

APPENDIX D

PROCEDURES TO BE FOLLOWED IN THE EVENT OF A DELAY IN RECEIVING A CRIMINAL RECORD CHECK

Applicant: _____

Home/Facility: _____

Address: _____

Date: _____

As the service provider, I have:

- ☐ advised the applicant that the offer of employment is conditional upon provision of a satisfactory Criminal Record Check
- ☐ received the applicant's signed Declaration of Criminal Record, which includes an agreement to work only under direct monitoring and oversight of an approved staff person and to not manage residents' funds
- ☐ determined that the applicant's Declaration of Criminal Record is satisfactory (i.e., the Declaration contains enough detail to indicate that either:
 - the applicant has no criminal record, pardoned sexual offenses or pending charges
 - the criminal record or pending charges do not have a direct relationship to the employment
- ☐ received a clear Adult Abuse Registry check from the applicant
- ☐ received an original receipt from the applicant verifying that they have applied for a Criminal Record Check
- ☐ provided the applicant with a written list of approved staff persons
- ☐ provided the staff in charge of work schedules with written direction that the applicant cannot work alone and the names of approved staff persons
- ☐ placed all written communication to the applicant and staff in charge of scheduling on the applicant's personnel file
- ☐ placed a completed copy of this checklist on the applicant's file
- ☐ made calendar entries at regular intervals over the next six months to follow up with the applicant to make sure I have received the completed Criminal Record Check and have maintained this information on the applicant's personnel file

If the list of approved staff persons changes, as the service provider I have:

- ☐ given the updated list to the applicant
- ☐ given the updated list to staff responsible for scheduling
- ☐ put the updated list in the applicant's personnel file

Applicant: _____

Home/Facility: _____

Address: _____

Date: _____

Signature of Service Provider

Name of Service Provider

This form is to be maintained on the
service provider's personnel file.