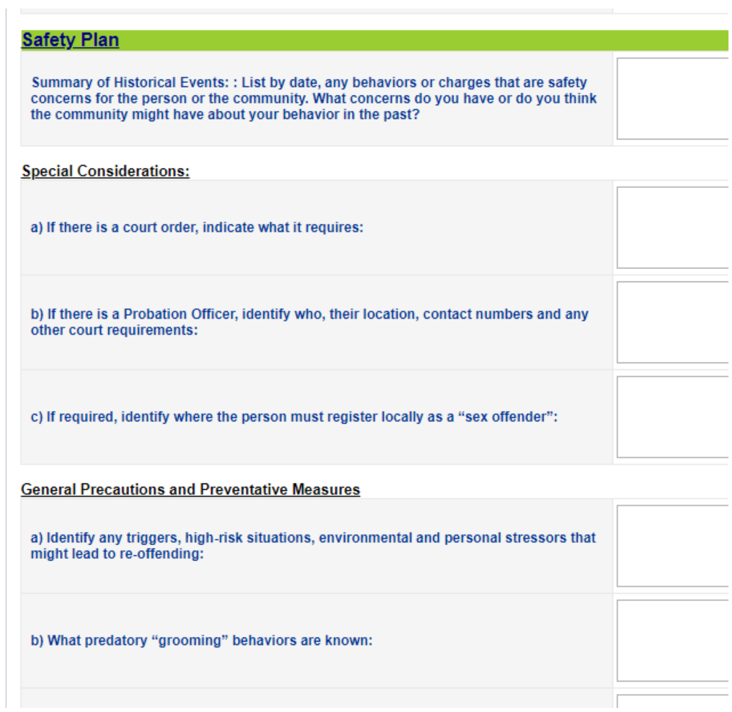
2. Navigate to the client's record and click on the **Forms** tab. Click the current Person-Centered Support Plan to edit.



3. Navigate to the Personal Rights: (not related to guardianship) section of the PCSP.

4. Safety Plan required and included (if applicable choose Yes or No) = select “Yes”

5. A new section of the PCSP will be displayed with information to be filled out regarding the Safety Plan.



6. Fill out the necessary fields and once completed go to **File > Save and Close Forms**

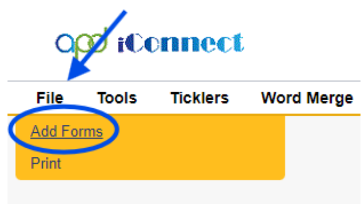
Chapter 8 | Diagnosis – Mental Health and Medical Form

Introduction

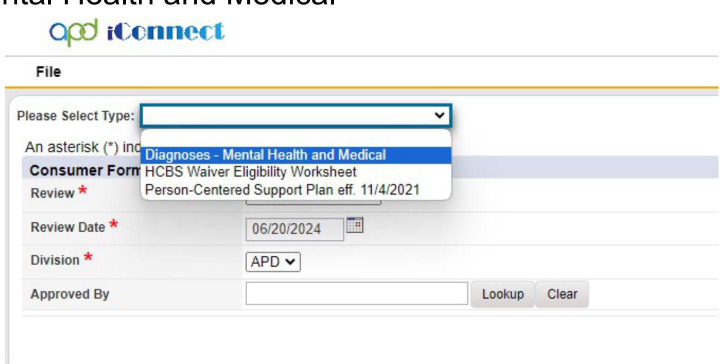
In some cases, clients may have additional diagnoses. These are different than the original diagnosis that allowed the client to become eligible for DD Managed Care Pilot Program or the iBudget Waiver. To document the additional diagnosis, follow the steps outlined in this chapter.

1. To begin, the Care Coordinator will log into iConnect and set Role = **DDMC**. Click **Go.**

2. Navigate to the client's record and click on the **Forms** tab. Go to **File** and select **Add Forms**.



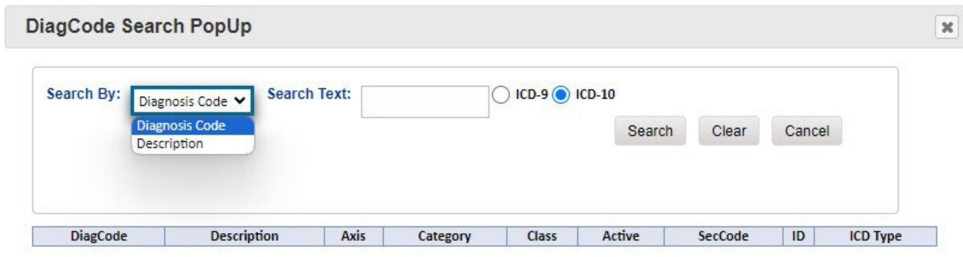
3. In the "Please Select Type:" dropdown menu, select Diagnoses – Mental Health and Medical



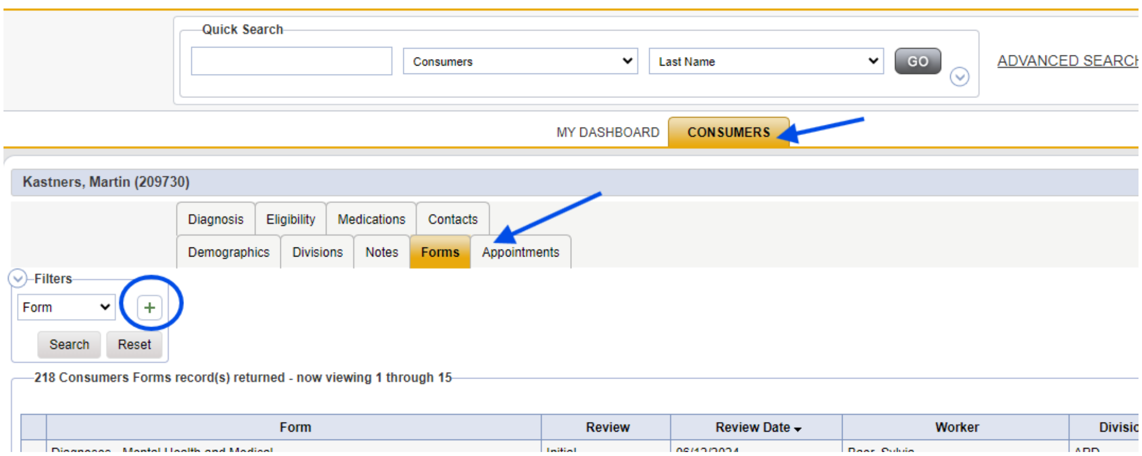
4. Fill out the form header:
    a. Review = as applicable
    b. Status = Open

5. Fill out the form. Use the ellipses to search for the diagnoses.

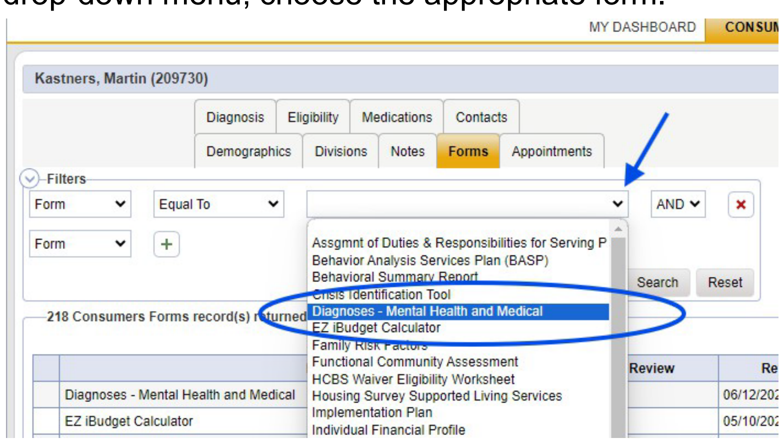
6. Utilize the search fields to locate the proper diagnosis.



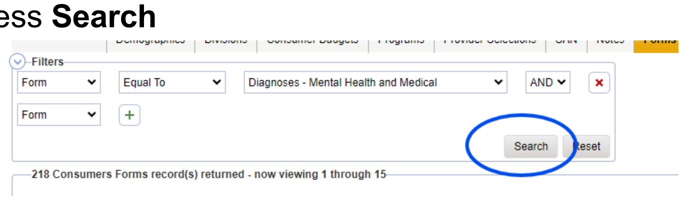
7. Once done, navigate to **File > Save and Close Form**.
8. The form can be edited in Open Status. To make updates to the form, navigate to the client's record and click **Forms**. The list view grid will display. Utilize the filters to locate the form. Press the green plus sign to add filters.



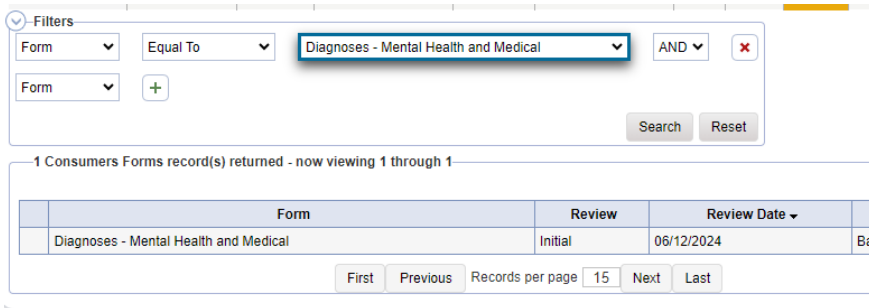
9. In the drop-down menu, choose the appropriate form.



10. Press **Search**



11. The form will be displayed in the list view grid. Select the form to open.



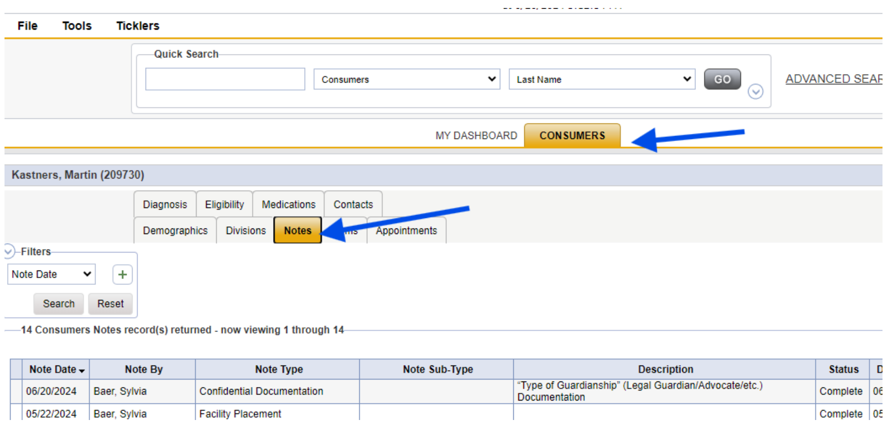
Chapter 9 | Notes in iConnect

Introduction

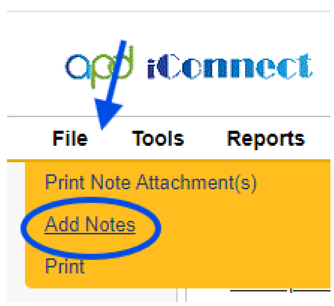
Notes is a feature in iConnect that allows the user to upload attachments that are relevant to the client's record such as a court order documentation of a legal representative. The following instructions will go over how to create a Note and how to mark a Note as Read if one is on the My Dashboard.

Creating a New Note

1. Once logged into iConnect, the Care Coordinator will navigate to the client's record and select the **Notes** tab.



2. The list view grid of all Notes created in the client's record will display. To create a new Note, go to **File > Add Notes.**

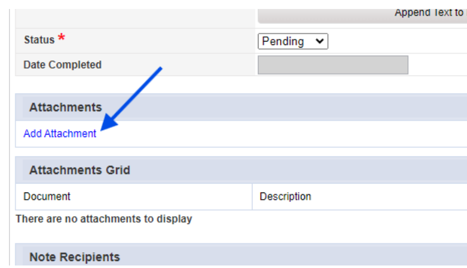


3. Fill out the Note fields as follows:
   a. Division = APD
   b. Note By = defaults to worker's name
   c. Note Date = defaults to today's date
   d. Note Type = choose the appropriate Note Type
   e. Note Sub-Type = choose the appropriate Note Sub-Type if needed.
   f. Description = as needed
   g. Note = as needed

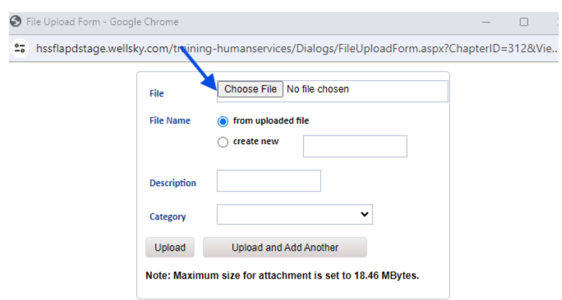
h. Status = as needed (Do not leave a Note in Draft unless the Note is still being worked on. Notes should be in Complete Status if done or Pending Status if a response is needed or additional information needs to be added. Only use Alert Notes for Facility Placement as indicated in the workflow.)

i. Add Attachment = Add any attachments as needed. Each Note can hold up to 10 attachments. If additional attachments are needed additional Notes can be created. The maximum size of the attachment is 18.46 Mbytes.

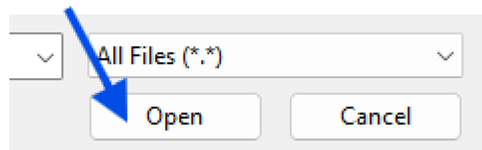
   i. To add an attachment, click the Add Attachment hyperlink.



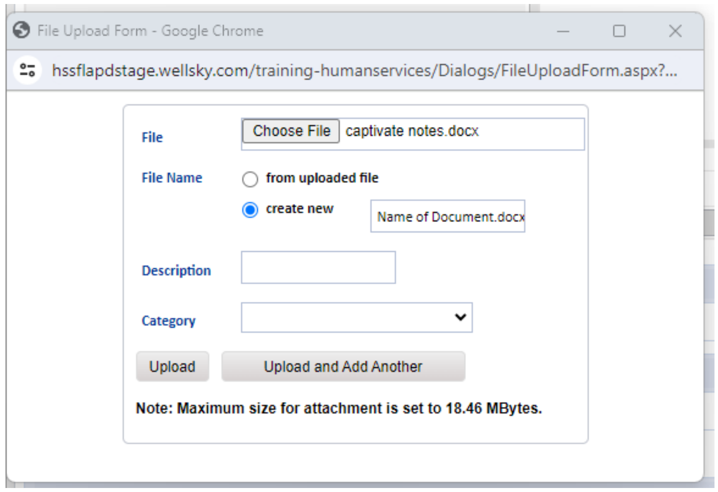
   ii. Click Choose File to locate the document to attach to the Note. **Files cannot contain special characters.**



   iii. Select the file and click Open

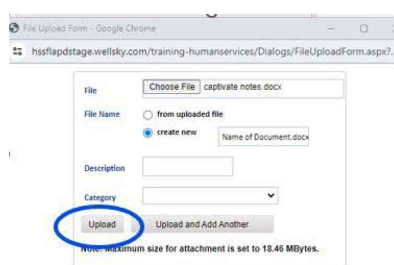


   iv. To create a new name for the file, select the radio button “create new.” Type in the new name along with the extension. (i.e. .pdf, .doc, .docx, etc.)

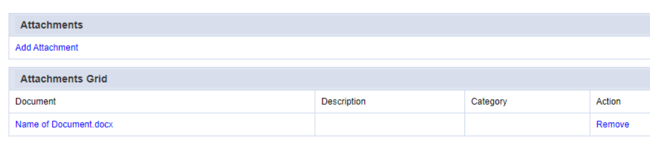


v. A Description can be added if needed.

vi. Click Upload if that is the only file or select Upload and Add Another to add additional attachments.



vii. The attachment will be displayed in the Attachments Grid.

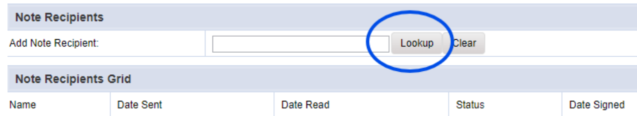


viii. Add additional attachments as needed up to 10.

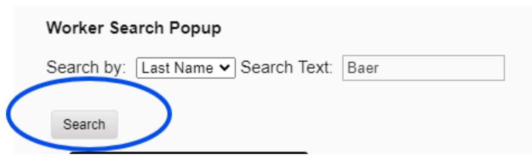
ix. To Remove an attachment, click the Remove hyperlink.

j. Adding a Note Recipient to a Note will allow the Note to land on their My Dashboard. This is how to notify an individual in iConnect of information or actions needed. Note Recipients are only individuals in iConnect. To add a Note Recipient, follow the instructions below:

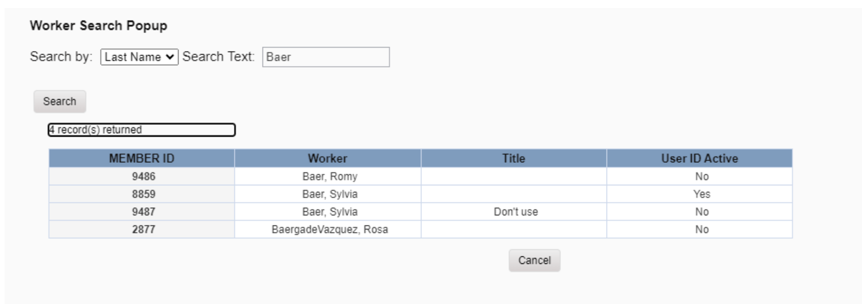
i. Click the Lookup button



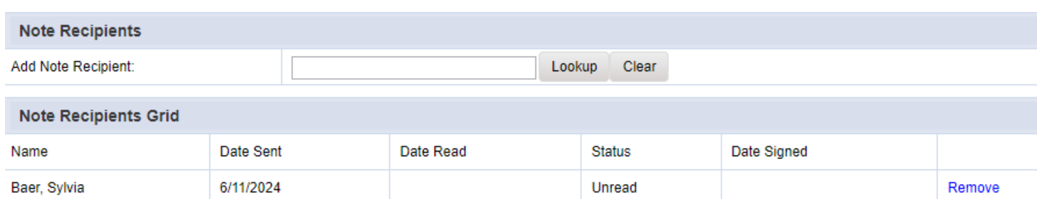
x. In the Search Text: add the recipient's last name. Press Search



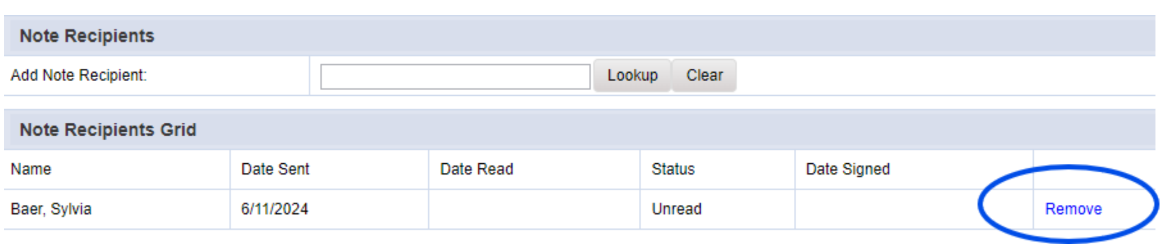
xi. The list view grid of workers with that last name will display. Be mindful of the Title and if the User is active or not. If the User ID Active = No, do not select that worker. Click the appropriate worker to add them to the Note.



xii. Their name will be displayed in the Note Recipients Grid.

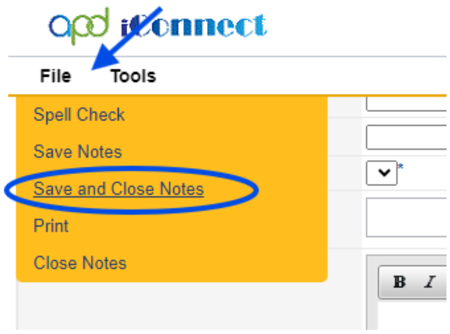


xiii. To remove a Note Recipient, click the Remove hyperlink.



xiv. Repeat the steps needed to add any additional Note Recipients.

k. Once done, go to **File > Save and Close Notes**

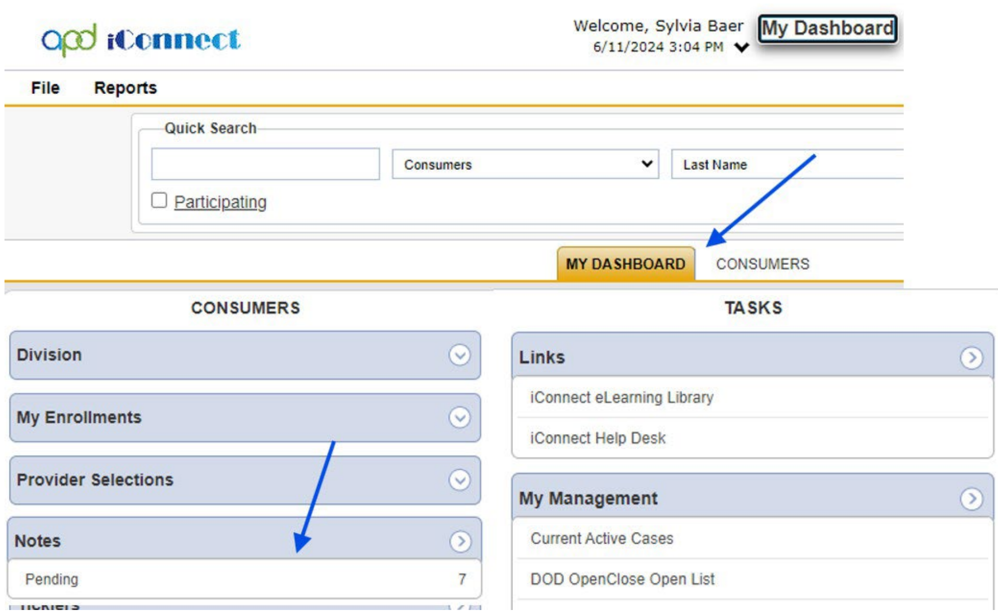


Marking Notes as Read

Notes can be marked as Read from the Note itself or from the Note List View Grid.

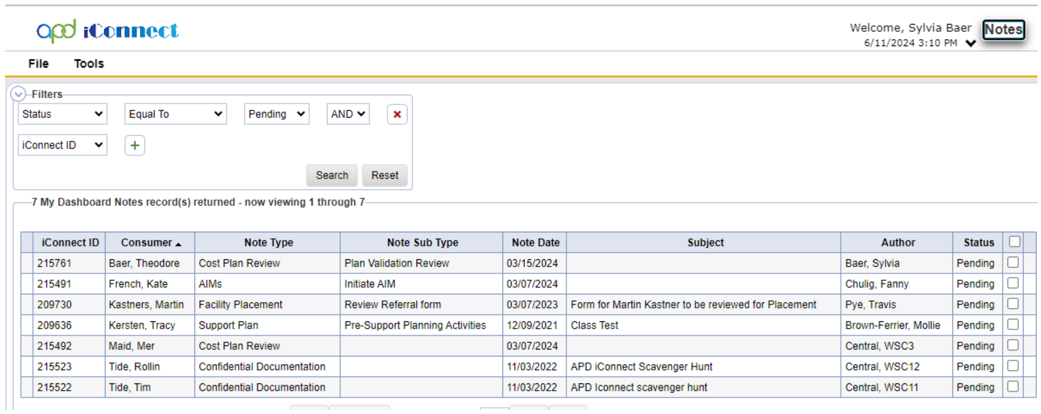
Marking Notes as Read from the Note

1. Once logged into iConnect, the Care Coordinator will land on the My Dashboard. Under CONSUMERS there is a heading titled "Notes." This will only display if there are Notes that the user has been added to as a Note Recipient and the Notes are not marked as Read.

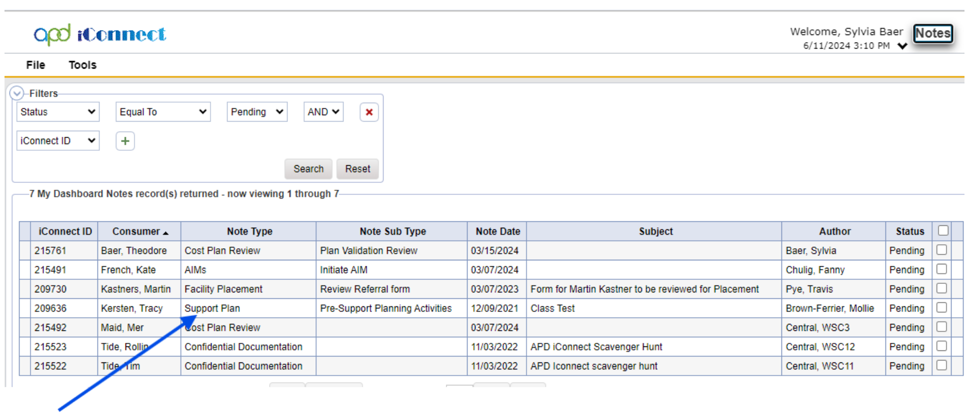


If the caret is pointing down, click the caret to show the Pending or Complete Notes.

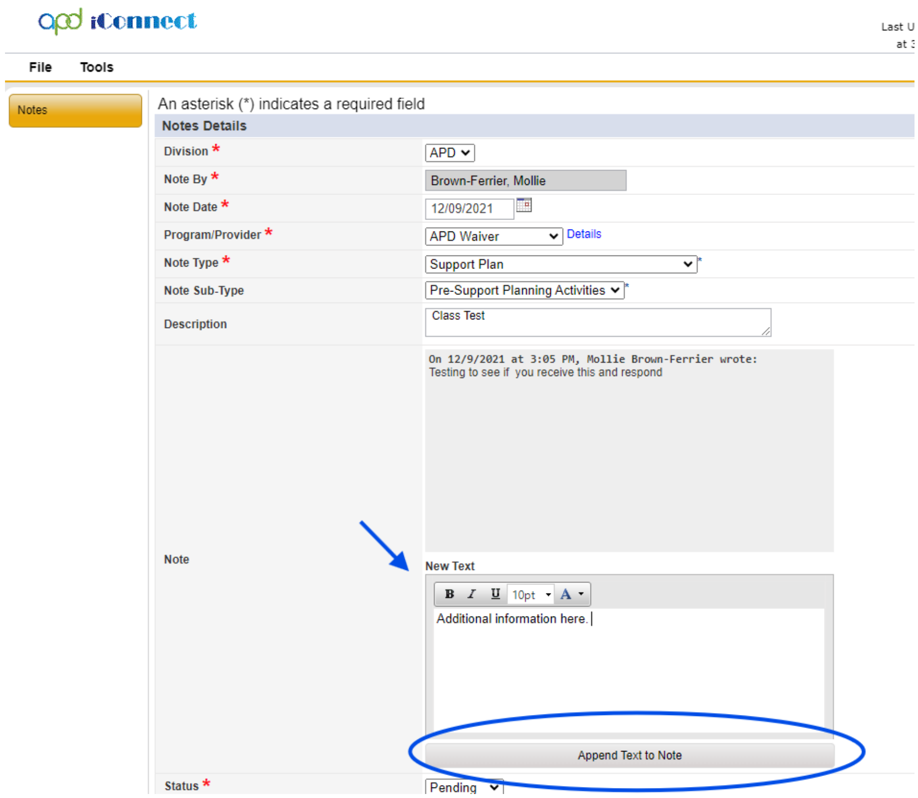
2. Click the Pending or Complete under Notes. Once clicked, a list view grid will display all the Pending or Complete Notes.



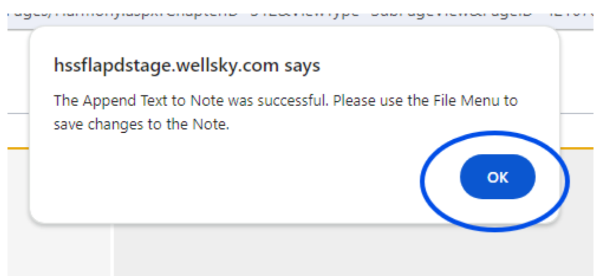
3. To view a Note, click the hyperlink to open the Note.



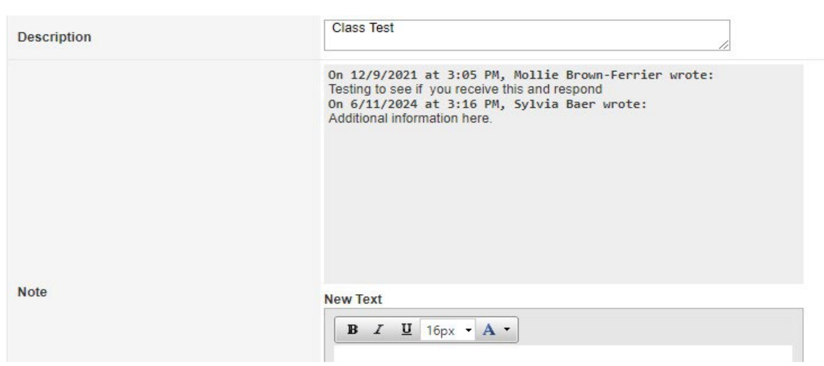
4. The Note will display. If a response is needed (the user is only able to reply to a Pending Note, no edits can be made on a Complete Note), scroll to the Note section and in the New Text field, enter the needed text. Then press **Append Text to Note.**



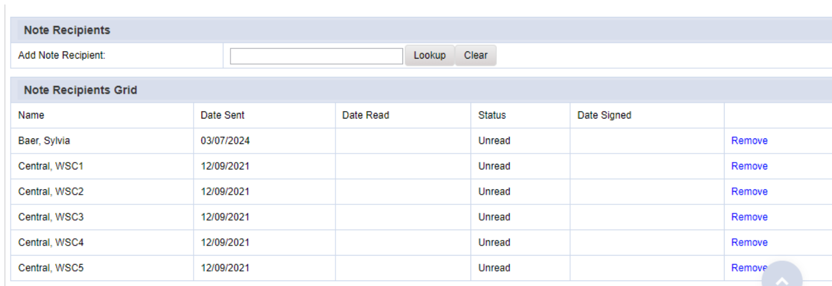
a. After clicking Append Text to Note, a popup will display letting the user know that the Append Text to Note was successful and to save any changes. Press OK.



b. The additional information keyed in will be displayed in the Note.



c. To send the response to the individual, the individual needs to be added as a Note Recipient in the Note. Note Recipients can only be users of iConnect. If the Note Recipient is already on the Note with a Status of Unread, they will not be able to be added back to the Note. If they are marked as Read, they will need to be added back onto the Note for the Note to display on their My Dashboard.



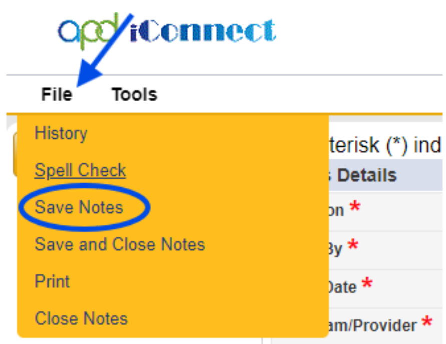
Note Recipients

Add Note Recipient: [ ] Lookup Clear

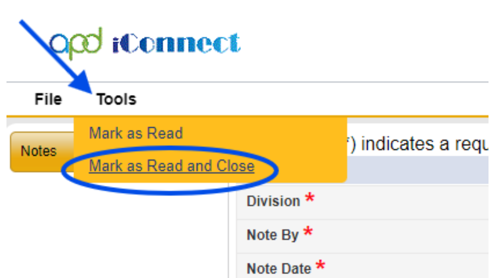
Note Recipients Grid

Name	Date Sent	Date Read	Status	Date Signed	
Baer, Sylvia	03/07/2024		Unread		Remove
Central, WSC1	12/09/2021		Unread		Remove
Central, WSC2	12/09/2021		Unread		Remove
Central, WSC3	12/09/2021		Unread		Remove
Central, WSC4	12/09/2021		Unread		Remove
Central, WSC5	12/09/2021		Unread		Remove

d. Once completed with the Note, go to **File > Save Notes.**



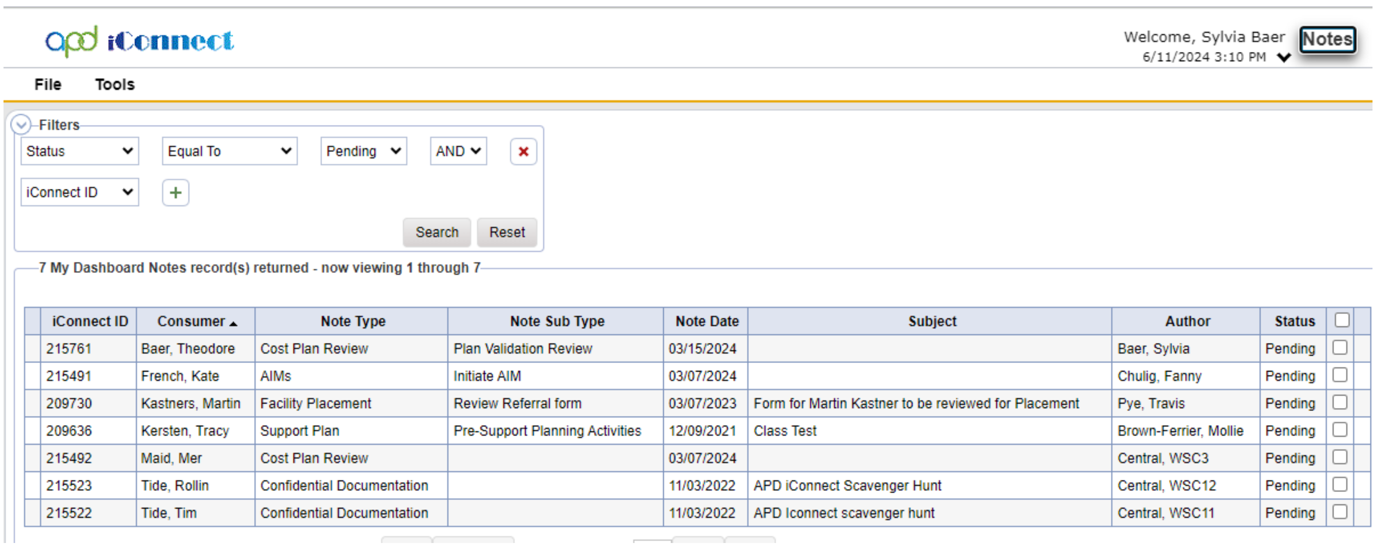
5. To mark the Note as Read, go to **Tools > Mark as Read and Close**. The Note will be off your My Dashboard, until added back as a Note Recipient.



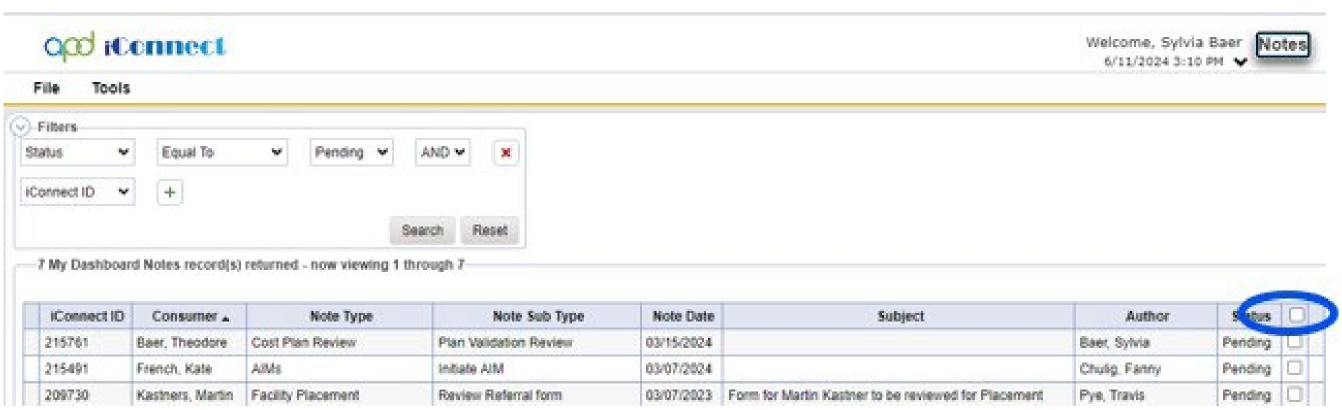
Marking Notes as Read from the Note List View Grid

1. Once logged into iConnect, the Care Coordinator will land on the My Dashboard. Under CONSUMERS there is the heading titled, “Notes.”

2. Click the Pending or Complete under Notes. Once clicked a list view grid will display all Pending or Complete Notes.

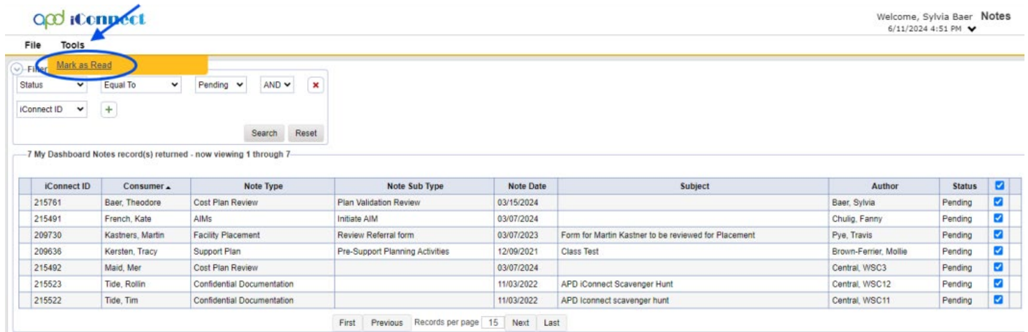


3. The checkboxes on the right can be selected individually or in mass by clicking the checkbox on the top.

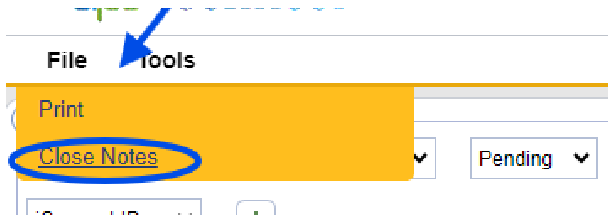


4.

5. Once the proper Notes have been selected, navigate to **Tools > Mark as Read.**



6. The Notes selected will be cleared from the My Dashboard; however, they will still be in the client's record > Notes tab within iConnect.
7. To close the Notes List View Grid, go to **File > Close Notes.**



Chapter 10 | Ticklers

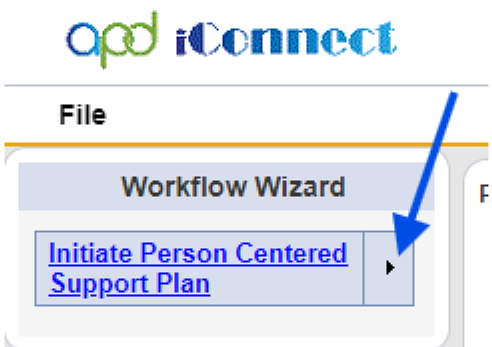
Introduction

Ticklers are a feature in iConnect. The workflows for our DDMC Care Coordinators do not require Ticklers. If there is a Tickler that displays on the My Dashboard, the Care Coordinator can either Cancel or Complete the Tickler to get the Tickler off of the My Dashboard.

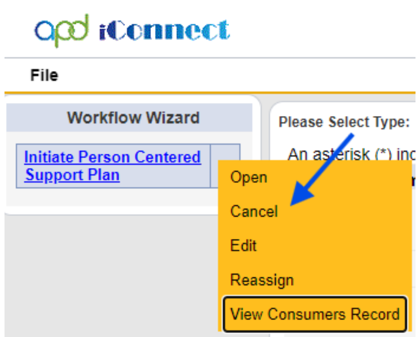
Ticklers from Workflow Wizard

Complete the following steps to remove any Ticklers:

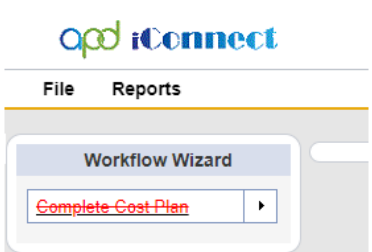
1. If a Tickler pops-up from a Workflow Wizard, simply navigate to the caret to display a menu option.



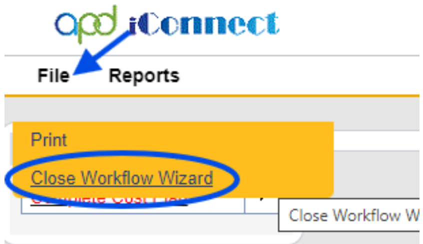
2. Depending on the options that are available, select Cancel, Delete or Complete.



3. Once the appropriate option is selected, the Tickler will be crossed out and deleted from the My Dashboard.



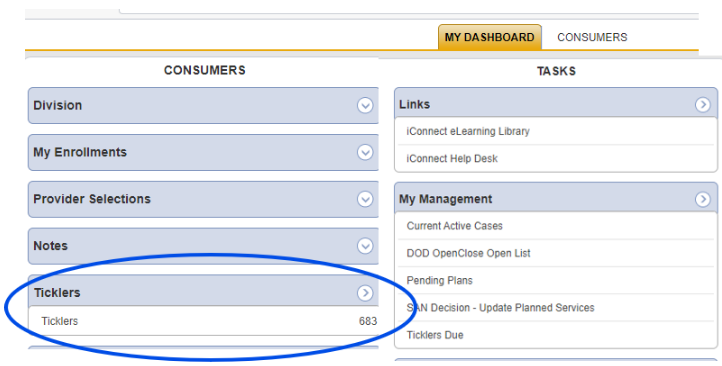
4. Once done, go to **File > Save and Close Workflow Wizard**



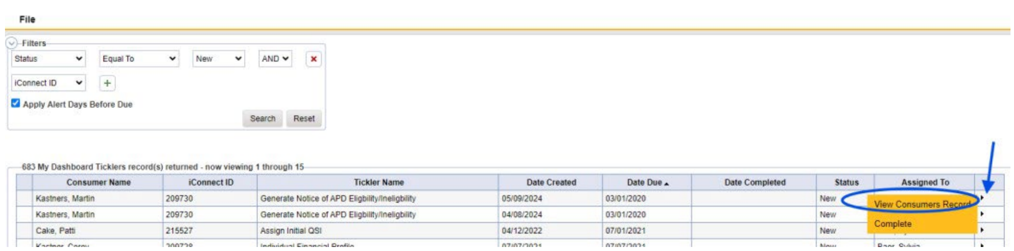
Ticklers on My Dashboard

Complete the following to remove any Ticklers from the My Dashboard:

1. On the My Dashboard, navigate to the Ticklers menu under Consumers and click to open the list view grid.



2. Once the list view grid is opened, navigate to the caret at the end of the record displayed. The pop-up menu will display. Select Cancel, Complete or the Delete option.



3. Once selected, the Tickler will be removed from the list grid view.
4. When all ticklers are deleted, go to **File > Close Ticklers**

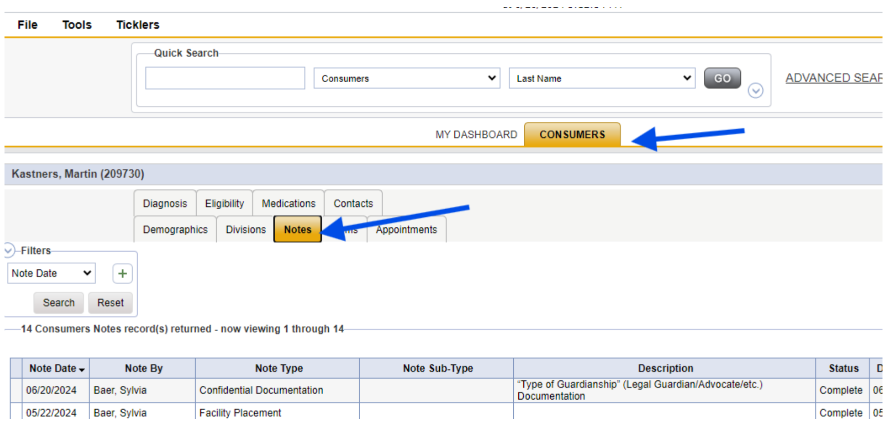
Chapter 11 | Personal Disaster Plan Note

Introduction

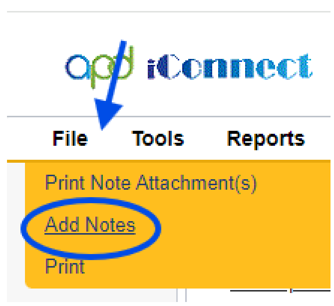
The Care Coordinator will ensure that the Disaster Plan is current in iConnect for their clients and at least once a year, the Care Coordinator will upload the Disaster Plan as a Note in iConnect.

Creating a Disaster Plan Note

1. Once the Disaster Plan has been completed, the Care Coordinator will log into iConnect and set Role to **DDMC**. The Care Coordinator will navigate to the client's record and select the **Notes** tab.

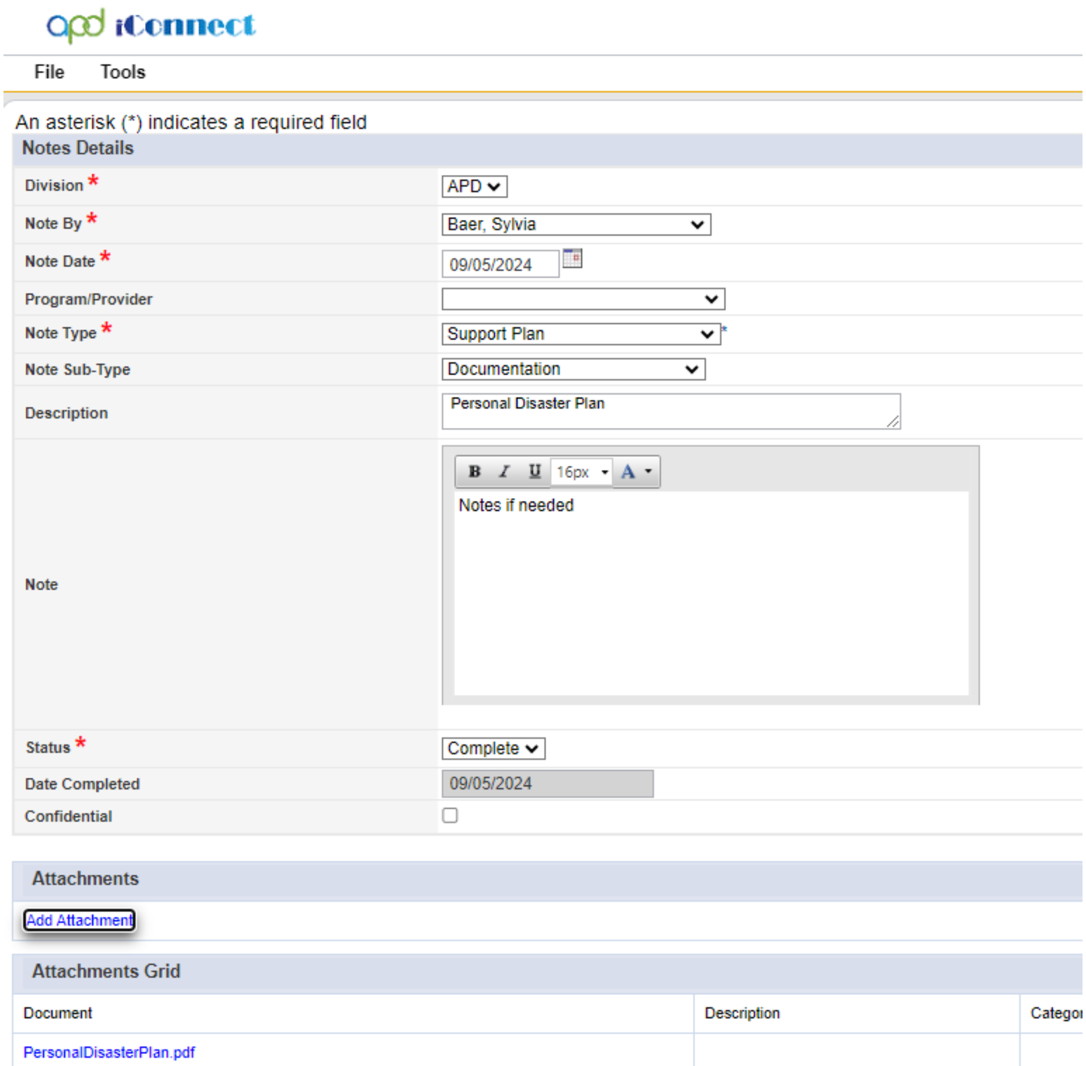


2. The list view grid of all Notes created in the client's record will display. To create a new Note, go to **File > Add Notes.**



3. Fill out the Note fields as follows:
   a. Division = APD
   b. Note By = defaults to worker's name
   c. Note Date = defaults to today's date
   d. Note Type = Support Plan
   e. Note Sub-Type = Documentation
   f. Description = Personal Disaster Plan
   g. Note = as needed

h. Status = Complete
i. Add Attachment = Add the Personal Disaster



j. Once done, go to **File > Save and Close Notes**