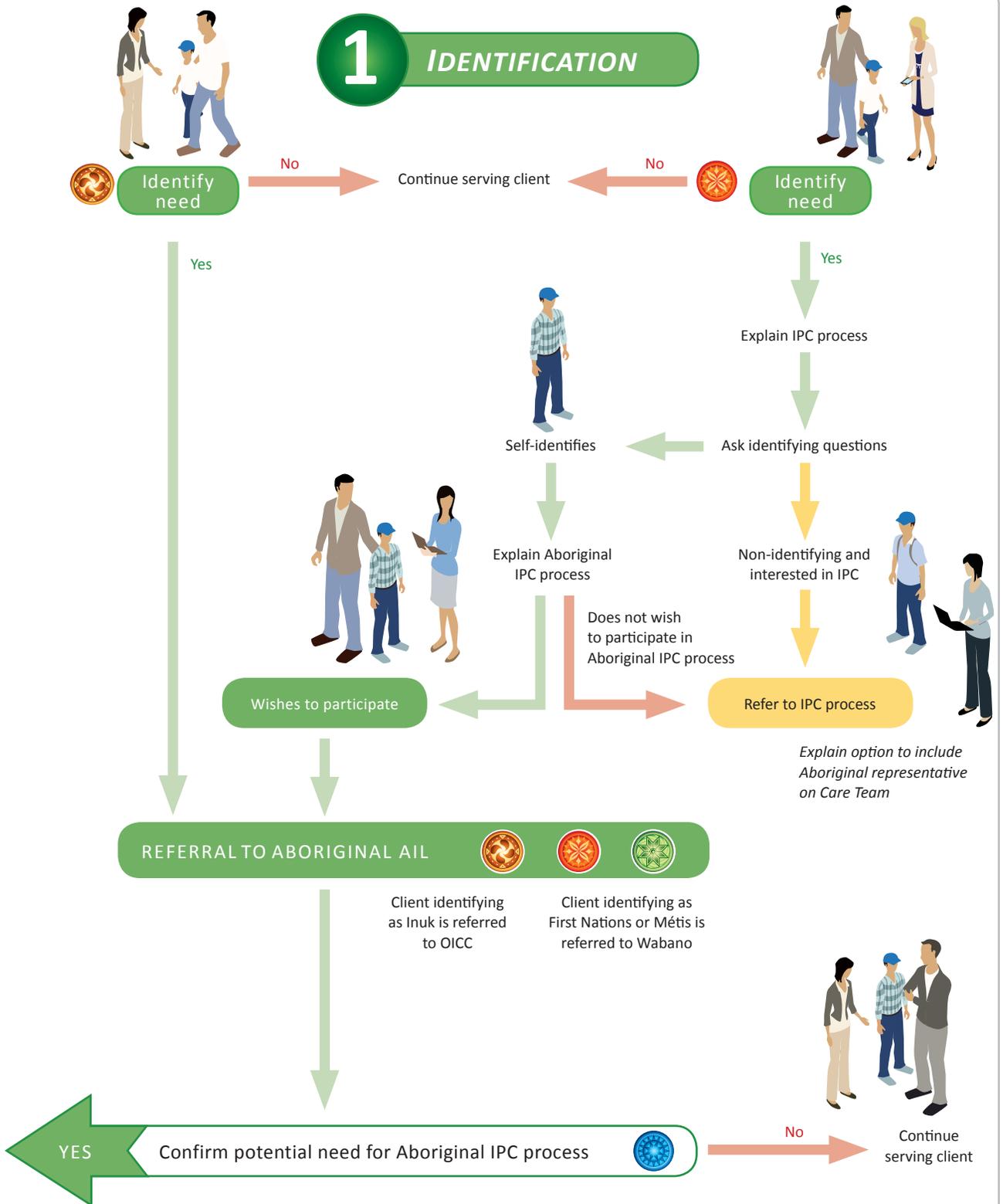


The Aboriginal Integrated Plan of Care Process Map



LEGEND

- 
Referring Aboriginal Service Provider
- 
Non-Aboriginal AIL
- 
Non-Aboriginal Referring Service Provider
- 
Aboriginal Integrated Plan of Care Lead
- 
Aboriginal AIL
- 
Navigation Care Team
- 
Elder

Initial Circle

- Complete Aboriginal Integrated Plan of Care template
- Complete Steps to Success template
- Develop Safety Plan
- Establish ongoing meeting and communication frequency

Ongoing Circles

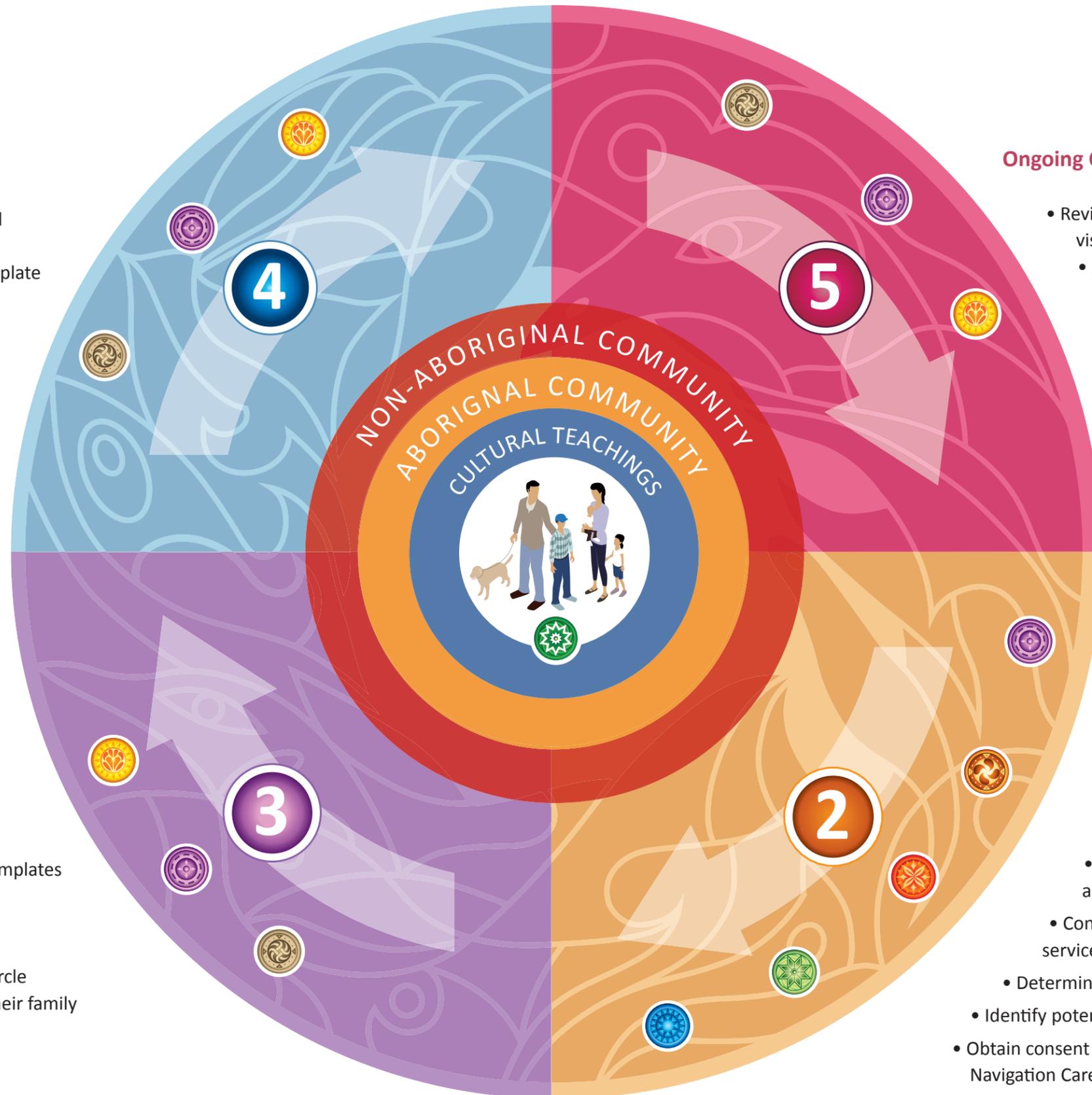
- Review and monitor progress toward vision and goals
- Assess and make changes to Navigation Care Team as needed
- Develop transition plan
- Ensure culturally safe care
- Check in with client and family to ensure the process is meeting their needs

Gathering the Circle

- Distribute Service Summary templates
- Share Service Summaries with Navigation Team
- Invite Elder
- Schedule and confirm Initial Circle
- Prepare the child/youth and their family for the Initial Circle

Visioning the Plan of Care

- Determine with the family who will be the Aboriginal IPC Lead
- Discuss vision of care with the client and their family
- Obtain consent and gather necessary information
- Determine if needs can be met by Aboriginal agencies alone. If not, continue on.
- Conduct mini circles with non-aboriginal service providers
- Determine initial vision statement
- Identify potential Navigation Care Team members
- Obtain consent from client/family to contact Navigation Care Team Members



LEGEND

