



**Ministère de la Santé
et des Services sociaux**

Social Services Program Branch

**Regulation respecting the
classification of services
offered by an intermediate
resource and a family-type
resource**

**User guide: Form for the determination
and classification of support and
assistance services**

Non-official translation /CSSSPNQL

CHAPTER 2

FORM GUIDELINES

The following guidelines were used in developing the *Form for the determination and classification of support and assistance services*.

Primacy of the user's needs

The basic and specific needs of a user determine the services to provide by a resource. The determination and classification of services is therefore made specifically for a user and only apply for that user in a given resource.

Services to provide for the user

The Form is simple in that it focuses primarily on what services the resource must provide to meet the user's needs. Although essential for the determination of the services to provide for the user, the evaluation of the state of health and condition of the user is not included in the Form.

Continuum of services

The use of the Form is part of a continuum of services. It represents one of the clinical components of a broader process which follows the user's evaluation results and the user's situation and the development of an intervention plan by the institution. There is a dynamic continuum of services to be reviewed based on the development of the user's situation. (see Figure 1)

Transversality

The Form is unique in that it applies to all clients, adults and children, of all service programs, whether for a user assigned to an IR or an FTR.

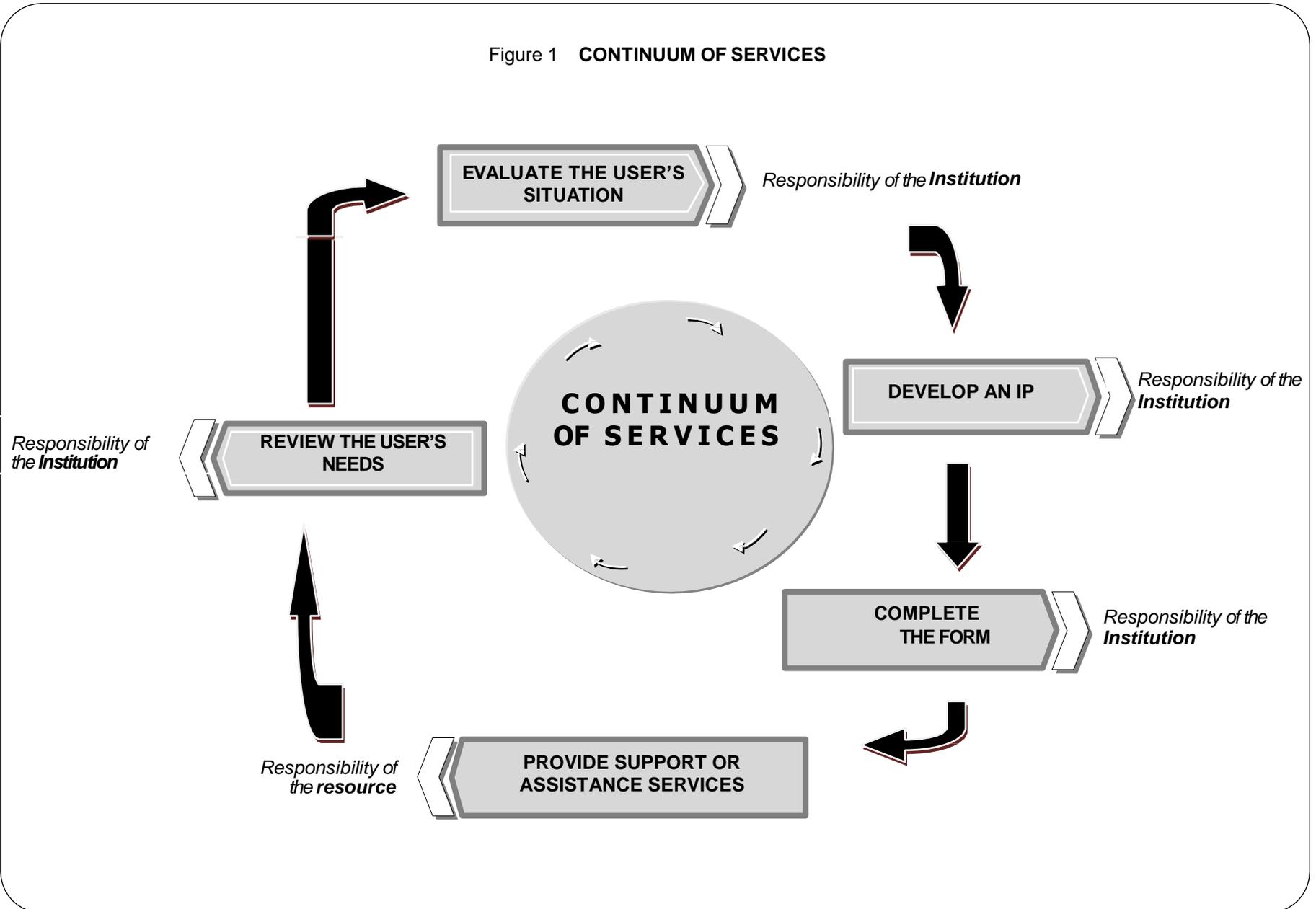
Necessary information about the user

The Form is designed to provide the resource with necessary information about the user to ensure they are taken in charge and to guide the resource on the support or assistance services expected for this user.

Compatibility of the Form

The Form is compatible with the various tools for evaluating the user's needs, which institutions usually use.

Figure 1 CONTINUUM OF SERVICES



CHAPTER 3

GENERAL ORIENTATION OF THE FORM

Section 303 of the *Act Respecting Health Services and Social Services* reads:

In order to foster an adequate framework and the regional implementation of [...] resources, and to ensure sufficient flexibility for the emergence of new resources, the Minister shall propose to agencies a classification of the services offered by [...] resources based on the degree of support or assistance required by users.

The Form is designed to classify the services offered by IR and FTR. To this end, it establishes a nomenclature of all the support or assistance services that can be offered by a resource.

Note that the support or assistance services consist of all services to provide the user with an appropriate response to their needs and situation¹.

- 1. Provide a nomenclature of all support and assistance services.**
- 2. Classify these services.**

A service is a person's action through words, gestures or attitudes in a given situation to support or assist the user.

The Form identifies support or assistance services under two categories: "common services" and "specific services".

Support or assistance services, whether common or specific, covered by the Form do not constitute professional services in terms of health services or social services. Such professional services must not be required by an IR or a FTR. However, a resource can legally engage in certain activities otherwise reserved for professionals under Sections 39.7² and 39.8³ of the *Professional Code* (RSQ, c C-26)

1 Ministère de la Santé et des Services sociaux. Translation from *Cadre de référence sur les ressources de type familial et intermédiaires*, 2001, p. 18.

2. Section 39.7 allows for a person acting within the framework of activities of an IR or FTR to perform "invasive care involved in assistance with activities of daily living that is required on a sustained basis for the maintenance of health" and reads that these activities do not constitute, in this context, a professional activity reserved to members of an order.

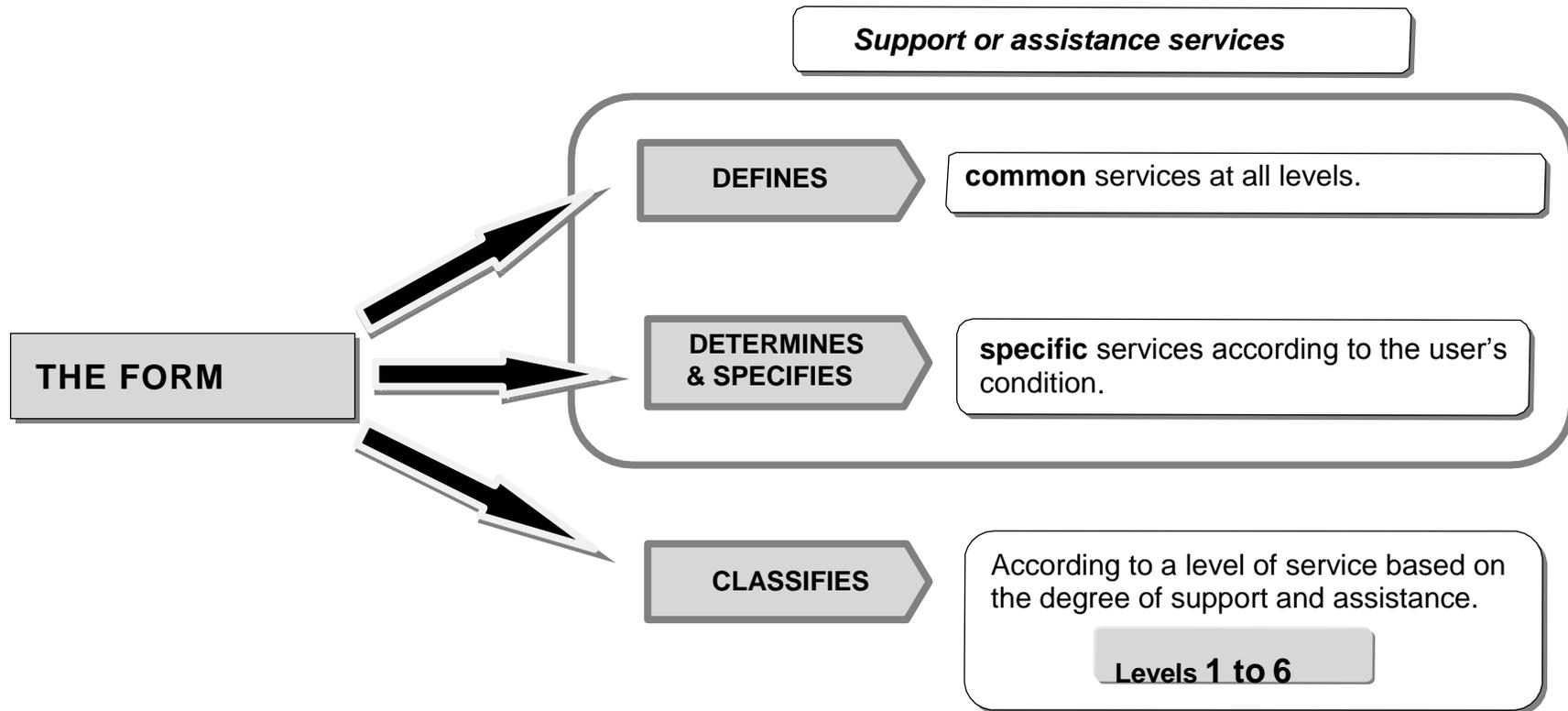
3. Section 39.8 allows for a person acting within the framework of activities of an IR or FTR to "administer prescribed ready-to-administer medications by oral, topical, transdermal, ophthalmic, otic, rectal or vaginal route or by inhalation, and administer insulin by subcutaneous route".

Classification is done by establishing the degree of intensity of each of the specific services required by the user. It allows for the determination with common services of the level of service on a scale ranging from 1 to 6.

By making the users and their needs the focus of the classification approach, while providing a better understanding of the nature of the support or assistance services to be provided, the Form offers consistency in the implementation and supervision of services provided by resources. In addition, it promotes the development of new types of service organizations, as required by the *Act Respecting Health Services and Social Services*.

Figure 2

APPROACH FOR THE CLASSIFICATION OF SERVICES OFFERED BY THE RESOURCE ACCORDING TO THE DEGREE OF SUPPORT AND ASSISTANCE REQUIRED BY THE USER



CHAPTER 4

PRESENTATION OF THE FORM

4.1 PARTS OF THE FORM

The Form consists of three separate but complementary parts:

Part 1

Support or assistance services common to all levels

They represent general services to be offered by all resources and for all types of clientele.

Part 2

Specific support or assistance services

They represent services that are specifically required according to the user's condition for which the institution (or FN agency) conducts the classification. Part 2 of the Form includes modalities to clarify each of these specific services.

Part 3

Summary of information required to take users in charge

It groups together information which must be provided to the resource by the institution (or FN Agency) for the provision of quality services, upon the user's arrival and thereafter.

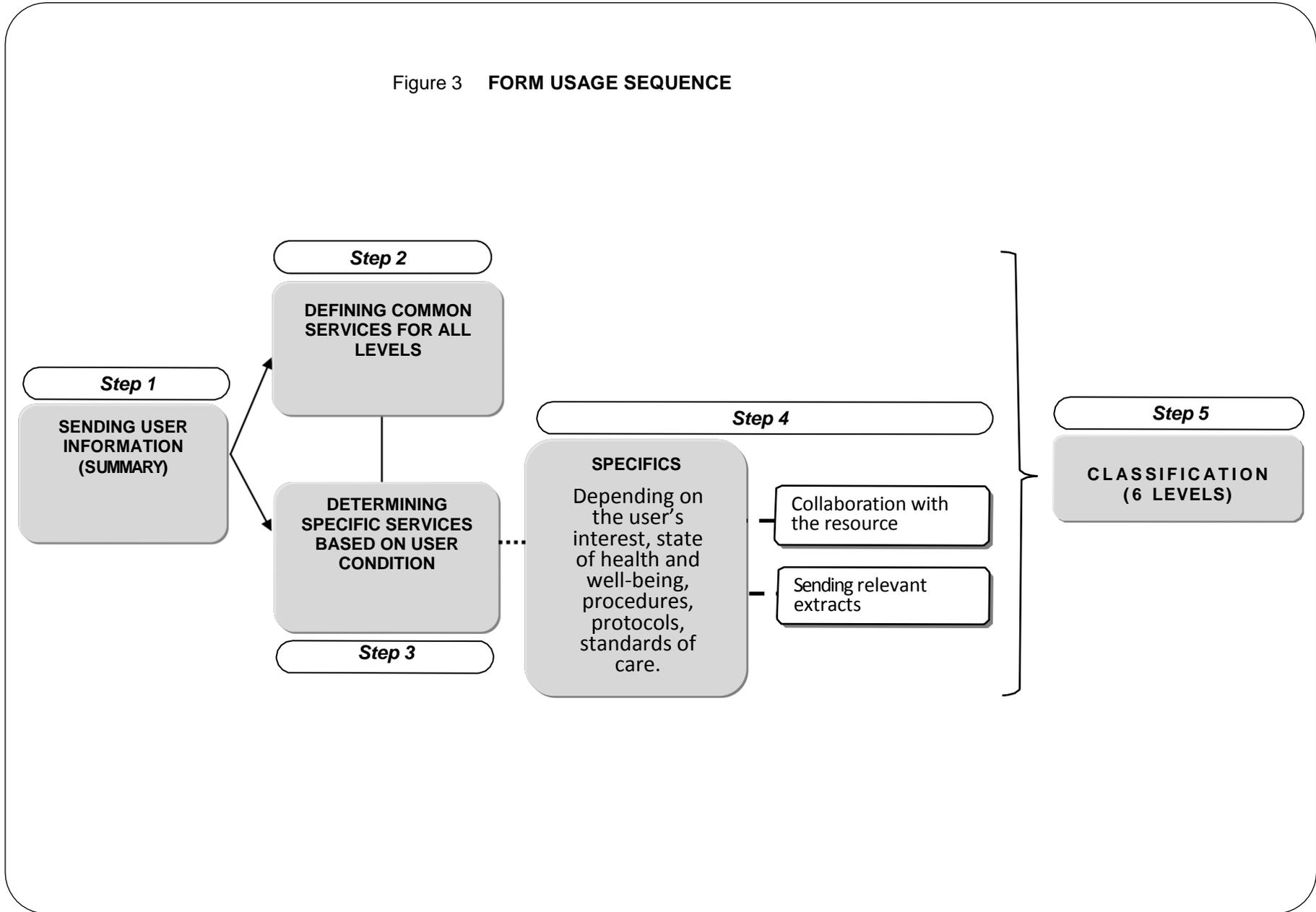
The Form indicates:

- ⊃ *who the user is;*
- ⊃ *what the user's needs are;*
- ⊃ *what services are required.*

4.2 FORM USAGE SEQUENCE

The Form provides a sequence of actions in order to classify the services offered by a resource to each user they see. This sequence is divided into five steps. (see Figure 3)

Figure 3 **FORM USAGE SEQUENCE**



CHAPTER 5

SUMMARY OF INFORMATION TO TAKE USERS IN CHARGE

- Part 3 of the Form -

The **summary** appears in the third and final part of the *Form for the determination and classification of support and assistance services*. However, in this user guide, it was agreed to follow Form usage sequence (see Figure 3), i.e. to present the summary (Step 1) before addressing common services (Step 2) and specific services (Step 3).

Section 7 of the *Regulation respecting the classification of services offered by an intermediate resource and a family-type resource* reads:

After having obtained the consent of the user or the person that may consent on the user's behalf, the institution must send to the resource, as soon as possible but not later than 72 hours after the new user's arrival, a summary of the information necessary for taking the user in charge.

The summary groups together information about the user that enables the resource to identify and understand the overall situation, in order to take the user in charge in an appropriate, personalized and safe manner.

The summary is therefore essential for the resource in order to adequately greet the user, respond quickly to their needs, taking into account some peculiarities concerning their condition, and adapt the environment if necessary. The summary can also be useful for the institution to match and eventually pair up other users in the same resource.

The summary groups together essential and necessary information about the user to send to the resource.

Only the information necessary for taking the user in charge are integrated into the summary by the institution (or the FN Agency). The necessity criterion requires the institution to specify, as opposed to what is merely useful or of interest, the information without which the resource would be unable to ensure the appropriate provision of support or assistance services.

To facilitate the work, the institution should develop a model taking into account the provisions of the Regulation, its clientele and the considerations outlined in this Chapter.

The summary is often the primary and sometimes only source of information the resource will have upon the user's arrival or over the following days.

In this context, although the Regulation allows a maximum of 72 hours to send the summary to the resource, it is nevertheless preferable that it be sent before the user's arrival in the resource. Thus, the resource will have some time to prepare to greet the user and adapt their environment, as required.

More specifically, the Regulation reads that any information essential to the immediate maintenance of the user's integrity must be communicated by the institution to the resource before or at the same time as the user's arrival within the resource. This obligation by the institution will be met without any particular formality if the information essential to the immediate maintenance of the user's integrity is included in the summary and that it is provided to the resource prior to or upon the user's arrival within the resource.

The institution must therefore proceed expeditiously to update the information contained in the summary, in case of any changes to the user's situation.

The data contained in the summary form a basis on which other information will be added, in particular when the institution completes Part 2 of the Form for specific services.

Finally, information about the user included in the summary and in the Form is confidential and the institution has an obligation to protect this information. This information is usually included in the record of the user and subject to the confidentiality principle set out in Section 19 of the *Act respecting health services and social services*. Thus, subject to the exceptions provided for in the applicable laws, the institution may not disclose such information without the consent of the user or the person qualified to give consent on his behalf. For this reason, the Regulation requires that consent of the user or the person qualified to give consent on his behalf is obtained before sending the resource information contained in the summary. Furthermore, the resource is bound to respect the user's private life and the confidentiality of information.

The summary of information must contain at least the following information:

	Examples of information possibly required
IDENTIFICATION OF USER AND DATE OF BIRTH	<input checked="" type="checkbox"/> Name and given name <input checked="" type="checkbox"/> Date of birth <input checked="" type="checkbox"/> Gender <input checked="" type="checkbox"/> Language used <input checked="" type="checkbox"/> Health insurance number
IF NEEDED, IDENTIFICATION OF THE APPLICABLE LEGAL STATUS, AND NAME AND CONTACT INFORMATION* OF THE LEGAL REPRESENTATIVE	<input checked="" type="checkbox"/> Protective supervision (curatorship, tutorship, advisership) <input checked="" type="checkbox"/> Court order (authorization for care, verdict of not criminally responsible, other) <input checked="" type="checkbox"/> Legal representative (parents (if the user is a minor) curatorship, tutorship, advisership)
NAME AND CONTACT INFORMATION* OF THE PERSON WHO MAY CONSENT TO CARE (WHEN REQUIRED)	<input checked="" type="checkbox"/> Legal representative <input checked="" type="checkbox"/> Mandate in case of incapacity <input checked="" type="checkbox"/> Spouse <input checked="" type="checkbox"/> Parents (if the user is a minor) <input checked="" type="checkbox"/> Other (specify)
NAME AND CONTACT INFORMATION* OF THE PERSON TO BE REACHED IN CASE OF EMERGENCY	<input checked="" type="checkbox"/> Caseworker at the institution <input checked="" type="checkbox"/> Legal representative <input checked="" type="checkbox"/> Persons important to the user
NAME AND CONTACT INFORMATION* OF PERSONS IMPORTANT TO THE USER	<input checked="" type="checkbox"/> Spouse <input checked="" type="checkbox"/> Family members <input checked="" type="checkbox"/> Friends
IDENTIFICATION OF PROVIDERS AND PROFESSIONALS INVOLVED IN THE USER'S CASE	<input checked="" type="checkbox"/> Caseworker at the institution <input checked="" type="checkbox"/> Doctor <input checked="" type="checkbox"/> Specialist <input checked="" type="checkbox"/> Person in charge at school-work-other
CONTEXT OF THE ACCOMMODATION OR PLACEMENT AND SPECIFIC MEASURES HAVING AN IMPACT ON IT (CONTACT PROHIBITED OR OTHER)**	<input checked="" type="checkbox"/> Motives <input checked="" type="checkbox"/> Problem <input checked="" type="checkbox"/> Contact prohibited <input checked="" type="checkbox"/> Prior placement
INFORMATION ON STATE OF HEALTH, BOTH PHYSICAL AND MENTAL**	<input checked="" type="checkbox"/> Special diet <input checked="" type="checkbox"/> Medication <input checked="" type="checkbox"/> Limitations <input checked="" type="checkbox"/> Allergies
LIFE HABITS**	<input checked="" type="checkbox"/> Occupation <input checked="" type="checkbox"/> Daily routine <input checked="" type="checkbox"/> Particularities

* The contact information should allow to easily reach the persons involved, within a reasonable time period depending on the situation.

** For this information, specific attention must be shown by the institution in determining the information to be transmitted according to the criterion of necessity.

CHAPTER 6

SUPPORT AND ASSISTANCE SERVICE COMMON TO ALL LEVELS

- Part 1 of the Form -

6.1 DEFINITION OF COMMON SERVICES

Common services are all support and assistance services which define the compulsory basis of services to provide a user by a resource, regardless of the type of organization or type of clientele.

These services which also involve a life environment are essential for classification. They are included in each of the six service levels established by the Regulation.

Most common services can be linked with existing standards or policies. These standards are important because they are benchmarks that both the resource and institution may refer to provide quality services to the user.

Common services represent the compulsory basis of services to provide a user by a resource.

The common services remain “adaptable” in the way they are provided by the resource and they must, while remaining consistent with certain standards, be oriented to best respond to the user’s needs and condition. They may also have varying requirements depending on the clientele.

The Form provides various common services for the two major categories of residential organizations, namely:

- FTR and IR type “foster home” or “group residence” (group home);
- IR type “supervised apartment” or “rooming house”.

Both of these categories include any other type of current or future residential organization requiring similar services.

It is the institution's responsibility, by completing Part 2 of the Form, to identify, for the user, the applicable category of support or assistance services.

6.2 INDICATIONS ON THE USAGE CONTEXT OF COMMON SERVICES

Common services are provided through three different exercises:

- ① classification;
- ② evaluation of the applicant;
- ③ quality control process.

With respect to classification, common services are used as a reference for the work expected from a resource and they represent the basis on which specific services will be added or specified.

In terms of evaluating an applicant, common services are part of the basic requirements that the applicant must be able to provide.

With respect to classification, common services are used as a reference for the work expected from a resource and they represent the basis on which specific services will be added or specified.

Finally, for the quality control process, common services are part of the services to be provided to the user. They are integrated into the process in particular in line with:

- ⇒ the user's safety;
- ⇒ the user's well-being;
- ⇒ the user's comfort.

6.3 COMMON SERVICES OFFERED BY AN IR OR FTR

type “foster home”, “group residence” or other type of organization requiring similar services

SUPPORT OR ASSISTANCE SERVICES COMMON TO ALL LEVELS

In compliance with:

REGULATION RESPECTING THE CLASSIFICATION OF SERVICES OFFERED BY AN
INTERMEDIATE RESOURCE AND A FAMILY-TYPE RESSOURCE [C. S-4.2, s. 3.1]
Schedule, Part 1, Division 1

- 
- Maintaining the life environment
 - Ensuring comfort and safety
 - Preparing and ensuring meal service
 - Looking after clothing
 - Ensuring that the user's hygiene is adequate
 - Making purchases necessary for users
 - Ensuring the management of the users' allowance for personal expenses and making an inventory of their property
 - Supporting and assisting the user in daily activities
 - Establishing a living environment
 - Promoting the user's access to activities organized by the resource or in the community
 - Ensuring an adequate follow-up of all the necessary health services and social services
 - Ensuring protection from abuse
 - Ensuring quality time
 - Promoting integration into the life and social environment
 - Collaborating with various caseworkers involved with the user
 - Collaborating with the institution
 - Promoting the user's family ties, if any, and persons who are important to the user

MAINTAINING THE LIFE ENVIRONMENT

The premises occupied by the resource, inside and outside, are well maintained. The resource complies with the recognized hygiene and sanitation standards. Furnishings and accessories necessary for daily living are sufficient and in good condition. The repairs required are carried out within a reasonable time.

ENSURING COMFORT AND SAFETY

Temperature, humidity and lighting conditions are adequate. Ventilation is satisfactory. The actions to take in an emergency are planned. Space is designed in a functional and safe manner for the needs of users and according to their condition. Hazardous or toxic products and objects are stored in safe places provided for that purpose. The resource takes the necessary measures to avoid accidents or incidents and, where applicable, reports them according to the procedure provided for in section 233.1 of the Act.

PREPARING AND ENSURING MEAL SERVICE

The resource prepares meals and snacks in accordance with Canada's Food Guide and the user's needs thereby promoting healthy eating. Meals are composed of a variety of food that generally has good nutrition value. The resource respects the user's rhythm, taste and food preferences. The resource complies with the current hygiene and sanitation standards.

LOOKING AFTER CLOTHING

The resource ensures that the user's clothing is sufficient to allow the user to change clothes regularly and wear clothes that are adequate for and appropriate to seasons and circumstances. The resource takes the necessary means so that the user's clothes are clean and in good condition.

ENSURING THAT THE USER'S HYGIENE IS ADEQUATE

The resource sees to it on a daily basis that the user is clean and that the user's clothes are changed regularly.

MAKING PURCHASES NECESSARY FOR USERS

For the user who so requires, the resource makes purchases necessary for the user, in particular regarding personal care, medications, clothes, leisure or other special needs. The resource, so far as possible, takes into account the user's tastes, habits, skills, limitations and characteristics in choosing the good or service to be provided to the user. The resource looks for the best quality/price ratio and respects the available financial resources. The resource obtains the required authorizations, where applicable, and keeps vouchers from purchases made for the user.

ENSURING THE MANAGEMENT OF THE USER'S ALLOWANCE FOR PERSONAL EXPENSES AND MAKING AN INVENTORY OF THEIR PROPERTY

Where the user so requires, the resource ensures the management of the user's allowance for personal expenses or other amounts in lieu thereof. The resource involves, so far as possible, the user in the management of those amounts. The resource complies with the principles of sound financial management. The amounts are judiciously spent for their intended purpose. The resource must account for its management to the institution, on request. The resource complies with the institution's policy on the management of the personal expenses allowance. The resource, in collaboration with the institution's caseworker, completes the inventory of the user's clothes, personal effects and other significant objects, when required by the institution.

SUPPORTING AND ASSISTING THE USER IN DAILY ACTIVITIES

The resource supports and assists the user in daily activities. The resource exercises an appropriate supervision of the user, inside and outside of the premises occupied by the resource. The resource meets the user's stimulation needs and helps the user in learning activities. The resource promotes the user's well-being and the development or continued use of acquired abilities. The resource promotes communication and listens to the user. The requests addressed to the user are adapted to the user's abilities.

ESTABLISHING A LIVING ENVIRONMENT

The resource clearly and simply informs the user of the operating rules. The resource establishes a balanced and adapted living routine. The resource transmits positive values. The resource acts with consistency and coherence. The resource encourages the user to develop or maintain adequate and safe behaviour. The resource ensures that each user's limits and privacy needs are respected. In accordance with the applicable acts, the resource respects and ensures that the user's right to safeguard his or her dignity and respect for his or her privacy and the confidentiality of information concerning the user are respected.

PROMOTING THE USER'S ACCESS TO ACTIVITIES ORGANIZED BY THE RESOURCE OR IN THE COMMUNITY

The resource is able to organize and conduct daily life activities that meet the user's needs and interests. The resource participates in the user's maintenance or integration in the community. The resource promotes the user's access to leisure activities and community life.

ENSURING AN ADEQUATE FOLLOW-UP OF ALL THE NECESSARY HEALTH AND SOCIAL SERVICES

The resource ensures an adequate follow-up of all the health services and social services required by the user's condition. The resource pays attention to the user's feelings of discomfort and responds to them adequately, according to the circumstances. The resource sees to it that the appropriate treatment is provided to the user and that the user is accompanied, if necessary. The resource ensures that the technical equipment and aid used for health services and social services are clean and in good working order.

ENSURING PROTECTION FROM ABUSE

The resource implements mechanisms of protection from any form of abuse (physical, sexual, power, financial, psychological, etc.) in respect of the user.

ENSURING QUALITY TIME

The resource ensures the presence at all times of a person in charge within the life environment or, according to the user's degree of autonomy, that such a person may be reached if necessary. That person must have the necessary attitudes and skills to ensure the provision of support or assistance services required by the users and ensure the stability and continuity of services.

PROMOTING INTEGRATION INTO THE LIFE AND SOCIAL ENVIRONMENT

The resource promotes the user's integration into the user's life environment. The resource considers and treats the user with fairness. The resource affords the user living conditions as close to a natural environment as possible. The resource allows the user to get involved in the user's life environment. The resource also encourages the user, where possible, to have an active and adequate social life.

COLLABORATING WITH VARIOUS CASEWORKERS INVOLVED WITH THE USER

The resource inquires about the user's participation, behaviour and needs in the user's integration activities (school-work-other) with persons in charge of those activities and ensures the necessary follow-up. The resource sends relevant observations to the various caseworkers involved with the user. When required to do so, the resource participates in discussions.

COLLABORATING WITH THE INSTITUTION

The resource collaborates with the institution to improve the user's situation and contribute to reduce or resolve the user's problems. Where applicable, the resource participates in clarifying the services required by the user. The resource shares with the institution any relevant information regarding the user, in particular information that is likely to cause changes in the assessment of the user's condition and in the services to be provided to the user. The resource participates in the process to improve the quality of services provided by the institution.

PROMOTING THE USER'S FAMILY TIES, IF ANY, AND PERSONS WHO ARE IMPORTANT TO THE USER

The resource shows respect towards the user's family members and persons who are important to the user. The resource respects the user in his or her feelings towards those persons. When indicated to do so, the resource promotes the user's contact with those persons.

6.4 COMMON SERVICES OFFERED BY AN IR

type “supervised apartment”, “rooming house” or other type of organization requiring similar services

SUPPORT OR ASSISTANCE SERVICES COMMON TO ALL LEVELS

In compliance with:

REGULATION RESPECTING THE CLASSIFICATION OF
SERVICES OFFERED BY AN INTERMEDIATE RESOURCE AND
A FAMILY-TYPE RESSOURCE [c. S-4.2, s. 3.1] Schedule,
Part 1, Division 2

- 
- Providing a safe, clean and functional apartment or room
 - Ensuring the performance of the user's domestic life activities
 - Ensuring the performance of the user's daily life activities
 - Ensuring the user's healthy lifestyle
 - Ensuring the management of the users' allowance for personal expenses and making an inventory of their property
 - Ensuring an adequate follow-up of all the necessary health services and social services
 - Ensuring protection from abuse
 - Ensuring that a person in charge is available at all times
 - Promoting integration into the life and social environment
 - Collaborating with various caseworkers involved with the user
 - Collaborating with the institution
 - Promoting the user's family ties, if any, and persons who are important to the user

PROVIDING A SAFE, CLEAN AND FUNCTIONAL APARTMENT OR ROOM

The resource provides a safe, clean and functional apartment or room and takes the necessary means so that those conditions are maintained.

ENSURING THE PERFORMANCE OF THE USER'S DOMESTIC LIFE ACTIVITIES

The resource ensures that the user's household tasks, such as maintaining the home, preparing meals, doing laundry, managing his or her budget or running errands, are performed, and ensures that the user adequately uses the means of transportation and communication.

ENSURING THE PERFORMANCE OF THE USER'S DAILY ACTIVITIES

The resource ensures that the user's daily life activities, such as eating, washing, self-care or dressing properly are performed.

ENSURING THE USER'S HEALTHY LIFESTYLE

The resource ensures that the user has a healthy lifestyle in particular regarding food, sleep and the user's activities.

ENSURING THE MANAGEMENT OF THE USER'S ALLOWANCE FOR PERSONAL EXPENSES AND MAKING AN INVENTORY OF THEIR PROPERTY

Where the user so requires, the resource ensures the management of the user's allowance for personal expenses or other amounts in lieu thereof. The resource involves, so far as possible, the user in the management of those amounts. The resource complies with the principles of sound financial management. The amounts are judiciously spent for their intended purpose. The resource must account for its management to the institution, on request. The resource complies with the institution's policy on the management of the personal expenses allowance. The resource, in collaboration with the institution's caseworker, completes the inventory of the user's clothes, personal effects and other significant objects, when required by the institution.

ENSURING AN ADEQUATE FOLLOW-UP OF ALL THE NECESSARY HEALTH AND SOCIAL SERVICES

The resource ensures an adequate follow-up of all the health services and social services required by the user's condition. The resource pays attention to the user's feelings of discomfort and responds to them adequately, according to the circumstances. The resource sees to it that the appropriate treatment is provided to the user and that the user is accompanied, if necessary. The resource ensures that the technical equipment and aid used for health services and social services are clean and in good working order.

ENSURING PROTECTION FROM ABUSE

The resource implements mechanisms of protection from any form of abuse (physical, sexual, power, financial, psychological, etc.) in respect of the user.

ENSURING THAT A PERSON IN CHARGE IS AVAILABLE AT ALL TIMES

The resource ensures that a person in charge is available at all times for the user. That person must have the necessary attitudes and skills to ensure the provision of support or assistance services required by the users and ensure the stability and continuity of services.

PROMOTING INTEGRATION INTO THE LIFE AND SOCIAL ENVIRONMENT

The resource promotes the user's integration into the user's life environment. The resource considers and treats the user with fairness. The resource affords the user living conditions as close to a natural environment as possible. The resource allows the user to get involved in the user's life environment. The resource also encourages the user, where possible, to have an active and adequate social life.

COLLABORATING WITH VARIOUS CASEWORKERS INVOLVED WITH THE USER

The resource inquires about the user's participation, behaviour and needs in the user's integration activities (school-work-other) with persons in charge of those activities and ensures the necessary follow-up. The resource sends relevant observations to the various caseworkers involved with the user. When required to do so, the resource participates in discussions.

COLLABORATING WITH THE INSTITUTION

The resource collaborates with the institution to improve the user's situation and contribute to reduce or resolve the user's problems. Where applicable, the resource participates in clarifying the services required by the user. The resource shares with the institution any relevant information regarding the user, in particular information that is likely to cause changes in the assessment of the user's condition and in the services to be provided to the user. The resource participates in the process to improve the quality of services provided by the institution.

PROMOTING THE USER'S FAMILY TIES, IF ANY, AND PERSONS WHO ARE IMPORTANT TO THE USER

The resource shows respect towards the user's family members and persons who are important to the user. The resource respects the user in his or her feelings towards those persons. When indicated to do so, the resource promotes the user's contact with those persons.

CHAPTER 7

SPECIFIC SUPPORT AND ASSISTANCE SERVICES

- Part 2 of the Form -

7.1 DEFINITION OF SPECIFIC SERVICES

In contrast to common services, **specific services** represent a unique combination of services to be provided to users based on their personal condition.

Specific services, such as their name implies, are specific to each user. These services are in addition to common services. They are designed to meet the physical, social and emotional needs of the user.

Moreover, in addition to common services, specific services directly determine the service intensity required by the user and the service level established by the Regulation.

Specific services represent the services provided specifically to users based on their condition and needs.

Specific services are grouped under broad themes called “descriptors”.

7.2 SPECIFIC SERVICES DESCRIPTOR COMPONENTS

Pursuant to the Regulation, the descriptors indicate the general nature of the specific support or assistance services and the objective pursued for the user through the performance of the specific support or assistance services required from the resource.

Each descriptor includes the six following elements:

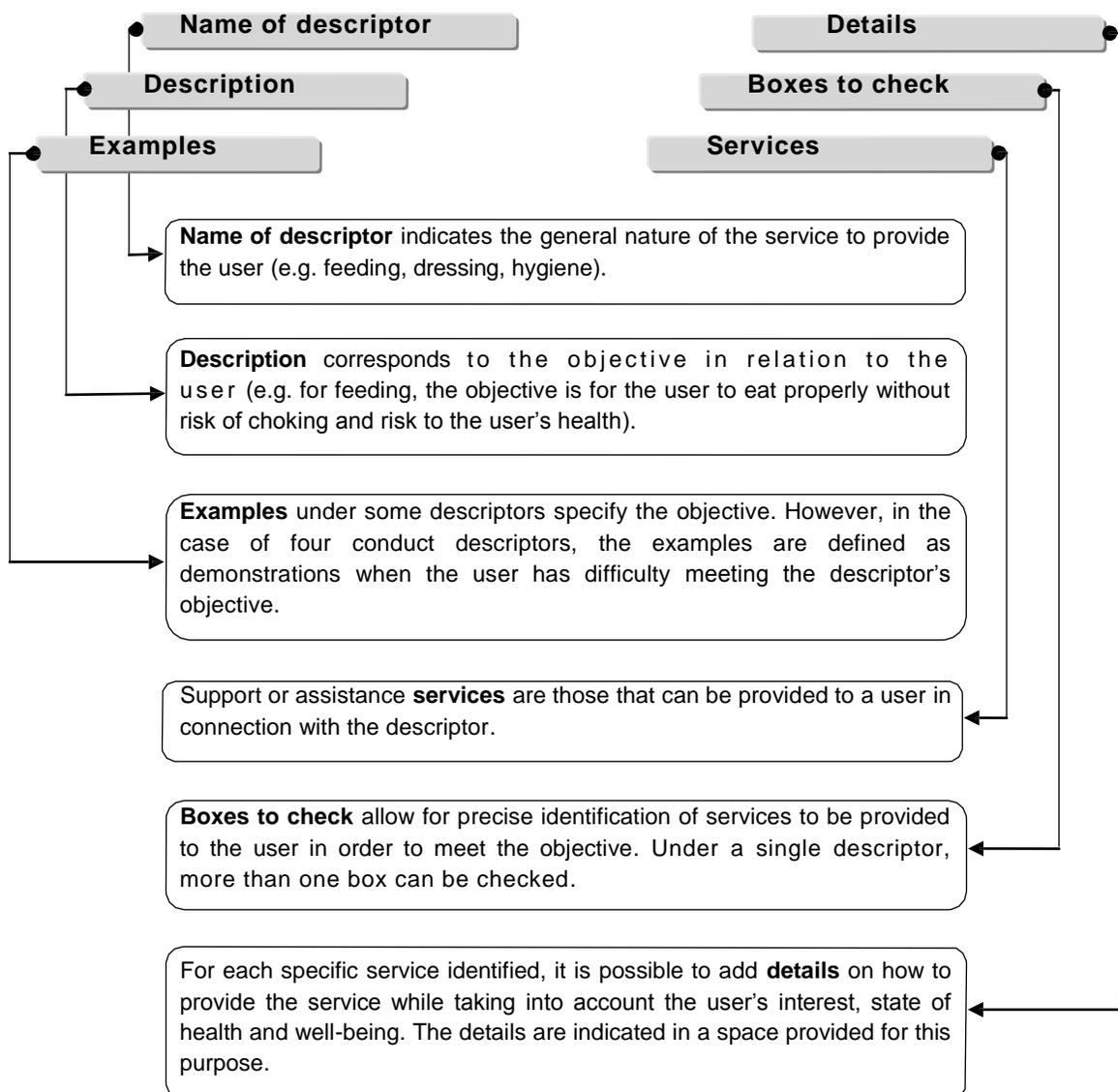
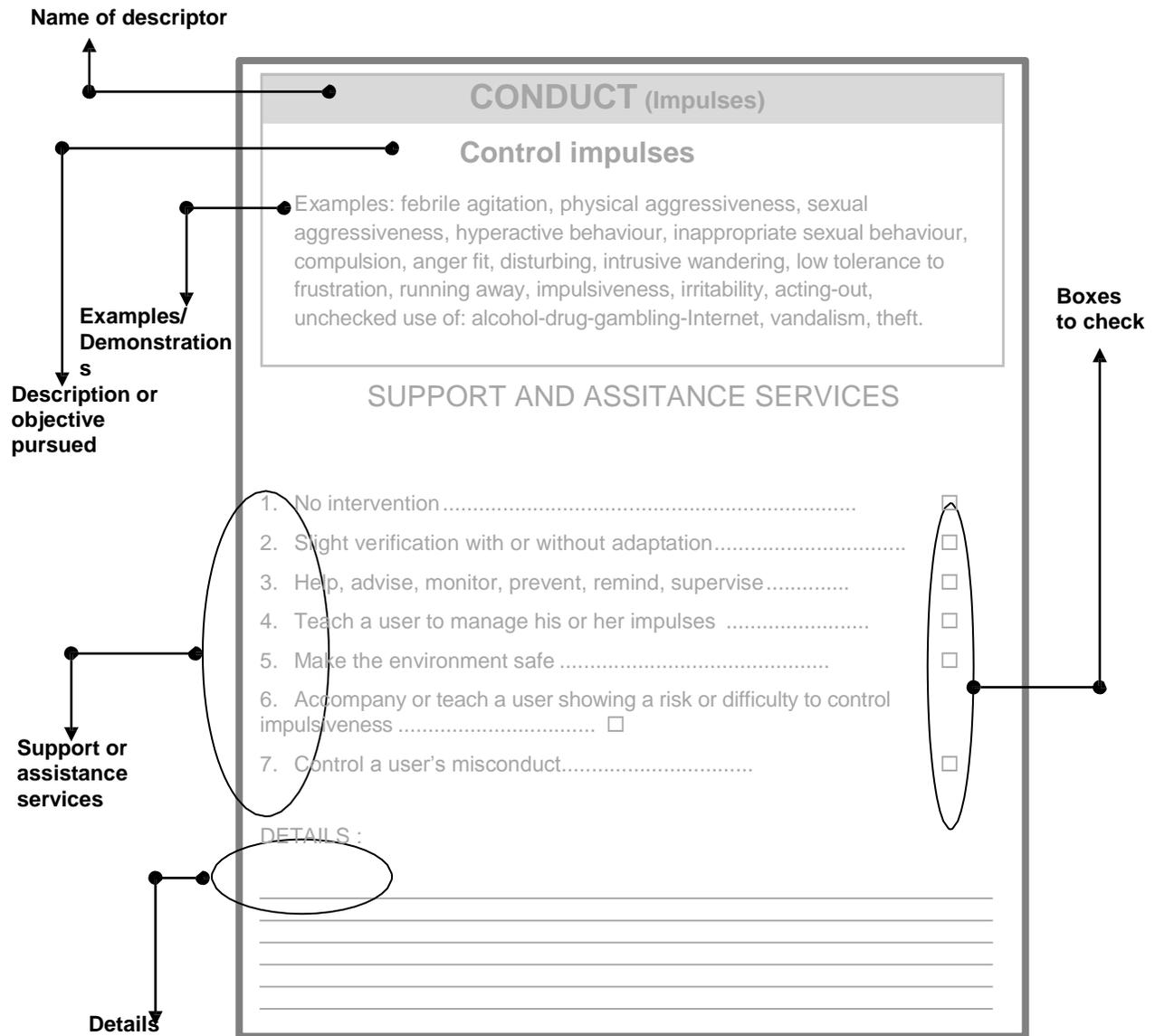


Figure 4 **DESCRIPTOR AND ITS COMPONENTS**



Specific support and assistance services are evaluated based on the seventeen following descriptors.

1 FEEDING

EAT PROPERLY WITHOUT RISK OF CHOKING AND RISK TO THE USER'S HEALTH.

N.B. THE DESCRIPTOR INCLUDES MEALS AND SNACKS.

2 DRESSING

CHOOSE PROPER CLOTHES. DRESS AND UNDRESS PROPERLY. SAME ACTIONS FOR ANY ORTHOSIS AND PROSTHESIS.

3 HYGIENE

WASH ONESELF (BODY, HAIR) PROPERLY.

4 HYGIENE (cont.)

SELF-CARE

Examples: partial washing, daily activities (brushing teeth, combing hair, shaving, etc.) and periodical activities (nail maintenance, menstrual hygiene, etc.)

5 ELIMINATION

PERFORM ALL ACTIVITIES RELATED TO THAT FUNCTION

Examples: going to the restroom, remove clothes, using the toilet and toilet paper, flushing the toilet, putting clothes back on, washing hands.

6 MOBILITY (transfers)

HAVE THE MOBILITY TO TRANSFER ONESELF (BATH, CHAIR, BED, TOILET)

7 MOBILITY (move around)

MOVE AROUND SAFELY.

8 MOBILITY (stairs)

CLIMB AND GO DOWN STAIRS SAFELY.

9 CONDUCT (impulses)

CONTROL IMPULSES.

Examples: febrile agitation, physical aggressiveness, sexual aggressiveness, verbal aggressiveness, hyperactive behaviour, inappropriate sexual behaviour, compulsion, anger fit, disturbing, intrusive wandering, low tolerance to frustration, running away, impulsiveness, irritability, acting-out, unchecked use of alcohol-drug-gaming-Internet, vandalism, theft.

10 CONDUCT (emotions)

CONTROL EMOTIONS.

Examples: mood swings, threatening anticipations, apprehension, sleep disorder, excessive exuberance or sadness, extreme fatigue, excessive worrying, hypersensitivity, emotional lability, lack of interest, mutism, obsession, fear, withdrawal, somatization, excessive verbalization.

11 CONDUCT (relationship capacity)

HAVE SUITABLE RELATIONSHIPS.

Examples: absence of boundaries, asocial behavior, cruelty, stubbornness, invasion, hostility, oversexualization, inability to adapt to others, inhibition, intimidation, isolation, bad acquaintances, non-observance of rules, resistance, provocation, socialization problems, vulnerability.

12 CONDUCT (self-destructive behaviours)

CONTROL SELF-DESTRUCTIVE BEHAVIOURS.

Examples: self-mutilation, suicidal ideas-gestures, eating disorders.

13 INTEGRATION

**ATTENDANCE AND MAINTENANCE OF USER IN HIS OR HER
INTEGRATION ACTIVITIES (SCHOOL-WORK-OTHER)**

14 AUTONOMOUS LIFE

REACH OR MAINTAIN AUTONOMY IN DOMESTIC LIFE ACTIVITIES.

Examples: laundry, house maintenance, errands, budget
management, transportation management, cooking,
use of means of communication, etc.

15 PHYSICAL (medications)

DISTRIBUTION AND ADMINISTRATION OF MEDICATIONS.

16 PHYSICAL (care)

**HEALTH PROBLEMS, PHYSICAL AND SENSORIAL INCAPACITY
REQUIRING SPECIAL CARE AND SERVICES FROM HEALTH
PROFESSIONALS OTHER THAN MEDICATIONS.**

17 APPOINTMENTS

**ACCOMPANY THE USER TO APPOINTMENTS OF A
PSYCHOSOCIAL OR FAMILY NATURE OR FOR
SCHOOL-WORK-OTHER, OR WITH HEALTH
PROFESSIONALS OR FOR OUTSIDE ACTIVITES.**

N.B. COUNT 3 HOURS FOR AN APPOINTMENT.

7.3 INTENSITY OF SPECIFIC SERVICES

The services listed under each descriptor are of varying intensity. Although the Regulation does not explicitly mention this, it was agreed in this user guide to describe intensity as “regular” or “high”. Intensity is determined in relation to the type of intervention required to provide the service. For high intensity services, the degree is based on a time-frequency-complexity ratio.

- ⇒ A service is considered as **regular intensity** when it requires from the resource episodic attention and common intervention skills for the duration of the activity.

These services involve “let do”, “get him/her to do” or “do with” type interventions.

- ⇒ A service is considered as **high intensity** when it requires from the resource sustained attention or it involves some complexity in the intervention.

These services involve “do with”, “be with” and “do for” type interventions.

It is possible to establish a relationship between the intensity of a service, what is required from the resource and the type of intervention to promote. (see Figure 5)

Figure 5 SERVICE INTENSITY TABLE

SITUATION	TYPE OF INTERVENTION	SERVICE	INTENSITY
The resource does not intervene with the user.	LET DO	No intervention	R E G U L A R
The resource is confident about how the user is managing and therefore can focus on other things.	LET DO	Verify with or without adaptation	
The resource makes routine interventions and the user cooperates well with what is proposed.	GET HIM/HER TO DO DO WITH	Help, assure, advise, supervise, encourage, promote, observe, prevent, remind, reassure, sensitize, stimulate, monitor, verify, etc.	
The resource takes the necessary time to teach the user.	DO WITH	Teach	H I G H
The resource is present with the user throughout the activity.	BE WITH DO FOR	Accompany, initiate, do, proceed	
The resource completes a complex activity for the user.	DO FOR	Apply invasive or non-invasive care, specific techniques	
The resource must act with authority with the user in order to stop or encourage a behaviour.	DO FOR	Control	

REGULAR INTENSITY SERVICES



THE RESOURCE MAKES NO INTERVENTION

REGULAR SERVICE INTENSITY TYPE: **LET DO**

DESCRIPTORS: **ALL**

- The user successfully completes the descriptor related activity.
- The user cannot complete alone the descriptor related activity alone: it is therefore someone other than the resource or an employee (family, a caregiver or a staff member from the institution) who provides the required service in order to complete the related objective, on an ongoing basis.
- The descriptor's objective does not apply.



SLIGHT VERIFICATION WITH OR WITHOUT ADAPTATION

REGULAR SERVICE INTENSITY TYPE: **LET DO**

DESCRIPTORS: **ALL**

- The resource makes a partial verification of the means taken by the user to meet the descriptor related objective.
- The resource adapts the space, routine or necessary material according to the user's needs in relation to the descriptor.

REGULAR SERVICE INTENSITY (continued)



**HELP, ASSURE, ADVISE, SUPERVISE, ENCOURAGE,
PROMOTE, OBSERVE, PREVENT, REMIND, REASSURE,
SENSITIZE, MONITOR, STIMULATE, VERIFY**

**REGULAR SERVICE INTENSITY TYPE: GET HIM/HER TO DO
DO WITH**

DESCRIPTORS: ALL

- The resource suggests simple activities to the user that are part of everyday life, where educational opportunities or learning retention are multiple.
- Regular activities are adapted to the user's characteristics.
- These activities can take place at any time of day.
- They can be done individually or in the presence of others.
- They reflect the user's interests and preferences.
- The services offered help the user develop or maintain a satisfactory level of performance.



BE ATTENTIVE AND VIGILANT

**REGULAR SERVICE INTENSITY TYPE: GET HIM/HER TO DO
DO WITH**

DESCRIPTOR: CONDUCT (self-destructive behaviours)

- The user has demonstrated self-destructive behaviours in the past, but his condition seems to have stabilized since.
- The resource does not undertake specific actions with the user, but shows overall attention and vigilance.

HIGH SERVICE INTENSITY



TEACH A USER (CHILD OR ADULT)

HIGH SERVICE INTENSITY TYPE: **DO WITH**

DESCRIPTORS: **FEEDING**
DRESSING
HYGIENE (wash (body, hair) properly, self-care)
ELIMINATION
MOBILITY (moving around and stairs)
CONDUCT (impulses, emotions and relationship capacity)
INTEGRATION
AUTONOMOUS
LIFE

- ▣ The resource performs learning activities adapted to the user's age and development.
- ▣ The resource uses or doesn't use learning tools with the user.
- ▣ The resource performs learning activities with the user who is placed in a new situation.



TEACH A USER SHOWING A RISK OR DIFFICULTY

HIGH SERVICE INTENSITY TYPE: **DO WITH**

DESCRIPTORS: **FEEDING**
DRESSING
HYGIENE (wash (body, hair) properly, self-care)
ELIMINATION
MOBILITY (moving around)
CONDUCT (impulses, emotions and relationship capacity, self-destructive behaviours)
INTEGRATION
AUTONOMOUS
LIFE

- ▣ The resource performs learning activities with the user showing a risk or difficulty which may be complex and require special skills.

HIGH SERVICE INTENSITY (continued)



ACCOMPANY

HIGH SERVICE INTENSITY TYPE: **BE WITH**

DESCRIPTORS: **FEEDING**
DRESSING
HYGIENE (wash (body, hair) properly, self-care)
ELIMINATION
MOBILITY (transfers, moving around, stairs)
CONDUCT (impulses, emotions and relationship capacity)
INTEGRATION
AUTONOMOUS
LIFE
PHYSICAL (care)
APPOINTMENTS

- The resource accompanies a user when going somewhere or when they need to be present when the user has a someone over.
- Or, the resource accompanies the user when they must be with the user throughout the duration of the activity to provide support through multiple interventions in order for things to run smoothly.
- The expected service can be complex and require special skills by the resource.



MAKE THE ENVIRONMENT SAFE

HIGH SERVICE INTENSITY TYPE: **DO FOR**

DESCRIPTORS: **CONDUCT** (impulses, self-destructive behaviours)

- The resource must act on the user's environment when the user presents significant difficulties in terms of conduct (impulses, self-destructive behaviours).
- The resource must prevent risk of incidents or accidents.

HIGH SERVICE INTENSITY (continued)



INITIATE

HIGH SERVICE INTENSITY TYPE: DO FOR

DESCRIPTORS: FEEDING
DRESSING
HYGIENE (wash (body, hair) properly, self-care)

- The resource must initiate the gesture so the user can continue the activity sequence with the objective of learning retention or maintaining automatic responses.



PROCEED

HIGH SERVICE INTENSITY TYPE: DO FOR

DESCRIPTORS: FEEDING
DRESSING
HYGIENE (wash (body, hair) properly, self-care)
MOBILITY (transfers)

- The resource performs all the tasks that the user (child or adult) cannot do because of age, development or condition.



**APPLY INVASIVE/NON-INVASIVE CARE
/SPECIAL TECHNIQUES**

HIGH SERVICE INTENSITY TYPE: DO FOR

DESCRIPTORS: FEEDING
DRESSING
HYGIENE (wash (body, hair) properly, self-care)
ELIMINATION
PHYSICAL (care)

- The resource performs all invasive or non-invasive care activities requiring special techniques.

HIGH SERVICE INTENSITY (continued)



CONTROL

HIGH SERVICE INTENSITY TYPE: DO FOR

DESCRIPTORS: **FEEDING**
 CONDUCT (impulses, emotions and relationship capacity,
 self-destructive behaviours)
 INTEGRATION

- The resource intervenes with authority to control the user who is unable to control him/herself or is unable or refuses to do what is expected, where this represents a high risk level to the user or others.
- The control interventions are designed to stop or generate a certain behaviour by the user and these require constant supervision. This is an exceptional service as part of the intervention plan, which is required when other services have proven insufficient.

7.4 GLOSSARY OF SPECIFIC SERVICES

To ensure the most consistent understanding possible of specific support or assistance services for each descriptor, it is important to specify the terminology used. This concerns both regular and high intensity services.

GLOSSARY OF REGULAR INTENSITY SPECIFIC SERVICES

ADAPT (OR ADAPTATION)	Adjust, modify the environment to comply with the user's needs.
HELP	Help ensure that the user does something, assist them in what they do.
ASSURE	Guarantee the user that the service is provided, provide them with what they need, ensure they have what they needs.
ADVISE	Give advice to the user, make suggestions, guide the user. Support the user in finding personal solutions.
DISTRIBUTE MEDICATIONS	Provide users who take their own medication, prescriptions prepared by a qualified professional. Users are aware of what they are taking and why.
SUPERVISE	Establish a living environment for the user with clear boundaries. Determine the limits and rules. Guide, direct or structure the user.
ENCOURAGE	Encourage the user to act, give them courage. Reassure them.
PROMOTE	Act to benefit the user. Facilitate what he has to do. Be dynamic with a positive attitude towards the user.
OBSERVE	Pay attention to what the user is doing.
PREVENT	Take the lead to avoid an embarrassing situation for the user. Ensure the user has what is needed to meet their future needs. Inform users in advance.
REMIND	Remind the user of actions already learned and understood, something they can already do. Remind them of situations they have already experienced.
REASSURE	Provide a sense of security for the user, reduce their fears. Reliability. Create a calm feeling.
SENSITIZE	Make the user receptive to something, make them sensitive to feelings, perceptions. Sensitize the user to others.
STIMULATE	Intensify the user's activity and energy, use positive motivation for them to complete the actions expected of them. Encourage users to adopt the attitudes and behaviours expected of them.
MONITOR	Observe the user carefully during the course of a situation in order to intervene if necessary.
VERIFY (OR VERIFICATION)	Observe if user complies with what is expected of them.

GLOSSARY OF HIGH INTENSITY SPECIFIC SERVICES

Go with the user to a place. Do the activity with the user. Be with the user as long as the activity lasts to support them through multiple interventions in order to ensure they run smoothly.

ACCOMPANY

Make users, who are unable to do so on their own due to, for example a physical, behavioural or cognitive disability, take medications prepared by a qualified professional. This involves some control and helps for taking medication. The user is not necessarily aware of what he/she is taking and why.

**ADMINISTER
MEDICATIONS**

Be with the user throughout the activity and begin doing the gesture so the user can continue the activity sequence with the objective of learning retention or maintaining automatic responses.

INITIATE

Exercise care or exploration methods that go beyond physiological barriers or via an artificial opening in the human body or that cause a non-superficial lesion to the body.

**APPLY INVASIVE
CARE**

Perform care activities not exceeding the physiological barriers or artificial opening in the body and can risk harming to the user.

**APPLY NON-
INVASIVE CARE**

Perform a complex technique requiring knowledge, skills and abilities necessary completing the activity safely. Technique based on a protocol where applicable.

**APPLY A
SPECIAL
TECHNIQUE**

Help the user acquire or re-teach skills (know), behaviours (learn to do) and attitudes (learn to be) necessary for meeting the objective targeted in the descriptor. The learning potential is present, even if the results are sometimes minimal or longer to appear.

TEACH

Intervene with authority to control the user who is unable to control him/herself or is unable or refuses to do what is expected of him/her, when this presents a high risk for the user or others. The control interventions are designed to stop or generate a particular behaviour from the user and they require constant supervision. This is an exceptional service, as part of the intervention plan, which is required when other services have proven insufficient.

CONTROL

Perform activities or actions for the user.

PROCEED

Deal with obstacles resulting from a user's inability (child or adult) with respect to the descriptor: an inability can be sensory, medical (physical or mental), or related to a cognitive disability and conduct. A diagnosis is not essential to identify a difficulty.

**HELP A USER
SHOWING A
DIFFICULTY**

Provide a service to the user (child or adult) with greater and direct supervision to prevent the risk of accident.

**HELP A USER
SHOWING A RISK**

7.5 DETAILS

In compliance with the Regulation, in collaboration with the resource, and if applicable, the institution specifies the specific support or assistance service(s) identified. These details are made according to the user's interest, state of health and well-being, procedures, protocols and other standards of care in the institution.

Therefore, the details allow to determine more explicitly with the resource on the appropriate means and standards for providing the service safely in accordance with the user's best interest. They set out more clearly the service to be provided to the user, particularly when the specified service is an activity otherwise reserved for professionals and requested from the resource under the *Professional Code*.

Thereby, the details allow the institution to ensure that the resource has received and understood the instructions for the instructions, policies, procedures and protocols relevant to the specific service. The Form provides in particular that the institution must provide the resource with the relevant extracts from procedures, protocols and standards of care.

The addition of details in the Form also represents an opportunity for exchanges between the resource and the institution in order to improve the quality of services to the user, while respecting the resource's autonomy. The resource may indicate to the institution the means with which they feel comfortable for providing the specific service, while allowing the institution to ensure that these means are consistent in respecting the objective, existing laws and regulations and the relevant standards.

The use of details thus requires collaboration and trust that are essential from every person involved and requires taking the time necessary in this regard.

If parties disagree on the details, the institution is responsible for identifying them.

Finally, the use of details, when required, applies both for regular intensity services and high intensity services.

The institution uses the details when indicating:

- specific policies and procedures;
- protocols;
- standards of care by the institution;
- clinical guidelines;
- supervision terms (when training or supervision is required for providing the specific service);

And when “Apply invasive services”, “Apply special techniques” and “Control” services have been targeted.

The institution can use the details when for example:

- the identified service relates to an IP objective;
- the institution and the resource agree on a service that is not targeted in the user’s IP;
- the identified service needs to be detailed;
- the identified service must be adapted to the user’s particular preferences or habits;
- the identified service must take into account the particularities of the user’s health plan or his/her well-being;
- the user’s needs call for a support or assistance service that the resource is not able to provide and the institution accepts an alternative service from the resource;
- the “no intervention” service has been targeted.

7.6 SERVICE CLASSIFICATION (SERVICE LEVELS)

Support or assistance services provided by the IR or FTR are classified into six levels based on the degree of support or assistance required by users. A resource can offer several levels of service if they receive more than one user who requires services of different intensity.

Common support or assistance services are included in each of the six levels. Thus, each level includes the all the common services to which are added specific services identified to meet the user's specific needs.

The level of service required by the user is determined after completing Part 2 of the Form, or the specific support or assistance services.

Under each descriptor, the services that are considered high intensity generate a rating, which is included in the Form, which is part of the Regulation, to the right of each of these services. The rating represents the degree of support or assistance required for the service. The rating is based on the relationship between time, frequency and complexity required to provide the service.

The service level required for the user is determined by adding up the highest ratings obtained under each descriptor. According to the score obtained, services belong to one of the following service levels:

SERVICE LEVEL 1	⇒ 34 points or less
SERVICE LEVEL 2	⇒ 35-69 points
SERVICE LEVEL 3	⇒ 70-104 points
SERVICE LEVEL 4	⇒ 105-139 points
SERVICE LEVEL 5	⇒ 140-174 points
SERVICE LEVEL 6	⇒ 175+ points

The service level obtained is taken into account in the calculation of resource compensation, in accordance with Section 303 of the *Act Respecting Health Services and Social Services*.

7.7 USAGE PRINCIPLES FOR PART 2 OF THE FORM

The principles are used to show certain aspects or conditions surrounding the actual use of the Form. They are essential to a proper understanding of the process:

- 1** → The institution has the responsibility of determining the specific support or assistance services based on the user's condition;
- 2** → The institution first evaluates the condition and functional capacity of the user using its own evaluation mechanisms before completing Part 2 of the Form using the classification grid. In particular, they use the outline of the intervention plan (IP) to determine the specific services to be provided to the user by the resource;
- 3** → The institution's caseworker responsible for completing the Form must have good knowledge of the user and what their situation is or, if applicable, must appoint a competent caseworker who does. The caseworker must be able to situate the user in relation to their development, condition, needs and relevant objectives;
- 4** → The caseworker responsible for completing Part 2 of the Form must have an overall knowledge of the Form in order to apply it appropriately.

⁴ See Appendix A "Classification Grid" of this user guide.

7.8 USAGE INSTRUCTIONS FOR PART 2 OF THE FORM

The instructions, found for the most part in the Regulation, are clear directions about the practical use of the Form:

- 1** → The Form must preferably be completed in the presence of the resource, according to Section 6 of the Regulation, no later than one month after the new user's arrival in the resource or, in the case of a child taken in charge by an institution that operates a child and youth protection centre, no later than two months after the child's arrival;
- 2** → Under each of the proposed descriptors, the institution checks the specific support or assistance services to be provided by the resource to attain the objective identified for the user, taking into account the user's condition; (Section 4 and Division 2 of Part 2 of the Regulation's Schedule)
- 3** → For each descriptor, it is important to identify at least one service that corresponds to the user's condition and needs. It is obviously possible to identify a number of services under the same descriptor, according to the user's needs; (Section 4 of the Regulation)
- 4** → In collaboration with the resource, and where applicable, the institution specifies the service or services identified in relation to the user's interest, the user's state of health and well-being, procedures, protocols and other standards of care applicable in the institution. The institution gives the resource, if need be, the relevant extracts from the identified procedures, protocols and other standards of care; (Section 4 and Division 2 of Part 2 of the Regulation's Schedule)
- 5** → The form must be reviewed by the institution at least once a year; in the case of a user of 2 years of age or less, that review must be done every 6 months; (Section 6 of the Regulation)
- 6** → The institution must, as soon as possible, make the correction required in the form following any change in the condition of a user requiring a modification in the services to be provided by the resource or in the clarifications concerning those services; (Section 6 of the Regulation)
- 7** → The institution is responsible for recording Part 2 of the completed Form in the IR-FTR Information System;
- 8** → After the data has been entered, the score obtained and the service level appear. This copy of the Form signed by the person designated by the institution must be delivered within the agreed time to the resource who will acknowledge receipt. (Section 6 of the Regulation)

7.9 PROCEDURE AND TERMS OF USE FOR PART 2 OF THE FORM

When completing the Form in the presence of the resource, it is preferable for the caseworker to have in hand certain documents to facilitate its application, in particular the user's IP, the glossary of specific services, the service intensity table and the illustration of services in relation with each descriptor presented in Chapter 8.

To facilitate the use of the instrument, here's a reminder as to how to proceed with the descriptors as well as a few terms of use.

1. Determine if the descriptor's objective applies

The definition under the descriptor must be interpreted as an objective. For example, under the *Conduct (impulses)* descriptor, the objective is for the user to control his/her impulses. It is possible that descriptor's objective does not apply to a user. For example, an elderly person suffering from a loss of autonomy who has no integration activity, under the *Integration* descriptor, the caseworker must select *No intervention* as the objective to attend and continue in their integration activities does not apply. In addition, it is possible that the IP PI does not target, for the moment, attaining a descriptor's objective. In this case, the caseworker must nevertheless determine the service required under this descriptor.

2. Account for the user's characteristics

The characteristics of each user affect the service to be provided and its degree of intensity.

Is it a baby, a child, a teenager, an adult or a user showing a risk or difficulty?
The service will vary depending on one of these possibilities.

Therefore:

- ⇒ **“Proceed with a baby”** concerns a baby who is completely dependent on adults to meet their needs;
- ⇒ **“Teach a child”** or a teenager, must take into account their stage of development and therefore their ability to acquire the targeted learning;
- ⇒ **“Teach a user”** can sometimes be applied to an adult whose situation does not appear problematic in relation to a specific descriptor, but who must learn to deal with a new situation;
- ⇒ **“Provide a service to a user showing a difficulty”** is for a child (0-18 years) or an adult who has a difficulty in terms of sensory, medical, or related to cognitive disabilities and conduct that interferes with reaching the relevant descriptor’s objective;
- ⇒ **“Provide a service to a user showing a risk”** concerns any user who presents a risk of accident associated with the nature of the descriptor in question.

3. Determine the source of the difficulty

To target the right service under the proper descriptor, in the case of a user showing a risk or difficulty, the caseworker identifies the source of the user’s difficulty and his/her needs. For example, a user shows a lack of interest in food and eats poorly due to excessive sorrow. Thus, under the *Feeding* descriptor, the corresponding service will be targeted: *Help, supervise, stimulate, monitor* service in a preventive perspective. However, since the source of the difficulty is related to emotions, under the *Conduct (emotions)* descriptor, the caseworker will ask the resource to accompany or teach the user showing risk or difficulty to control emotions.

A user may have difficulty under several descriptors. It is up to the caseworker to use their professional judgment to assess the user’s condition in relation to each descriptor and determine the service intensity level required. In specific cases, under the *Conduct* descriptors, it is possible that a user may have difficulty as much controlling impulses as with relationship problems.

Finally, the same problem with a user may require services under more than one descriptor. Thus, in the case of a young girl presenting oversexualization attitudes and behaviours in her relationships with others, the caseworker will target under the descriptor *Conduct (relationship capacity)* the service *Teach a user showing a difficulty to develop better social skills* and will likely select under the *Dressing* descriptor, the service *Monitor* if the young woman is dressed appropriately before leaving for school.

4. Determine the intensity level for the required service

To determine the intensity of the service required, the caseworker must be familiar with the common support or assistance services to be provided by the resource. Also, the caseworker must grasp the service definitions as described in the glossary and refer to service intensity table which establishes the correlation between the type of intervention and the concept of intensity. In fact, the level of intensity (regular or high) is determined, for example, by the more or less sustained attention from the resource in relation to the user in providing the service. It is important however to point out that even though a service is specified in the user's IP, it does not automatically imply that it is a high intensity service.

5. Determine the service(s) usually required

To select a service, it should be required on a regular basis (usually). The notion of "usually" is not quantified in order to respect the caseworker's professional judgment. The service must be significant or require a certain intensity level.

These services are based on the user's condition in relation to his/her needs, state of health, functional capacity and objectives according to the IP.

It should be noted that more than one service can be targeted under each descriptor in response to the user's needs. It is important to select all that apply since this becomes an important reference for the resource in terms of specific services expected.

Each descriptor is unique and the seventeen descriptors are mutually exclusive. The caseworker therefore centers on the services to be provided based on the descriptor to fill, by strictly referring to the description provided. For example, under the *Feeding* descriptor, the caseworker will determine the services to be provided for the user eats properly without risk of choking and risk to the user's health.

