



MEDICAL CLEARANCE FOR BEHAVIOUR INTERVENTIONIST

Name: _____

I certify that the above-named person is emotionally and mentally stable and has no physical impairments or prior injuries that would prevent them from being able to perform the job duties of a Behavior Interventionist for clients with Autism and developmental disabilities. This clearance means that the above-named person can work any and all shifts (days, evenings and nights), and that some of these shifts may be overtime.

Physical Job Duties of a Behavior Interventionist:

- General Housekeeping (i.e. laundry, cooking, cleaning, activities of daily living, etc.)
- Medication Administration – following training by a Registered Nurse
- Personal Care of Clients (i.e. bathing, toileting, clothes etc.)
- Supporting Clients with Exercise, Walking, and Recreation Programs
- Following Behaviour and Safety Plans
- Participate in Non Violent Crisis Intervention learning to manage difficult and/or challenging behaviors safely.

Physician Signature:

Date:

Place medical clinic stamp here

Employee Statement:

I state that I have no previous injuries that would impair me from doing the above-mentioned duties.

Employee's Signature:

Date: