Overview: The primary responsibility of a Personal Care Attendant (PCA) is to insure the health, safety and well-being of a person with a disability on a Wilderness Inquiry trip. A PCA provides assistance to an individual participant with activities for daily living, including toileting, transferring, and other forms of assistance. Many people seek to go in these roles thinking it's a great way to go on a trip for free. While this is true, being a PCA involves a significant responsibility and it can involve a lot of work.

PCAs provide assistance to individuals with disabilities and provide feedback to the Wilderness Inquiry leadership team on the health and well being of the participant. Recognizing the significant contribution a PCA makes, a PCA does not pay any of the trip fee. However, depending upon the circumstances, the participant with a disability may be asked to pay all or part of a PCA’s trip fee. WI trail staff and interns will work with the PCA to make sure that their workload is reasonable and that they avoid burn-out.

Primary responsibilities of being a PCA:
- Visually and verbally assessing participant needs, capacities and desires in order to safely and effectively meet individuals’ needs.
- Assist participants with disabilities in their activities of daily living (may include eating, personal hygiene, and toileting needs).
- Transferring and enhancing mobility of an individual (assistance available from staff)
- Dispense medications as needed.
- Facilitate interaction with all WI participants.
- Ability to contribute to the general activities of wilderness travel (canoeing, kayaking, dogsledding, lifting boats, general camping).

Benefits of being a PCA:
- Satisfaction of assisting a person so that they can participate on a WI trip
- A chance to take a WI trip at no cost
- A chance to see new places and try new things
- Many laughs, great stories and memories to last a lifetime
- Rewarding experience

Time commitment: From 3 - 18 days, depending on trip destination
Positions available per season: Dependent on individual trip needs. We send available openings via email.
Personal Care Attendant Application/Skills Inventory

PLEASE COMPLETE ALL INFORMATION ON PAGES 1 AND 2 OF THIS FORM

Name: ________________________________________________________________________________

Address: ______________________________________________________________________________

______________________________________________________________________________________

Day phone: ___________________________ Evening phone: _____________________________

Email address: ____________________________________________________ ______________________

Occupation: ___________________________ Employer: _____________________________

Do you have previous Personal Care Attendant Experience?  Yes  No

If yes, how long have you worked as a PCA? _____________________________

Do you have a flexible schedule?  Yes  No

Please explain. _________________________________________________________________

How much advance notice do you require to join us on a trip?

Less than 1 week  2 – 3 weeks  More than 1 month

Please rate your skill/experience in the following areas: (1= no experience, 5= expert)

**Specialized PCA Skills**

Working with persons with physical disabilities  1  2  3  4  5

Transferring persons with limited mobility  1  2  3  4  5

Working with persons with cognitive and/or developmental disabilities  1  2  3  4  5

Assisting people with daily living activities (hygiene, toileting, dressing)  1  2  3  4  5

**Additional helpful information**

Canoeing  1  2  3  4  5

Kayaking  1  2  3  4  5

Strength/stamina  1  2  3  4  5

Group skills (interpersonal and public communication, decision-making)  1  2  3  4  5

Camp skills (site selection, tent set-up, outdoor cooking, Leave No Trace)  1  2  3  4  5

I have first aid and/or water safety training  Yes  No

Certifications and expiration dates: _____________________________________________________________

Please check activities of interest to you:  Canoe  Kayak  Ski/Dogsled  Hike  Any

If there are other circumstances that we should know about, please explain below:

_____________________________________________________________________________

_____________________________________________________________________________
PERSONAL REFERENCES Please provide names and numbers for 2 non-family members.

1. Name: _____________________________________ Relationship to you: ___________________________
   Email: _____________________________________ Phone: __________________________________________

2. Name: _____________________________________ Relationship to you: ___________________________
   Email: _____________________________________ Phone: __________________________________________

BACKGROUND CHECK AUTHORIZATION

Before you serve as a PCA on a trip, you must complete a background check/consumer reports. Wilderness Inquiry will send you the necessary paperwork to do a background check after you are registered for your first trip where you are serving as a PCA.

I hereby certify that the above information is true and correct to the best of my knowledge.

Signature:_________________________________________ Date:____________________________

Thank you for your interest in our program—we look forward to working with you!
Wilderness Inquiry • 808 14th Ave SE • Minneapolis, MN • 55414
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