

## **RESIDENTIAL FACILITY INSPECTION CHECKLIST**

This inspection Checklist provides a detailed list of the items that may be observed by a Licensing Officer during a routine facility inspection. This checklist is intended to assist Licensing staff during their inspections and is not part of the formal inspection report. Facility operators and staff may also use this checklist as a basic self-inspection tool.

Facility Na Facility Ac and Phone	ddress	Facility Number:	
Inspection	n Date(s):		
Complete	d by:		
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	<b>s</b> Community Care and Assisted Living Act minal Record Check		

DOLSOP = Director of Licensing's Standards of Practice MHO = Medical Health Officer

MSAC = Medication Safety and Advisory Committee

RCR = Residential Care Regulation

Note: Items marked with an asterisk \* must be reviewed by Licensing staff during each Routine Inspection.

I. PHYSICAL, EQUIPMENT AND FURNISHING Note: Regulations designated as [Transitioned] do not apply to facilities licensed prior to August 2000-unless structural renovations/additions present.

### **GENERAL PHYSICAL REQUIREMENTS**

Directional Assistance	Comments
Directional signs/information for assistance meets the needs of the persons in	
care [RCR Sec 13]	
Accessibility	Comments
Persons in care with a mobility aid are able to access all areas intended for their	
use [RCR Sec 14(1)]	
Controls for signalling devices, lights, elevators are accessible and used without	
difficulty [RCR Sec 14(3)]	
Controls are accessible	
Controls are not difficult to use	<b>0</b>
Windows	Comments
If necessary windows are secured in a manner that prevents a person in care	
from falling, or exiting [RCR Sec 15(1)]	0 amm an ta
 Temperature and Lighting	Comments
The temperature in bedroom(s), bathroom(s) and common room(s) are safe and	
comfortable [RCR Sec 16(1), (3)] Bedroom(s), bathroom(s) and common room(s) are lit sufficiently [RCR Sec	
<ul> <li>16(2)]</li> <li>Lighting is sufficient to carry out activities and for ordinary use</li> </ul>	
<ul> <li>Lighting is sufficient to protect health and safety</li> </ul>	
Water Temperature	Comments
Water accessible to a person in care, from any source, is not be heated to more	
than 49° Celsius [RCR Sec 17]	
Telephones	Comments
There is at least one accessible and conveniently located telephone, for use only	
by persons in care [RCR Sec 18]	
<ul> <li>Accessible at all times</li> </ul>	
<ul> <li>Adaptations available</li> </ul>	
<ul> <li>Accessible at all times</li> </ul>	
Monitoring, Signalling and Communication	Comments
If required there is a monitoring system or signalling device [RCR Sec 19(1)]	
<ul> <li>Meets the needs of the persons in care.</li> </ul>	
<ul> <li>Identifies to employees the location of the person in care</li> </ul>	

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	• Signal to employees that the person in care needs immediate assistance Appropriate communication devices and other means of communication are	
	provided [RCR Sec 19(2)]	
	<ul> <li>Are appropriate to meet needs</li> </ul>	
	<ul> <li>Enable persons in care to communicate their needs to employees</li> </ul>	
	<ul> <li>Enable employees to communicate with each other in respect of the</li> </ul>	
	needs of persons in care	
	<ul> <li>There is on display in a prominent place notice that electronic</li> </ul>	
	surveillance is being used [RCR Sec 19(3)]	
	Equipment and Furnishings	Comments
	Furniture and equipment meets the needs, of the persons in care, are compatible	
	with the health safety and dignity, are well maintained, and clean. [RCR Sec 21]	
	<ul> <li>Furniture meets the needs of the persons in care</li> </ul>	
	<ul> <li>Equipment meets the needs of the persons in care</li> </ul>	
	• Furniture is compatible with the health, safety and dignity of the persons	
	in care	
	<ul> <li>Equipment is compatible with the health, safety and dignity of the</li> </ul>	
	persons in care	
	<ul> <li>Furniture is maintained in a good state of repair</li> </ul>	
	<ul> <li>Equipment is maintained in a safe and clean condition</li> </ul>	
	Maintenance	Comments
	Rooms and common areas are well ventilated, in a good state of repair, safe and	
	clean condition [RCR Sec 22(1)]	
	<ul> <li>Rooms and common areas are well ventilated</li> </ul>	
	<ul> <li>Rooms and common areas are maintained in a good state of repair</li> </ul>	
	<ul> <li>Rooms and common areas are not maintained in a safe and clean</li> </ul>	
	condition	
	Emergency exits are not obstructed or secured in a manner that may hinder exit	
	in an emergency [RCR Sec 22(2)]	
	All rooms and common areas, emergency exits, equipment, and monitoring and	
	signalling devices are inspected and maintained on a regular basis [RCR Sec	
	22(3)]	
	Smoking	Comment
	At the facility only persons in care are permitted to smoke and if necessary are	
	supervised [RCR Sec 23 (a),(c)]	
	<ul> <li>Only persons in care smoke at the facility</li> </ul>	
_	• Persons in care are supervised as required	
	Employees do not smoke while supervising persons in care [RCR Sec 23(b)	
	Weapons	Comments
	Weapons within the meaning of the Criminal Code (Canada) are not permitted in	
	the facility [RCR Sec 24]	

BEDROOMS				
Bedroom Occupancy	Comments			
<ul> <li>When two persons in care are accommodated in a single bedroom the requirements of the Regulation are met [RCR Sec 25(2),(b),(c),(d)]</li> <li>The bedroom is screened in a manner that is sufficient to ensure the privacy and dignity of each occupant</li> <li>Measures are in place to protect the health, safety, personal comfort and dignity of each occupant</li> <li>There are plans for the occupants of double rooms to be transferred to single rooms on request</li> <li>In a Child and Youth Residential facility no person in care over 6 years old is accommodated in a bedroom that is shared with a person of the opposite gender [RCR Sec 25(3)]</li> </ul>				
Physical Requirements of Bedrooms	Comments			
Bedrooms meet the needs and provide for the health, safety and dignity of the occupant [RCR Sec 26(1)]				
If suitable the bedroom door can be locked from the inside and unlocked in an emergency from the outside [Sec 26(3),(4)] [1105]				
Bedroom Windows	Comments			
<ul> <li>Each bedroom has a window that provides natural light, with coverings that block out light and protect the privacy of the occupant [RCR Sec 28(1)] <ul> <li>Each bedroom window provide natural light</li> <li>Each bedroom window does not have coverings that block out light and protect the privacy of the occupant</li> </ul> </li> <li>Bedroom windows can be opened easily for ventilation unless there is an increased risk to the person in care or the facility is equipped with an air conditioning system or mechanical ventilating system [RCR Sec 28(2)]</li> <li>[Transitioned]</li> <li>A bedroom with a non-ambulatory occupant has at least one window that provides visibility from a sitting position to the outside [RCR Sec 28(3)]</li> <li>[Transitioned]</li> </ul>				
Bedroom Furnishings	Comments			
Persons in care are provided at no cost bedroom furnishings, including a safe, secure place to store valuable property, and a closet or wardrobe cabinet measuring at least 0.50 m <sup>2</sup> [RCR Sec 29] o Person in care are not charged for bedroom furnishings				

<ul> <li>There is safe, secure place in which the person in care may store valuable property</li> </ul>	
$\circ$ A closet or wardrobe cabinet measuring at least 0.50 m <sup>2</sup> is provided	
*Persons in care are permitted to keep furniture, ornaments or other personal	
belongings in their room. [RCR Sec 29(2); Bill of Rights 2(f)]	

## **BATHROOM FACILITIES**

Physical Requirements of Bathrooms	Comments
Bathrooms have a door, with a lock that can be opened from the outside in case	
of an emergency [RCR Sec 30 (a)]	
Bathrooms have slip resistant material on the bottom of bathtub(s) and shower(s)	
[RCR Sec 30 (b)]	
Bathrooms have conveniently located and securely attached grab bars beside	
toilet(s), bathtub(s) and shower(s) to meet the needs and preferences of persons	
in care [RCR Sec. 30 (c)]	
Bathrooms have equipment that is necessary to protect health, safety and dignity	
of the persons in care [RCR Sec. 30 (d)]	

### COMMON AREAS AND WORK AREAS

Dining Areas	Comments
The dining area has seating for each person in care, and sufficient tables	
designed to accommodate persons in care in wheelchairs [RCR Sec 33 (a), (c)]	
<ul> <li>There is enough seating for each person</li> </ul>	
<ul> <li>There are sufficient tables designed to accommodate person in care in</li> </ul>	
wheelchairs	
Lounges and Recreation Facilities	Comments
The facility provides comfortably furnished lounge facilities [RCR Sec 34(1),	
(2)(a)]	
A facility that provides Long Term Care has suitably equipped and comfortably	
furnished areas designated for recreational activities [RCR Sec 34(2)(b)]	
[Transitioned]	
Except as necessary for cleaning and maintenance lounges and recreation area	
are accessible at all times [RCR Sec 34(3)]	
<ul> <li>Lounge areas are accessible</li> </ul>	
<ul> <li>Recreation areas are accessible</li> </ul>	
Designated Work Areas	Comments
There are appropriately furnished and equipped work areas for administrative	
work and other staff use [RCR Sec 35(1)(a)]	
There are appropriate, safe and secure locations for medications and the records	

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	of persons in care [RCR Sec 35(1)(b)] o The location for mediations is safe and appropriate	
_	<ul> <li>The location for records of persons in care is safe and appropriate</li> <li>There are secure, safe and adequate storage areas for cleaning agents, chemical</li> </ul>	
	products and other hazardous materials [RCR Sec 35 (1) (c)]	
_		
L	There are separate utility areas for clean and soiled clothes, bedding and other	
	articles [RCR Sec 35 (1) (d)]	
	If used by persons in care, laundry facilities have a slip resistant floor surface	
	[RCR Sec 31 (2) (a)]	
	If not used by persons in care, laundry facilities cannot be accessed by the	
	individuals [RCR Sec 35 (2) (b)]	
	Outside Activity Areas	Comments
	Outside activity areas have a surfaced patio area including a reasonable amount	
	of shelter from sun and inclement weather [RCR Sec 36 (1)(b)] [Transitioned]	
	<ul> <li>There is surfaced patio area(s)</li> </ul>	
	<ul> <li>Shelter from sun and inclement weather is available</li> </ul>	
	Outside activity areas have comfortable seating [RCR Sec 36 (1)(c)]	
	If necessary to protect the health or safety of persons in care, outside activity	
	area is secured by a fence or other means [RCR Sec 36 (2)]	

Emergency Preparations	Comments
Employees have access to reliable communications equipment in an emergency [RCR Sec 51(5)]	

Menu Planning	Comments
Weekly menu posted in each dining area for Long Term Care [RCR Sec 62(4)]	

	Packaging and Storage of Medications	Comments
Medica	tions are safely and securely stored [RCR Sec 69(3)(a)]	
Medica	tion for a person in care who self-administers is safely stored in a secure	
storage	e area [RCR Sec 69(3)(b)]	
0	There is a safe and secure storage area for self-administered medication	
0	Medication for self-administration is stored in a safe and secure storage	
	area	

# II. STAFFING

### **GENERAL STAFFING REQUIREMENTS**

Character and Skill Requirements	Comments
<ul> <li>Prior to employment the licensee obtained the appropriate information regarding the staff person [RCR Sec 37(1)]</li> <li>The required documentation was obtained prior to hiring</li> <li>Criminal record check was obtained</li> <li>Character references were obtained</li> <li>Record of the person's work history was obtained</li> <li>Copies of diplomas, certificate or other evidence of the person's training and skills was obtained</li> <li>Evidence that the person has complied with the Province's immunization and tuberculosis control programs was obtained</li> <li>Manager or employee(s) is of good character, has the personality, ability and temperament to manage or work with persons in care and has the training, experience and skills necessary to carry out the duties assigned [RCR Sec 37(2)]</li> </ul>	
Additional Criminal Record Checks (CRC)	Comments
A CRC is obtained for any person (except persons in care) ordinarily present and over age of 12 permitted on premises while children or youth present [RCR Sec 38]	
Continuing Monitoring of Employees	Comments
<ul> <li>Employee performance is reviewed regularly to ensure that they continue to meet the requirements of this regulation and demonstrates the competence required for their duties [RCR Sec 40(1). (3)]</li> <li><i>Employee performance is reviewed regularly</i></li> <li><i>Employees carry out duties for which they have the necessary training and experience or demonstrate the necessary competence</i></li> </ul>	

### COVERAGE AND NECESSARY STAFF

Management and Supervisory Staff	Comments
A manager has been appointed for the facility [CCALA Sec 7(1)(d)]	
An adult employee is designated as acting manager if the manager is temporarily	
absent from the facility [RCR Sec 41(1)]	
A qualified employee is designated to supervise employees providing care,	
coordinate and monitor the care and manage unusual situations [RCR Sec 41(2)]	
Staffing Coverage	Comments
Employees on duty are sufficient in numbers, training, experience, and organized	
in an appropriate pattern to meet the needs, assist in activities of daily living, and	
communicate with the persons in care [RCR Sec 42(1), (3)]	

<ul> <li>There are sufficient numbers of employees</li> </ul>	
<ul> <li>The employees have training and experience to assist in activities of daily</li> </ul>	
living in a manner consistent with the health safety and dignity of persons	
in care	
<ul> <li>The employees have training and experience to assist with eating in a</li> </ul>	
manner consistent with the health safety and dignity of persons in care	
<ul> <li>The staffing pattern is appropriate</li> </ul>	
<ul> <li>There is an employee on duty at all times who can communicate</li> </ul>	
effectively with all of the persons in care	
<ul> <li>Persons in care who require supervision when outside the facility are</li> </ul>	
appropriately supervised [RCR Sec 42(2)]	
Employee Trained in First Aid	Comments
Persons in care have at all times immediate access to an employee who is	
certified in first aid and CPR, knowledgeable about their medical condition and	
able to communicate with emergency personnel [RCR Sec 43(1)]	
• There is immediate access to an employee who is certified in first aid and	
CPR	
<ul> <li>There is immediate access to an employee knowledgeable about their</li> </ul>	
medical condition	
with emergency personnel	
First aid supplies are readily accessible to all employees, including while care is	
provided off the facility premises [RCR Sec 43(2)]	
<ul> <li>The first aid supplies are sufficient</li> </ul>	
<ul> <li>First aid supplies are provided while off the facility premises</li> </ul>	
Food Services Employees	Comments
Employees responsible for the preparation and delivery of food have experience,	
competence and training to ensure food is safely prepared, handled and meets	
the nutritional needs [RCR Sec (44)(1)(a)]	
<ul> <li>Employees have experience, competence and training to ensure food is</li> </ul>	
safely prepared and handled	
<ul> <li>Employees have experience, competence and training to ensure food is</li> </ul>	
prepared to meet the nutritional needs of persons in care	
Employees receive ongoing education on the preparation and delivery of food,	
nutrition and if required, assisted eating techniques [RCR Sec (44)(1)(b)]	
<ul> <li>Employees receive ongoing education on preparation and delivery of</li> </ul>	
food	
<ul> <li>Employees receive ongoing education on nutrition</li> </ul>	
<ul> <li>Employees receive ongoing education on assisted eating techniques</li> </ul>	
A CSNM qualified nutrition manager or registered dietitian supervises the	
preparation and delivery of food in a facility 50 beds and over [RCR Sec (44)(2)]	

Employee Responsible for Activities	Comments
A qualified employee is designated to organize and supervise physical, social and	
recreational activities and has sufficient time to carry out activities [RCR Sec	
(45)(a)(b)]	
Persons in care have sufficient time to participate in activities [RCR Sec (45)(c)]	

Emergency Preparations	Comments
Employees have been trained in the implementation of the plans and in the use of	
emergency equipment [RCR Sec 51(3)]	
<ul> <li>Employees have been trained in the implementation of emergency plans</li> </ul>	
<ul> <li>Employees have been trained in the use of emergency equipment</li> </ul>	

	Medication Safety and Advisory Committee (MSAC)	Comments
Employ	yees comply with the policies and procedures of the MSAC [RCR Sec	
68(4)]		

Administration of Medication	Comments
Employees who store, handle, or administer medications are	
<ul> <li>19 years of age or older, and</li> </ul>	
<ul> <li>Have successfully completed any training programs established by</li> </ul>	
the MSAC {RCR Sec 70(2)	

How Long Records Must be Kept	Comments
Signed original forms authorizing criminal record checks are kept for 5 years	
[RCR Sec 92(2)]	
Records required to assess character and skill requirements and criminal record	
checks are kept for the entire time the employee is employed [RCR Sec	
92(3)(a),(b)]	
Character references are returned or destroyed immediately after a person who	
was the subject of a character reference is no longer employed by or ordinarily	
present at the facility [RCR Sec 92(4)]	

# **III. POLICIES AND PROCEDURES**

## ADDITIONAL RECORDS

Policies and Procedures Comments			
There are written and implemented policies and procedures to guide staff in the			
care and supervision of the persons in care [RCR Sec 85(1)(a), (d)]			
The written and policies and procedures are reviewed and revised if necessary at			
least once each year [RCR Sec 85(1)(b)]			
All policies and procedures are available to employees, the medical health officer			
and the person in cares' representative on request [RCR Sec 85(1)(c) (i, ii, iii)]			
*All policies and procedures are available to persons in care [RCR Sec			
85(1)(cii.1); Bill of Rights 4(a)]			
A facility providing Long Term Care has a fall prevention policy and procedure			
with the required elements [RCR Sec 85(2a)]			
<ul> <li>Policy and procedure for falls prevention</li> </ul>			
<ul> <li>assessment of the nature of the risks that may result in persons in care</li> </ul>			
falling			
<ul> <li>Policy and procedure includes a plan for preventing persons in care from</li> </ul>			
falling			
<ul> <li>Policy and procedure includes a plan for responding to a fall suffered by</li> </ul>			
a person in care, including steps to be taken to ensure the health and			
safety and to prevent subsequent falls			
The facility has written policies and procedures as prescribed by the regulation			
[RCR Sec 85(2)(b-l)] o Orientation of new managers and employees			
<ul> <li>Orientation of new managers and employees</li> <li>Continuing education of managers and employees</li> </ul>			
<ul> <li>How to express concerns, make complaints and resolve disputes</li> </ul>			
<ul> <li>Access to persons in care by persons who are not employees</li> </ul>			
<ul> <li>Release of persons in care.</li> </ul>			
<ul> <li>Monitoring of nutrition</li> </ul>			
<ul> <li>Monitoring of the medication</li> </ul>			
<ul> <li>Use of restraints in an emergency.</li> </ul>			
<ul> <li>Responding to reportable incidents</li> </ul>			
<ul> <li>Missing and wandering</li> </ul>			
<ul> <li>Record keeping</li> </ul>			
<ul> <li>Long Term Care facility has a written policy to address care in hot</li> </ul>			
weather.			
<ul> <li>Long Term Care facility has a written policy to address hydration</li> </ul>			

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Advice on Admission	Comments
*Prior to admission persons in care are informed of all charges, fees and other	
amounts that must be paid for accommodation and other services [RCR Sec	
48(1) (a); Bill of Rights 4(c)]	
On admission persons in care are informed of the facility's policies respecting	
expressing concerns, making complaints and resolving disputes [RCR Sec 48(1)	
(b)]	
*Prior to admission persons in care are informed on how to express concerns or	
make complaints to the medical health officer or the Patient Care Quality Office	
[RCR Sec 48(1) (c); Bill of Rights 3(e)]	
*Persons in care are able to have family or a representative receive advice on	
admission and, make complaints [RCR Sec 48(1); Bill of Rights 3(f)]	
<ul> <li>Persons in care are advised on how to express concerns or make</li> </ul>	
complaints to the medical health officer	
<ul> <li>Persons in care are advised on how to express concerns or make</li> </ul>	
complaints under the Patient Care Quality Review Board Act	
*Required advice is communicated in a manner appropriate to the skills and	
abilities of the person or the person's parent or representative [RCR Sec 48(2);	
Bill of Rights 4(e)]	

Repayment Agreements	Comments
<ul> <li>*Persons in care who make prepayments are provided written terms and conditions under which a refund may be made [CCALA Sec 19; Bill of Rights 4(d)]</li> </ul>	

	Emergency Preparations	Comments
🗆 The	ere is an emergency plan displayed in a prominent place that sets out	
pro	cedures to prepare for, mitigate, respond to and recover from any emergency,	
incl	uding procedures for evacuation and how persons in care will be cared for	
[RC	CR Sec 51(1),(4)]	
	o There is an emergency plan	
	<ul> <li>Emergency plan include all required elements</li> </ul>	
	• The emergency plan includes procedures for evacuation	
	• There is a plan for how persons in care will continue to be cared for in an	
	emergency	
	<ul> <li>A copy of the emergency plan is displayed in a prominent place</li> </ul>	
	e emergency plans are updated when there is any change in the facility [RCR ; 51(2)]	

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	Dispute Resolution	Comments
□ *Tł	ere is access to a fair, prompt and effective process to express concerns,	
ma	ke complaints or resolve disputes within the facility [RCR Sec 60; Bill of Rights	
3(c	)]	
	• There is access to a fair, prompt and effective process to express a	
	concern, make a complaint or resolve a dispute	
	• There is no retaliation against a person in care as a result of someone	
	expressing a concern or making a complaint	
	<ul> <li>Complaints, concerns and disputes are responded to promptly</li> </ul>	

		Medication Safety and Advisory Committee (MSAC)	Comment
[	The MS	SAC establishes and reviews training, orientation programs, and policies	
	and pro	ocedures [RCR Sec 68(3)]	
	0	There are training and orientation programs for employees	
	0	There are policies and procedures for the safe and effective storage,	
		handling and administration of medications	
	0	There are policies and procedures for the immediate response to and	
		reporting of medication errors and adverse reactions to medications	

When Restraints may be Used	Comments
<ul> <li>Except in an emergency, there is written agreement to the use of a restraint by both person in care or their representative and the medical practitioner or nurse practitioner responsible for the health of the person in care [RCR Sec 74(1)]</li> <li>There is written agreement to the use of a restraint by the person in care or their representative</li> <li>There is written agreement to the use of a restraint by the medical practitioner or nurse practitioner or nurse practitioner responsible for the health of the person in care is written agreement to the use of a restraint by the medical practitioner or nurse practitioner responsible for the health of the person in care</li> </ul>	

	Reassessment	Comments
□ If an emergency restraint continues to be used either continuously or		
intermit	tently, for more than 24 hours the required written agreements have been	
obtaine	d and the conditions set out in section 73 (2) [restrictions on use of	
restrair	nts] have been met [RCR Sec 75(2)]	
0	There is written agreement to the use of a restraint by the person in care	
	or their representative	
0	There is written agreement to the use of a restraint by the medical	
	practitioner or nurse practitioner responsible for the health of the person	
	in care	
0	The safety, physical and emotional dignity of the person in care is	
	monitored throughout the use of the restraint, and assessed after the use	
	of the restraint	

0	All alternatives to the use of the restraint have been considered and either implemented or rejected	
0	Employees administering the restraint have received training in alternatives to the use of restraints and determining when alternatives are most appropriate, and the use and monitoring of restraints	
0	Employees administering the restraint follow any instructions in the care plan of the person in care respecting the use of restraints	
0	The use of the restraint, its type and the duration for which it is used is documented in the care plan of the person in care	

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## IV. CARE AND SUPERVISION

### ADMISSION AND CONTINUING ACCOMMODATION

Drahibitad Camica			
 	Prohibited Service	Comments	
	ose persons who will receive safe and adequate care are accommodated		
as spec	cified on the license [RCR Sec 46(1), (2)]		
0	Care provided is the type specified on the license		
0	Number of persons in care does not exceed maximum licensed capacity		
0	Persons less than 19 years of age are not accommodated with persons		
	over 19 years of age		
	Admission Screening	Comments	
Screen	ing is done prior to admission to ensure safe and adequate care [RCR Sec		
47(1), (	2)]		
0	Screening is done prior to admission		
0	Training, experience, number of employees and/or staffing coverage has		
	been considered		
0	Design of the facility and/or equipment has been considered		
0	Needs of the person in care has been considered		
0	The health, safety and dignity of other person(s) in care have been		
	considered		
0	Any criteria set by, or advice or information from, a funding program has		
	been considered		
	Other Requirements on Admission	Comments	
Risk of	leaving the facility without notification is assessed on admission [RCR Sec		
49(3)]			
	Continuing Accommodation	Comments	
Health	and safety of persons in care are regularly monitored [RCR Sec 50(1)]		
	in an emergency, person(s) in care is not sent to hospital unless directed		
	lical or nurse practitioner [RCR Sec 50(2)(a)]		
Except	in an emergency, or under the Mental Health Act, person in care is not		
transfe	rred to another community care facility without person or representative's		
consen	t [RCR Sec 50(2)(b)]		

### **GENERAL CARE REQUIREMENTS**

Harmful Actions Not Permitted	Comments
*Persons in care are not subjected to abuse, neglect, or deprivations of food or	
fluids as a form of punishment [RCR Sec 52(1); Bill of Rights 2(b)] o Persons in care are not subjected to abuse or neglect	
<ul> <li>Persons in care are not deprived of food or fluids as a form of</li> </ul>	

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punishment	
<ul> <li>There is a policy on abuse and neglect of persons in care</li> </ul>	
<ul> <li>There is staff training regarding abuse and neglect of persons in care</li> </ul>	
*Food or fluids are not used as a form of reward to person in care [RCR Sec	
52(2); Bill of Rights 2(b)]	
Privacy	Comments
*The privacy of persons in care is respected, including the privacy of bedrooms,	
belongings and storage area [RCR Sec 53; Bill of Rights 2 (d)]	
 General Health and Hygiene	Comments
Persons in care are assisted in obtaining health services and a medical	
practitioner or nurse practitioner can be contacted in an emergency [RCR Sec	
Persons in care are assisted in daily oral health care and are encouraged to have	
 a dental exam once a year [RCR Sec 54(3)]	
Identification of Persons in Care Off-Site	Comments
Person(s) in care has been provided with the appropriate documentation to keep	
in their possession when away from the facility [RCR Sec 56(1)]	
<ul> <li>The person in care has been provided with documentation</li> </ul>	
<ul> <li>Documentation includes the person in care's name</li> </ul>	
<ul> <li>Documentation includes the community care facility's name</li> </ul>	
<ul> <li>Documentation includes emergency contact information</li> </ul>	
If a person(s) in care may leave the facility without notifying an employee and is	
not capable of identifying his or herself they are fitted with an identification	
bracelet or other means not easily removed [RCR Sec 56(3)]	
• A bracelet or other means has been provided	
<ul> <li>Does indicate the person in care's name</li> </ul>	
<ul> <li>Does indicate the community care facility's name</li> </ul>	
<ul> <li>Does indicate the emergency contact information</li> </ul>	
Access to Persons in Care	Comments
Parents or representatives have reasonable access to a person in care for whom	
he or she is responsible. [RCR Sec 57(1)]	
*Persons in care can receive visitors at any time and are able to communicate	
with them in private [RCR Sec 57(2); Bill of Rights 2(e)]	
<ul> <li>Persons in care are permitted to receive visitors of choice at any time</li> </ul>	
<ul> <li>Visiting times are not limited</li> </ul>	
<ul> <li>Persons in care are able to communicate with visitors in private</li> </ul>	
Persons restricted or prohibited from accessing a person in care by court order or	
an order issued under an enactment are denied access [RCR Sec 57(3)]	
Release or Removal of Persons in Care	
A person in care is not released or removed from the facility by any person	
except the person in care's parent or representative, or a person authorized in	
writing by that person [RCR Sec 58]	

Comments

Family and Resident Council	Comments
*There is an annual opportunity for persons in care and family members to	
establish and participate in a council to represent their interests [RCR Sec 59; Bill	
of Rights 3(b)]	
<ul> <li>Persons in care and family members are provided with the opportunity to</li> </ul>	
establish a council	
<ul> <li>The council(s) or if no council(s) a group have an opportunity to meet</li> </ul>	
with the licensee	
*Persons in care are able to have family or a representative participates on the	
resident or family council on their own behalf [RCR Sec. 59; Bill of Rights 3(c)]	

Food Preparation and Service	Comments
Meals are served in a dining area [RCR Sec 63(3)(a)]	
Temporary room tray service is available for those unable to attend a dining area	
[RCR Sec 63(3)(b)]	
If needed, ongoing room tray service is available if indicated in the care plan	
[RCR Sec 63(3)(c)(ii)]	
Ongoing tray service is approved and reassessed every 30 days by the person in	
care's medical practitioner or nurse practitioner [RCR Sec 63(3)(c)(iii)(iv)]	
Meals are not provided by ongoing room tray service or the convenience of	
employees [RCR Sec 63(4)]	
Sufficient time and assistance provided to ensure safety and comfort with eating	
[RCR Sec 63(5)]	
<ul> <li>Sufficient time is provided to ensure safety and comfort</li> </ul>	
<ul> <li>Sufficient assistance is provided to ensure safety and comfort</li> </ul>	

Eating Aids and Supplements Children are not fed by means of a propped bottle [RCR Sec 67(2)]

## **USE OF RESTRAINTS**

Restrictions on Use of Restraints	Comments
<ul> <li>Restraints are not used unless it is necessary to protect the person in care or others from serious physical harm, are minimal as possible and the safety and physical and emotional dignity is monitored and conditions of the regulation have been followed [RCR Sec 73(1),(2)]         <ul> <li>A restraint was inappropriately used</li> <li>Restraint are as minimal as possible, taking into consideration both the nature of the restraint and the duration for which it is used</li> <li>The safety, physical and emotional dignity of the person in care is monitored throughout the use of the restraint, and assessed after the use of the restraint</li> </ul> </li> </ul>	

	0	All alternatives to the use of the restraint have been considered and	
		either implemented or rejected	
	0	Employees administering the restraint have received training in	
		alternatives to the use of restraints and determining when alternatives are	
		most appropriate, and the use and monitoring of restraints	
	0	Employees administering the restraint follow instructions in the care plan	
		of the person in care respecting the use of restraints	
	0	The use of the restraint, its type and the duration for which it is used is	
_	<b>–</b> . II	documented in the care plan of the person in care	
		ing the use of an emergency restraint the appropriate information and	
		is given and documented on the care plan [RCR Sec 73(3)]	
	0	The appropriate information and advice was t given to the person in care who was restrained	
	0	The appropriate information and advice was given each person who	
	0	witnessed the use of the restraint	
	0	The appropriate information and advice was given each employee	
	Ũ	involved in the use of the restraint	
	0	The information and advice given was documented in the care plan	
		When Restraints may be Used	Comments
	Persor	n(s) in care is not restrained for the purpose of punishment or discipline or	
	the cor	nvenience of employees [RCR Sec 74(2)]	
	0	The person(s) in care is not restrained for the purpose of punishment or	
		discipline	
	0	The person(s) in care is not restrained for the convenience of employees	
		Reassessment	Comments
		son in care has been restrained, the need has been reassessed at least	
		vithin 24 hours after the first use [RCR Sec 75(1)]	
	A restr	aint used under section 74(1)(b) that continues either continuously or	
		ttently for more than 24 hours is reassessed within the specified time	
		ting with those who agreed to the use of the restraint [RCR Sec 75(3)]	
	0	The restraint has been reassessed in the time specified in the care plan	
	0	The restraint has been reassessed in the time specified by the persons	
		who agreed	
	0	Consultation, to the extent reasonably practical, with the persons who	
		agreed to the use of the restraint was done	
		Care Plan Needed if More Than 30 Day Stay	Comments
-			

Care Plan Needed if More Than 30 Day Stay	Comments
*Persons in care or their representatives participate in the development and	
implementation of care plans [RCR Sec 81(2)(a); Bill of Rights 3(a)]	
*Care plans take into account the persons in care's unique abilities, physical,	
social and emotional needs, and cultural and spiritual preferences [RCR Sec	
81(2)(b); Bill of Rights 1(b)]	

		Fage To 01 55
	re plan(s) contains all items that must be recorded under this regulation Sec 81(3)]	
0	Medication, including self-administered medication	
0	Behavioural intervention	
0	The type or nature of restraint and the frequency of reassessment	
0	Oral health care	
0	Nutrition plan that assesses a person in care's nutrition status.	
0	Recreation and leisure plan	
0	Fall prevention plan that assesses the nature of the risk of falling	
0	A falls prevention plan	
0	Plan for following up on any falls	
0	A plan to prevent a wanderer from leaving the facility	
0	A plan to locate the person in care who is a wanderer	
0	Child or youth, any special instruction given in writing by a parent of the	
-	child or youth	
0	A plan if the person in care is on leave under the Mental Health Act or is	
	admitted to the community care facility under an enactment or court order, any condition or requirement	
The im	plementation of care plans is monitored on a regular basis to ensure	
	implementation [RCR Sec 81(4)(a)]	
	an(s) is reviewed and, if necessary, modified if there is a substantial	
	in the circumstances of the person in care or at least once a year [RCR	
Sec 81		
0	Care plan(s) are reviewed and, if necessary, modified if there is a	
	substantial change	
0	Care plan(s) are reviewed at least once a year	
	extent reasonably practical, persons in care participate in the review and	
modific	ation of their own care plans [RCR Sec 81(4)(c)]	

Implementation of Care Plans	Comments
The care and supervision of a person in care is consistent with the terms and conditions of the care plan [RCR Sec 82]	

Nutrition Plan	Comments
A nutrition plan is developed within 30 days of admission, includes assessment,	
nutrition to be provided and requirement of therapeutic diets [RCR Sec	
81(3)(c)(i)(ii)]	
<ul> <li>Nutrition care plan is developed within 30 days of admission</li> </ul>	
<ul> <li>Nutrition care plan includes assessment, nutrition to be provided, and</li> </ul>	
requirement of therapeutic diets	
Nutrition plans are implemented, monitored, reviewed, modified as needed or at	
least annually if no substantial change, and allows participation by person in care	

[RCR Sec 81(4)(a),(b)(i)(ii),(c)]	
For facilities over 24 persons in care, the nutrition plan is developed and reviewed	
on a regular basis with a dietitian [RCR Sec 83(2),(3)(b)]	
<ul> <li>For facilities over 24 persons in care, the nutrition care plan developed</li> </ul>	
with a dietitian	
<ul> <li>For facilities over 24 persons in care, the nutrition care plan is reviewed</li> </ul>	
with a dietitian regularly	
For facilities with 24 or fewer persons in care, the nutritional needs, including	
nutritional risk are assessed [RCR Sec 83(1)(b)(i)(ii)(iii)]	
For facilities with 24 or fewer persons in care the nutrition plan(s) is reviewed on a	
regular [RCR Sec 83(3)(a)]	
For facilities with 24 or fewer persons in care the nutrition plan is reviewed by a	
dietitian if requested or required by the health care provider, the medical health	
officer or the funding program [RCR Sec 83(3)(c)]	
Unintentional significant changes in weight are immediately referred to a health	
care provider [RCR Sec 83(4)(b),(5)(b)]	
If monthly weights are missing, the reason is documented [RCR Sec 83(5)(a)]	

Advance Directives and Care Plans	Comments
Persons in care are not required to sign advance directives or level of intervention	
documents as a condition of admission or an ongoing requirement [DOLSOP]	

# V. NUTRITION AND FOOD SERVICES

	Menu Planning	Comments
	Minimum 4 week menu plan used [RCR Sec 62(1)(b)]	
	Where stay is less than 6 weeks, a weekly menu is used [RCR Sec 62(1)(a)]	
	Menu provides a nutritious morning, noon and evening meal where each meal	
	contains at least 3 food groups as per Canada Food Guide [RCR Sec 62(2)(a)]	
	• Meals are nutritious	
	<ul> <li>Meals provide at least 3 food groups</li> </ul>	
	Menu provides a minimum of 2 nutritious snacks; each snack contains a	
	minimum of 2 food groups as per Canada's Food Guide [RCR Sec 62(2)(b)]	
	<ul> <li>2 nutritious snacks are provided</li> </ul>	
	<ul> <li>Snacks contain at least 2 food groups</li> </ul>	
	Menu provides variety, including seasonal variation [RCR Sec 62(2)(c)(iii)]	
	Menu is based on the nutrition plans, nutrition needs, age, gender, and activity	
	level of the persons in care [RCR Sec 62(2)(c)(i)]	
	Menu reflects food preferences and cultural background [RCR Sec 62 (2)(c)(ii)]	
	<ul> <li>Menu reflects food preferences</li> </ul>	
	<ul> <li>Menu reflects cultural background</li> </ul>	
	Menu considers texture, colour, taste, visual appeal and food safety [RCR Sec	
	62)(2)(c)(iv)]	
	<ul> <li>Menu considers taste, colour, or visual appeal</li> </ul>	
	<ul> <li>Menu considers food safety</li> </ul>	
	Menu substitutions provide similar nutritional value [RCR Sec 62(2)(d)]	
	Menu is followed and if unable to do so, the food provided meets nutritional	
	requirements [RCR Sec 62(3)]	
	<ul> <li>Menu is followed</li> </ul>	
	Menu substitutions meet nutritional requirements	0
	Food Preparation and Service	Comments
	Personal preferences and cultural background are considered in food preparation and service [RCR Sec 63(2)]	
	Food Service Schedule	Comments
	Breakfast is between 7:00 a.m. and 9:00 a.m. lunch is between 11:45 a.m. and	
	1:00 pm, and supper is served after 5:00 p.m. [RCR Sec 64 (1)(a),(b),(c)]	
	• Breakfast is between 7:00 am and 9:00 am	
	<ul> <li>Lunch is between 11:45 am and 1:00 pm</li> </ul>	
	<ul> <li>Supper is served after 5:00 pm</li> </ul>	
	Snacks times meet the needs of the persons in care [RCR Sec 64(1)(d)]	
	In Child and Youth Residential homes, meal and snack times meet the needs of	
	the child/youth [RCR Sec 64(2)]	
	If preferred by persons in care, brunch can be provided on weekends and	
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holidays [RCR Sec 64(3)]	
Packed meals and snacks are provided if Person in care is absent [RCR Sec	
 64(4)]	
 Individual Nutrition Needs	Comments
Adequate food is provided to meet the persons in cares' personal nutritional	
needs based on Canada's Food Guide and their nutrition plan [RCR Sec 66(1)]	
<ul> <li>Food is adequate to meet personal nutritional needs based on Canada's</li> </ul>	
Food Guide	
<ul> <li>Food is adequate to meet the personal nutrition plan</li> </ul>	
Fluids are provided in sufficient quantity and variation to meet needs and	
preferences [RCR Sec 66(2)]	
Eating Aids and Supplements	Comments
Eating Aids and Supplements Nutrition supplements or tube feedings are provided as required by the nutrition	Comments
Eating Aids and Supplements Nutrition supplements or tube feedings are provided as required by the nutrition plan or as ordered is provided [RCR Sec 67(1)(a)(b)]	Comments
Eating Aids and Supplements Nutrition supplements or tube feedings are provided as required by the nutrition plan or as ordered is provided [RCR Sec 67(1)(a)(b)] <ul> <li>Nutrition supplements are provided as ordered</li> </ul>	Comments
Eating Aids and Supplements           Nutrition supplements or tube feedings are provided as required by the nutrition           plan or as ordered is provided [RCR Sec 67(1)(a)(b)]           o         Nutrition supplements are provided as ordered           o         Tube feedings are provided as ordered	Comments
Eating Aids and Supplements           Nutrition supplements or tube feedings are provided as required by the nutrition plan or as ordered is provided [RCR Sec 67(1)(a)(b)]           o         Nutrition supplements are provided as ordered           o         Tube feedings are provided as ordered           Eating aids, personal assistance or supervision is provided if required or as per	Comments
Eating Aids and Supplements           Nutrition supplements or tube feedings are provided as required by the nutrition plan or as ordered is provided [RCR Sec 67(1)(a)(b)]           o         Nutrition supplements are provided as ordered           o         Tube feedings are provided as ordered           Eating aids, personal assistance or supervision is provided if required or as per the nutrition plan [RCR Sec 67(1)(c)(i)(ii)]	Comments
Eating Aids and Supplements         Nutrition supplements or tube feedings are provided as required by the nutrition plan or as ordered is provided [RCR Sec 67(1)(a)(b)]         o       Nutrition supplements are provided as ordered         o       Tube feedings are provided as ordered         Eating aids, personal assistance or supervision is provided if required or as per the nutrition plan [RCR Sec 67(1)(c)(i)(ii)]         o       Eating aids are provided	Comments
Eating Aids and Supplements           Nutrition supplements or tube feedings are provided as required by the nutrition plan or as ordered is provided [RCR Sec 67(1)(a)(b)]           o         Nutrition supplements are provided as ordered           o         Tube feedings are provided as ordered           Eating aids, personal assistance or supervision is provided if required or as per the nutrition plan [RCR Sec 67(1)(c)(i)(ii)]	Comments

# VI. MEDICATION

	Medication Safety and Advisory Committee (MSAC)	Comments
	There is a MSAC with the appropriate membership [RCR Sec 68(1)]	
	<ul> <li>MSAC includes the manager or a person designated by the manager</li> </ul>	
	<ul> <li>MSAC includes the supervising pharmacist</li> </ul>	
	<ul> <li>MSAC includes the health care provider responsible for the immediate</li> </ul>	
	supervision of health care services	
	A supervising pharmacist has been appointed RCR [Sec 68(2)]	
	<ul> <li>Supervising pharmacist serves on the medication safety and advisory</li> </ul>	
	committee	
	<ul> <li>Supervising pharmacist inspects the areas of the facility where</li> </ul>	
	medications will be stored	
	<ul> <li>Supervising pharmacist consults with employees respecting medication</li> </ul>	
	interactions and other problems related to medication	
	<ul> <li>Supervising pharmacist consults with employees respecting medication</li> </ul>	
	interactions and other problems related to medication	
	Packaging and Storage of Medication	Comments
	A pharmacist packages and records all medications on the medication	
	administration record [RCR Sec 69(1)]	
	<ul> <li>A pharmacist packages all medication</li> </ul>	
	• A pharmacist records medication on the medication administration record	
	Medications remain in the original labelled container or package provided by the	
	dispensing pharmacy until administered [RCR Sec 69(2)]	-
	Administration of Medication	Comments
	Medications administered have been prescribed or ordered by a medical	
_	practitioner or nurse practitioner [RCR Sec 70(1)]	
	Medications are stored, handled and administered appropriately [RCR Sec 70(3)]	
	<ul> <li>Only employees administer medications</li> </ul>	
	<ul> <li>Appropriate arrangements are made for the administration of medication</li> </ul>	
_	when the person in care is absent from the facility	
	Self-administration of medication has been approved by the MSAC and the	
	practitioner who ordered the medication, and is included in the care plan [RCR	
	Sec 70(4)]	
	<ul> <li>Self-administration is approved by the MSAC</li> <li>Self-administration is approved by the medical practitioner or purposed</li> </ul>	
	<ul> <li>Self-administration is approved by the medical practitioner or nurse practitioner who properihed or ordered the medication</li> </ul>	
	practitioner who prescribed or ordered the medication	
	<ul> <li>Self-administration is included on the care plan</li> </ul>	

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Changes to Directions for Use of Medication	Comments
Employees do not make handwritten changes to the directions for use of a medication on the medication container or package [RCR Sec 71(a)]	
Return of Medication to Pharmacy	Comments
Medication is returned to the dispensing pharmacy as required [RCR Sec 72]	Comments
	Comments

# VII. HYGIENE AND COMMUNICABLE DISEASE CONTROL

	Continuing Health of Employees	Comments
There	s evidence of employee(s) continued compliance with the Province's	
immun	ization and TB program [RCR Sec 39(1)]	
0	Evidence of employee(s) continued compliance with the immunization	
	program	
0	Evidence of employee(s) continued compliance the TB program	

	Other Requirements on Admission	Comments
	persons admitted comply with the Province's immunization and TB control	
pro	grams [RCR Sec 49(1); DOLSOP]	
	<ul> <li>Compliance with the Provinces immunization program</li> </ul>	
	<ul> <li>Compliance with the Provinces TB control program</li> </ul>	
	<ul> <li>Immunization status on admission is reviewed. (DOLSOP)</li> </ul>	
	<ul> <li>Immunization status is reviewed regularly.(DOLSOP)</li> </ul>	
	• Clear and up-to-date records of the immunization status of each person	
	in care is kept.(DOLSOP)	
	<ul> <li>Information to persons in care regarding the benefits of immunization is</li> </ul>	
	not provided.(DOLSOP)	
	• There is consultation with the Medical Health Officer of their health	
	authority with respect to vaccine programs which should be offered to	
	persons in care .(DOLSOP)	
	• A care plan, which includes individual outbreak prevention and control	
	policies, for each resident on admission, is developed	
	<ul> <li>General facility outbreak prevention and control policies as</li> </ul>	
	recommended by the health authority's Medical Health Officer are	
	developed	

General Health and Hygiene	Comments
<ul> <li>There is a program to instruct, if necessary, and assist persons in care in maintaining health and hygiene. [RCR Sec 54 (1)]</li> <li>Liquid hand soap and disposable towels are readily available at all appropriate sinks</li> <li>Appropriate disposable gloves are not available to staff</li> </ul>	

Food Preparation and Service	Comments
□ Food is safely prepared, stored, served and handled. [RCR Sec 63(1)]	

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Participation by Persons in Care	Comments
Adequate supervision is provided to persons in care participating in food	
preparation or service to ensure safety [RCR Sec 65(2)]	

Notification of Illness or Injury	Comments
□ The medical health officer has been notified within 24 hours that a person in care	
has a reportable communicable disease as listed in Schedule A of the Health Act	
Communicable Disease Regulation [RCR Sec 76(2)]	

# VIII. RECORDS AND REPORTING

## MATTERS THAT MUST BE REPORTED

Notification of Illness or Injury	Comments
If a person in care becomes ill or is injured the parent or representative, or	
contact person, of the person in care is notified immediately [RCR Sec 76(1)]	
Reportable Incidents	Comments
Reportable incidents have been reported with appropriate notifications [RCR Sec	
77,(2),(3)]	
<ul> <li>Parent, representative or contact person is notified</li> </ul>	
<ul> <li>The medical or nurse practitioner is notified</li> </ul>	
<ul> <li>The MHO or Licensing Officer is notified</li> </ul>	
<ul> <li>The funding program, if any, is notified.</li> </ul>	

### **RECORDS FOR EACH PERSON IN CARE**

Records for Each Person in Care Comments		
	Comments	
The facility keeps a record for each person in care with the information specified		
by the regulation [RCR Sec 78(1)]		
<ul> <li>Files contain the name, sex, date of birth, medical insurance plan number</li> </ul>		
and immunization status		
<ul> <li>Files have the date of admission to the community care facility</li> </ul>		
• Files have name and telephone number of the person in care's parent or		
representative, contact person and primary health care provider		
<ul> <li>Files contain information by which the person in care may be described</li> </ul>		
or identified in an emergency, including a photograph		
□ There is a medication administration record showing all medication administered,		
the date, amount and time the medication was administered to the persons' in		
care [RCR Sec 78(2)]		
□ There is consent in writing from the person in care or a parent or representative		
to call a medical practitioner, nurse practitioner or ambulance in case of accident		
or illness [RCR Sec 78(3)(a)]		
□ In the case of a child, there is consent in writing to release the child to someone		
other than the child's parent [RCR Sec 78(3)(b)]		
Records Respecting Money and Valuables	Comments	
A record is kept for each person in care showing money, valuables and other		
things in safe keeping; disbursements, fee(s) charged and returned items [RCR		
Sec 79(1)]		
• There is a record showing all money, valuables and other things held in		
trust or safekeeping for persons in care		
• There is a record showing any disbursements made by the licensee on		

<ul> <li>behalf of a person in care, using the money of the person in care</li> <li>There is a record of any fee charged by the licensee to hold or administer</li> </ul>	
money, valuables and other things and/or disbursements	
• There is a record of money, valuables and other things held by the	
licensee that were returned	
□ A licensee issues or gets a receipt, as applicable, for items identified in the	
regulation [RCR Sec 79(2)]	
Short Term Care Plan on Admission	Comments
A short term care plan is developed on admission to guide staff in protecting	
and promoting the health and safety of the person in care [RCR Sec 80(1); Bill o	f
Rights 1(a)]	
<ul> <li>Short term care plan(s) are developed</li> </ul>	
<ul> <li>All required elements are recorded in the short term care plan</li> </ul>	
The short term care plan contains anything that must be recorded under this	
regulation until a care plan is developed [RCR Sec 80(2)]	
Care Plan Needed if More Than 30 Day Stay	Comments
*Care plans are developed within 30 days of admission for admissions of 30 day	S
or more. [RCR Sec 81(1); Bill of Rights 1(a)]	
<ul> <li>Care plans are developed within 30 days</li> </ul>	
<ul> <li>All required elements are included in the care plan</li> </ul>	
Nutrition Plan	Comments
Other than for hospice care, monthly weights are recorded in the nutrition plan	
[RCR Sec (83)(4)(c)]	
Use of Restraints to be Recorded in Care Plan	Comments
□ If a person in care is restrained, the information required by the regulation is	
recorded in the care plan of the person in care [RCR Sec 84]	
<ul> <li>The type or nature of the restraint used is recorded</li> <li>The reason for the use of the restraint is recorded</li> </ul>	
<ul> <li>The alternatives that were considered to the use of the restraint, and which, if any, were implemented or rejected is recorded</li> </ul>	
<ul> <li>The duration of the restraint and the monitoring of the person in care during the restraint are recorded</li> </ul>	
• The result of any reassessment of the use of the restraint is recorded	
<ul> <li>Employee compliance with the requirements of Division 5 [Use of Bostraints] of Part 5 is recorded</li> </ul>	
Restraints] of Part 5 is recorded	

		Other Requirements on Admission	Comments
[	Height	and weight of each person in care is recorded on admission [RCR Sec	
	49(2)]		
	0	Height is recorded on admission	
	0	Weight is recorded on admission	

	Administration of Medication	Comments
□ Advers	e reactions are immediately documented and notification to the medical	
	oner or nurse practitioner and pharmacy is made [RCR Sec 70(5)]	
0	Adverse reactions are documented on the medication administration	
	record	
0	The medical practitioner or nurse practitioner who prescribed or ordered	
	the medication is notified	
0	The dispensing pharmacy is notified	

Changes to Directions for Use of Medication	Comments
Changes in the directions for use of medication are recorded appropriately [RCR	
Sec 71(b)]	
• The changes in directions for use of a medication are promptly recorded	
on the person in care's medication administration record, and	
<ul> <li>The dispensing pharmacy is promptly notified</li> </ul>	

## ADDITIONAL RECORDS

Policies and Procedures	Comments
There is a copy of each policy and procedure of the medication safety and advisory committee [RCR Sec 85(3)]	
Records Respecting Employees	Comments
<ul> <li>Employee files contain the records required by this regulation [RCR Sec 86]</li> <li>Contains criminal record check results</li> <li>Record of character references</li> <li>Record of compliance with the Province's immunization and tuberculosis control programs</li> <li>Record of any performance reviews made under section 40 [continuing monitoring of employees] and any attendance at continuing education programs.</li> </ul>	
Food Services Record	Comments
Record of food purchases, menus and menu substitutions [RCR Sec 87(a)(b)] <ul> <li>Food purchases</li> <li>Record of menus</li> <li>Record of menu substitutions</li> </ul> Record of monitoring of food service and nutrition care [RCR Sec 87(c)] Record of staff attendance at food service and nutrition education programs [RCR Sec 87(d)]	

Record of Minor and Reportable Incidents	Comments
A record is kept of minor accidents, illnesses and medication errors involving	

persons in care that do not require medical attention and are not reportable incidents [RCR Sec 88 (a)] A record is kept of unexpected events involving persons in care [RCR Sec 88 (b)] A record is kept of reportable incidents involving persons in care [RCR Sec 88 (c)]	
Record of Complaints and Compliance	Comments
A record respecting complaints made and concerns expressed to the licensee under section 60 [dispute resolution], and the responses to them is kept [RCR Sec 89(1)]	
<ul> <li>Records respecting compliance with section 10 [liability insurance]; section 59 [family and resident council]; section 66 [individual nutrition needs]; section 70 [administration of medication] [RCR Sec 89(2)]</li> <li><i>Record is kept respecting compliance with section 10</i> [liability insurance]</li> <li><i>Record is kept respecting compliance with section 59</i> [family and resident council]</li> <li><i>Record is kept respecting compliance with section 66</i> [individual nutrition needs]</li> <li><i>Record is kept respecting compliance with section 66</i> [individual nutrition needs]</li> <li><i>Record is kept respecting compliance with section 70</i> [administration of medication]</li> </ul>	
Financial Records and Audits	Comments
Separate financial records are maintained for each community care facility, made in accordance with generally accepted accounting practices [RCR Sec 90 (1)]	

## GENERAL REQUIRMENTS RESPECTING RECORDS

Currency and Availability of Records	Comments
Records referred to in this regulation are current [RCR Sec 91(a)]	
If the licensee operates more than one community care facility, records are kept separately for each facility [RCR Sec 91(b)]	
Records referred to in this regulation sections 78 to 81, 85, 88 and 89 are kept in a single place at the facility [RCR Sec 91(2) (a)]	
Records other than those referred to in Sec 92 (2)(a) can be retrieved within a reasonable time, on request, and produce records, on demand, to the medical health officer [RCR Sec 91(2)(b),(c)]	
Records relating to a person in care are accessible only to employees who require access to perform their duties in relation to the person in care [RCR Sec 91(3)]	

How Long Records Must be Kept	Comments
□ Subject to subsections 92 (2) to (5), all records referred to in this regulation must	

[	<ul> <li>be kept for at least one year [RCR Sec 92(1)]</li> <li>Records for each person in care are kept for at least 2 years from the date of discharge. [RCR Sec 92(5)</li> </ul>	
[	Records of complaints are kept for at least 2 years [RCR Sec 92(6)]	
	Confidentiality	Comments
[	*Records and personal information are kept confidential [RCR Sec 93; Bill of Rights 2(d)]	

# IX. LICENSING

	Continuing Duty to Inform	Comments
	Community Care Facilities Licensing has been immediately notified of any	
	changes in the information provided under section 7 [RCR Sec 8(1)]	
	Plans for structural changes and the health and safety plan for those in care have	
	been submitted and received written approval [RCR Sec 8(2)]	
	<ul> <li>Plans for alterations have been submitted</li> </ul>	
	<ul> <li>Plans for alterations have received written approval</li> <li>A health and safety plan has received written approval</li> </ul>	
	When a manager resigns or is absent for more than 30 consecutive days	
	notification to Community Care Facilities Licensing has been given and there is a	
	replacement [RCR Sec 8(3)	
	<ul> <li>Notification has been given</li> </ul>	
	<ul> <li>Replacement manager has been hired</li> </ul>	
	Liability Insurance	Comments
		Comments
	The Long Term Care facility has liability insurance against property damage and	
	bodily injury [RCR Sec 10]	Commonto
	Posting of Licence and Inspection Record	Comments
	The licence is displayed in a prominent place and includes manager name and	
	any terms or conditions (with exceptions for some types of facilities) [RCR Sec.	
_	11(1)(a)]	
	*The most recent routine inspection record is displayed in a prominent place (with	
	exceptions for some types of facilities) [RCR Sec. 11(1) (b), (2); Bill of Rights	
_	4(b)]	
	Types of care offered are identified when advertising services to the public [RCR	
	Sec.11(3)]	
	Investigation or Inspection	Comments
	During an investigation or inspection a person does not obstruct, withhold,	
	conceal or destroy relevant records or information [RCR Sec.12(1)]	
	A plan that ensures health and safety of persons in care during an investigation	
	has been provided as requested [RCR Sec.12(2)]	

Prohibited Service	Comments
Only the type of care that is specified on the licence is provided [RCR Sec 46	
(2)(a)]	
No more than the maximum number of persons, as specified on the license, are	
accommodated [RCR Sec 46(2)(b)]	
Person less than 19 years of age are not accommodate if person older than 19	
years of age are accommodated.	

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Self-Monitoring of Community Care Facility	Comments
There is regular monitoring of the physical environment, and the care and	
services provided, to ensure that the requirements of the Act and this regulation	
are being met [RCR Sec 61]	
<ul> <li>There is regular monitoring of the physical environment</li> </ul>	
<ul> <li>There is regular monitoring of the care and services provided</li> </ul>	

Standards to be Maintained	Comments
*The facility is operated in a manner that promotes the health, safety and dignity	
of persons in care, and their rights [CCALA Sec 7(1)(b)(i); Bill of Rights 2(a)]	
*The rights of adult persons in care are displayed in a form and in the manner	
acceptable to the minister [CCALA Sec 7 c.1(ii)]	
*The rights of adult persons in care are made known orally and in writing to	
persons in care and their families and representatives [CCALA Sec 7 c.2)]	

# X. PROGRAM

Program of Activities	Comments
There is a suitable ongoing planned program of physical, social and recreational activities that meets the objectives of the care plan [RCR Sec 55(1)(a); Bill of Rights 2(c)]	
Persons in care are encouraged to participate in the facility's program of activities and to take advantage of opportunities available in the community [RCR Sec 55(1)(b); Bill of Rights 2(c)]	
<ul> <li>Persons in care are encouraged to participate in program of activities</li> <li>Persons in care are encouraged to take advantage of opportunities available in the community</li> </ul>	
There are opportunities to participate in events beyond the regular program of physical, social and recreational activities with or without charge [RCR Sec 55(2)]	
Sufficient materials, supplies and equipment for the program of activities are readily accessible and safe and provided without charge [RCR Sec 55(3); Bill of Rights 2(c)]	
<ul> <li>There is sufficient quantity and variety of supplies, material and equipment for the program of activities</li> </ul>	
<ul> <li>Supplies, materials and equipment are readily accessible and safe</li> </ul>	
Participation by Persons in Care	Comments
Persons in care are encouraged to participate in menu planning, meal preparation, food service and related activities as far as reasonably practical	

or as per their nutrition plan [RCR Sec 65(1)]