

Family Support Services Application File Checklist

Checklist for Completing a Family File

Client Name: _____

Support Services: _____

Please ensure that the following documents are included:

- Initial Contact Form
Date Occurred: _____

Intake Meeting Occurred: _____

- ASC Family Support Application Form
- "Getting to know your Family"
- Specific Consent Form
- Policy Checklist
- Personal Profile
- Family Support Services – Schedule "B"
- Profile Picture, if applicable
- Copy of FSCD Agreement
FSCD Agreement Expiry Date: _____
- Assessment, Behavioral, Medical information, if available
- Risk Assessment

Placement Committee Meeting Occurred: _____

- Placement Committee – Individual Minutes
- Placement Letter to family
Date sent: _____

If service approved:

- General Consent
- ASC Family Support Service Agreement
Date signed: _____

Placement Committee Checklist for Accounting if applicable:

- Fee for Service Client (must include)
- Block Funded Client (not required)

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Section(s):	Entry/Exit	A	Mar 18/14	R/R	Mar 17/17		
Program Area(s):	FSS/Disability						

Family Support Services Application File Checklist Continued . . .

- Contact Notes
Actual services start date: _____
- Goal Service Plan if Applicable
Completed: _____
Review Date: _____
Outcome Review Date: _____

(Throughout service delivery, remember to regularly submit for filing)

- ASC Family Service Surveys
- Contact Notes
- Incident Reports

If applicable:

- ASC Family Support Agreement Renewal
Date signed: _____
- FSCD Agreement Renewal
Expiry Date: _____

At Exit and if services not approved:

- Exit Interview Form (if possible)
- ASC Family Supports Post-Survey (if possible)
- Exit Summary Form
- Contact Notes
- Completion Letter
Date sent: _____

*** If services extend past 1 year (or more), remember to update ASC Family Support Agreement and FSCD Agreement copies**

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