

**Full-Time Program: (C112) Personal Support Worker  
Returning Semester 2 student (Fall/Winter Intake)****Renewal Health Form deadline:** two months before the start of the new semester**RETURNING STUDENT CHECKLIST & ACTIONS REQUIRED**

**Notice:** If you are returning/repeating in this program, it is your **main responsibility** to complete & submit all the medical & additional health form requirements outlined below by the given deadline. This process will take 6-8 weeks to complete and if you **fail** to do so, you will be **excluded** from clinical placement which will **affect** your academic standing & may lead to program **withdrawal**. All costs, service fees and fine associated with the overall health form requirements are responsibility of the student.

**RENEWAL MEDICAL REQUIREMENTS**

- Seasonal Flu Shot (*recommended every year in Nov/Dec*)
- Step 1- Tuberculosis Skin Test, **pg. 2**
  - Tuberculosis Skin Test-1 Negative (-) or (< 10 mm) results from last year (only if applicable)**
    - Book an appointment with your doctor/Walk-In Clinic and bring your new Pre-placement health form at your scheduled appointment
    - If your previous Two Step-TB skin test result was “**Negative or (less than 10 mm)**” last year, please ask your doctor to do annual Step 1-TB Skin Test. Fees may apply.
    - Please ensure that your doctor/physician to complete and sign your health form.
  - Tuberculosis Skin Test Positive (+) or > 10 mm results from last year (only if applicable)**
    - Book an appointment with your doctor/Walk-In Clinic and bring your new Pre-placement health form at your scheduled appointment.
    - If your previous TB skin test result was “Positive (+) or (> 10 mm)” results from last year, you are **no longer** required to redo or pay for another TB skin test or Chest X-ray again.
    - Please advise your doctor/physician to document your previous TB skin test Positive (+) date given/result and answer the TB Skin Test Questions (No #1-6).
    - Please ensure that your doctor/physician complete and sign your health forms
- Final signature of doctor/physician and Medical Office stamp (*fees may apply*), **pg. 2**
- Bring your old first year health form documents
- If any, complete any Medical Deficiency from your last visit with Paramed, **pg. 3**

**ADDITIONAL RENEWAL CHECKLIST**

Please apply for your police check and certificates and bring all originals and one set of photocopies of your documents at your scheduled appointment with ParaMed Office. **Please read all detail instructions on pgs. 4-5**

- Standard First Aid Certificate Card (*renew every three years*), **pg. 4**
- [CPR level HCP Certificate Card](#) (*renew every year*) **pg. 4**
- [Police Vulnerable Sector Check](#) (*renew every six months, see application deadline dates per semester*) **pg. 4:** Important note to all Toronto students only: If you were advised to do fingerprint in the past, please make sure that you attached the RCMP fingerprint letter that they sent you on your Toronto Police form and payment. Otherwise, Toronto Police Service and RCMP will flagged you to do and pay for fingerprint again. Any questions, please contact us directly
- [Mask Fit Test](#)-(*renew every two years*) **pg. 4**
- Requisite **ParaMed** Office Appointment, **pg. 4**
- ParaMed and George Brown College Agreement Form, **pg. 5**

**PARAMED SERVICE FEES (rates are subject to change)**

**Notice:** Once you have everything done and completed, your **final step** is to **create an account and book an appointment** with ParaMed Office online at [www.georgebrownhealth.ca](http://www.georgebrownhealth.ca) by the deadline. It is mandatory that you bring and submit all of the originals, one set of photocopies of your forms and pay the Service Fees at your scheduled appointment. Please **DO NOT** book or go to ParaMed Office with an **INCOMPLETE** forms, otherwise they will **charged** you a **Subsequent Visit Fee**. ParaMed is a “**Fragrance Free Zone**”, kindly **do not wear** any perfume, lotion or cologne at your appointment.

**(New Service Fees effective as of June 1<sup>st</sup>, 2020 to May 31<sup>st</sup>, 2021)**

- Standard Visit Fee - \$58.41 dollars (submission of health form, RN fee, archives & medical records access online)
- Subsequent Visit Fee (due to a Deficiency List Form) - \$25.59 dollars
- Cancelled or Missed Appointment Fine - \$58.41 dollars (without 24 hour notice)
- Mask Fit Test - \$44.43, Photocopy - \$3.00

**CONTACT US**

- Suzette Martinuzzi, Pre-placement Coordinator at (416) 415-5000 ext. 3415 or via email [smartinu@georgebrown.ca](mailto:smartinu@georgebrown.ca)
- Clinical Pre-placement Office Campus Locations
- (Mon-Wed) 51 Dockside Drive, Room 702, 7<sup>th</sup> Floor, Waterfront Campus (Thursday-Friday) 200 King Street East, Room 401B, 4<sup>th</sup> Floor, Building “A”, St. James Campus

**FULL TIME PROGRAM: (C112) PERSONAL SUPPORT WORKER-RETURNING SEMESTER 2  
RENEWAL HEALTH FORM**

Name x \_\_\_\_\_

GBC ID# x \_\_\_\_\_

Tel x \_\_\_\_\_

*(ParaMed Official Stamp here)*

Email x \_\_\_\_\_

ParaMed Deadline x \_\_\_\_\_ (two months prior to the start of new semester)

**MEDICAL RENEWAL REQUIREMENTS**

**(DOCTOR/PHYSICIAN/HEALTH CARE PROFESSIONAL TO COMPLETE, SIGN & STAMP)**

Ontario legislation specifies certain surveillance requirements for those entering into healthcare practice settings. The Program policy was developed in accordance with the communicable disease surveillance protocols, specified under the Public Hospitals Act, to meet the requirements of our students' placement settings. This process is necessary to ensure that our students protect their health and safety, and the health and safety of patients, visitors, employees and other students. Other than the influenza vaccine, the completion of this information is not optional, and all sections must be completed as outlined. Our placement partners have the right to refuse students who have not met their immunization standards. If, for medical reasons, your client is unable to receive a required immunization or Chest X-ray, a medical note of this exclusion must be provided on the form.

**1. SEASONAL FLU SHOT (mandatory every year in November/December)**

Influenza virus vaccine is available free of charge from health services in the fall or can be obtained from your healthcare provider. Students are encouraged to submit evidence of the vaccination in December. If you know or suspect that you have an allergy to eggs or other vaccination preservatives, or components, please discuss your options with your HCP. Do not worry about the flu shot at this time; you may submit your completed health form documents to ParaMed without the flu shot record. GBC will do a flu shot clinic in November/December. The influenza vaccine is not mandatory; however, if an outbreak occurs at an assigned agency, and flu vaccine was not received, you may be denied access to the facility, thus jeopardizing the successful completion of your placement.

Seasonal Flu Shot Given Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm / dd / yyyy)

Health Care Professional Signature: \_\_\_\_\_

**2. STEP 1-TUBERCULOSIS SKIN TEST (renew every year and read all of the instructions below)**

- **Negative (-) with less than (< 10 mm) induration** - If your previous Two Consecutive Step-TB Skin Test result was both "Negative with less than (< 10 mm)" induration from last year, please ask your doctor to renew your Step 1-TB Skin Test only and document it below.

**STEP 1-TB SKIN TEST**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 (Given Date: mm / dd / yyyy)                      (Date Read: 48-72 hours after date given)                      (Induration Size) (mm)

- **Positive (+) with more than (> 10 mm) induration**-If your previous TB Skin Test result was "Positive with more than (> 10 mm)" induration from last year, you are **NO longer** required to do anymore TB Skin Test or Chest X-ray again. Please advise your doctor to do annual physical examination and answer letters (A-F) below. No Exceptions!

**TB SKIN TEST POSITIVE MUST BE (MORE THAN >10 MM) INDURATION  
DOCTOR/PHYSICIAN MUST DO ANNUAL PHYSICAL EXAM & ANSWER LETTERS (A-F) BELOW;**

- a) Chest X-ray (ATTACH a copy of the X-ray report valid every four years) Result \_\_\_\_\_ Date \_\_\_\_\_ (mm/dd/yyyy)
- b) History of disease?    Yes or No                      Date (mm/dd/yyyy) \_\_\_\_\_
- c) Prior history of BCG vaccination (need documentation? Yes or No                      Date (mm/dd/yyyy) \_\_\_\_\_
- d) Does this student have signs/symptoms of active TB on physical examination?                      Yes or No
- e) INH Prophylaxis (Treatment)?    Yes or No                      Date (mm/dd/yyyy) \_\_\_\_\_ Dosage \_\_\_\_\_
- f) Specialist (Public Health) Referred?                      Yes or No                      Date (mm/dd/yyyy) \_\_\_\_\_

Final Signature of doctor/physician/health care professional \_\_\_\_\_ (pg. 2)

Date (mm/dd/yyyy) \_\_\_\_\_ Medical Office Stamp \_\_\_\_\_ (pg. 2)

NAME \_\_\_\_\_

### (C112) PERSONAL SUPPORT WORKER-RETURNING SEMESTER 2 MEDICAL DEFICIENCY

#### 3. MEDICAL DEFICIENCY LIST

**DID YOU HAVE ANY MEDICAL DEFICIENCY FROM YOUR LAST VISIT WITH PARAMED? If so, please read carefully the instructions below and use the information that only applies to you:**

- ➔ If your old health form was **“NOT CLEARED”** due to outstanding/missing MMR or Varicella or Hepatitis B or Tdap booster shot and/or repeat lab test from your last visit with ParaMed, it is mandatory that you complete any deficiency as outlined below before you go and pay for your next ParaMed appointment.

**Tetanus, Diphtheria & Pertussis (Tdap)-must be valid every 10 years or get ADACEL booster shot (Only if applicable)**

- Repeat Dose Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_(mm / dd / yyyy)

**Measles, Mumps & Rubella (MMR) (if only outstanding from your last visit with Paramed)**

- Repeat Dose Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_(mm / dd / yyyy)
- Repeat laboratory blood test report after last dose

**Varicella (if only outstanding from your last visit with Paramed)**

- Repeat Dose Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_(mm / dd / yyyy)
- Repeat laboratory blood test report after last dose

**Hepatitis B (if only outstanding from your last visit with Paramed)**

- Repeat Dose Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_(mm / dd / yyyy)
- Repeat laboratory blood test report after last dose

- ➔ If your old health form was stamped as **“CLEARED”** from your last visit with Paramed, **NO** injection and/or booster shot required. But it is mandatory that you bring your old health form documents. Please **disregard** this section.
- ➔ If your old health form was stamped as **“EXCEPTION”** from your last visit with Paramed, **NO** injection and/or blood test required and/or doctor/HCP signature required unless given/advised by your doctor/HCP. But it is mandatory that you bring your old health form documents. Please **disregard** this section.

**(C112) PERSONAL SUPPORT WORKER -RETURNING SEMESTER 2  
RENEWAL OF ADDITIONAL REQUIREMENTS****4. POLICE VULNERABLE SECTOR CHECK (renew every six months)**

**Notice:** If you have a “**Not Clear**” police check record, your faculty will **exclude** you from the Clinical/Field Practice course, which will **affect and jeopardize** your academic standing and can lead to program **withdrawal**. Your program strongly and highly recommend that all students must have a “**CLEAR**” police check to **avoid** any issues and problems with their placement agency partners and **wasting** your time and money. All costs associated with the police check application and additional fees related to fingerprint, court documents and Record Suspension (formerly Pardon) process are responsibility and paid by the student.

Issued Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Expiry Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (six months after the issued date)  
mm / dd / yyyy mm / dd / yyyy

Please read carefully all of the instructions in how to apply for your Police Vulnerable Sector Check according to your regional police service, complete and submit it to us by the specific deadlines as outlined below. If you fail to do so, you will be excluded from placement.

For students who currently reside in [Toronto region](#) (with a postal code that starts with letter “M”)

How can I obtain the Toronto Police vulnerable sector form?

- You must book an appointment to see Suzette Martinuzzi at 416-415-5000, ext. 3415 or [smartinu@georgebrown.ca](mailto:smartinu@georgebrown.ca)
- It is mandatory that you bring a money order/bank draft payment of \$20.00 dollars payable to Toronto Police Service and a government photo ID at your scheduled appointment. (No other payment method accepted)
- Once we receive your form and payment, we will mail it to Toronto Police Service on your behalf and they will process it within 4 to 6 weeks.

**What if I was advised to do fingerprint in the past?**

- Important note to all Toronto students only: If you were advised to do fingerprint in the past, please make sure that you attached the RCMP fingerprint letter that they sent you on your Toronto Police form and payment. Otherwise, Toronto Police Service and RCMP will flagged you to do and pay for fingerprint again. Any questions, please contact us directly.

When do I need to apply and submit my Toronto Police vulnerable sector application form and payment?

- **Fall Semester** -you must submit it to our office in March
- **Winter Semester** -you must submit it to our office in October

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For students who currently reside in another region such as [\(Durham, Halton, Hamilton, OPP, Niagara Peel, York\)](#) and/or other province

What if I currently reside in another region mentioned above, when do I need to apply for my police check?

- **Fall Semester**-you must apply in September
- **Winter Semester**-you must apply in November

How do I apply for the renewal?

- Please go to your specific regional police service and they can take up to **2-6 weeks** to process your application, with the **exception of Niagara and Halton region** which can take **6 to 8 weeks** to process.
- If you require a volunteer letter to get the student rate, please send us an email with your full name, ID#, program name and the complete address of your regional police service or for more information, click here [Police Vulnerable Sector Check](#)

**(C112) PERSONAL SUPPORT WORKER-RETURNING SEMESTER 2  
RENEWAL OF ADDITIONAL REQUIREMENTS**

**5. STANDARD FIRST AID (renew every three years) & BLS (HCP) CERTIFICATE CARD (renew every year)**

Standard First Aid with CPR Level (HCP) Certificate Card it is mandatory that you renew your Standard First Aid is valid every three years and CPR level (HCP) certificate every year and must be valid for the entire academic year. For the list of First Aid Approved Trainers, click here for more information or you can register at any First Aid Trainers available in your area. No Emergency First Aid or online CPR Training Certificate is accepted. It is mandatory that you have it done with a standard in-class format. Please bring your original certificate card and photocopies at your scheduled appointment with Paramed.

**BASIC LIFE SUPPORT (BLS) CERTIFICATE**

Issued Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Expiry Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (one year after the issued date)  
mm / dd / yyyy mm / dd / yyyy

**STANDARD FIRST AID CERTIFICATE**

Issued Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Expiry Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (three years after the issued date)  
mm / dd / yyyy mm / dd / yyyy

**6. MASK FIT TEST CERTIFICATE CARD (renew every two years)**

ParaMed Office will do the mask fit test for you at your scheduled appointment. Please do not eat, drink and chew gum 30 minutes prior to your ParaMed appointment. If you are expecting or pregnant, you need to submit a medical note to exempt you from mask fit test. All male students must be clean-shaven. All students must be tested and fitted for an appropriate mask (respirator) in the event of flu (or other airborne/droplet) outbreak. Cards must clearly state the mask type (model) and size. Please ensure you carry your mask fit card at all times during placement. Mask fit cards are valid for two years after the issue date.

Issued Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Expiry Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (two years after the issued date)  
mm / dd / yyyy mm / dd / yyyy

**7. PARAMED APPOINTMENT & SERVICE FEES**

- Once you have everything done, your **final step** is to book an appointment with ParaMed at [www.georgebrownhealth.ca](http://www.georgebrownhealth.ca)
- ParaMed Office is a “**Fragrance Free Zone**”, kindly **do not wear** any perfume, lotion or cologne at your appointment.
- Download your ParaMed Confirmation Visit Sheet
- Bring and submit your old forms, police check and CPR level HCP Certificate at your scheduled appointment.
- Bring your Initial Visit Fee payment, *page 1*
- Photocopy one set of all your original forms before you go to your ParaMed appointment, *pgs. 2-5*

## George Brown College & ParaMed Agreement Form (Complete prior to ParaMed appointment)

Name x \_\_\_\_\_

Program x \_\_\_\_\_

I x \_\_\_\_\_ (Print Name) understand that any false statement is grounds for cancellation of admission.

I understand that the college has the right to cancel my admission privilege on the basis of medical information submitted or withheld. I understand that it is my responsibility to inform the appropriate George Brown College personnel of any communicable disease, special need, exception or medical condition which may place me at risk or pose a risk to others at George Brown College or on placement.

I will pay all the services fees and authorize ParaMed to review the above information.

x \_\_\_\_\_  
(Student Signature) (Date)

### Element of Risk

All experiential learning programs, such as field trips, clinical and field placements or job shadowing involve certain elements of risk. Injuries may occur while participating in this activity without any fault of the student, the placement or the college. By taking part in this activity, you are accepting the risk that you may be injured. Following the Health and Safety rules of your placement is required. By signing below you agree that you have reviewed the element of risk and are willing to comply with the Health and Safety Rules of your placement.

If an injury should occur, it must be reported immediately to your supervisor and to your faculty. Completing Workers Safety Insurance Board forms and reporting any injury while participating in placement must take place within **72 hours** of occurrence.

x \_\_\_\_\_  
(Signature) (Date)

### Contact Us

Suzette Martinuzzi, Coordinator at (416) 415-5000 ext. 3415 or via email [smartinu@georgebrown.ca](mailto:smartinu@georgebrown.ca)

Clinical Pre-placement Office campus locations:

(Mon-Wed) 51 Dockside Drive, Room 702, 7<sup>th</sup> Floor, Waterfront Campus

(Thursday-Friday) 200 King Street East, Room 401B, 4<sup>th</sup> Floor, Building "A", St. James Campus

Business Hours: 8:00 am to 3:30 pm, by appointment only or visit [FT Program Pre-placement](#)

### FREEDOM OF INFORMATION AND PROTECTION OF INDIVIDUAL PRIVACY ACT

The personal information on this form is collected under the legal authority of the Colleges and Universities Act, R.S.O. 1980, Chapter 272, Section 5, R.R.O. 1990, Regulation 77 and the Public Hospital Act R.S.O. 1980 Chapter 410, R.S.O. 1986, Regulations 65 to 71 and in accordance with the requirements of the legal Agreement between the College and the agencies which provide clinical experience for students. The information is used to ensure the safety and wellbeing of students and clients in their care.

