CONTINUING CARE CAPITAL PROGRAM

## Architectural design requirements checklist for continuing care

Albertan

**Classification:** Public

Government of Alberta July 22, 2021 Continuing Care Capital Program Architectural Design Requirements Checklist for Continuing Care Contact: health.continuingcarecapitalprograms@gov.ab.ca

## Architectural Design Requirements for Continuing Care Checklist

The Applicant will provide continuing care spaces that meet or exceed legislated requirements including all provincial (and federal if applicable) building, fire, life and safety codes as well as requirements from authorities having jurisdiction such as local bylaws / land use (e.g., zoning) restrictions and permit conditions. As required, the Project will also need to meet additional design requirements specifically stipulated by Alberta Health Services (AHS) for special populations.

The selected Applicant shall be responsible to acquire all of the permits, licenses, approvals by authorities, property easements and lands required to implement the Project. The Applicant's prime consultant and sub-consultants must obtain all applicable permits, including but not limited to, building, foundation, framing, plumbing, gas and electrical; and before closing in, ensure inspections have occurred and been signed off.

In Alberta, it is a mandatory requirement that any new or existing facility that accommodates continuing care residents must:

- be designed and built to a minimum Group B Division 3 (B3) occupancy classification as defined in the Alberta Building Code;
- comply with the specialty populations (e.g., persons living with obesity, dementia, etc.) requirements in Appendix 1 of the <u>Design Guidelines for Continuing Care Facilities in Alberta</u> (August 2018) and as they may be updated from time to time (if applicable); and
- comply with the infection prevention and control requirements in Appendix 3 of the <u>Design</u> <u>Guidelines for Continuing Care Facilities in Alberta (August 2018)</u> and as they may be updated from time to time.

**Note:** As B3 is a recent addition to the *Alberta Building Code*, proof of B3 equivalency from the authority having jurisdiction would be required for any proposed project involving an existing facility that adheres to residential occupancies (Group C), such as for a renovation / upgrade of an existing facility. It is recommended that a physical and / or functional building assessment be conducted to determine whether the building is at the end of its useful life or whether a new build would be more cost effective than renovating the existing facility to current standards.

**Attention:** There may be some instances in some communities where low water pressure may affect the fire suppression systems and may need to be addressed to ensure the facility passes the fire inspection. There is also a need to ensure the power requirements of the facility can be accommodated with the existing power grid in the community. If, for example, the facility will require a 3-phase power supply, the Applicant will need to confirm through their engineer, architect or authority having jurisdiction, that there is ready access to an appropriate power supply.

**Communication System:** Internet is an essential service and building infrastructure that supports internetbased communication systems including Voice Over IP phone systems, video conferencing systems, resident call bell systems, building access systems, building management and monitoring systems, resident entertainment and recreation systems, and remote health care systems is required. An adequate telecommunication system (phone, Ethernet, Internet, Wi-Fi) is a requirement for the facility.

**Facility Use / Populations Served:** Where changes are made in the intended use of, or to the population residing in a building that houses supportive living, designated supportive living and long-term care spaces, the building must continue to meet the requirements of the Alberta Building Code.

**Design Guidelines:** The <u>Design Guidelines for Continuing Care Facilities in Alberta (August 2018)</u> are intended to promote best practices and innovative design for continuing care facilities. These guidelines have been developed as a reference guide for new construction, renovation and replacement projects.

The guidelines are intended to support and encourage the configuring of environments that respond positively and appropriately to the diverse physical, psychological, social, cultural and spiritual needs of individuals who live within supportive living, designated supportive living and long-term care.

To assist Applicants, the design elements in this document have been extracted from the <u>Design Guidelines</u> for <u>Continuing Care Facilities in Alberta (August 2018)</u>. It is expected that these elements, at a minimum, will be included in the final design and operation of a project approved by government as an investment project, capital grant project or spaces contracted by Alberta Health Services (AHS) (including those where no capital funding is provided).

**Design Committee Review Process:** Once an application is approved, Applicants are required to provide plans of the proposed facility to the Design Review Committee, where applicable, for approval. The proposed plans must be submitted in a readable format that demonstrates the site plan, building elevations, floor plans for each floor, as well as detailed drawings of a typical resident room(s) for Eligible Spaces (including turning radii in the bathroom and the suite).

The Design Review Committee comprises representatives from Alberta Health, Alberta Infrastructure and AHS (and when appropriate, Alberta Seniors and Housing, Alberta Indigenous Relations and / or Alberta Community and Social Services). The Design Review Committee will review the design and provide feedback where the design does not meet the requirements. <u>Capital funding and / or AHS care funding are contingent on Applicants complying with these Architectural Design Requirements</u>.

Note: The Applicant will also be expected to be knowledgeable of and apply to the greatest extent possible the best practices as identified in the <u>Design Guidelines for Continuing Care Facilities in</u> <u>Alberta (August 2018)</u>. The practices demonstrate efforts to incorporate features that maximize resident privacy, accessibility, personal choice, and resident control over their environment. The Applicant will also be directed to use the <u>Technical Design Requirements for Alberta Infrastructure</u> <u>Facilities</u> as well as the <u>Barrier-Free Design Guide 2017</u> of the Safety Codes Council and the Canadian Standards Association (CSA) Z8000 standards to assist in planning new facilities and renovating existing ones.

It should also be noted that local AHS Zone staff from Infection Prevention and Control will be involved as the Project progresses through the design and development process, to provide direction and advice on specific items of concern to AHS in this domain (e.g., location of hand wash sinks, grab bars, storage spaces, etc.).

The Applicant must review each item identified in the following checklist and acknowledge having read and understood each requirement by checking the box on the left-hand side of each requirement. At the bottom of the document, the Applicant is also required to provide an authorized signature agreeing to include these design elements in the final Project. A PDF scan of this signed document is a mandatory inclusion of the application submission requirements.

If the Applicant is proposing a multi-purpose campus of care, for which supportive living, designated supportive living and long-term care services are only a part, then these architectural design requirements only apply to those portions of the Project facilities that relate to the provision of supportive living, designated supportive living and long-term care services.

Applicant I	Information
Organization Name:	
Project Location (municipality):	
Project Address (street address):	
Contact Information:	
Grant Request Amount (if applicable):	
Number of Eligible Capital Funded Resident Units:	

Additional Features of the Facility	Level of Importance
Site planning should include features that allow a facility to secure its perimeter so it can strictly control ingress and egress.	Required
Separate staff entry from main entrance. Building design should permit the facility to funnel personnel access to one location sized and equipped to permit effective screening. Adjacent to staff locker rooms that include showers and a washroom.	Required
All facilities must have increased clean storage for emergency stocks of PPE, temperature testing equipment, toilet paper, hand sanitizer, cleaning supplies, etc. within close proximity to each household.	Required

All buildings must provide a minimum of two fibre lines from the main communication room to the building exterior, whether fibre is available in the community at the time or not. A single, building-wide managed Wi-Fi network with separate service set identifiers (SSIDs) for business and resident use with a minimum download speed of 35 Mbps and minimum upload speed of 20 Mbps. All associated infrastructure to support the network in all resident rooms and for virtual care.	Required
<ul> <li>The building will be designed and built to a minimum B3 Occupancy Classification as outlined in the General Building Requirements below. The following two elements are flagged as they are commonly overlooked in rural remote locations:</li> <li>The building shall include infrastructure to support building power requirements; and</li> <li>The building shall include sufficient water supply / pressure for the fire suppression systems.</li> </ul>	Required
The operator of the facility shall make available, at no cost to the resident, an appropriate conventional bed and mattress for supportive living, designated supportive living, or a hospital bed (if prescribed by a health care professional) for long-term care. Other furniture including chair(s), dresser, and night stand, shall also be made available by the operator, at no cost to the resident, if the resident is not able to provide their own furnishings.	Required
	Level of
General Building Requirements	Importance
General Building Requirements The building will be designed and built to a minimum Group B Division 3 (B3) Occupancy Classification as defined in the Alberta Building Code.	
The building will be designed and built to a <b>minimum Group B Division 3 (B3)</b>	Importance
The building will be designed and built to a <b>minimum Group B Division 3 (B3)</b> Occupancy Classification as defined in the Alberta Building Code. The building will be designed to the greatest extent possible using the best practices as identified in the <u>Design Guidelines for Continuing Care Facilities in</u> <u>Alberta (August 2018)</u> . The practices demonstrate efforts to incorporate features that maximize resident privacy, accessibility, personal choice, and resident control	Importance Required
<ul> <li>The building will be designed and built to a minimum Group B Division 3 (B3)</li> <li>Occupancy Classification as defined in the Alberta Building Code.</li> <li>The building will be designed to the greatest extent possible using the best practices as identified in the <i>Design Guidelines for Continuing Care Facilities in Alberta (August 2018)</i>. The practices demonstrate efforts to incorporate features that maximize resident privacy, accessibility, personal choice, and resident control over their environment.</li> <li>The building shall meet the design requirements for specialty populations (when applicable for proposed residents) as per Appendix 1: Special Resident Guidelines, Section 1.1 Residents with Obesity, Section 1.2 Residents with Dementia and Related Needs of the <i>Design Guidelines for Continuing Care</i></li> </ul>	Importance Required Required

One bariatric resident room will be designed for each 50 resident units contained within the Project proposal unless otherwise specified. The design will follow the applicable section within the <u>Design Guidelines for Continuing Care Facilities in</u> <u>Alberta (August 2018)</u> .	Required
Total building gross area shall not be less than 81 m <sup>2</sup> (871 ft <sup>2</sup> ) per resident. (The 81 m <sup>2</sup> (871 ft <sup>2</sup> ) include the 32.5 m <sup>2</sup> (350 ft <sup>2</sup> ) for each resident room.)	Required
Some studio suites to accommodate couples will be required (eight couples' suites per 100 units) unless otherwise specified. This can be accomplished with internal locking doors between some individual rooms.	Required
All public washrooms are built barrier-free.	Required
The expected configuration for offering residential rooms is in resident "households". Individual households have up to a maximum of 14 residents, and in some instances the Applicant may wish to consider smaller configurations (must be in collaboration with Alberta Health Services). A facility may contain a number of households.	Required
Households are clearly defined, possessing features commonly found in a family house (e.g., bedrooms, bathrooms, bathing areas, dining rooms, living / activity rooms, support areas, and storage spaces). Some support functions may be shared between households (e.g., soiled utility room, janitorial closet, personal laundry room).	Required
Long-term care and designated supportive living suites / units have appropriate security features for proposed populations, and allow for adequate line of sight from the nursing stations / charting rooms to the resident suites.	Required
Facility has frequent sight lines to the outdoors, short walking lengths between resident rooms, and easy access to outdoor spaces for residents with and without mobility aids.	Required
Facility can accommodate mobility aids, such as walkers, wheelchairs (manual and power) and scooters, etc. (concerning turning radius, storage and charging spaces).	Required
Floor finishes are non-skid and slip resistant, and easily accommodate wheelchair and walker maneuverability and ongoing cleaning and maintenance. Floors are durable, have low glare, and have zero threshold transitions between differing floor surfaces.	Required
Lighting levels are a minimum of 210 lumens throughout the facility.	Required
Facility includes a wellness area that accommodates space for exercise equipment, tabletop activities, staff workspace, supplies, and barrier-free accessible washroom(s).	Required

Salon Services – sufficient space to accommodate hairdressing chairs, hair wash sink and trap, work and storage counters, secured storage space for chemicals, a hair drying area, a hand wash sink and a ventilation system. Consideration should be given for one (1) station without a chair to accommodate a wheelchair. Foot / toenail care space to accommodate barrier-free foot wash station. Designed in accordance with Alberta's <i>Public Health Act</i> , the <i>Personal Services Regulation</i> and the five related Health Standards and Guidelines.	Required
Large multi-purpose space within the facility for major events, celebrations, worship, etc.	Required
Temperature mixing valves are installed on all faucets that residents access.	Required
Heating, cooling and ventilation systems are operated at a level that maintains a temperature that supports the comfort and safety of residents. Each suite and all common areas used by residents have controls for air temperature.	Required
In an effort to ensure the integration of continuing care facilities into their surrounding communities, it is generally expected that the building size will be limited to a maximum of 150 resident units (this includes both government / AHS funded units and privately funded units). This will ensure the scale of the building fits into the surrounding community. The Project, however, may form part of a campus of care that would include other residential buildings on a conjoining site(s).	Preferred
Secured residential units (e.g., dementia units) will be located on the ground floor or second floor of the facility to maximize access to outdoor space and to facilitate evacuation.	Preferred
Facilities are designed with simple circulation patterns that promote wayfinding, purposeful wandering and exploring. Circulation routes are interesting (incorporate features and finishes that optimize sensory functions) and include places for resting and maneuverability.	Preferred
Space for a gift shop and snack area may be provided, with proper visibility.	Preferred
Mechanically ventilated space is available in the facility to accommodate culturally specific ceremonies, smudging, etc.	Preferred
Outdoor Space	Level of Importance
Convenient access to the outdoors from each resident house on every floor is provided. The space is appropriate to the resident population and in a location that is easily accessible by residents (zero threshold), barrier-free, easily observable by staff, and of sufficient size to accommodate various outdoor resident activities.	Required
Outdoor balconies on upper floors are provided with a barrier of a minimum height of 1.8 m (6 ft). The top of the barrier is designed to prevent residents from climbing over. The barrier will not visually impede the view from the balcony.	Required

Secured outdoor space is available on dementia units.	Required
Resident outdoor area is directly accessible from dining room/activity area.	Preferred
Main Entrance and Reception Area	Level of Importance
There is a passenger drop-off area, in close proximity to the building entry, which offers no incline and provides protection from the elements. The covered entry is large enough to accommodate an ambulance or Handi-Bus, and includes a loading and unloading zone.	Required
The main entrance includes a vestibule. It should be designed to prevent drafts into the seating / reception area.	Required
Automatic wheelchair accessible door openers are utilized for the main entrance, and all entrances have zero thresholds.	Required
In environments that do not allow residents to use power mobility devices (e.g., scooters) within the building, space must be available for residents to park their devices upon returning to the site, and be equipped with sufficient power outlets for charging of multiple devices.	Required
A wheelchair accessible two-piece washroom is located in close proximity to the main entrance.	Required
Main entrance is designed with a recognizable reception point for visitor greeting and for staff to monitor all persons entering and exiting the facility.	Preferred
Controls are provided at the main entrance so that building ingress and egress can be monitored and managed, as necessary.	Preferred
Elevators	Level of Importance
Public elevators are provided in multi-storey living facilities. In multi-storey settings, at least two (2) elevators are required such that service can be maintained in the event one (1) elevator becomes inoperable. Elevator car / cab size must accommodate a stretcher or gurney in a horizontal position and bariatric furniture / equipment.	Required
Elevators that serve areas where resident access is restricted / secured (e.g., SL4D) will integrate a numeric code pad or card lock.	Required

Doors / Entrances / Walls	Level of Importance
The minimum door clearance for all doorways in the facility, including the entrance, common spaces, common bathing room, exercise rooms, dining rooms, etc., must have a minimum clearance (width) of 1117 mm (44 in). All doorways (main, bathroom, bedroom) in resident suites must have a minimum clearance (width) of 1016 mm (40 in). Use of split doors is an option to enable flexibility for staff and also accommodate the resident need for 1117 mm (44 in).	Required
A door access control system must be provided at all doors that exit from the resident areas of the facility.	Required
Corridors	Level of Importance
Corridors in resident households are a minimum of 1.8 m (6 ft) wide, with contiguous handrails on both sides.	Required
Length of corridors should be minimized, and avoid abrupt ends.	Preferred
Use of colours to improve wayfinding and reduce access to non-resident areas should be considered.	Preferred
Workspace for Interdisciplinary Team	Level of Importance
Workspace for Interdisciplinary Team Facility has designated workspace for AHS staff with appropriate storage for records and miscellaneous items.	
Facility has designated workspace for AHS staff with appropriate storage for	Importance
Facility has designated workspace for AHS staff with appropriate storage for records and miscellaneous items.	Importance Required
<ul> <li>Facility has designated workspace for AHS staff with appropriate storage for records and miscellaneous items.</li> <li>AHS staff require internet access, phone, and access to a fax machine.</li> <li>Administrative space for managerial and program staff is provided.</li> </ul>	Importance Required Required
<ul> <li>Facility has designated workspace for AHS staff with appropriate storage for records and miscellaneous items.</li> <li>AHS staff require internet access, phone, and access to a fax machine.</li> <li>Administrative space for managerial and program staff is provided.</li> </ul>	Importance Required Required Required
<ul> <li>Facility has designated workspace for AHS staff with appropriate storage for records and miscellaneous items.</li> <li>AHS staff require internet access, phone, and access to a fax machine.</li> <li>Administrative space for managerial and program staff is provided.</li> <li>A two-piece washroom should be provided strictly for staff use.</li> <li>Designated locker rooms or closets for female and male staff and volunteers</li> </ul>	ImportanceRequiredRequiredRequiredPreferred

Facility has infrastructure to support the connection of an emergency generator capable of backup support for heating plant, kitchen, elevators, fire alarm, lighting, communication systems and medical equipment. Refer to the Alberta Building Code and the Authority Having Jurisdiction to determine if the building requires a generator installed.	Required
Medication Room / Area	Level of Importance
Lockable medication room, with secure internal storage, a hand wash sink, and refrigerator.	Required
Space is available for storage of oxygen.	Preferred
Dining Area and Servery Space	Level of Importance
Resident dining rooms accommodate up to a maximum of 18 residents (14 preferred), including space for the safe storage of resident mobility aids, including walkers and wheelchairs, located in view of the resident seating area.	Required
The minimum space for dining room(s), excluding serveries, in households should be calculated based on 4 m <sup>2</sup> (43 ft <sup>2</sup> ) of floor area per resident.	Required
Each resident dining room has convenient access to a barrier-free accessible two- piece washroom (toilet and sink). There should be no views into the washroom from the seating area of the dining room or the servery.	Required
Resident dining room has a hand-washing sink.	Required
A housekeeping / janitorial closet must be in close proximity to the resident dining room.	Required
The functional space for kitchens / serveries accommodates the equipment and storage needed to support the facility meal service program and any therapeutic diets.	Required
Resident dining room provides a direct view of outdoor space. If this is not possible, the dining room has direct views into other naturally lit spaces to allow for high levels of natural light into the dining room.	Preferred
Residential Household Living Rooms and Activity Space	Level of Importance
There is a living room in each household, with furniture that is cleanable / wipeable, easy to use for residents with decreased mobility, and supports bariatric residents (if applicable).	Required
Storage space for recreational supplies is located in close proximity to living rooms and activity spaces.	Required

Sufficient space within each household to allow for flexibility to provide a wide range of resident activities and allow for resident wheelchair and walker maneuverability.	Preferred
Resident Rooms	Level of Importance
Suites are studios, accommodating one resident, with a minimum of 32.5 m <sup>2</sup> (350 ft <sup>2</sup> ) including an ensuite bathroom. Couples suites can be created with internal locking doors between some individual private suites.	Required
Access door into resident room will have a clear width of 1016 mm (40 inches) and suite doors are lockable, but must be readily releasable and simple for residents and easily accessible for staff to open, if required.	Required
Suite is able to accommodate space for mobility device turning radius of a minimum of 1.5 m (5 ft), a bed area that allows for access on three (3) sides and an unobstructed turning radius of a wheelchair on at least two (2) sides of the bed, with one (1) access being at the foot of the bed.	Required
Kitchenettes are to be provided in all resident rooms. The kitchenette will provide a sink, counter, cupboard, and space for a barrier-free microwave and mini-fridge and an electrical outlet for a toaster and / or kettle. The kitchenette should be well lit and have its own light switch. Provision will be made to disable the kitchenette depending on the resident's level of functioning.	Required
Each suite requires a minimum of one operable window located at a suitable height to provide a direct, uninhibited view of the outside environment from both a sitting and lying in bed position, with an appropriate screen. The lowest edge of window glass should be a maximum of 609 mm (24 in) from floor level. Window cannot open more than 152 mm (6 in) to avoid elopement.	Required
Suite requires an enclosed storage space for resident's personal belongings with a minimum of 1 $m^2$ (10.7 ft <sup>2</sup> ) (with ability to lock).	Required
All suites are designed and constructed to accommodate the use of transfer aids, mobile lifting devices and ceiling lifting devices.	Required
Each suite is equipped to provide access to independent telephone, cable TV and internet services.	Required
Each suite has adjustable controls for air temperature that supports the comfort and safety of residents.	Required
Residents have the ability to personalize suites, for example, memory boxes, furniture, and wall art.	Required
A night light is provided on the wall by the bathroom entrance. A three-way switch is provided for the night light, with one switch at the resident's bed and one at the entrance to the suite for staff use.	Required

Suites do not have balconies.	Required
Room configuration has options for bed location.	Preferred
Each suite has cueing features (e.g., familiar objects / pictures) outside of the suite to assist residents in finding their way and identifying their rooms.	Preferred
Resident Bathroom	Level of Importance
Each suite has an ensuite three-piece bathroom that is accessed from within the suite. Bathroom includes a wheelchair accessible (barrier-free), zero threshold shower, toilet with two-sided access, and a sink.	Required
There is a minimum of a 1.5 m (5 ft) turning radius within the bathroom to allow for wheelchair or walker accessibility and for a caregiver / staff to assist a resident, and appropriate space for door swing or sliding door.	Required
There is no direct view of the shower or the toilet from outside the suite.	Required
In accordance with the <u>Barrier-Free Design Guide 2017</u> , bathroom walls are reinforced to allow for appropriate flip-down and wall-mounted grab bar placement to facilitate resident movement in the general bathroom space (e.g., in and out of the shower, up and down from the toilet).	Required
Bathroom access door shall have a clear width of 1016 mm (40 inches). A double action swing hinged door and privacy hardware is required; the lock must be easily operable and readily releasable by residents and staff. Alternatively, a sliding door can be considered.	Required
Each bathroom has a mirror, located over the sink, which is visible by residents of all heights and those in wheelchairs.	Required
Each bathroom has counter space for the storage of resident items and a wall- mounted soap dispenser and towel bar located at a wheelchair accessible height, with convenient access to the sink.	Required
Temperature mixing valves are installed on all faucets accessed by residents.	Required
Non-skid surfaces on bathroom floor.	Required
Ensuite shower dimensions are at least 1.5 m x 1.5 m (5 ft x 5 ft), with no lip around the perimeter (zero threshold), and are outfitted with appropriately placed and reinforced wall grab bars. The slope of the floor shall support drainage without negative impact on resident mobility.	Required
Shower enclosure equipped with a securely mounted shower bar for an adjustable-height hand-held showerhead.	Required
Shower stall shall not have pre-molded seating or a fold-down seat.	Required

Toilets of standard height (seat height 400 mm - 460 mm (15.78 in - 18.11 in)) (no more than 460 mm (18.11 in) above the floor) shall be available; installed raised toilet seats may also be used. Two-sided access to the toilet must be available, with appropriately installed flip-down grab bars on either side. The distance from centre line of toilet to wall will be a minimum of 750 mm (30 in).	Required
Bathroom has a cabinet for storage of resident's toiletry items with a provision to lock a portion of the storage cabinet.	Preferred
Shower area is distinct from the other fixtures in the bathroom to avoid overspray and significant clean-up times.	Preferred
When open, a bathroom door does not block the entrance into the suite from the corridor and does not swing into another door in the suite. Alternatively, use a sliding door.	Preferred
Resident Assisted Bathing Room	Level of Importance
Each resident requires access to a barrier-free assisted bathing room. If the facility has only one assisted bathing room, it must be designed to full bariatric standards.	Required
The assisted bathing room does not open directly onto a main circulation route.	Required
Each assisted bathing room accommodates a non-jetted bathing tub with unrestricted access on three sides. If a side-entrance bathtub is installed, it must be a quick-filling model. Tub selected must accommodate a lift for use with residents who require lift assistance.	Required
Each assisted bathing room has a barrier-free shower at least $1.5 \text{ m} \times 1.5 \text{ m}$ (5 ft x 5 ft), with no lip around the perimeter (zero threshold), a barrier-free toilet with screening, a stand-alone hand wash sink, dressing area and lockable storage area for supplies.	Required
Assisted bathing rooms have separate air temperature controls to maintain a comfortable level for residents while bathing.	Required
Assisted bathing rooms are equipped with a lift to facilitate the transfer of residents in and out of the tub and on / off the toilet.	Required
Laundry Facilities	Level of Importance
Residents, or their families, have access to laundry facilities to do personal laundry.	Required

Facility Storage Space	Level of Importance
Designated space is available for the storage of supplies and equipment for the care and treatment of residents. Storage space is readily accessible to caregivers and staff, yet does not intrude on the resident's personal space.	Required
There will be storage space for emergency equipment, such as suction machines and defibrillators, located in an area easily accessible within facility.	Required
Mobile lifts should be stored in close proximity to point of use. The storage alcove or room should have electrical outlets for recharging equipment.	Required
Facility contains a lockable clean storage room for supplies, equipment and linen.	Required
Facility must contain a lockable soiled utility room for storage of soiled supplies, equipment (e.g., carts, wheelchairs, mechanical lifts) or waste, and cleaning in alignment with infection prevention and control requirements.	Required
Receiving / Services Space	Level of Importance
The receiving / service space (separate from main entrance) provides year-round access for delivery services.	Required
A separate area for garbage storage and pick-up is provided in the receiving / service space.	Required
Design Review	Level of Importance
I acknowledge that the building design will be reviewed by the Design Review Committee to ensure compliance with the design requirements of this Architectural Design Requirements for Continuing Care Checklist, feedback will be provided, and deficiencies must be addressed.	Required

## Applicant Acknowledgment of Each Requirement in this Checklist

Name of Authorized Official:	
Title of Authorized Official:	
Date:	

## Definitions

- 1. "Alberta Health" means Her Majesty the Queen in Right of Alberta as represented by the Minister of Health.
- 2. "Alberta Health Services" or "AHS" means the regional health authority created pursuant to the *Regional Health Authorities Act* of Alberta.
- 3. **"Applicant**" means a legal entity that submits a grant application in response to the Grant Application Process for which requirements are determined and communicated by Alberta Health.
- 4. "Architectural Design Requirements for Continuing Care Checklist" means a list of building design elements that are requirements for each continuing care capital project funded by this program, and that each Applicant must acknowledge in writing and comply with as a condition for receiving Continuing Care Capital Program capital grant funding, for any project developed that uses such funding.
- 5. **"Authority Having Jurisdiction**" means a governmental entity (federal, provincial, municipal or other entity) incorporated via legislation with authority to approve certain actions, reports, permits, documents, etc. involved in design, planning and construction of a facility, including and particularly, the upholding of fire and life safety standards.
- 6. "Commercial Capacity" means that portion of the facility allocated to retail and office space, which may include community services space. Commercial Capacity and community services spaces are not eligible for Continuing Care Capital Program capital grant funding.
- 7. "**Complementary Capacity**" means that portion of the facility allocated to the Ineligible Units and the common space and service area accompanying their development.
- 8. "Continuing Care" means Alberta's Continuing Care system, which provides Albertans with a range of health, personal care and accommodation services required to support their independence and quality of life. Continuing Care clients are defined by their need for care, not by their age or diagnosis or the length of time they may require service. Continuing Care includes Home Care, Supportive Living, DSL and LTC. The Continuing Care Capital Grant Program only provides funding to support the development of supportive living, DSL and LTC spaces.
- 9. "Core Capacity" means that portion of the Facility allocated to the provision of Eligible Units and the common space and service area accompanying their development.
- 10. "**Design Review Committee**" means the Design Review Committee comprising of representatives from Alberta Health, Alberta Infrastructure and AHS. The Design Review Committee will review the design and provide feedback where the design does not meet the requirements. Capital funding and AHS care funding are contingent on Applicants complying with the Architectural Design Requirements for Continuing Care Checklist.
- 11. "Designated Supportive Living" or "DSL" means licensed Supportive Living settings where AHS controls access to a specific number of spaces according to an agreement between the operator and AHS for the provision of publicly funded Continuing Care health services. Case management, registered nursing and rehabilitation therapy and other services are provided on-site. Accommodation services in DSL must meet the requirements of the <u>Supportive Living</u>

<u>Accommodation Standards</u> and be provided at or below the Established Accommodation Charge. Publicly funded Continuing Care health services must be provided in accordance with the <u>Continuing Care Health Service Standards</u> and any other relevant legislation or standards. DSL settings are a community-based living option where 24-hour on-site (scheduled and unscheduled) personal care and support services are provided by Health Care Aides. In some DSL settings, personal care and support services are provided by 24-hour on-site Licensed Practical Nurses and Health Care Aides.

- 12. "Designated Supportive Living Level 4 Dementia" or "DSL4D" means housing and support for adults with a wide range of health issues including moderate to severe dementia or cognitive impairment. Comprehensive services provided to DSL4D residents include the availability of 24-hour nursing care, purpose-specific safety, security and programming.
- 13. "Eligible Units" means those residential units for Supportive Living, DSL and LTC that meet the requirements specified in this Grant Application Process and for which the Applicant is seeking grant funding; Eligible Units and their accompanying common and service area comprise the Core Capacity of the Facility.
- 14. "Established Accommodation Charge or Rate" means the accommodation charge by an operator to a resident that does not exceed the accommodation charge established from time to time by the Province for a private room, or for a semi-private room if occupied by two people, as defined by the *Nursing Homes Operation Regulation, A.R.* 258/1985, and includes the provision of Service Requirements.
- 15. **"Established Program Criteria**" means the criteria described in Article V of the Grant Application Process.
- 16. **"Evaluation Team**" means the individuals comprising the cross-ministry team selected by Alberta Health to evaluate the Grant Applications. The Evaluation Team may include representatives from Alberta Health, Alberta Infrastructure, Alberta Indigenous Relations and AHS (and when appropriate, Alberta Seniors and Housing and / or Alberta Community and Social Services).
- 17. "Facility" means, collectively, the Core Capacity, the Complementary Capacity and the Commercial Capacity.
- 18. **"Final Building Inspection Report**" means a report prepared by an architect or engineer certifying that the Project is complete.
- 19. "Grant Application", "response" or "submission" means all of the documentation submitted by the Applicant in accordance with the requirements and conditions set out within the Grant Application Process.
- 20. "Grant Application Process" means this Grant Application Process for the Continuing Care Capital Program Capital Grant Application Process and any updates made thereto.
- 21. "Higher Levels of Care" means, collectively, the equivalent care to that currently provided to residents assessed as requiring DSL4, DSL4D or LTC and for any specialty capacity in these streams.

- 22. **"Home Care**" means a service to help an individual or their loved one remain safe and independent as long as possible. Home care includes professional and personal care services; for examples see <u>https://www.albertahealthservices.ca/assets/info/seniors/if-sen-home-care-brochure.pdf.</u>
- 23. **"Ineligible Units**" means those residential units developed in addition to the Eligible Units as part of the proposed facility, for which no grant funding is provided. Ineligible Units and the common space and service area accompanying their development make up the Complementary Capacity of the facility. Ineligible Units not subject to an operating agreement with AHS or not supported by an Indigenous needs assessment will not be considered for Capital Grant funding. The Applicant is responsible for setting the accommodation charges as well as the placement of residents in these Ineligible Units.
- 24. "Long-Term Care" or "LTC" means the units in the Core Capacity, which meet the standards, conditions and requirements of both Alberta Health and AHS equivalent to a nursing home. A LTC facility is a purpose-built congregate care option for individuals with complex, unpredictable medical needs who require 24-hour on-site Registered Nurse assessment and / or care. In addition, professional services may be provided by Licensed Practical Nurses and therapists while 24-hour on-site unscheduled and scheduled personal care and support is provided by Health Care Aides. Case management, registered nursing, rehabilitation therapy and other services are provided on-site. LTC facilities include nursing homes under the *Nursing Homes Act* and auxiliary hospitals under the *Hospitals Act*. Accommodation services in LTC must meet the requirements of the *Long-Term Care Accommodation Standards* and be provided at or below the Established Accommodation Charge. Publicly funded Continuing Care health services must be provided in accordance with the *Continuing Care Health Service Standards* and any other relevant legislation or standards.
- 25. **"Mandatory Requirements**" means the evaluation criteria that must be satisfied for an application to be considered successful.
- 26. **"Master Services Agreement**" or "**MSA**" means an operating agreement to be entered into between AHS and the facility operator for the provision of publicly funded health care services in the facility.
- 27. "Needs Assessment" is a collaboration between AHS and an Indigenous group / organization to determine the appropriate number of beds, service mix, staffing requirements, and location of any proposed facility. The conclusion of this collaboration, yielding meaningful and informative capacity assessment information, represents a validated Needs Assessment. Needs Assessment validation is intended to be a collaborative process that engages community leadership to ensure current and future community capacity needs can be met.
- 28. "Occupancy Permit" means the written permission granted by the Authority Having Jurisdiction allowing the approved Project to be occupied after construction, alteration, or a change in the nature of the occupancy of the building.
- 29. "**Project**" means the proposed design, planning, acquisition, construction, installation and commissioning of the proposed Core Capacity.
- 30. "Recipient" means approved grant Applicant.
- 31. **"Service Requirements**" mean the services required to be provided to residents and clients as described in the applicable section of the Grant Application Process.

32. **"Supportive Living**" means licensed facilities (under the <u>Supportive Living Accommodation</u> <u>Licensing Act</u>) where services are delivered in a home-like setting for four or more adults needing some support but without multiple complex or unscheduled health needs. Supportive Living includes a variety of facilities such as lodges, seniors' residences, group homes and DSL. It promotes resident's independence and aging in place through the provision of services such as 24-hour monitoring, emergency response, security, meals, housekeeping, and life-enrichment activities. Building features include private space and a safe, secure and barrier-free environment. Publicly-funded personal care and health services are provided to Supportive Living residents based on their assessed unmet needs. Individuals living in Supportive Living may receive publicly-funded Continuing Care health services through Home Care in accordance with the <u>Continuing Care Health Service Standards</u> and any other relevant legislation or standards. Individuals may also obtain privately funded services.