

FGMI Policies/Procedures Review

Initial after review

Consumer Handbook

- a. Admission Criteria Policy
- b. Data Privacy Policy
- c. Drug and Alcohol Policy
- d. Grievance Policy
- e. Service Suspension and Termination Policy

Maltreatment of Minors Mandated Reporting and Internal Review Policy

Maltreatment of Vulnerable Adults Reporting and Internal Review Policy

Incident Response, Reporting and Review Policy

Safe Medication Assistance and Administration Policy

Safe Transportation Policy

Universal Precautions and Sanitary Practices Policy

Emergency Use of Manual Restraints Policy

Addendums

I am signing this form electronically. My name as typed in the signature field is my legally binding signature. I understand that my electronic signature has the same legal effect and can be enforced in the same way as a handwritten signature.

I have reviewed, understand, and agree to abide by the above policies/procedures. I understand these policies are available at the Foundations Group of MN, Inc. office, as well as on their website (www.fgmi.net) should I ever need to reference them again.

Date: _____

Print Name: _____

Signature: _____