

**STATE OF CONNECTICUT
DEPARTMENT OF DEVELOPMENTAL SERVICES**

Procedure No.: I.C.1.PR.003

Subject: Master File/Individual Record

Section: Services and Supports, Case Management/Broker Services

Issue Date: July 30, 2003

Effective Date: Upon release

Revised: November 30, 2008

A. Purpose

The purpose of this procedure is to establish a consistent approach for implementation of the DDS Master File or Individual Records policy.

B. Applicability

This procedure shall apply to all individuals who are eligible for DDS supports and services.

This policy shall apply to case managers, support brokers, case management supervisors and all other staff responsible to maintain the DDS Master File or Individual Record.

C. Definitions

See Case Management Definitions.

D. Implementation

The DDS case manager or designee will maintain a DDS Master File or Individual Record for each person on his or her caseload with the following components as applicable to the individual situation:

1. Demographic/Legal

Section 1 should include demographic information, initial DDS eligibility documents, legal documents and Medicaid Waiver documents. When a case manager creates a secondary file, all of the documents in Section 1 should be placed in the new file.

- a. Automated Data System (eCAMRIS) Demographic Face Sheet – eCAMRIS client summary report or Current data; review and update annually or more frequently based on changes in information; all others to inactive status.
- b. Admission Papers – DDS (Original Papers), Involuntary Placements, ICF (DDS 124, W-352).
- c. Discharge Papers – DDS 58, ICF (W-353).
- d. Court Records or Orders (Includes Probate records, Forensic, Guardianship) – Two Assessments and Decrees readily available, the remainder to inactive status storage.
- e. Photos – Optional
- f. Birth Certificate – One copy
- g. Social Security Card – One copy
- h. Authorizations/Consents – Current documents readily available
- i. Advocate Assignment Letter – Optional
- j. Acknowledgment of Receipt of Notice of Privacy Practices – One copy – Or documentation regarding notice of privacy practices.
- k. Intake – DDS Request for Eligibility, Psychologist's determination of eligibility, eligibility hearing decision document.
- l. Legally Liable Relative or Legal Liability form.
- m. Medicaid Waiver – Initial waiver packet, all historical re-certifications. **Note:** all HCBS Redeterminations, IP.10 forms, should be kept in the current Master file and should be filed in Section 1 when Individual Plans over 5 years are moved to storage.
- n. Voter Registration – Initial acceptance to vote form. Three years declination forms if of age and declines to register. Also include notification to guardian or conservator of voting or voting registration opportunities if resident of DDS-licensed setting, if applicable.
- o. Any other records related to this area.

2. Case Management

Section 2 should include all case management notes, reports or summaries.

- a. Case Management Notes (also known as Running Notes or Progress Notes) – At a minimum to include date, contact, location, and signature and title after each entry. These notes should be maintained back to the first date of HCBS Waiver enrollment, if applicable, otherwise five calendar years readily available; beyond five years and prior to HCBS Waiver enrollment, may be moved to inactive storage.
- b. Case Management Summary/Intake Summary (previously Social Services Summary Update) or Intake Evaluations – Original document required for all individuals. Do not remove from file.
- c. Transfer Summary/Discharge Summary – Most current document; if applicable, all others to inactive storage.
- d. Any other records related to this area.

3. **Assessments and Clinical Services**

Section 3 should include all medical and clinical and need assessments including the LON and should include all medical and clinical reports, evaluations or summaries. This section also includes Program Review Committee (PRC) or Human Rights Committee (HRC) documents.

- a. Medical/Nursing Records – Most recent physical exam report, Nursing or health care plans; five years readily available; beyond five years to inactive storage.
- b. Immunization Records – Most current document, if available. Case manager should request these records during the intake process and should attempt to procure them for those already in service.
- c. Physical Therapy – Five calendar years readily available; beyond five years to inactive storage.
- d. Occupational Therapy – Most current, if applicable; five calendar years readily available; beyond five years to inactive storage.
- e. Dental Services – Most current, if applicable; five calendar years readily available; beyond five years to inactive storage.
- f. Hospitalizations and Psychiatric hospitalization forms including Psychiatric Services Hospitalization tracking form – if applicable.
- g. Psychiatric Services – All evaluations, if applicable.
- h. Psychological Services – All psychological and behavioral evaluations. Each individual age should have a psychological evaluation by the age of seven years and six months.
- i. Speech Services – Most current, if applicable; five calendar years readily available; beyond five years to inactive storage.
- j. Clinical Progress Notes – Most current, if applicable. Five years readily available and over five years in inactive storage.
- k. Level of Need Assessment and Screening Tool (LON) or Health and Safety Screening (optional or My Health and safety screening) – Most current if applicable
- l. LON Summary Report
- m. Behavior plan – if applicable. Most current; maintain five years; beyond five years to inactive storage.
- n. Program Review Committee Approval/Signature Sheet – Most current, maintain five years; beyond five years inactive storage.
- o. Human Rights Committee Referrals and Recommendations
- p. Do not resuscitate (DNR) orders, if applicable.
- q. Any other records related to this area

4. **Service and Support Provider Reports**

Section 4 should include all residential, employment, day, school or individual and family support evaluations or reports.

- a. Residential Evaluations/ Teaching Strategies/Protocols/Guidelines - Five calendar years readily available; beyond five years to inactive status storage.
- b. Employment/Day/Vocational/Educational Reports/ Teaching Strategies/Protocols/Guidelines – Includes residential school reports - Five calendar years readily available; beyond five years to inactive status storage. If either or both of the two most recent reports are over five years old,

- maintain in the current master file. Include IEP, IFSP, Transition School to Work Plan, Vocational/Employment Plan.
- c. Vocational/Educational Meeting Minutes – Five calendar years readily available; beyond five years to inactive status storage.
- d. IFS Reports (includes Family Support Worker or Transition Coordinator reports) Reports – Five calendar years readily available; beyond five years to inactive status storage.
- e. Any other records related to this area.

5. Referrals, Correspondence, and Entitlements

Section 5 should include referrals, applications and requests for services, correspondence and entitlement and benefit applications. The entitlement documents in Section 5 (o. through q.) should be filed in Section 7 in Master File folders which have 8 sections.

- a. Planning and Resource Allocation Team (PRAT) Requests, Forms and Responses, PRAT Allocation Letters – For residential and day support– Five years readily available; beyond five years to inactive status storage.
- b. Waiting List (WL) Priority Checklist
- c. Utilization Resource Review (URR) – if applicable.
- d. Personal Control of Resources form, if applicable
- e. Respite Services –respite center visits –most recent request form; five fiscal years readily available, all others to inactive storage, ongoing computerized record.
- f. Family Reunion Program if applicable– Five fiscal years readily available; all others to inactive storage, ongoing computerized record.
- g. Individual and Family Support Grant – Five fiscal years readily available; all others to inactive storage, ongoing computerized record.
- h. Rent Subsidy Application and Forms – Most recent if applicable
- i. Welfare fund loans – if applicable.
- j. Internal and/or External Correspondence and Memos – Two calendar years. Two to five years readily available; beyond five years move to inactive status storage.
- k. Notice of Meetings – Two entire calendar years
- l. OBRA letters/correspondence – All, if applicable
- m. PAR Results – All, if applicable
- n. Voluntary Services Application, if applicable
- o. Department of Social Services Applications – Most recent if applicable
- p. Social Security and Financial Information – Most recent if applicable.
- q. Benefits/Financial Entitlements (Veteran’s, Railroad, SSDI, etc.) – Most recent if applicable.
- r. Any other records related to this area

6. Individual Plan

Section 6 should include the current plan documents.

- a. Individual Plan, Individual Plan – Short form, or Follow Along Plan – Maintain five years. Beyond five years, place in inactive status storage. Includes Aquatic Activity Screening.
Note: all IP.10 forms, HCBS Redeterminations, should be kept in the current Master file and should be moved to Section 1 when Individual Plans over 5 years are moved to storage.
- b. Planning and Support Team Meeting Minutes/Plan Reviews – Maintain for five years; beyond five years, move to inactive status storage.
- c. Individual Progress Reviews, Periodic Reviews of the plan – Maintain for five years; beyond five years, move to inactive status storage.
- d. Self-directed supports progress summary documentation. Five calendar years readily available; beyond five years to inactive status storage.
- e. Transition Plan and Packet if applicable – Most current documents in individual record; five years readily available; All others to inactive status storage.
- f. OBRA – Annual Resident Review
- g. Any other records related to this area.

7. Entitlements and Benefits

Master File folders which have 8 sections should include the following entitlement and benefit documents in Section 7. Otherwise they should be filed in Section 5.

- a. Department of Social Services Applications – Most recent if applicable
- b. Social Security and Financial Information – Most recent if applicable, ongoing computerized record.
- c. Benefits/Financial Entitlements (Veteran's, Railroad, SSDI, etc.) – Most recent if applicable.
- d. Any other records related to this area.

8. Individual Budget Information

Master File folders which have 8 sections should include the following individual budget or self-directed supports documents in Section 8. These documents should be kept in a separate folder for individuals with 6 section Master File folders.

- a. Individual Budget – Most recent if applicable.
- b. Agreement for Self Directed Supports or Individual Support Agreement – The master file/individual record should include a copy of the Agreement for Self Directed Supports or Individual Support Agreement (ISA) for individuals who receive individual supports for the current year.
- c. Vendor Agreements – Most recent if applicable
- d. Fiscal Intermediary Reports – Current year – if applicable. Maintain for five years; beyond five years, move to inactive status storage.
- e. Any other additional documentation.

9. Additional Documentation

The following documentation should be maintained in separate folders:

- a. Incident Reports/255 Forms – Case manager should receive, review and maintain in a separate folder for one year.
- b. Protective Service Plans (PSP) – Immediate Protective Services Plan (PSP), OPA Recommendations, and all PSP updates should be maintained in a separate folder.
- c. Individual Budgets, Individual Support Agreement or Self-Directed Supports Agreement, Vendor Agreements, Fiscal Intermediary Reports.
- d. Paper copies of case manager QSRs completed before the QSR data system was operational, should be maintained in a separate folder. The case manager is not required to file paper copies of the QSR dated after the implementation of the QSR data application.
- e. Any other additional documentation.

E. References

- a. Eligibility Policy and Procedure
- b. Individual Planning Policy
- c. Components of an Individual Plan Procedure
- d. Planning and Support Team Procedure
- e. Discontinuance of Services Policy and Procedure
- f. Regional Responsibility for Services Policy and Procedure
- g. Master File/Individual Record Policy
- h. Frequency of Case Management Contacts Procedure
- i. eCAMRIS Automated Data System Maintenance Procedure
- j. Targeted Case Management Procedure
- k. Service Coordination Procedure
- l. Intake and Initial Visit Procedure

F. Attachments

None