



A Place Meant, Integrated Human Services

Everyone Deserves a Place Meant for Them.

Shared Living Provider (SLP) Welcome Letter and Onboarding Packet

Omaha, Nebraska

Welcome Letter

Dear Shared Living Provider,

Welcome to A Place Meant, Integrated Human Services. We are pleased to welcome you as a potential Shared Living Provider (SLP) serving individuals with developmental disabilities in a safe, supportive, structured, and person-centered home environment.

Shared Living is more than opening your home. It is a commitment to helping an individual build independence, maintain health and safety, participate in the community, develop daily living skills, and experience belonging within a stable home.

Because our agency supports individuals with medical, mental health, and behavioral needs, we expect SLPs to be experienced, dependable, trauma-informed, and able to follow written plans, documentation requirements, medication protocols, and agency oversight instructions.

This welcome packet outlines the minimum requirements, onboarding steps, documentation duties, training expectations, and ongoing compliance responsibilities for SLP providers affiliated with A Place Meant.

Agency Standard: Every SLP home must protect the individual's rights, dignity, health, safety, privacy, choice, and community access while providing consistent daily support and timely documentation.



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Section 1: Required Onboarding Steps

Before a placement can begin, the following steps must be completed, reviewed, and approved by A Place Meant. A provider may not begin billable SLP services until the agency confirms that onboarding and authorization requirements are met.

- **Application and provider screening:** Complete all agency onboarding forms truthfully and provide all requested identifying information.
- **Required identification:** Submit a valid photo ID/driver's license, Social Security card or proof of SSN, current address, phone number, email, and emergency contact information.
- **Tax and payment documents:** Submit a completed W-9 and direct deposit information if requested by the agency.
- **Background checks and registry checks:** Complete criminal background screening, Adult Protective Services check, Child Abuse/Neglect Central Registry check, sex offender registry screening, and any other check required by agency policy or Nebraska DHHS expectations.
- **Household member disclosure:** Disclose all adults and minors living in the home and immediately report any changes in household composition.
- **Medicaid/Maximus enrollment or affiliation:** Complete provider enrollment, affiliation, or related Medicaid requirements as directed by A Place Meant.
- **Signed SLP contract:** Review and sign the A Place Meant SLP contract before placement. The contract governs duties, payment, documentation, oversight, and compliance expectations.
- **Home study and home walkthrough:** Allow A Place Meant to review the home for safety, cleanliness, sleeping arrangements, emergency readiness, privacy, and appropriateness for the person's needs.
- **Final Settings / HCBS settings review:** The home must support rights, privacy, dignity, choice, community access, and freedom from unnecessary restriction.
- **Training completion:** Complete required training before placement and keep all recurring trainings current.

Section 2: Documents to Submit

The following documents may be required during onboarding or before a specific placement is approved. Some items are required for all providers, while others are required based on the person's needs, transportation arrangements, medication supports, or home circumstances.

✓	Requirement	Notes / Due Date
☐	Completed SLP application / provider profile	
☐	Valid photo ID or driver's license	



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☐	Social Security card or proof of SSN	
☐	W-9 form	
☐	Direct deposit form, if applicable	
☐	Current phone number, email, and emergency contact	
☐	Auto insurance, vehicle registration, and driver's license if transporting individuals	
☐	Homeowner or renter insurance, if requested	
☐	CPR / First Aid certificate	
☐	Medication aide certificate or nurse-verified medication competency, if applicable	
☐	MANDT / de-escalation training certificate, if required	
☐	Abuse, neglect, exploitation, and mandatory reporting training	
☐	HIPAA / confidentiality training	
☐	Therap documentation training	
☐	Safety plan and ISP training confirmation	
☐	Pet vaccination records, if applicable	
☐	Fire drill / emergency evacuation plan, if requested	



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Section 3: Required Training

Training is not optional. SLPs must complete required onboarding training and maintain ongoing training to remain in good standing. Additional training may be assigned based on a participant's safety plan, ISP, diagnosis, behavior support needs, medical needs, or corrective action plan.

- Abuse, neglect, exploitation, and mandatory reporting
- Participant rights, dignity, privacy, and person-centered support
- Boundaries, professionalism, and ethical conduct
- Trauma-informed care
- MANDT or agency-approved de-escalation training, when required
- CPR / First Aid
- Medication aide training or medication competency, when applicable
- Safety plan review and competency
- ISP program implementation and data collection
- Therap documentation, T-Logs, ISP data, appointments, and GERS
- HIPAA / confidentiality
- Emergency procedures, elopement response, and crisis reporting
- Transportation safety, if transporting individuals

Providers must participate in retraining when requested by the CEO, agency nurse, compliance team, Director of Operations, or other designated agency leadership. Refusal or failure to complete retraining may result in payment hold, suspension of placement activity, or termination of the SLP contract.

Section 4: Home Readiness and Safety Expectations

The SLP home must be safe, clean, respectful, and appropriate for the person being supported. The home must also support the person's privacy, dignity, routines, relationships, personal belongings, community access, and daily living skill development.

- The individual must have a safe and appropriate sleeping area.
- Medication, sharps, cleaning products, weapons, and other safety hazards must be secured as required by the safety plan and agency direction.
- The home must have working smoke detectors and basic emergency readiness practices.
- The provider must maintain a plan for emergency backup support and immediately notify the agency if coverage is needed.
- The home must support privacy, dignity, and access to personal belongings unless a team-approved restriction is in place.
- The provider may not move the individual to another home, leave the individual with an unauthorized person, or use an unapproved respite provider.



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- Changes in address, household members, pets, safety concerns, or provider availability must be reported immediately.

Section 5: Participant Rights and Restrictions

Individuals served by A Place Meant have rights. SLPs must respect privacy, dignity, choice, cultural preferences, access to personal property, freedom of movement, communication, visitors, food, money, community access, and participation in daily decisions.

An SLP may not create restrictions independently. Any restriction involving food, phone use, visitors, money, community access, bedroom access, personal property, privacy, relationships, movement, or daily choices must be reviewed by the team and approved through the agency rights process when required.



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Section 6: Therap Documentation Requirements

A Place Meant uses Therap for required service documentation. Documentation must be timely, accurate, objective, respectful, and complete. Providers should document what happened, what was observed, what support was provided, who was notified, and what follow-up occurred.

- **Daily notes / T-Logs:** Complete when required by the agency or based on the person's support needs.
- **ISP data:** Enter ISP program data accurately and according to the assigned schedule and scoring method.
- **Behavior tracking:** Document target behaviors, antecedents, interventions, de-escalation steps, outcomes, and notifications when required.
- **Health tracking:** Document health concerns, appointments, symptoms, changes, and follow-up as directed.
- **MAR documentation:** Document medications at the time of administration when responsible for medication support.
- **GER reporting:** Complete incident documentation and follow the full GER process, including the final GER Resolution tab when assigned.

Documentation should never be exaggerated, emotional, blaming, or disrespectful. Do not use judgmental wording. Use objective language such as: participant stated, staff observed, provider redirected, guardian notified, nurse notified, baseline regained, or follow-up completed.

Section 7: Appointments, AVS, and Consultation Forms

Medical, dental, vision, therapy, psychiatric, and other appointments must be documented properly. The agency must be able to verify appointments, follow-up instructions, medication changes, and care coordination.

- Enter appointments in Therap as soon as they are known.
- Upload the After Visit Summary (AVS) to the same appointment record after the visit.
- If no AVS is provided, complete and upload the Consultation Form to the appointment record.
- Document cancelled, missed, or rescheduled appointments.
- Notify the agency nurse immediately of medication changes, new orders, discontinued medications, hospital visits, emergency room visits, or significant health concerns.
- Follow all physician instructions and report any barriers to completion.

Section 8: Medication and Health Oversight

Medication support must be handled with care, accuracy, and accountability. Providers may not change, hold, discontinue, or alter medications unless there is proper medical direction and agency notification.

- Store medications safely and securely according to the safety plan and agency nurse instructions.
- Document medication administration at the time of administration when responsible for MAR documentation.



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- Report medication refusals, missed doses, errors, unavailable medication, side effects, or concerns immediately.
- Follow pharmacy labels, physician orders, nurse instructions, and agency procedures.
- Maintain medication privacy and avoid discussing health information with unauthorized individuals.



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Section 9: GER and Incident Reporting

All incidents must be reported immediately according to agency procedure. When in doubt, contact the agency. Do not wait until the next business day for urgent safety, health, rights, or crisis concerns.

- Abuse, neglect, exploitation, or suspected mistreatment
- Serious injury or unexplained injury
- Medication error, missed medication, refusal, or unavailable medication
- Emergency room visit, hospitalization, urgent care, or major health change
- Police involvement, crisis response, or emergency services contact
- Elopement, missing person concern, or unsafe community behavior
- Threats, aggression, property destruction, unsafe behavior, or behavioral crisis
- Use of emergency safety intervention
- Rights violation or possible restriction concern
- Allegations made by or against the participant
- Any situation that threatens health, safety, rights, or placement stability

The provider must cooperate with the agency in completing all follow-up, including written statements, GER documentation, guardian notifications, nurse follow-up, team meetings, and the final GER Resolution tab when applicable.

Section 10: Communication Expectations

SLPs must maintain professional and timely communication with A Place Meant. This includes responding to calls, texts, emails, Therap messages, meeting requests, compliance notices, and documentation requests.

- Notify the agency immediately of changes in the individual's health, behavior, mood, medications, safety, or support needs.
- Notify the agency of any appointment scheduled, missed, cancelled, or changed.
- Notify the agency before using respite or backup coverage.
- Notify the agency of household changes, address changes, or concerns that affect placement stability.
- Attend required team meetings, ISP meetings, trainings, corrective action meetings, and compliance meetings.
- Cooperate with nurse, compliance, operations, and CEO-level oversight requests.

Section 11: Respite and Backup Coverage

Respite and backup coverage must be approved by A Place Meant before use. The provider may not leave the individual with an unauthorized person, untrained person, or unapproved respite provider.

- Provide advance notice when respite or backup coverage is needed whenever possible.
- Use only agency-approved respite or backup providers.



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- Provide the respite provider with the person's safety plan, medication instructions, daily routine, emergency contacts, and support needs as directed by the agency.
- Immediately notify the agency of emergency coverage needs.



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Section 12: Payment and Compliance Expectations

SLP payment is tied to approved service delivery, documentation, contract compliance, and billable service requirements. Services may become unbillable when documentation is missing, inaccurate, late, incomplete, or not completed according to agency expectations.

Payments may be delayed, placed on hold, reduced, forfeited, or required to be refunded when provider error or neglect causes services to be unbillable or when required compliance items are not met.

- Missing or late AVS / consultation forms
- Appointments not entered in Therap
- Missing ISP data, T-Logs, or daily documentation
- Incomplete GER documentation or unresolved GER follow-up
- Expired training, missing certificates, or incomplete retraining
- Failure to follow safety plans, medication protocols, or nurse instructions
- Failure to respond to agency compliance requests
- Use of unapproved respite or backup coverage
- Failure to maintain a safe and appropriate home setting
- Any documentation issue that causes billing to be unsupported or unbillable

A Place Meant will provide training, guidance, and corrective action support. Repeated noncompliance may result in a Performance Improvement Plan, payment hold, suspension of placement activity, removal of an individual from the home, or termination of the SLP contract.

Section 13: What A Place Meant Expects From SLP Providers

Compassionate	Experienced	Reliable
Professional	Person-Centered	Responsive

Providers should be able to support individuals with daily routines, household skills, hygiene, nutrition, medication routines, appointments, budgeting, community participation, coping skills, behavior support, and independence-building goals.

Section 14: Quick Start Checklist

✓	Requirement	Notes / Due Date
☐	Read this welcome letter and onboarding packet fully	



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☐	Submit all onboarding documents requested by the agency	
☐	Complete background and registry checks	
☐	Complete Medicaid/Maximus enrollment or affiliation steps	
☐	Sign the SLP contract	
☐	Complete home walkthrough and home study	
☐	Complete Final Settings / HCBS settings review	
☐	Complete required training and submit certificates	
☐	Complete Therap access and documentation training	
☐	Review participant ISP, safety plan, medication needs, and daily routines before placement	
☐	Confirm respite/back-up coverage process with the agency	
☐	Begin services only after written confirmation from A Place Meant	



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Acknowledgement of SLP Onboarding Requirements

By signing below, I acknowledge that I received and reviewed the A Place Meant, Integrated Human Services Shared Living Provider Welcome Letter and Onboarding Packet. I understand that I am responsible for following agency policies, SLP contract requirements, training expectations, documentation procedures, safety plans, medication protocols, appointment/AVS requirements, GER reporting requirements, and all other instructions provided by A Place Meant.

I understand that failure to meet documentation, safety, training, communication, or compliance requirements may result in retraining, a Performance Improvement Plan, payment hold, suspension of placement activity, removal of a participant, or termination of the SLP contract.

Provider Name:

Provider Signature:

Date:

Agency Representative:

Agency Representative Signature:

Date:

Closing

We are honored to have you consider becoming part of the A Place Meant provider network. Shared Living Providers are a critical part of helping individuals live in safe, supportive homes while building independence and stability. The individuals we serve deserve a home environment where they are safe, respected, supported, and given the opportunity to grow.

Welcome to A Place Meant, Integrated Human Services.

Sincerely,

Felicia Frezell

CEO

A Place Meant, Integrated Human Services

Phone: 402-275-6633 | Email: aplacemeant@gmail.com

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