

Staff Action Plan Upload Guide

This document outlines the process for finalizing and signing a Staff Action Plan.

1. From the Dashboard for a Participant, select the **Staff Action Plan** tab.

ISS INDEPENDENT SUPPORT SERVICES INC. Make your Own Path

Dashboard Budget Documents **Staff Action Plan** Hab Plan Contacts

Dashboard For Thomas Thompson Demo

MEDICAID
\$0.00
spent out of \$68,768.80
100% Remaining

OTPS
\$0.00
spent out of \$1,350.00
100% Remaining

REMAINING PERCENTAGES

COMHAB	100%
BROKERAGE	100%
COMMUNITY CLASSES	100%
MEMBERSHIPS	100%

Viewing Budget for: 2018-07-01 - 2019-06-30

[Detail View](#)

2. Click the **Draft Plan** button.

ISS INDEPENDENT SUPPORT SERVICES INC. Make your Own Path

Dashboard Budget Documents **Staff Action Plan** Hab Plan Contacts

Current Staff Action Plan For Thomas Thompson DEMO

This is the current Staff Action Plan and is not editable.

[Current Plan](#) **[Draft Plan](#)**

3. Finalize the plan

1. Select an option for Care Coordination Organization.
2. Fill in Review Date and Distribution Date.
3. Click **Finalize**.

ISS INDEPENDENT SUPPORT SERVICES INC. Make your Own Path

Dashboard Budget Documents **Staff Action Plan** Hab Plan Contacts

Draft Staff Action Plan For Thomas Thompson DEMO

This Staff Action Plan is in draft mode and is editable.

[Current Plan](#) **[Draft Plan](#)**

Participant Name
Thomas Thompson DEMO

Medicaid CIN
TT00000T

Care Coordination Organization
Please select...

Dates
Review Date: mm/dd/yyyy
Distribution Date: mm/dd/yyyy

[Finalize](#) [Delete](#) [Download Draft PDF](#)

OUTCOMES COMPLETED
CLICK TO VIEW

PLAN SAFEGUARDS COMPLETED
CLICK TO VIEW

SD SAFEGUARDS COMPLETED
CLICK TO VIEW

4. Add broker signature

1. Sign or type a signature for Broker Signature
2. Click **Save Signature**.

Signature Method
[Sign](#) **[Type](#)**

Broker Signature

Sign above with your finger or mouse

[Clear](#) **[Save Signature](#)**


[Approve](#) [Cancel](#) [Download Draft PDF](#)

5. Get Participant Signature:

There are two options for this: an electronic signature, or print and sign.

1. Option 1: Electronic Signature

- If the Participant has login credentials to the portal and are present, they can enter their credentials in the form fields to validate.



Broker Signature

Johnny Broker DEMO, title: Support Broker signed on June 11, 2019 @ 14:46

Rather print and sign?

If you are with the participant or designee, please have them login and below. Otherwise choose the print and sign option.

Participant Login

Login Email Address

Participant Password

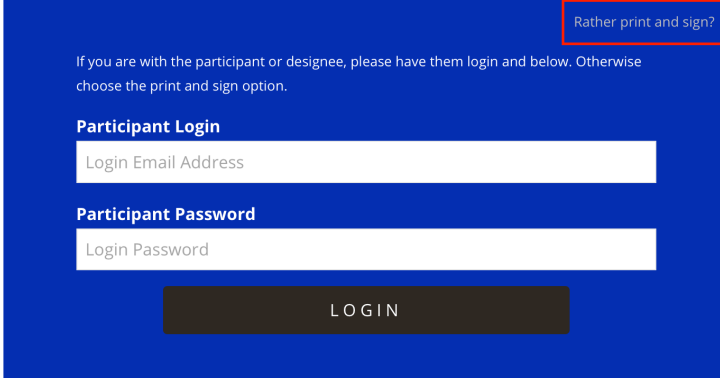
Login Password

LOGIN

Approve Cancel Download Draft PDF

2. Option 2: Print and Sign

1. If the participant does not have login credentials to the portal or is not present, select **Rather print and sign?**



Rather print and sign?

If you are with the participant or designee, please have them login and below. Otherwise choose the print and sign option.

Participant Login

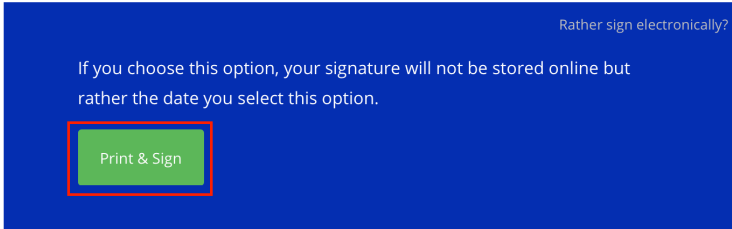
Login Email Address

Participant Password

Login Password

LOGIN

2. Click **Print & Sign.**



Rather sign electronically?

If you choose this option, your signature will not be stored online but rather the date you select this option.

Print & Sign

3. Click **Approve.**

Broker Signature



Johnny Broker DEMO, title: Support Broker signed on June 11, 2019 @ 14:46

Participant Signature

Upon approval, you agree to download the document, print it off, collect the participant's signature, and upload a signed copy of the plan.

Johnny Broker DEMO, title: Support Broker selected print and sign on June 11, 2019 @ 14:48

Approve

Cancel

Download Draft PDF

4. Click **Download PDF to Sign**.

Participant Name

Thomas Thompson DEMO

Medicaid CIN

TT00000T

Care Coordination Organization

Care Design NY

Dates

06/11/2019

06/12/2019

Review Date

Distribution Date

Download PDF to Sign

Upload Signed Plan

5. Print the PDF.
6. Have the Participant or Advocate sign the printed plan.

6. Upload the Signed Plan

1. Scan the signed plan.
2. From the Current Staff Action Plan page in the portal, click **Upload Signed Plan**.

Current Staff Action Plan For Thomas Thompson DEMO Current Plan Create New

This is the current Staff Action Plan and is not editable.

Participant Name

Thomas Thompson DEMO

Medicaid CIN

TT00000T

Care Coordination Organization

Care Design NY

Dates

06/11/2019

Review Date

06/12/2019

Distribution Date

[Download PDF to Sign](#)

[Upload Signed Plan](#)



OUTCOMES COMPLETED
[CLICK TO VIEW](#)



PLAN SAFEGUARDS COMPLETED
[CLICK TO VIEW](#)



SD SAFEGUARDS COMPLETED
[CLICK TO VIEW](#)

3. Drag and drop or click to select the scanned document.

Upload Signed Plan

Drag and drop your document here to upload, or click here to choose a document.

(Max file size: 20MB; Accepted file types: PDF)

7. Download Signed Plan

1. To download the signed plan that was uploaded, click **Download Signed Plan**.

Current Staff Action Plan For Thomas Thompson DEMO Current Plan Create New

This is the current Staff Action Plan and is not editable.

Document uploaded successfully!

Participant Name

Thomas Thompson DEMO

Medicaid CIN

TT00000T

Care Coordination Organization

Care Design NY

Dates

06/11/2019

Review Date

06/12/2019

Distribution Date

[Download PDF to Sign](#)

[Download Signed Plan](#)



OUTCOMES COMPLETED
[CLICK TO VIEW](#)



PLAN SAFEGUARDS COMPLETED
[CLICK TO VIEW](#)



SD SAFEGUARDS COMPLETED
[CLICK TO VIEW](#)

🔄Revision #1

★Created Mon, Nov 30, 2020 9:57 PM by [Admin](#)

✎Updated Sat, Dec 14, 2024 1:37 AM by [Admin](#)