



**PERSONAL ATTENDANT CARE INC.**

1615 DUNDAS ST. E. SUITE 305  
 WHITBY, ON L1N 2L1  
 Telephone (905) 576-5603  
 Fax (905) 576-8020

<b>Operational Procedure Number 5:10</b>	
<b>Page 1 of 1</b>	
<b>DEPARTMENT</b>	Client Services
<b>SUBJECT</b>	Client Identification
<b>APPROVED BY (Signature)</b>	<b>CHIEF EXECUTIVE OFFICER</b> Jennifer Hammond, RN, BScN <i>Jennifer Hammond, RN, BScN</i>
<b>APPROVED DATE</b>	October 2012
<b>REVIEWED BY (Title &amp; Signature)</b>	Anne Winacott, Client Service Manager
<b>REVIEW DATE</b>	November 2017

**OPERATIONAL PROCEDURES**

In order to facilitate verification of clients PAC requires client identification information to be provided for each referral/application and the confirmation of identification at each visit.

**Procedures**

On referral, PAC requires:

- Surname
  - Given names
  - Sex
  - Address including city
  - Phone number
  - Date of birth (dd/mm/yyyy)
  - Client health card number and version code
1. The Intake Coordinator or designated person upon accepting the referral will confirm the required information is available upon receipt of the referral/application and will follow-up with the referral source if information is missing.
  2. The Intake Coordinator or designated person will enter the client information into the electronic record and will assign a computer generated (Goldcare) PAC number.
  3. All documentation will contain the required referral information and the Goldcare number.
  4. Supervisors and staff will ask clients to present their health card on their first visit to the client's home to protect against mistaken identity and confirm identifying information such as sex, date of birth, name, address and phone number are correctly documented on the Service Plan.
  5. Employees upon their first service provision will confirm they are at the correct address as well as confirming with the client their name, date of birth, and correct sex as documented on the Service Plan.
  6. Employee will contact the office if they have reason to believe the individual is not the client.

**Attached Documents / Forms**

- Referral and Application Form 5 (a)
- Admission, Transition, Discharge Procedure 5:03
- Assessment Process Procedure 5:01
- Service Plan Form 5(d)