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PREFACE

Manitoba Regulation 484/88R, under the Social Services Administration Act (c.s. 165), came into force in January, 1981.

Manitoba Regulation 484/88R requires that all persons providing care, supervision and assistance to children, in the temporary or permanent custody of a Child Caring Agency, or to adults who are suffering from a disability or disorder which precludes them from living independently, shall obtain a valid License to operate a Residential Care Facility.

This regulation was enacted to ensure that all persons residing in Residential Care Facilities receive the care, supervision and assistance necessary to allow them to live and function in the community.

PURPOSE

The purpose of this manual is to provide Licensees of Residential Care Facilities with a clear understanding of licensing requirements, standards, policies, approved forms and the administrative procedures by which Licenses are issued, renewed and cancelled.

This manual describes the standards and procedures that have been developed to ensure the health, safety and well being of the residents in care.

USE OF THE MANUAL

This manual is divided into twelve parts, some of which are cross-referenced to other parts or subjects. A decimal numbering system has been used throughout the manual. The first number indicates the part of the manual, while the second and third refer to the subject matter within that part. The section and number reference the Act or Regulations.

5	Part
5.1	Subject
5.1.1	Clause

The pages are numbered sequentially and the date of issuance is indicated for each Part and Section.

MAINTAINING THE MANUAL

From time to time it may be necessary to update this manual where a regulation is amended, or a new policy or procedure is implemented. In those situations, the Licensee will be provided with revised pages and requested to remove and replace those page(s) in the section(s) affected.

STANDARD / GUIDELINE

The term “standard”, as used in this manual, refers to the specific requirements necessary to satisfy the regulation cited.

The term “guideline” refers to suggest methods which may be used to satisfy the regulation cited.

LICENCE / LETTER OF APPROVAL

The term “License”, as used in this manual, refers to both a “License” and a “Letter of Approval” as issued by the Licensing Authority except in Part 3, which is specific to a Letter of Approval.

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ACT AND REGULATIONS

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SUBJECT

- 1.1 The Social Services Administration Act
- Chapter S165
- 1.2 Manitoba Regulation 484/88R

ACT AND REGULATIONS

SUBJECT 1.1 The Social Services Administration Act Chapter S165

The provisions of Residential Care Licensing are contained in the Social Services Administration Act under the following sections.

SECTION 1 Definitions

“committee” means The Social Services Advisory Committee for which provision is made in section 3 (“comite”);

“department” means the department of the executive government of the province through which assistance is administered (“ministere”);

“Licensing Authority” means the minister or a person designated by the minister as the Licensing Authority for the purposes of this Act and the regulations (“responsable des permis”);

“minister” means the member of the Executive Council charged by the Lieutenant Governor in Council with the administration of this Act (“ministre”);

3(1) Social Services Advisory Committee

The Social Services Advisory Committee is composed of 15 members appointed by the Lieutenant Governor in Council.....

3(4) Quorum

Three members of the committee constitute a quorum.....

(7) Powers and Duties of Committee

The committee shall consider and report to the minister on any matter that may be referred to it; and shall perform such other duties, in addition to any duties imposed upon it under any other Act of the Legislature, as may from time to time be prescribed by order of the Lieutenant Governor in Council.

3(8) Secretary

A secretary to the committee, and such other clerical help as may be required to carry on the work of the committee, may be appointed as provided in The Civil Service Act.

SUBJECT 1.1 Con't

SECTION

12(1)

License

Notwithstanding the provision of any other Act of the Legislature or of any by-law of municipality, no person shall operate:

- (a) any Child Care Facility of the type listed in Subsection 8(1) of The Child and Family Services Act; or
- (b) Any Residential Care Facility where care and supervision is provided for adults suffering from such disabilities and disorders as may be prescribed in the regulations; unless that person obtains a License from the minister for the purpose issued in accordance with, and subject to, the regulations under this Act or The Child and Family Services Act.

12(2)

No Other License Required

A person who obtains a License under Subsection (1) to operate any facility, home or centre mentioned in that subsection is not required to obtain any other License for the purpose.

13(1)

Requirement to Operate Residential Care Facility

No person shall:

- (a) operate, advertise, or otherwise hold himself out as operating a Residential Care Facility;
- (b) provide, or hold himself out as providing, any of the services provided in Residential Care Facility; or
- (c) accommodate, or hold himself out as accommodating any person who requires any of the services provided in a Residential Care Facility; unless he is the holder of a valid and subsisting License or Letter of Approval as the case may require issued by the Licensing Authority.

13(2)

Application for Letter of Approval

A person who desires to operate a Residential Care Facility shall apply to the Licensing Authority on a form provided by the Authority for a Letter of Approval or License as the case may require.

13(3)

Granting of Letter of Approval or License

Upon receipt of an application under Subsection (2), the Licensing Authority, if satisfied that the applicant and the facility meet the requirements of the Act and the regulations, may grant the Letter of Approval or the License, as the case may be.

SUBJECT 1.1 Con't

SECTION

- 13(4) **Granting of Letter of Approval or License where facility not hazardous**
Notwithstanding Subsection (3), where a Residential Care Facility does not meet all the requirements of the regulations but in the opinion of the Licensing Authority the facility is not hazardous to the health, safety or well being of any person likely to be resident therein, the Licensing Authority may grant a Letter of Approval or License, as the case may be to operate the facility.
- 13(5) **Appeal**
Any person aggrieved by the:
(a) refusal of the Licensing Authority to issue a Letter of Approval or a License; or
(b) cancellation or suspension of a Letter of Approval or a License; or
(c) the refusal to issue or the cancellation or suspension of a License for a facility under Clause 12(1)(a); may within ten days after receiving notice of the refusal cancellation or Suspension Appeal the matter to the Social Services Advisory Committee.
- 13(6) **Action by Committee**
Upon receipt of a Notice of Appeal under Subsection (5), the committee shall, within 30 days of the date of the appeal, consider the matter and in writing advise the appellant of its decision.
- 13(7) **Appeal to Court**
Where the appellant is not satisfied with the decision of the committee under Subsection (6) he may within 10 days from the date of the determination by the committee appeal the matter to the Court of Queen's Bench.
- 13(8) **Hearing de novo**
An appeal under Subsection (7) shall be by way of a trial de novo but the decision of the court is final and is not subject to any further appeal.

SUBJECT 1.1 Con't

SECTION

14.

Powers of Licensing Authority and Inspectors

For the purpose of ensuring compliance with the provisions of the Act and the regulations or of any order made under this Act or the regulations, the Licensing Authority or an inspector may:

- (a) at any reasonable hour enter a Residential Care Facility and inspect that facility; and
- (b) inspect and take samples of any material, food, medication, or equipment being used at the facility.

15.

Validity of Prior Licenses

A License issued under The Child and Family Services Act or under this Act prior to the coming into force of this Act continues to be valid until its expiry date but is subject to the provisions of any regulation made hereunder.

16(1)

Penalty

Every person who violates or contravenes Section 12 or 13 is guilty of an offense and liable on summary conviction, to a fine of not less than \$200.00 and not more than \$1000.00.

16(2)

Continuing Offense

Where a violation or contravention of Section 12 or 13 continues for more than one day, the person violating or contravening the subsection is guilty of a separate offense for each day that the violation or contravention continues.

21.

Regulations

For the purpose of carrying out the provision of this Act according to their intent, the Lieutenant Governor in Council may make such regulations as are ancillary thereto and are not inconsistent therewith; and every regulation made under, and in accordance with the Authority granted by, this section has the force of law; and without restricting the generality of the foregoing, the Lieutenant Governor in Council may make regulations,....

- (g) respecting the classification and licensing of care homes, foster homes and other care facilities and institutions generally and matters ancillary thereto;
- (h) prescribing disabilities and disorders for the purpose of Subsection 12(1);
- (i) respecting the suspension and cancellation of Letters of Approval and Licenses issued under this Act;
- (j) prescribing the procedure to be followed in the suspension or cancellation of license;
- (k) authorizing the minister to designate or appoint inspectors for the purpose of this Act and the regulations;
- (l) prescribing further powers and duties of inspectors designated or appointed under this Act;
- (m) imposing terms and conditions under which grants may be paid to the operator of any care facility under this Act.

SUBJECT 1.2 Manitoba Regulation 484/88R

SECTION

1. Definitions and Interpretation

In this regulation:

“abuse” means physical punishment, threats, verbal or non-verbal coercion directed toward any resident, or the withholding of a resident’s regular meal, money, or other personal property or medication or aid necessary for the proper physical functioning of a resident (“mauvais traitement”);

“child” means a child as defined in The Child and Family Services Act (“enfant”);

“disability” or “disorder” means a disability or disorder as set out in Section 2 (“incapacite” ou “deficience”);

“facility” means a Residential Care Facility (“établissement”);

“foster home” means a foster home as defined in The Child and Family Services Act (“foyer d’accueil”);

“infirmities of aging” means those manifestations of the aging process that significantly reduce mobility, flexibility, coordination, perceptivity and functioning of a person but are not included in other disability or disorder categories (“handicaps du au vieillissement”);

“inspector” means a person duly authorized by the minister for the purpose of the Act (“inspecteur”);

“Letter of Approval” means a document issued by the Licensing Authority for the operation of a Residential Care Facility for a maximum of four children or three adults (lettre d’agrément”);

“License” means a document issued by the Licensing Authority to operate a Residential Care Facility for more than four children and three adults (“permis”);

“mental disorder” means a substantial disorder in thought, mood, perception, orientation or memory that grossly impairs judgment, behaviour, capacity to recognize reality or ability to meet the ordinary demands of life (“trouble mental”);

“mental retardation” means a condition of arrested or incomplete development of mind whether arising from inherent causes or induced by disease or injury (“deficience mentale”); the department (“directeur de programme”);

SUBJECT 1.2 Con't

“operator” means a person who owns or operates a Residential Care Facility or any person acting on his or her behalf (“exploitant”);

“program director” means a person appointed under an Act of the Legislature or by the minister to direct a program within the department; (“directeur de programme”);

“resident” means a person who is residing in a facility and is receiving residential care (“resident”);

“residential care” or “care and supervision” means the assistance required by a child, or by an adult suffering from a disability or disorder which precludes that person from living independently (“soins en residence”);

“Residential Care Facility” means any building or part of a building or any other structure, however named, which is advertised, announced or maintained for the express or implied purpose of providing residential care or transitional services to persons not related by blood or marriage to the operator, but does not include a facility which is licensed or designated by the Manitoba Health Services commission (“établissement de soins en residence”)

“staffed facility” means a facility that hires and pays remuneration to employees.

“Supervising Agency” means the agency, government department or individual responsible for the overall supervision and treatment planning for a resident (“organisme de surveillance”)

“transitional services” means supportive services to persons who currently or potentially are capable of meeting their activities of daily living independently, but who temporarily need supervision, assistance, or counselling (“services de transition”).

SECTION

2. The disabilities or disorders for the purpose of this regulation and of Clause 12(1)(b) of the Act are:
 - (a) mental disorder;
 - (b) mental retardation; and
 - (c) infirmities of aging.

3. **Letter of Approval**

No person shall establish or operate a Residential Care Facility for one to four children or for one to three adults suffering from a mental disorder, mental retardation, or infirmities of aging without a valid and subsisting Letter of Approval for the purpose.

SUBJECT 1.2 Con't

SECTION

4. An application for a Letter of Approval under Section 3 shall be in such form as the minister may approve.
5. A Letter of Approval may be issued by the Licensing Authority only after that Authority is satisfied that:
 - (a) the facility meets the recommendations of:
 - (i) the local Child Caring Agency to the effect that conditions in the home favor the normal development of the child, or
 - (ii) the local Supervising Agency to the effect that conditions in the home are conducive to the well-being of the adult with a disability or disorder;
 - (b) the premises comply with legislation, regulations and standards governing fire safety and public health protection;
 - (c) all personnel connected with the operation of the facility are of good character and medically, physically, and emotionally fit to provide the required care and where deemed necessary; a medical examination or character references may be required; and
 - (d) the facility meets such other standards and conditions as may be required by the minister.
6. A Letter of Approval issued under this regulation shall:
 - (a) be in such form as the minister may approve;
 - (b) designate the maximum number and sex of persons who may be accommodate therein;
 - (c) be limited as to a particular operator and premises; and
 - (d) state any other conditions on which the Letter of Approval is issued.

License

7. No person shall establish or operate a Residential Care Facility for more than four children or more than three adults without a valid and subsisting License for the purpose issued by the Licensing Authority.
8. Notwithstanding Section 7, a Letter of Approval may be issued to a foster home for children which accommodates more than four foster children where all the foster children in the home are siblings.

SUBJECT 1.2 Con't

SECTION

9. Notwithstanding Section 7, no person shall establish a Residential Care Facility for more than 15 residents without first obtaining written permission to do so from the minister.
10. An application for a License under this regulation shall be submitted on a form provided by the Licensing Authority and shall be accompanied by a sketch showing rooms to be occupied and the number to be cared for in each room.
11. A License may be issued by the Licensing Authority only after receipt of recommendations from the Authority having jurisdiction as to compliance with legislation, regulations, and standards governing:
 - (a) fire safety;
 - (b) public health protection;
 - (c) residential care; and
 - (d) such other standards and conditions as may be required by the minister.
12. Every License issued under this regulation shall:
 - (a) be issued for a period of one year;
 - (b) be in such form as the minister may determine;
 - (c) have endorsed thereon the date on which it expires;
 - (d) designate the maximum number and sex of persons who may be accommodated in the facility;
 - (e) be limited to a particular Licensee and premises; and
 - (f) state any other conditions on which the License is issued.
- 13(1) Notwithstanding Sections 11 and 12, a License may be renewed for two one year periods by the Licensing Authority.
- 13(2) An operator whose License has been renewed twice under Subsection (1) and who desires to continue to operate beyond the expiry date of the second renewal, shall apply for a new License.
14. Two months prior to the expiry date of a License, or a renewal of a License, the applicant for a new License or renewal or an existing License shall submit an application to the Licensing Authority on a form approved by the minister.
15. Before the owner or operator of a Residential Care Facility discontinues operation, he or she shall, by a notice in writing served on the Licensing Authority not less than 60 days prior to the proposed date discontinuance, advise the Authority of the intention to discontinue the operation.

SUBJECT 1.2 Con't

SECTION

16.

Staffing

The Licensee of a Residential Care Facility for more than three adults or four children shall:

- (a) maintain competent personnel sufficient in number and adequate for the maintenance, care, and supervision of the residents and for other requirements of the facility; and
- (b) require that night duty staff remain awake and on duty where any resident requires constant supervision.

17(1) A Letter of Approval or License to operate a Residential Care Facility is subject to review and may be cancelled in writing by the Licensing Authority if:

- (a) the facility is found to be operated without due regard to recommendations by the Authority having jurisdiction as to compliance with legislation, regulations, and standards governing public health and fire safety;
- (b) the facility is found to be operated without due regard to recommendations by the local Child Caring Agency or local Supervising Agency as to the comfort or well being of the residents; or
- (c) the facility is operated in a manner contrary to this regulation or any applicable provincial Act or regulation.

17(2) A Licensing Authority which proposes to cancel a Letter of Approval or License shall, not later than 60 days prior to the date of cancellation, so notify the operator in writing and state the reasons for the proposed cancellation.

17(3) Before canceling a Letter of Approval or License, the Licensing Authority shall allow the operator a reasonable period of time, satisfactory to the Authority having jurisdiction, to rectify or correct any deficiencies which may exist at the facility or in the operation thereof.

17(4) Where the health, safety, or well being of the residents in a Residential Care Facility is or may be endangered, the Letter of Approval or License may be cancelled forthwith without notice as required under Subsection (2).

17(5) Where a Letter of Approval or License is cancelled under Subsection (4), the residents of the facility shall be removed from the premises forthwith to a safe place by the Supervising Agency or the agency or person responsible for the placement of the residents in the facility.

SUBJECT 1.2 Con't

SECTION

18(1)

Records

The operator of a facility shall:

- (a) keep records of each resident showing:
 - (i) the person's name, date of birth, and sex;
 - (ii) the person's date of admission and discharge;
 - (iii) the name, address, home and business telephone number of next of kin, and Supervising Agency if applicable;
 - (iv) the name and telephone number of a physician to contact in the event of accident or illness;
 - (v) any medications and therapeutic diets prescribed by, and any special instructions given by, the resident's physician; and
 - (vi) any medical disabilities made known to the operator by the resident, the resident's physician, next of kin, or Supervising Agency;
- (b) keep such clinical records as may be required with respect to the goals and treatment plans for each resident;
- (c) keep such personnel records as may be required with respect to the operation of the facility and make these available for inspection on request by the Licensing Authority;
- (d) allow person authorized by the Licensing Authority to examine and make copies of books, records and other documents which are required to be maintained under this regulation;
- (e) subject to Clause (d), ensure that all information gained with respect to any resident or resident's family is kept confidential;
- (f) advise the Supervising Agency of any serious change in condition, illness or death or unauthorized absence of a resident within 24 hours of the occurrence thereof; and
- (g) advise the Licensing Authority of, and investigate, any accident or incident which jeopardized the health or life of a resident to ascertain the circumstances of the accident or incident and institute appropriate measure to prevent similar occurrences in the future.

18(2) The operator of a facility who receives moneys or other valuable securities for the benefit and use of a resident shall:

- (a) keep and maintain a record thereof and hold those moneys or securities in trust for and on behalf of the resident;
- (b) issue receipts therefore;
- (c) keep and maintain a record of any of those moneys or securities disbursed or expended on behalf of the resident;

SUBJECT 1.2 Con't

- (d) at the request of the Licensing Authority, submit those records for inspection by the Licensing Authority or a duly authorized representative thereof; and
- (e) deposit or keep those moneys or valuables in a safe or other safe storage facility and shall release part or all of those moneys or securities to the resident at the request of the resident.

SECTION

19.

Safety

The operator of a facility shall ensure that the facility is provided with an approved and functioning smoke alarm on every floor level.

20.

The Operator of a Facility Shall:

- (a) not abuse a resident, or physically restrain a resident, other than momentary physical restraint for the purpose of protecting the person and property of a resident or others, and only to the degree necessary for such protection, without first obtaining approval from the resident's physician;
- (b) ensure that each resident's medication:
 - (i) is kept at the required temperature in a clean, well lighted, and secure storage area.
 - (ii) is kept in the original labeled container provided by the dispensing pharmacist; and
 - (iii) is administered by a responsible adult at the time and in time and in the dosage prescribed and that a medication record is maintained of the time and dosage administered;
- (c) ensure that an acceptable first aid kit is available and readily accessible in the facility.

21.

The Operator of a Facility Shall:

- (a) not accommodate physically handicapped residents unless the facility complies with the "Provisions for Physically Handicapped Persons" as detailed in Manitoba Building Code to the extent deemed necessary by the Authority having jurisdiction;
- (b) not admit residents requiring services other than those for which the facility has been approved or licensed;
- (c) not admit a greater number of residents than that authorized by the Letter of Approval or License;
- (d) advise the Supervising Agency and initiate the transfer of a resident to a more appropriate facility when the condition of the resident changes to the extent that safe and adequate care and supervision can no longer be provided; and
- (e) obtain the approval of the Licensing Authority before proceeding with any renovation or change to a facility that may alter the living space, or affect the structural strength, safety, or sanitary condition of the facility.

SUBJECT 1.2 Con't

SECTION

22.

Personal Services

The operator of a facility shall provide each resident of the facility with:

- (a) his or her own hand and bath towel and face cloth which shall be maintained in a clean condition by the operator;
- (b) separate storage space for the storage of clothing;
- (c) a separate and readily accessible storage area for the storage of personal belongings;
- (d) weekly laundry service for clothing, unless otherwise arranged by the Supervising Agency; and
- (e) facilities for the washing of personal clothing by residents choosing to do so.

23.

The operator of a facility shall ensure that every bedroom in the facility is:

- (a) comfortably and suitably furnished and has one chair for each resident;
- (b) separate for each sex unless the bedroom accommodates only a man or woman and his or her spouse or pre-school children;
- (c) provided with a separate bed for each resident which shall be:
 - (i) a minimum of 99 centimetres (39 inches) wide for each child and be adequate in length for the height of the resident;
 - (ii) provided with level, substantial springs, a comfortable mattress, a pillow, one pillow case, two sheets and sufficient blankets or coverings for comfort, and
 - (iii) provided with a complete change of clean bed linen once a week, or more often when soiled, and clean blankets or bed coverings at least every 6 months, and
- (d) provided with adequate artificial lighting.

24.

The operator of a facility shall ensure that each bathroom in the facility is provided with:

- (a) a door that can be locked to ensure privacy but which can be opened from the outside in the event of an emergency; and
- (b) an adequate supply of toilet tissue and soap.

SUBJECT 1.2 Con't

SECTION

25. The operator of a facility shall ensure that each dining area in the facility is:
- (a) separate from the sleeping area;
 - (b) provided with adequate seating facilities for all residents and staff;
 - (c) provided with adequate and suitable crockery and eating utensils, in good repair, for all residents.
26. The operator of a facility shall ensure that each kitchen in a facility is provided with:
- (a) a refrigerator, stove and sink of adequate size and in good working condition;
 - (b) suitable and adequate cooking utensils in good repair;
 - (c) suitable and adequate facilities for the storage of all perishable and non-perishable foods; and,
 - (d) suitable and adequate facilities for the storage of all cleaning supplies and other housekeeping products.
27. The operator of a facility shall:
- (a) at recognized meal time hours, serve a minimum of three meals daily which shall be varied, attractive, and nutritionally and calorically adequate for the dietary requirements of each resident as in the current Canada's Food Guide; and
 - (b) provide meals by room tray service when a resident is too ill to eat in the dining area.
28. The operator of a facility for more than eight residents shall compile weekly menu plans for the facility, and indicate thereon any change in the actual food served when variations in the planned menu become necessary, and retain the menus for a period of at least three months, after which time they may be destroyed.
29. **General Requirements**
- The operator of a facility shall:
- (a) permit the residents to receive visitors daily at any reasonable hour and at any time under special circumstances, except in the case of a child where a visit would be detrimental to the well being of the child in the opinion of the Supervising Agency;
 - (b) provide indoor living and recreation space with suitable games and equipment to enhance physical and emotional health;

SUBJECT 1.2 Con't

SECTION

29

Con't

- (c) allow the residents free access to the living and recreational areas and reasonable use of the equipment therein throughout the day and evening;
- (d) allow and encourage residents to independently utilize the community outside the facility and to constructively occupy their leisure time, and, for residents who do not adequately provide for their own leisure needs, make available an appropriate number and type of recreational and leisure time activities;
- (e) provide a telephone for the use of the residents;
- (f) give all of the residents clothing, personal possessions, money held in trust, and other valuables held in safe keeping to the resident or to the next of kin or Supervising Agency when a resident leaves the facility, or to the spouse or the executor or administrator of the residents estate on the residents death;
- (g) upon request of the Licensing Authority, cooperate in the evaluation of the effectiveness of the program offered in the facility; and
- (h) allow the Supervising Agency or Licensing Authority to have reasonable access to all persons resident in the facility.

30.

Forms

Forms required for the purpose of this regulation may be obtained from the office of a Licensing Authority.

DEFINITIONS

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SUBJECT

- 2.1 Definition of Terms –
Residential Care Licensing

SUBJECT 2.1 Definitions of Terms – Residential Care Licensing

“applicant” means a person who submits an application to establish and operate a Residential Care Facility;

“clinical record” (program record) means the documentation which the operator must maintain with respect to the goals and treatment plans for each resident as specified by a Supervising Agency;

“day program” means a scheduled educational, vocational, or recreational program attended by a resident away from the residential setting;

“drug” means a pharmaceutical substance which is used as a medication or in the preparation of medication to treat a disease or disorder, or to regulate or control functioning;

“incident” or “accident” means an unforeseen circumstance or event that results in a serious disruption of normal activities or environment, or jeopardizes the safety, health or well-being of the individuals involved;

“inspection checklist” means a form completed by the Licensing Authority at the time an on-site inspection is conducted to record the results of their assessment of compliance or non-compliance with the licensing requirements set forth in Manitoba Regulation 484/88;

“licensed level” means the maximum level of care service which a care facility is approved to deliver to a resident as specified on its License.

“licensed occupancy” means the maximum capacity or number of occupants a facility is authorized to care for;

“Licensee” means a person who is licensed to operate a Residential Facility;

“licensing order” means an order, issued by the Licensing Authority, that compels a residential care operator to comply with a specific stated regulation or standard, within a specified period of time.

“Manitoba Building Code” established the standard of fire safety for the construction of buildings, including extensions, alterations, buildings involving a change of occupancy, and upgrading of buildings to remove an unacceptable fire hazard.

“Manitoba Fire Code” establishes the standard for fire prevention, fire fighting and life safety in buildings use, including standards for the conduct of activities causing fire hazards, maintenance of fire safety equipment and egress facilities, standards for portable extinguishers, limitations on building contents and the establishment of fire safety plans including the organization of supervisory staff for emergency purposes.

SUBJECT 2.1 Con't

Conditional License” means a temporary License which is issued to a Licensee for one-month and is conditional upon the Licensee’s agreement to comply with stated requirements within the provisional period.

“Public Health” – The Public Health Act and Regulations under the Act have established standards relation to the preservation of life and the health of people of the province and of all matters relating to the prevention of injury to life and limb not specifically dealt with some other Act of the Legislature.

**ADMINISTRATIVE GUIDELINES FOR THE
LETTER OF APPROVAL PROCESS**

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Authority – Manitoba Regulation 484/88R

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SUBJECT 3.1 Letter of Approval Application Process

SECTION 3 No person shall establish or operate a Residential Care Facility for one to four children; or for one to three adults suffering from a mental disorder, or mental retardation, or infirmities of aging, without a valid and subsisting Letter of Approval for the purpose.

Standard: All persons shall obtain a Letter of Approval prior to establishing and operating a Residential Care Facility. Letters of Approval are issued by the Designated Licensing Authority in the province. Refer to Appendix A.

SECTION 4 An application for a Letter of Approval under Section 3 shall be in such a form as the minister may approve.

Standard: Applicants shall consult with the appropriate Regional/Program Authority to determine the need for the proposed services, to establish whether their qualifications, abilities and aptitude are consistent with requirements and discuss proposal procedures.

Guideline: The Regional/Program Authority may offer scheduled orientation sessions for interested persons.

Standard: Following approval of a proposal, the Designated Licensing Authority shall provide the applicant with an application for a Letter of Approval. The application and all required supporting documents shall be completed and signed by the applicant and the documents returned to the Designated Licensing Authority.

SUBJECT 3.2 Requirements for Issuance of a Letter of Approval

SECTION 5 A Letter of Approval may be issued by the Licensing Authority only after that Authority is satisfied that:

- (a) the facility meets the recommendations of:
 - (i) the local Child Caring Agency to the effect that the conditions in the home favor the normal development of the child, or

Standard: As the Designated Licensing Authority, the local Child Caring Agency shall participate in the review/evaluation of the applicant, proposal, and the on site inspection to ensure the home meets established program and licensing criteria.

SECTION 5 A Letter of Approval may be issued by the Licensing Authority only after that Authority is satisfied that:

- (a) (ii) the local Supervising Agency to the effect that conditions in the home are conducive to the well-being of the adult with the disability or disorder;

SUBJECT 3.2 Con't

Standard: As the Designated Licensing Authority, the Regional/Program Authority shall participate the review/evaluation of the applicant, proposal and the on site inspection to ensure the home meets established program and licensing criteria.

SECTION 5 A Letter of Approval may be issued by the Licensing Authority only after that Authority is satisfied that:

- (b) the premises comply with legislation, regulations, and standards governing fire safety and public health protection;

Standard: The Designated Licensing Authority shall ensure that the proposed facility is in compliance with legislation, regulations, and standards required by Fire and Health Authorities in their jurisdiction. Refer to Appendix A for the appropriate Fire Safety and Public Health Authorities.

SECTION 5 A Letter of Approval may be issued by the Licensing Authority only after that Authority satisfied that:

- (c) all personnel connected with the operation of the facility are of good character and medically, physically, and emotionally fit to provide the required care and where deemed necessary, a medical examination or character references maybe required; and

Standard: Where the Designated Licensing Authority has concerns respecting the applicant's medical, physical, and emotional health confirmation may be required by a certified practitioner. Character references shall be required and verified.

The following qualifications will be considered the criteria for staff competency. All staff shall demonstrate a level of skill in each area which is consistent with the needs of their position, job function, and responsibilities.

Staff responsible for the care, supervision, or safety of residents shall minimally meet the following qualifications:

- (a) Language, writing, and comprehension skills at a level necessary for effective communication and the maintenance of required written records; (Refer to Appendix G)
- (b) Been provided with an orientation to licensing legislation, regulations, standards, facility policies, procedures, routines, and responsibilities conducted by the Licensee.
- (c) A Criminal Record Check; (Refer to Appendix E)
- (d) An Abuse Registry Record check if employed in a Children's Residential Care Facility. The Abuse Registry check may be accessed through Child and Family Support, 114 Garry Street, Winnipeg MB R3C 1G1;
- (e) Certification in First Aid at Level 1 (Emergency Level).

SUBJECT 3.2 Con't

Guideline At least one staff on duty shall be certified in First Aid or currently enrolled in a recognized course.

SECTION 5 A Letter of Approval may be issued by the Licensing Authority only after that Authority is satisfied that:
(d) the facility meets such other standards and condition may be required by the Minister.

Standard: Applicants are required to comply with such other standards, conditions, and policies as established by the department. Other standards and conditions referenced in this regulation are documented in the Appendices.

SECTION 6 A Letter of Approval issued under this regulation shall:
(a) be in such form as the minister may approve;
(b) designate the maximum number and sex of person who may be accommodated therein;
(c) be limited as to a particular operator and premises; and
(d) state any other conditions on which the Letter of Approval is issued.

Standard: A Letter of Approval shall include all of the above-specified information. The Letter of Approval shall be placed in a location within the facility where it is in plain view of the public.

The Letter of Approval is issued to the applicant and to a specific address. The Letter of Approval is not transferable to another person or location.

A Letter of Approval does not in any way guarantee the placement of residents in the facility or imply funding approval.

SUBJECT 3.3 Initial Application / Letter of Approval Procedure

1. The applicant contacts the Designated Licensing Authority to make application for Letter of Approval;
2. The Designated Licensing Authority will provide the applicant with the necessary information with respect to the licensing requirements;
3. The applicant will be requested to submit a proposal to the Designated Licensing Authority detailing their qualifications and the services that they propose to provide.
4. The Designated Licensing Authority will review the proposal to determine the feasibility; that the applicant has the qualifications and skills necessary to provide the proposed services; that the proposed facility meets the regional/program needs; that the physical facility is appropriate for the residents.
5. Following approval of the proposal the applicant will be provided with an application form and a copy of the Licensing Manual.
6. The applicant will complete the application and forward to the Designated Licensing Authority with all required documentation i.e. Criminal Record Check, First Aid Certification, etc.
7. The Designated Licensing Authority will check all references.
8. The applicant will ensure that the zoning, fire, and public health requirements are met.
9. The Designated Licensing Authority will conduct an on-site orientation to the Residential Care Licensing Manual and a licensing review by completion of the Inspection Check List.
10. When all of the requirements are satisfied, the Licensing Authority will issue a Letter of Approval.

SUBJECT 3.4 Annual Review of a Letter of Approval

The following is a summary of the annual review procedure for a Letter of Approval.

1. The Designated Licensing Authority completes an on-site inspection to ensure that the facility meets the requirements of Manitoba Regulation 484/88R, and is in compliance with the Residential Care Standards.
2. If any deficits or violations are noted, the Designated Licensing Authority provides the Licensee with a list of requirements and compliance dates.

SUBJECT 3.4 Con't

When all specified requirements have been met, the Licensee verifies to the Designated Licensing Authority that the requirements have been met.

The Authority, when deemed necessary, conducts a re-inspection to ensure compliance. A new Letter of Approval may be issued when all requirements have been satisfied.

4. (a) If any requirements are not met by the compliance date, a conditional Letter of Approval may be issued, at the discretion of the Designated Licensing Authority, for a one-month period.
- (b) If the Licensee fails to comply by the expiry date of the first conditional period, the Letter of Approval may be placed in conditional status for a second one-month period. During this period the Designate Licensing Authority shall suspend admissions to the facility.

Once the requirements have been met and verified, the Letter of Approval will be renewed. At that point admissions can resume.

5. Should the Licensee fail to comply by the expiry date of the second conditional period, the Letter of Approval may be placed in the third and final conditional status for an additional one-month period. Admissions will remain suspended.

Inspections will be conducted to confirm compliance. If the Licensee is not in compliance a Notice Cancellation of Letter of Approval may be issued by the Designated Licensing Authority.

SUBJECT 3.5 Sibling Foster Children

SECTION 8 Notwithstanding. . . A Letter of Approval may be issued to a foster home for children which accommodates more than four foster children where all the foster children in the home are sibling.

Standard: A Letter of Approval may be issued to a foster home that provides care to more than four siblings and shall indicate the total number of children.

**ADMINISTRATIVE GUIDELINES
FOR THE LICENSING PROCESS**

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Authority – Manitoba Regulation 484/88R

- 4.1 License Applications Process
- 4.2 Requirements for Issuance of a License
- 4.3 Initial Application/Licensing Procedure
- 4.4 Renewal/Re-Issuing of a License
- 4.5 Renewal/Re-Issuing of License Procedure

SUBJECT 4.1 License Application Process

SECTION 7 No person shall establish or operate a Residential Care Facility for more than four children or more than three adults without a valid and subsisting License for the purpose issued by the Licensing Authority.

Standard: All persons shall obtain a License prior to establishing and operating a Residential Care Facility. The Licensing Authority for more than four children and more than three adults is the Residential Care Licensing Branch.

SECTION 9 Notwithstanding Section 7, no person shall establish a Residential Care Facility for more than 15 residents without first obtaining written permission to do so from the Minister.

Standard: An application to establish a Residential Care Facility for more than 15 residents required a written recommendation from the Regional/Program Authority. The Licensing Authority shall review the request and, where approved, shall forward the request for consideration to the Minister. The applicant and Regional/Program Authority shall be advised of the Minister's decision.

SECTION 10 An application for a License under this regulation shall be submitted on a form provided by the Licensing Authority and shall be accompanied by a sketch showing the rooms to be occupied and the number to be cared for in each room.

Standard: The Residential Care License Application Form will be provided to the applicants. The application, and all required supporting documents including a physical structure report shall be completed, dated and signed by the applicant, witnessed, and forwarded to the Licensing Authority.

Refer to Section 4.3 for complete details with respect to the License application procedure.

SUBJECT 4.2 Requirements for Issuance of License

- SECTION 11 A License may be issued by the Licensing Authority only after receipt of recommendations from the Authority having jurisdiction as to compliance with legislation, regulations, and standards governing;
- (a) fire safety;
 - (b) public health protection
 - (c) residential care; and
 - (d) such other standards and conditions as may be required by the Minister.

SECTION 11(a) FIRE SAFETY:

Standard: Prior to any inspections by the Authority having jurisdiction for fire safety, the applicant shall ensure that the proposed facility complies with:

- Zoning by-laws – established by the municipality to control the uses of land in the community.
- Building code – based building classification, use, and occupancy, including the residents ability to respond to the emergencies (i.e.) fire, the Building Authority issues and occupancy permit to indicate that a building inspection has verified that all building requirements are met. If there is an alteration, renovation, or construction to the facility, the applicant shall acquire the appropriate permits from the Building Authority.

Approval from the Authorities having jurisdiction for zoning, building, and fire safety must be received by the Licensing Authority prior to the issuance of a License.

The following Acts and Codes (Regulations) govern the standards for buildings and fire safety:

- The Buildings and Mobiles Homes Act and the Manitoba Building Code
- The Fire Prevention Act and the Manitoba Fire Code.

Refer to Appendix A for the listing of Zoning, Building and Fire Safety Authorities.

SUBJECT 4.2 Con't

SECTION 11 (b) Public Health Protection;

Standard: The applicant shall ensure that the proposed facility complies with all relevant public health regulations and standards. Approval by the Authority having jurisdiction must be received by the Licensing Authority prior to the issuance of a License.

Section 2 of the Public Health Act provides that the Minister shall cause to be inspected all public or private facilities for the care of persons with a mental or physical disability or disorder to ensure the maintenance of proper sanitary conditions and conformity with this Act and the Regulations.

The following Public Health Regulations and by-laws apply to Residential Care Facilities:

City of Winnipeg

Sanitation – Regulation p. 210-R3-Division I
Dwellings and Buildings-Regulation p. 210-R3-Division XII
City of Winnipeg Minimum Standard of Housing Repair By-Law No. 19165
City of Winnipeg Maintenance and Occupancy By-Law No. 4903/88
City of Winnipeg Untidy and Unsightly Premises by-Law No. 762/74
City of Winnipeg Food Services By-Law No. 2920/81

Other Areas of Province

Sanitation-Regulation p. 210-R3-Division I
Dwellings and Buildings-Regulation P. 210-R3-Division XII
Litter-Environment Act-Manitoba Regulation 92/88R
Private Sewage Disposal Systems-Environment Act-Manitoba Regulation 95/88R
Water Supplies-Regulation p. 210-R3-Division VII
Food and Food Handling-Manitoba Regulation 204/83

Copies of Public Health and Environment Regulations may be obtained from the Queen's Printer, 200 Vaughan Street, Winnipeg MB.

Refer to Appendix A for a listing of the Public Health Authorities.

SUBJECT 4.2 Con't

SECTION 11 (c) Residential Care;

Standard: Subject to any other licensing provisions applicants are required to comply with the regulations, standards, policies, and procedures developed by the Licensing Authority, to ensure the health safety and well-being of the residents in care.

SECTION 11 (d) Such other standards and conditions as may be required by the Minister.

Standard: Applicants are required to comply with any and all approved standards, conditions, and policies established by the Province of Manitoba which pertain to the operation of a Residential Care Facility.

Other approved standards and conditions referenced in this regulation are documented in the Appendices.

An on-site inspection shall be conducted by the Licensing Authority to determine compliance.

SECTION 12 Every License issued under this regulation shall:

- (a) be issued for a period of one year;
- (b) be in such form as the minister may determine;
- (c) have indorsed thereon the date on which it expires;
- (d) designate the maximum number and sex of persons who may be accommodated in the facility;
- (e) be limited to a particular licensee and premises; and
- (f) state any other conditions on which the License is issued.

Standard: The License shall include all the information specified above. The Licensee is required to display the License in a location within the facility where it is in plain view of the public.

The License is issued for the specific address and is not transferable to another location or person. (Refer to Appendix M).

A License does not in any way guarantee the placement of residents in the facility or imply funding approval.

SUBJECT 4.3 Initial Application / Licensing Procedure

The following is a summary of the initial application and licensing procedure:

1. The applicant submits a proposal to the Regional/Program Authority, Program Directorate, or Regional Office as appropriate to establish need for the resource.
2. Where the proposal is deemed to meet a defined regional need, the Regional/Program Authority will advise the applicant and forward the proposal to Residential Care Licensing for review and consideration.
3. If the proposal is approved Residential Care Licensing will advise the applicant and forward the License Application and Personal Reference Forms for completion. Where the proposal is not deemed appropriate, the Licensing Authority will advise the applicant and Regional/Program Authority.
4. The applicant will complete the application form and return it to Residential Care Licensing with all required documentation, i.e. Criminal Record Check, written person references, Letters of Incorporation, and Physical Structure Report.
5. The Licensing Authority will acknowledge receipt of the application and advise the applicant of the steps necessary to obtain zoning and building approvals.
6. The applicant will forward confirmation of approvals from Zoning and Building Authorities to Residential Care Licensing. Following receipt of same, the Licensing Authority co-ordinates the necessary inspections and conducts an on-site orientation to the Licensing Manual and a Licensing Review.
7. When the facility is in compliance with all requirements, Residential Care Licensing will issue a License providing the Authority to operate the Residential Care Facility.

SUBJECT 4.3 Con't

8. Where any deficiencies are identified as the result of the inspections the applicant will be advised by Residential Care Licensing.
9. When all requirements have been met the applicant advises Residential Care Licensing who will co-ordinate the re-inspections to confirm compliance.
10. Upon confirmation of compliance, Residential Care Licensing will issue a License providing the Authority to operate a Residential Care Facility.

SUBJECT 4.4 Renewal of License

SECTION 13(1) Notwithstanding Sections 11 and 12, a License may be renewed for two one-year periods by the Licensing Authority.

Standard: Approximately 3 months prior to the expiry date, an application form shall be forwarded to the Licensee. An on-site inspection, to confirm compliance, shall be conducted by the Licensing Authority prior to renewal of the License.

Re - License

SECTION 13(2) An operator whose License has been renewed twice as set out in Subsection (1) and who desired to continue to operate beyond the expiry date of the second renewal shall apply for a new License.

SECTION 14 Two months prior to the expiry date of a License, or a renewal of License, the application for a new License or a renewal of an existing License shall submit an application to the Licensing Authority on a form approved by the minister.

Standard: Approximately three months prior to the expiry date of an existing License, a License Application form shall be forwarded to the Licensee.

The Licensee shall complete the application and return it to the Licensing Authority.

Official confirmation of a Licensee's compliance with Fire and Public Health Regulations shall be requested.

An on-site licensing review shall be conducted by the Licensing Authority and the Licensee advised of any requirement by completion of the Inspection Check List.

SUBJECT 4.5 Renewal / Re-License Procedure

The following is a summary of the Renewal and Re-License procedure.

1. The Licensee returns the completed Renewal/Re-license Application Form to Residential Care Licensing.
2. Where a facility is in Re-License status Residential Care Licensing requests inspections of the facility by the Fire and Public Health Authorities.
3. Residential Care Licensing conducts an on-site inspection to ensure that the facility meets the requirements of Manitoba Regulation 484/88R, and related Residential Care Standards.
4. If the facility is in compliance with Fire, Public Health, and Residential Care Standards a new License is issued.
5. If any requirements or violations are noted, the Licensing Authority advises the Licensee and establishes a date for compliance.

The Licensee verifies that the requirements have been met by signing and dating each item on the Inspection Check List and forwarding the white copy to Residential Care Licensing.

The Authority may conduct re-inspections to ensure compliance. A new License will be issued when all requirements have been met.

6. If there are outstanding requirements on the date of re-issuance, a Conditional License may be issued for a one-month period.
7. If the Licensee fails to comply by the expiry date of the first conditional period, the License may be placed in conditional status for a second one-month period. During this period Residential Care Licensing shall suspend admissions to the facility.
8. Where the Licensee fails to comply by the expiry date of the second conditional period, the License may be placed in third and final conditional status for an additional one-month period. Admissions remain suspended.

Inspections will be conducted to confirm compliance. If the Licensee is in compliance a new License will be issued.

Where the Licensee is not in compliance a Notice of Cancellation of License may be issued by Residential Care Licensing.

CLOSURE / APPEAL PROCEDURE

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Authority – The Social Services Administration Act C165
- Manitoba Regulation 484/88R

- 5.1 Voluntary Closure
- 5.2 Cancellation of a License or Letter or Approval
 - 5.2.1 Public Health/Fire Safety
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 - 5.2.7 Relocation of Residents
- 5.3 Appeal Process
- 5.4 Action by Committee
- 5.5 Appeal Procedure
- 5.6 Penalty
- 5.7 Continuing Offense

SUBJECT 5.1 Voluntary Closure

SECTION 15 Before the owner or operator of a Residential Care Facility discontinues the operation, he or she shall, by notice in writing served on the Licensing Authority not less than 60 days prior to the proposed date of discontinuance, advise the Authority of this intention to discontinue the operation.

Standard: The 60 days allows for the time necessary to co-ordinate the closure of the facility and relocate the residents.

Upon closure, the Licensee shall surrender the License to the Licensing Authority.

SUBJECT 5.2 Cancellation of a License or Letter of Approval

5.2.1 Public Health / Fire Safety

SECTION 17(1) A License to operate a Residential Care Facility is subject to review and may be cancelled in writing by the Licensing Authority if:

- (a) the facility is found to be operated without due regard to recommendations by the Authority having jurisdiction as to compliance with legislation, regulations, and standards governing public health and fire safety;

Standard: The Licensee shall maintain the facility in accordance with all standards and regulations as stipulated in Public Health and Fire Legislation.

Inspections shall be conducted by the Authorities having jurisdiction and to ensure compliance. Where requirements and violations are identified, compliance orders will be issued. Where the Licensee fails to comply with the Order, the Public Health, and the Fire Authorities shall notify the Licensing Authority and may proceed with prosecution. The Licensing Authority may proceed with suspension or cancellation of the License.

5.2.2 Program / Agency

SECTION 17(1)(b) The facility is found to be operated without due regard to recommendations by the local Child Caring Agency or local Supervising Agency as to the comfort or well-being of the residents.

- Standards:
1. The Licensee shall ensure that program standards, as defined and specified by the Supervising Agency, are maintained.
 2. The Supervising Agency shall monitor the program standards and initiate remedial or corrective action where necessary.
 3. Where remedial action is unsuccessful and where in the opinion of the Supervising Agency cancellation of License is warranted, the Agency shall notify the Licensing Authority, in writing, stating the reasons for the recommended cancellation.

5.2.3 Provincial Acts and Regulations

SECTION 17(1)(c) The facility is operated in a manner contrary to this regulation or any applicable provincial Act or Regulation.

Standard: The Licensee shall be knowledgeable of, and comply with, all Acts, Regulations, and Standards pertaining to the operation of Residential Care Facilities.

Guideline: Some of the Acts and Regulations, which apply to the operation of Residential Care Facilities, may include but are not limited to:

- Labour Relations Act
- Public Health Act
- Human Rights Act
- Worker's Compensation Act
- Criminal Code
- Work Place, Health and Safety Act
- Buildings and Mobile Homes Act
- Young Offenders Act

5.2.4 Notification

SECTION 17(2) A Licensing Authority which proposes to cancel a License or Letter of Approval shall, not later than 60 days prior to the date of cancellation, so notify the operator in writing and state the reasons for the proposed cancellation.

- Standard:
1. Where the Licensing Authority deems it necessary to cancel a License, the Licensing Authority shall advise the Licensee of the decision and state the reason(s). The Licensing Authority shall also advise the Licensee of the right of appeal.
 2. The decision and the reason(s) for cancellation of the License shall be formally communicated to the Licensee by either Certified Mail or courier.
 3. The Licensee may, within ten days of receipt of written notice of Cancellation of License, appeal the decision to the Social Services Advisory committee. Refer to Section 5.1 Appeal Process.
 4. A contingency plan shall be developed by the Regional/Program Authority to ensure the safety and well-being of the residents.
- Upon closure of a facility the Licensee shall surrender the License to the Licensing Authority.

5.2.5 Opportunity to Comply

SECTION 17(3) Before canceling a License the Licensing Authority shall allow the Licensee a specified period of time to correct the standards violations and to comply with the stipulated requirements.

- Standard:
1. Prior to canceling a License, the Licensing Authority shall allow the Licensee a specific period of time to correct the standards violations and to comply with the stipulated requirements.
 2. Standards violations shall be identified on the Inspection Check List and provided to the Licensee or their designate during the on-site inspection.
 3. Where additional time, beyond the License expiry date, is required for the Licensee to comply, a Conditional License may be issued.
 4. A Conditional License may be issued for a maximum of three specified periods. The maximum time in which a facility may operate in Conditional Status is three (3) months which shall include the sixty (60) days cancellation notice period.

SUBJECT 5.2 Con't

5.2.6 Cancellation Without Notice

SECTION 17(4) Where the health, safety, or well-being of the resident(s) in a Residential Care Facility is, or may be endangered, the License may be cancelled forthwith without notice as required under Subsection (2).

- Standard:
1. Where the Licensing Authority has reason to believe that residents may be a risk, the Licensing Authority, in conjunction with the Program/Regional Authority, shall ensure the safety of the residents and initiate an investigation.
(Refer to Appendix C)
 2. Where the investigation confirms that the health, safety, or well-being of residents is, or maybe, in jeopardy the Licensing Authority shall cancel the License without notice. The Licensing Authority may initiate whatever action is deemed necessary to ensure the safety and well-being of the resident(s).
 3. The Licensing Authority shall advise the Licensee of the results of the investigation, state the reason(s) for the immediate cancellation of the License and advise the Licensee of the right appeal.

Guideline: Where a police investigation is in progress, the Licensing Authority may not be at liberty to divulge the details of either the investigation or the allegations.

- Standard:
4. A written decision, stating the reason for cancellation of the License, shall be delivered to the Licensee by certified mail or courier.
 5. Upon closure, the Licensee shall surrender the License to the Licensing Authority.

5.2.7 Relocation of Residents

SECTION 17(5) Where a License is cancelled under Subsection (4), the resident(s) of the facility shall be removed from the premises forthwith to a safe place by the Supervising Agency or the agency or person responsible for the placement of the resident(s) in the facility.

Standard: Residents and their advocates shall be assisted in relocation by the Supervising Agency.

SUBJECT 5.3 Appeal Process

SECTION 13(5) Any person aggrieved by the:

- (a) refusal of the Licensing Authority to issue a Letter of Approval or a License; or
- (b) cancellation or suspension of a Letter of Approval or a License: or
- (c) the refusal to issue or the cancellation or suspension of a License for a facility under Clause 12(1)(a); may, within 10 days after receiving notice of the refusal, cancellation or suspension, appeal the matter to the Social Services Advisory Committee.

SUBJECT 5.4 Action by Committee

SECTION 13(6) Upon receipt of a notice of appeal; under Subsection (5), the committee shall, within 30 days of the date of the appeal, consider the matter and in writing advise the appellants of its decision.

SECTION 13(7) Where the appellant is not satisfied with the decision of the committee under Subsection (6) he may within 10 days from the date of the determination by the committee appeal the matter of the Court of Queen's Bench.

SUBJECT 5.5 Appeal Procedure

1. Any person aggrieved by the Licensing Authority's decision or reasons for the refusal or cancellation of a License, may within ten (10) days after receipt of this notice, appeal in writing to the Social Services Advisory Committee, Room 302-259 Portage Avenue, Winnipeg MB R3B 2A9 945-3003.
2. Upon receipt of the written Notice of Appeal, the Social Services Advisory Committee will schedule a hearing date.
3. The Social Services Advisory Committee will request a report from the Licensing Authority.
4. The report will be distributed to the Appellant and committee members prior to the date of the hearing.
5. The Appellant and Defendant may be represented by legal counsel at the hearing.

SUBJECT 5.5 Con't

6. The Social Services Advisory Committee will, within 30 days of the date of the appeal, consider the matter and, in writing, advise the Appellant of its decision.
7. The Appellant, if not in agreement with the decision of the Social Services Advisory Committee, may within 10 days of receipt of the decision by the committee, appeal the matter to the Court of Queen's Bench.
8. Upon receipt of the Notice of Appeal, the Court of Queen's Bench will schedule a court date.
9. The decision of the Court is final and the matter will not be considered further in any form.

SUBJECT 5.6 Penalty

The following statutes are contained in the Social Services Administration Act.

SECTION 16(1) Every person who violates or contravenes Section 12 or 13 is guilty of an offense and liable, on summary conviction, to a fine of not less than \$200.00 and not more than \$1,000.00.

- Standard:
1. Sections 12 and 13 specify the following situation as violations:
 - 12(1) The operation of a Residential Care Facility without a License;
 - 13(1) (a) The advertisement or presentation of an unlicensed facility as licensed;
 - (b) The provision of any residential care services in an unlicensed facility;
 - (c) The accommodation of any person who requires residential care services in an unlicensed facility;
 - 13(2) The failure to make application for a License;
 - 13(3) The failure to meet licensing requirements.

SUBJECT 5.6 Con't

2. Where the Licensing Authority is advised of any of the above noted violations, an investigation shall be initiated.
3. Where the allegation is confirmed, the Licensing Authority shall advise the individual that they are in violation.
4. The individual shall be ordered to cease and desist.

The Order will indicate the nature of the violation and where applicable stipulate compliance date.

5. Failure of the individual to comply with the Order may result in charges being laid.

Where applicable the Licensing Authority will notify the appropriate Regional/Program Authority.

SUBJECT 5.7 Continuing Offence

SECTION 16(2) Where a violation or contravention of Section 12 or 13 continues for more than one day, the person violating or contravening the subsection is guilty of a separate offense for each day that the violation or contravention continues.

Standard: Any person who is in violation of Section 12 or 13, and continues in violation, will be guilty of a separate offense for each day that the violation continues and liable for fines as specified in Section 16(1).

STAFFING

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- 6.2 Staffing Level Determination
- 6.3 Staff Functions
- 6.4 Position Descriptions
- 6.5 Orientation of Staff
- 6.6 Night Staff
- 6.7 Personnel Records

SUBJECT 6 Qualifications of Staff

- SECTION 16 The Licensee of a Residential Care Facility for more than three adults and four children shall:
- (a) maintain competent personnel sufficient in number and adequate for the maintenance, care, and supervision of the residents and for other requirements of the facility; and
 - (b) require that night duty staff remain awake and on duty where any resident requires constant supervision.

SUBJECT 6.1 Qualifications

- SECTION 16 The Licensee of a Residential Care Facility for more than three adults or more than four children shall:
- (a) maintain competent personnel

- Standard:
- 1. The following qualifications shall be considered the criteria for staff competency. All staff shall demonstrate a level of skill in each area which is consistent with the needs of their position, job function, and responsibilities.
 - 2. Staff responsible for the maintenance, care, and supervision of the residents and for other requirements of the facility shall minimally meet the following qualifications:
 - (a) Language, writing and comprehension skills at an intermediate level as defined by The Adult Language Training (ALT) Branch or a complete Canadian High School Grade 10. (Not GED) Refer to Appendix G.
 - (b) Been provided with an orientation to licensing legislation, regulations and standards, facility policies procedures, routines and responsibilities, which is conducted by the Licensee.
 - (c) A Criminal Record Check; (Refer to Appendix E).
 - (d) An Abuse Registry Check, if employed in a children's residential care facility. The Abuse Registry Check may be accessed through Child Welfare and Family Support, 201-114 Garry Street, Winnipeg MB R3C 4V5 – Fax # 945-6717
 - (e) Certification in First Aid at Level 1 (Emergency Level)

Guidelines: At least one staff on duty shall be certified or currently enrolled in a recognized course.

SUBJECT 6.2 Staffing Level Determination

- SECTION 16 The Licensee of a Residential Care Facility for more than three adults or four children shall:
- (a) Maintain competent personnel sufficient in number and adequate for the maintenance, care and supervision of the residents and for other requirements of the facility.

Standard: The Licensee shall determine and ensure that sufficient staff resources are in place to carry out the functions as provided in the following guidelines.

SUBJECT 6.3 Staff Functions

Guidelines: The staff functions described in this section refer specifically those functions required to meet the licensing standards and regulations. Various programs may have expectations which exceed those listed in this section.

1. Care and Supervision – includes but are not limited to:
 - Assisting residents with the activities of daily living, i.e., selection of clothing, dressing, hygiene, grooming, bathing;
 - Monitoring and/or administering medication, monitoring basic medical care, and follow ups;
 - General supervision, guidance, and direction to residents;
 - Encouraging residents to participate in social/recreational activities.

2. Dietary/Food Service – includes but are not limited to:
 - Maintenance of menu and menu planning including noting changes in menu;
 - Preparing and serving food;
 - Purchasing of food and supplies;
 - Preparing special diets;
 - Consulting with food service specialists and licensing personnel as required;
 - Clean-up of food preparation and eating areas;
 - Dishwashing.

3. Domestic Support/Facility Maintenance – includes but are not limited to:
 - Daily cleaning of the facility; vacuuming, dusting, sanitizing of food preparation areas, and bathing facilities;
 - Refuse collection and disposal;
 - Scheduled weekly, monthly, and seasonal cleaning maintenance tasks;
 - Bed making and changing of linens;
 - Laundry.

SUBJECT 6.4 Position/Job Description

- Standard:
1. The Licensee of a staffed Residential Care Facility shall develop staff position/job descriptions that shall be used as the criteria for the hiring of staff. The Licensee shall ensure that the standards contained in Manitoba Regulation 484/88R are fully addressed in the job descriptions.
 2. Position descriptions shall include:
 - Position title (i.e. care/supervision, dietary, domestic.);
 - Reporting lines – person to whom employee is accountable;
 - Responsibilities (referred in Subject 6.3);
 - Qualifications required (referred in Subject 6.1);

SUBJECT 6.5 Orientation Staff

- Standard:
1. The Licensee of a Residential Care Facility shall provide each employee with an orientation to residential care standards, policies, procedures, and routine utilizing the Staff Orientation format or comparable format.
 2. Upon completion of the orientation the employee shall sign the staff orientation format verifying his/her participation in the orientation. The form shall be retained on the individual's personnel file.
 3. Policies and Procedures Manuals and the Residential Care Licensing Manual shall be made available to all employees and volunteers.

SUBJECT 6.6 Night Staff

- SECTION 16 The Licensee of a Residential Care Facility for more than three adults or four children shall:
- (b) required that night duty staff remain awake and on duty where any resident requires constant supervision.

- Standard:
1. Night duty staff shall be awake on duty where:
 - (i) any resident requires monitoring or supervision overnight due to an illness or behavior problems;
 - (ii) the "building layout" precludes staff from hearing residents or events and responding appropriately. In this situation, night duty staff shall make regular rounds;
 - (iii) indicated as a program expectation;

SUBJECT 6.6 Con't

- (iv) Residents, due to physical, behavioral, or psychiatric problems requires one-to-one supervision in order to evacuate the facility additional staff shall be required. This will be determined on a case-by-case basis by the Residential Care Licensing and the Supervising Agency.

SUBJECT 6.7 Personnel Records

SECTION 18(1) The operator of a facility shall:

- (c) keep such personnel records as may be required with respect to the operation of the facility and make these available for inspection on request by the licensing authority.

Standard:

A Licensee of a staffed Residential Care Facility shall maintain a personnel file on each employee which include, but is not limited to, the following:

- Application for Employment, Employee qualifications including communications skills and ability to maintain the required records and or Residential Care Communications Skills Form if assessed by The Adult Language Training (ALT) Branch, Employment History, Character and Work references and date of employment;
- Valid Criminal Record Check (Appendix E);
- Valid Certification in First Aid;
- Completed and duly signed Orientation Format;
- Yearly Performance Evaluations.

RESIDENT RECORDS

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Authority – Manitoba Regulation 484/88R

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7.6.5	Security and Release of Valuables

SUBJECT 7.1 Admission Documentation

SECTION 18(1) The operator of a facility shall:

- (a) keep records of each resident showing:
 - (i) name, date of birth, and sex;
 - (ii) the person's date of admission and discharge;
 - (iii) name, address, and home and business telephone number of next of kin and supervising agency if applicable;
 - (iv) the name and telephone number of a physician to contact in the event of accident or illness;
 - (v) any medications and therapeutic diets prescribed by, and any special instructions given by the resident's physician;
 - (vi) any medical disabilities made known to the operator by the resident, his physician, next of kin, or Supervising Agency.

- Standard:
- 1. The Licensee shall ensure that the information described above is obtained either prior to, or at the time of, the resident admission to the facility.

This information shall be kept current and be updated as changes occur in the residents status or condition.
 - 2. This information shall be readily accessible for staff reference.

SUBJECT 7.2 Clinical Records

SECTION 18(1) The operator of a facility shall:

- (b) keep such clinical records as may be required with respect to the goals and treatment plans for each resident;

- Standard:
- 1. The Regional/Program Authority shall determine the nature and extent of the clinical records required with respect to the goals and treatment plans.
 - 2. The Licensee shall maintain the clinical records in the residential file.
 - 3. Optical, medical, and dental examinations shall be completed consistent with accepted medical practices.

SUBJECT 7.3 Access to Records

SECTION 18(1) The operator of a facility shall:

- (d) allow persons authorized by the Licensing Authority to examine and make copies of books, records, and other documents which are required to be maintained under this regulation.

Standard: The Licensing Authority and authorized representatives of the Licensing Authority shall take such measures as deemed necessary to carry out the business of government. A receipt shall be provided for any records removed from the premises.

SUBJECT 7.4 Confidentially

SECTION 18(1) The operator of a facility shall:

- (e) subject to Clause (d) ensure that all information gained with respect to any resident or his family is kept confidential.

Standard:

1. The Licensee of facility shall ensure that resident files are maintained in a secure location; that the information is made available only to authorized personnel.
2. Any information gained with respect to a resident or a resident's family is to be treated as confidential.
3. Staff shall be made aware of the requirement for confidentiality with respect to resident information.

SUBJECT 7.5 Notification

SECTION 18(1) The operator of a facility shall:

- (f) advise the Supervising Agency of any serious change in condition, illness, death, or unauthorized absence of a resident within 24 hours of the occurrence thereof;

Standard: A Licensee shall keep the Supervising Agency informed of the resident's condition and status at all times. In a crisis or emergency situation the Licensee, or their designate, shall inform the Supervising Agency or advocate as soon as possible, but under no circumstances more than 24 hours after the event.

(Refer to Appendix B)

SUBJECT 7.5 Con't

SECTION 18(1) The operator of facility shall:

- (g) advise the Licensing Authority of, and investigate any accident or incident which jeopardized the health or life of a resident to ascertain the circumstances of the accident or incident and institute appropriate measures to prevent similar occurrences in the future.

Standard:

1. Where an accident or incident occurs to a resident while they are in care, the Licensee shall respond appropriately to the crisis. The Licensee shall secure the necessary emergency treatment for the resident, document and report the circumstances and details of the incident to the appropriate authorities.
2. Following the investigation of the incident, the Licensee shall take the measures necessary to prevent similar occurrences.
3. All changes in resident status shall be reported to the Supervising Agency.
4. Those situations and events which place the health or life of a resident at risk or those which result from a violation of licensing standards, policies or regulations, shall be reported to the Licensing Authority.

(Refer to Appendix B)

SUBJECT 7.6 Financial Records

7.6.1 Bookkeeping

SECTION 18(2) Where the operator of a facility receives moneys or other valuable securities for the benefit and use of a resident, the Licensee shall:

- (a) keep and maintain a record thereof and hold those moneys or securities in trust for and on behalf of the resident;

Standard:

1. Where the Licensee assumes responsibility for resident funds, the Licensee shall maintain individual records for each resident as detailed in the Policy for the Management of Personal Funds.

SUBJECT 7.6 Con't

Standard: 2. The Licensee and staff shall not borrow moneys or valuables from a resident.

Guideline: Resident moneys or securities may include, but are not limited to:

- private funds or securities
- social allowance personal and clothing
- special needs moneys
- public trustee disbursements

7.6.2 Receipts

SECTION 18(2)(b) issue receipts therefore;

Standard: Receipts shall be issued and retained as described in the Policy for the Management of Personal Funds.

7.6.3 Disbursements

SECTION 18(2)(c) Keep and maintain a record of any of those moneys or securities disbursed or expended on behalf of the resident.

Standard: Records as defined in the Policy for the Management of Personal Funds shall be maintained.

7.6.4 Inspection / Audit

SECTION 18(2)(d) at the request of the Licensing Authority submit those records for inspection by the Licensing Authority or a duly authorized representative therefore; and

Standard:

1. All financial records required by this regulation are subject to review and audit.
2. The Licensee shall allow access to these records upon request of the Licensing Authority.

7.6.5 Security and Release of Valuables

SECTION 18(2) (e) Deposit or keep those moneys or valuables in a safe or other safe storage facility and shall release part of all of those moneys or securities to the resident at the request of the residents.

- Standard:
1. Where a Licensee assumes responsibility for the management of a resident's moneys or valuables, the Licensee shall ensure their secure storage.
 2. Residents' funds shall be managed and disbursed as described in their Financial Plan.

SAFETY

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Authority – Manitoba Regulation – 484/88R

- 8.1 Life Safety
- 8.2 Abuse
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 - 8.6.3 Licensed Occupancy
 - 8.6.4 Discharge & Transfer of Residents
- Overcare
- 8.7 Renovation or Alteration of a Facility

SUBJECT 8.1 Life Safety

SECTION 19 The operator of a Residential Facility shall ensure that the facility is provided with an approved and functioning smoke alarm on every floor level.

- Standard:
1. The life safety requirements of a Residential Care Facility are determined by the number of residents housed in the facility.
 2. A Licensee shall meet all applicable Manitoba Building and Fire codes for Residential Care Facilities.
 3. The Licensee shall ensure that the smoke/fire alarm system is functional at all times and that it is tested, inspected, and maintained as required by the Manitoba Fire Code.

SUBJECT 8.2 Abuse

SECTION 20 The operator of a Residential Care Facility shall:
(a) not abuse a resident.

- Standard:
1. All allegations of abuse and/or suspected abuse in a Residential Care Facility shall be reported to the Licensing Authority.
 2. The Licensing Authority is responsible for co-ordinating all investigations into allegations of abuse. The investigation will be conducted according to established departmental protocols. (Refer to Appendix C).

Guidelines: The major categories of abuse are:

Physical/Sexual Abuse – means any action which intentionally causes pain or injury to a resident. Physical abuse includes, but is not limited to:

- Striking a resident, either directly or with an object;
- Any aggressive physical act such as shoving, shaking, spanking, slapping, etc.;
- Punishment of one resident by another resident that is encouraged or condoned by staff;
- Forcing a resident to take uncomfortable physical position, such as kneeling, squatting, etc.;
- Requiring or forcing a resident to repeat physical movements;
- Confinement of a resident against their will;
- Excessive physical restraint;
- Inappropriate administration of medications;
- Assigning of overly strenuous or harsh work;
- Inappropriate sexual advances or activities with residents.

SUBJECT 8.2 Con't

Guidelines: Emotional Abuse – means any action which results in the humiliation of, or emotional, harm to a resident. Emotional abuse includes, but is not limited to:

- Harsh, humiliating, belittling, or degrading responses to a resident;
- Verbal or non-verbal threats made to a resident;
- Excessive and/or repeated demands upon a resident which he/she cannot meet;
- Derogatory, threatening, or demeaning communication directed toward, or in reference to, a resident;
- Verbal, written, or in gestures.
- Withholding of emotional supports.

Neglect – means an action, or lack of action, which negatively affects the care, supervision, personal safety, and developmental needs of a resident. Neglect includes, but is not limited to:

- denial or restriction of a resident's access to family and friends;
- inappropriate administration or withholding of a resident's medication or treatment;
- withholding or denial, of access to food, shelter, clothing;
- denial of access to a resident's personal possessions;
- actions which are contrary to a resident's care plan as specified by the Supervising Agency;
- denial of access to normal day-to-day comforts;
- failure to provide the required supervision;
- restricting a resident's access to the facility.

Exploitation – means the inappropriate or illegal use of a resident's moneys, securities, assets, or other personal property for personal gain, or the counseling of a resident to commit immoral or illegal acts.

SUBJECT 8.3 Restraint

SECTION 20 (a) The operator of a Residential Care Facility shall not physically restrain a resident, other than momentary physical restraint for the purpose of protecting the person and property of a resident or others, and only to the degree necessary for such protection, without first obtaining approval from the resident's physician.

- Standard:
1. The Licensee shall not restrict a resident's behavior, freedom of choice, movement, and the right to make decisions except to the extent necessary to protect the resident's health and safety as defined by the Supervising Agency in the Care Plan.
 2. The Licensee shall require that:
 - physical restraint is utilized only as a last resort;
 - all incidents of physical restraint are fully documented and reviewed with the Supervising Agency;
 - the only methods of restraint used are those approved and authorized by the Supervising Agent;
 - if a resident is injured while being restrained, an Incident Report shall be completed. (Refer to Appendix B.)

SUBJECT 8.4 Medication

SECTION 20 (b) Ensure that each resident's medication:

- (i) is kept at the required temperature in a clean, well-lighted, and secure storage area;
- (ii) is kept in the original labeled container provided by the dispensing pharmacist; and
- (iii) is administered by a responsible adult at the time and in the dosage prescribed and that a medication record is maintained of the time and dosage administered.

Standard: The Licensee shall ensure that the standards, as defined in Appendix D, are maintained.

SUBJECT 8.5 First Aid Kits

SECTION 20 (c) Ensure that an acceptable first aid kit is available and readily accessible in the facility.

Standard: The Licensee shall maintain an approved First Aid Kit in an accessible location within the facility.

SUBJECT 8.6 Admission Requirements

8.6.1 Physically Handicapped

SECTION 21 Every operator of a facility shall:
(a) not accommodate physically handicapped residents unless the facility complies with the "Provision for Physically Handicapped Persons" as detailed in the Manitoba Building Code to the extent deemed necessary by the Authority having jurisdiction;

Standard:

1. Licensee, admitting any individual who is physically handicapped, shall comply with all applicable Manitoba Building Code requirements.
2. The License issued shall indicate the Licensing Authority's approval to accommodate physically handicapped residents.

8.6.2 Licensed Level

SECTION 21 (b) Not admit resident(s) requiring services other than those for which the facility has been approved or licensed.

Standard:

1. The Licensing Authority shall assign a level of care for the facility.
2. The Licensee shall not admit individuals requiring services beyond their licensed level.
3. Placements to licensed Residential Care Facilities shall be co-ordinated through the Regional/Program Authority.
4. The Licensee shall require that placement information, including the individual's assessed level of care, is received prior to, or at the time of placement.

SUBJECT 8.6 Con't

8.6.3 Licensed Occupancy

SECTION 21 (c) not admit a greater number of residents than that authorized by the Letter of Approval or License.

- Standard:
1. The Licensing Authority shall determine the number of residents that the facility may accommodate.
 2. The Licensee shall not admit beyond the licensed occupancy.

8.6.4 Discharge and Transfer of Residents Over Care

SECTION 21 (d) advise the Supervising Agency and initiate the transfer of a resident to a more appropriate facility when the condition of the resident changes to the extent that safe and adequate care and supervision can no longer be provided.

- Standard:
1. The Licensee shall refer all residents, whose care needs exceed their licensed level, to the Supervising Agency.
 2. The Supervising Agency shall co-ordinate care planning, assessment and alternate placement for the resident.

Guideline: The agency may choose to provide additional supports to the facility to safely maintain the resident pending alternate placement.

During this transitional period the Supervising Agency is responsible for addressing the resident's needs beyond the services provided.

SUBJECT 8.7 Renovation or Alteration of a Facility

SECTION 21 (e) obtain the approval of the Licensing Authority before proceeding with any renovation or change to a facility that may alter the living space, or affect the structural strength, safety, or sanitary, condition of the facility.

- Standard:
1. The Licensee shall advise the Licensing Authority in writing of any proposed structural alteration.
 2. The Licensee shall submit plans to the appropriate Building Authorities and obtain the necessary permits and approvals prior to starting any construction or modification to the physical structure.

PERSONAL SERVICES

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 - 9.5.2 Bathroom Supplies

SUBJECT 9.0 General

The items noted in this section will be considered complete and satisfactory, only when they are clean, well maintained and in good repair.

SUBJECT 9.1 Towels and Face Cloths

SECTION 22 The operator of a facility shall provide each resident of the facility with
(a) his own hand and bath towel and face cloth which shall be maintained in a clean condition by the operator;

- Standard:
1. Towels and face cloths shall be clean and replaced when they are worn or torn.
 2. The use of common towels and face cloths is not permitted.

- Guideline:
- Acceptable alternatives:
- disposable towels
 - continuous roll towels
 - hot air dryers
 - hand towel, laundered on a daily basis

SUBJECT 9.2 Storage Facilities

9.2.1 Resident Clothing

SECTION 22 (b) separate storage space for the storage of clothing.

Standard: The Licensee shall provide each resident with separate and adequate storage space for their clothing within their bedroom.

Appropriate storage areas might be a chest of drawers, a dresser, built in drawers or shelves, and a clothes closet with suitable space for items of clothing which are kept on hangers.

9.2.2 Resident's Personal Belongings

SECTION 22 (c) a separate readily accessible storage area for the storage of personal belongings.

Standard: Storage space shall be provided, within the resident's bedroom, for items used on a daily basis (i.e., radio, t.v., stereo, etc.)

Guideline: Storage space for occasional use items may be in more remote location within the facility, provided that the resident has ready address. Such storage space may be suitcases, trunks or lockers for storing pictures, photographs, keep-sakes, etc.

SUBJECT 9.3 Laundry Services

9.3.1 Resident Clothing

SECTION 22 (d) Weekly laundry service for clothing, unless otherwise arranged by the Supervising Agency;

- Standard:
1. The Licensee is responsible for laundering the residents' clothing on a weekly basis, or more frequently when necessary.
 2. Laundry service shall include the collection, sorting, laundering, folding, ironing, and mending of residents' clothing.

Guideline: A method of identifying each residents' clothing should be developed, i.e., name tags, laundry markers, etc.

Where a resident or Supervising Agency wishes to make alternate arrangements for laundering, they will advise the Licensee.

9.3.2 Laundry Facilities for Residents Use

SECTION 22 (e) facilities for the washing of personal clothing by residents choosing to do so.

Standard: The Licensee shall allow access to the laundry facility and ensure that the resident is capable of using the equipment and is supervised to the extent necessary.

SUBJECT 9.4 Bedroom Accommodation

9.4.1 Bedroom Furnishings

SECTION 23 The operator of a facility shall ensure that every bedroom in the facility is:
(a) comfortably and suitably furnished and has one chair for each resident.

- Standard:
1. The Licensee shall ensure that each bedroom is appropriately furnished and a chair provided for each resident.
 2. Window coverings shall be curtains or blinds that ensure privacy.
 3. The room shall be decorated in a manner appropriate to the age and sex of the resident.
 4. Where bedroom doors or closet doors are equipped with locks for security, the doors should be openable from the inside without the use of a key or special device. The Licensee shall maintain a key readily accessible to unlock such doors in the case of an emergency.

9.4.2 Separate Accommodations

SECTION 23 (b) separate for each sex unless the bedroom accommodates only a man, his wife, or pre-school children.

9.4.3 Beds

SECTION 23 (c) provided with a separate bed for each resident which shall be:
(i) a minimum of 99 centimetres (39 inches) wide for each adult and 6 centimetres (24 inches) wide for each child and be adequate in length for the height of the resident.

Standards: Cribs shall be provided for any child less than 18 months of age. Cribs, crib mattresses, bumper pads, playpens, and cradles shall meet requirements as specified in The Hazardous Products Act.

9.4.4 Mattresses, Springs, Covers

SECTION 23 (c) provided with a separate bed for each resident:
(ii) provided with level, substantial springs, a comfortable mattress, a pillow, one pillow case, two sheets, and sufficient blankets or coverings for comfort.

Standard:

1. Mattresses and bedsprings shall be level and in good condition.
2. Where a mattress and/or box spring becomes soiled, it shall be cleaned and sanitized.
3. Mattresses and pillows shall be covered with protective covers where required by the resident.

9.4.5 Linens

SECTION 23 (c) (iii) provided with a complete change of clean bed linen once a week or more often when soiled and clean blankets or bed coverings at least every 6 months, and

Standard:

1. A complete change of clean linens shall be provided, minimally, once per week and more often when necessary.
2. Blankets, comforters and bedspreads shall be cleaned every six (6) months or as required to maintain them in a clean condition.
3. Bed linens, blankets, and bedspreads shall be replaced when worn or torn.
4. Blankets and bed coverings shall be adequate to ensure comfort.

SUBJECT 9.4 Con't

9.4.6 Lighting

SECTION 23 The operator of a facility shall ensure that every bedroom in the facility is:
(c) (iv) provided with adequate artificial lighting.

Standard:

1. The ceiling, wall fixture, or lamp shall be equipped with a shade for diffusion of light and for safety purposes.
2. The lighting fixture shall be equipped with a bulb of the wattage recommended by the manufacturer.

SUBJECT 9.5 Bathroom Facilities

9.5.1 Approved Locks

SECTION 24 The operator of a facility shall ensure that each bathroom in a facility is:
(a) provided with a door that can be locked to ensure privacy but which can be opened from the outside in the event of an emergency.

Standard:

1. The Licensee shall equip every bathroom door in the facility with an approved passage set which:
 - may be locked from the inside to ensure resident privacy;
 - may be opened from the inside without the use of a key or any special device; and
 - may be opened from the outside in the even of an emergency without the use of a key.
2. The Licensee shall maintain a functional opening devise for purposes of unlocking the bathroom doors in an area of the facility which is readily accessible to staff at all times.

Guideline:* An approved bathroom passage set is acceptable.

9.5.2 Bathroom Supplies

SECTION 24 (b) provided with an adequate supply of toilet tissue and soap.

Standard: The Licensee shall maintain bathrooms and supplies in a sanitary condition.

Guideline: For health and sanitation purposes, liquid soap in dispensers is recommended for hand washing.

FOOD SERVICES

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SUBJECT 10.1 Dining Facilities

10.1.1 Separate Space

SECTION 25 The operator of a facility shall ensure that each dining area in the Residential Care Facility is:
(a) separate from the sleeping area;

Standard: The Licensee shall ensure that the area in which meals are served to residents is not used, or intended to be used, as sleeping quarters for either residents or staff.

10.1.2 Adequacy of Seating

SECTION 25 (b) provided with adequate seating facilities for all residents and staff; and

Guideline: Where, due to the physical limitations of the facility, it is impractical to seat all residents at the same time; two sittings will be permitted, provided that both meals are served within recognized mealtime hours. This arrangement must be addressed in the applicant's initial proposal and must be approved by the Licensing Authority.

10.1.3 Crockery

SECTION 25 (c) provided with adequate and suitable crockery and eating utensils in good repair for residents.

Standard:

1. The Licensee shall provide a supply of crockery and eating utensils sufficient to serve the number of residents for which the facility is licensed.
2. The Licensee shall inspect the crockery and eating utensils routinely to ensure that they are maintained in a sanitary condition and free of chips, cracks, or other physical damage.
3. Damaged items shall be replaced immediately.

SUBJECT 10.2 Kitchen Facilities

10.2.1 Kitchen Appliances

SECTION 26 The operator of a facility shall ensure that each kitchen in a facility is provided with:
(a) a refrigerator, stove, and sink of adequate size and in good working condition.

Standard: The Public Health Authority shall apply standards to ensure that minimum requirements for refrigeration, cooking, and dishwashing are in place.

SUBJECT 10.2 Con't

10.2.2 Cooking Utensils

SECTION 26 (b) suitable and adequate cooking utensils in good repair;

- Standard:
1. The Licensee shall provide adequate cooking utensils for the food preparation requirements of the facility.
 2. The Licensee shall routinely inspect the cooking utensils to ensure that they are maintained in a sanitary condition and are free of chips, cracks, or physical damage.
 3. Damaged items shall be replaced immediately.

10.2.3 Storage of Perishable and Non-Perishable Foods.

SECTION 26 (c) suitable and adequate facilities for the storage of all perishable and non-perishable foods; and

- Standard: Perishable and non-perishable food shall be stored at the required temperature as specified by the Public Health Authority.

10.2.4 Storage of Cleaning Supplies

SECTION 26 (d) suitable and adequate facilities for the storage of all cleaning supplies and other housekeeping products.

- Standard:
1. The Licensee shall provide adequate storage space to accommodate a supply of cleaning and housekeeping products adequate for the maintenance of the facility.
 2. Cleaning, housekeeping supplies and hazardous products shall be securely stored and separate from foods and food products.

SUBJECT 10.3 Meal Services

10.3.1 Quality of Meals and Mealtimes

SECTION 27 The operator of a Residential Care Facility shall:

- (a) at recognized meal time hours, serve a minimum of 3 meals daily, which shall be varied, attractive, nutritionally, and calorically adequate for the dietary requirements of each resident as recommended in the current Canadian Dietary Standard;

- Standard:
1. The Licensee shall ensure that three meals are prepared and served daily to the residents at recognized mealtime hours.
 2. The meals shall meet the standards as described in Canada's Food Guide. Copies of the Revised Edition of Canada's food Guide are available from the Licensing Authority.

SUBJECT 10.3 Con't

- Standard:
3. Where a resident requires a special or therapeutic diet, the Licensee shall ensure that the required diet is provided.
 4. Recognized meal times have been established as:
 - Breakfast - 0700 – 0900 hours (7 a.m. – 9 a.m.)
 - Lunch – 1130 – 1330 hours (11:30 a.m. – 1:30 p.m.)
 - Dinner – 1700 – 1900 hours (5:00 p.m. – 7:00 p.m.)

Guideline: Recognized meal times may be changed to accommodate weekend and holiday schedules, provided that such changes are acceptable to the residents and are not detrimental to their well-being.

To the extent possible the Licensee shall accommodate the religious beliefs and cultural preferences of the residents.

10.3.2 Tray Service

- SECTION 27 (b) provide meals by room tray service when a resident is too ill to eat in the dining area.

Standard: The Licensee shall provide meals to the resident by room tray service, where the resident's physical, emotional, psychological condition, or behavior prevents their attendance in the dining area.

10.3.3 Menu Plans and Records

SECTION 28 The operator of a Residential Care Facility for more than 8 residents shall compile weekly menu plans for the facility, and indicate thereon any change in the actual food served when variations in the planned menu become necessary, and retain the menus for a period of at least 3 months after which time they may be destroyed.

- Standard:
1. The Licensee of a facility for more than eight residents shall maintain weekly menus.
 2. The Licensee of any facility, regardless of size, may be required to provide the Licensing Authority with a written record of the actual food served in the facility.

SUBJECT 10.3 Con't

Guideline: This requirement may be satisfied by using either of the following methods:

- (1) Compile cyclical menus for a 4-6 week period recording any deviation to the planned menu on a separate menu format and retain these records for review.
- (2) Record food served on a daily basis on a menu form and retain these records for review.

The Licensee is encouraged to use cyclical menus.

Assistance with menu planning is available through the Regional Offices.

(Refer to Appendix A).

GENERAL OPERATIONS

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SUBJECT 11.1 Visiting Rights

SECTION 29 The operator of a Residential Care Facility shall:
(a) permit the residents to receive visitors daily at any circumstances except in the case of a child where a visit would be detrimental to the well-being of the child in the opinion of the Supervising Agency.

- Standard:
1. The Licensee shall permit the residents to receive visitors at any reasonable hour.
 2. The Supervising Agency may restrict visitations where the visit is deemed detrimental to the well being of the resident.
 3. These restrictions shall be documented by the Supervising Agency the residents' file.

SUBJECT 11.2 Living, Recreation Space, and Equipment

SECTION 29 (b) provide indoor living and recreation space with suitable games and equipment to enhance physical and emotional health.

- Standard:
1. The Licensee shall provide adequate living and recreational space for the licensed occupancy.

Adequate living and recreation space shall be;
 - up to four residents – a minimum of 100 sq. feet (9.3M)
 - or each additional resident – add 11 sq. feet/person (1M)
 2. For the purpose of calculation recreational space bedrooms shall be excluded.
 3. Equipment in living/recreation areas shall be appropriate to resident needs, interests, ages, and abilities.

- Guideline:
- Basic equipment may include:
- television, stereo, radio, video games, computer;
 - books, magazines, newspapers, typewriter;
 - puzzles, cards, board games;
 - exercise equipment and cassettes;
 - art and craft supplies;
 - plants, herb gardens;
 - piano, organ, guitar, recorder.

Information on toy safety is available from Consumer and Corporate Affairs.

SUBJECT 11 Con't

SUBJECT 11.3 Resident Access to Space and Equipment

SECTION 29 (c) Allow the resident free access to the living and recreational areas and reasonable use of the equipment therein throughout the day and evening.

Standard: The Licensee shall allow and encourage residents to use the facility's living and recreational areas, equipment, and supplies at any reasonable time throughout the day and evening.

SUBJECT 11.4 Activities

SECTION 29 (d) Allow and encourage residents to independently utilize the community outside the facility and to constructively occupy their leisure time; and, for residents who do not adequately provide their own leisure time needs, make available an appropriate number and type of recreational and leisure time activities.

Standard: The Licensee shall allow and encourage the residents to become involved in community activities by providing them with resource information and assistance in accessing resources.

Guideline: A Licensee should encourage the residents to use resources and activities consistent with their needs and abilities. These resources should be both within and external to the facility. This could include encouraging the residents to celebrate special occasions such as birthdays and traditional holidays.

SUBJECT 11.5 Telephone

SECTION 29 (e) Provide a telephone for the use of the residents.

Standard: A resident's right to privacy during telephone conversations shall be respected.

Guideline: Telephone calls may be monitored or restricted where indicated in the resident's care plan.

The use of telephones for long distance calls should be negotiated with the resident and the Supervising Agency at the time of admission.

SUBJECT 11.6 Release of Resident's Effects

SECTION 29 (f) Give all the resident's clothing, personal possessions, money held in trust, and other valuables held in safe-keeping to the resident or to the next of kin or Supervising Agency when a resident leaves the facility, or to the spouse or the executor or administrator of the resident's estate on the resident's death.

SUBJECT 11.6 Con't

- Standard:
1. The Licensee shall release all of a resident's possessions and assets to the resident, their advocate or the Supervising Agency, when the resident is discharged from the facility.
 2. In the event of a resident's death, all possessions and assets shall be released to the legal advocate, next of kin or the administrator of their estate.
 3. The Licensee shall compile and maintain a list of the resident's belongings for the resident's file. The list shall be dated and signed by the resident or guardian/advocate and updated when such belongings are purchased or discarded.
 4. The Licensee shall require the individual, to whom the resident's effects are released, to date and sign and acknowledgment of receipt for same.

SUBJECT 11.7 Program Evaluation

- SECTION 29 (g) Upon request of the Licensing Authority cooperate in the evaluation of the effectiveness of the program offered in the facility.

Standard: The Licensee shall co-operate with the Regional/Program and the Licensing Authority in such program evaluations.

Guideline: Supervising Agencies are responsible for assessing the effectiveness of Residential Care Facility programs relative to established program standards, geographic distribution, and changing needs.

In meeting this mandate, the Supervising Agencies may review and evaluate facilities and the programs offered in those facilities.

SUBJECT 11.8 Access to Residents

- SECTION 29 (h) Allow the Supervising Agency or Licensing Authority to have reasonable access to all persons resident in the facility.

Standard: The Licensee shall ensure that both the Supervising Agency and the Licensing Authority have access to all residents.

SUBJECT 11.9

Approved Forms

SECTION 30 Forms required for the purpose of this regulation may be obtained from the office of a Licensing Authority.

1. Declaration and Waiver Form
2. Residential Care Facility License Application
3. Physical Structure Report
4. Personal Reference Form
5. License Renewal Application Form
6. Inspection Report Form
7. Inspection Check List
8. Residential Care License
9. Letter of Approval
10. Medication Administration Record
11. Non-Prescription Drug Authorization Form
12. Narcotic/Controlled Drug Record
13. Inventory of Drugs for Disposal
14. Weekly Menu
15. Menu Revisions
16. Medical/Dental/Optical Records
17. Fire Drill Log
18. Fire Safety Check List
19. Staff Orientation Format
20. Children's Personal Allowance Record
21. Incident Report Form
22. Resident Personal File Face Sheet

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THE SOCIAL SERVICES ADMINISTRATION ACT – C165**

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INTRODUCTION:

Sections 5 (d) and 11 (d) of Manitoba Regulations 484/88R state that a License or Letter of Approval may be issued by the Licensing Authority only after receipt of recommendations from the Authority having jurisdiction as to the operators compliance with legislation, regulation and standards governing...and “such other standards and conditions as may be required by the minister.”

Sections 5 (d) and 11 (d) provide the authority necessary for the development and implementation policies and practices that, although not formally stated in the regulations, provide for the safety and well-being of the residents in care.

The following appendices contain policies and practices which have been deemed to constitute “such other standards and conditions as may be required by the minister.”

BUILDING AND ZONING AUTHORITIES

- Winnipeg - Environmental Planning Department
Development Programs Division
395 Main Street
Winnipeg, MB R3B 3E1
Phone # 986-5208
- Brandon - Brandon and Area Planning District
638 Princess Avenue
Brandon, MB R7A 0P3
Phone # 729-2110
- Portage la Prairie - City of Portage la Prairie
97 Saskatchewan Avenue, E.
Portage la Prairie MB R1N 0L8
Phone # 239-8345
- Selkirk - Selkirk and District Planning Board
200 Eaton Avenue
Selkirk MB R1A 0W6
Phone # 482-3783
- Thompson - Engineering and Public Works
City Hall
226 Mystery Lake Road
Thompson MB R8N 1S6
Phone # 677-7910

ALL OTHER PROVINCIAL DISTRICTS/MUNICIPALITIES

- Manager - Engineering & Technical Services
Office of the Fire Commissioner
508 – 401 York Avenue
Winnipeg MB R3C 0P8
Phone # 945-3322

Municipal or Local Government District office in the area.

FIRE AUTHORITIES

- Rural Manitoba - Office of the Fire Commissioner
508-401 York Avenue
Winnipeg MB R3C 0P8
Phone # 945-3322

- Brandon - 637 Princess Avenue
Brandon MB R7A 0P2
Phone # 729-2403

- Portage la Prairie - 97 Saskatchewan Avenue E.
Portage la Prairie MB R1N 0L8
Phone # 239-8340

- Selkirk - 200 Eaton Avenue
Selkirk MB R1A 0W6
Phone # 482-3810

- Thompson - 226 Mystery Lake Road
Thompson MB R8N 1S6
Phone # 677-7915

- Winnipeg - 5-151 Princess Street
Winnipeg MB R3B 1L1
Phone # 986-6358

- Federal/Reserves - A/Operations Manager – Labor Programs
MacDonald Building
344 Edmonton Street
Winnipeg MB R3B 2Y1
Phone # 983-7249

PUBLIC HEALTH AUTHORITIES

Eastern/Interlake Region	-	102-235 Eaton Avenue Selkirk MB R1A 0W7 Phone # 785-5033
Northern Region	-	Provincial Building P.O. Box 2550 (3 rd & Ross Avenue) The Pas MB R9A 1M4 Phone # 627-8242
Parklands Region	-	Provincial Building 27-2 nd Avenue S.W. Dauphin MB R7N 3E5 Phone # 622-2126
Southern Region	-	Box 30 Southland Mall Winkler MB R6W 2S2 Phone # 325-2291
Western Region	-	204-1011 Rosser Avenue Brandon MB R7A 0L5 Phone # 726-6060
Winnipeg Region	-	2-139 Tuxedo Blvd. Winnipeg MB R3N 0H6 Phone # 945-7049
Winnipeg (Inner City)	-	280 William Avenue Winnipeg MB R3B 0R1 Phone # 986-2466

DESIGNATED LICENSING AUTHORITIES

The holders of the following offices have been designated as Licensing Authorities. The designation is contingent upon facility occupancy and jurisdictional areas.

- A. Licensed Facilities** Director of Residential Care Licensing
(Occupancies which exceed 4 children or 3 adults)
- B. Approved Homes**
(Occupancies with 1-4 children or 1-3 adults)
- B-1 Adults Regional Directors, Departments of Family Services and Health within the boundaries of their regions.
- B-2 Children Regional Directors, Department of Family Services having jurisdiction as the Child Caring Agencies within their geographic area.
- B-3 Young Provincial Director of the Young Offenders Act, Offenders Department of Justice.
- B-4 Children Executive Directors of Child and Family Services Agencies and the appointed Area Directors within the geographic or district areas of their jurisdiction.

REGIONAL OFFICES

Winnipeg Region	-	5-189 Evanson Street Winnipeg MB R3G 0N9 Phone # 945-6333
Central Region	-	25 Tupper Street N. Portage la Prairie MB R1N 3K1 Phone # 239-3103
Eastman Region	-	20-1 st Street S. Beausejour MB R0E 0C0 Phone # 268-6114
Interlake Region	-	3 rd . Floor Administrative Building Box 9600 Selkirk MB R1A 2B5 Phone # 785-5160
Norman Region	-	Provincial Building 3 rd . & Ross Avenue Box 2550 The Pas MB R9A 1M4 Phone # 623-8235
Parklands Region	-	27-2 nd Avenue S.W. Dauphin MB R7N 3E5 Phone # 622-2035
Thompson Region	-	867 Thompson Drive S. Thompson MB R8N 0C8 Phone # 677-7210
Western Region-		300-340-9 th Street Brandon MB R7A 6C2 Phone # 726-6294

Guidelines for The Reporting of Incidents and Accidents in Residential Care Facilities

Introduction:

Manitoba Regulation 484/88R requires that all accidents and incidents which involve residents be reported.

The documentation and reporting of accidents and incidents is important in maintaining the safety of residents and for monitoring the quality of care and service delivery.

The major objectives of incident reporting are:

- (i) to ensure appropriate intervention in response to the incident; and
- (ii) to ensure that appropriate measures are instituted to prevent similar occurrences in the future.

Definition:

For the purposes of Manitoba Regulations 484/88 an incident means:

The occurrence of an action, situation, circumstance or event, whether deliberate or unintentional, which causes loss, injury, or adversely affects the health, life, safety, or well-being of a resident.

Regulation:

Manitoba Regulation 484/88R 18(1) and (g) specify reporting requirements with respect to incidents:

The operator of a facility shall:

- (f) advise the Supervising Agency of any serious change in condition, illness, death, or unauthorized absence of resident within 24 hours of the occurrence thereof; and
- (g) advise the Licensing Authority of, and investigate any accident or incident which jeopardized the health or life of a resident to ascertain the circumstances of the accident or incident and institute appropriate measures to prevent similar occurrences in the future.

Reporting of Incidents

Standard: All incidents shall be documented and reported to the Supervising Agency and copies maintained on file for review.

Reporting of Incident's Con't

Standards: Incidents which involve licensing standards shall be reported directly to the Licensing Authority.

Guideline: Examples of Incidents directly reportable to the Licensing Authority are:

- Medication - Medication errors or incidents;
- Accident - Accidents involving injury to a resident which is the result of an absence of supervision at the facility or a defective facility structure;
- Fire - All fire incidents whether or not intervention from the fire department is required;
- Public Health - All incidents which involve public health issues or concerns;
- Legal - Any situation in which a Licensee, facility staff, or volunteer are charged under the Criminal code of Canada;
- Abuse - Abuse of a resident in any form;
- Other - Incidents resulting in harm to one resident by another.

Reporting Procedures

1. The Licensee shall take whatever action or intervention necessary to respond to the incident and ensure the safety of the resident(s).
2. The Licensee shall report the incident to the appropriate authority by telephone within 24 hours of the occurrence or on the next working day.
3. The staff person involved in the incident shall complete an Incident Report Form.
4. The Licensee shall review all Incident Reports to ensure the information is accurately documented and complete and sign the report.
5. The Licensee shall forward the Incident Report to the appropriate authority within 5 days of the incident and retain a copy on file in the facility.
6. The authority receiving the report is responsible for follow-up relative to the incident. This could include interviewing the principals, involving other agencies, or any other measures which would bring the incident to an appropriate resolution.

Procedures for Investigations

1. The Residential Care Licensing Branch is the contact point for the reporting of all incidents or complaints related to Residential Care Facilities. Complaints may be made by telephone, in person, or in writing to:

Residential Care Licensing Branch
219-114 Garry Street
Winnipeg MB R3C 4V6
Phone: 945-3583
2. All incidents or complaints with respect to licensing standards will be reviewed by the Residential Care Licensing Branch and, where appropriate, referred to the program or administrative authority.
3. Where the complaint/incident investigation falls outside the jurisdiction of Manitoba Family Services, a referral will be made to the authority having jurisdiction.
4. Where Manitoba Family Services assumes responsibility for the investigation, the investigator will contact the Licensee to discuss the complaint and, where the complaint is specific to a resident(s), the resident's guardian(s) or next-of-kin will also be contacted.
5. Where, upon initial investigation, the complaint/incident is considered to be of a serious nature, the Regional Program Authority will ensure the safety and well-being of the resident(s). Notification will be provided to the relative or next-of-kin.
6. The Investigating Authority shall proceed with due care and diligence to determine the facts surrounding the incident. The nature and extent of the investigation shall produce information sufficient to justify the content of the Investigative Report.
7. Where the Investigating Authority is other than Residential Care Licensing the report shall be prepared in consultation with the Residential Care Licensing Branch. The report shall outline the nature of the complaint and all relevant information and indicate the disposition of the complaint.
8. If the allegation is not substantiated, a summary of the findings will be forwarded to the Licensee and the complainant.

SUBJECT Procedures Con't

9. Where the allegations are substantiated a plan of action will be determined and implemented.
10. If no remedial action is seemed feasible and a decision is made to cancel the License, the Licensee, residents, and the Supervising Agency will be informed, in writing, of the departmental decision.
11. The Licensee will be advised of their right to appeal.

REGULATION

Manitoba Regulation 484/88R, Section 20 requires that the operator of a facility ensure that each resident's medication:

Section 20(b)(i) is kept at the required temperature in a clean, well-lighted, and secure storage area.

STORAGE / SANITATION / SAFETY

- Standards:
1. All medications/drugs shall be stored under proper conditions of sanitation, temperature, light, ventilation, moisture, segregation, and security:
 - be remote from direct sources of heat, moisture, and sunshine;
 - be well lighted and situated as close to eye level as possible;
 - be locked when not in use;
 - provide sufficient space to store all medications in such a way that product damage does not occur;
 2. Medications/drugs requiring refrigeration shall be segregated from food products in the refrigerator and stored in a locked container designated for the purpose.
 3. The medication/drug storage facility shall be used primarily for the storage of medications/drugs.

Guideline: Since a majority of Residential Care Facilities are ordinary homes, a kitchen cabinet is the area most often selected for the storage of medications. Some facilities install a cabinet or use a drug cart designed for this purpose. While there is some latitude of choice, all medication/drug storage facilities shall meet the preceding standards.

Section 20(b)(ii) is kept in the original labeled container provided by the dispensing pharmacist; and

DISPENSING SYSTEM

- Standards:
1. The system established as the standard for the dispensing of scheduled prescription and non-prescription medications shall be a controlled dosage bubble pack, specifically a “weekly pill pack”. Medications shall be dispensed for a minimum of twenty-eight (28) days in four (4) weekly pill packs.
 2. Prescription and non-prescription drugs may be dispensed in alternate packaging in situations where medications are:
 - (a) required to be administered for more than four standardized administration times;
 - (b) should not be combined with other medications;
 - (c) dispensed to cover emergency situations;
 - (d) dispensed as a temporary supply pending re-dispensing of pill packs;
 - (e) dispensed for short term (less than ten days);
 - (f) pre-packaged and safety sealed at point of manufacture; i.e. oral contraceptives, pain relievers, cold and vitamin preparations;
 - (g) ordered on a “PRN” (as required) basis;
 - (h) controlled or narcotic drugs requiring control counts and double lock storage for security;
 3. Medications shall be maintained in the original labeled container.
 4. Licensees and staff shall not alter the label, as provided by the dispensing pharmacist, or re-label any medication container.

Section 20(b)(iii) is administered by a responsible adult at the time and in the dosage prescribed and that a medication record is maintained of the time and dosage administered.

ADMINISTRATION OF MEDICATIONS

- Standards:
1. Residential care staff who administer medications shall be at least 18 years of age.
 2. Prescribed medications shall be administered only on the order of a qualified physician or licensed prescriber.
 3. Non-prescription medications may be administered providing that approval has been received from a qualified physician, licensed prescriber, or dispensing pharmacist. Written standing orders and documentation of verbal approvals shall be maintained on the resident(s) file and updated and revised as necessary.
 4. Approval is acceptable in the form of a written standing order or a verbal order/recommendation.
 5. Administrative procedures requires staff to:
 - (a) identify the resident by name and cross check the name on the pill pack/original labeled container (hereafter referred to as container) to ensure it matches the person identified;
 - (b) select the correct day and time on the pill pack or instructions on the label;
 - (c) punch out the contents of the correct bubble or remove the correct dosage from the container;
 - (d) administer the contents of the bubble or container as per the labeled instructions.
 6. Residents may self administer their medications provided that the care plan documents the required authorizations from the attending physician and Supervising Agency and an appropriate level of drug security is maintained to prevent unauthorized access and risk to others.

Maintenance of drug security is the responsibility of the Licensee.

7. The Licensee shall consult with the dispensing pharmacist to establish procedures for the management of residents' medication needs:
- the systematic filing and delivery of prescriptions;
 - the return and re-packaging of pill packs when new prescriptions are ordered, medication(s) discontinued, or dosages revised.

The Licensee shall confirm the level of pharmaceutical services provided with respect to consultative support, drug counseling and information, and materials related to the residents' drug treatment.

8. Medications, which are prescribed for one resident, shall not to be administered to any other person.
9. Medications refused, spoiled, or removed from the original labeled container, but not given; or which are outdated, unused, or discontinued shall be documented and appropriately disposed.
10. The Licensee shall maintain a monthly Medication Administration Record (MAR) documenting the time and dosage administered.
11. The Licensee shall ensure that a system is established to provide for an adequate supply of medications to residents during periods of planned absence from the facility. (Refer to Page 6 – Planned Absences)
12. Drug injection apparatus and needles used in administering medication must be disposed of using proper containers and procedures.*
13. The Licensee shall ensure that medication errors and incidents are documented and reported as required. (Refer to Appendix B and Appendix D – Page 8)

* - Check with your pharmacist for proper procedures in your area.

RECORDS

Preface

A monthly Medication Administration Record (MAR) must be maintained for each resident of whom medication administration services are provided. The MAR will list all current medications, the dosage and the time they are to be administered, and indicate standardized codes to be entered under specific circumstances where a drug is not administered; examples social leave, resident refusal, hospitalization, etc.

- Standards:
1. Pharmacists providing services to Residential Care Facilities shall supply a monthly Medication Administration Record (MAR) with each resident's prescriptions. The MAR shall list all current medication, the dosage and the time they are to be administered.
 2. In emergency situations where the MAR is not immediately available through the pharmacist, the Licensee shall complete a MAR for each resident listing all current medications, the dosage and the time(s) they are to be administered.
 3. The Licensee shall record the administration of all medications; prescribed, non-prescription and PRN, immediately following administration by initialing the appropriate date and time slot on the MAR.
 4. Where revisions are made to the resident's medication regime; dosage increased or decreased, a new medication ordered, or a medication discontinued the Licensee shall contact the pharmacist to arrange for re-dispensing of the medications and;
 - (a) where the dispensing pharmacist provided the MAR, arrange to have an updated MAR provide to reflect the change(s).
 - (b) where the Licensee is using the MAR provided by the Licensing Authority, the Licensee shall update the MAR to reflect the changes.

MANAGEMENT OF MEDICATIONS DURING PLANNED ABSENCES

Preface

The Licensee will ensure that a system is established to provide for the management of residents' medication during the periods of planned absence from the facility when attending day services or while on social leave.

DAY PROGRAM / SERVICES

- Standards:
1. Where Day Program/Services staff are responsible for administering residents' medication(s), the Licensee shall request that the pharmacist deliver medications for week day administration hours, 0900-1600 hours, in weekly pill packs, directly to the Day Program/Services Supervisor.
 2. Where Day Program/Services staff are not responsible for administering residents' medication(s), the Licensee shall consult with the pharmacist to determine if administration times could be adjusted to eliminate the need for administration during Day/Program/ Service hours.
 3. Where it is not possible to adjust administration times, the Licensee shall consult with the Supervising Agency to establish an appropriate alternate procedure for the administration of residents' medications during Day/Program/Service hours.
 4. The approved plan procedure shall be documented and maintained on the resident(s)' facilities file and updated as required.

SOCIAL LEAVE

- Standards:
1. Where a resident will be absent from the facility for one (1) month or less the Licensee shall provide the person, responsible for supervising the resident's care during their leave, with sufficient weekly pill packs for the period of the resident's absence.
 2. Where a resident will be absent from the facility for more than one (1) month the Licensee shall consult with the Supervising Agency and the pharmacist to initiate arrangements to have medications dispensed directly to the person supervising the resident's care for the period of the leave.
 3. The Licensee shall indicate the resident's absence by charting the appropriate code on the MAR.
 4. On the resident's return to the Residential Care Facility, the Licensee shall contact the pharmacist and arrange for medication delivery.

DISPOSAL OF MEDICATIONS

Preface

Where any medication or drug, prescribed or non-prescription, is refused by a resident, accidentally spoiled, removed from the original labeled container but not given, is outdated, unused or discontinued the Licensee is responsible to ensure appropriate procedures for segregation from current drug stocks and appropriate disposal.

- Standards:
1. Remove the medication from the current stock of medications at the time of the occurrence.
 2. Store the medications in the drug storage facility in a manner which separate the spoiled medication from current stocks.
 3. List the spoiled medication(s) noting name, strength, number of pills, and the name of the individual for whom they were prescribed on the Inventory of Drugs For Disposal Form.
 4. Return the medication(s) to the pharmacy for disposal at regular intervals as established with the pharmacist.
 5. Maintain a copy of the Inventory of Drugs For Disposal Form on file for all drugs returned.

Manitoba Regulation 484/88R, Section 18 (1)(f) and (g) requires the operator of a facility to:

- (f) advise the Supervising Agency of any serious change in condition, illness or death, or unauthorized absence of a resident within 24-hours of the occurrence thereof; and
- (g) the operator of a facility shall advise the Licensing Authority of, and investigate, any accident or incident which jeopardized the health or life of a resident to ascertain the circumstances of the accident or incident and institute appropriate measures to prevent similar occurrences in the future.

MEDICATION ERRORS / INCIDENTS

Medication errors are either Resident Specific or System Specific.

A Resident Specific medication error is defined as the administration of the wrong medication or dose of medication to the wrong resident of at the wrong time; or the failure to administer a resident's medication at the specified time or the manner prescribed.

A System Specific medication error is defined as an incident which does not directly affect a resident to the extent that no wrong medication was administered to a resident. It would include, but not be limited to, such situations as missing medications which cannot be accounted for, a pharmacy dispensing error, a missing drug storage facility key.

- Standards:
1. Medication errors shall be documented on the Incident Report Form and reported as required in the Incident and Accident Policy. (Refer Appendix B).
 2. Where a Resident Specific error is made, the Licensee shall take immediate action to protect the life and health of the resident.

The resident's physician, pharmacist or the poison control center shall be contacted immediately to report the error, request direction and initiate intervention as directed.
 3. Where a System Specific Error, involving a dispensing error, occurs the Licensee shall contact the pharmacist to report the error and return the medication containers to the pharmacy for re-dispensing.
 4. Where other system errors involving facility procedures occur, the Licensee shall investigate the incident and take such action as may be necessary to prevent future occurrences.

Preface

The Narcotic Control Act and the Food and Drugs Act regulate the handling of narcotics and controlled drugs by manufacturers, prescriber, pharmacists, and hospitals. There is no legislation governing storage and recording of these drugs in Residential Care Facilities. This is because a Residential Care Facility is considered to be the residence of the person for whom the drugs are supplied. Licensees of Residential Care Facilities are responsible for ensuring the safety of residents and the security of drugs.

The purpose of these standards is to provide procedures for the control and handling of narcotics and controlled drugs in Residential Care Facilities.

Where narcotic or controlled drugs are ordered for a resident the Licensee shall maintain the following standards with respect to documentation, storage, and disposal.

STORAGE

- Standards:
1. All narcotics and controlled drugs shall be stored under double lock; a locked container inside the locked drug storage facility; and kept separate from all other medications.
 2. Keys to the narcotic/controlled drug storage area shall be carried by designated staff person(s) on each shift.

RECORDS

- Standards:
1. A separate Narcotic/Controlled Drug Inventory Record shall be maintained for each narcotic or controlled drug order.
 2. A Narcotic/Controlled Drug Record Book shall be maintained with a separate inventory record for each drug.
 3. The Narcotic/Controlled Drug Inventory Record shall contain the following information:
 - a) drug name and strength (where applicable);
 - b) dosage form of the medication (tablet, syrup, suppository, etc);
 - c) name of the resident;
 - d) name of the prescriber;
 - e) quantity received;
 - f) present count;
 - g) dose administered;
 - h) date and time of administration;
 - i) signature of person administering the medication;
 - j) balance remaining.

4. A Control Count shall be done to verify that the actual inventory of each drug balances with the remaining balance documented on the Narcotic/Controlled Drug Inventory Record not less than once per week.

The Control Count shall be signed by the person conducting the count and, where possible, countersigned by another staff observer.

5. When all of the Narcotic/Controlled medication has been administered the Inventory Record shall be filed.

Guideline: Other drugs subject to abuse may be controlled by the use of the Narcotic/Controlled Drug Inventory Record.

DISPOSAL OF NARCOTIC AND CONTROLLED DRUGS

- Standards:
1. All unused, discontinued, and out-of-date narcotic or controlled drugs shall be returned to the pharmacy for disposal.
 2. A record shall be maintained of all narcotic and controlled drugs returned for disposal on the Inventory of Drugs for Disposal Form.
 3. Where narcotic or controlled drugs are returned to the pharmacist for disposal, both the Narcotic/Controlled Drug Inventory Record and the Inventory of Drugs for Disposal Form shall be signed by the receiving pharmacist and copies maintained on file in the facility.

Preface

Referral and admission of an insulin dependent person with diabetes to a Residential Care Facility shall be based upon assessment of the Licensee's ability to provide the required care and a determination that residential care is the most appropriate site for care. The assessment should include care planning, education and training requirements of the insulin dependent person, the Licensee and residential care staff. The assessment should also address referral to a Diabetes Education Resource (if applicable) and follow up of the resident throughout placement. Wherever possible residents are taught self-management skills through the Diabetes Education Program.

Provision of this type of specialized care is not an expectation for all Licensees and Residential Care Facilities.

Where admission, of an insulin dependent person with diabetes, to a Residential Care Facility is planned the following standards apply.

- Standards:
1. Residential care placement is assessed, by the Supervising Agency, the most appropriate site for care.
 2. A care plan has been developed and the referral process meets regional program requirements and guidelines.
 3. The person with diabetes, the Licensee and residential care staff have received instruction in the care and management of diabetes to the extent assessed as necessary.
 4. The person(s) responsible for administering the insulin injections has/have been identified and the need and intervals of blood glucose monitoring documented.
 5. The Licensee has been assessed as capable of providing the require care.
 6. A health care professional has been assigned to monitor the individual's care, specific to their diabetic condition, throughout the placement.

Information on Diabetes Education Resources is available through regional offices of Health or Family Services in your area. Addresses and telephone numbers for Regional offices are located in the Residential Care Licensing Manual, Part 12, Appendix A-5, Page 5

RESIDENTIAL CARE CRIMINAL RECORD CHECK POLICY

Preface

Manitoba Regulation 484/88R provides for the Minister to set such other standards and conditions as may be required for licensing of Residential Care Facilities.

The Department of Family Services has recognized that there is a demonstrated need for a policy with respect to a Criminal Record Check for applicants and persons who assume responsibility for the care, supervision, and support of children and vulnerable adults. This policy will assist persons having authority to make informed decisions regarding the suitability of applicants for licensing or employment in the residential care program.

Policy

All persons applying to provide care, supervision, maintenance, and support to children and vulnerable adults in Residential Care Facilities shall be required to provide a Criminal Record Check.

- Standards:
1. All applicants for a License or Letter of Approval shall submit a Criminal Record Check to the Licensing Authority as part of the application process.
 2. Employing Authorities for Residential Care Facilities shall require and obtain a Criminal Record Check from all persons providing care, supervision, maintenance, and support to children and vulnerable adults as a condition of employment.
 3. Employing Authorities for Residential Care Facilities shall require and obtain a Criminal Record Check from all persons providing volunteer, relief or respite services where they assume direct or unsupervised responsibility for clients.
 4. Other individuals, providing indirect supervised support, shall sign on Declaration and Waiver Form which will allow the Employing Authority to access a Criminal Record Check where indicated.
 5. A Criminal Record Check or a Declaration and Waiver, as appropriate, shall be obtained where an individual changes employer and is employed in another Residential Care Facility.

Standards Con't

6. The Employing/Licensing Authority having jurisdiction shall be responsible for determining the suitability of applicants/persons assuming responsibility for the residents.

Guideline: Criminal charges or convictions of concern relative to persons applying to care for vulnerable persons are: sexual/physical abuse or assault, family violence, drug trafficking, fraud, or a chronic pattern of criminal activity.

Whether a criminal charge or convictions has a bona fide relationship to the occupation or employment will depend on the circumstances of the individual situation, including the nature of the record, recency of conviction, and the applicant's responsibility in the facility. The Employing/Licensing Authority is responsible for determining whether the existence of the charge or conviction is a reasonable disqualification.

- Standards:
7. Where the results indicate the possible existence of a criminal record, the applicant will be required to submit to fingerprinting for verification.
 8. Where a criminal record exists and is deemed serious enough to be a potential risk to the safety and well-being of the clients served, the Employing/Licensing Authority shall exercise good judgment in determining the suitability of the applicant or employee.
 9. In situations where the Employing/Licensing Authority determines that the existence of a criminal record is reasonable disqualification, notification shall be made to the applicant in writing.
 10. All persons applying to provide care, supervision, maintenance, and support to children shall provide a Child Abuse Registry Check.

Guideline: A Child Abuse Registry Check may be accessed through the Child and Family Support Services Branch.

- Guideline:
1. The Criminal Record Check shall include a search of both local police files and the Canadian Police Information Centre (C.P.I.C) National Repository files.
 - (a) Where a local Police Authority has jurisdiction and access to the National Repository, a search of the local files and the national Repository files shall be obtained by the applicant.
 - (b) Where the local Police Authority does not have access to the National Repository files, in addition to a search of the local files, the applicant shall access the C.P.I.C. National repository file through the nearest Royal Canadian Mounted Police (R.C.M.P.) Detachment.
 - (c) Where there is no local Police Authority, the applicant shall access a search of the National Repository files through the R.C.M.P. Detachment.
 2. The applicant requiring the Criminal Record Check should consult with the Police Authority in their area to determine the process and procedure for obtaining a Criminal Record Check.
 3. Any costs associated with securing a Criminal Record Check are the responsibility of the applicant.
 4. The results of the Criminal Record Check will be provided in the following formats:
 - When the response is negative: "Based on the information received, there is no criminal record identified."
 - When the response contains possible records: "There may or may not be a criminal record in existence."
 - In both cases: "Information can only be confirmed by fingerprint comparison."

Preface

Some residents in Residential Care Facilities have reduced perceptivity, mobility, flexibility, and coordination resulting from medical, physical, emotional, or psychological disability. This reduction in functional ability may result in an inability to safely regulate water temperature while bathing.

Policy

Residential Care Facilities, in which care and supervision is provided to individuals who may not be able to safely manage bathing, shall be equipped with a system to control water temperature in bathing and shower facilities.

- Standards:
1. The Licensee shall maintain water from tap(s) and shower head(s) in all bathrooms, bathing, and shower facilities at a temperature which does not exceed 125°F (52°C).
 2. This policy shall apply to those facilities providing care and supervision to the infirm aged, mentally disable, mental health clients at Levels 4 and over, and those children's facilities identified by Child and Family Support.

Guideline: A number of methods may be employed to regulate the temperature of the water. Licensees are advised to contact a qualified trades person to determine the most feasible method.

In determining a method to regulate the water temperature, Licensees should be aware that where lowering the temperature of the hot water tank may satisfy the temperature requirement for bathing and washing facilities, it may not satisfy sanitation requirements for automatic dishwashers.

Preface

Section 16(a) of Manitoba Regulation 484/88R requires that a Licensee “maintain competent personnel sufficient in number and adequate for the maintenance, care and supervision of the residents...”

To meet the staffing requirements and to provide for the care and supervision needs of residents, residential care staff must be able to effectively communicate with the residents. To provide for the on going care and program planning needs to residents, the Licensee and residential care staff must be able to effectively communicate with departmental and agency personnel.

It is the position of The Manitoba Human Rights Commission that requiring a person, who provides care, to communicate with residents in their care and external resources and agencies is not, per se, discriminatory and should be considered a requirement of employment.

- Standards:
1. The Licensee and staff, in Residential Care Facilities, shall possess language, writing and comprehension skills at an intermediate level necessary for effective communication and the maintenance of written records.
 2. Where requested by the Licensing Authority, the Licensee shall provide proof of linguistic and communication abilities.
 3. Acceptable proof shall be a complete Canadian High School Grade 10 (not GED) and/or written confirmation from the **Adult Language Training Branch(ALT)** of the individual's competency.

- Procedure:**
1. The individual shall contact ALT directly at 945-7305 for the **Canadian Language Benchmark Assessment (CLBA)**. This instrument, in conjunction with the **Residential Care Communication Skills Assessment (RCCS)**, will assess the communication skills require for employment in a residential care facility.
 2. Individuals identified as requiring language training will be referred for **English as a Second Language (ESL)**, coordinated by ALT Branch, or the **Residential Care Communication Skills (RCCS)** training course. In both instances, the individual must successfully complete the RCCS course prior to working in a Residential Care Facility.

3. The RCCSA assesses for competency at an intermediate level. The assessment and training course include:
 - Listening Comprehension
 - Reading Comprehension
 - Speaking/Oral Comprehension
 - Writing Skills

4. An individual assessed by ALT will have a Residential Communication Skills Form mailed to them indicating the required referrals. This Form is to retained by the individual and a copy provided to the Licensee/Employer as a condition of employment. This form will be maintained on the individual's personnel file.

1. INTRODUCTION:

All residents admitted to a Residential Care Facility are assessed with respect to their needs and functioning. A level of care system has been developed which addresses these assessed needs.

The Licensee of a Residential Care Facility may not admit a resident whose level of care exceeds the level assigned to the facility.

Level of care refers to the degree of support required by the client to perform activities of daily living, maintain daily routines, and living patterns. The final determination of the level of care is dependent upon the weighted value of all elements of care.

LEVEL OF CARE - ADULT PROGRAMS

2. STANDARD:

There are five residential care levels in the adult program system.

- LEVEL 1** Minimal on-site supervision and access to supervision on a 24 hour basis for individuals who are independent in day-to-day decision making, to ensure that daily activities, routines, and living patterns are maintained. The Licensee and staff may be absent from the facility for periods of time, provided that the residents have access to supervision should supervision be required. The Licensee must, minimally, provide overnight supervision and supervision at mealtimes.
- LEVEL 2** On-site supervision, tolerance, and occasional direction for individuals who are partially self-directed and involved in day-to-day decision making, to ensure that daily activities, routines, and living patterns are appropriately maintained.
- LEVEL 3** On-site supervision, tolerance, frequent direction, and 'stand by' or 'hands on' assistance as require for individuals who are marginally or intermittently self motivated and involved in day-to-day decision making, to ensure that daily activities, routines, and living patterns are appropriately maintained.

- LEVEL 4 On-site supervision, tolerance, continuing direction, demonstration and, 'stand by' or 'hands on' assistance ,as required for individuals who are not self directed and only passively involved in day-to-day decision making, to ensure that daily activities, routines, and living patterns are appropriately maintained.
- LEVEL 5 On-site supervision, tolerance, continuing direction, and 'stand by' or 'hands on' assistance as required for individuals who are not self-directed or involved in day-to-day decision making, to ensure that daily activities, routines, and living patterns are appropriately maintained or enhanced.

LEVEL OF CARE - CHILDREN'S PROGRAM

INTRODUCTION:

In Manitoba most residential care resources are categorized through a level of care system. This system indicates the level of a child's needs and the care provided by the facility.

- LEVEL 2 Refers to children who show behavioral, emotional, and interpersonal problems requiring placement away from the home. Examples include poor school attendance, delinquent activity (property offenses), resistance to parental attempts at control. Children who are mildly retarded requiring placement are also included in Level 2.
- A part of family living, child care staff consciously involve all children in activities geared to enhance learning, socialization, and work or activity skills, (recreational involvement with ongoing support from house parents or child care staff.)
- House parents or childcare staff provide support and facilitate residents' participation and attendance in appropriate recreation.
- LEVEL 3 These children differ from Level 2 on the basis of the degree and typology of problems presented. Their behavior and personal conflicts required more tolerance, understanding and control than could be reasonably handled in a family setting. Problems presented include mild/moderate emotional disturbance, moderate retardation, pronounced control, and behavioral problems such as hostility, resistance to every day rules and regulations, and repeated delinquencies.

At this level, the free time of children is coordinated to enhance their social and interpersonal awareness. Evening activities are “outside” (visits to planetarium, travelogues) or “inside” (group meeting the identified needs of unsophisticated residents). Resources are used under the supervision and direction of the child care staff.

LEVEL 4 These children cannot regularly handle the demands of regular school programs. They are demanding on other children and adults and consequently experience many crises in daily living and exhibit many signs of disturbance. The child may resist change or treatment intervention. These children, because of their high degree of disturbance, may be violent to themselves or others and require considerable control and structure.

This level differs from Level 3 in that there is more program planning to meet the individual needs. Many evenings are organized with “outside” or “inside” activities to coordinate most of the children’s free time to enhance their awareness, develop some insight and self-control. These activities are supervised by the child care staff. Children usually at a Level 4 cannot use community resources to their fullest and require a great deal of encouragement and support.

LEVEL 5 These children are frequently a danger to themselves or others due to the severity of their emotional disturbance. They are unable to handle the demands of daily living or school and require individualized treatment planning and programs, considerable control, and structure.

The whole emphasis at this level is to effect improvement in the individual by consciously building insights, understanding of motivation, assisting the resident to realize the effect his/her actions, and behaviors have on others increasing his/her self-awareness, thereby achieving better personal control and communication skills.

Recreation is supervised by child care staff as part of the therapeutic process. Residents are unable to use available community resources hence the need for child care staff to develop programs.

SUPERVISION REQUIREMENTS FOR RESIDENTIAL CARE FACILITIES

Preface

Under the authority of Manitoba Regulation 484/88R, Residential Care Facilities are licensed to provide supervision and assistance to children, in the temporary or permanent custody of a Child Caring Agency and to adults who are suffering from a disorder or disability which precludes them from living independently.

The objective of licensing is to ensure a satisfactory standard of care and safety for individuals in Residential Care Facilities.

Individuals admitted to Residential Care Facilities require care and supervision as defined under "residential care" in Manitoba Regulation 484/88R.

Definition

"Residential care or care and supervision" – means the assistance required by a child, or by an adult suffering from a disability or disorder, which precludes him from living independently.

Classification of Supervision

Supervision may be classified into two areas:

1. Individual Supervision, is the level of support required by an individual as assessed by the Supervising Agency and documented in a care plan, Individual Program Plan, or placement summary.

Individual Supervision Needs

It is recognized that each individual's need for supervision is different. The Supervision Agency is responsible for assessing and documenting the degree of supervision required by a specific resident. This information shall be provided to the Licensee at the time of the resident's admission and updated as necessary throughout the resident's stay in the facility.

2. General Supervision, would include the supervision needs of the facility required by the Licensing Authority and where specified as a standard or condition of licensing.

General Supervision

The Residential Care Licensing Branch is responsible for developing and implementing standards which ensure the health, safety, and well being of residents in Residential Care Facilities.

The Licensing Authority is responsible for ensuring that established standards are maintained.

With respect to general supervision of a facility, the following standard applies:

Standard:

In all facilities, other than Level 1 and those facilities providing Transitional Services as described in Appendix K, supervision shall be provided whenever residents are in the facility.

Preface

The Social Services Administration Act (Chapter S165) and the regulations governing Residential Care Facilities (Manitoba Regulation 484/88R0, provide the authority to Residential Care Licensing and designated personnel, to conduct inspections at any reasonable hour. Such inspections would include access to the residents' records, and the physical premises including any material, food, medication or equipment being used in the facility.

Personnel have the authority to take samples of any materials, or copies of records, as deemed necessary for the purposes of verifying compliance with standards.

Authority

THE SOCIAL SERVICES ADMINISTRATION ACT

Section 14 Powers of Licensing Authority and inspectors

For the purpose of ensuring compliance with the provisions of this Act and the regulations or of any order made under this Act or the regulations, the Licensing Authority or an inspector may:

- (a) at any reasonable hour enter a Residential Care Facility and inspect that facility; and
- (b) inspect and take samples of any material, food, medication, or equipment being used at the facility.

MANITOBA REGULATION 484/88R

Section 18(1)(c)

Keep such personnel records as may be required with respect to the operation of the facility and make these available for inspection on request by the Licensing Authority.

Section 18(1)(d)

Allow person authorized by the Licensing Authority to examine and make copies of books, records, and other documents which are required to be maintained under this regulation.

Section 29(c)

Upon request of the Licensing Authority, cooperate in the evaluation of the effectiveness of the program offered in the facility.

Section 29(h)

Allow the Supervising Agency or Licensing Authority to have reasonable access to all persons resident in the facility.

Standard:

The Licensee shall allow the Licensing Authority, Supervising Agency, Building, Fire, and Public Health Authorities access to the facility and the residents at all reasonable hours to determine compliance with standards.

Preface

Residential Care Facilities may provide care and supervision, defined as “the assistance required by an adult suffering from a disability or disorder which precludes them from living independently.”

Residential Care Facilities may also provide Transitional Services, defined as “supportive services to persons who currently or potentially are capable of meeting their activities of daily living independently, but who temporally need supervision, assistance or counseling.”

Policy:

A Licensee may provide Transitional Services to an adult resident where approved by the Regional/Program Authority.

- Standards:
1. An assessment shall be completed by the Regional/Program Authority, in consultation with the Licensee, confirming the resident’s ability to safely maintain themselves in the Residential Care Facility, without supervision, for a specified period of time.
 2. A plan shall be developed, by the Regional/Program Authority, which outlines the level of independence and support required, how the resident is to be prepared for independence and the gradual steps toward independence.
 3. The plan shall be maintained on the facility file and reviewed on an ongoing basis to ensure that the resident’s need for support, assistance, and independence are assessed and the plan adjusted accordingly.
 4. The Licensee shall obtain a License to provide Transitional Services to a specific resident(s).

Assessment

Standards: The assessment process for Transitional Services shall address the following:

1. The resident's demonstrated skills which would allow him or her to remain independent and unsupervised in the facility for specific periods of time;
2. The resident's skill in managing safety issues. e.g. how to react in a fire emergency, answer the telephone and door;
3. The resident's capability of exercising self control and following directions;
4. Any medical conditions, physical limitations, or behaviors which might preclude the resident from remaining in the facility without supervision.
5. The resident's ability to administer his or her own medications and to prepare his or her own meals, if required; and
6. The resident's ability to request and access supervision and assistance, should the need arise.

Transitional Service Plan

The Transitional Services Plan shall be approved by the Program Authority or Regional Director and shall specify:

1. The times at which a resident may be left unsupervised;
2. The supports to be provided, and provisions for access to supports should the resident require assistance when left unsupervised;
3. The Emergency Plan which shall include an information list for the use of the resident. This Emergency List shall include:
 - Name, address and telephone number of the resident.
 - Telephone number for police, fire and ambulance.
 - Neighborhood contact person
 - The person(s) responsible for providing the supports necessary.

Licensing Inspection

The required file documentation will be reviewed by the Licensing Authority during the regular licensing reviews.

Non-compliance with the process detailed in the Appendix will be considered a violation of the licensing regulations. Where a violation exists, the Licensing Authority will direct the Licensee to immediately provide supervision whenever the resident is in the facility. The Licensing Authority will notify the Regional Director or Program Authority of the violation.

Where the Licensee fails to provide supervision as directed, the Licensing Authority shall take the action necessary to ensure the safety and well being of the residents.

Preface

The Vital Statistics Act requires certain procedures to be followed when an individual dies and that the death of every person in the province be registered. The Act defines the circumstances and conditions under which deaths are reportable to the office of The Chief Medical Examiner.

The Vital Statistics Act has been amended by expanding the cases that are reportable to The Medical Examiner to include the death of a person who, at the time of their death, is a resident of a Residential Care Facility.

The Vital Statistics Act in part states:

Subsection 14(6)

- (b)(ii) where, at the time of death, the deceased person was a resident of an institution or care facility that is licensed, or is required by an Act of the Legislature to be licensed, to operate as a residential care institution or care facility, no burial permit may be issued, by the district registrar before;
- (e) the body is examined by a Medical Examiner and an investigation is made into the circumstances of the death as provided under The Fatality Inquiries Act;
- (f) a Medical Examiner completes and signs the medical certificate of the cause of death;
- (g) registration of the death is completed in compliance with this Act.

Subsection 17(3)

No person shall bury or otherwise dispose of the body if any person who dies in the province before:

- (a) a medical certificate is issued;
- (b) the death is registered under this Act;
- (c) a burial permit is issued by the district registrar; and
- (d) the person conducting the funeral or religious service is in possession of the burial permit.

Preface

Lay persons cannot determine if an individual has died. In situations where a resident's health status is in crisis the Licensee or designate shall call 911 or a First Response Team to attend the resident. Where qualified personnel determine that a resident has died, the following standard and procedure must be followed. **It is the responsibility of the Licensee to bring the following Protocol to the attention of The First Response Team.**

Standard: The Licensee or designate shall report the death of a resident in a Residential Care Facility to the Chief Medical Examiner's Office at 945-2088 (24 hour service).

Procedure: (1) Contact a Medical Examiner's Investigator (MEI) by calling the above referenced phone number and report his/her observations that the individual's respiration and pulse have apparently ceased and the time at which this was observed. After 4:30 p.m. or on weekends or statutory holidays an answering machine message will provide the MEI's pager number. Contact the pager number and provide your facility phone number; the MEI will call you back. **When calling indicate that you are a licensed residential care facility.**

**If an Imminent Death Letter is on file the Medical Examiner's Investigator will not attend. Contact the attending physician noted on the resident's file.

(2) The Medical Examiner's Investigator will accept the report and determine whether an inquiry or investigation into the circumstances of death is required.

(3)(a) If the Medical Examiner's Investigator determines that an inquiry or investigation is warranted, they will attend at the facility and take charge of the investigation.

(3)(b) If the Medical examiner's Investigator determines that an inquiry or investigation is NOT warranted, he/she will advise the Licensee or designate as to the next steps in the process.

If The Medical Examiner's Investigator instructs that the death is to be reported to the attending physician, the Licensee or designate shall:

- (1) Contact the attending physician and report his/her observations that the individual's respiration and pulse have apparently ceased and the time at which this was observed.
- (2) The physician will determine whether to attend at the facility to examine the body prior to its release and instruct the Licensee or designate as to the steps to follow. These instructions should also establish whether the physician or the Licensee or designate is to contact the resident's next of kin or advocate.
- (3) The instructions, given by the physician, should be documented in the resident's file, read back to the physician to ensure that they have been accurately understood, and signed by the Licensee or designate.
- (4) The Licensee or designate may only release the body when it has been authorized by the physician or the Medical Examiner's Investigator

FUNERAL ARRANGEMENTS

Procedure:

If required, the Licensee or designate shall proceed with the funeral arrangements the following procedure applies:

- (1) Contact the family of the deceased or the Executor of the Estate to make funeral arrangements.
- (2) If there is no person willing to make funeral arrangements, the Sub-Inspector of Anatomy can be contacted at 945-1613 to make the arrangements for burial.
- (3) If there is no Executor or next of kin living in Manitoba, who can administer the estate of the deceased and make arrangements to have the funeral bill paid, contact The Public Trustee, Estates Administration Section at 945-2712 and provide the following information:
 - (a) name and date of death of the deceased;
 - (b) any known assets, bank accounts, etc;
 - (c) any sources of income, Canada Pension Plan, Old Age Security, Social Allowances, etc.;
 - (d) date of birth of the deceased;
 - (e) social insurance number
 - (f) last and prior addresses of the deceased;
 - (g) names and addresses of next of kin.

Preface

Manitoba Regulation 484/88R Sections 6(c) and 12(e), states:

“Every License/Letter of Approval issued under this regulation shall be limited to a particular Licensee and premises.”

Section 15 states:

“Before the owner or operator of a Residential Care Facility discontinues operation, he or she shall, by a notice in writing served on the Licensing Authority not less than 60 days prior to the proposed date of discontinuance, advise the authority of the intention to discontinue the operation.”

Policy

The operation of a Residential Care Facility shall be deemed to be discontinued where the Licensee sells, rents, leases or transfers ownership of the property, or relocates out of the Province of Manitoba.

Notwithstanding the Section 6(c) and 12(e), the Licensing Authority may consider an application for a facility currently in operation.

Standard:

1. The Licensee of a Residential Care Facility shall notify the Licensing Authority and Program Authority of their intention to discontinue operation of the Residential Care Facility.
2. The Licensee of a Residential Care Facility shall provide notice to the Licensing Authority and Program Authority, not less than sixty days prior to the actual discontinuance or operation.
3. Where the Licensee fails to provide necessary notification, and the Licensing Authority learns of the impending sale, rental, lease or transfer of ownership or the relocation of the Licensee, the Licensing Authority shall issue a Notice of Closure as provided for in Section 17(1)(a) of the regulations.
4. Where a Licensee proposes to discontinue operation of a Residential Care Facility and another individual proposes to operate the facility, a License for that purpose shall be obtained.

Process:

1. Where the Licensee has provided notification of the discontinuance of service, the new applicant shall provide a proposal for consideration to the Regional/Program Authority.
2. The Regional/Program Authority shall, within thirty days, review the proposal to determine regional need.
3. Where the proposal is deemed suitable, the Regional/Program Authority shall forward the proposal to the Licensing Authority for consideration.
4. Where the Regional/Program Authority deems the proposal unsuitable, they shall communicate this decision, including the reasons for the refusal, to the applicant.
5. Upon receipt of the proposal, the Licensing Authority will proceed with the licensing process as described in Parts C and D in the Residential Care Licensing Manual.

Preface: A variance is defined as a change to a given condition or circumstance which is considered to be the standard or norm.

A **Variance** to a Residential Care License or Letter of Approval is required where:

- an occupancy, beyond the licensed capacity, is proposed;
- a level of care, beyond the licensed level, is proposed;
- accommodation, of both children and adults, is proposed;

A VARIANCE TO OCCUPANCY

Approved Homes

Where an increase in occupancy, beyond the licensed capacity of an approved home, is proposed, but the occupancy will remain at four or less children, or three or less adults, a new Letter of Approval may be issued by the Designated Licensing Authority.

Licensed Facility

Where an increase in occupancy, of a licensed facility beyond the facility's licensed capacity, is proposed, either a new License or a Letter of Variance may be issued by the Director of Residential Care Licensing.

Where the occupancy of an approved home is proposed to increase beyond three adults or four children a License must be obtained from the Director of Residential Care Licensing.

A VARIANCE TO LEVEL OF CARE

Approved Homes

Upon receipt of a written recommendation from the Regional Program Authority or Child Caring Agency to increase the level of care in an approved home, the Designated Licensing Authority will review the request and may issue a new Letter of Approval or a Letter of Variance.

Licensed Facilities

Upon receipt of a written recommendation from the Regional Program Authority or Child Caring Agency to increase the level of care in a License facility, the Director of Residential Care Licensing will review the request, and may issue a new License or a Letter of Variance.

A Variance for Mixed Facilities (children and adults)

Approved Homes

Where in the opinion of the Regional/Program Authority and the Child Caring Agency it is deemed to be in the best interest of a child to be placed in an adult approved home, or an adult to be placed, or remain, in a children's approved home, a Letter of Approval may be issued.

A Letter of Approval to provide care and supervision to both children and adults may be issued by the Regional Designated Licensing Authority provided that:

1. The child is not a ward of a Child Caring Agency.
2. A written request is received by the Designated Licensing Authority from the Licensee.
3. Written approval has been obtained from the Child and Family Support Branch.
4. The facility does not accommodate more than four persons in care.
5. The facility provides care to both adults and children.
6. The Regional Designated Licensing Authority provides the monitoring required to ensure that the residential care standards are maintained.
7. Only one Letter of Approval is issued to a facility.

Where the child is a ward of a Child Caring Agency, approval must be obtained from the Director of Residential Care Licensing.

Licensed Facilities

Where, in the opinion of the Regional/Program Authority and the Child Caring Agency, it is deemed to be in the best interest of a child to be placed in an Adult Licensed Facility, or an adult to be placed, or remain, in a Children's Licensed Facility, a License may be issued.

A License to provide care and supervision to both children and adults may be issued provided that:

1. A written request is received by Residential Care Licensing from the Licensee.
2. A written recommendation is received by Residential Care Licensing from both the Regional Program Authority and the Child Caring Agency.
3. Written approval has been received by Residential Care Licensing from the Child and Family Support Branch.
4. Upon review of the request, the Licensing Authority deems the recommendation to be appropriate.

Procedure:

Variance

1. A request for a variance must be approved by the Regional/Program Authority or Child Caring Agency.
2. Any increase in the occupancy of a children's facility; or the placement of a child in an adult facility or the placement of an adult in a children's facility; requires the approval of the Child and Family Support Branch as well as the Regional Director for adult programs and the Executive Director of the Child Caring Agency.
4. Following approval of the appropriate Regional/Program Authority and Child Caring Agency, the recommendation is to be forwarded to the appropriate Licensing Authority(ies) with a request for a variance, copied to the Licensee.
6. Upon receipt of the required documentation, the Licensing Authority(ies) will review the matter and determine if the variance or License or Letter of Approval should be issued.
7. Where approved, the Licensing Authority(ies) will forward the variance, or License or Letter of Approval to the Licensee with copies to relevant parties.