

APPENDIX 33: *PARTICIPANT ORIENTATION CHECKLIST FORM*

PARTICIPANT ORIENTATION CHECKLIST

INDIVIDUAL INFORMATION			
Name	Date	Program	Program Manager
If CLBC	Contract Start date:	Funding:	

INFORMATION FOR ALL INDIVIDUALS

Orientation item	Date
Has received Individual and Family Handbook	
Has Reviewed in Handbook:	
	Your Rights as a Person Living in Canada
	Privacy at Lifetime Networks
	Conflict Resolution at Lifetime Networks
	Your responsibilities
	Planning Your Services with You
	Lifetime Networks Leadership Team Contact Information
Registration Form completed	
SIVA "At-a-Glance" document completed	
Internal consent for release of information signed	
External consent for release of information signed (if needed)	
Photograph and Video Consent signed	
Emergency evacuation procedure reviewed (if joining an on-site program)	
Has received information sheet on community resources	
CLBC plan on file (if available)	
Health Care Plan on file (if needed)	
Behaviour Support Plan/Safety Plan on file (if needed)	
Signed "New Participant Agreement" (if paying privately)	
Representation Agreement on file (if applicable)	