

# Alberta Health

## Accommodation Standards and Licensing

---

### Information Guide

### Long-term Care Section 7-10 Only

(see <http://www.health.alberta.ca/services/continuing-care-forms.htm> for the entire Guide)

Compliance and Monitoring

October 2015



# Accommodation Standards and Licensing Information Guide

This guide provides explanations and resources related to Alberta's *Supportive Living Accommodation Licensing Act*, Supportive Living Accommodation Licensing Regulation and Long-term Care Accommodation Standards.

## **Revision 5: October 2015**

For further information about accommodation standards, contact:

Compliance and Monitoring Branch  
Alberta Health  
10025 Jasper Avenue NW  
PO Box 1360 Stn. Main  
Edmonton, Alberta T5J 2N3

Phone 780-644-8428 (310-0000 Toll free)  
Fax 780-644-8729

This document is also located on-line at:

<http://www.health.alberta.ca/services/continuing-care-forms.html>

Full versions of the *Supportive Living Accommodation Licensing Act* and the Supportive Living Accommodation Licensing Regulation can be accessed from Queen's Printer on-line at:

[www.qp.alberta.ca](http://www.qp.alberta.ca)

## About the Table of Contents

Page numbers provided are in the format of Section Number – Standard number (if applicable) – page number. When looking within the document, section numbers are found at the top of the page (header) and standard and page numbers are found on the bottom of the page (footer). If viewing on-line CTRL-clicking on any table of contents topic will bring you to that page.

### Example: 2-16

Alberta Health  
Accommodation Standards and Licensing Information Guide  
Revision 5  
Section 2

**Collection, Use and Disclosure of Information**

**Intent**  
To outline the authority and limitations of an investigator or inspector to collect, use or disclose any personal information within the operator's possession reasonably considered necessary to complete an inspection or investigation.

**16 (1) An investigator or an inspector**

- (a) may collect and use personal information for the purposes of conducting an investigation or an inspection, and
- (b) shall not disclose any personal information collected under this section except as provided in this section.

**(2) An investigator or an inspector may use or disclose personal information**

- (a) if the use or disclosure is necessary for the purposes of section 7 or 12, including making an application to the Court under section 7(6), or
- (b) if the disclosure is authorized or required under the Freedom of Information and Protection of Privacy Act or another enactment.

An inspector or investigator has the authority to collect, use and disseminate information to determine compliance to the Act, Regulation and standards and to take necessary enforcement action. This recognizes that balancing access to information and protection of privacy is critical to the success of the licensing and compliance processes.

© 2010-2015 Government of Alberta  
A2016

The first number refers to the Section of the Information Guide located at the top of each page.

The second number refers to the subsection number or where there is no subsection the page number.

The third number refers to the page number in each subsection.

### Example: 4-12-1

Alberta Health  
Accommodation Standards and Licensing Information Guide  
Revision 4  
Section 4

**Standard 12- Social or Leisure Activities**

**Intent**  
To identify expectations regarding the determination, communication and delivery of social and leisure activities. Social and leisure activities promote healthy lifestyles and resident's enjoyment of their home and community. Operators who provide social and leisure services must ensure that the activities are appropriate and reflect the preferences of the residents by providing opportunity for residents to give input and feedback. Those persons providing the social and leisure opportunities must be knowledgeable and qualified to proficiently provide those services to the demographics that they are serving.

**Definitions**

- Periodically: the opinions of residents may be solicited on a regular or intermittent schedule. The special circumstances of the accommodation may require opinions to be collected regularly (e.g. surveys, meetings), when there is a significant change in the population or needs of the residents, or when there is a change in the capacity of the accommodation, such as changes in the services level provision or budget.
- Appropriate Manner: the communication method used in the accommodation needs to be appropriate to the needs and abilities of the population served. Verbal communication alone may not be considered sufficient if the resident is able to benefit from written communication. Likewise, only written communication would not be effective in a setting in which the residents were unable to read.

**12(1) Where an operator provides social or leisure activities for residents, the operator shall:**

- a) provide activities that address the needs and preferences of the residents,
- b) periodically solicit and consider the opinions of residents in planning and providing social or leisure activities, and
- c) respond to resident's opinions and comments regarding social or leisure activities.

© 2010-2015 Government of Alberta  
Standard 12  
7

## Table of Contents

<b><i>Accommodation Standards and Licensing Information Guide</i></b> _____	<b>1-1</b>
<b>About this Guide</b> _____	<b>1-5</b>
<b>Questions and Concerns</b> _____	<b>1-5</b>
<b>A Note on Terminology</b> _____	<b>1-6</b>
<b>Updates</b> _____	<b>1-7</b>
<b><i>Long-term Care Introduction</i></b> _____	<b>8-1</b>
<b>Definitions</b> _____	<b>8-2</b>
<b>Applicability</b> _____	<b>8-2</b>
<b>Purpose</b> _____	<b>8-2</b>
<b>Procedure</b> _____	<b>8-3</b>
<b>Certificate Required</b> _____	<b>8-3</b>
<b>Initial Certificate Application Process</b> _____	<b>8-4</b>
<b>Change in Contact Persons</b> _____	<b>8-4</b>
<b>Certificates Issued</b> _____	<b>8-5</b>
<b>Public Reporting</b> _____	<b>8-7</b>
<b>Renewal of a Certificate</b> _____	<b>8-7</b>
<b>Monitoring Visits</b> _____	<b>8-8</b>
<b>Concern Resolution Process</b> _____	<b>8-8</b>
<b>Complaints</b> _____	<b>8-9</b>
<b>Investigations</b> _____	<b>8-9</b>
<b>Standards</b> _____	<b>8-9</b>
<b>Comparison to Supportive Living Accommodation Standards</b> _____	<b>8-10</b>
<b>Review Date</b> _____	<b>8-10</b>
<b>Coming into Force</b> _____	<b>8-10</b>
<b><i>Long-term Care Accommodation Standards</i></b> _____	<b>9-1</b>
<b>How to Use this Section</b> _____	<b>9-2</b>
<b>Standard 1: Building Code Requirements</b> _____	<b>9-1-1</b>
<b>Standard 2: Safety Requirements</b> _____	<b>9-2-1</b>
<b>Standard 3: Maintenance Requirements</b> _____	<b>9-3-1</b>
<b>Standard 4: Environmental Requirements</b> _____	<b>9-4-1</b>
<b>Standard 5: Personalizing Spaces</b> _____	<b>9-5-1</b>
<b>Standard 6: Window Coverings</b> _____	<b>9-6-1</b>

---

<b>Standard 7: Bedding</b>	<b>9-7-1</b>
<b>Standard 8: Personal Laundry Services</b>	<b>9-8-1</b>
<b>Standard 9: Personal Choice Services</b>	<b>9-9-1</b>
<b>Standard 10: Insurance</b>	<b>9-10-1</b>
<b>Standard 11: Contracted Services</b>	<b>9-11-1</b>
<b>Standard 12: Social or Leisure Activities</b>	<b>9-12-1</b>
<b>Standard 13: Nutritional Requirements</b>	<b>9-13-1</b>
<b>Standard 14: Menu Requirements</b>	<b>9-14-1</b>
<b>Standard 15: Cleaning Requirements</b>	<b>9-15-1</b>
<b>Standard 16: Continuation of Services</b>	<b>9-16-1</b>
<b>Standard 17: Prevention of Abuse</b>	<b>9-17-1</b>
<b>Standard 18: Resident Safety and Security</b>	<b>9-18-1</b>
<b>Standard 19: Trust Accounts</b>	<b>9-19-1</b>
<b>Standard 20: Corporate Status</b>	<b>9-20-1</b>
<b>Standard 21: Water Temperature</b>	<b>9-21-1</b>
<b>Standard 22: General Information</b>	<b>9-22-1</b>
<b>Standard 23: Information Respecting the Long-term Care Accommodation</b>	<b>9-23-1</b>
<b>Standard 24: Concerns and Complaints</b>	<b>9-24-1</b>
<b>Standard 25: Certificate Posted</b>	<b>9-25-1</b>
<b>Standard 26: Criminal Record Checks</b>	<b>9-26-1</b>
<b>Standard 27: Privacy and Personal Information</b>	<b>9-27-1</b>
<b>Standard 28: Safety and Security</b>	<b>9-28-1</b>
<b>Standard 29: Job Descriptions</b>	<b>9-29-1</b>
<b>Standard 30: Residents' Personal Affairs</b>	<b>9-30-1</b>
<b><i>Long-term Care Resources</i></b>	<b><i>10-1</i></b>
<b><i>Forms</i></b>	<b><i>7-1</i></b>
<b>Reportable Incidents</b>	<b>7-1</b>

## About this Guide

This information guide is intended for operators of supportive living and long-term care accommodations and staff employed by the Ministry of Health who license supportive living accommodations and monitor long-term care accommodations. The information contained within will provide explanation and rationales on the *Supportive Living Accommodation Licensing Act* and Regulation, as well as information to assist both supportive living and long-term care operators to comply with provincial accommodation standards.

## Questions and Concerns

Any questions or concerns about the standards or information contained in this guide can be directed to [asal@gov.ab.ca](mailto:asal@gov.ab.ca)

## A Note on Terminology

The **Act** refers to the *Supportive Living Accommodation Licensing Act* unless otherwise specified.

The **Regulation** refers to the Supportive Living Accommodation Licensing Regulation.

The **Standards** refers to Schedule 1 of the Supportive Living Accommodation Licensing Regulation.

The **Ministry** refers to Alberta Health.

**Accommodation** refers to buildings or units in buildings where accommodation related services (cleaning, maintenance, food services, etc.) are offered or provided to the residents. Examples of accommodations may include, but are not limited to: supportive living accommodations, long-term care accommodations and auxiliary hospitals.

**Resident** refers to the individual that resides in an accommodation.

**Employee** refers to employees of an operator who provide accommodation services, but does not include health care professionals.

**Operator** refers to the person responsible for the operation of the accommodation.

**Policy** refers to an overall written plan, principle or guideline used in an accommodation.

## Updates

The Accommodation Standards and Licensing Information Guide is available on-line at <http://www.health.alberta.ca/services/continuing-care-forms.html>.

The contents of this guide are revised and updated as additional information and resources are collected. Updates will also be provided on-line and e-mails will be sent to operators when updates are available.

## Record of Information Guide Amendments

Amendment No.	Dated (M/D/Y)	Pages to be replaced	Entered by	Date
Revision 1	04/01/10	3-6, 9, 41, 43, 49, 51, 97-147, 166-195		
Revision 2	05/14/10	3-6, 9, 78, 109, 116, 117, 137, 160, 161, 169-174, 194-324		
Revision 3	04/01/11	All – copies provided by ASCS (1 per accommodation)		
Revision 4	03/28/13	All pages affected by style update Content changed as per Version Tracking #4		
Revision 5	10/05/15	Content changed as per Version Tracking #5		





# Long-term Care Introduction

In this section information is provided on the authority and process used by Alberta Health to monitor long-term care accommodations to the Long-term Care Accommodation Standards.

## In This Section

Definitions	2
Applicability	2
Purpose	2
Procedure	3
Certificate Required	3
Initial Certificate Application Process	4
Change in Contact Persons	4
Certificate Issued	5
Multiple Year Certificate Criteria	6
Certificates with Conditions	7
Public Reporting	7
Renewal of a Certificate	7
Monitoring Visits	8
Concern Resolution Process	8
Complaints	9
Investigations	9
Standards	9
Comparison to Supportive Living Accommodation Standards	10
Review Date	10
Coming into Force	10

## Definitions

Definitions are provided for terminology that is utilized in this section of the Information Guide.

- Certificate:** a certificate issued by Alberta Health which identifies the long-term care accommodations status of compliance with the long-term care accommodation standards.
- Director:** the director of the Continuing Care Standards and Licensing Unit.
- Legal representative:** a guardian or surrogate decision-maker of a resident pursuant to a court order.
- Long-term care accommodation:** a “nursing home” under the *Nursing Homes Act* is defined as a facility for the provision of nursing home care; or an “auxiliary hospital” under the *Hospitals Act* is defined as a hospital for the treatment of a long-term care or chronic illnesses, diseases or infirmities.
- Minister:** the Minister of Alberta Health.
- Ministry:** Alberta Health
- Operator:** a person who operates a long-term care accommodation.

## Applicability

The Long-term Care Accommodation Standards apply to all long-term care accommodations in Alberta. The governing legislation for the accommodation standards is the Nursing Homes General Regulation, section 4(2)(b).

## Purpose

The purpose of the long-term care accommodation standards is:

- to verify that operators of long-term care accommodations meet minimum standards to ensure the safety and well-being of the individuals living in the accommodation and
- to provide public assurance of the quality of long-term care accommodations.

## Procedure

Long-term care accommodations are monitored to their compliance with the Long-term Care Accommodation Standards. Certificates are issued by the Compliance and Monitoring Branch after a monitoring visit has occurred. Certificates indicate if the accommodation is in full compliance or if there are any non-compliances to be rectified within a specified time period.

Results of monitoring visits completed at long-term care accommodations are forwarded to Alberta Health Services. Alberta Health Services may be requested to assist the operator in achieving compliance to the Long-term Care Accommodation Standards.

## Certificate Required

An operator must have certificate for each location at which the operator provides long-term care accommodations.

If there are conditions on a certificate the operator must comply with these conditions of the certificate.

As required in standard 25 an operator must post the certificate in a prominent place in the long-term care accommodation to which it pertains.

A certificate is not transferable. If there is a change in the operator, the location or there is a substantial change in operations the accommodation, the operator will need to notify the Compliance and Monitoring Branch.

The certificate indicates that the operator is either in full compliance to the accommodation standards or not in full compliance by identifying the non-compliant standards. It is easily recognizable and provides assurances to the residents, family members, general public, stakeholders, funders and other organizations that the minimum standard of accommodation and accommodation- related services have been met.

## Initial Certificate Application Process

Operators that have obtained a contract with Alberta Health Services for the provision of long-term care services must obtain a certificate for each accommodation where this service is provided. A long-term care certificate application form is available on-line at:

<https://cfr.forms.gov.ab.ca/form/SCF0005.pdf>

It is the responsibility of the operator to collect the required documentation for submission. The following documentation is required:

- Application form,
- Confirmation of current general liability insurance coverage,
- A copy of the most recent environmental health report,
- A copy of safety code approval for a new or renovated long term care accommodation,
- A copy of zoning approval.

At any time during the application process, an operator may request a consultation by a Licensing Inspector, to review the monitoring process and the accommodation standards.

Upon receipt of all collateral documentation, an initial monitoring visit will be scheduled, where all accommodation standards will be reviewed. During the initial visit, operators are expected to demonstrate through the readiness of the environment, staffing, supplies and written documentation that the accommodation is immediately suitable for residency.

## Change in Contact Persons

Any changes to operator or accommodation contacts should be communicated to the Compliance and Monitoring Branch as soon as the change occurs. Contact information is utilized to schedule inspections, investigations, follow up on incident reports and send application and public reporting notifications.

## Certificates Issued

The duration of an accommodation's certificate is determined at the discretion of the director based upon the outcome of monitoring visits and investigations.

New accommodations:

- New accommodations that are compliant or non-compliant to the accommodation standards may be issued a certificate for up to a six month period.
- New accommodations that have been fully compliant to the accommodation standards for six months and have received no confirmed complaints in that six month period are eligible for a certificate of up to one year.
- New accommodations that have not been fully compliant to the accommodation standards for six months or have received confirmed complaints in that six month period are eligible for a certificate of up to six months.

After the completion of the first year of certification and previously monitored accommodations:

- Accommodations that have been fully compliant to the accommodation standards for less than one year, or have received confirmed complaints are eligible for a certificate of up to a one year period only.
- Accommodations that have been fully compliant to the accommodation standards and have received no confirmed complaints for one year are eligible for a certificate of up to a two year period.
- Accommodations that have been fully compliant to the accommodation standards and have received no confirmed complaints for three years (1 year + 2 year certificate or 3 year certificate) are eligible for a certificate of up to a three year period.

The duration of the certificate does not dictate the time between monitoring visits. Operators can expect periodic announced or unannounced monitoring visits throughout their certificate period. At a minimum a mini-monitor will occur annually to review compliance with standards related to the safety and security of residents.

## Multiple Year Certificate Criteria

Examples for determining how multiple year certificate duration criteria will be applied (not applicable for new accommodations):

Accommodation A receives annual monitoring visits in April of each year. It is fully compliant at each of the monitoring visits and has no confirmed complaints. It is eligible for multi-year certification. Upon completion of a three year certificate, operators that continue to meet the compliance requirements are eligible for ongoing 3 year certificates.

Monitor Type	Monitoring Date	Non-Compliances	Confirmed Complaints	Certificate Type	Certificate Expiry
Full	April 2010	No	No	Full	April 30, 2011
Full	April 2011	No	No	Full	April 30, 2013
Mini	April 2012	No	No	N/A	N/A
Full	April 2013	No	No	Full	April 30, 2016
Mini	April 2014	No	No	N/A	N/A
Mini	April 2015	No	No	N/A	N/A
Full	April 2016	No	No	Full	April 30, 2019

Accommodation B receives annual monitoring visits in May. It was not fully compliant in the first year of monitoring, but became fully compliant in the second year of monitoring. Note that eligibility for multi-year certification is affected for one year only.

Monitor Type	Monitoring Date	Non-Compliances	Confirmed Complaints	Certificate Type	Certificate Expiry
Full	May 2010	Yes	No	Conditional	Negotiated Date
Full	May 2011	No	No	Full	May 31, 2012
Full	May 2012	No	No	Full	May 31, 2014
Mini	May 2013	No	No	N/A	N/A
Full	May 2014	No	No	Full	May 31, 2017

Accommodation C receives annual monitoring visits in June. It was fully complaint in the first and second year of monitoring, but later was found to be non-complaint. Note that once Accommodation C is found to be non-compliant a mini-monitor will become a full monitor. Upon certificate expiry Accommodation C is returned to a one-year certificate term as they no longer meet the eligibility criteria for multi-year certification.

Monitor Type	Monitoring Date	Non-Compliances	Confirmed Complaints	Certificate Type	Certificate Expiry
Full	June 2010	No	No	Full	June 30, 2011
Full	June 2011	No	No	Full	June 30, 2013
Mini -> Full	June 2012	Yes	No	N/A	N/A
Follow-up visit to occur as necessary to rectify non-compliances.					
Full	June 2013	No	No	Full	June 30, 2014

## Certificates with Conditions

Certificates with conditions may be issued to accommodations that do not meet certain accommodation standards while the conditions are being rectified. In situations in which the operator is unable or unwilling to comply, the residents are at risk, or the conditions of a certificate are not being addressed by the operator Alberta Health will work in conjunction with Alberta Health Services to determine the appropriate action to ensure compliance and resident safety.

## Public Reporting

The status of an accommodation's certificate is posted on the Alberta Health Public Reporting website located at <http://standardsandlicensing.alberta.ca/>.

The public reporting system displays all visits completed at an accommodation and all non-compliances issued, in progress and rectified during those visits completed since April 1, 2013.

All visit types are reported on the public reporting website including annual inspection visits, complaint investigations, follow up visits and consultations. Any non-compliance issued to the accommodation will be posted, regardless of the duration of time to rectify the non-compliance. Non-compliance information will include both the date the non-compliance was issued and the date that it was rectified, or the planned date of completion if it is still in progress.

The public reporting system is updated continuously throughout the day, however, information on visits completed and non-compliances issued and rectified may not be displayed for up to three business days.

## Renewal of a Certificate

Approximately four to six weeks prior to the long-term care accommodation's certificate expiry date a Licensing Inspector will contact the long-term care accommodation operator to schedule a monitoring visit.



## Monitoring Visits

An inspector may, with the permission of the operator of a long-term care accommodation,

- At any reasonable hour enter the long-term care accommodation and inspect that long-term care accommodation;
- Require the production of any books, records or other documents in respect of the long-term care accommodation;
- Interview the operator of the long-term care accommodation with respect to matters relevant to the inspection.
- An inspector may enter the long-term care accommodation of a particular resident only with the permission of that resident or that resident's legal representative.
- An inspector may interview employees and residents of the long-term care accommodation, relatives of residents, legal representatives of residents and any other person who may have information relevant to the monitor or investigation.

## Concern Resolution Process

Operators concerned with a decision of a Licensing Inspector in regards to the issuance of a non-compliance to the accommodation standards as a result of a monitoring visit or investigation may bring their concern to the attention of the Director.

To commence the concerns resolution process the operator must provide in writing within 10 working days of the non-compliance being issued the following information:

- The specific issue or non-compliance being disputed.
- The evidence that was presented to the Licensing Inspector to demonstrate compliance.
- The grounds on which operator believes the non-compliance or findings of an investigation to be inaccurate.

Upon receipt of this information, the Director will delegate the Manager, Licensing Services and the Licensing Supervisor to review the decision utilizing the provided information. Their recommendation will be reviewed by the Director, who may confirm, vary or rescind the decision that has been received.

The Director will provide the operator with the results of the decision and the reasons for the decision in writing within 30 days of the receipt of the concern. The Director's decision is final.

## Complaints

Concerned individuals are encouraged to follow the documented concerns or complaints resolution process of the long-term care accommodation. Where complaints are related to a non-compliance to the Long-term Care Accommodation Standards, the concerned individuals have the option of directing complaints to the Complaints Officer of the Compliance and Monitoring Branch.

The Complaints Officer may refer the complaint to investigation, refer the complaint to another authority, or refuse to refer the complaint if it is deemed to be resolved, frivolous or vexatious.

## Investigations

All complaints that have been referred for investigation will be investigated by a Licensing Inspector. Investigation visits may occur on an announced or an unannounced basis, as per the discretion of the investigator and the Complaints Officer. Entering the long-term care accommodation and investigating an allegation of non-compliance identifies the validity of the complaint. This ensures that operators are maintaining compliance to the standards throughout their certification period. Results of the investigation are shared with the operator at the time of the investigation.

## Standards

The standards identify the requirements that long-term care operators must comply with when operating a long-term care accommodations. These standards are outlined in Section 9 of this Information Guide.

## Comparison to Supportive Living Accommodation Standards

There are 30 Long-Term Care Accommodation Standards compared to 32 Supportive Living Accommodation Standards. The differences are:

- Four additional standards for long-term care accommodations.
  - Personal laundry services are required in long-term care as opposed to optional in supportive living.
  - Posting *Certificates of Compliance* is a requirement in the *Supportive Living Accommodation Licensing Act*.
  - Insurance is a requirement in the *Supportive Living Accommodation Licensing Regulation*.
  - Corporate Status is a requirement in the *Supportive Living Accommodation Licensing Regulation*.
- Six supportive living accommodation standards are not relevant for long-term care accommodations:
  - Assessment (in long-term care this is the responsibility of centralized intake not the operator).
  - Reassessment (in long-term care this is the responsibility of centralized intake not the operator).
  - Risk management (in long-term care this is the responsibility of centralized intake not the operator).
  - Medication assistance and reminders (in long-term care this is the responsibility of Alberta Health Services and monitored under the Continuing Care Health Service Standards).
  - Laundry services for resident-supplied bedding and towels is not applicable in long-term care as bedding is required to be supplied by operators.
  - Safeguarding of personal possessions was removed as this duplicates a requirement under the *Nursing Home Operational Regulation*.

## Review Date

To ensure the Standards are reviewed for ongoing relevancy, a review date has been established for March 31, 2017.

## Coming into Force

These Long-term Care Accommodation Standards will come into force on April 1, 2010.

# Long-term Care Accommodation Standards

In this section the Long-term Care Accommodation Standards are explained with additional information to guide in the adherence to the standards.

## In This Section

Standards – Each standard is broken down and numbered consecutively from 1. Standard and page numbers are found in the bottom right hand corner of each page.

**Standard 1:** Building Code Requirements

**Standard 2:** Safety Requirements

**Standard 3:** Maintenance Requirements

**Standard 4:** Environmental Requirements

**Standard 5:** Personalizing Spaces

**Standard 6:** Window Coverings

**Standard 7:** Bedding

**Standard 8:** Personal Laundry Services

**Standard 9:** Personal Choice Services

**Standard 10:** Insurance

**Standard 11:** Contracted Services

**Standard 12:** Social or Leisure Activities

**Standard 13:** Nutritional Requirements

**Standard 14:** Menu Requirements

**Standard 15:** Cleaning Requirements

**Standard 16:** Continuation of Services

**Standard 17:** Prevention of Abuse

**Standard 18:** Resident Safety and Security

**Standard 19:** Trust Accounts

**Standard 20:** Corporate Status

**Standard 21:** Water Temperature

**Standard 22:** General Information

**Standard 23:** Information Respecting the Long-term Care Accommodation

**Standard 24:** Concerns and Complaints

**Standard 25:** Certificate Posted

**Standard 26:** Criminal Record Checks

**Standard 27:** Privacy and Personal Information

**Standard 28:** Safety and Security

**Standard 29:** Job Descriptions

**Standard 30:** Residents' Personal Affairs

## How to Use this Section

Each standard of the Long-term Care Accommodation Standards includes an intent statement to provide additional information regarding the rationale behind the creation of the standard, definitions to provide additional information as to the usage of some words or phrases within the section, as well as the standard itself.

Each standard is then explained within the categories of ‘Methods of Compliance’ and ‘Evidence of Compliance’. Some standards are best explained by breaking them into separate topics. For example, ‘maintenance requirements’ includes a section on preventative maintenance and corrective maintenance (see example below). Evidence from each of the sections is necessary to be compliant to the standard.

<i>3(2) An operator shall develop, maintain and implement a scheduled preventative maintenance and repair program to inspect the condition of the long-term care accommodation, the building that houses it and its equipment and operator-owned furnishings and ensure that repairs, service and, where applicable, replacements are provided as needed.</i>	
<b>Preventative Maintenance</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Preventative maintenance program for the building, the accommodation, its equipment, and any operator-owned furnishings is in a paper based format.	<input type="checkbox"/> Documentation demonstrating a regularly scheduled preventative maintenance program is implemented. This information may be found in logbook(s), checklist(s), calendar(s), filing system(s), bring forward system(s) or other preventative maintenance program(s).
<b>Corrective Maintenance</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Repairs, service and replacement of buildings, equipment and operator-owned furnishings is completed using a requisition process.	<input type="checkbox"/> Conversations with residents and employees regarding timely completion of repairs and replacements. <input type="checkbox"/> Documentation demonstrating that repairs and replacements occur as needed. This information may be found in communication book(s), email(s), form(s), computerized request(s) or other requisition format.

In some cases the standard or a section of a standard may not be applicable to an accommodation. This may occur where the operator does not provide that optional service (e.g. personal choice services) or where there have been no changes made to the accommodation (e.g. building code requirements).

For each section one or more possible methods and evidence types are provided. The methods and evidence types are not meant to be exhaustive, but rather to give the range of methods of compliance that are currently utilized by long-term care accommodation operators. The method and evidence chosen by an operator will need to suit the population and level of service provided.

Example of format to follow on next page:

Only one method of compliance is necessary, but some sites may offer multiple levels of service, so they may fall into more than one method.

Laundry Services or Facilities	
Methods of Compliance (possible, but not limited to):	Evidence of Compliance (possible, but not limited to):
Residents are informed about the internal laundry service.	<input type="checkbox"/> <u>Conversations</u> with residents regarding the internal laundry service provided. <input type="checkbox"/> <u>Observation</u> of the internal laundry service. <input type="checkbox"/> <u>Documentation</u> provided may include handbook(s), orientation material(s), laundry schedule(s) or other resident notice(s).
Residents are informed about the external laundry service.	<input type="checkbox"/> Conversations with residents regarding the external laundry service. <input type="checkbox"/> Documentation provided may include handbook(s), orientation material(s), laundry schedule(s) or other resident notice(s).
Residents are informed about the laundry facilities available on site.	<input type="checkbox"/> Conversations with residents regarding the laundry facilities. <input type="checkbox"/> Observation of the laundry facilities. <input type="checkbox"/> Documentation provided may include handbook(s), orientation material(s), laundry schedule(s) or other resident notice(s).

The evidence provided must coincide with the method chosen. There are a variety of ways in which to provide the evidence, all possible ways are not required. Combinations of or singular evidence types may be sufficient for compliance.

## Definitions

- **Conversations:** informal conversations may occur between the Licensing Inspector and residents, their representatives, employees, volunteers, service providers or the operator.
- **Observation:** the Licensing Inspector will tour the accommodation and its grounds to observe the services in place, the upkeep of the accommodation, grounds, equipment and furnishings, and the implementation of processes. Resident rooms will be observed with resident/representative permission only.
- **Documentation:** the Licensing Inspector will review relevant documentation to determine the operator’s processes and verify implementation. Where documentation is noted it must be completed consistently and as per the accommodations specified process.

The population served, type and size of long-term care accommodations varies and as such the determination of an accommodation’s compliance with the standards is completed at the discretion of the Compliance and Monitoring Branch.



## Standard 1: Building Code Requirements

### Intent

To verify that when changes are made to a long-term care accommodation or the population changed therein, the long-term care accommodation is compliant with the Alberta Building Code.

### Definitions

- **Structural changes:** any additions or major renovations to the accommodation or within the accommodation in which a building permit is required. Examples include basement developments, deck building, building additions, interior restructuring or the movement of walls.
- **Change of use:** any change to the use of the accommodation or resident population that is served where a development permit is required. Examples include additions of a dementia care unit, changes in use of common areas or changes in residents' ability to self evacuate due to changes in their abilities or changes in the accommodation (e.g. addition of a security or emergency call system).

**1(1)** Any changes that are made to the physical structure of a building that houses a long-term care accommodation or to the long-term care accommodation itself must meet the requirements of the Alberta Building Code.

<b>Structural Changes</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Where structural changes have been made to the accommodation there is evidence of the building continuing to meet the Alberta Building Code.	<ul style="list-style-type: none"> <li>□ Documentation provided may include a building permit or an occupancy approval.</li> </ul>

**1(2)** Where changes are made in the use of, or to the population residing in, a building that houses a long-term care accommodation, the building must continue to meet the requirements of the Alberta Building Code.

<b>Population Changes</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Where the use of the building or the population residing in the accommodation has changed there is evidence of the building continuing to meet the Alberta Building Code.	<ul style="list-style-type: none"> <li>□ Documentation provided may include a development permit or occupancy approval.</li> </ul>





## Standard 2: Safety Requirements

### Intent

To verify that the operator maintains the long-term care accommodation in a condition that is safe and hazard free. Ensuring the long-term care accommodation, building and grounds remain in good condition allows residents to fully utilize the accommodation and grounds safely.

### Definition

- **Grounds maintenance – all seasons:** the timely completion of ice and snow removal, standing ground water removal in quick melt conditions, lawn, garden and pond maintenance, where applicable.

**2** An operator must ensure that the building that houses the long-term care accommodation, the long-term care accommodation itself and its grounds or common areas are in a safe condition and maintained so as to remain free of hazards.

<b>Safe Condition</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
<p>The building, the long-term care accommodation, and the grounds are safe and hazard free. Essential repairs are completed within appropriate timeframes. Hallways, stairways, exits and ramps are well lit, and kept clear of objects that could cause falls or obstruct passage. Hazardous materials (chemicals, sharps, construction materials) are safely stored.</p> <p><i>See also Maintenance Requirements, as maintenance is a component of ensuring a safe environment.</i></p>	<ul style="list-style-type: none"> <li>□ Observation of interior and exterior of the building, the long-term care accommodation and the grounds.</li> <li>□ Documentation demonstrating that the building, the long-term care accommodation and the grounds are maintained in a safe condition. This information may be found in contracts, job descriptions, duty lists or checklists.</li> </ul>

<b>Grounds Maintenance ~ All Seasons</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Outside grounds maintenance is completed by maintenance or other employees.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, their representatives or employees regarding grounds maintenance.</li> <li><input type="checkbox"/> Observation of well maintained grounds.</li> <li><input type="checkbox"/> Documentation demonstrating that grounds maintenance is completed. This information may be found in job descriptions, duty lists or checklists.</li> </ul>
Outside grounds maintenance is completed by contract or by an external service provider.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, their representatives or employees regarding grounds maintenance.</li> <li><input type="checkbox"/> Observation of well maintained grounds.</li> <li><input type="checkbox"/> Documentation demonstrating that grounds maintenance is completed. This information may be found in contracts, service agreements, quotes or fee schedules.</li> </ul>

## Standard 3: Maintenance Requirements

### Intent

To verify that the operator takes steps to minimize preventable deterioration of buildings, accommodations, grounds, equipment and operator-owned furnishings. Preventative and corrective maintenance programs reduce the occurrence and severity of situations which can compromise resident safety and disrupt the delivery of services.

### Definitions

- **Preventative maintenance:** The care and servicing of buildings, accommodations, equipment and operator-owned furnishings for the purpose of ensuring satisfactory operating condition by providing for systematic inspection, detection and correction of incipient failures either before they occur or before they develop into major defects.
- **Corrective maintenance:** the maintenance which is required when an item or structure has failed or deteriorated, to bring it back to working order.
- **Equipment:** includes all equipment or machinery used in the accommodation, the building or the surrounding grounds. Equipment may include heating equipment, emergency power systems, air conditioning equipment, make-up air equipment, domestic hot water heating equipment, ceiling lifts, accessibility equipment, elevators, kitchen and laundry equipment, plumbing and drainage equipment, and grounds maintenance equipment.
- **Operator-owned furnishings:** includes all furnishings provided by the operator in common areas, outdoor areas or for use in resident rooms.

**3(1)** An operator must ensure that the building that houses the long-term care accommodation, the long-term care accommodation itself and any equipment and operator-owned furnishings are well maintained and in good working order.

<b>Well Maintained</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
<p>The building, the long-term care accommodation, equipment and operator-owned furnishings are well maintained. Necessary repairs are completed within appropriate timeframes.</p> <p><i>See also 3(2).</i></p>	<ul style="list-style-type: none"> <li>□ Observation of the building, the long-term care accommodation itself, equipment and operator-owned furnishings.</li> <li>□ Documentation provided may include contracts, job descriptions, duty lists or checklists.</li> </ul>

**3(2)** An operator shall develop, maintain and implement a scheduled preventative maintenance and repair program to inspect the condition of the long-term care accommodation, the building that houses it and its equipment and operator-owned furnishings and ensure that repairs, service and, where applicable, replacements are provided as needed.

<b>Preventative Maintenance</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Preventative maintenance program for the building, the accommodation, its equipment, and any operator-owned furnishings is in a paper based format.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation demonstrating a regularly scheduled preventative maintenance program is implemented. This information may be found in logbooks, checklists, calendars, filing systems, bring forward systems, external equipment inspection reports or other preventative maintenance programs.</li> </ul>
Preventative maintenance program for the building, the accommodation, its equipment, and any operator-owned furnishings is in a computer based format.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Observation of the preventative maintenance computerized program.</li> <li><input type="checkbox"/> Documentation demonstrating a regularly scheduled preventative maintenance program is implemented. This information may be found in computer printouts, reports, or other paper based or electronic logging.</li> </ul>

<b>Corrective Maintenance</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Repairs, service and replacement of buildings, accommodations, equipment and operator-owned furnishings is completed using a requisition process.	<ul style="list-style-type: none"> <li>□ Conversations with residents, their representatives and employees regarding timely completion of repairs and replacements.</li> <li>□ Documentation demonstrating that repairs and replacements occur as needed. This information may be found in communication books, emails, forms or computerized requests.</li> </ul>
Repairs, service and replacement of buildings, accommodations, equipment and operator-owned furnishings is completed using external service providers.	<ul style="list-style-type: none"> <li>□ Conversations with residents, their representatives and employees regarding timely completion of repairs and replacements.</li> <li>□ Documentation demonstrating that repairs and replacements occur as needed. This information may be found in receipts or invoices.</li> </ul>



## Standard 4: Environmental Requirements

### Intent

To verify that the temperature and ventilation system in a long-term care accommodation supports the safety and comfort of those who live there. Where a comfortable temperature level for the majority of residents is not compatible with the safety needs of a particular resident, measures are taken or mechanisms are put in place to ensure the safety of the resident while still promoting the comfort of all residents.

### Definitions

- **Comfort of the majority of the residents:** resident's comfort with the temperatures is not only a result of the physical temperature of the accommodation but may also be achieved by taking additional steps, such as the introduction of additional fans or heaters to the environment, adjustment of the clothing worn by the residents or the activation of a contingency plan.
- **Reasonable temperature:** other legislation exists that provide additional temperature requirements for accommodations.
  - Under the *Public Health Act*, the Institutions Regulation states: "Every room in an institution or a day care facility shall be maintained at a minimum temperature of 20 degrees Celsius unless otherwise specified." (AR 143/81 s10)
  - The Alberta Building Code states "Except as permitted by Sentence (1), heating facilities capable of maintaining an indoor air temperature of 22°C at the outside winter design temperature shall be provided a) for all sleeping rooms in a care, treatment or detention occupancy, or b) in a building used for residential occupancy intended for use in the winter months on a continuing basis" (*Alberta Building Code* 2014, Section 6.2.1.14)



- 4 In a long-term care accommodation where residents are unable to adjust the temperature in their rooms and in the common areas of any long-term care accommodation, the operator shall ensure that heating, cooling and ventilation systems are operated at a level that maintains a temperature that supports the safety of all residents and the comfort of the majority of the residents.

<b>Temperature</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Residents have free access to the thermostat for the accommodation and the temperature is maintained at a level in which the majority of residents are comfortable.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their ability to change the temperature and their overall comfort level in the accommodation.</li> <li><input type="checkbox"/> Observation of the free access to the thermostat.</li> <li><input type="checkbox"/> Documentation demonstrating that residents are aware that they can adjust the temperature. This information may be found in resident handbooks, memos, posters or resident meeting minutes.</li> </ul>
Residents may not have free access to the thermostats, but the temperature of the accommodation is determined by the majority of resident preferences.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversation with residents regarding their overall comfort level in the accommodation.</li> <li><input type="checkbox"/> Observation of the temperature of the accommodation.</li> <li><input type="checkbox"/> Documentation demonstrating that consultation with residents occurred to determine the appropriate temperature range. This information may be found in meeting minutes, surveys or questionnaires.</li> </ul>

<b>Temperature (Continued)</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
<p>Residents may not have free access to the thermostats, but the temperature of the accommodation is maintained at a reasonable setting and the majority of residents express satisfaction or appear comfortable with the temperature.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their overall comfort level in the accommodation.</li> <li><input type="checkbox"/> Conversations with employees regarding how they ensure residents are comfortable with the temperature.</li> <li><input type="checkbox"/> Observation of the temperature of the accommodation.</li> <li><input type="checkbox"/> Documentation demonstrating the monitoring of temperatures of the accommodation. This information may be found in log books, preventative maintenance forms or recordings.</li> </ul>



## Standard 5: Personalizing Spaces

### Intent

To verify that the operator supports the personalization of resident rooms. The residents' personal space is where residents spend a good deal of time and where some of their most private activities take place. It is important that residents are comfortable in their personal space and that operators support residents in creating a space that is familiar and reflects their individuality.

### Definition

- **Personalization of resident rooms:** this may include adding in personal effects such as pictures, bedding and wall décor or bringing in pieces of furniture.

**5** An operator shall ensure that each resident of a long-term care accommodation has the opportunity to personalize the resident's room.

<b>Personalization</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Personalization of resident rooms is evident.	<ul style="list-style-type: none"> <li>□ Conversations with residents or their representatives regarding the opportunity to personalize their room.</li> <li>□ Observation of the personalization of resident's rooms.</li> </ul>
Residents are notified of the ability to personalize their rooms within specified parameters, if any. The level of personalization is dependent on resident needs, choice and preferences.	<ul style="list-style-type: none"> <li>□ Conversations with residents or their representatives regarding the opportunity to personalize their room.</li> <li>□ Observation of the personalization of resident's rooms.</li> <li>□ Documentation demonstrating that the resident is notified of their ability to personalize their room. This information may be found in meeting minutes, questionnaires, handbooks, residential services agreements or orientation checklists.</li> </ul>

<b>Personalization (Continued)</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Resident(s) have limitations on their ability to personalize their rooms due to documented resident needs or behaviours.	<ul style="list-style-type: none"><li>□ Observation of the personalization of resident's rooms to the extent possible.</li><li>□ Documentation demonstrating the extent of the limitations on the resident's personalization of their room. This information may be found in meeting minutes, managed risk agreements, assessments or care plans.</li></ul>

## Standard 6: Window Coverings

### Intent

Comfort and privacy are supported by the provision of window coverings. Operators are responsible for providing residents with window coverings in resident rooms and in common areas where appropriate. Appropriate window coverings promote resident comfort by protecting the privacy of the resident, contributing to a home-like atmosphere and also by helping residents control the amount of light entering their personal spaces.

### Definition

- **Appropriate window coverings:** coverings that fit the window, are appropriate for the intended usage, are functional, clean and in good condition.

6 An operator of a long-term care accommodation shall ensure that appropriate window coverings are provided in the long-term care accommodation as necessary for the comfort and privacy of the residents, including in each resident's room.

Window Coverings	
Methods of Compliance (possible, but not limited to):	Evidence of Compliance (possible, but not limited to):
Window coverings on each window in the accommodation as necessary for resident's privacy and comfort are evident.	□ Observation of the window coverings.



## Standard 7: Bedding

### Intent

To verify that operators provide clean bedding, towels and linen in the quantity and frequency to meet the needs of the residents. It is important that bedding, towels or other linens are changed on a regularly scheduled basis that takes into consideration resident's needs, preferences and hygienic concerns.

### Definitions

- **Bedding:** any linen, comforter, blanket, or other bed covering provided by the operator to the resident for their personal use.
- **Towels:** any bath towel, hand towel and face cloth provided by the operator.
- **Other linens:** includes tablecloths and napkins.

7(1) The operator provides bedding, towels or other linens for the use of residents and shall ensure that they are clean, fresh, dry and in good condition and changed at least weekly to ensure a clean living environment for each resident.

Quality	
Methods of Compliance (possible, but not limited to):	Evidence of Compliance (possible, but not limited to):
Clean, fresh and dry bedding and towels in good condition are evident.	<ul style="list-style-type: none"> <li>□ Conversations with residents or representatives regarding the quality of bedding, towels and other linen.</li> <li>□ Observation of bedding and towels in good condition that are stored or covered in such a way to ensure that they remain clean, fresh and dry.</li> </ul>

Weekly Scheduled Changes	
Methods of Compliance (possible, but not limited to):	Evidence of Compliance (possible, but not limited to):
Operator provided bedding, towels and other linens are changed on an at least weekly basis.	<ul style="list-style-type: none"> <li>□ Conversations with residents or representatives regarding the weekly bedding, towels and other linen changes.</li> <li>□ Observation of implementation of bedding and towel change schedules.</li> <li>□ Documentation provided may include bedding and towel change schedules, cleaning schedules, checklists, duty lists, bath schedules, handbooks, resident notices or orientation materials.</li> </ul>



7(2) When the operator provides bedding and towels for residents, the operator shall do so in keeping with the particular needs of each resident.

<b>Quantity</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Sufficient quantities of bedding and towels are evident.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with employees regarding sufficient quantities of bedding and towels.</li> <li><input type="checkbox"/> Observation of sufficient quantities of bedding and towels.</li> </ul>
The operator has contracts with external sources for bedding and towel provision.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation provided may include order forms, invoices, or bedding and towel tallies.</li> </ul>

<b>As Needed Changes</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Written procedures showing that operator provided bedding, towels and other linens are provided and changed “as needed”.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, their representatives or employees regarding the “as needed” change of bedding, towels and other linens.</li> <li><input type="checkbox"/> Documentation demonstrating that the operator engages in the “as needed” change of bedding, towels and other linens. This information may be found in policies and procedures, duty lists, bedding and towel tallies, resident handbooks, service agreements, fee schedules, log books, linen change schedules or bed carbolization tracking sheets.</li> </ul>
Operator provided bedding, towels and other linens are changed “as needed” based on documented resident need.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, their representatives or employees regarding “as needed” changes of bedding, towels and other linens.</li> <li><input type="checkbox"/> Observation of bedding, towel or other linen changes.</li> <li><input type="checkbox"/> Documentation of the needs of the residents for bedding, towel and other linen changes. This information may be found in care plans, duty lists, logs or job descriptions.</li> </ul>

## Standard 8: Personal Laundry Services

### Intent

To verify that the operator ensures personal laundry services or facilities are available for residents and their representatives or service providers. It is important that residents, their representatives or their service providers have a means to launder their personal items and garments. Where laundry equipment is provided for residents, their representatives or service providers to do their own laundry, laundry equipment is maintained in good working order and the space provided is appropriate for the intended use.

### Definition

- **Personal laundry service:** residents' personal garments, and any bedding, linens or towel that residents have supplied for their own personal use.

- 8(1)** The operator shall ensure either
- a) that personal laundry services are provided, or
  - b) that personal laundry facilities are made available for residents' personal laundry to be done on-site.

<b>Laundry Services or Facilities</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
An internal personal laundry service is provided.	<ul style="list-style-type: none"> <li>□ Conversations with residents regarding the laundry service provided.</li> <li>□ Observation of the internal laundry service.</li> <li>□ Documentation provided may include handbooks, laundry schedules or residential service agreements.</li> </ul>
Laundry facilities are available on site for residents' personal laundry to be done by the residents, their representatives or their service providers.	<ul style="list-style-type: none"> <li>□ Conversations with residents or their representatives regarding the laundry facilities.</li> <li>□ Observation of the laundry facilities.</li> <li>□ Documentation provided may include handbooks, laundry schedules or residential service agreements.</li> </ul>
An external personal laundry service is provided.	<ul style="list-style-type: none"> <li>□ Conversations with residents regarding the external laundry service.</li> <li>□ Documentation provided may include handbooks, laundry schedules or residential service agreements.</li> </ul>

**8(2)** Where the operator provides laundry equipment for the personal use of residents, their representatives or their service providers, the operator shall ensure that the equipment and the laundry area are appropriate, clean and in good repair.

<b>Laundry Areas and Equipment</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Resident laundry areas and equipment are appropriate for their intended use, clean and maintained in good repair.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents or their representatives regarding the laundry area and equipment.</li> <li><input type="checkbox"/> Observation of the appropriateness and cleanliness of laundry areas.</li> <li><input type="checkbox"/> Documentation provided may include cleaning schedules, duty lists, invoices or maintenance records.</li> </ul>

## Standard 9: Personal Choice Services

### Intent

To verify that where optional services are available they are provided by qualified persons in an appropriate space. Personal choice services can enhance the quality of life of residents and provide convenient access for residents to meet their personal needs.

### Definition

- **Appropriate space:** A location away from food service and dining areas that includes the necessary equipment for the personal choice service and whereby all hazards (equipment or materials) can be appropriately secured. The space provided should also safely and comfortably accommodate those residents using the space.

**9(1)** In this section, “personal choice services” include optional services that may be provided or offered to residents of a long-term care accommodation such as hairdressing, barbering, manicures, pedicures, massages and facials.

#### Personal Choice Services

Personal choice services relate to the provision of a range of optional services that may be or are acquired at resident’s own expense.

Please note that footcare is not considered a pedicure, as footcare is provided by a health professional.

In this section, personal choice services exclude those professions covered under the *Health Professions Act* (e.g. Denturists, Dental Hygienists, Hearing Aid Practitioners, Occupational Therapists, Optometrists, Podiatrists, Registered Dietitians, Speech Pathologists, Registered Nurse, Licensed Practical Nurse, etc.) . Please refer to these acts and regulations if you require further information on these service providers’ requirements.

**9(2)** Where an operator provides or offers personal choice services, the operator shall ensure that the personal choice services

- a) are offered or provided based on the needs and preferences of the residents,
- b) are provided in a space that is appropriate for the purpose, and
- c) are provided by a person who holds the required licence or other certification, if any, for the provision of those personal choice services.

<b>Resident's Needs and Preferences</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Pre-existing personal choice services continue to be utilized by residents.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents or their representatives regarding the personal choice services.</li> <li><input type="checkbox"/> Observation of the utilization of the personal choice services.</li> <li><input type="checkbox"/> Documentation provided may include schedules, booking information, appointment books, surveys, resident meeting minutes or other resident comments.</li> </ul>
Residents' needs and preferences are considered when coordinating new personal choice services.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with employees regarding the coordination of personal choice services.</li> <li><input type="checkbox"/> Documentation provided may include resumes, care plans, surveys, meeting minutes or other resident comments.</li> </ul>

<b>Personal Choice Service Areas</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Space utilized by the personal choice service is appropriate for the intended purpose.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, employees or service providers regarding the personal choice areas.</li> <li><input type="checkbox"/> Observation of areas utilized for personal choice services.</li> </ul>

<b>Qualifications of Personnel</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Personal choice services are provided by a qualified employee, volunteer or contractor.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation demonstrating that the individual is qualified to perform the service. This information may be found in trades certificates, diplomas, registration certificates to a professional association or letters of good standing.</li> </ul>

## Standard 10: Insurance

### Intent

To ensure that all long-term care accommodations hold sufficient insurance to mitigate risk and to ensure the continuation of the accommodation and services to residents.

### Note

- General liability insurance of at least \$2,000,000 per occurrence is required for all long-term care accommodations. General liability insurance protects the operator’s business against third party legal liability related to personal injury, bodily harm or property damage.
- Crime insurance is required in all settings in which the operator holds monies or personal property on behalf of a resident. Crime coverage protects an organization from financial losses of their own and when they are in custody of other people’s property. The coverage can be for embezzlement, theft of client’s property or other financial crimes against the organization.

**10(1)** Without limiting any other liability to which an operator may be subject, an operator must insure the long-term care accommodation under a contract of general liability insurance in accordance with the Insurance Act and in an amount of not less than \$2 000 000 per occurrence in respect of the following:

- a) bodily harm;
- b) personal injury;
- c) property damage, including loss of use of the property.

**(2)** Where an operator operates a long-term care accommodation at more than one location, the requirements of subsection (1) apply in respect of each location separately.

**(3)** If an operator holds money or personal property of a resident that has monetary value, the operator must obtain a comprehensive crime insurance policy in an amount covering the operator’s potential liability for loss resulting from theft, fraud and other similar offences, whether committed by employees of the operator or by other persons.

**(4)** An operator must provide a detailed certificate of insurance to the director annually and at any other time when requested by the director to do so.

<b>Insurance</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Evidence of current insurance for liability and crime insurance (if applicable) is provided.	<ul style="list-style-type: none"> <li>□ Documentation provided on-site may include certificates of insurance or insurance policies.</li> </ul>



## Standard 11: Contracted Services

### Intent

The intent of this standard is to ensure the safety and security of residents by ensuring that all persons providing additional services under contract are qualified, insured, licensed, adhere to all relevant legislation and protect the personal information of residents.

### Definitions

- **Services:** any accommodation related service occurring on-site, such as personal choice services, hospitality services, maintenance services, safety and security services.
- **Site-specific:** a contract for a service at a specific location identified in the contract by accommodation name or address.

### Note

- This standard is applicable only to contracts generated by the operator.

**11** Where an operator contracts for services to be provided in a long-term care accommodation, the contract must include, at a minimum,

- a) the nature and scope of the service to be provided,
- b) who will provide the service,
- c) that person's qualifications to provide the service, if applicable,
- d) a requirement that the contractor carry any required insurance, and
- e) a provision that addresses the handling of personal information about the residents of the long-term care accommodation.

<b>Contracts</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Where there are site-specific contracts to deliver services, those contracts include all points specified in the standard.	<ul style="list-style-type: none"> <li>□ Documentation provided may be current contracts or other service provider agreements.</li> </ul>





## Standard 12: Social or Leisure Activities

### Intent

To identify expectations regarding the determination, communication and delivery of social and leisure activities. Social and leisure activities promote healthy lifestyles and residents' enjoyment of their home and community. Operators who provide social and leisure activities must ensure that the activities are appropriate and reflect the preferences of the residents by providing opportunity for residents to give input and feedback. Those persons providing the social and leisure opportunities must be knowledgeable and qualified to proficiently provide these services to the population that they are serving.

### Definitions

- **Periodically:** the opinions of residents may be solicited on a regular or intermittent schedule. The special circumstances of the accommodation may require opinions to be collected regularly (ie. surveys, meetings), when there is a significant change in the population or needs of the residents, or when there is a change in the capacity of the accommodation, such as changes in the service level provision or budget.
- **Appropriate manner:** the communication method used in the accommodation needs to be appropriate to the needs and abilities of the population served. Verbal communication alone may not be considered sufficient if the resident is able to benefit from written communication. Likewise, only written communication would not be effective in a setting in which the residents were unable to read.

**12(1)** Where an operator provides social or leisure activities for residents, the operator shall

- a) provide activities that address the needs and preferences of the residents,
- b) periodically solicit and consider the opinions of residents in planning and providing social or leisure activities, and
- c) respond to resident's opinions and comments regarding social or leisure activities.

<b>Resident's Needs and Preferences</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Social and leisure activities match the resident needs and preferences (collected in 12(1)(b)).	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation pertaining to 12(1)(b). <b>and</b></li> <li><input type="checkbox"/> Documentation of the activities provided for the residents. This information may be found in calendars, posters, care plans, log books, sign-up sheets or newsletters.</li> </ul>
Social and leisure activity programs are evaluated to ensure that they meet the needs and preferences of residents.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation provided may include attendance records, evaluation programs, meeting minutes, sign-up sheets or reports.</li> </ul>
Individualized social and leisure programs catered to each resident.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents or their representatives regarding the social and leisure activities.</li> <li><input type="checkbox"/> Documentation of the social and leisure activities. This information may be found in care plans, goal sheets, schedules, leisure interest forms or calendars.</li> </ul>

<b>Resident Opinion</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Meetings are utilized to collect resident opinions.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their awareness of feedback methods.</li> <li><input type="checkbox"/> Documentation provided may include meeting minutes or meeting agendas.</li> </ul>
Surveys, feedback cards, or suggestion boxes are utilized to collect resident opinions.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their awareness of feedback methods.</li> <li><input type="checkbox"/> Observation of the availability of feedback forms (if on an ongoing basis).</li> <li><input type="checkbox"/> Documentation demonstrating that the opinions of residents are collected. This information may be found in completed surveys, result tallies or completed comment forms.</li> </ul>

<b>Response to Resident Opinions</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Resident activities are adjusted in response to the opinions collected.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding the changes in social and leisure activities.</li> <li><input type="checkbox"/> Documentation demonstrating that the collected resident opinions are utilized. This information may be found in calendars, posters, notices, care plans or newsletters.</li> </ul>
Residents are informed of the results of surveys, resident meetings, suggestions, or other opinions received and the planned action.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding the communication of the results and/or planned action of the operator to the feedback received.</li> <li><input type="checkbox"/> Documentation demonstrating that results of resident opinions collected are communicated to residents. This information may be found in meeting minutes, newsletters, memos, announcements or notices.</li> </ul>

**12(2)** An operator shall ensure that information about social or leisure activities is communicated to residents in an appropriate manner.

<b>Communicating Activities</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Residents are notified of the social and leisure activities through postings.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their awareness of the communication method chosen by the operator.</li> <li><input type="checkbox"/> Observation of the postings on whiteboards, bulletin boards or in other resident or common areas.</li> </ul>
Residents receive copies of activity schedules or may be able to access the information on pre-recorded messages or through other technological media.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their awareness of the communication method chosen by the operator.</li> <li><input type="checkbox"/> Observation of the communication material or method.</li> <li><input type="checkbox"/> Documentation demonstrating that all residents are aware and are able to utilize the method of communication. This information may be found in questionnaires, newsletters or suggestion box responses.</li> </ul>

**12(3)** An operator shall ensure that employees or service providers who are required to plan, develop, coordinate and deliver social or leisure activities have the necessary education and knowledge to do so in a way that meets the needs of the residents.

<b>Qualifications of Personnel</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Job descriptions and qualifications for social and leisure personnel match the needs of the residents.	<ul style="list-style-type: none"> <li>□ Documentation demonstrating that the needs of the residents (based on the job description) and the qualifications of the social and leisure personnel match. This information may be found in job descriptions, certificates, resumes or other verification of qualifications.</li> </ul>
Contracts with or procurement of service providers for social and leisure activities.	<ul style="list-style-type: none"> <li>□ Documentation demonstrating that the needs of the residents are met by the utilization of a contracted service provider. This information may be found in contracts, service agreements or invoices.</li> </ul>



## Standard 13: Nutritional Requirements

### Intent

To verify that menus address the needs of residents, offer quality and respect the input of residents. Foods are to be safe, palatable, appealing and served in sufficient quantities to allow residents to receive adequate nutrition and enjoyment from their meals. Communicating the menus and meal times in a manner appropriate for the residents allows them to plan their day and have time to communicate any concerns or make any alternate arrangements that they feel are necessary.

### Definitions

- **Meals, fluids and snacks:** includes all foods made available to residents by the operator and includes choice, substituted items and special diet items (e.g. texture-modified, diabetic, vegetarian, celiac, low sodium, etc.).
- **Appropriate manner:** the communication method used in the accommodation needs to be appropriate to the needs and abilities of the population served. Verbal communication may not be considered sufficient if the resident is able to benefit from written communication. Likewise, only written communication would not be sufficient in a setting where the residents were unable to read. Additionally, depending on the needs of the residents, it may be beneficial for the accommodation to provide the menus and meal times to residents right before the meal, the same day, several days in advance or a week in advance.

- 13(1)** An operator of a long-term care accommodation who provides residents with a meal, fluids and a snack daily shall ensure that
- a) the meals, fluids and snacks are
    - (i) palatable, safe and pleasingly presented, and
    - (ii) provided in sufficient quantities to ensure adequate hydration and that the residents' nutritional needs are met,and
  - c) the menu and times at which the meals, fluids and snacks will be served are communicated to each resident in an appropriate manner.



<b>Quality and Quantity</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The majority of residents feel that meals are nutritious, tasteful, safe, pleasingly presented and served in sufficient quantities.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents or representatives regarding meal presentation, taste, quantity and quality.</li> <li><input type="checkbox"/> Observation of meal service.</li> </ul>
Where resident conversations are not possible, the operator can demonstrate that meals are nutritious, tasteful, safe, pleasingly presented and served in sufficient quantities.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversation with resident representatives or employees regarding meal presentation, taste, quantity and quality.</li> <li><input type="checkbox"/> Observation of meal service.</li> <li><input type="checkbox"/> Documentation provided may be policies and procedures, surveys, dietitian assessments, food services evaluations or food samplings.</li> </ul>

<b>Communicating Meals and Times</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Residents are notified of meals and meal times by posted information.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their awareness of the meals, meal times and the communication method chosen by the operator.</li> <li><input type="checkbox"/> Observation of the postings on whiteboards, bulletin boards or in other resident or common areas.</li> </ul>
Residents receive copies of menus and meal time schedules or they may be able to access the information on pre-recorded messages or through other technological media.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding the communication method chosen by the operator.</li> <li><input type="checkbox"/> Observation of the communication material or method.</li> <li><input type="checkbox"/> Documentation demonstrating that all residents are aware and are able to utilize the method of communication. This information may be found in questionnaires, newsletters, handbooks, assessments or service agreements.</li> </ul>

## Standard 14: Menu Requirements

### Intent

To verify that menus which consider residents input offer variety, choice and are provided on a schedule agreeable to the residents. A menu that incorporates choice, seasonal variety and residents' needs and preferences provides residents opportunities to have input and control over their meals and the feeling of a home-like environment. When substitutions are made to the menu they must be of similar nutritional value to ensure that the integrity of the original menu is preserved. Communicating the substitutions made to the residents meals allows them to plan their day and make any alternate arrangements that they feel necessary. Meal times are determined in collaboration with or in consideration of the residents to ensure that meals are served at times suitable to the needs and/or preferences of the majority of the residents. This provides residents with more opportunity to personalize their service.

### Definitions

- **Food group:** choice and substitutions must be provided within one of the Canada Food Guide recognized four food groups (Vegetables and Fruit, Grain Products, Meat and Alternatives, Milk and Alternatives).
- **Extended meal times:** a flexible window of time where meals are available over an hour or more to allow for residents to choose the meal time that fits into their daily schedule.
- **Menu Substitutions:** any alteration of the accommodation's pre-planned menus to another food item. This does not include individual changes made for a specific resident preference.

- 14(1)** The operator of a long-term care accommodation shall ensure that the menu provided for residents
- a) offers variety and seasonal variation,
  - b) provides residents with a choice from within one food group at every meal, and
  - c) as far as is reasonably practicable, recognizes residents' food preferences, religious practices and cultural customs in the planning, preparation and service of meals.

<b>Menu Variety</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
One cyclical menu with substitutions made throughout the year to allow for variety and seasonal variation.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation of the seasonal substitutions may be found in substitution records, or special event meal records.</li> </ul>
Seasonal or a variety of cyclical menus are used to provide residents with variety and seasonal variation.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation may be found in seasonal menu variations (e.g. Spring/Summer and Fall/Winter).</li> </ul>

<b>Menu Choice</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator provides choice items at the request of residents. These choice items are catered to the preferences of the resident.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their ability to receive a choice item on request.</li> <li><input type="checkbox"/> Observation of the request for a choice item.</li> <li><input type="checkbox"/> Documentation demonstrating that the residents are aware of their ability to request choice items. This information may be found in handbooks, menus, orientation checklists, notice boards or memos.</li> </ul>
The operator provides a choice in one or more food groups at each meal service as specified by the menu.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their awareness of the choice available at each meal.</li> <li><input type="checkbox"/> Observation of meal service.</li> <li><input type="checkbox"/> Documentation demonstrating that the choice is available and communicated to residents. This information may be found in handbooks, menu boards or menus.</li> </ul>
The operator provides a selection of choice items that are always available (e.g. a la carte menus or other lists of available items).	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their awareness of the choice available at each meal.</li> <li><input type="checkbox"/> Observation of the choices available.</li> <li><input type="checkbox"/> Documentation demonstrating that the always available choices are communicated and available to residents. This information may be found in handbooks, menus, orientation checklists, notice boards or memos.</li> </ul>
The operator provides a choice in all food groups or provides a restaurant style menu at every meal service.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Observation of meal service.</li> <li><input type="checkbox"/> Documentation demonstrating that the choice is available and communicated to residents at each meal. This information may be found in handbooks, menu boards or menus.</li> </ul>

<b>Resident's Needs and Preferences</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Residents or their representatives express that meals served meet their food preferences, religious practices and cultural customs.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents or their representatives regarding the meals served.</li> </ul>
Meals served match the resident food preferences, religious practices and cultural customs determined at admission.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents or their representatives regarding how the meals served match their food preferences.</li> <li><input type="checkbox"/> Documentation of the resident's food preferences, religious practices and cultural customs. This information may be found in care plans, goal sheets, likes/dislikes listings or food interest surveys.</li> </ul>
Meals served reflect the resident food preferences, religious practices and cultural customs (collected in 14(3)).	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation pertaining to 14(3). <b>and</b></li> <li><input type="checkbox"/> Documentation of the menu items. This information may be found in menus, special event postings or substitution lists.</li> </ul>

**14(2)** Where substitutions must be made respecting items on a menu, those substitutions must be

- a) from within the same food groups and provide similar nutritional value as the original menu items, and
- b) communicated to the residents.

<b>Menu Substitutions</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Menu substitutions are recorded on the cyclical menu (e.g. Items are crossed out and the substitution written in so that both items are legible).	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation demonstrating that substitutions to the menu are recorded. This information may be found on meal planning calendars or menus.</li> </ul>
Menu substitutions are recorded on a separate document from the menu. The substitutions reference the date or cyclical menu date to ensure that substitutions can be compared to the original item.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation demonstrating that substitutions to the menu are recorded. This information may be found in communication books, log sheets, substitutions sheets or special notices.</li> </ul>

<b>Communicating Substitutions</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Residents are notified of meals and any substitutions by posted information.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their awareness of the meals, meal substitutions and the communication method chosen by the accommodation.</li> <li><input type="checkbox"/> Observation of the postings on whiteboards, bulletin boards, or in other resident or common areas.</li> </ul>
Residents receive copies of menus and meal substitutions or may be able to access the information on pre-recorded messages or through other technological media.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their awareness of the communication method chosen by the operator.</li> <li><input type="checkbox"/> Observation of the communication material or method.</li> <li><input type="checkbox"/> Documentation demonstrating that all residents are aware and are able to utilize the method of communication. This information may be found in questionnaires, newsletters, handbooks, assessments or service agreements.</li> </ul>

**14(3)** An operator shall ensure that residents' opinions and feedback regarding meals, fluids and snacks are collected at least yearly and considered in the development of the menu.

<b>Resident Opinions and Feedback</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Meetings are utilized to collect resident feedback.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their awareness of feedback methods.</li> <li><input type="checkbox"/> Conversations with employees regarding the consideration of resident feedback.</li> <li><input type="checkbox"/> Documentation demonstrating that the feedback is collected. This information may be found in meeting minutes.</li> </ul> <p style="text-align: center;"><b>and</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation demonstrating that the feedback is considered. This information may be found in menus, special event meal records or meeting minutes.</li> </ul>
Surveys, feedback cards, or suggestion boxes are utilized to collect resident feedback.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their awareness of feedback methods.</li> <li><input type="checkbox"/> Conversations with employees regarding the consideration of resident feedback.</li> <li><input type="checkbox"/> Observation of availability of feedback forms (if on an ongoing basis).</li> <li><input type="checkbox"/> Documentation demonstrating that the feedback is collected. This information may be found in completed surveys, result tallies or comment forms.</li> </ul> <p style="text-align: center;"><b>and</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation demonstrating that the collected feedback is considered. This information may be found in menus, special event meal records, meeting minutes or newsletters.</li> </ul>

**14(4)** An operator shall ensure that residents are consulted on a periodic basis respecting the times of the day at which meals, fluids and snacks are to be provided or made available to them and shall respond to the residents' comments or concerns.

<b>Meal Times</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Collaboration with residents on meal times occurs at resident council meetings, through surveys or other discussion methods.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation demonstrating the collaboration with residents on the meal times. This information may be found in completed surveys, result summaries or meeting minutes.</li> </ul>
Meal service occurs at more than one seating or through extended meal times (window of time) for each meal. Snacks and fluids are readily available for residents to access.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding meal, fluid and snack times.</li> <li><input type="checkbox"/> Observation of a meal service.</li> <li><input type="checkbox"/> Documentation demonstrating how operators make residents aware of the flexible meal time options. This information may be found in meal time postings, orientation checklists or client handbooks.</li> </ul>



<b>Response to Opinions and Feedback</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Resident meal, fluid and snack times are adjusted in response to the feedback collected.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding the changes in meal, fluid and snack times.</li> <li><input type="checkbox"/> Documentation demonstrating that the collected feedback is utilized. This information may be found in calendars, posters, notices, care plans, log books, newsletters or communications with menu provider.</li> </ul>
Residents are informed of the results of surveys, resident meetings, suggestions, or other feedback received and the planned action.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding the communication of the results and/or planned action of the operator to the feedback received.</li> <li><input type="checkbox"/> Documentation demonstrating that results of feedback collected is communicated to residents. This information may be found in meeting minutes, newsletters, memos, announcements, notices or communications with menu provider.</li> </ul>

## Standard 15: Cleaning Requirements

### Intent

To verify that the long-term care accommodation is cleaned as necessary while respecting residents' preferences. Regular cleaning schedules following clear and thorough procedures support the comfort of residents and maintain a clean living environment and space. To ensure that residents preferences are met the operator may need to demonstrate how they have communicated the level of service and when it is provided, altered the schedule to meet residents' preferences and that the service does not occur at unreasonable times.

**15(1)** An operator shall ensure that a clean and comfortable environment is provided for residents, employees, volunteers, service providers and visitors.

<b>Clean and Comfortable Environment</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The accommodation is clean and comfortable.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, their representatives, employees, volunteers, visitors or service providers on the cleanliness and comfort of the accommodation.</li> <li><input type="checkbox"/> Observation of a clean and comfortable environment.</li> </ul>

**15(2)** A long-term care accommodation must be thoroughly cleaned on a regularly scheduled basis and the level of cleanliness must be maintained as necessary between regularly scheduled cleanings while respecting the preferences of the residents as much as possible.

<b>Regularly Scheduled Cleaning</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
A schedule is provided of the regular cleaning that is required and clear responsibility for specific tasks is identified. Supervisor follow up occurs to ensure the completion of the scheduled tasks.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents or their representatives regarding completion of cleaning services.</li> <li><input type="checkbox"/> Observation of the cleanliness of the accommodation.</li> <li><input type="checkbox"/> Documentation demonstrating that cleaning is completed on a regularly scheduled basis. This information may be found in job descriptions, duty lists, special task lists, job routines or schedules.</li> </ul>
A schedule of the regular cleaning that is required is provided by the operator and documented verification of work done is completed.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents or their representatives regarding completion of cleaning services.</li> <li><input type="checkbox"/> Observation of the cleanliness of the accommodation.</li> <li><input type="checkbox"/> Documentation may include audits of work done.</li> </ul>
A schedule of the regular cleaning that is required is provided by the operator and the monitoring records of what has been done is completed by the employee responsible (e.g. sign off).	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents or their representatives regarding completion of cleaning services.</li> <li><input type="checkbox"/> Observation of the cleanliness of the accommodation.</li> <li><input type="checkbox"/> Documentation may include checklists, special task lists, duty lists, schedules, job routines or project work tracking.</li> </ul>

<b>As Needed Cleaning</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Written procedures showing that the operator provides cleaning services on an as needed basis.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents and their representatives regarding the as needed cleaning services.</li> <li><input type="checkbox"/> Observation of ongoing cleaning services.</li> <li><input type="checkbox"/> Documentation demonstrating that the operator engages in the as needed cleaning services. This information may be found in policies and procedures, duty lists, cleaning lists, resident handbooks, service agreements or log books.</li> </ul>
Operator provides cleaning services based on documented resident need and is in the resident's personal space each day to determine the level of service required.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, their representatives or employees regarding as needed cleaning services.</li> <li><input type="checkbox"/> Observation of ongoing cleaning services.</li> <li><input type="checkbox"/> Documentation of the needs of the residents for cleaning services. This information may be found in care plans, duty lists, logs or job descriptions.</li> </ul>

<b>Resident Preferences</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator communicates the cleaning schedules to residents and considers resident preferences in adjusting the schedules where needed.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding the suitability of cleaning schedules.</li> <li><input type="checkbox"/> Conversations with employees regarding the consideration of resident preferences in the cleaning schedule.</li> <li><input type="checkbox"/> Documentation demonstrating that cleaning schedules are communicated to residents and their preferences are considered. This information may be found in welcome cards, orientation materials, surveys, meeting minutes, handbooks or service agreements.</li> </ul>

**15(3)** Written cleaning procedures must be established and followed at all times to ensure a clean living environment.

<b>Cleaning Procedures</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Written information on how cleaning is to be performed.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Observation of implementation of the cleaning procedures.</li> <li><input type="checkbox"/> Documentation demonstrating the cleaning procedures. This information may be found in policies, procedures, duty sheets, checklists or job descriptions.</li> </ul>
Training on how cleaning is to be proficiently performed is provided to employees.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Observation of implementation of the cleaning procedures.</li> <li><input type="checkbox"/> Documentation demonstrating that information on the cleaning procedures is provided to employees. This information may be found in training manuals, orientation checklists, shadowing checklists or training records.</li> </ul>
A contractor or external service provider provides cleaning services and written information on how cleaning is performed.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Observation of implementation of the cleaning procedures.</li> <li><input type="checkbox"/> Documentation demonstrating the cleaning procedures. This information may be found in the signed contract between operator and contractor, policies, procedures, duty sheets, checklists or job descriptions.</li> </ul>

**15(4)** Appropriate mechanisms must be used to minimize unpleasant odors in the long-term care accommodation.

<b>Odour Control</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Odours are not present.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, their representatives or employees regarding the presence or absence of odours.</li> <li><input type="checkbox"/> Observation noting the absence of odours.</li> </ul>
The operator engages in odour elimination or minimization to the extent required to provide a comfortable and clean living environment for residents.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Observation of techniques used to eliminate or minimize unpleasant odours. This may be accomplished by the use of garbage or laundry lids, the use of fans or deodorizers, frequent garbage and soiled laundry removal, adequate smoke room ventilation, and/or appropriate cleaning of pet areas.</li> </ul>



## Standard 16: Continuation of Services

### Intent

To verify that there is a plan for the ongoing provision of accommodation services should there be an unexpected emergency. Advanced preparation is the key to mitigating the impact of unexpected events or emergencies leading to the disruption of regular service delivery. Many long-term care residents struggle with limited personal mobility, cognitive impairment and other physical challenges that render them even more vulnerable during emergency situations. With adequate knowledge and planning, the harmful effects of such unanticipated events can be minimized. Contingency plans must be developed with deliberate consideration of the very unique needs of the resident population and reviewed on an annual basis to ensure that they remain current.

### Definitions

- **Employment disputes:** unplanned for deviations from normally scheduled staffing presence or any other activity/event that may result in staff shortage that disrupts the ability of the accommodation to provide services to the residents.
- **Essential equipment:** equipment that is vital to the operation of the accommodation that without would require additional actions to be taken to maintain services for the residents. Equipment may include boiler, furnace, hot water tank, elevator, generator, communication equipment, security equipment, emergency call systems, sanitation equipment, food preparation equipment, food storage equipment, food service equipment, laundry or cleaning equipment.
- **Excessive heat:** temperatures at a level that pose a safety risk to residents or may result in a temperature advisory from Environment Canada.
- **Extreme weather:** instances of thunderstorms, hailstorms, tornadoes, heavy precipitation, blizzards, snowstorms, ice storms, dust storms, heat waves or cold waves that may impact an operator's ability to provide services.
- **Necessary accommodation services:** the services deemed necessary by the operator to be continued in an emergency, but must include meeting residents' basic needs.
- **Other disruptions:** may include excessive heat, reduced heat, fire, floods, sewer back ups, evacuation, unscheduled absence of the operator (illness, accident, etc) or a disruption in accommodation related services (safety and security, meals, cleaning, laundry, maintenance and building).
- **Other utilities:** includes water, gas and telephone service.



- **Sheltering in place:** a situation in which a judgment has been made based on the safety and comfort of residents, to keep residents within the accommodation rather than evacuate. Accommodation services continue to be provided within the accommodation at an essential level.

**16(1)** An operator shall develop, maintain and implement as necessary contingency plans to provide for the continuation of necessary services to residents in the event of the failure of electrical power, or other utilities, the breakdown of essential equipment, extreme weather conditions, employment disputes, and other disruptions.

<b>Contingency Plans</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
<p>The contingency plan is site specific and ensures the continuation of <b>necessary accommodation services</b> whether evacuating or sheltering in place. Consideration is given to the type of disruption that may lead to an activation of a contingency plan and the appropriate responses that may be needed depending on the situation.</p> <p>At a <b>minimum</b> contingency plans must address:</p> <ul style="list-style-type: none"> <li>□ Failure of electrical power</li> <li>□ Failure of other utilities (i.e. water and gas)</li> <li>□ A plan for the breakdown of essential equipment in the accommodation</li> <li>□ Extreme weather conditions that may reasonably occur in the area of the accommodation</li> <li>□ Staff shortages and/or employment disputes</li> <li>□ Evacuation and relocation</li> <li>□ Disruptions to safety and security services</li> <li>□ Disruptions to meal services</li> </ul> <p>Accommodations may also have contingency plan(s) in place for the following, where the occurrence of the event disrupts necessary services for the residents:</p> <ul style="list-style-type: none"> <li>□ Disruption of telecommunications / IT systems</li> <li>□ Flood / sewer back up</li> <li>□ Excessive or reduced heat</li> <li>□ Disruption of cleaning, laundry or maintenance services</li> </ul>	<ul style="list-style-type: none"> <li>□ Documentation of the contingency plan. Information may be found in manuals, policies and procedures, department specific plans or training guides.</li> </ul> <p><i>Where additional information is required to develop a contingency plan see the resource section 10 for planning websites and Appendix A <a href="#">‘Accommodation Standard 16: Points to Consider when Developing Plans’</a>.</i></p>

**16(2)** A contingency plan must

- a) mitigate the impact of the disruption on the residents,
- b) be communicated and made available to residents and their representatives, visitors, volunteers, employees and service providers,
- c) be practicable in the circumstances in which it is intended to be used, and
- d) be reviewed on an annual basis to ensure that it remains effective.

**Mitigation of Impact and Practicability**

The focus of the contingency plan is to ensure that residents are safe and comfortable and that the disruption to their services is kept to a minimum.

The contingency plan needs to be practicable in both situations of evacuation and sheltering in place. Consideration needs to be made as to how residents will be kept safe and comfortable and that services continue to be provided whether they are in the accommodation itself, being transported to another site, or at singular or multiple evacuation sites.

Contingency plans should be sufficiently detailed so that they are feasible and context specific given the size and nature of the accommodation and the resident population that it serves. Plans that exist in the format of blank templates, resource print outs, or lists of contact phone numbers will not be sufficient for compliance.

<b>Communicating the Plan</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Information on the contingency plan, in whole or part, is posted in the accommodation. If the entire plan is not posted, employees need to know where to access the whole plan and are able to direct others to the whole plan on request.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, representatives, employees, volunteers and service providers regarding their awareness of the plan locations.</li> <li><input type="checkbox"/> Observation of information on the contingency plan posted in the accommodation.</li> <li><input type="checkbox"/> Observation of the postings detailing the location of the contingency plan.</li> <li><input type="checkbox"/> Documentation demonstrating that employees, residents, representatives, volunteers and service providers are notified of the location of the contingency plan. This information may be found in handbooks, orientation materials, or service agreements.</li> </ul>
Information on the contingency plan is provided to residents, their representatives, employees, volunteers and service providers through training or other verbal methods.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, representatives, or employees regarding information provided on the contingency plan.</li> <li><input type="checkbox"/> Documentation demonstrating how operators provide training to employees, residents, representatives, volunteers and service providers. This information may be found in meeting minutes, training documentation, or certificates.</li> </ul>
Information on the contingency plan is provided to residents, their representatives, employees, volunteers, visitors and service providers in a written format.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, representatives, or employees regarding information provided on the contingency plan.</li> <li><input type="checkbox"/> Documentation demonstrating how operators provide information to employees, residents, volunteers, service providers. This information may be found in handbooks, orientation manuals or checklists, newsletters or emergency manuals.</li> </ul>

<b>Annual Review</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The contingency plan is reviewed through a meeting discussion format (staff meetings, board meetings, resident and family meetings).	<input type="checkbox"/> Documentation demonstrating that the contingency plan was reviewed annually. Information may be found in meeting minutes.
The contingency plan is reviewed through an administrative/committee review process.	<input type="checkbox"/> Documentation demonstrating that the contingency plan was reviewed annually. Information may be found in meeting minutes, a review date on the plans, a letter of review, or a dated footnote on the plans.
Ensure that any changes made to the contingency plan are communicated to residents, their representatives, employees, volunteers, visitors and service providers. See 16(2)(b).	



## Standard 17: Prevention of Abuse

### Intent

To verify mechanisms are in place for the prevention, identification and reporting of abuse. Operators of long-term care accommodations are responsible for ensuring that all employees receive appropriate education respecting the identification, prevention and reporting of suspected abuse. Operators are also responsible for ensuring that residents, their representatives, volunteers and service providers are aware of the contacts and resources available to them should they have any concerns or complaints regarding abuse.

- 17(1)** An operator shall develop and maintain written processes that
- a) promote the prevention of abuse of the residents of the long-term care accommodation,
  - and
  - b) provide information respecting the reporting of suspected abuse to the proper authorities.

<b>Written Processes</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator has a written process on the prevention of abuse and the reporting of suspected abuse.	<input type="checkbox"/> Documentation provided may include policies and procedures, guidelines, training materials, handbooks or pamphlets.

- 17(2)** An operator shall ensure that all employees receive appropriate education respecting the identification, and reporting of suspected abuse and the prevention of abuse of residents.

<b>Training</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator provides training on the identification, reporting and prevention of abuse to all employees.	<input type="checkbox"/> Documentation provided may include orientation materials, training manuals, training records, attendance records or certificates.

**17(3)** An operator shall ensure that information respecting the identification and reporting of suspected abuse and the prevention of abuse of residents is provided to residents, their representatives, volunteers and service providers.

<b>Information Provision</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Postings on the identification, reporting and prevention of abuse is available in a common area of the accommodation.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents regarding their awareness of the information.</li> <li><input type="checkbox"/> Observation of postings.</li> </ul>
The operator provides written pamphlets, brochures or other media on the identification, reporting and prevention of abuse.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, their representatives, volunteers or service providers regarding the information provided to them.</li> <li><input type="checkbox"/> Documentation provided may be handbooks, orientation materials, pamphlets, brochures, policies or guidelines.</li> </ul>
The operator provides training on the identification, reporting and prevention of abuse.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents, their representatives, volunteers or service providers regarding the information provided to them.</li> <li><input type="checkbox"/> Documentation provided may be orientation materials, training materials, meeting minutes, training records or information session attendance records.</li> </ul>

## Standard 18: Resident Safety and Security

### Intent

To verify that mechanisms are in place to support resident safety and security on a round-the-clock basis. It is important that long-term care residents feel secure and safe in their living environment and surroundings. Operators can ensure this by having appropriate monitoring mechanisms, accounting mechanisms, security systems, emergency call systems or communication systems in place. Where mechanical or electronic systems are in place they need to be inspected regularly to ensure that they are in good working order and those that utilize them need to be educated in their use. Where an incident of a critical nature occurs in an accommodation, the Director of the Compliance and Monitoring Branch is notified so that resident safety and security is not further compromised.

### Definitions

- **Security systems:** a system that warns the operator of an intruder or other breach. This may include security systems or other intruder alert systems.
- **Communication systems:** a system that the resident may use to access assistance from an employee. This may include nurse call, pendants, emergency call bells or pull cords.
- **Emergency call systems:** a system that lets an employee know that the resident is in an emergency situation. This may be wanderguards, door alarms, bed alarms or wheelchair alarms.
- **Incident:** an event related to the **Accommodation Standards** that has occurred; causing death or serious harm to a resident, a resident unaccounted for, an unplanned for activation of a contingency plan or extensive damage to the accommodation.
  - **Serious harm:** Physical or psychological injury which is life threatening and/or traumatic to the individual.
  - **Extensive damage:** damage to the extent that the ability of the operator to continue to provide accommodation services and a safe and secure environment is affected.
- **Director:** the Director of the Continuing Care Standards and Licensing Unit, Alberta Health.
- **Monitoring Mechanism:** equipment or processes used to ensure that residents are safe in addition to the personnel on site. These may include security systems, emergency call systems, communication systems or surveillance systems.



**Note**

- Where manufacturer’s recommendations are not available or do not state inspection recommendations for security, emergency call and communication system the operator may set out a schedule of regular inspections and testing of the system(s) that is deemed to be reasonable in relation to the safety of the residents.

**18(1)** An operator shall develop and maintain written processes that promote the safety and security of residents, including processes that

- a) account for all residents on a daily basis,
- and
- b) ensure that monitoring mechanisms and personnel are in place on a round-the-clock basis.

<b>Accounting for Residents</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The number of staff and residents is such that staff are aware of residents at all times.	<ul style="list-style-type: none"> <li>□ Documentation provided may include staffing schedules, job duties and care plans.</li> </ul>
Residents are accounted for during daily routine activities such as meals or medication times.	<ul style="list-style-type: none"> <li>□ Observation of assigned seating at meals allowing for accounting of residents.</li> <li>□ Documentation provided may include MAR sheets, meal attendance sheets or handbook information.</li> </ul>
Residents are accounted for using formalized tracking tools such as sign in/out books or census documents.	<ul style="list-style-type: none"> <li>□ Documentation provided may include sign in/sign out books, daily census recordings or bed checks.</li> </ul>

<b>Monitoring of Residents</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The accommodation is staffed 24 hours per day, seven days per week and monitoring systems are in place.	<ul style="list-style-type: none"> <li>□ Observation of monitoring systems.</li> <li>□ Documentation provided may include staffing schedules or care plans.</li> </ul>

**18(2)** Where a long-term care accommodation has a security system, the security system must be maintained, inspected, and tested as recommended by the manufacturer of the security system.

<b>Security Systems</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The security system is regularly inspected, tested and maintained by an employee or outside contractor.	<ul style="list-style-type: none"> <li>□ Documentation demonstrating the manufacturer recommendations. This information may be found in manuals, guidelines or letters.</li> <li style="text-align: center;"><b>and</b></li> <li>□ Documentation demonstrating that the recommendations are followed. This information may be found in log sheets, invoices, maintenance requisitions, or other preventative maintenance records.</li> </ul>
Computerized monitoring of all security systems is in place that has the capacity to report on all failures in the system. The computerized system is inspected, tested and maintained to ensure that it is in working order.	<ul style="list-style-type: none"> <li>□ Observation of the computerized system.</li> <li>□ Documentation demonstrating that the computerized system is able to alarm for all system failures and the system is in working order. This information may be found in manuals, incident reports, system descriptions or system logs.</li> </ul>
The security system is checked daily by a designated employee as part of a regular routine and a process exists for reporting deficiencies to ensure the system is maintained in good working order.	<ul style="list-style-type: none"> <li>□ Documentation demonstrating that the task is designated to a specific employee. This information may be found in job descriptions, duty lists or routines.</li> <li style="text-align: center;"><b>and</b></li> <li>□ Documentation demonstrating that there is a procedure for the checks and the reporting of deficiencies. This information may be found in policies and procedures, maintenance requisitions, job duties or other guidelines.</li> </ul>

**18(3)** Where a long-term care accommodation has a communication system or an emergency call system, the system must be one that is appropriate to the type of building in which it is located and suitable for the needs of the residents and must be maintained, inspected and tested as recommended by the manufacturer of the system.

<b>Suitability</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The communication or emergency call system is appropriately matched to the type of building and the needs of the residents.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversation with the operator regarding the suitability of the system in use.</li> <li><input type="checkbox"/> Observation of the building and the systems in use.</li> <li><input type="checkbox"/> Documentation demonstrating that the communication or emergency call system is suitable. This information may be found in care plans, assessments, incident reports, managed risk agreements, residential service agreements or policies and procedures.</li> </ul>
Where the communication or emergency call system is not fully suitable for the residents or the building the accommodation has additional practices in place to make up for the deficiency.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation demonstrating that additional practices are in use to ensure the safety of all residents. This information may be found in policies and procedures, job duties, guidelines, job descriptions, log books or care plans.</li> </ul>

<b>Maintenance</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The communication and emergency call system is regularly inspected, tested and maintained by an employee or outside contractor.	<ul style="list-style-type: none"> <li>□ Documentation demonstrating the manufacturer recommendations. This information may be found in manuals, guidelines or letters.</li> <li style="text-align: center;"><b>and</b></li> <li>□ Documentation demonstrating that the communication or emergency call system is regularly inspected, tested and maintained. This information may be found in log sheets, invoices, maintenance requisitions, or other preventative maintenance records.</li> </ul>
Computerized monitoring of all communication and emergency call systems is in place that has the capacity to report on all failures in the system. The computerized system is inspected, tested and maintained to ensure that it is in working order.	<ul style="list-style-type: none"> <li>□ Observation of computerized system.</li> <li>□ Documentation demonstrating that the computerized system is able to alarm for all system failures and is in good working order. This information may be found in manuals, system descriptions, incident reports and system logs.</li> </ul>
The communication and emergency call system is checked daily by a designated employee as part of a regular routine and a process exists for reporting deficiencies to ensure the system is maintained in good working order.	<ul style="list-style-type: none"> <li>□ Documentation demonstrating that the task is designated to a specific employee. This information may be found in job descriptions, duty lists or routines.</li> <li style="text-align: center;"><b>and</b></li> <li>□ Documentation demonstrating that there is a procedure for the checks and the reporting of deficiencies. This information may be found in policies and procedures, maintenance requisitions, job duties, or other guidelines.</li> </ul>

**18(4)** Any incident within the long-term care accommodation or its grounds in which the safety or security of a resident is breached must be documented and reported to the director along with the actions taken to address the incident or remedy the breach, as the case may be.

<b>Reporting to the Director</b>	
Reportable incident are to be submitted to the Director within <b>two business days</b> of the incident occurring by the operator.	
Reportable Incidents:	<p>An event related to the <b>Accommodation Standards</b> that has occurred:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Causing death or serious harm to a resident,</li> <li><input type="checkbox"/> A resident unaccounted for,</li> <li><input type="checkbox"/> An unplanned for activation of a contingency plan, or</li> <li><input type="checkbox"/> Extensive damage to the accommodation.</li> </ul>
Reportable Incident Form:	<ul style="list-style-type: none"> <li>➤ The reportable incident form can be found on-line at: <a href="http://www.health.alberta.ca/services/continuing-care-forms.html">http://www.health.alberta.ca/services/continuing-care-forms.html</a>.</li> <li>➤ Check 'Health Funded' when opening the form to populate the appropriate sections.</li> <li>➤ Forms may be submitted electronically using the on-line form, by e-mail to <a href="mailto:asal@gov.ab.ca">asal@gov.ab.ca</a> and <a href="mailto:reportable.incidents@albertahealthservices.ca">reportable.incidents@albertahealthservices.ca</a></li> <li>➤ Please ensure that additional notifications are completed as per existing zone processes.</li> </ul>
Help with determining what to report	<p>A decision guide and examples are provided to assist operators in determining what incidents meet the reportable incident criteria (Section 7 or on-line at: <a href="http://www.health.alberta.ca/documents/CC-Reportable-Incidents-Decision-Process.pdf">http://www.health.alberta.ca/documents/CC-Reportable-Incidents-Decision-Process.pdf</a>)</p>
Continuing Care Health Service Standards	<p>There is also a requirement to report incidents under the Continuing Care Health Service Standards. The reportable incident form, decision guide, examples, and process can also be utilized in reporting incidents under these standards.</p>

**18(5)** An operator shall ensure that all employees and, where appropriate, residents, service providers and volunteers receive adequate training respecting any security, communication or emergency call system in use in the long-term care accommodation.

<b>Training</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
<p>The operator provides training to those persons utilizing the security, communication, or emergency call systems.</p>	<ul style="list-style-type: none"> <li>□ Conversations with residents, employees, volunteers and service providers regarding their awareness of the usage of the system.</li> <li>□ Documentation provided may include handbooks, orientation materials, training manuals or training records.</li> </ul>



## Standard 19: Trust Accounts

### Intent

To verify there are mechanisms in place to safeguard any funds entrusted to the operator by the resident. To ensure that resident have access to funds held in trust.

### Definitions

- **Trust accounts:** any account (group or individualized) or internal holding system (cash box or safe) where funds held on behalf of the residents are kept. This includes situations where the operator receives regular monthly deposits from the resident/responsible person at the first of each month and the resident withdraws the funds during the course of the month. Situations where no money is held and the residents are billed back for services are not considered to be a trust account.
- **Receipt:** an individual receipt or accounting of an expenditure. The receipt may be an accounting of the expenditures after a certain point of time (ie. Monthly) or at the time of each expenditure.

### Note

- Where an operator provides funds or statements to residents/representatives on an 'upon request' basis, a reasonable length of time for fulfilling the request is within two business days for day to day transactions and within 60 calendar days for a closure of a trust account.

**19(1)** Where an operator holds funds on behalf of a resident for a period longer than 31 days, the operator shall

- a) deposit those funds into a trust account opened and maintained for that purpose,
- and
- b) provide a receipt for each transaction.



<b>Opening and Operating Trust Accounts</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator demonstrates the trust account system that is in place.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with employees, residents or their representatives regarding the trust accounts.</li> <li><input type="checkbox"/> Documentation provided may include bank statements, transaction receipts, ledger books or orientation materials.</li> </ul>
The operator has a written process on how trust accounts are opened and maintained.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with employees, residents or their representatives regarding the trust accounts.</li> <li><input type="checkbox"/> Documentation provided may include policies and procedures, written guidelines, transaction receipts, trust account agreements, handbooks, or orientation materials.</li> </ul>

**19(2)** An operator shall ensure that easily understandable records are maintained in respect of the trust account showing opening and closing balances and make those records available for inspection by residents or their representatives free of charge.

<b>Trust Account Records</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator provides a regular or periodic trust account statement free of charge.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents/ representatives regarding the issuance of trust account statements.</li> <li><input type="checkbox"/> Documentation provided may include statements, letters or statement issue schedules.</li> </ul>
The operator provides trust account statements upon request free of charge.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents/ representatives regarding their awareness of how to receive a trust account statement.</li> <li><input type="checkbox"/> Documentation demonstrating that residents are notified of how they may request trust account statements. This information may be found in handbooks, terms of occupancy, admission agreements, trust account agreements, training materials or orientation materials.</li> </ul>

**19(3)** An operator shall return funds held in trust to the resident or the resident’s representative on receiving a request in writing to do so.

<b>Withdrawal of Funds</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator demonstrates how the process for withdrawing funds from trust accounts works.	<ul style="list-style-type: none"> <li>□ Documentation provided may include letters, emails, memos, receipts, request forms, withdrawal forms or other withdrawal documentation.</li> </ul>
The operator has written processes dealing with the withdrawal of funds from trust accounts.	<ul style="list-style-type: none"> <li>□ Documentation provided may include policies and procedures, guidelines, trust account agreements, service agreements, handbooks or orientation materials.</li> </ul>



## Standard 20: Corporate Status

### Intent

To verify that the long-term care operator maintains the incorporated body in good standing.

20 The organization is an incorporated body in good standing to do business in the Province of Alberta and the respective municipality, if applicable.

<b>Corporate Status</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The name of the incorporated body is provided to the Compliance and Monitoring Branch for a corporate registry search.	<input type="checkbox"/> Documentation provided may include incorporation documents of the body.
Corporate registry documentation is provided showing the incorporated body to be active.	<input type="checkbox"/> Documentation provided may include statements or annual returns.



## Standard 21: Water Temperature

### Intent

To ensure the safety of residents by preventing scalding and other injuries associated with extreme water temperatures.

### Definitions

- **Sufficiently knowledgeable employee or service provider:** has an understanding of the tub operations and controls and is aware of the accommodation's process for taking and recording temperatures.
- **Therapeutic tub:** a tub in which a resident is lifted into it or it is fully accessible, often by a side door, which may or may not include a reservoir for water, jets, hydromassage or hydrosound. The resident is assisted to bathe in a therapeutic tub and the water temperature is regulated by the tub and/or the care provider. This is not a residential type tub. Examples of this are: Arjo, century, parker, rhapsody, freedom, advantage, serenity, bellentra or primo tub.
- **Flowing water:** the maximum hot water visually seen flowing from the faucet. An external temperature gauge is necessary to measure the temperature of this water.
- **Maximum safe level for water temperature as defined by the Alberta Building Code:**
  - "If the authority having jurisdiction deems it necessary to protect children, the elderly, or persons with disabilities or infirmities from burns, ... b) the temperature of the water from **faucets** shall be limited to a maximum of 49°C." (2014, 7.1.2.2)
- **Maximum safe level for water temperature as defined by the National Plumbing Code:**
  - "(3) All mixing valves supplying shower heads shall be of the pressure-balanced, thermostatic, or combination pressure-balanced/thermostatic type capable of a) maintaining a water outlet temperature that does not exceed 49°C and b) limiting thermal shock." (2010, 2.2.10.7)
  - "(4) The temperature of water discharging into a bathtub shall not exceed 49°C." (2010, 2.2.10.7)

**Note**

- Requirements for water temperature testing vary based on the accommodation’s unique water system. [See Section 10: Resources Appendix B](#) for additional examples and information.
- Resident education may not be applicable in some accommodations where residents are independent or have been assessed as capable of ensuring safe water temperatures or where personnel assist residents in all areas related to water usage.
- For therapeutic tubs, the temperature of **hottest water flowing** into each tub, **not the bath water temperature that an individual will be bathed in**, must be taken prior to the first bath of the day and documented.

**21(1)** An operator shall ensure that the temperature of flowing water provided for personal use in areas used by the residents does not exceed the maximum safe level established in the Alberta Building Code.

<b>Safe Water Temperatures</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Regularly scheduled checks of the hot water temperature flowing out of the taps in resident areas to ensure that it does not exceed the predetermined safe level.	<ul style="list-style-type: none"> <li>□ Documentation demonstrating that safe water temperatures are maintained in resident areas. This information may be found in logs, checklists or calendars.</li> </ul>

**21(2)** An operator shall ensure that safe water temperature for the personal use of residents are maintained through

- a) employee and resident training and education
- b) proper maintenance and monitoring of equipment,  
and
- c) appropriate risk mitigation procedures.

<b>Education (Residents)</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Information provided to residents on safe water temperatures.	<ul style="list-style-type: none"> <li>□ Conversations with residents regarding their understanding of safe water temperatures.</li> <li>□ Documentation of education received by residents. This information may be found in orientation materials, meeting minutes, move-in checklists, or posters.</li> </ul>

<b>Training (Employee)</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator provides training on appropriate temperatures and process for reporting undesirable water temperatures.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with employees regarding safe water temperatures.</li> <li><input type="checkbox"/> Documentation of training received by employees. This information may be found in training records, orientation forms, meeting minutes, move-in checklists, or posters.</li> </ul>
The operator provides training on measuring hot water temperatures.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with employees regarding their understanding of safe water temperatures.</li> <li><input type="checkbox"/> Documentation of training received by employees. This information may be found in training records, training materials, orientation forms and meeting minutes, or posters.</li> </ul>

<b>Maintenance and Monitoring of Equipment</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Corrective maintenance records for the hot water heating system and therapeutic tubs.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation demonstrating that the hot water heating equipment is repaired and maintained. This information may be found in work orders, requisitions, invoices or logs.</li> </ul>
Preventative maintenance records for the hot water heating system and therapeutic tubs.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation demonstrating that the hot water heating equipment is regularly inspected and maintained. This information may be found in preventative maintenance records, logs, invoices, contracts or checklists.</li> </ul>



<b>Risk Mitigation Procedures</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Limiting resident access to high water temperature areas (ie. Laundry and kitchen).	<ul style="list-style-type: none"> <li><input type="checkbox"/> Observation of limitations to resident access. This may be found as locked doors, signage, etc.</li> <li><input type="checkbox"/> Documentation demonstrating that certain areas are not for resident use. This information may be found in policies and procedures, resident handbooks, or orientation information.</li> </ul>
The installation and maintenance of mixing valves, scald free taps or automatic shut-off systems.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with employees regarding the system installed.</li> <li><input type="checkbox"/> Observation of mixing valves and temperature gauges.</li> <li><input type="checkbox"/> Documentation demonstrating that there is a preventative maintenance plan for mixing valves, scald free taps or automatic shut off systems. This information may be found in preventative maintenance documents, logs or checklists.</li> </ul>

**21(3)** An operator shall ensure that all maintenance personnel and employees involved with the water system are sufficiently knowledgeable in the function and proper operation of the water gauges, water mixing valves and therapeutic tub controls, if any, to maintain safe water temperatures.

<b>Qualifications of Personnel</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Job descriptions and qualifications for maintenance personnel match the needs of the water system (ie. Power engineers (Class 1-5) certificate of competency, special boiler operator certificate of competency).	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation demonstrating that the needs of the building (based on the job description) and the qualifications of maintenance personnel match. This information may be found in job descriptions, certificates, resumes or other verification of qualifications.</li> </ul>
Contracts with or procurement of qualified persons for maintenance to the water system (Arjo, plumbers, etc).	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation demonstrating that the needs of the water system are met with the periodic procurement of an appropriate water system technician. This information may be found in contracts or invoices.</li> </ul>

**21(4)** Where a long-term care accommodation has one or more therapeutic tubs, the operator of the long-term care accommodation shall ensure that a sufficiently knowledgeable employee or service provider tests the temperature of the hot water flowing into each therapeutic tub each day prior to the first bath of the day and documents the temperature in a logbook or on a log sheet kept in the tub room for that purpose.

<b>Therapeutic Tub</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The temperature of the hot water flowing into the therapeutic tub is taken and recorded prior to the first bath of the day. The record of water temperatures is kept in the tub room.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Observation of the water temperature logs kept in the tub room.</li> <li><input type="checkbox"/> Documentation provided may be a log books or log sheets.</li> </ul>
Where a therapeutic tub has an automatic shut-off when the tub exceeds a preset temperature, and there is insufficient time to get an external temperature reading the digital temperature read out can be used as the temperature recording.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Observation of the water temperature logs kept in the tub room.</li> <li><input type="checkbox"/> Documentation provided may be a log books or log sheets.</li> </ul>



## Standard 22: General Information

### Intent

This standard is intended to ensure that residents are assisted in locating resources that they are interested in or in need of so that they can make informed decisions. Having access to general information can assist residents to develop meaningful ties within their communities and to improve their access to available resources.

### Definitions

- **General information:** resources can take the form of pamphlets, booklets, handouts, contact names and phone numbers or links of information that is relevant to the resident. It is not necessary for an operator to have all information, but to have some relevant information and to be able to link the resident with other contacts should additional or different information be needed.

**22** An operator shall make available as necessary to residents and their representatives current general information respecting relevant community, municipal, provincial, and federal programs.

<b>General Information Provision</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator provides a resource area to display relevant information for residents.	<ul style="list-style-type: none"> <li>□ Conversations with residents regarding their access to resources.</li> <li>□ Observation of the resource area.</li> </ul>
The operator provides resources to residents in written format.	<ul style="list-style-type: none"> <li>□ Conversations with residents regarding their access to resources.</li> <li>□ Documentation provided may include admission packages, handbooks or newsletter.</li> </ul>
The operator provides access to community resources via various media outlets.	<ul style="list-style-type: none"> <li>□ Conversations with residents regarding their access to resources.</li> <li>□ Observation of media / equipment.</li> <li>□ Documentation demonstrating that all residents are able to access and utilize the media provided. This information may be found in care plans, assessments, meeting minutes, or surveys.</li> </ul>

<b>General Information Provision (Continued)</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator employs a social worker or other employee for the purpose of providing resources to residents.	<ul style="list-style-type: none"><li><input type="checkbox"/> Conversations with residents/representatives regarding their access to resources.</li><li><input type="checkbox"/> Documentation provided may include job descriptions, job duties, or handbooks.</li></ul>

## Standard 23: Information Respecting the Long-term Care Accommodation

### Intent

Information regarding the long-term care accommodation needs to be transparent and accessible to applicants, residents and their representatives. This standard is intended to ensure that prospective and current residents and their representatives are made aware of all relevant information to assist them to make decisions on their accommodation and accommodation related services. The degree of information provided to applicants may vary depending on the information that they have requested. It is, however, necessary that operators make available all applicable information for residents or their representatives.

### Definitions

- **Move in and orientation:** the process for move in and the expected orientation items to familiarize the resident with the accommodation and the services provided.
- **Monthly basic accommodation charges:** information on the charges for the accommodation and what is covered by this charge.
- **Information concerning maintenance and cleaning schedules:** information on the frequency of cleaning, hours of service in which service is provided, project work scheduling, repair and replacement schedules and how to report concerns to maintenance.
- **List of optional services and charges:** information on any additional services (e.g. cleaning, laundry, hairdressing, personal choice services, cable, etc) offered by the operator in the accommodation for a fee above and beyond that which is included in the residential services agreement and what the fee is for the service.
- **Notice periods for rate increases:** information of the notice period for rate increases stated in days or months or on a specific date (ie. January 1 of each year) for the accommodation and/or accommodation services.
  - **Note:** Rates for Long-term Care are set by the Ministry of Health. This notice period refers to the amount of notice the accommodation commits to provide residents/representatives prior to the implementation of any Ministry approved increases.
- **Notice periods for termination of services or tenancy:** information of the notice periods for services or tenancy to be terminated by the operator or the resident or their representative. The notice period may apply to situations of discharge, transfers or other endings of services at a specific accommodation.

- **Required inspections:** Inspections completed by jurisdictions responsible for Accommodation Standards, Environmental Health or the Safety Code, such as Building and Fire.
- **Concerns and complaint resolution process:** forms or information pertaining to how residents can express complaints and concerns and the steps that will be taken to resolve the issue.

**23(1)** An operator shall provide on request to applicants, residents and their representatives current information and, where necessary, forms respecting the operation of the long-term care accommodation, including

- a) the process of moving in and orientation,
- b) basic accommodation and service charges on a monthly basis,
- c) available optional personal services and their charges,
- d) cleaning and maintenance schedules,
- e) the notice period applicable to rate increases,
- f) the house rules of the long-term care accommodation and circumstances that could lead to the termination of residency,
- g) information respecting the measures taken by the operator to protect the privacy and personal information of residents,
- h) information respecting trust accounts, if applicable
- i) information respecting the results of required inspections of the long-term care accommodation,  
and
- j) the written process for resolving concerns or complaints.

<b>Accommodation Information Provision</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator provides information to residents/representatives verbally following an orientation checklist.	□ Documentation provided may include orientation materials or checklists.
The operator provides information to residents/representatives in a written format.	□ Documentation provided may include intake packages, application forms, resident agreements, handbooks, welcome packages, policies or pamphlets.

<b>Accommodation Information Provision (Continued)</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
<p>The operator communicates to residents/representatives the availability of information that it has in written format.</p>	<ul style="list-style-type: none"> <li>□ Documentation demonstrating that residents are notified of the availability of information. Documentation provided may include orientation materials, orientation checklists, or postings.</li> <li style="text-align: center;"><b>and</b></li> <li>□ Documentation demonstrating the operators policies and processes. Documentation provided may include policies, procedures, memorandums, or other documents.</li> </ul>

**23(2)** An operator shall ensure that a residential services agreement is signed by each resident or the resident’s representative and by an authorized representative of the long-term care accommodation.

<b>Residential Service Agreement</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
<p>The operator provides a signed residential services agreement.</p>	<ul style="list-style-type: none"> <li>□ Documentation provided may include one or more signed service agreements.</li> </ul>

**23(3)** A residential services agreement

- a) may be a separate document on its own or may form part of another document, and
- b) must clearly state
  - i) the residential services provided,
  - ii) the rates charged for those services, and
  - iii) the notice periods that apply to rate increases and the termination of services or residency.



<b>Terms of the Agreement</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator utilizes one residential service agreement covering all points.	<input type="checkbox"/> Documentation provided may include residential service agreements.
The operator utilizes multiple agreements covering all points.	<input type="checkbox"/> Documentation provided may include residential service agreements.
The operator utilizes an agreement in conjunction with signed addendums which may cover some points.	<input type="checkbox"/> Documentation provided may include residential service agreements and addendums.

## Standard 24: Concerns and Complaints

### Intent

Operators must have a process in place for dispute resolution. Having a process and communicating it with residents and their representatives allows them to have any concerns and complaints addressed quickly.

### Definition

- **Concerns and complaints:** issues expressed to the operator by the resident, their representative or others concerning the accommodation, the building that houses it, the grounds or the accommodation services provided or arranged for by the operator.

**24** An operator shall develop and maintain a written process for the resolution of concerns and complaints about the long-term care accommodation and the services provided and shall document every concern or complaint received and the measures taken to resolve it.

<b>Written Process</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator has written processes on the resolution of concerns and complaints.	<ul style="list-style-type: none"> <li>□ Documentation provided may include policies and procedures, flowcharts, forms with instructions for use, handbooks, welcome packages, guidelines, posters or pamphlets.</li> </ul>

<b>Documentation of Concerns and Complaints</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator retains the concern or complaint and provides evidence of the action taken to rectify the situation.	<ul style="list-style-type: none"> <li>□ Documentation demonstrating that action was taken to rectify the complaint. This information may include requisitions, receipts, referrals, assessments or policies and procedures.</li> </ul>
The operator logs the complaints and concerns and the action taken.	<ul style="list-style-type: none"> <li>□ Documentation provided may include log books or communication books.</li> </ul>
The operator utilizes meetings to resolve and document complaints.	<ul style="list-style-type: none"> <li>□ Documentation provided may include meeting minutes or agendas.</li> </ul>
The operator utilizes complaint forms or correspondence with the complainant to document action taken.	<ul style="list-style-type: none"> <li>□ Documentation provided may include forms, letters or emails.</li> </ul>



## Standard 25: Certificate Posted

### Intent

To ensure that residents and their representatives are aware of the status of the long-term care accommodations certification.

**25(1)** An operator shall post the certificate of compliance to the long-term care accommodation standards issued to the operator, in a prominent place in the long-term care accommodation to which it pertains.

Posted Certificate	
Methods of Compliance (possible, but not limited to):	Evidence of Compliance (possible, but not limited to):
The posted certificate is visible in the accommodation.	<input type="checkbox"/> Observation of the posted certificate.



## Standard 26: Criminal Record Checks

### Intent

The intent of this standard is to ensure that all new volunteers, service providers and operators providing direct services to resident undergo a criminal records check to support the safety and security of residents.

### Definitions

- **New:** any employee, volunteer, or service provider that commenced after March 31, 2007.
- **Volunteer:** any volunteer that provides direct services to the resident.
- **Service Provider:** any accommodation or personal choice service provider that is not employed by the accommodation that has independent (unaccompanied by staff) access to residents.

### Note

- For those employees, volunteers and service providers under the age of 18 where a criminal record check cannot be completed, it is recommended that they do not have independent direct access to residents (ie. One on one in resident rooms).
- Criminal record checks are considered to be one way of screening applicants, but should not to be considered the sole determination of an applicant's suitability.
- The content of a criminal record check may vary among communities and police departments. Operators may want to contact their local police department to determine the extent of the information provided.
- Vulnerable Sector Searches may be a part of a Criminal Record Check. The determination to complete a vulnerable sector search is a risk management decision for the operator to make based on the resident population they are serving and the position being hired to.

**26** An operator shall ensure that each new employee, each new volunteer, and each new service provider whose duties involve the provision of services directly to residents must provide a criminal record check.

<b>Criminal Record Checks</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Criminal record checks for employees, volunteers and service providers are kept on file.	<input type="checkbox"/> Documentation provided may include criminal record checks.
Criminal record checks for external service providers (e.g. housekeeping, food services, etc.)	<input type="checkbox"/> Documentation provided may include current contracts or other service provider agreements.
Verification records that a criminal record check was viewed and deemed to be satisfactory are completed.	<input type="checkbox"/> Documentation provided may include checklists, records, application forms, or commencement forms.
Criminal record checks for foreign workers are kept on file.	<input type="checkbox"/> Documentation provided may include criminal record checks, or work permits from Canada Immigration.

## Standard 27: Privacy and Personal Information

### Intent

To ensure that operators maintain the privacy and security of residents' personal information, using it only as required in the delivery of services. Written policies and processes regarding the collection, use or disclosure of the personal information of residents must comply with applicable privacy laws. Any personal information related to residents should only be accessible to the staff members who interact with those residents and not be accessible to other residents, contractors, visitors and staff members who do not work directly with residents or who do not “need to know”, or have access to, that personal information.

### Definition

- **Personal information:** information about an identifiable individual. This information may be in written, photographic, verbal or electronic form.

**27(1)** An operator shall ensure that the privacy and the personal information of residents is protected.

<b>Protection of Information and Privacy</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Personal information of residents is protected regardless of format (digital/ electronic or paper) or location (on site, off site, or during transportation).	<ul style="list-style-type: none"> <li>□ Observation of protection of personal information.</li> <li>□ Documentation provided may include internal or external privacy audits, consent forms and assessments as appropriate.</li> </ul>



- 27(2) An operator shall develop and maintain written policies respecting the protection of residents' privacy and personal information and shall
- a) train employees and volunteers in implementing the policies, and
  - b) ensure that residents and their representatives are informed respecting the policies.

<b>Written Processes</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator has written policies, procedures and processes regarding the collection, use and disclosure of resident personal information and how it ensures resident's privacy.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation provided may include policies, procedures, guidelines and brochures.</li> </ul>
The operator has written processes in place to ensure residents understand their rights to access to their own personal information that the accommodation may have about them.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation provided may include policies, procedures, guidelines and brochures.</li> </ul>

<b>Training</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator provides training and written information (copies of policies and procedures) to contractors, volunteers and staff regarding the collection, use and disclosure of personal information.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with contractors, volunteers or staff regarding the protection of personal information.</li> <li><input type="checkbox"/> Documentation may include handbooks, orientation materials, training materials, checklists, forms, sign in sheets, or contracts with privacy protection clauses in them.</li> </ul>

<b>Information on Processes</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator notified residents/representatives verbally and documents that the discussion has occurred.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents or their representatives regarding their awareness of the operator's policies in the protection of personal information.</li> <li><input type="checkbox"/> Documentation provided may include meeting minutes, or orientation checklists.</li> </ul>
The operator provides training to residents/representatives in how the operator protects their personal information.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents and their representatives regarding their awareness of the operator's policies in the protection of personal information.</li> <li><input type="checkbox"/> Documentation provided may include training materials, orientation materials, sign-in sheets or training records.</li> </ul>
The operator provides written information to the residents/representatives on the protection of their personal information.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents and their representatives regarding their awareness of the operator's policies in the protection of personal information.</li> <li><input type="checkbox"/> Documentation provided may include policies and procedures, consent forms, handbooks or admission agreements.</li> </ul>



## Standard 28: Safety and Security

### Intent

Staff must be aware of the expectations of their employment. This standard is intended to ensure that employees have access and are aware of the policies and procedures that protect resident safety.

### Definition

- **Policies and procedures:** any written document approved for implementation for the safety of residents on the accommodation or an accommodation related service (e.g. incident reporting, security systems, communication systems, emergency call systems, safe water temperatures, daily accounting of residents, supervision, contingency plans, abuse, criminal records checks, etc.)

### Note

- This standard refers to the sharing of policies and procedures developed and utilized as evidence of compliance for any of the accommodation standards. There is no need to re-create policies for this standard.

**28(1)** An operator shall create and maintain policies and procedures related to the safety and security of residents to be followed by employees.

<b>Policies and Procedures</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Site specific policies and procedures are created, implemented and current.	<ul style="list-style-type: none"> <li>□ Observation of the implementation of the policies and procedures.</li> <li>□ Documentation demonstrating that policies and procedures are in existence and in use by staff. This information may be found in policy and procedure manuals, orientation materials or computerized records.</li> </ul>

**28(2)** An operator shall ensure that all employees are aware of and have access to the policies and procedures referred to in subsection 1.

<b>Access to Policies and Procedures</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
Written policies and procedures are available to all employees.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Observation of location of policies and procedures in an area accessible to all employees.</li> <li><input type="checkbox"/> Documentation demonstrating that employees are aware of the location of policies and procedures. This information may be found in employee handbooks, orientation materials or signage.</li> </ul>
Electronic version of policies and procedures are available to all employees.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Observation of location of computer access points for policies and procedures in an area accessible to all employees.</li> <li><input type="checkbox"/> Documentation demonstrating that employees are aware of the location of computer access points policies and procedures. This information may be found in employee handbooks, orientation materials or signage.</li> </ul>

## Standard 29: Job Descriptions

### Intent

Staff must be aware of the expectations of their employment. This standard is intended to ensure that employees have written job descriptions detailing the scope and responsibilities of their position.

### Definitions

- **Employee:** people employed by the operator, who provide accommodation services, but does not include health care professionals.
- **Job qualifications:** the requirements that the employee must have to complete the specified job. This may include education, training, certificates, experience, or other personal characteristics essential for completion of the job.
- **Responsibilities:** the list of duties or types of duties that the position is expected to fulfill.
- **Scope:** parameters around the job duties or responsibilities which the position must abide by (ie. Performing medication reminders, but not assistance).

**29(1)** An operator shall ensure that a written job description is prepared and made available for each employee employed in the long-term care accommodation.

<b>Job Description</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator has written job descriptions for each position.	□ Documentation provided may be job descriptions or task analyses.

<b>Provision of Job Descriptions</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator makes job descriptions available to employees.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with employees regarding knowledge of the job descriptions.</li> <li><input type="checkbox"/> Documentation provided may be policies and procedures, job description binders or job duties.</li> </ul>
The operator provides employees with their job description at application or hire.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with employees regarding knowledge of the job descriptions.</li> <li><input type="checkbox"/> Documentation provided may be an application packages, interview guidelines, commencement packages or policies and procedures.</li> </ul>
The operator provides employees with their job descriptions at orientation or initial training.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with employees regarding knowledge of the job descriptions.</li> <li><input type="checkbox"/> Documentation provided may be orientation materials, handbooks or training materials.</li> </ul>

**29(2)** The job description referred to in subsection 1 must set out

- a) the job qualifications,
- b) the responsibilities of the position,  
and
- c) the scope of the position.

<b>Job Description Requirements</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator provides written job descriptions covering all points.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation provided may include job descriptions, job postings or job duties.</li> </ul>

## Standard 30: Residents' Personal Affairs

### Intent

Operators must ensure that residents, their representatives, employees and volunteers are aware of the policies regarding involvement of employees and volunteers in the financial and non-financial affairs of residents. These policies are intended to protect residents from abuse and mistreatment.

30(1) An operator shall develop and maintain written policies respecting the involvement of employees or volunteers in the personal affairs of residents.

Written Processes	
Methods of Compliance (possible, but not limited to):	Evidence of Compliance (possible, but not limited to):
The operator has written processes regarding the extent of involvement allowed for employees and volunteers in residents' personal affairs.	<input type="checkbox"/> Documentation provided may include policies and procedures, guidelines, handbooks, orientation materials, or training materials.

30(2) The written policies referred to in subsection 1 must at minimum address

- a) the accepting of gifts by employees or volunteers from residents,
- b) the involvement of employees or volunteers in the financial affairs of residents, including matters relating to powers of attorney, wills and estate planning, and
- c) the involvement of employees or volunteers in the non-financial affairs of residents, including matter relating to personal directives, decision-making, and guardianship.

Involvement in Residents Personal Affairs	
Methods of Compliance (possible, but not limited to):	Evidence of Compliance (possible, but not limited to):
The operator has written processes covering all points.	<input type="checkbox"/> Documentation provided may include policies and procedures, guidelines, handbooks, orientation materials, or training materials.



**30(3)** The written policies referred to in subsection 1 must be provided to resident, their representatives, employees and volunteers.

<b>Communication of Processes</b>	
<b>Methods of Compliance (possible, but not limited to):</b>	<b>Evidence of Compliance (possible, but not limited to):</b>
The operator provides residents/representatives/ employees/volunteers with a copy of the policy referred to in Subsection 1.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation provided may include policies and procedures.</li> </ul>
The operator provides residents/representatives employees/volunteers with information regarding the policy.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation provided may include handbooks, memos, training materials, posters or admission agreements.</li> </ul>
The operator discussed the policy with residents/representatives employees/volunteers and documents that this discussion occurred.	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conversations with residents/representatives employees/volunteers regarding their awareness of the policy.</li> <li><input type="checkbox"/> Documentation provided may include orientation materials, orientation checklists or meeting minutes.</li> </ul>

## Long-term Care Resources

In this section resources are provided to assist long-term care operators to find relevant information pertaining to the accommodation standards or other applicable legislation. The resources provided are links to websites that operators may find useful, but are not affiliated with the Compliance and Monitoring Branch. Utilizing the resources provided is not a requirement for compliance.

### In This Section

Other Governing Legislation	2	Trust Accounts	6
Building Code Requirements	2	Corporate Status	7
Safety Requirements	2	Water Temperature	7
Maintenance Requirements	3	General Information	7
Environmental Requirements	3	Information Respecting the Long-term Care Accommodation	8
Personal Choice Services	3	Concerns and Complaints	8
Insurance	3	Criminal Record Check	9
Contracted Services	4	Privacy and Personal Information	9
Social and Leisure Activities	4	Job Descriptions	9
Menu and Nutritional Requirements	4	Residents' Personal Affairs	9
Cleaning Requirements	4	Other Provincial Standards	10
Continuation of Services	5	Accommodation Standard 16: Points to consider when developing Plans	Appendix A
Prevention of Abuse	5	Water Temperature Safety: Water System Examples	Appendix B
Resident Safety and Security	6		

### Format Used

Resources are listed under the applicable Standard heading. Resources are not provided for every standard.

## Other Governing Legislation

- **Alberta Safety Services Branch:** this branch of Municipal Affairs and Housing administers the *Safety Codes Act*.  
[http://www.municipalaffairs.alberta.ca/am\\_safety\\_services.cfm](http://www.municipalaffairs.alberta.ca/am_safety_services.cfm)
- **Alberta Safety Codes Act:**  
[http://www.qp.alberta.ca/574.cfm?page=S01.cfm&leg\\_type=Acts&isbncln=9780779723652](http://www.qp.alberta.ca/574.cfm?page=S01.cfm&leg_type=Acts&isbncln=9780779723652)
- **Public Health Act:**  
[http://www.qp.alberta.ca/574.cfm?page=P37.cfm&leg\\_type=Acts&isbncln=9780779743742](http://www.qp.alberta.ca/574.cfm?page=P37.cfm&leg_type=Acts&isbncln=9780779743742)
- **Hospitals Act:**  
[http://www.qp.alberta.ca/574.cfm?page=H12.cfm&leg\\_type=Acts&isbncln=9780779746996](http://www.qp.alberta.ca/574.cfm?page=H12.cfm&leg_type=Acts&isbncln=9780779746996)
- **Nursing Homes Act:**  
[http://www.qp.alberta.ca/574.cfm?page=N07.cfm&leg\\_type=Acts&isbncln=0779705394](http://www.qp.alberta.ca/574.cfm?page=N07.cfm&leg_type=Acts&isbncln=0779705394)
- **Nursing Homes General Regulation:**  
[http://www.qp.alberta.ca/574.cfm?page=1985\\_232.cfm&leg\\_type=Regs&isbncln=9780779723881](http://www.qp.alberta.ca/574.cfm?page=1985_232.cfm&leg_type=Regs&isbncln=9780779723881)
- **Nursing Homes Operation Regulation:**  
[http://www.qp.alberta.ca/574.cfm?page=1985\\_258.cfm&leg\\_type=Regs&isbncln=9780779735518](http://www.qp.alberta.ca/574.cfm?page=1985_258.cfm&leg_type=Regs&isbncln=9780779735518)

## Building Code Requirements

- Refer to your local municipality bylaws for development and/or building permits.
- **Permit Information Search:** enables searching by municipality to determine who to contact for fire, building, gas, plumbing or electrical permit.  
[http://www.municipalaffairs.alberta.ca/cp\\_permit\\_information\\_search.cfm](http://www.municipalaffairs.alberta.ca/cp_permit_information_search.cfm)

## Safety Requirements

- **Institutions Regulation:** governs requirements for institutions with 4 or more persons receiving care.  
[http://www.qp.alberta.ca/574.cfm?page=1981\\_143.cfm&leg\\_type=Regs&isbncln=0773226044](http://www.qp.alberta.ca/574.cfm?page=1981_143.cfm&leg_type=Regs&isbncln=0773226044)
- **Snow and Ice Removal Services:** Sample of process used by Alberta Infrastructure.  
[http://www.infrastructure.alberta.ca/Content/docType486/Production/01\\_93\\_51PMS.doc](http://www.infrastructure.alberta.ca/Content/docType486/Production/01_93_51PMS.doc)

## Maintenance Requirements

- **Safety Codes Act and Regulations:** provides a link to the *Act* and the associated Regulations which govern some aspects of building maintenance.  
[http://www.qp.alberta.ca/1266.cfm?page=s01.cfm&leg\\_type=Acts&isbncln=9780779769773](http://www.qp.alberta.ca/1266.cfm?page=s01.cfm&leg_type=Acts&isbncln=9780779769773)
- **Technical Resource Centre:** Samples of processes used by Alberta Infrastructure for maintenance of structures. <http://www.infrastructure.alberta.ca/3543.htm>
- **Alberta Boilers Safety Association:** information regarding education and legislation related to pressure equipment. <http://www.absa.ca/>

## Environmental Requirements

- **Institutions Regulation:** governs requirements for institutions with 4 or more persons receiving care.  
[http://www.qp.alberta.ca/574.cfm?page=1981\\_143.cfm&leg\\_type=Regs&isbncln=0773226044](http://www.qp.alberta.ca/574.cfm?page=1981_143.cfm&leg_type=Regs&isbncln=0773226044)

## Personal Choice Services

- **Personal Services Regulation:** This Regulation under the *Public Health Act* governs the requirements of personal service professionals.  
[http://www.qp.alberta.ca/574.cfm?page=2003\\_020.cfm&leg\\_type=Regs&isbncln=0779716795](http://www.qp.alberta.ca/574.cfm?page=2003_020.cfm&leg_type=Regs&isbncln=0779716795)
- **Alberta Health Standards and Guidelines for Barbering and Hairstyling:** Guidelines specific to hairdressers and barbers.  
<http://www.health.alberta.ca/documents/Standards-Barber-Hairstyling.pdf>
- **Massage Therapist Association of Alberta:** information pertaining to practicing Massage Therapy in Alberta  
<http://www.mtaalberta.com/?page=103>
- **Health Professions Act:** link to the *Act* and associated Regulations that govern Health Professionals in Alberta.  
[http://www.qp.alberta.ca/1266.cfm?page=H07.cfm&leg\\_type=Acts&isbncln=9780779766192](http://www.qp.alberta.ca/1266.cfm?page=H07.cfm&leg_type=Acts&isbncln=9780779766192)

## Insurance

- **Insurance Act:**  
[http://www.qp.alberta.ca/574.cfm?page=i03.cfm&leg\\_type=Acts&isbncln=9780779743629](http://www.qp.alberta.ca/574.cfm?page=i03.cfm&leg_type=Acts&isbncln=9780779743629)
- **Insurance Bureau of Canada:** provides information regarding the insurance industry and descriptors on types of insurance. <http://www.ibc.ca/>

## Contracted Services

- **Apprenticeship and Industry Training Act:** provides a link to the *Act* and its associated Regulations which regulates Trades in Alberta.  
[http://www.qp.alberta.ca/1266.cfm?page=A42.cfm&leg\\_type=Acts&isbncln=9780779752232](http://www.qp.alberta.ca/1266.cfm?page=A42.cfm&leg_type=Acts&isbncln=9780779752232)
- **Canada Home Builder's Association:** Information on writing a contract.  
<http://www.hiringcontractor.com/>

## Social or Leisure Activities

- See local municipality or community associations for local programming guides.
- **Culture and Community Spirit:** cultural events around Alberta.  
<http://culture.alberta.ca/events/default.aspx>
- **Therapeutic Activity Directory:** provides a listing of activity ideas.  
<http://www.recreationtherapy.com/tx/actindex.htm>
- **Alberta Therapeutic Recreation Association:** Information on the profession of therapeutic recreation in Alberta.  
<http://www.alberta-tr.org/pages/home/default.aspx>
- **Leisure Information Network:** a recreation database has a collection of journals and books with information relevant to different ages and disability groups.  
<http://lin.ca/htdocs/about.cfm>

## Menu and Nutritional Requirements

- **Health Canada:** Eating Well with the Canada Food Guide.  
<http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/index-eng.php>
- **Alberta Healthy U:** information and resources on healthy eating.  
<http://www.healthyalberta.com/>
- **Nursing Homes Operation Regulation:**  
[http://www.qp.alberta.ca/574.cfm?page=1985\\_258.cfm&leg\\_type=Regs&isbncln=9780779735518](http://www.qp.alberta.ca/574.cfm?page=1985_258.cfm&leg_type=Regs&isbncln=9780779735518)

## Cleaning Requirements

- **Alberta Infection Prevention and Control Strategy**  
<http://www.health.alberta.ca/documents/IPC-Alberta-Strategy-2008.pdf>
- **Alberta Hand Hygiene Strategy**  
<http://www.health.alberta.ca/documents/IPC-Hand-Hygiene-Strategy-2008.pdf>
- **Alberta Infrastructure:** sample caretaking services task schedule.  
[http://www.infrastructure.alberta.ca/Content/docType486/Production/00\\_01\\_21\\_1PMS.doc](http://www.infrastructure.alberta.ca/Content/docType486/Production/00_01_21_1PMS.doc)

- **Alberta Infection Prevention and Control**  
<http://www.albertahealthservices.ca/ipc/hi-ipc-resource-manual-main-document.pdf>

## Continuation of Services

- **Alberta Emergency Management Agency Resources:**  
Alberta Emergency Management Agency (1-780-422-9000)  
<http://aema.alberta.ca/>  
Alberta's Emergency Plan:  
[http://www.aema.alberta.ca/ps\\_alberta\\_emergency\\_plan.cfm](http://www.aema.alberta.ca/ps_alberta_emergency_plan.cfm)  
Basic Emergency Management Online Course  
<http://apsts.alberta.ca/online-courses/>
- **Public Safety Canada:** Emergency Preparedness Guide  
<http://www.getprepared.gc.ca/cnt/rsrscs/pblctns/yprprdnssgd/index-eng.aspx>
- **Health Canada:** information on extreme heat events.  
<http://www.healthycanadians.gc.ca/healthy-living-vie-saine/environnement/environnement/sun-soleil/heat-extreme-chaleur-eng.php>

## Prevention of Abuse

- **Alberta Seniors Resources:**  
*Protection for Persons in Care Act*  
[http://www.qp.alberta.ca/1266.cfm?page=P29P1.cfm&leg\\_type=Acts&isbncln=9780779749904](http://www.qp.alberta.ca/1266.cfm?page=P29P1.cfm&leg_type=Acts&isbncln=9780779749904)  
*Protection for Persons in Care*  
<http://www.health.alberta.ca/services/protection-persons-care.html>  
**Adult Safeguards poster**  
<http://www.health.alberta.ca/documents/PPC-Poster.pdf>  
**Financial abuse of seniors fact sheet**  
<http://www.health.alberta.ca/documents/ElderAbuse-Financial-Abuse-Facts.pdf>  
**Elder abuse prevention resources**  
<http://www.health.alberta.ca/seniors/elder-abuse.html>
- **Abuse reporting phone numbers:**  
Protection for Persons in Care Reporting Line 1-888-357-9339  
Calgary Kerby Elder Abuse Line Phone: 403-705-3250 (24 hours)  
Edmonton Seniors Abuse Help Line Phone: 780-454-8888 (24 hours)  
Edmonton Elder Abuse Intervention Team: 780-477-2929

- Red Deer Helping Elder Abuse Reduction Resource Information Line: 403-346-6076  
or 1-877-454-2580 toll-free (24 hours)
- Lethbridge Senior Citizens Organization Phone: 403-320-2222 (Ext 25)
- Medicine Hat Community Response to Abuse and Neglect of Elders (CRANE)  
Phone: 403-529-4798 (24 hours)
- St. Albert Stop Abuse in Families: 780-459-0433
- Strathcona County Elder Abuse Line: 780-464-7233
- **Alberta Elder Abuse Awareness Network:** Knowledge, resources and tools about elder abuse amongst people who work with seniors. [www.albertaelderabuse.ca](http://www.albertaelderabuse.ca)
  - **Government of Canada:** Elder abuse information.  
<http://www.seniors.gc.ca/eng/pic/ea/elderabuse.shtml>
  - **Royal Canadian Mounted Police**  
<http://www.rcmp-grc.gc.ca/>
  - **Legal Resource Centre:** Abuse of Older Adults.  
<http://www.law-faqs.org/docs/AbuseThirdEdAugFINAL.pdf>
  - **Elder Advocates Of Alberta Society**  
<http://elderadvocates.ca/what-is-elder-abuse/>
  - **Alberta Council on Aging:** A service provider's resource manual for elder abuse in Alberta.  
<http://www.acaging.ca/uploads/files/Program%20PDF/ACA%20Multicultural%20Booklet--Text-FINAL-2012.pdf>

## Resident Safety and Security

- See manufacturer's information for security, emergency call and communication systems.
- **Alzheimer's Society:** information on searching for missing persons with dementia.  
<http://www.alzheimer.ca/en/We-can-help/Resources/Alzheimer-Society-brochures-and-publications>

## Trust Accounts

- **Nursing Homes Operation Regulation:**  
[http://www.qp.alberta.ca/574.cfm?page=1985\\_258.cfm&leg\\_type=Regs&isbncln=9780779735518](http://www.qp.alberta.ca/574.cfm?page=1985_258.cfm&leg_type=Regs&isbncln=9780779735518)

## Corporate Status

- ***Business Corporations Act***  
[http://www.qp.alberta.ca/574.cfm?page=B09.cfm&leg\\_type=Acts&isbncln=9780779743476](http://www.qp.alberta.ca/574.cfm?page=B09.cfm&leg_type=Acts&isbncln=9780779743476)
- ***Cooperatives Act***  
[http://www.qp.alberta.ca/574.cfm?page=C28P1.cfm&leg\\_type=Acts&isbncln=9780779743513](http://www.qp.alberta.ca/574.cfm?page=C28P1.cfm&leg_type=Acts&isbncln=9780779743513)
- ***Companies Act***  
[http://www.qp.alberta.ca/574.cfm?page=c21.cfm&leg\\_type=Acts&isbncln=9780779746361](http://www.qp.alberta.ca/574.cfm?page=c21.cfm&leg_type=Acts&isbncln=9780779746361)
- ***Partnership Act***  
[http://www.qp.alberta.ca/574.cfm?page=P03.cfm&leg\\_type=Acts&isbncln=9780779744442](http://www.qp.alberta.ca/574.cfm?page=P03.cfm&leg_type=Acts&isbncln=9780779744442)
- ***Societies Act***  
[http://www.qp.alberta.ca/574.cfm?page=S14.cfm&leg\\_type=Acts&isbncln=0779726936](http://www.qp.alberta.ca/574.cfm?page=S14.cfm&leg_type=Acts&isbncln=0779726936)

## Water Temperature

- **Power Engineers Regulation** under the *Safety Codes Act*.  
[http://www.qp.alberta.ca/574.cfm?page=2003\\_085.cfm&leg\\_type=Regs&isbncln=0779736435](http://www.qp.alberta.ca/574.cfm?page=2003_085.cfm&leg_type=Regs&isbncln=0779736435)
- **Alberta Building Code**: link to purchase the Code.  
[http://www.qp.alberta.ca/1266.cfm?page=2007\\_117.cfm&leg\\_type=Regs&isbncln=9780779769070](http://www.qp.alberta.ca/1266.cfm?page=2007_117.cfm&leg_type=Regs&isbncln=9780779769070)
- **Institutions Regulation**: governs requirements for institutions with 4 or more persons receiving care.  
[http://www.qp.alberta.ca/574.cfm?page=1981\\_143.cfm&leg\\_type=Regs&isbncln=0773226044](http://www.qp.alberta.ca/574.cfm?page=1981_143.cfm&leg_type=Regs&isbncln=0773226044)
- **Arjo Therapeutic Tubs**: manufacturer of therapeutic tubs.  
<http://www.arjoHuntleigh.com>
- **Apollo**: manufacturer of therapeutic tubs.  
<http://www.apollobath.com/>

## General Information

- **Alberta Supports**: provincial information about programs and services  
<http://www.programs.alberta.ca/Living/13765.aspx?Ns=13705&N=770>
- **Active Living Coalition for Older Adults**: Resource Directory 2008  
[http://www.alcoa.ca/e/pdf/resource\\_directory\\_2008.pdf](http://www.alcoa.ca/e/pdf/resource_directory_2008.pdf)



- **Alberta Government Programs and Services:** Community Resources  
<http://www.programs.alberta.ca/Living/9546.aspx?Ns=9551+9574&N=770>
- **Seniors Association of Greater Edmonton (SAGE)**  
<http://www.mysage.ca/about-us>
- **Seniors Programs and Services Guide**  
<http://www.seniors.alberta.ca/documents/Seniors-ProgramsServicesGuide.pdf>
- **Senior Financial Assistance:** link to information on special needs assistance, dental assistance and optical assistance.  
<http://www.seniors.alberta.ca/seniors/financial-assistance.html>
- **Alberta Aids to Daily Living (AADL)**  
<http://www.health.alberta.ca/services/aids-to-daily-living.html>
- **Service Canada:** Services for seniors.  
<http://www.servicecanada.gc.ca/eng/audiences/seniors/index.shtml>
- **Assured Income for the Severely Handicapped (AISH).**  
<http://humanservices.alberta.ca/disability-services/aish.html>
- **Alberta Continuing Care Association:** <http://www.ab-cca.ca/>

### Information Respecting the Long-term Care Accommodation

- ***Nursing Homes Act:***  
[http://www.qp.alberta.ca/574.cfm?page=N07.cfm&leg\\_type=Acts&isbncln=0779705394](http://www.qp.alberta.ca/574.cfm?page=N07.cfm&leg_type=Acts&isbncln=0779705394)
- **Nursing Homes General Regulation:**  
[http://www.qp.alberta.ca/574.cfm?page=1985\\_232.cfm&leg\\_type=Regs&isbncln=9780779723881](http://www.qp.alberta.ca/574.cfm?page=1985_232.cfm&leg_type=Regs&isbncln=9780779723881)
- **Nursing Homes Operation Regulation:**  
[http://www.qp.alberta.ca/574.cfm?page=1985\\_258.cfm&leg\\_type=Regs&isbncln=9780779735518](http://www.qp.alberta.ca/574.cfm?page=1985_258.cfm&leg_type=Regs&isbncln=9780779735518)
- **Sample residential service agreements:**  
[http://www.health.state.ny.us/facilities/assisted\\_living/docs/model\\_residency\\_agreement.pdf](http://www.health.state.ny.us/facilities/assisted_living/docs/model_residency_agreement.pdf)  
<http://fourwindscommunitynh.org/Parents/Res%20Svcs%20Agrmt-Example.pdf>  
[http://www.manorhills.net/pdf/admission\\_agreement.pdf](http://www.manorhills.net/pdf/admission_agreement.pdf)

### Concerns and Complaints

- **Alberta Health Services:** Feedback form.  
<https://www.albertahealthservices.ca/273.asp>

## Criminal Record Check

- *Protections for Persons in Care Act*  
[http://www.qp.alberta.ca/1266.cfm?page=P29P1.cfm&leg\\_type=Acts&isbncln=9780779749904](http://www.qp.alberta.ca/1266.cfm?page=P29P1.cfm&leg_type=Acts&isbncln=9780779749904)
- **Royal Canadian Mounted Police**  
<http://www.rcmp-grc.gc.ca/>
- **BackCheck**  
<http://www.backcheck.net/>

## Privacy and Personal Information

- *Freedom of Information and Protection of Privacy Act*  
[http://www.qp.alberta.ca/574.cfm?page=F25.cfm&leg\\_type=Acts&isbncln=9780779743568](http://www.qp.alberta.ca/574.cfm?page=F25.cfm&leg_type=Acts&isbncln=9780779743568)
- **Freedom of Information and Protection of Privacy (FOIP) Guidelines and Practices Manual 2009**  
[http://www.qp.alberta.ca/570.cfm?frm\\_isbn=9780778585633&search\\_by=link](http://www.qp.alberta.ca/570.cfm?frm_isbn=9780778585633&search_by=link)
- *Personal Information Protection Act*  
<http://pipa.alberta.ca/index.cfm?page=legislation/act/index.html>
- *Health Information Act*  
[http://www.qp.alberta.ca/574.cfm?page=H05.cfm&leg\\_type=Acts&isbncln=9780779743575](http://www.qp.alberta.ca/574.cfm?page=H05.cfm&leg_type=Acts&isbncln=9780779743575)
- *Personal Information Protection and Electronic Documents Act* (PIPEDA)  
<http://laws.justice.gc.ca/eng/P-8.6/page-1.html>
- **Guide to PIPEDA**  
[http://www.priv.gc.ca/information/02\\_05\\_d\\_08\\_e.cfm](http://www.priv.gc.ca/information/02_05_d_08_e.cfm)
- *Nursing Homes Act:*  
[http://www.qp.alberta.ca/574.cfm?page=N07.cfm&leg\\_type=Acts&isbncln=0779705394](http://www.qp.alberta.ca/574.cfm?page=N07.cfm&leg_type=Acts&isbncln=0779705394)

## Job Descriptions

- **University of Alberta:** guidelines for writing job descriptions.  
<http://www.hrs.ualberta.ca/en/HiringandManaging/JobDesign/APO/WritingPositionDesc.aspx>

## Residents' Personal Affairs

- *Adult Guardianship and Trusteeship Act*  
[http://www.qp.alberta.ca/574.cfm?page=A04P2.cfm&leg\\_type=Acts&isbncln=9780779743797](http://www.qp.alberta.ca/574.cfm?page=A04P2.cfm&leg_type=Acts&isbncln=9780779743797)

- ***Personal Directives Act***  
[http://www.qp.alberta.ca/574.cfm?page=p06.cfm&leg\\_type=Acts&isbncln=9780779747368](http://www.qp.alberta.ca/574.cfm?page=p06.cfm&leg_type=Acts&isbncln=9780779747368)
- **Personal Directive Registry**  
<http://humanservices.alberta.ca/guardianship-trusteeship/opg-personal-directives-registry.html>
- ***Powers of Attorney Act***  
[http://www.qp.alberta.ca/574.cfm?page=p20.cfm&leg\\_type=Acts&isbncln=9780779743735](http://www.qp.alberta.ca/574.cfm?page=p20.cfm&leg_type=Acts&isbncln=9780779743735)

### **Other Provincial Standards**

- **Continuing Care Health Service Standards:**  
<http://www.health.alberta.ca/services/continuing-care.html>

## Resource ~ Appendix A

### Accommodation Standard 16: Points to Consider when Developing Plans

This section outlines some scenarios that could occur at an accommodation that may result in the activation of a contingency plan. This section is not intended to be used as a template to create a plan nor is it considered to be best practice. Utilizing this section is not a requirement for compliance. This section is a resource only when developing a contingency plan for Accommodation Standard 16.

#### In This Section

Loss of electrical power	2
Loss of water	4
Loss of natural gas	5
Loss of telecommunications	6
Breakdown of essential equipment	7
Weather events and naturally occurring emergencies	8
Staff shortages / employment disputes	9
Evacuation / relocation	10
Disruption of meal service	11
Disruption of safety and security service	12
Disruption of cleaning service	13
Disruption of laundry/linen service	14
Disruption of maintenance service	15

#### Format Used

Questions to consider are listed under each emergency / disruption type. Questions will not apply to all accommodations, nor are they inclusive of all points an operator may need to consider.

#### Description of Headings Used

- At the start of an outage:** questions related to tasks that may need to be completed first following a disruption
- Determining cause of the disruption:** questions related to determining possible scenarios that may lead to a disruption
- Sheltering in place:** questions related to continuing to provide services at the same location
- Evacuation/relocation:** questions related to determining when or if evacuation is necessary
- Special Considerations:** questions specific to certain scenarios within the disruption
- Recovery:** questions related to recommencing with full service

## Loss of Electrical Power

At the start of an outage:																									
Consider	Who is responsible for ensuring that all residents are safe and accounted for?																								
	Who is responsible to determine the cause/potential length of the outage?																								
	What key contacts need to be informed of the disruption?																								
Sheltering in Place:																									
Consider	What equipment relies on power to operate? <table border="0" style="width: 100%; margin-left: 20px;"> <tr> <td><input type="checkbox"/> Heating system</td> <td><input type="checkbox"/> IT equipment</td> <td><input type="checkbox"/> Elevator</td> </tr> <tr> <td><input type="checkbox"/> Cooling system</td> <td><input type="checkbox"/> Safety and security equipment</td> <td><input type="checkbox"/> Washer and dryers</td> </tr> <tr> <td><input type="checkbox"/> Hot water heating</td> <td><input type="checkbox"/> Sanitation equipment</td> <td><input type="checkbox"/> Cleaning equipment</td> </tr> <tr> <td><input type="checkbox"/> Communication devices</td> <td><input type="checkbox"/> Food preparation equipment</td> <td><input type="checkbox"/> Oxygen concentrators</td> </tr> <tr> <td><input type="checkbox"/> Security systems</td> <td><input type="checkbox"/> Fridges, coolers and freezers</td> <td><input type="checkbox"/> Medical equipment</td> </tr> <tr> <td><input type="checkbox"/> Fire alarm system</td> <td><input type="checkbox"/> Food service equipment</td> <td><input type="checkbox"/> Resident care equipment</td> </tr> <tr> <td><input type="checkbox"/> Emergency call systems</td> <td><input type="checkbox"/> Other:</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Phones</td> <td></td> <td></td> </tr> </table>	<input type="checkbox"/> Heating system	<input type="checkbox"/> IT equipment	<input type="checkbox"/> Elevator	<input type="checkbox"/> Cooling system	<input type="checkbox"/> Safety and security equipment	<input type="checkbox"/> Washer and dryers	<input type="checkbox"/> Hot water heating	<input type="checkbox"/> Sanitation equipment	<input type="checkbox"/> Cleaning equipment	<input type="checkbox"/> Communication devices	<input type="checkbox"/> Food preparation equipment	<input type="checkbox"/> Oxygen concentrators	<input type="checkbox"/> Security systems	<input type="checkbox"/> Fridges, coolers and freezers	<input type="checkbox"/> Medical equipment	<input type="checkbox"/> Fire alarm system	<input type="checkbox"/> Food service equipment	<input type="checkbox"/> Resident care equipment	<input type="checkbox"/> Emergency call systems	<input type="checkbox"/> Other:		<input type="checkbox"/> Phones		
	<input type="checkbox"/> Heating system	<input type="checkbox"/> IT equipment	<input type="checkbox"/> Elevator																						
	<input type="checkbox"/> Cooling system	<input type="checkbox"/> Safety and security equipment	<input type="checkbox"/> Washer and dryers																						
	<input type="checkbox"/> Hot water heating	<input type="checkbox"/> Sanitation equipment	<input type="checkbox"/> Cleaning equipment																						
	<input type="checkbox"/> Communication devices	<input type="checkbox"/> Food preparation equipment	<input type="checkbox"/> Oxygen concentrators																						
	<input type="checkbox"/> Security systems	<input type="checkbox"/> Fridges, coolers and freezers	<input type="checkbox"/> Medical equipment																						
	<input type="checkbox"/> Fire alarm system	<input type="checkbox"/> Food service equipment	<input type="checkbox"/> Resident care equipment																						
	<input type="checkbox"/> Emergency call systems	<input type="checkbox"/> Other:																							
	<input type="checkbox"/> Phones																								
Consider	If that equipment is not operational what services/functions are affected? <table border="0" style="width: 100%; margin-left: 20px;"> <tr> <td><input type="checkbox"/> Meal service</td> <td><input type="checkbox"/> Alerts/warnings</td> </tr> <tr> <td><input type="checkbox"/> Housekeeping service</td> <td><input type="checkbox"/> Temperature control</td> </tr> <tr> <td><input type="checkbox"/> Laundry service</td> <td><input type="checkbox"/> Resident mobility</td> </tr> <tr> <td><input type="checkbox"/> Safety and security service</td> <td><input type="checkbox"/> Access to resident information</td> </tr> <tr> <td><input type="checkbox"/> Resident care</td> <td><input type="checkbox"/> Other:</td> </tr> <tr> <td><input type="checkbox"/> Communications</td> <td></td> </tr> </table>	<input type="checkbox"/> Meal service	<input type="checkbox"/> Alerts/warnings	<input type="checkbox"/> Housekeeping service	<input type="checkbox"/> Temperature control	<input type="checkbox"/> Laundry service	<input type="checkbox"/> Resident mobility	<input type="checkbox"/> Safety and security service	<input type="checkbox"/> Access to resident information	<input type="checkbox"/> Resident care	<input type="checkbox"/> Other:	<input type="checkbox"/> Communications													
	<input type="checkbox"/> Meal service	<input type="checkbox"/> Alerts/warnings																							
	<input type="checkbox"/> Housekeeping service	<input type="checkbox"/> Temperature control																							
	<input type="checkbox"/> Laundry service	<input type="checkbox"/> Resident mobility																							
	<input type="checkbox"/> Safety and security service	<input type="checkbox"/> Access to resident information																							
	<input type="checkbox"/> Resident care	<input type="checkbox"/> Other:																							
	<input type="checkbox"/> Communications																								
<b>PLAN</b>	<b>For each identified service/function that may be lost, develop a contingency plan that reduces the impact of the loss/disruption for the residents.</b>																								
Evacuation/relocation – See <i>Evacuation/relocation</i>																									
Consider	At what point would evacuation/relocation be considered?																								
Special Considerations: Battery Back-ups																									
Consider	What equipment/devices have a battery backup?																								
	How long will the battery backup last for?																								
	What is the plan if the outage extends past the battery life of the equipment/devices?																								

Special Considerations: Generators	
Consider	Is there a generator on site?
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If an off-site generator will be used, where and how is it accessed?
	How does the generator start?
	<input type="checkbox"/> Automatically <input type="checkbox"/> Manually <ul style="list-style-type: none"> <li style="width: 50%;">▪ What if it does not start?</li> <li style="width: 50%;">▪ Who starts the generator?</li> <li style="width: 50%;">▪ How is it started?</li> </ul>
	How long will the generator provide power for?
	Which plugs/equipment will have power while the generator is operating?
	Where is additional fuel ordered from?
	What is the plan if the generator fails?
	What is the plan for any necessary services/equipment that does not receive generator power?
Recovery	
Consider	When service is restored, who is responsible to ensure that all equipment becomes operational again?

## Loss of Water

At the start of an outage:																
Consider	Who is responsible to determine the cause/potential length of the outage?															
	If the loss is internal, who should be contacted for repair?															
	What key contacts need to be informed of the disruption?															
Sheltering in Place:																
Consider	<p>What equipment/services rely on water to operate?</p> <table border="0"> <tr> <td><input type="checkbox"/> Heating system</td> <td><input type="checkbox"/> Sanitation</td> <td><input type="checkbox"/> Clothes washer</td> </tr> <tr> <td><input type="checkbox"/> Cooling system</td> <td><input type="checkbox"/> equipment (Food)</td> <td><input type="checkbox"/> Housekeeping</td> </tr> <tr> <td><input type="checkbox"/> Hot water heating</td> <td><input type="checkbox"/> Food preparation equipment</td> <td><input type="checkbox"/> Resident care equipment</td> </tr> <tr> <td><input type="checkbox"/> Toilet</td> <td><input type="checkbox"/> Food service equipment</td> <td><input type="checkbox"/> Other:</td> </tr> <tr> <td><input type="checkbox"/> Bath/shower/sinks</td> <td></td> <td></td> </tr> </table>	<input type="checkbox"/> Heating system	<input type="checkbox"/> Sanitation	<input type="checkbox"/> Clothes washer	<input type="checkbox"/> Cooling system	<input type="checkbox"/> equipment (Food)	<input type="checkbox"/> Housekeeping	<input type="checkbox"/> Hot water heating	<input type="checkbox"/> Food preparation equipment	<input type="checkbox"/> Resident care equipment	<input type="checkbox"/> Toilet	<input type="checkbox"/> Food service equipment	<input type="checkbox"/> Other:	<input type="checkbox"/> Bath/shower/sinks		
	<input type="checkbox"/> Heating system	<input type="checkbox"/> Sanitation	<input type="checkbox"/> Clothes washer													
<input type="checkbox"/> Cooling system	<input type="checkbox"/> equipment (Food)	<input type="checkbox"/> Housekeeping														
<input type="checkbox"/> Hot water heating	<input type="checkbox"/> Food preparation equipment	<input type="checkbox"/> Resident care equipment														
<input type="checkbox"/> Toilet	<input type="checkbox"/> Food service equipment	<input type="checkbox"/> Other:														
<input type="checkbox"/> Bath/shower/sinks																
	<p>If that equipment is not operational what services/functions are affected?</p> <table border="0"> <tr> <td><input type="checkbox"/> Meal service</td> <td><input type="checkbox"/> Temperature control</td> </tr> <tr> <td><input type="checkbox"/> Housekeeping service</td> <td><input type="checkbox"/> Sanitation</td> </tr> <tr> <td><input type="checkbox"/> Laundry service</td> <td><input type="checkbox"/> Hydration</td> </tr> <tr> <td><input type="checkbox"/> Resident care</td> <td><input type="checkbox"/> Other:</td> </tr> </table>	<input type="checkbox"/> Meal service	<input type="checkbox"/> Temperature control	<input type="checkbox"/> Housekeeping service	<input type="checkbox"/> Sanitation	<input type="checkbox"/> Laundry service	<input type="checkbox"/> Hydration	<input type="checkbox"/> Resident care	<input type="checkbox"/> Other:							
<input type="checkbox"/> Meal service	<input type="checkbox"/> Temperature control															
<input type="checkbox"/> Housekeeping service	<input type="checkbox"/> Sanitation															
<input type="checkbox"/> Laundry service	<input type="checkbox"/> Hydration															
<input type="checkbox"/> Resident care	<input type="checkbox"/> Other:															
<b>PLAN</b>	<b>For each identified service/function that may be affected develop a contingency plan that reduces the impact of the loss/disruption for the residents.</b>															
Evacuation/relocation – See <i>Evacuation/relocation</i>																
Consider	At what point would evacuation/relocation be considered?															
Special Considerations: Water Storage																
Consider	<p>Is extra water stored on site?</p> <table border="0"> <tr> <td><input type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td> <ul style="list-style-type: none"> <li>How much extra water is stored on site?</li> <li>Where is the water stored?</li> </ul> </td> <td> <ul style="list-style-type: none"> <li>Where can water be accessed?</li> <li>Are any agreements in place for priority delivery?</li> <li>What is the plan until the water arrives?</li> <li>When the water arrives, where will it be stored?</li> </ul> </td> </tr> </table>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<ul style="list-style-type: none"> <li>How much extra water is stored on site?</li> <li>Where is the water stored?</li> </ul>	<ul style="list-style-type: none"> <li>Where can water be accessed?</li> <li>Are any agreements in place for priority delivery?</li> <li>What is the plan until the water arrives?</li> <li>When the water arrives, where will it be stored?</li> </ul>											
	<input type="checkbox"/> Yes	<input type="checkbox"/> No														
	<ul style="list-style-type: none"> <li>How much extra water is stored on site?</li> <li>Where is the water stored?</li> </ul>	<ul style="list-style-type: none"> <li>Where can water be accessed?</li> <li>Are any agreements in place for priority delivery?</li> <li>What is the plan until the water arrives?</li> <li>When the water arrives, where will it be stored?</li> </ul>														
	What should the water be used for during an outage?															
	What is the plan when the water supply is depleted?															
Recovery																
CONSIDER	When service is restored, who is responsible to ensure that all equipment becomes operational again?															

## Loss of Natural Gas

At the start of an outage:	
Consider	Who is responsible to determine the cause/potential length of the outage?
	If the loss is internal, who should be contacted for repair?
	What key contacts need to be informed of the disruption?
Sheltering in Place:	
Consider	What equipment relies on natural gas to operate? <input type="checkbox"/> Heating system <input type="checkbox"/> Hot water heating <input type="checkbox"/> Clothes dryers <input type="checkbox"/> Cooling system <input type="checkbox"/> Food preparation <input type="checkbox"/> Other: <input type="checkbox"/> Fireplace      equipment
	If that equipment is not operational what services/functions are lost/affected? <input type="checkbox"/> Meal service <input type="checkbox"/> Temperature control <input type="checkbox"/> Laundry service <input type="checkbox"/> Resident care <input type="checkbox"/> Other:
<b>PLAN</b>	<b>For each identified service/function that may be lost develop a contingency plan that reduces the impact of the loss for the residents.</b>
Evacuation/relocation – See <i>Evacuation/relocation</i>	
Consider	At what point would evacuation/relocation be considered?
Recovery	
Consider	When service is restored, who is responsible to ensure that all equipment becomes operational again?



## Loss of Telecommunications

At the start of an outage:	
Consider	Who is responsible to determine the cause/potential length of the outage?
	If the loss is internal, who should be contacted for repair?
	What key contacts need to be informed of the disruption?
Sheltering in Place:	
Consider	What telecommunication services are used? <input type="checkbox"/> Phone (landline) <input type="checkbox"/> Internet <input type="checkbox"/> Phone (cell) <input type="checkbox"/> Intranet <input type="checkbox"/> Cable <input type="checkbox"/> Computer services
	What equipment relies on telecommunications to operate? <input type="checkbox"/> Communication devices <input type="checkbox"/> Phones <input type="checkbox"/> Resident care equipment <input type="checkbox"/> Security systems <input type="checkbox"/> Fax <input type="checkbox"/> Other: <input type="checkbox"/> Fire alarm system <input type="checkbox"/> Safety and security equipment <input type="checkbox"/> Emergency call systems <input type="checkbox"/> Computer equipment
	If that equipment is not operational what services/functions are lost/affected? <input type="checkbox"/> Safety and security service <input type="checkbox"/> Communications <input type="checkbox"/> Resident care <input type="checkbox"/> Alerts/warnings <input type="checkbox"/> Access to information <input type="checkbox"/> Temperature control <input type="checkbox"/> Other:
<b>PLAN</b>	<b>For each identified service/function that may be lost develop a contingency plan that reduces the impact of the loss for the residents.</b>
Evacuation/relocation – See <i>Evacuation/relocation</i>	
Consider	At what point would evacuation/relocation be considered?
Special Considerations: Accessing Information	
Consider	What information may be inaccessible without a computer, internet or intranet? <input type="checkbox"/> Resident care information <input type="checkbox"/> Policies and procedures <input type="checkbox"/> Contingency plans <input type="checkbox"/> Forms <input type="checkbox"/> Contact lists <input type="checkbox"/> Emails <input type="checkbox"/> Supply lists <input type="checkbox"/> Resources <input type="checkbox"/> To do lists <input type="checkbox"/> Other:
	What information is essential for employees to have access to in an emergency?
<b>PLAN</b>	<b>For each identified type of crucial information, where can the information also be found (paper based)?</b>
Recovery	
Consider	When service is restored, who is responsible to ensure that all equipment becomes operational again?

## Breakdown of Essential Equipment

At the start of an outage:																																		
Consider	Who is responsible for ensuring that all residents are safe, accounted for and are aware of any restrictions due to the breakdown?																																	
	Who is responsible to determine the cause/potential length of the outage?																																	
	Who is responsible to make or arrange for repairs to equipment?																																	
	What key contacts need to be informed of the disruption?																																	
Sheltering in Place:																																		
Consider	<p>What equipment is contained within the accommodation?</p> <table border="0"> <tr> <td><input type="checkbox"/> Heating system</td> <td><input type="checkbox"/> Safety and security equipment</td> <td><input type="checkbox"/> Grounds maintenance equipment</td> </tr> <tr> <td><input type="checkbox"/> Cooling system</td> <td><input type="checkbox"/> Sanitation equipment</td> <td><input type="checkbox"/> Transportation equipment</td> </tr> <tr> <td><input type="checkbox"/> Hot water heating</td> <td><input type="checkbox"/> Food preparation equipment</td> <td><input type="checkbox"/> Resident care equipment</td> </tr> <tr> <td><input type="checkbox"/> Water pumps</td> <td><input type="checkbox"/> Fridges, coolers and freezers</td> <td><input type="checkbox"/> Lifts</td> </tr> <tr> <td><input type="checkbox"/> Elevator</td> <td><input type="checkbox"/> Food service equipment</td> <td><input type="checkbox"/> Therapeutic tubs</td> </tr> <tr> <td><input type="checkbox"/> Generator</td> <td><input type="checkbox"/> Washer and dryers</td> <td><input type="checkbox"/> Oxygen concentrators</td> </tr> <tr> <td><input type="checkbox"/> Communication devices</td> <td><input type="checkbox"/> Cleaning equipment</td> <td><input type="checkbox"/> Other:</td> </tr> <tr> <td><input type="checkbox"/> Security systems</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Fire alarm system</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Emergency call systems</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Phones</td> <td></td> <td></td> </tr> </table>	<input type="checkbox"/> Heating system	<input type="checkbox"/> Safety and security equipment	<input type="checkbox"/> Grounds maintenance equipment	<input type="checkbox"/> Cooling system	<input type="checkbox"/> Sanitation equipment	<input type="checkbox"/> Transportation equipment	<input type="checkbox"/> Hot water heating	<input type="checkbox"/> Food preparation equipment	<input type="checkbox"/> Resident care equipment	<input type="checkbox"/> Water pumps	<input type="checkbox"/> Fridges, coolers and freezers	<input type="checkbox"/> Lifts	<input type="checkbox"/> Elevator	<input type="checkbox"/> Food service equipment	<input type="checkbox"/> Therapeutic tubs	<input type="checkbox"/> Generator	<input type="checkbox"/> Washer and dryers	<input type="checkbox"/> Oxygen concentrators	<input type="checkbox"/> Communication devices	<input type="checkbox"/> Cleaning equipment	<input type="checkbox"/> Other:	<input type="checkbox"/> Security systems			<input type="checkbox"/> Fire alarm system			<input type="checkbox"/> Emergency call systems			<input type="checkbox"/> Phones		
	<input type="checkbox"/> Heating system	<input type="checkbox"/> Safety and security equipment	<input type="checkbox"/> Grounds maintenance equipment																															
	<input type="checkbox"/> Cooling system	<input type="checkbox"/> Sanitation equipment	<input type="checkbox"/> Transportation equipment																															
<input type="checkbox"/> Hot water heating	<input type="checkbox"/> Food preparation equipment	<input type="checkbox"/> Resident care equipment																																
<input type="checkbox"/> Water pumps	<input type="checkbox"/> Fridges, coolers and freezers	<input type="checkbox"/> Lifts																																
<input type="checkbox"/> Elevator	<input type="checkbox"/> Food service equipment	<input type="checkbox"/> Therapeutic tubs																																
<input type="checkbox"/> Generator	<input type="checkbox"/> Washer and dryers	<input type="checkbox"/> Oxygen concentrators																																
<input type="checkbox"/> Communication devices	<input type="checkbox"/> Cleaning equipment	<input type="checkbox"/> Other:																																
<input type="checkbox"/> Security systems																																		
<input type="checkbox"/> Fire alarm system																																		
<input type="checkbox"/> Emergency call systems																																		
<input type="checkbox"/> Phones																																		
	Of the equipment listed which are essential to maintain services to residents?																																	
	<p>If that equipment is not operational what services/functions are lost/affected?</p> <table border="0"> <tr> <td><input type="checkbox"/> Meal service</td> <td><input type="checkbox"/> Communications</td> </tr> <tr> <td><input type="checkbox"/> Housekeeping service</td> <td><input type="checkbox"/> Alerts/warnings</td> </tr> <tr> <td><input type="checkbox"/> Laundry service</td> <td><input type="checkbox"/> Maintenance services</td> </tr> <tr> <td><input type="checkbox"/> Safety and security service</td> <td><input type="checkbox"/> Temperature control</td> </tr> <tr> <td><input type="checkbox"/> Resident care</td> <td><input type="checkbox"/> Resident mobility</td> </tr> <tr> <td><input type="checkbox"/> Emergency services</td> <td><input type="checkbox"/> Other:</td> </tr> </table>	<input type="checkbox"/> Meal service	<input type="checkbox"/> Communications	<input type="checkbox"/> Housekeeping service	<input type="checkbox"/> Alerts/warnings	<input type="checkbox"/> Laundry service	<input type="checkbox"/> Maintenance services	<input type="checkbox"/> Safety and security service	<input type="checkbox"/> Temperature control	<input type="checkbox"/> Resident care	<input type="checkbox"/> Resident mobility	<input type="checkbox"/> Emergency services	<input type="checkbox"/> Other:																					
<input type="checkbox"/> Meal service	<input type="checkbox"/> Communications																																	
<input type="checkbox"/> Housekeeping service	<input type="checkbox"/> Alerts/warnings																																	
<input type="checkbox"/> Laundry service	<input type="checkbox"/> Maintenance services																																	
<input type="checkbox"/> Safety and security service	<input type="checkbox"/> Temperature control																																	
<input type="checkbox"/> Resident care	<input type="checkbox"/> Resident mobility																																	
<input type="checkbox"/> Emergency services	<input type="checkbox"/> Other:																																	
<b>PLAN</b>	<b>For the equipment identified as essential, develop a contingency plan that reduces the impact of the loss for the residents.</b>																																	
Consider	Who are the appropriate service personnel to repair/replace the equipment?																																	
	Does the contingency plan change seasonally (summer vs. winter)?																																	
Evacuation/relocation – See <i>Evacuation/relocation</i>																																		
Consider	At what point would evacuation/relocation be considered?																																	
Special Considerations: Back-ups / System Redundancies																																		
Consider	What equipment has a battery backup?																																	
	Which systems have redundancies built into them, so they will continue to operate even with the failure of one part/piece of equipment?																																	
	What special considerations may be needed when running on battery back-up or with reduced equipment?																																	

## Weather Events and Natural Occurring Emergencies

Determining what natural occurring emergencies may impact your accommodation:				
Consider	What natural occurring emergencies have or may occur in your area? <input type="checkbox"/> Thunderstorm <input type="checkbox"/> Blizzard <input type="checkbox"/> Heat wave <input type="checkbox"/> Hailstorm <input type="checkbox"/> Ice storm <input type="checkbox"/> Wildfire <input type="checkbox"/> Tornado <input type="checkbox"/> Avalanche <input type="checkbox"/> Other: <input type="checkbox"/> Flood <input type="checkbox"/> Extreme cold			
	In what situations would the accommodation: <input type="checkbox"/> Shelter in place? <input type="checkbox"/> Evacuate?			
	What key contacts need to be informed of the emergency/event?			
Sheltering in Place				
Consider	What is the safest place at the site for the residents to be during the event?			
	Do modifications to routines/structure need to be made for the duration of the event?			
	What disruptions may also occur as a result of the emergency?			
	<table border="1"> <tr> <td> <input type="checkbox"/> Loss of power  <input type="checkbox"/> Loss of water  <input type="checkbox"/> Loss of natural gas  <input type="checkbox"/> Loss of telecommunication s                             </td> <td> <input type="checkbox"/> Site isolation  <input type="checkbox"/> Staff shortage  <input type="checkbox"/> Limited supplies  <input type="checkbox"/> Inaccessibility of emergency services                             </td> <td> <input type="checkbox"/> Loss of heating/cooling  <input type="checkbox"/> Other:                             </td> </tr> </table>	<input type="checkbox"/> Loss of power <input type="checkbox"/> Loss of water <input type="checkbox"/> Loss of natural gas <input type="checkbox"/> Loss of telecommunication s	<input type="checkbox"/> Site isolation <input type="checkbox"/> Staff shortage <input type="checkbox"/> Limited supplies <input type="checkbox"/> Inaccessibility of emergency services	<input type="checkbox"/> Loss of heating/cooling <input type="checkbox"/> Other:
	<input type="checkbox"/> Loss of power <input type="checkbox"/> Loss of water <input type="checkbox"/> Loss of natural gas <input type="checkbox"/> Loss of telecommunication s	<input type="checkbox"/> Site isolation <input type="checkbox"/> Staff shortage <input type="checkbox"/> Limited supplies <input type="checkbox"/> Inaccessibility of emergency services	<input type="checkbox"/> Loss of heating/cooling <input type="checkbox"/> Other:	
With these additional disruptions what services/functions may be affected? <input type="checkbox"/> Meal service <input type="checkbox"/> Communications <input type="checkbox"/> Housekeeping service <input type="checkbox"/> Alerts/warnings <input type="checkbox"/> Laundry service <input type="checkbox"/> Temperature control <input type="checkbox"/> Safety and security service <input type="checkbox"/> Resident mobility <input type="checkbox"/> Resident care <input type="checkbox"/> Other:				
<b>PLAN</b>	<b>For each identified service/function that may be lost develop a contingency plan that reduces the impact of the loss for the residents.</b>			
Evacuation/relocation – See <i>Evacuation/relocation</i>				
Consider	At what point would evacuation/relocation be considered?			
	What if evacuation/relocation was not possible to be completed as planned (eg. Roads impassable)?			
Recovery				
Consider	Once the emergency/weather event has passed what is necessary to return to full services and reduce further damage?			

## Staff Shortage/Employment Disputes

Determining potential causes of a staff disruption	
Consider	For what reasons may a staff shortage be likely to occur? <input type="checkbox"/> Lock out <input type="checkbox"/> Pandemic/sickness <input type="checkbox"/> Weather emergencies <input type="checkbox"/> Work to rule <input type="checkbox"/> Site isolation <input type="checkbox"/> Strike <input type="checkbox"/> Failure to fill <input type="checkbox"/> Other: positions
	Will the staff disruption result in: <input type="checkbox"/> No staff <input type="checkbox"/> No replacement staff <input type="checkbox"/> Reduced staff
	Do any employees/positions have specialized knowledge that is essential for the continued operation of the accommodation?
	Are staff cross-trained for these positions/specialized knowledge? Is written information available for reference?
	Will volunteers be used in any capacity and if so, who coordinates this assistance and what training or support would be required?
Sheltering in Place	
Consider	What services are offered by the accommodation? <input type="checkbox"/> Meal service <input type="checkbox"/> Safety and security <input type="checkbox"/> Social and leisure activities <input type="checkbox"/> Housekeeping service <input type="checkbox"/> Maintenance <input type="checkbox"/> Transportation service <input type="checkbox"/> Laundry service <input type="checkbox"/> Resident care <input type="checkbox"/> Medication service <input type="checkbox"/> Other
	What services are essential to continue at the same level that is being offered?
	What services may be offered at a reduced level?
	What services may be discontinued for the duration of the shortage?
<b>PLAN</b>	<b>For each identified service/function that may be lost develop a contingency plan that reduces the impact of the loss for the residents.</b>
Evacuation/relocation – See <i>Evacuation/relocation</i>	
Consider	Will family members / representatives be asked to take residents home?
	Who will be responsible for contacting family/representatives and making arrangements?
	What is the plan for those residents not staying with family/representatives?
Recovery	
Consider	What services are essential to recover first?
	Who will make contact with residents staying with family/representatives?

## Evacuation / Relocation

Preparing	
Consider	Where is the relocation site?
	Who has keys for the relocation site?
	Will residents stay at this site or be transported to another site for continuation of services?
	Does the relocation site meet the needs of the residents?
	Are multiple relocation sites necessary for residents with differing needs?
	What key contacts need to be informed of the evacuation/relocation?
	Will volunteers be used in any capacity and if so, who coordinates this assistance and what training or support would be required?
Evacuation	
Consider	If able, what items should be brought with residents to the evacuation site? <input type="checkbox"/> Medications <input type="checkbox"/> Food (including special diets) <input type="checkbox"/> Resident information (including important contacts) <input type="checkbox"/> Mobility aids <input type="checkbox"/> Clothing/Toiletries <input type="checkbox"/> Care equipment <input type="checkbox"/> Linens/blankets
	How will the residents be transported to the relocation site?
	If all residents are not on site who will be responsible for ensuring that the remaining residents are brought to the relocation site?
	Will some residents go home with family/representatives?
	Who will track which residents have left with family/representatives?
	Who will inform families / staff where the relocation site is situated?
Relocation Site	
Consider	What facilities/services are available at the relocation site? <input type="checkbox"/> Bathrooms <input type="checkbox"/> Cooking facilities <input type="checkbox"/> Accessible site <input type="checkbox"/> Food preparation, serving and eating equipment <input type="checkbox"/> Beds <input type="checkbox"/> Mobility equipment <input type="checkbox"/> Linens and towels <input type="checkbox"/> Sanitation equipment <input type="checkbox"/> Telecommunications equipment <input type="checkbox"/> Laundry equipment <input type="checkbox"/> Resident care equipment <input type="checkbox"/> Safety and security services
	What supplies are necessary to continue offering services at the relocation site?
	How will these supplies be made available/accessible at the relocation site?
	Are additional staff/volunteers required at the relocation site to provide services?
	What services are unavailable at the relocation site that will need to be arranged for?
	What services may be offered at a reduced level at the relocation site?
	What services may be discontinued for the duration of the relocation?
<b>PLAN</b>	<b>For each identified service/function that may be lost develop a contingency plan that reduces the impact of the loss for the residents.</b>

## Disruption of Meal Service

Determining the cause of the disruption:	
Consider	Consider potential causes of a disruption to meal services: <input type="checkbox"/> Staff shortage <input type="checkbox"/> Equipment <input type="checkbox"/> Loss of utilities <input type="checkbox"/> Site isolation                              breakdown <input type="checkbox"/> Other:
Sheltering in Place:	
Consider	How much food/beverages is kept on site? <input type="checkbox"/> Less than one day <input type="checkbox"/> 72 hours <input type="checkbox"/> 24-48 hours <input type="checkbox"/> 72 hours +
	Do changes need to be made on how much food/beverages are stored on site?
	Will alternate food suppliers need to be used during the disruption?
	What changes need to be made to the menu / meal service so that equipment/utilities are not needed?
	Will catering, take out or eating out be required?
	Who will be responsible for paying for eating out / take out?
<b>PLAN</b>	<b>For each identified disruption, develop a contingency plan that reduces the impact of the loss for the residents.</b>
Special Considerations: Alternate food preparation sites	
Consider	Is there an alternate site available where meals can be prepared?
	Have any arrangements been made to use the alternate site?
	How will meals be transported and appropriate temperatures maintained?
	What if transportation of food is not possible (eg. Roads are impassable)?
Special Considerations: Equipment	
Consider	Is there alternate equipment on site that can be used?
	Can replacement equipment be brought to the site?
Recovery	
Consider	Once the disruption is resolved, what steps are necessary to return to full meal service?









## Disruption of Maintenance Service

Determining the cause of the disruption:	
Consider	<p>Consider potential causes of a disruption to maintenance services:</p> <p><input type="checkbox"/> Staff not on site (external oversight of the site)      <input type="checkbox"/> Site isolation / pandemic</p> <p><input type="checkbox"/> Staff vacation / other leaves      <input type="checkbox"/> Staff shortage</p> <p><input type="checkbox"/> Other:</p>
Sheltering in Place:	
Consider	<p>What maintenance services are essential to continue?</p> <p><input type="checkbox"/> Snow and ice removal      <input type="checkbox"/> Monitoring equipment      <input type="checkbox"/> Monitoring temperatures</p> <p><input type="checkbox"/> Basic corrective maintenance      <input type="checkbox"/> Emergency response      <input type="checkbox"/> Daily checks</p> <p><input type="checkbox"/> Other</p>
<b>PLAN</b>	<b>For each identified disruption, develop a contingency plan that reduces the impact of the loss for the residents.</b>
Consider	Does cross-training need to occur for the continuation of services? Is written reference material available?
	What tasks can only be completed by qualified personnel?
	Do alternate suppliers/contractors need to be arranged for the completion of maintenance services?
	Who is responsible on an on-call basis?
	Is there any emergency response role that is specific to maintenance (fire marshal)?
	Do maintenance staff have essential items, such as keys to relocation sites, transportation equipment or rooms in the accommodation?
	Do maintenance staff have essential information such as passwords or access codes to electronic monitoring equipment or key areas?
Recovery	
Consider	Once the disruption is resolved, what steps are necessary to return to full services?

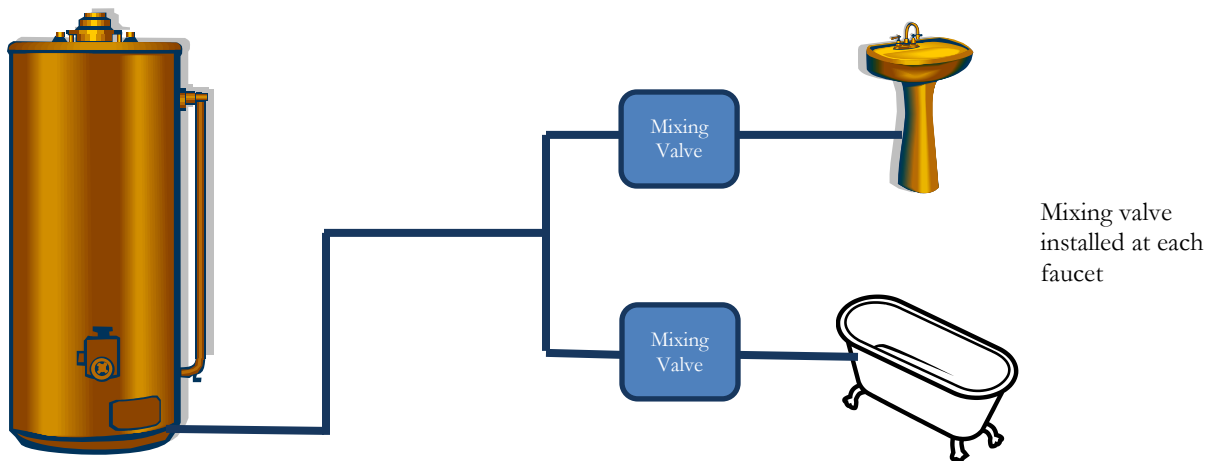
## Resources ~ Appendix B

### Water Temperature Safety ~ Water System Examples

#### Mixing Valves Installed at all Faucets

This is an ideal system to allow for the maintenance of a gas, oil fired or electric storage type water heater at 60°C or higher and the temperature from the faucets at 49°C or lower.

*Note:* Faucets that have a scald-free device (often seen in single lever faucets), are considered a mixing valve for this example.



21(1) Temperature measurement requirements

- Temperature needs to be taken from all faucets in the accommodation

#### Instantaneous Water Heater

This is an ideal system for maintaining temperatures safely without the installation of mixing valves. An instantaneous water heater can be safely operated at 49°C.



21(1) Temperature measurement requirements

- Temperature needs to be taken from any faucet in the accommodation

#### Mixing Valve Installed at the Source

This system allows the gas, oil fired or electric storage type water heater to be maintained at 60°C and the water from faucets at 49°C or lower. This system has increased risks, as the water within the lines is not maintained at 60°C. Risk mitigation to ensure that water is not standing for extended periods of time is recommended.



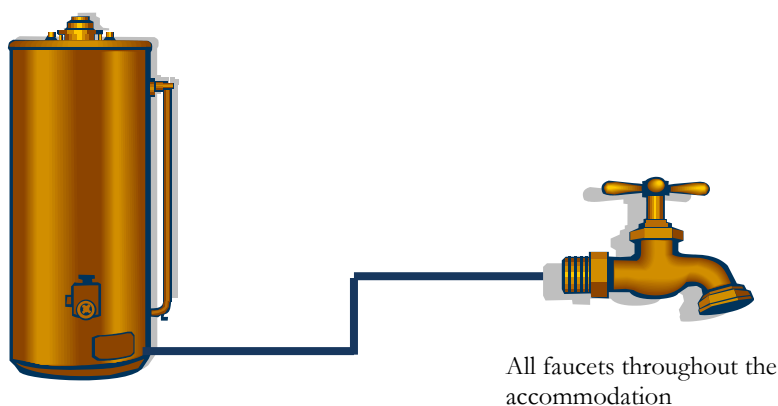
21(1) Temperature measurement requirements

- Temperature needs to be taken from any faucet in the accommodation

### No Mixing Valves

This system does not allow the gas or oil fired storage type water heater to be maintained at 60°C. In order to maintain water from faucets at 49°C, the storage type water heater temperature must also be reduced. This system has increased risks as the water in the tank and in the lines is not maintained at 60°C. Risk mitigation to ensure that water is not standing for extended periods of time and the tank is fully drained regularly is recommended.

*Note:* This example cannot be utilized for electric storage water heaters, as per the National Plumbing Code of Canada (2.6.1.12, 2010): 'Thermostat controls for electric storage-type service water heaters shall be set at a temperature of 60C.'



21(1) Temperature measurement requirements

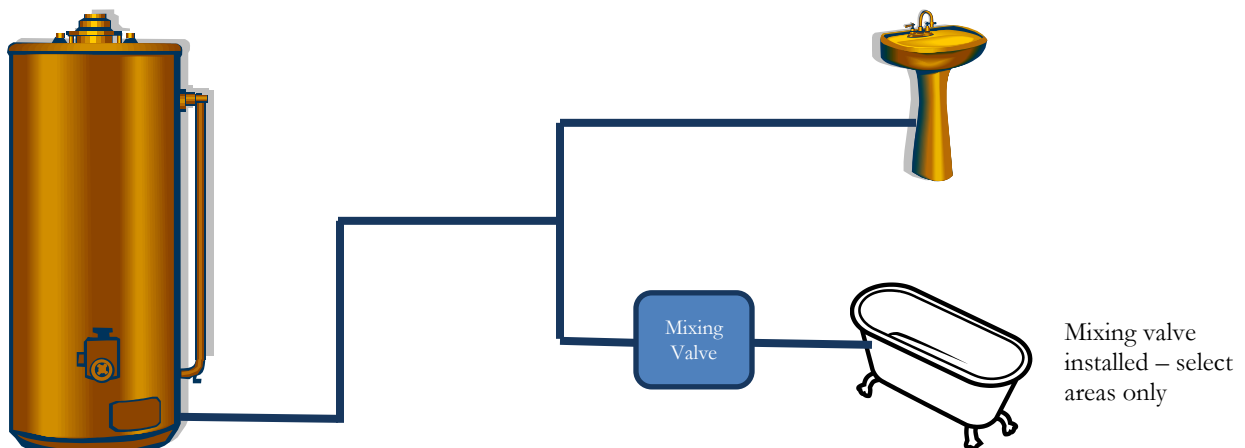
- Temperature needs to be taken from any faucet in the accommodation

### Mixing Valve Installed on Select Areas Only

This system does not allow the gas or oil fired storage type water heater temperature to be maintained at 60°C. In order to maintain water from faucets at 49°C, the storage type water heater temperature must also be reduced. This will compromise the function of any installed mixing valves. This system has increased risks as the water in the tank and in the lines is not maintained at 60°C. Risk mitigation to ensure that water is not standing for extended periods of time and the tank is fully drained regularly is recommended.

*Note:* Faucets that have a scald-free device (often seen in single lever faucets), are considered a mixing valve for this example.

This example cannot be utilized for electric storage water heaters, as per the National Plumbing Code of Canada (2.6.1.12, 2010): Thermostat controls for electric storage-type service water heaters shall be set at a temperature of 60C.



#### 21(1) Temperature measurement requirements

- Temperature needs to be taken at each mixing valve location and from any other faucet in the accommodation

#### **Re-Circulated Systems**

All of the above examples also apply to faucets located in systems utilizing re-circulation. These systems may be most appropriately protected when mixing valves are installed at faucets. Systems without mixing valves require caution to ensure that the minimum temperature of hot water storage tanks are maintained and consistent and safe temperatures are maintained at the outlet of each faucet.

## Forms

In this section the forms to be used in both supportive living and long-term care accommodations are provided.

### In This Section

Forms – Form names and electronic links are listed below. All current and updated forms can be found online at: <http://www.health.alberta.ca/services/continuing-care-forms.html>

#### Applications

##### **Eligibility for Licensing of Supportive Living Accommodation**

<http://www.health.alberta.ca/documents/CC-Supportive-Living-Eligibility.pdf>

##### **Supportive Living Licence Application**

<http://www.health.alberta.ca/documents/CC-Supportive-Living-Application.pdf>

##### **Long-Term Care Certificate Application**

<https://cfr.forms.gov.ab.ca/form/SCF0005.pdf>

#### Checklists

##### **Supportive Living Inspection Preparation Checklist**

<http://www.health.alberta.ca/documents/CC-Supportive-Living-Standards-2010.pdf>

##### **Long-term Care Inspection Preparation Checklist**

<http://www.health.alberta.ca/documents/CC-Long-Term-Care-Standards-2010.pdf>

##### **Complainant Decision Appeal Form**

<https://cfr.forms.gov.ab.ca/form/SCF5526.pdf>

##### **Reportable Incident Form**

<http://www.health.alberta.ca/documents/CC-Reportable-Incident-Form.pdf>

## Reportable Incidents

### In this Section

Both the Accommodation Standards and the Health Service Standards include a reportable incident component. To streamline this process for those operators that must follow both set of standards a coordinated Reportable Incident approach has been taken. In determining what form, example sheet and decision guide to use, please determine if you are:

- **Health Funded:** Includes accommodations or services that receive funding from Alberta Health Services. Includes Long-term care, designated supportive living, personal care homes, family care homes, home care and home living services.
- **Non-Health Funded:** Includes all other accommodations licensed under the *Supportive Living Accommodation Licensing Act* that are not funded by Alberta Health Services. Includes lodges, private assisted living, group homes (private and funded by Persons with Developmental Disabilities).

### Note

For fillable PDF form, please see:

<http://www.health.alberta.ca/services/continuing-care-forms.html>

The form will require the user to click either the Health-Funded or the Non-Health Funded checkbox prior to completing the form. Upon doing this, the appropriate step-by-step instructions will appear.

The following materials are provided to assist operators to determine what incidents are reportable.

**Decision Guide: Health Funded**

**Examples: Health Funded**

The following decision guides and examples can also be found on-line at:

<http://www.health.alberta.ca/documents/CC-Reportable-Incidents-Decision-Process.pdf>

# Reportable Incident Decision Guide: Health Funded Accommodations

Does the incident relate to the accommodation or health service standards and result in one of the following:

## Resident death or serious harm

Yes

Did the incident occur due to an error or omission in the provision of accommodation or health services?

No

Yes, Report

Did the incident occur due to an assault or aggression?

No

Yes, Report

Did the incident occur due to the accommodation, grounds or equipment being in disrepair, in an unsafe condition or used in an unsafe manner?

No, Not Reportable

Yes, Report

## Resident/Client unaccounted for

Yes

Did the resident's absence occur outside the limits set out in their assessment, individual plan or accommodation policy?

No

Yes, Report

Did the resident's absence occur as result of equipment or technology failure?

No

Yes, Report

Did the resident's absence occur as result of an error or omission of personnel?

No, Not Reportable

Yes, Report

## Unplanned activation of a contingency plan

Yes

Did the activation occur due to a loss of utilities?

No

Yes, Report

Did the activation occur due to a breakdown of essential equipment?

No

Yes, Report

Did the activation occur due to a staff disruption?

No

Yes, Report

Did the activation result in an evacuation?

No

Yes, Report

Did the activation occur due to severe weather?

No, Not Reportable

Yes, Report

## Extensive damage to the accommodation

Yes

Did the damage affect the ability to provide accommodation or health services?

No

Yes, Report

Did the damage require residents to be relocated (off site or within the site)?

No

Yes, Report

Is the accommodation, grounds or equipment in disrepair or in an unsafe condition?

No, Not Reportable

Yes, Report

**Serious Harm:** Physical or psychological injury which is life threatening and/or traumatic to the individual

**Extensive damage:** damage to the extent that the ability of the operator to continue to provide accommodation services and a safe and secure environment is affected

**Reportable Incidents are to be submitted to Alberta Health within two business days by the operator.**

Forms can be completed and submitted electronically at: <http://www.health.alberta.ca/services/continuing-care-forms.html>



### Health Funded Reportable Incident Examples

Resident Death or Serious Harm	Resident/Client Unaccounted for	Unplanned Activation of Contingency Plan	Extensive Damage to the Accommodation
<b>Examples of reportable incidents may include, but is not limited to:</b>			
<b>Error or Omissions</b> <ul style="list-style-type: none"> <li>○ Falls* (witnessed &amp; unwitnessed)</li> <li>○ Medication Errors (unsecured medications being ingested, missed medications, wrong client/dosage/medication/route/time)</li> <li>○ Risk agreement or care plan not adhered to</li> <li>○ Choking</li> <li>○ Burns, scalding</li> <li>○ Ingestion of chemicals/toxins</li> <li>○ Sharps injury</li> <li>○ Unexpected death</li> </ul>	<b>Resident absence</b> <ul style="list-style-type: none"> <li>○ Unexplained resident absence</li> <li>○ Abnormal extended absence of a resident</li> <li>○ Elopement</li> </ul>	<b>Loss of utilities</b> <ul style="list-style-type: none"> <li>○ Power</li> <li>○ Gas</li> <li>○ Water</li> <li>○ Telephone Service</li> </ul> <b>Breakdown of Essential Equipment</b> <ul style="list-style-type: none"> <li>○ Loss of heating equipment</li> <li>○ Loss of service equipment</li> <li>○ Loss of elevator</li> </ul>	<b>Services affected</b> <ul style="list-style-type: none"> <li>○ Flood (water main break, sprinkler system failure)</li> <li>○ Damage to section of building</li> </ul>
<b>Assault or Aggression</b> <ul style="list-style-type: none"> <li>○ Self harm</li> <li>○ Aggressive behaviour to others</li> <li>○ Sexual Assault</li> <li>○ Attempted suicide</li> </ul>	<b>Equipment or technology failure</b> <ul style="list-style-type: none"> <li>○ Failure of door alarms, roam alerts, or wanderguard</li> </ul>	<b>Staff Disruption</b> <ul style="list-style-type: none"> <li>○ Strike</li> <li>○ Site isolation</li> <li>○ Shortage</li> </ul> <b>Evacuation</b> <ul style="list-style-type: none"> <li>○ Full/Partial</li> </ul>	<b>Relocation</b> <ul style="list-style-type: none"> <li>○ Flood</li> <li>○ Fire</li> <li>○ Gas leak</li> <li>○ Overall building damage</li> </ul>
<b>Accommodation, Grounds, Equipment in disrepair/unsafe</b> <ul style="list-style-type: none"> <li>○ Equipment malfunction</li> <li>○ Operator error (in use of equipment)</li> <li>○ Ice or snow that has not been removed</li> <li>○ Injury due to disrepair</li> <li>○ Tripping hazards</li> </ul>	<b>Error or omission of personnel</b> <ul style="list-style-type: none"> <li>○ Failure of daily accounting systems</li> <li>○ Failure of site security</li> </ul>	<b>Severe Weather</b> <ul style="list-style-type: none"> <li>○ Tornado</li> <li>○ Summer or winter storms</li> <li>○ Excessive Heat</li> </ul>	<b>Unsafe conditions</b> <ul style="list-style-type: none"> <li>○ Roof leak/collapse</li> <li>○ Damage to section of building</li> </ul>

**\*Fall:** unintentionally coming to rest on the ground, floor or other lower level (definition as per AHS policy)

