



Family Development Client Orientation Checklist

Nxwezi'tems | SSHS Child and Family Services

Boxes are to be checked off or marked n/a (not applicable). This form is to be filled in and signed by program staff, and placed in client's file at completion.

Client Name:

Yes N/A

Introduction/overview of SSHS introduction of staff and other participants as necessary.

Overview of program including, but not limited to, review of Family Service Plan, goal setting, staffing, hours of service, sign-in procedure, wait list, expected duration and results.

Guide to services and program brochure received and explained.

Client's rights including personal, consent, decision making, choice, accommodation needs, risk, advocacy, complaint, privacy, and access to records.

Necessary forms signed and understood including but not limited to, referral form, consent contract, intake documentation, release, and receipt of Information form.

Review of emergency/health procedures including the responsibility to report health and safety concerns to staff, procedures in event of emergency, etc., as applicable.

Tour of facility including location of washrooms, exits, and evacuation maps, as applicable.

Review of SSHS's use of website and social media, and associated consent/confidentiality issues, as applicable.

Explanation of Integrated Case Management meetings, and the role they play in overall service delivery.

Comments:

Please include any accommodations that will be made and any concerns you may have.

Staff Member:

Signature:

Date Assigned: