

# Informed Consent

## Informed Consent

I understand that my Remote Supports Plan is based on an assessment of my health and safety needs and affirm that the risks and benefits of utilizing Remote Supports has been explained to me. My signature below indicates that I am giving informed consent for the use of Remote Supports in my home and for the implementation of the Remote Supports Plan.

## System-Off Procedure

In the event the individual who requires 24-hour support asks for the Remote Support system to be turned off, NOSS or provider staff will immediately dispatch backup personnel to the home. The Remote Supports system will remain in operation until the backup personnel arrives.

## Emergency Procedure

In the event of prolonged power outage, fire, weather emergency, or personal emergency, NOSS will contact emergency responders first and then contact designated backup personnel. NOSS will remain engaged with the individual(s) until emergency services or backup personnel have arrived, or until the emergency has resolved.

In the event of an urgent or emergency situation, staff responders must arrive to the individual's home within a reasonable time frame.

## Discontinuation Procedure

In the event the individual desires to withdraw consent for Remote Supports services, they will notify their Case Manager. As informed consent is a prerequisite for utilization of Remote Supports services, a meeting of the team would be needed to discuss available options for any necessary alternate supports. All residing adult and youth individuals, their guardians, and their support teams impacted by the decision to withdraw consent must be immediately informed of the decision and use of Remote Supports in the setting must be discontinued.

Individual/Guardian Name

Individual/Guardian Signature

Date

Case Manager Name

Case Manager Signature

Date

Other Name

Other Title

Other Signature

Date

Other Name

Other Title

Other Signature

Date