

Policy & Procedure Manual

PRIMARY/SECONDARY COUNSELLOR – R-I-4

POLICY:

Each person supported residentially by the Personal Support Services Department of OPTIONS northwest shall have access to a Primary and Secondary Counsellor.

PURPOSE:

To ensure that each person supported has access to an employee who is accountable for the co-ordination of all ongoing support.

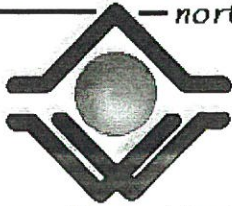
PROCEDURE:

The Supervisor of each residential area shall assign a Primary and Secondary Counsellor for all persons receiving residential support. A temporary Primary/Secondary Counsellor will be appointed during extended absences of those assigned.

DUTIES:

The Primary/Secondary Counsellor:

1. Is familiar with the individual's support needs identified through the personal planning process.
2. The Primary/Secondary Counsellor Check List (see Appendix A) will be completed. The check list will be kept in the front of the Individual Support Plan Binder.
3. Develops a financial support plan with the individual and/or the person acting on their behalf. This is to be reviewed and signed annually and as required according to Management of Recipient's Finances R-1-9.
4. Completes the Annual Support Plan and all required forms while co-ordinating the planning meeting in accordance with the Annual Support Planning Policy R-I-5.
5. Ensures the agency's Mission, Philosophy, Recipient's Bill of Rights and Abuse Policy is reviewed with the individual in accordance with Rights and Abuse Awareness and Training Policy AD-III-10.



Personal Support Services

POLICY: R-I-4

DEPARTMENT: Personal Support Services

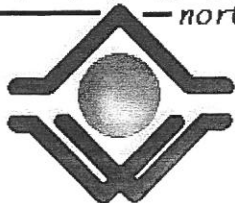
CATEGORY: Personal Planning and Supports

EFFECTIVE DATE: July 2014

SUPERSEDES VERSION DATED: August 2013

Page 2 of 3

6. Obtains authorization as required in accordance with Collection, Use and Disclosure of Service Recipient's Personal Information Policy AD-I-10.
7. Completes and updates the Individual Support Plan yearly during the annual planning process, and as required according to Individual Support Plan Policy R-I-6.
8. Completes a Monthly Summary Update and Six Month Progress Report in accordance with Annual Support Plan Policy R-I-5.
9. Ensures that updates to the Personal/Medical Data form and the Health Appointment Record/Log are completed as required.
10. Ensures annual physical and dental appointments are booked, and monitors their follow-up. The dates for both will be entered on the Primary/Secondary Counsellor Check List.
11. Monitors the individual's nutritional status e.g. weight, diet. (for weight refer to Individual's Weight R-III-5)
12. Ensures that monthly breast examinations are completed, according to Breast Examination/Menstruation Record Policy R-IV-18.
13. Monitors the individual's emotional and physical status ensuring early intervention as required and then evaluates the intervention.
14. Develops, evaluates and revises Skill Development Plans, Safety Plans, Behaviour Support Plans, and other Protocols, and Guidelines as required. Team members and community resources will be utilized in order to best develop and meet the individual's needs.
15. Ensures the purchase of personal items, e.g. clothing appropriate for the season, shoes/boots, personal hygiene items, furniture, and accessories. All items purchased or received for the individual with a value of over \$50, (or under \$50 but considered to be an attractive item such as electronic equipment/games), will be added to the Recipient's Valuables Inventory (see Appendix B). If an item has been removed, the date and reason will be indicated on the form. The Individual's family/PGT will be informed if the item was of significant value. This form will be filed in the Personal Inventory section of the Individual Support Plan binder.
16. Support and educate the individual in caring for and maintaining their personal property.
17. Encourages and facilitates the development of meaningful relationships/friendships with others in the community and completes the Natural Support Network Plan according to Natural Support Network Policy R-I-7.



Personal Support Services

POLICY: R-I-4

DEPARTMENT: Personal Support Services

CATEGORY: Personal Planning and Supports

EFFECTIVE DATE: July 2014

SUPERSEDES VERSION DATED: August 2013

Page 3 of 3

18. Seeks out and evaluates all alternative or augmentative communication techniques as required and completes the Individual's Communication Dictionary in accordance with Communication Policy R-I-8.
19. Completes the rights assessment process according to Rights Assessment/Management Policy R-I-11.
20. Completes the risk assessment process according to Risk Assessment/Management Policy R-I-10.
21. Assesses the individual's recreation, leisure and vocational interests, and strives to provide opportunities to exercise those interests.
22. Develops an effective communication link with family and includes them in all aspects of the preceding, keeping them informed and up-to-date.
23. Provides on going information in a language and manner that is appropriate to the capacity of the individual in the following areas: prescription medication, diet and nutrition, personal hygiene, personal fitness, sexual health, behaviour that may pose a threat to the person's health, safety, self-esteem and well-being, communication skills, and developing relationships. If the individual requires further information that the counsellor is not able to provide, appropriate community resources will be accessed. This will be documented in the individual's progress notes as required.
24. Completes the Medication and Treatment Purpose form (see Appendix C) according to Medication and Treatment Administration Policy R-V-2. This form will be updated as required and kept in the front of each individual's section of the medication binder.

RECOMMENDED BY: Director, Personal Support Services

APPENDICES: 3

OPERATIONAL ACCOUNTABILITY: Administration, Personal Support Services
Administration, Personal Support Services

ORIGINAL POLICY DATE: April 1992

AUTHORIZED BY: Director, Personal Support Services

SIGNATURE: _____

Cheryl Duce

**- OPTIONS northwest -
PRIMARY & SECONDARY COUNSELLOR CHECKLIST**

Individual's Name: _____ Year: _____

Primary Counsellor: _____

Secondary Counsellor: _____

PERSONAL PLANNING	DATE COMPLETED/REVISED
INDIVIDUAL SUPPORT PLAN	
FINANCIAL SUPPORT PLAN	
BATHING/HYGIENE PROTOCOL	
BEHAVIOUR SUPPORT PLAN	
MEAL TIME SUPPORT PLAN	
SUPPORT NETWORK PLAN	
COMMUNICATION DICTIONARY	
RIGHTS ASSESSMENT	
RISK ASSESSMENT	
PROTOCOLS/STRATEGIES/GUIDELINES/FORMS: _____ _____ _____ _____ _____	_____ _____ _____ _____ _____
ANNUAL SUPPORT PLAN	
SIX MONTH PROGRESS MEETING	
DISCLOSURES SIGNED ANNUALLY AND AS REQUIRED	
PERSONAL INVENTORY CHECK LIST	
HOT WEATHER PRECAUTIONS ASSESSMENT	
TRAINING/EDUCATION: <input checked="" type="checkbox"/> RESPECTING RIGHTS AND PREVENTING ABUSE <input checked="" type="checkbox"/> FIRE SAFETY REVIEW <input checked="" type="checkbox"/> FEEDBACK POLICY REVIEW <input checked="" type="checkbox"/> OTHER : _____ <input checked="" type="checkbox"/> _____	_____ _____ _____ _____

APPOINTMENTS	LAST APPOINTMENT	NEXT APPOINTMENT
ANNUAL DENTAL		
ANNUAL PHYSICAL		
EYE EXAM		

PLEASE FILE IN THE FRONT OF THE INDIVIDUAL SUPPORT PLAN BINDER

