



**Supportive Living
Accommodation Standards
Checklist**

Alberta

May 2006

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SUPPORTIVE LIVING ACCOMMODATION STANDARDS CHECKLIST

This checklist combines the office and walkthrough sections.

- ❖ Office sections are identified by checkboxes being located in the centre of the table and are not italicized.
- ❖ Walkthrough sections follow a double line, are italicized and the check boxes are located to the far right of the page.
- ❖ Schedules A, B and C are at the end of the checklist.
- ❖ Legislation, codes and standards referenced for the indicators are listed in the grey highlighted areas below the standard.

Layout of the Checklist

Theme of the standard

The standard

Referenced legislation, codes and standards

Office section

Walk through section

PHYSICAL ENVIRONMENT	
<p>The physical environment relates directly to the real property of the organization.</p> <p>Physical environment standards ensure that all real property is maintained in such a way as to secure the physical comfort and safety of all persons at all times that make use of the organization's real property.</p> <p>The physical environment can have profound impacts on the physical safety, atmosphere, and comfort of the supportive living facility. A clean and safe physical environment promotes the wellbeing of all people using the Facility (residents and their families, employees, visitors and contracted service providers). A pleasant and comfortable atmosphere promotes a greater use of home in the supportive living facility.</p>	
Standard 4 - Fire and Safety Regulations	
<p>The Facility complies with fire regulations and safety regulations associated with the regular inspection, maintenance, servicing and replacement of buildings and equipment.</p> <p>1.1 → The Operator will ensure that the Facility has a fire emergency plan in place.</p> <p>1.2 → The Operator will complete a safety report at least annually that include a fire inspection, record of fire drills and evacuation exercises, as well as any safety initiative that has been undertaken at the Facility.</p>	
<p>Source: Legislation, Code and Standards: Alberta Fire Code - (A.F.C.); Safety Codes Act (S.C.A.) Elevating Device, Passenger Ramps and Amusement Ride Regulation (S.D.R. 3-A.R.); Public Health Act (P.H.A.) Housing Regulation (H.R.); Minimum Residential Building Standard (M.H. & H.); Food and Food Establishment Regulation (F. & F.E.R.) and Food Retail and Food Service Code (F.R. & F.S.C.); Alberta Building Code (A.B.C.)</p> <p>***Major Occupancy Classification: Alberta Building Code - S.3.1.2.1: Group B, Division 2: □; Group C: □***</p> <p>Please check appropriately, based on the information provided in Schedule "A" or as determined by municipal authority.</p>	
INDICATOR	COMMENTS AND OBSERVATIONS
Fire Safety	A - F.C. B.2.3.2.1.
1. Is the Fire Safety Plan prepared in cooperation with the fire department and other applicable regulatory authorities?	<p><input type="checkbox"/> No - Fire Safety Plan has NOT been prepared with the fire department and other regulatory authorities, please complete the checklist for fire safety provided in Schedule "B". An approval of the plan must be obtained before compliance can be given.</p>
2. Are Fire Emergency Procedures posted in common areas?	<p>Check for posted Fire Emergency Procedures. ></p> <p style="text-align: right;"><input type="checkbox"/></p>
3. Are Fire Emergency Procedures available in resident rooms?	<p>Check resident room for fire emergency procedures. ></p> <p style="text-align: right;"><input type="checkbox"/></p>
4. Are fire extinguishers checked on a monthly basis initiated and dated by person doing inspection?	<p>Check tags on fire extinguishers for dates and initials. ></p> <p style="text-align: right;"><input type="checkbox"/></p>

PHYSICAL ENVIRONMENT

The physical environment relates directly to the real property of the organization.

Physical environment standards ensure that all real property is maintained in such a way as to secure the physical comfort and safety of all persons at all times that make use of the organization's real property.

The physical environment can have profound impacts on the physical safety, atmosphere, and comfort of the supportive living facility. A clean and safe physical environment promotes the well being of all people using the Facility (residents and/or their families, employees, visitors and contracted service providers). A pleasant and comfortable atmosphere promotes a greater sense of "home" in the supportive living facility.

Standard 1 Fire and Safety Regulations

The Facility complies with fire regulations and safety regulations associated with the regular inspection, maintenance, servicing and replacement of buildings and equipment.

1.1 The Operator will ensure that the Facility has a fire emergency plan in place.

1.2 The Operator will complete a safety report at least annually that includes a fire inspection, record of fire drills and evacuation exercises, as well as any safety initiatives that have been undertaken at the Facility.

Source Legislation, Codes and Standards: Alberta Fire Code – A.F.C.; Safety Codes Act (S.C.A.) Elevating Devices, Passenger Ropeways and Amusement Rides Regulation (E.D.P.R. & A.R.); Public Health Act (P.H.A.) Housing Regulation (H.R.); Minimum Health and Housing Standards (M.H. & H.); Food and Food Establishment Regulation (F. & F.E. R.) and Food Retail and Foodservices Code (F.R. & F.C.); Alberta Building Code (A.B.C.)

******Major Occupancy Classification: Alberta Building Code S. 3.1.2.1: Group B, Division 2: ; Group C: ******

Please check appropriately, based on the information provided in Schedule "A" or as determined by a municipal authority.

INDICATOR	COMMENTS AND OBSERVATIONS	
Fire Safety	A. F. C. S. 2.8.2.1.	
1. Is the Fire Safety Plan prepared in cooperation with the fire department and other applicable regulatory authorities?	Y	If a Fire Safety Plan has NOT been prepared with the fire department and other regulatory authorities, please complete the checklist for fire safety provided in Schedule 'B' . An approval of the plan must be obtained before compliance can be given.
	N	
2. Are Fire Emergency Procedures posted in common areas?	Check for posted Fire Emergency Procedures.	
		Y
		N
3. Are Fire Emergency Procedures available in resident rooms?	Check resident room for fire emergency procedures.	
		Y
		N
4. Are fire extinguishers checked on a monthly basis initialed and dated by person doing inspection?	Check tags on fire extinguishers for dates and initials.	
		Y
		N

Standard 1 Safety Regulations (cont.)			
INDICATOR	COMMENTS AND OBSERVATIONS		
High Buildings (Buildings over 6 stories)	Y	A.F.C. S. 2.8.2.4	
	N/A		
1. Is the plan reflective of "High Buildings" as applicable to <i>Alberta Fire Code</i> regulations?	Y	This section is for any facility that is over six (6) stories. Documentation should include: training of supervisory staff, voice communication system; procedure for use of elevators; actions to be taken by supervisory staff prior to fire department arriving; and fire department procedures for access and fire location within building.	
	N		
2. Are stairwells free from combustible material?	Check stairwells.		
3. Are fire procedures posted on each floor area?	Check each floor for fire procedures.		Y
			N
Elevator and Handicap Lift	S.C.A. (E.D.P.R. & A.R.)		
Is there an elevator or handicap lift present at site? If yes, continue to # 1 to 4.	Y		
	N/A		
1. Does the operator have maintenance inspections conducted at least once every 3 months by qualified personnel?	Y	Check maintenance reports or contracts for maintenance schedule.	
	N		
2. Does the operator have a current safety inspection report for a passenger hydraulic or traction elevator (within one or two years depending on the device type)?	Y	Check for current inspection reports. ("Certificates of Operation" are issued when an elevator is scheduled for operation renewal and only becomes effective upon an inspection report being received by Alberta Elevating Devices & Amusement Rides Safety Association. So though a Certificate is available, it is only valid when an inspection report has been submitted.)	
	N		
3. Does the operator have an annual safety inspection report for handicap lift?	Y	Check annual inspection reports.	
	N		
	N/A		
4. Are emergency procedures posted in the elevator or on a handicap lift for residents in case of service interruption?-	Check to see if emergency procedures are posted in the elevator or accessible on the handicap lift.		Y
			N

Standard 1 Safety Regulations (cont.)		
INDICATOR	COMMENTS AND OBSERVATIONS	
Fireplace Safety		
Is there a fireplace present?	Y N/A	A.F.C. S 2.6.1.4(1-2, Appendix A)
1. If a solid burning fuel fireplace is present, is there an annual inspection report?	Y N N/A	If no, inspection report must be provided. A solid burning fuel fireplace is for the burning of wood or manufactured logs.
2. <i>Is there any combustible material within 6" of the face of the fireplace?</i>	<i>Check area surrounding fireplace for any combustible materials.</i>	
		Y N
3. If a natural gas fireplace is present, is there an inspection report available?	Y N N/A	It is not mandatory for an inspection to be completed on a natural gas fireplace, but if one <u>has</u> been completed, it is not necessary to check on walkthrough. If not, a visual observation will be conducted on walk through.
<i>If any of the following indicators are present, facility needs to have gas-fired appliances inspected: An inspection report must be provided before compliance can be approved if any of the indicators are observed.</i>		
4. Are there signs of carbon deposits on vent openings?	<i>There should be no accumulation of carbon that is likely to affect the safe operation of the appliance.</i>	
		Y N
5. <i>Is there immediate flame ignition?</i>	<i>The pilot/igniter system shall effectively ignite the burner within 4 seconds after the gas reaches the main burner without delayed ignition or excessive flame flash out.</i>	
		Y N
6. <i>Is there continuous flame with no outages?</i>	<i>The burner flames shall continually burn at all burner ports.</i>	
		Y N
Door Closures		
A.B.C. S.3.1.8.11 <i>Every door in a fire separation other than elevators and dumb waiters shall be equipped with a self closing device designed to return the door to the closed position after each use.</i>		
1. Are door closures evident on each door in a fire separation?	<i>Check random resident room doors to see if closures are installed and working. Fire separations occur for the following and require fire rated doors equipped with self-closing and latching hardware: residential suite separated from the public corridor, exit stairwell doors, janitor rooms, storage rooms, service and mechanical rooms and smoke zone compartment doors located in corridors.</i>	
		Y N
Clothes Dryer Vents & Ducts		
1. Are dryer vents free of screens?	A.B.C. S.6.2.3.9(7) <i>Check to ensure there are no screens on dryer vents.</i>	
		Y N
2. <i>Is the material used for dryer ducting, non-combustible?</i>	1) <i>Electric Dryers – ducts should be of a noncombustible material (i.e. steel, aluminum alloy, copper, clay, asbestos-cement or similar noncombustible material)</i> 2) <i>Natural Gas Dryers – ducts are to be metal.</i>	
		Y N

Standard 2 Maintenance of Real Property

The real property is properly maintained.

- 2.1** The Operator will ensure that a preventative maintenance and repair program is in place to inspect, prevent and/or minimize the deterioration of furniture; and/or minimize the breakdown of equipment and/or unnecessary deterioration of buildings; and provide repair, service, and replacement of components as needed.
- 2.2** The Operator will ensure that the Facility is structurally sound, in safe condition and in good repair. Hallways, stairways, exits and ramps are well lit and kept clear of objects that could cause falls or obstruct passage.
- 2.3** The Operator will ensure that stairs, ramps and decks are equipped with safe and sturdy handrails. Ramps are wide enough for wheelchair access and have an acceptable incline.
- 2.4** The Operator will ensure that sidewalks, exterior stairs and ramps are kept clear, unobstructed and well lit, and reasonably free of ice and snow in the winter. Grounds are maintained and remain free of hazards. Adequate drainage is provided to minimize sidewalks and other walkways being slippery when wet and icy in winter. Outdoor areas are maintained in compliance with municipal bylaws and in keeping with the aesthetics of the neighbourhood.

INDICATOR	COMMENTS AND OBSERVATIONS		
Structure Maintenance	P.H.A. H.R. S. 3.1		
1. Does the operator have a preventative maintenance program?	Y	If yes, refer to “ Schedule ‘C’ - Review documentation on maintenance program with maintenance personnel.	
	N		
2. <i>Is the facility exterior, including roof surfaces, roofing material, exterior cladding, doors and windows, finished to provide safety and security through waterproofing, wind proofing and weather proofing.</i>	<i>Check for evidence that roofing material is in need of repair. (e.g. Curled or missing shingles; loose metal sheeting and etc.) Exterior cladding has no major cracks or is loose; soffit and fascia not loose, etc. M.H. & H. Standards S.3 Doors open properly, windows are not broken or in need of replacement. Lock hardware on appropriate doors and windows.</i>		Y
			N
3. Are screens present on all opening windows?	M.H. & H. Standards S. 2 b (iii)		Y
			N
			N/A
4. Are hallways, stairways and exits safe, clear of objects and well lit with sturdy and safe handrails?	<i>Check that there is no obstruction of passageways and exits and all are well lit. Handrails are present where needed and in safe repair. Check handrails for separations, broken holders, etc.</i>		Y
			N

Standard 2 Maintenance of Real Property (cont.)		
INDICATOR	COMMENTS AND OBSERVATIONS	
Grounds and Yards		
1. Does the operator have procedures for the removal of snow and ice that specify who is responsible and when it is to be completed?	Y	Check procedures to ensure that those specifics are included.
	N	
2. Are grounds and walkways maintained and safe from hazards?	Check for overall cleanliness and safety issues. (e.g. Adequate drainage around walkways, no cracked or raised sidewalks; they are safe and well lit; grounds clear of refuse; no unsafe areas and etc.)	
	Y	N
3. Are ramps acceptable to design requirements for barrier free?	A.B.C. S. 3.8.3.4 Ramps are recommended to be constructed in slope (20" in length for each inch of incline for a maximum distance of 30' where a landing must be constructed.) Minimum width is 3 feet.	
	Y	N
	N/A	
4. Are handrails in good repair?	M.H.& H. Standards S. 3(c) Check handrails for sturdiness.	
	Y	N
Kitchen and Storage		
P.H.A., F. & F.E. R.; F.R. & F.C.		
1. Are the kitchen and storage areas in good repair and of sound construction?	F.R. & F.C. S.2.3 - Wall & ceiling finishes are smooth, impermeable, washable and light in color; free from flaking material and free of pitting and cracks. Inserts for false ceilings must have a non-porous (smooth) washable, impervious finish.	
	Y	N
2. Are all areas well lit and bulbs not burned out?	F.R. & F.C. S.2.7	
	Y	N
3. Are floors coverings durable, easily cleaned and non-slip?	F.R. & F.C. S.2.4 Consideration given for age of building for application of non-slip flooring. Non-slip flooring is not required for dry storage.	
	Y	N
4. Are floor coverings clean and in good repair?	Check for cleanliness and wear.	
	Y	N
5. If rubber or plastic mats are used in kitchen, are they easily removed for cleaning and sanitizing?	Check schedule for cleaning of mats	
	Y	N

Standard 3 Safe and Hygienic Environment

A safe and hygienic environment is provided for residents, employees and the public.

- 3.1 The Operator will ensure that all areas (i.e., resident rooms and common areas) of the Facility are cleaned and sanitized on a cyclical basis, as well as on an as-needed basis and include infection-control procedures.
- 3.2 The Operator will ensure that mechanisms are in place to minimize unpleasant odours (e.g., lids on dirty laundry hampers, garbage containers).
- 3.3 The Operator will ensure that residents and/or their families, employees and contracted service providers are educated on an on-going basis about the risks of infection and about their role in preventing infections.

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Are cleaning procedures and schedules of resident rooms, common areas and public and staff washrooms done on a cyclical basis and an as-needed basis?	Y	Health Canada, Infection Control Guidelines (I.C.G.), Housekeeping Check cleaning procedures and schedule records.
	N	Are scheduled cleaning of rooms recorded?
2. Are residents and/or their families, employees and contracted service providers educated on an on-going basis about the risks of infections and their role in preventing infections?	Y	Check education as to training and/or seminars on infections and infection control for employees and contracted service providers. Check on procedures that assist families on preventing infections.
	N	
3. Are common areas and public washrooms clean and tidy?	<i>Check for overall cleanliness.</i>	
	<i>If odors are present, check that laundry hampers are covered and garbage containers emptied.</i>	
4. Are dirty laundry hampers covered to prevent odours?	<i>Check dirty laundry hampers for covers where odours may occur.</i>	

Standard 4 Security Systems

If the Facility has a security system, it is appropriate to the type of building and residents being served (e.g., a door access control system to control entering and exiting the building from resident areas) and the security system is properly maintained.

4.1 The Operator will ensure that the security system is maintained, inspected and tested on a regularly scheduled basis.

INDICATOR	COMMENTS AND OBSERVATIONS	
Does the facility have a security system?	Y	If yes, proceed to #1.
	N/A	
1. Is the security system appropriate for the type of building and residents being served?	Y	The operator determines, based on the building and residents, if it is appropriate.
	N	
2. Does the operator conduct and maintain records of inspections of security system?	Y	Inspections are defined as actively setting the door alarms off on a regular time frame. Records should be kept of the dates of door checks (every 3 to 4 months and more often in winter months) to ensure they are in working order.
	N	
3. Does the door alarm activate when panel is armed and door opened?	Activate door alarm.	
		Y
		N

Standard 5 Employee/Resident Communication and Personal Response System

An employee/resident communication system and/or personal response system appropriate to the type of building and residents being served has been developed and is properly maintained.

5.1 The Operator will ensure that the employee/resident communication system and/or personal response system is maintained, inspected and tested on a regularly scheduled basis.

INDICATOR	COMMENTS AND OBSERVATIONS	
Does the facility have an employee/resident communication system and/or personal response system?	Y	If yes, proceed to #1.
	N/A	
1. Is the personal response system appropriate for the type of building and residents being served?	Y	The operator determines, based on the building and residents, if they feel it is appropriate.
	N	
2. Does the operator conduct and maintain records of inspections of the personal response system?	Y	Check testing and inspection records. (Records should indicate that at least quarterly inspections are being completed.)
	N	
3. Does the personal response equipment signal when activated?	Check to see that the response system activates and then if the procedure for responding is carried out.	
		Y
		N

Standard 6 Heating and Ventilation Systems

Heating and ventilation systems are operated at a level that maintains the Facility at a temperature that supports the comfort of the majority of the residents.

- 6.1 In common areas and where residents are unable to adjust the temperature of their personal spaces, the operator will ensure that the Facility is maintained within a temperature range of 22 to 28 degrees Celsius.**
- 6.2 The Operator will ensure that a procedure is in place for managing air quality to ensure that air quality systems are operating at the highest possible efficiency, quality and safety.**

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator monitor the comfort level of the residents and employees to the temperature when they are unable to adjust the controls?	Y	Check the resident interview.
	N	Temperature range should be maintained within 22 to 28 degrees C.
2. Does the operator have a procedure for managing air quality to ensure that air quality systems are operating at the highest possible efficiency, quality and safety?	Y	Check records or documentation of duct cleaning. (Every 3 to 5 years depending on environment.) If completed, a certificate should be issued from the cleaning company. Check maintenance records for monitoring air quality.
	N	

Standard 7 Pleasant and Comfortable Environment

A pleasant and comfortable environment is provided to residents.

- 7.1 The Operator will ensure that resident rooms incorporate window treatments and room finishes that create a “home-like” environment.**
- 7.2 The Operator will ensure that dining areas incorporate wall decorations, window treatments and room finishes that create a “home-like” environment.**
- 7.3 The Operator will ensure that basic room furniture is available at no additional cost to the resident, if required.**

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator ensure that resident rooms incorporate window treatments and room finishes that create a “home-like” environment?	Y	Check resident rooms for window coverings and room finishes that residents feel is “home-like”. This will also be asked in the resident and family interviews.
	N	
2. Does the operator ensure that basic room furniture is available at no additional cost to the resident, if required?	Y	Check that written documentation states that basic room furniture is available if required at no cost to the resident.
	N	
3. Does the operator ensure that dining areas incorporate wall decorations, window treatments and room finishes that create a “home-like” environment?		Check the dining areas for attractiveness and “home-like” atmosphere, such as pictures, wall hangings and decorative items.

HOSPITALITY SERVICES

Hospitality Services relate to the provision of the following services:

- meals;
- housekeeping; and
- laundry and linen.

Residents move into supportive living because they are no longer able to meet many of their own basic needs. Hospitality services that offer residents assistance and choice in safely meeting the daily requirements of living to help residents maintain their sense of independence.

Standard 8 Food Handling Hygiene

Source Legislation, Codes and Standards: *Public Health Act (P.H.A.)* Food and Food Establishment Regulation (F. & F.E. R.) and Food Retail and Foodservices Code (F.R. & F.C.); *Gaming and Liquor Act* and Regulations. (G.&L.R.)

Food products are handled throughout storage, preparation, service and presentation in a manner that prevents contamination.

8.1 The Operator will ensure that Employees are trained in food handling; do not work if they have been prohibited from doing so under the *Public Health Act - Communicable Diseases Regulation*; and are prohibited from working in food handling with open wounds or lesions, unless wearing proper protective coverings.

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator ensure that employees in the food area have food safety training?	Y	P.H.A. F. & F. E. R. S.32(1&2)
	N	Facilities should ensure that employees have the knowledge and skills to enable them to handle food hygienically. Check training records.
2. If there are 6 or more food handlers working on the premises, is there one employee with a food safety certificate present?	Y	P.H.A. F. & F. E. R. S.1(a & b)
	N	Check schedule and verify that one kitchen employee per shift is present that has a food safety certificate.
	N/A	
3. If there are 5 or fewer food handlers working on the premises, do management or supervisory employees have a food safety certificate?	Y	P.H.A. F. & F. E. R. S.2
	N	Employees having food safety certificates do not have to be present at all times. Manager and supervisory employees should have food safety certificates.
	N/A	
4. Do employees with food safety certificates take a refresher course after 5 years?	Y	P.H.A. F.R. & F. C. S.6.3.4.
	N	Verify training documentation.

Standard 8 Food Handling Hygiene (cont.)

INDICATOR	COMMENTS AND OBSERVATIONS		
5. Are employees prohibited from working as a food handler, by or under the <i>Communicable Disease Regulation?</i> (See below)	Y	P.H.A. F. & F. E. R. S. 31(2) and F.R.& F.C. S.5.8	
	N	Check policy, procedures, employee handbook or other documentation.	
<p><i>F.R. & F.C. S.5.8 d) Generally, a person is considered to be suffering from a communicable disease in the following situations:</i></p> <ul style="list-style-type: none"> <i>i. they have one or more of the symptoms associated with an acute gastro-intestinal illness, such as diarrhea, fever, vomiting, jaundice and/or sore throat with fever;</i> <i>ii. they are suspected of causing or being exposed to a confirmed communicable disease outbreak; or</i> <i>iii. they live in the same household as a person who is diagnosed with a communicable disease.</i> <p><i>It is recommended that employees suffering any of these conditions should be symptom-free for 48 hours before returning to the food area.</i></p>			
6. Are food products handled in a manner that prevents contamination?	F.R. & F.C. S. 5.0 Check policy and procedure for safe food handling. Frequent hand washing (check for posted hand washing signs), ready to eat food is handled with clean and sanitized utensils such as tongs, etc., sanitizing of food surfaces, sneeze guards, etc.		Y
			N
7. Is there at least one separate hand washing sink in the food area?	Check separate hand washing sinks.		Y
			N
8. Does the facility ensure that employees in food areas wear clean outer garments and footwear?	F.R. & F.C. S. 5.2 Check employee garments and footwear for cleanliness.		Y
			N
9. Are soiled aprons changed between raw food prep and ready to eat activities?	F.R. & F.C. S.5.3 Observe kitchen employees for changing aprons between food preparation and ready-to-eat activities.		Y
			N
10. Is hair confined so as to prevent food from contamination?	F.R. & F.C. S.5.4 Personnel involved in food areas and any person entering a food preparation or storage area should have all hair confined as to the public health inspector and organization direction. Where required, beards should be completely covered with beard nets.		Y
			N
11. Do employees refrain from any conduct that could result in contamination of food or food area?	F.R. & F.C. S.5.5 (e.g. employees washing their hands after sneezing, touching hair/eyes/mouth/nose, etc.; moving between clean and dirty duties without hand washing, etc.)		Y
			N
12. Do employees remove or cover with gloves, any watches, rings and loose fitting jewellery?	F.R. & F.C. S.5.7 Jewellery should be removed or covered with gloves.		Y
			N
13. Do employees wear gloves for cuts and bandages?	F.R. & F.C. S.5.9 Employees must wear gloves.		Y
			N
14. Are employees refrained from working with open wounds or employees with lesions on hands, wrists, arms or other parts of body unless wearing impermeable protective coverings?	F.R. & F.C. S.5.9 Employees are not allowed to work in food areas if they have open sores or lesions, unless they wear impermeable protective coverings.		Y
			N

Standard 9 Food Preparation, Cleaning and Sanitation

A written sanitation program is in place to monitor and control all elements that ensure food safety including areas, equipment and utensils to be cleaned, chemicals and procedures to be used; and the maintaining of inspection and monitoring records.

9.1 The Operator will ensure that measures are taken to ensure the safe preparation of food as well as the sanitary handling of waste.

INDICATOR	COMMENTS AND OBSERVATIONS		
1. Does the operator have a written sanitation program of procedures and schedules that include cleaning food contact and non-food surfaces, equipment and utensils and a list of all cleaning and sanitizing agents, their concentrations and uses?	Y	P.H.A. F & F.E.R. S. 30 (1) Check documentation as to sanitation program of procedures and schedules.	
	N	Check list of cleaning and sanitizing agents, their concentrations and uses in food area.	
2. Are procedures inclusive for sanitizing equipment used in food preparation?	Check equipment (e.g. meat slicer, mixer, can opener, ice machine, etc.)		Y N
3. Does the operator record daily dishwasher temperatures or chemical monitoring?	F.R. & F.C. S.4.2.6 f & 4.2.8.c Check documentation for dishwashing temperatures and chemical monitoring.		Y
			N
Dishwashing system in operation on site: Check which system is appropriate.	F.R. & F. C. S. 4.2.6 – 4.2.8 Establish the dishwashing system on site (Check box.).		
a) Mechanical – Chemical Sanitizing (Low Temperature)	F.R. & F. C. S. 4.2.6 Verify records of chemical concentrations as to specific temperature of machine. Concentrations depend on the temperature as well as the type of sanitizing agent used, (e.g. chlorine, iodine, quaternary or other). (Documentation for dishwashing chemical concentrations and temperatures should be provided, testing records or inspection reports.)		
b) Mechanical – Hot Water sanitizing	Temperatures vary according to type of machine.		
o Stationary rack, single temperature machine	Wash and rinse have same temperature. 74° C (165°F).		Y
			N
o Stationary rack, dual temperature machine	Wash and rinse, different temperatures. Wash - 66°C (151°F). Rinse - 82°C (180°F).		Y
			N
o Single tank, conveyor, dual temperature machine	Wash - 71° C (160°F). Rinse - 82° C (180°F).		Y
			N
o Multi-tank, conveyor, multi-temperature machine	Wash - 66° C (151°F). Rinse - 82° C (180°F).		Y
			N

Standard 9 Food Preparation , Cleaning and Sanitation (cont.)		
INDICATOR	COMMENTS AND OBSERVATIONS	
4. <i>Manual Dishwashing Procedure</i>	<i>Check procedures. Must include washing and sanitizing procedures with temperature and chemical monitoring substantiated with testing records.</i>	
		Y
		N
Solid Waste Disposal	F.R. & F. C. S. S.4.5	
1. Is waste material within the premises removed at least daily?	Y	F.R. & F. C. S.2.11(a-e) Check to see if facility has a procedure and schedule for waste removal.
	N	
2. Is there cleaning and sanitizing of garbage containers as needed?	Y	Check schedules.
	N	
3. <i>Is waste storage situated so as to prevent contamination of food area?</i>	<i>Waste storage should be away from food area.</i>	
		Y
		N
Pest Management	P.H.A. F. & F.E.R S.22 and F.R. & F. C. S. 4.3	
1. Are there policy and procedures in place to eradicate pests in a food establishment?	Y	Check policy, procedure and records. (Pests can be birds, rodents or insects.)
	N	
2. Are the rodenticides and insecticides used, approved for use in food establishments and used in a manner to prevent food contamination?	Y	Check MSDS sheets for use in food establishments.
	N	
3. Is there documentation that includes chemicals, frequency and method used?	Y	Check documentation.
	N	

Standard 10 Control of Food Storage and Handling

Food storage and handling procedures are in place to monitor and control the risk of food contamination.

10.1 The Operator will ensure that food is stored safely (i.e., dry, refrigerated and frozen, where applicable), handled safely (i.e., thawing, heating, and cooling) and protected from contamination.

INDICATOR	COMMENTS AND OBSERVATIONS		
1. Is the food received from approved sources?	Y	P.H.A. F. & F.E.R. S. 23(1) Check procedures for receiving food. Food and food ingredients must be obtained from sources that are approved by the regulatory authority having jurisdiction to prevent food contamination.	
	N		
2 Are damaged, unclean, contaminated or in anyway unsafe food items segregated and not used for food consumption?	F.R. & F. C. S.3.2.2.3 Check or inquire about procedures for handling unacceptable food. (This includes dented cans, broken eggs, leaking products, etc.)		Y
			N
3. Is the thawing, cooking, storing and reheating of foods being complied with as to code?	F.R. & F. C. S.3.3.2 – S.3.3.11 Check processes in place or procedures as indicated by the guidelines listed below:		Y
			N
<ul style="list-style-type: none"> ➤ Thawing of frozen food: Refrigeration - 4°C, submerged in cold running water; part of cooking process or microwaving. ➤ Hot holding of food: Held at a minimum temperature 60°C. ➤ Cooling, after cooking (temperature reduction times). Smaller quantities stored to reduce temperature quickly. Provides that potentially hazardous cooked foods that are refrigerated should be cooled from 60°C to 20°C or less within 2 hours and then from 20°C to 4°C or less within 4 hours. ➤ Cooling from room temperature: Potentially hazardous foods, prepared and kept refrigerated prior to serving, should be cooled from room temperature to 4°C (40°) within 4 hours. ➤ Room temperature holding: Potentially hazardous foods, intended for immediate consumption and not stored on ice or other equivalent methods, can be displayed for no more than 2 hours and then discarded. Check procedures. ➤ Reheating potentially hazardous food for hot holding: Potentially hazardous foods if reheated should increase from 4°C to 60°C or higher in a manner that will pass through the danger zone, 4°C - 60°C (40°F - 140°F) as quickly as possible to reach an internal temperature of 74°C. ➤ Reheating potentially hazardous food for immediate service: Potentially hazardous foods that have been cooked and then cooled to 4°C (40°F) once can be served, if for immediate service, at any temperature, provided the time the food spends between 4°C and 60°C (40°F - 140°F) does not exceed 2 hours. ➤ Reheating, cooling and reheating potentially hazardous food: Potentially hazardous foods that have been cooked, cooled to 4°C (40°F), reheated and then re-cooled to 4°C must be served, if for immediate service, after being reheated to 74°C (165°F) or higher. ➤ Microwave reheating: Food microwave reheated should be stirred and rotated and allowed to stand for 2 minutes to obtain temperature equilibrium. 			
Notes:			

Standard 10 Control of Food Storage and Handling (cont.)		
INDICATOR	COMMENTS AND OBSERVATIONS	
4. Are required temperatures monitored and recorded for foods that are ready to be served?	<i>F.R. & F. C. S.3.7.2 Food in serving equipment should have temperatures monitored and recorded on a daily basis.</i>	Y
		N
5. Are chemicals, recyclables, non-food materials and others stored in a separate area to prevent potential cross contamination of food and food contact surfaces?	<i>F.R. & F. C. S.2.9 a Check storage areas. <u>Chemicals</u>: Cleaners, sanitizers, detergents, pesticides and other similar products. (All chemicals should be in containers not intended to be used to store food, and labeled as to contents.) <u>Non-food materials</u>: utensils, linens, single-service and single-use articles and <u>Others</u>: landscaping tools, marketing posters, signs, etc.</i>	Y
		N
6. Is food stored properly in coolers, freezers and dry storage?	<i>F.R. & F. C. S.3.7.4. First in–first out rule; food properly labeled; open food items are stored in sealed container; (puddings, mixes, cereals, etc.); food is stored 6 inches off of floor. Ready to eat food shall be marked with the prep date or the “consume by” date. Food should be stored in top to bottom order, in cooler, from top to bottom: Cooked/ready to eat foods (top shelf) Fresh fruits/veggies Raw fish Raw unground beef Raw pork, ham, bacon and sausage Raw ground beef and ground pork Raw chicken (bottom shelf)</i>	Y
		N
7. Do cooling equipment units have accurate and reliable temperature control and recorded monitoring?	<i>F.R. & F. C. S. 3.7.5 Coolers and fridges - Required Temperature 4°C (40°F) or less. Freezers - Required Temperature: -18°C (0°F) or less. Check temperature monitoring records.</i>	Y
		N
Potentially Hazardous Foods is any food that consists in whole or in part of milk or milk products, eggs, meat, poultry, fish, shellfish (edible mollusca and crustacean), or any other ingredients, in a form capable of supporting growth of infectious and/or toxigenic microorganisms. This does not include foods which have a pH level of 4.6 or below and foods which have a water activity of 0.85 or less.		

Standard 11 Permits and Licenses

Where the Facility operates a food establishment, it maintains a valid permit.
Where a Facility sells liquor to residents and/or visitors, it has a valid license.

11.1 The Operator will ensure that required food establishment permits and liquor licenses are current and posted.

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator have a current <i>Food Establishment Permit</i> ?	Y	P.H.A. F. & F.E.R.
	N	Check for permit and that it is current (annually). If no permit, letter from Regional Health Authority as to why a permit is not needed.
2. Does the operator post their <i>Food Establishment Permit</i> ?	<i>Check for posted Food Establishment permit.</i>	
3. Does the operator have a <i>Liquor Permit</i> ?	Y	Gaming and Liquor Act and Regulations (G. & L.R.) S.4.2.1
	N	Verify liquor license is current and for what facility.
	N/A	
4. Does the operator post their <i>Liquor Permit</i> when serving liquor?	Y	Gaming and Liquor Act and Regulations (G. & L.R.) S.4.2.1
	N	Verify liquor license is current and for what facility.
	N/A	

Standard 12 Menu Planning and Review

Menus for residents are planned to ensure meals, fluids and snacks meet *Canada's Food Guide to Healthy Eating* as published by the Government of Canada.

- 12.1 The Operator will ensure that each resident is offered safe, palatable, nutritious, appealing foods and fluids in sufficient quantity to meet his or her nutrition needs and provide adequate hydration.**
- 12.2 The Operator will ensure that a minimum three-week cyclical menu is reviewed and approved in accordance with *Canada's Food Guide to Healthy Eating* by a Registered Dietitian or qualified Food and Nutrition Manager.**
- 12.3 The Operator will ensure that menus are planned, as far as is reasonably practical, to recognize residents food preferences, religious practices and cultural customs. Practices will be put in place that solicit feedback from residents and families.**
- 12.4 The Operator will ensure that the menus offer variety, seasonal variation and provide choices from within the same food group at meal times.**
- 12.5 The Operator will ensure that menu substitutions are made from within the same food groups and provide similar nutrient value.**
- 12.6 The Operator will ensure that menus are communicated to residents in an appropriate manner.**
- 12.7 The Operator will ensure that a record of meals served and any substitutions made to the facility menu is maintained for at least the past three months.**

Standard 12 Menu Planning and Review (cont.)

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Is a minimum three-week cyclical menu planned in accordance with <u>Canada's Food Guide to Healthy Eating</u> and approved by a Registered Dietitian or qualified Food Nutrition Manager?	Y	Verify if an approval letter or menus have been signed by qualified personnel.
	N	
2. Are there sufficient quantities of foods and fluids offered to meet nutrition and hydration needs?	Y	Check in resident and family interviews for satisfaction for quantity of food and drink available to meet nutrition and hydration needs.
	N	
3. Is the menu policy reviewed, at least annually, with consideration for seasonal variety?	Y	Check policy or documentation that verifies there is a review of menus for variety.
	N	
4. Are menus planned, as far as reasonably practical, to recognize residents' food preferences, religious practices and cultural customs?	Y	Ask about specific resident cultural influence and check menus as to inclusion of these cultural and ethnic customs as well as choices that are available.
	N	
5. Are menu substitutions made from the same food group and provide similar nutrient value?	Y	Check menu substitutions to ensure that they are from the same food group and provide similar nutrient value. Are alternates provided for food preferences (e.g. liver, pork with alternates)?
	N	
6. Is there a record of menus and changes kept from the past 3 months?	Y	Check documentation, noting changes to menu items that they are in the same food groups.
	N	
7. Are menus communicated to the residents in an appropriate manner?	Y	Check for menu boards, announcements and similar communication ideas.
	N	
8. Does the operator have practices in place that solicit feedback from the residents and families on menu ideas?	Y	Check for surveys, questionnaires, etc., which would indicate the facility does solicit resident and family feedback.
	N	

Standard 13 Meal Scheduling

A consistent and appropriate schedule for meals, fluids and snacks is developed and maintained.

13.1 The Operator will ensure that meals, fluids and snacks are provided or available to residents at times of the day that have been established in collaboration with residents and/or residents' families. Where applicable, residents have access to snacks and fluids between meals.

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Is there consistent scheduling of meals?	Y	Check scheduling to verify meal times.
	N	
2. Has scheduling of meals been established in collaboration with residents and/or residents' families?	Y	Verify with interview of residents and families.
	N	

Standard 13 Meal Scheduling (cont.)		
INDICATOR	COMMENTS AND OBSERVATIONS	
3. Where applicable, do residents have free access to snacks and fluids between meals?	Check snack and fluids availability	
		Y N

Standard 14 Meal Service		
Residents are provided with nutritious, tasteful, safe and pleasingly presented meals, fluids and snacks served in a healthy, clean and enjoyable environment.		
14.1	The Operator will ensure that meals, fluids and snacks are prepared and served in a manner that, as far as is reasonably practical, considers the interests of the majority of residents, as well as recognizes the residents' personal dining and food preferences, religious practices and cultural customs.	
14.2	The Operator will ensure that meals, fluids and snacks are provided to the resident at a temperature and in a manner that promotes comfort and safety.	
INDICATOR	COMMENTS AND OBSERVATIONS	
1. Are meals prepared and served, as far as is reasonably practical, with consideration for resident's personal dining and food preferences, religious practices and cultural customs?	Y	Verify with interview inquiries from office, resident and families.
	N	
2. Are meals, fluids and snacks provided so that hot foods are served hot and cold food, cold?	Y	Verify with resident interviews.
	N	

Standard 15 Textured - Modified Diets		
Whenever textured - modified diets are provided to residents, they are appropriate and properly prepared.		
15.1	The Operator will ensure that texture-modified diets are approved by the appropriate health care professional and prepared by employees trained and supervised in the preparation of texture-modified diets using appropriate food preparation equipment. Texture-modified choices must be high quality and nutrient dense.	
INDICATOR	COMMENTS AND OBSERVATIONS	
Are textured-modified diets provided?	Y	If yes, proceed to #1.
	N/A	
1. If yes: are textured-modified diets approved by an appropriate dietary professional?	Y	Verify documentation.
	N	
2. Are the textured-modified diets prepared by employees trained in textured-modified diet preparation?	Y	Verify documentation of training or process for preparation.
	N	

Standard 16 Housekeeping Services

A clean, safe and comfortable environment is provided for residents, employees and visitors.

- 16.1 The Operator will ensure that housekeeping services follow proper cleaning, hygiene and disease-control procedures (e.g., minimizing cross contamination, prevention and control of infection, the proper use of cleaning supplies and equipment, the proper labeling and storage of cleaning supplies).
- 16.2 The Operator will ensure that the Facility will be maintained in a clean and tidy manner.
- 16.3 The Operator will ensure that housekeeping is done on a cyclical basis respecting resident preferences as much as possible.
- 16.4 The Operator will ensure that cleaning equipment is maintained in good condition.

INDICATOR	COMMENTS AND OBSERVATIONS		
1. Are housekeeping records maintained of completed cleaning schedules?	Y	Verify cleaning records as to date, duties completed and initial of employee.	
	N		
2. Are residents notified of the schedule?	Y	Check resident orientation forms, handbook or ask on interview.	
	N		
3. Are procedures for cleaning in place to prevent cross contamination and provide infection control?	Y	Check procedures.	
	N		
4. <i>Is cleaning equipment in good condition?</i>	<i>Check equipment for effectiveness and safety.</i>		Y
			N
5. <i>Is the facility clean and tidy?</i>	<i>Check for overall cleanliness and tidiness.</i>		Y
			N

SAFETY SERVICES

Safety services relate to promotion, planning and monitoring for the safety of residents, visitors, volunteers and employees.

Safety services standards are designed to facilitate the health, safety and well being of residents, visitors and employees.

It is imperative that a Facility maintains the greatest possible sense of safety for all users, including residents and their families, visitors, volunteers, employees and contracted service providers. The Operator is responsible to promote safety through the physical design and layout of the Facility, and the ongoing inspection and maintenance of facility equipment and safety systems.

Standard 18 Emergency Preparedness

Source Legislation, Codes and Standards: *Occupational Health and Safety Act (O.H.S.); Alberta Building Code (A.B.C.);*

An Emergency Preparedness Plan is in place to deal with emergencies (other than Fire) that may require rescue or evacuation. The plan is communicated and made available to residents and their families, visitors, volunteers, employees and service providers.

- 18.1 The Operator will ensure that an Emergency Preparedness Plan is in place to deal with non-fire related emergencies such as loss of heat, power and water or excessive heat.**
- 18.2 The Operator will ensure that emergency plans are in place for the disruption of hospitality services (i.e., meals, housekeeping, laundry and linen).**
- 18.3 The Operator will ensure that the Facility has designated emergency response workers who are trained in the operation of Facility-owned safety equipment, security systems, resident alarm systems and resident monitoring systems.**

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator have a current Emergency Preparedness Plan developed with employees that includes non-fire related emergencies such as disruption of services that may require rescue or evacuation?	Y	<i>Occupational Health and Safety Act (O.H.S.)Part 7.S.115-S.117</i> Check Emergency Preparedness Plan. (e.g. loss of heat, power and water or excessive heat, to provide continuation of services for the residents.)
	N	

Standard 18 Emergency Preparedness (cont.)

INDICATOR	COMMENTS AND OBSERVATIONS	
2. Does the operator ensure that the Emergency Preparedness Plan is kept current?	Y	O.H.S. Part 7 115(3)
	N	Check policy and procedures for updating the emergency plan.
3. Does the operator communicate the Emergency Preparedness Plan to residents, their families, visitors, volunteers and employees?	Y	Check operator's communication process of Emergency Preparedness Plan.
	N	
4. Does the operator designate and train emergency response workers in the emergency response appropriate to the work site, the potential emergencies identified in the plan and the operation for emergency equipment?	Y	O.H.S. Part 7.116 & 117(2)
	N	Verify through training records.
5. Does the operator ensure that training includes exercises that simulate the potential emergencies identified in the plan and at repeated intervals so that designated response workers are competent to carry out their duties?	Y	O.H.S. Part 7.117(3&4)
	N	Check records of procedures and scheduling of emergency response plan drills.
6. Does the operator ensure emergency plans are in place for the disruption of hospitality services (meals, housekeeping, laundry and linen)?	Y	Check policy and procedures for disruption of hospitality services.
	N	
7. Does the operator have emergency plans for outbreak of illness?	Y	Check outbreak policy, procedures and/or plans.
	N	

Standard 19 Prevention of Abuse

Policies and procedures are developed and maintained that promote the prevention of abuse of residents.

19.1 In Facilities where the *Protection for Persons in Care Act* applies, the Operator will ensure that policies and procedures that adhere to the requirements of the *Act* are developed and maintained.

19.2 In Facilities where the *Protection for Persons in Care Act* applies, the Operator will ensure that information brochures and posters on abuse of residents and the on *Act* are readily available and visible in resident areas in prominent locations.

19.3 The Operator will ensure that policies and procedures are developed and maintained that require all employees to receive education on identification, prevention and reporting of abuse or suspected abuse of residents.

Standard 19 Prevention of Abuse (cont.)		
INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does policy and procedure comply with legislation?	Y	Check policy for reporting and complainant protection.
	N	
2. Does the operator ensure that employees receive education on identification, prevention and reporting of abuse or suspected abuse of residents?	Y	Check employee handbooks or orientation documentation.
	N	
3. Does the operator have posted information and brochures available on PPCA in prominent places?	Check for brochures and pamphlets.	

Standard 20 Personal Response Protocols		
Policies and procedures are in place for responding to personal emergencies.		
20.1 The Operator will ensure that 24-hour safety and security policies and procedures, and responses that are appropriate to the level of the facility, are developed and maintained.		
20.2 The Operator will ensure that employees are properly trained in responding to the Personal Response System (e.g., emergency call station).		
INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator have policies and procedures that provide for 24-hour safety, security and response that are appropriate to the level of the facility?	Y	Verify policy and procedure.
	N	
2. Are employees and contracted service providers trained in responding to the Personal Response System?	Y	Verify through policy statements and orientation checklists.
	N	
	N/A	
3. Does the operator ensure residents are trained on the use of the Personal Response System?	Y	Verify on resident orientation and resident interviews.
	N	
	N/A	

Standard 21 Resident Safety

Policies that promote resident safety are developed and maintained.

- 21.1 The Operator will ensure that the Facility has sufficient employees on duty and on-site 24 hours per day to meet the safety needs of all residents.**
- 21.2 The Operator will ensure that a monitoring procedure for residents, who have requested to be or are required to be monitored on a scheduled basis, is developed and maintained.**
- 21.3 The Operator will ensure that all residents are accounted for on a daily basis.**
- 21.4 The Operator will ensure that all incidents that breach resident safety occurring within the Facility and surrounding grounds, as well as the actions taken to address the incidents, are tracked.**

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator ensure that sufficient employees are on duty to meet the safety and security needs of all residents?	Y	The operator must ensure that there is at least one employee on at night, and this number may vary depending on the size of the facility.
	N	
2. Is there an appropriate monitoring procedure for residents who have requested to be, or are required to be, monitored on a scheduled basis?	Y	Check policy and procedure.
	N	
3. Is there a process that accounts for residents on a daily basis?	Y	Check schedules and job duties of designated positions to ensure that accounting of residents is included.
	N	
4. Is there a reporting system that tracks safety and security incidents that occur within the facility and surrounding grounds and what remedial action has been taken?	Y	Verify through safety incident reports.
	N	

Standard 22 Water Temperature Safety

Water temperatures for personal use in areas used by the residents are maintained at levels that support resident safety and safe bathing procedures.

22.1 The Operator will ensure that safe water temperatures for personal use by the residents are maintained through employee and resident education, equipment maintenance, preventative maintenance monitoring and appropriate risk mitigation procedures. All maintenance/service personnel involved with the water system are required to be properly qualified or certified to ensure a complete understanding of the function and proper operation of temperature gauges, water mixing valves and therapeutic tub controls.

22.2 The Operator will ensure that a designated, responsible and qualified employee tests the water temperature flowing into each therapeutic tub each day prior to the first bath of the day and documents the temperature in a logbook or log sheet kept in the tub room.

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator have policy and procedure that ensure safe water temperatures for residents are maintained?	Y	Check policy and/or procedures as to training.
	N	
2. Are employees or service providers trained in safe practices involving hot water?	Y	Verify orientation and training documentation. Do safe bathing practice procedures include manual testing of the water temperature prior to resident bathing?
	N	
3. Are maintenance/service personnel involved with the water system properly qualified or certified in the complete understanding of the function and proper operation of temperature gauges, water mixing valves and therapeutic tub controls?	Y	Check maintenance/service personnel's qualifications and/or certification.
	N	
4. <i>Is equipment monitored as to temperature and operating condition?</i>	A.B.C. S. 7.2.3.1 & 7.2.3.6. Domestic Hot Water: No less than 45°C (115°F) and a maximum of 60 degrees C at tank source. Maximum 54° C (129°F) at faucet source. Check for temperature control devices. Is there installation of a master thermostatic mixing device at the water line near the water heater or a thermostatic mixing device installed at each point of use?	
	Y	
	N	
5. <i>Is the water temperature of the therapeutic tub tested and recorded prior to the first bath of the day by a designated, responsible and qualified employee?</i>	Check procedures for temperature monitoring and designation of who is to check temperatures. Check logbook for recorded daily temperatures of the therapeutic tub. Temperatures should be in the range from 45 to 54 degrees C. Log should have signature of designated employee.	
	Y	
	N	

PERSONAL SERVICES

Personal Services relate to the provision of a range of optional services that may be or are acquired at residents own expense. These may include assistance with personal laundry; personal choice services (e.g. hairdressing, barber); non-emergency travel; social and leisure opportunities; and medication assistance, where applicable.

Residents benefit from the opportunity to have a choice of optional services that promotes their independence. They also benefit from the opportunity to form meaningful relationships with other residents, employees and visitors and to choose whether to participate in the various activities they enjoy.

Standard 23 Personal Laundry

Source Legislation, Codes and Standards: *Public Health Act (P.H.A.)* Personal Services Regulation and Health and Standards Guidelines for Barbering and Hairstyling, Hairstylists Trade Regulation

Within the design limitation of the Facility, equipment is provided to allow residents, their families or service providers to do the residents' personal laundry and/or the Facility offers a personal laundry service.

- 23.1 Where equipment (e.g., washer, dryer, iron and ironing board) and appropriate space is provided for use by residents, their families or service providers to do the residents' personal laundry, the Operator will ensure that the equipment and space is clean and in good repair.**
- 23.2 Additionally or as an alternative, the Operator will provide a mechanism for residents to pay for personal laundry to be done by the Facility.**

INDICATOR	COMMENTS AND OBSERVATIONS	
Does the operator provide a personal laundry service paid for by the resident?	Y	
	N	
1. <i>If personal laundry service is offered, is there a procedure to identify (label) and account for residents' personal laundry?</i>	<i>Check laundry identification procedures.</i>	
2. <i>Does the operator provide equipment (e.g. washer, dryer, iron and ironing boards) in an appropriate space?</i>	Y	<i>Check that laundry area is easily accessible, provides a safe and clean environment for the residents, families and/or service providers to carry out laundry functions.</i>
	N	
3. <i>Is the equipment in good repair and located in a clean and safe area?</i>	Y	<i>Check for equipment that is safe and in good repair.</i>
	N	

Standard 24 Personal Choice Services

A variety of personal choice services (e.g. hairdresser, barber, tuck shop) may be offered based on the needs and preferences of the residents.

- 24.1** If space is provided for personal choice services, the Operator will ensure that it is appropriate for the intended purpose.
- 24.2** The Operator will ensure that services provided, either directly by the Facility or contracted by the Facility, will comply with all applicable licensing and standards.

INDICATOR	COMMENTS AND OBSERVATIONS		
1. Does the operator ensure that direct facility or contractual providers comply with all applicable licensing and standards?	Y	P.H.A. Personal Services Regulation and Health and Standards Guidelines for Barbering and Hairstyling, Hairstylists Trade Regulation Check documentation, trade license and/or municipal business license if applicable.	
	N		
	N/A		
Personal Choice Service Area			
2. Is the space clean and suitable for the intended purpose, and are furnishings and equipment maintained in good repair?		Check area for cleanliness, safe furnishings and equipment. (i.e. equipment and furnishings are in good repair; space is large enough to adequately provide safe movement of residents and located in an easily accessible area.)	Y
			N
3. Are personal service workers exhibiting good personal hygiene and wearing clean clothing?		Check overall personal service workers appearance. If the person is not available, establish with the Operator if they find their appearance acceptable.	Y
			N

Standard 25 Non-Emergency Transportation

If transportation is offered to residents for social, leisure and spiritual activities in the community or to medical appointments, it must conform to all traffic safety regulations.

- 25.1** The Operator will ensure that vehicles used to transport residents have valid registration and insurance, and are operated by licensed, qualified drivers.

INDICATOR	COMMENTS AND OBSERVATIONS	
Does the operator have resident transportation equipment?	Y	
	N	
1. If yes, does the vehicle have a valid registration?	Y	Traffic Safety Act Verify documentation.
	N	
2. Is the vehicle operated by a qualified, licensed driver?	Y	Traffic Safety Act Verify in office interview for supporting documentation.
	N	

Standard 26 Social, Leisure and Spiritual Opportunities

Residents are provided with options for a variety of social and leisure activities that promote well being and enjoyment, as well as respond to the resident's physical, emotional, intellectual, spiritual, cultural and sensory needs and encourage as much autonomy as possible.

- 26.1 The Operator will ensure that residents have the opportunity to provide input regarding social and leisure opportunities.
- 26.2 The Operator will ensure that residents are supported and assisted in maintaining their spiritual beliefs, religious observances, practices and affiliations.
- 26.3 The Operator will ensure that a monthly calendar of events is made available to each resident.
- 26.4 The Operator will ensure that qualified personnel may be retained to plan, develop, coordinate and deliver recreational and social activities for the residents.

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator provide opportunity for resident input regarding social, leisure and recreational opportunities?	Y	Verify at resident interviews.
	N	
2. Does the operator support and assist residents to maintain their spiritual beliefs, religious observances, practices and affiliations?	Y	Verify at resident interviews.
	N	
3. Does the operator employ qualified personnel to plan, develop, coordinate and deliver recreational and social activities for the residents?	Y	Verify documentation, if applicable.
	N	
4. Is a monthly calendar of events made available to each resident?	<i>Look for a posted calendar on bulletin board.</i>	
	Y	N

Standard 27 Medication Reminders and/or Medication Assistance

If medication reminders and/or medication assistance are provided, the Facility shall follow an acceptable medication reminder and/or medication assistance program.

- 27.1 The Operator will ensure that written policies and procedures are developed and maintained that**
- describe the scope and level of medication reminders and assistance services offered to residents;
 - support/promote the self-administration and secure storage of medications by residents;
 - detail the requirements for certification and/or in-service training for employees involved in delivering medication reminders and assistance services; and
 - address how medication reminder and assistance errors are handled (e.g., recording, monitoring, and follow up).

INDICATOR	COMMENTS AND OBSERVATIONS		
Does the operator provide a medication assistance program?	Y	If yes, continue.	
	N/A		
1. Is the medication assistance program under the direction of the R.H.A. or a pharmacist?	Y	An acceptable medication assistance program must receive direction from a pharmacist or R.H.A	
	N		
2. Does the operator have written policy and procedures that describe the scope and level of medication services offered to residents?	Y	Check policy and procedures.	
	N		
3. Are staff trained and qualified to offer medication assistance?	Y	Verify training of medication assistance staff.	
	N		
4. Are medications stored in a locked location?	<i>Check area where medication is located. Verify if medication is kept locked.</i>		Y
5. Are all medications labeled with resident's name?	<i>Check medication dispenser for resident's name.</i>		N
			Y
6. Are procedures and records maintained for delivery of medication and incidents signed by designated employee?	<i>Check procedures and records that documentation is completed and signed by the designated employee.</i>		Y
			N

COORDINATION AND REFERRAL SERVICES

Coordination and Referral Services are a means to link residents or their families with appropriate external services in a timely manner.

Individuals have varying needs, not all of which can be met by the Facility. Assistance with information, coordination and referral ranges from helping residents to fill out forms, to establishing links with a variety of external services, (e.g. contacting health professionals, and assisting with pension information, tenant's insurance and other forms); and to providing residents or their families with improved links to community services in order to promote greater well being, choice, and a high quality of life.

Standard 28 Assistance with Information, Coordination and Referral

Residents and/or their families are assisted with general information and contacts for relevant programs and services available in the community.

28.1 The Operator will ensure that current general information on relevant municipal, provincial and federal programs is made available to residents and family members.

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator maintain or have access to current information on relevant municipal, provincial and federal programs?	Y	Verify in office interview
	N	
2. <i>Is resource information made available to resident and family?</i>	<i>View resident handbook, resource or information area.</i>	
		Y
		N

RESIDENTIAL SERVICES

Residential Services relate to housing access, costs, tenure and amenities. Residential Services apply to both the resident's private living space and common areas.

A supportive living facility is ultimately the resident's home. As such, Residential Services should be designed to provide residents with a home-like environment appropriate to their individual needs and capacities. Residents should feel relaxed, valued and safe in their homes affirmed with the knowledge that their rights are being respected.

Standard 29 Residential Application, Orientation, Exit Process and Residential Services Contract Management

Policies and procedures on access, services, charges and tenure are developed and maintained including residential service agreements that are applicable to the type of tenure and government funding (if applicable).

- 29.1 The Operator will ensure that a Facility that does not receive government operating funds provides appropriate forms and information to potential residents or their families. Information must include**
- **eligibility requirements (e.g. physical and cognitive abilities);**
 - **the application;**
 - **move-in and orientation;**
 - **monthly basic accommodation charges, including a list of services and their monthly charge;**
 - **a list of optional personal services and charges;**
 - **notice period for increasing personal services charges included in the monthly charge;**
 - **exit criteria leading to termination of tenancy or residency; and**
 - **the building and services capacity to ensure the supportive living facility is appropriate to their needs.**
- 29.2 The Operator will ensure that a Facility that receives government operating funds complies with the requirements in section 29.1. In addition, the Facility may be required to provide information on eligibility requirements (e.g. income, housing need, physical and cognitive abilities, etc.) specific to the publicly-funded program.**
- 29.3 The Operator will ensure that a residential services agreement (which can stand alone or be part of another document) is signed by the resident or the resident's legal representative and an authorized representative of the Facility. The agreement will clearly state the residential services provided, the rates charged for those services, notice periods for rate increases and terminations of services or tenancy.**
- 29.4 The Operator will ensure that clearly documented processes are in place for residents and family members to provide feedback and identify issues related to the provision of residential services.**

Standard 29 Residential Application, Orientation, Exit Process and Residential Services Contract Management (cont.)

Source Legislation, Codes and Standards: Alberta Housing Act (A.H.A.) Social Housing Accommodation Regulation (S.H. A. R.)

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Do operators, under A.H.A., R.T.A, or other legislation, provide appropriate forms and information to potential residents and their families?	Y	Check documentation. (Application forms, interview questions, pamphlets, handbook, etc.)
	N	
Does the information include:		
2. Eligibility requirements?	Y	Check eligibility requirements (e.g. physical and cognitive abilities, etc.).
	N	
3. Application process?	Y	Check application forms and process.
	N	
4. Move-in and orientation?	Y	Check move-in and orientation forms.
	N	
5. Basic monthly accommodation charges with included services?	Y	Check fee schedules.
	N	
6. A list of charges for optional personnel services not included in basic monthly charge?	Y	Check fee schedules.
	N	
7. Notice period for increasing rates for basic monthly accommodation and optional personnel service charges?	Y	Check documentation for notice periods.
	N	
8. Is there a Tenancy or Residential Agreement signed by the resident or the resident's legal representative and an authorized representative of the facility?	Y	Check a copy of the agreement.
	N	
Does the agreement include:		
9. Residential services provided?	Y	
	N	
10. Rates charged for those services?	Y	
	N	
11. Notice period for increasing rates for services?	Y	Check documentation for notice periods.
	N	
12. Reasons and processes for termination of services or tenancy?	Y	Check documentation for termination procedures.
	N	

Standard 29 Residential Application, Orientation, Exit Process and Residential Services Contract Management (cont.)

INDICATOR	COMMENTS AND OBSERVATIONS	
If the facility is under A.H.A.:		
13. Is there an approved Priority Rating/Point Scoring form?	Y	A.H.A. S.H.A.R.
	N	
	N/A	
14. Do applicants meet the criteria for eligibility according to legislation?	Y	A.H.A. S.H.A.R. S. 10(1)a-c
	N	
15. Where there is a couple, is one of them 65 years of age?	Y	
	N	
16. Are monthly basic rates determined operator and set at least annually?	Y	A.H.A. S.H.A.R. S. 11
	N	
17. What process does the operator use to ensure seniors are left with a disposable income of at least \$265 per month?	Y	A.H.A. S.H.A.R. Schedule D (4) Check to see that if in the documentation, a calculation or reference to the \$265 has been included.
	N	
18. In the provision of accommodation services, does the operator have a policy or procedure for residents and families to provide feedback and identify issues related to the provision of accommodation services?	Y	Check policy and procedure.
	N	

Standard 30 Resident Assessments

Residents' physical, emotional and cognitive abilities should be compatible with the Facility's design and features, and available services such that their health and safety is not at risk and their behaviors will not put other residents at risk.

30.1 The Operator will require a comprehensive written assessment of the potential resident's physical, emotional and cognitive condition to be conducted by appropriate health care professionals prior to approving the application for tenancy. A reassessment should be conducted if the resident's physical, emotional and cognitive condition changes.

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator require a comprehensive assessment conducted by an appropriate health care professional of potential residents prior to approving the application for tenancy?	Y	Check forms or documentation that provides an assessment of potential residents.
	N	

Standard 30 Resident Assessments (cont.)

INDICATOR	COMMENTS AND OBSERVATIONS	
2. Does the operator make any adjustments to design, features or service provision to provide for identified health and safety risks?	Y	Check as to adjustments, modifications or service provisions instituted so as to not put residents at risk.
	N	
3. Is a reassessment conducted if the resident's health status changes?	Y	Check to see if reassessments are conducted when resident's health changes?
	N	

Standard 31 Managed-Risk Agreements

A Managed Risk agreement may be prepared in collaboration with the resident and responsible family members based on the resident's physical, emotional and cognitive condition as identified in the residents assessment. The agreement must be reviewed and, if required, amended following a reassessment of the resident's physical, emotional or cognitive condition.

- 31.1 The Operator will ensure that residents of the facility and their families are advised of the limits of the services offered in the Facility and acknowledge the risks of living in the Facility based on the residents' identified needs and capabilities. The Operator may prepare a Managed-Risk Agreement that documents the understanding and acknowledgement of the identified risks by the residents and/or responsible family members.**
- 31.2 The Operator will ensure that residents' needs and capabilities are determined in consultation with appropriate health care professionals.**

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator have a Managed-Risk Agreement?	Y	In cases for exceptions to the norm, is there a process to identify resident risks and the steps the organization takes to address those risks?
	N	
2. Does the Managed-Risk Agreement contain resident and family awareness of the limits of services offered and acknowledgement of the risks of living in the facility based on the residents' identified needs and capabilities?	Y	Check a managed-risk agreement document to verify if resident and family acknowledge agreement.
	N	
3. Is there a review of the agreement, following a reassessment, based on the resident's identified needs, capabilities and actions?	Y	Check policy and procedure.
	N	

HUMAN RESOURCES

Human Resources relate exclusively to employees and volunteers and how they conduct themselves

Human Resources standards ensure both the professionalism and accountability of any conduct or interaction with and/or relating to employees and volunteers.

A Facility's human resources are one of its greatest assets. Employees (whether front-line or support employees) who are skilled, qualified and fulfilled in their jobs are more likely to deliver services with professionalism relating to residents, other employees and volunteers.

Standard 32 Employment and Workplace Health and Safety Standards

Employment and workplace, health and safety standards are developed and maintained.

- 32.1 The Operator will ensure that employees are aware of employment standards and have access to employee manuals or human resource policy and procedure manuals.**
- 32.2 The Operator will ensure that employees have written job descriptions detailing job qualifications, responsibilities and scope of function for their position.**
- 32.3 The Operator will ensure that a work place health and safety policy is in place that adheres to work place practices that promote the health and safety of employees and contractors including recording, investigating and reporting incidents, and following rules for controlled products.**
- 32.4 The Operator will ensure that during times when there is no health care professional on site, an Employee trained in Emergency First Aid is available on site.**
- 32.5 The Operator will ensure that appropriate employee First Aid Kits are maintained.**
- 32.6 The Operator will ensure that all employee injuries and illnesses are reported to the appropriate authorities.**

Source Legislation, Codes and Standards: *Occupational Health and Safety (O.H.S.)*;

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Do employees have current written job descriptions detailing job qualifications and responsibilities for their position?	Y	Check job descriptions and job qualifications and responsibilities.
	N	
2. Do employees have written job duties as to the scope of their position?	Y	Are there job duties for each position?
	N	

Standard 32 Employment and Workplace Health and Safety Standards (cont.)			
INDICATOR	COMMENTS AND OBSERVATIONS		
3. Does the operator have a workplace health and safety policy?	Y	Check policy.	
	N		
4. Does the operator have a recording system for employees to report any injury, serious illness or incidents with investigation and follow-up?	Y	O.H.S. S. 183 (1) Check reporting system.	
	N		
5. Is an employee trained in First Aid on duty at all times at the appropriate level?	Y	O.H.S. S. 181 Check training records to verify that all employees have First Aid.	
	N		
6. Is there an appropriate number of First Aid Kits for the number of employees?	Y	O.H.S.s.178(1); Schedule 2, Table 3	
	N		
7. Is there policy and procedures for confined spaces?	Y	O.H.S. Pt. 5 S.44 (Written Code of Practice) Check policy for procedures, review process and identification of all existing and potential confined space work locations at the work site.	
	N		
	N/A		
8. Are employees trained in WHMIS for chemical handling?	Y	Check training records.	
	N		
9. Does the operator have a developed policy and procedure respecting potential work-place violence?	Y	O.H.S. Pt. 27 S.389 Check policy and procedures that include instruction for and the response to incidents.	
	N		
10. Does the operator have procedures in place to protect any employees that work alone?	Y	O.H.S. Pt. 28 Check procedures for employees that work alone as to communication and access to assistance in an emergency.	
	N		
	N/A		
11. Does the operator ensure employees have access to Employment Standards?	Check staff room or other area for employment standards documentation.		
	Y	N	
12. Do employees have access to a current Employee Manual or Human Resource Policy and Procedure Manual?	Check for an employee manual or policy, procedure manual or employee handbook.		
	Y	N	
13. Confined Spaces – is the procedure carried out?	O.H.S Pt. 5 S.44 (Written code of practice) Check for posted instructions, Personal Protective Equipment or other steps as defined in procedure.		
			Y
			N/A
14. Do employees know the location of the First-Aid kits?	O.H.S. S. 179(b)iii & (c) Employee interview establishes employees know location.		
			Y
15. Is there an adequate amount of contents in the First Aid Kit as indicated in the OHS schedule and table?	Check First Aid Kit to establish if an adequate number of required items are contained in the kit as per legislation.		
			Y
		N	

Standard 32 Employment and Workplace Health and Safety Standards (cont.)

INDICATOR	COMMENTS AND OBSERVATIONS	
16. Is there current labeling on cleaning products and are Material Safety Data Sheets readily available?	O.H.S. Pt. 29 398(1), 405(1) and 407 Check WHMIS labels and Material Safety Data Sheets (MSDS).	Y
	It is advisable to have MSDS sheets where products are stored and being used. Hair dresser should have a MSDS for any chemicals stored in the hair dressing room.	N
17. Are cleaning chemicals and cleaning equipment, stored or placed in a locked area, when not in use?	Check to see if chemical rooms are locked and cleaning equipment is in a locked area when not in use. Carts may have locked areas for chemicals and do not have to be placed in a locked area.	Y
		N

Standard 33 Involvement in Residents' Personal Affairs

Policies and procedures regarding employee and volunteer involvement in residents' personal affairs which will address:

- accepting gifts from residents
- involvement in financial affairs, including Power of Attorney, Wills and Estates; and
- involvement in non-financial affairs, including personal directives and guardianship.

33.1 The Operator will ensure that residents and responsible family members are notified of the Facility's policies.

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator develop and maintain policy and procedure regarding employee and volunteer involvement in residents' personal affairs?	Y	Check policy.
	N	
2. Does the operator communicate this policy and procedure to residents and their families?	Y	Check how facility communicates or notifies the residents and their families.
	N	

Standard 34 Screening Employees, Volunteers and Service Providers

Criminal record checks on all new employees, volunteers and service providers are used in hiring/contracting decisions in order to promote a safe living environment for residents.

34.1 The Operator will ensure that all new employees and all new volunteers whose duties involve providing direct services to residents are required to provide a criminal record check before they are hired or begin their duties.

Source Legislation, Codes and Standards: *Protection for Persons in Care Act (P.P.C.A.)*

1. Does the operator require every new employee, volunteer and service provider, whose duties involve direct services to residents, to provide a criminal record check?	Y	<i>P.P.C.A. S. 3.</i> Verify through policy or employee application forms.
	N	
2. Does the operator consider the results before a selection or hiring decision?	Y	Verify through policy.
	N	

MANAGEMENT and ADMINISTRATION

Management and Administration relates to the leadership, financial and material resources of a facility.

Management and Administration standards promote effective leadership, professionalism and accountability of business practices in order to protect, direct, and conduct the interests and transactions of the facility as a business entity.

Effective management and administration promotes more professional and efficient delivery of services, which leads to more satisfied residents and a more productive bottom line for the operator.

Standard 35 Corporate Status

The organization is an incorporated body in good standing to do business in Alberta and the respective municipality.

35.1 The Operator will be a properly incorporated organization under the law to carry out legitimate business in the Province of Alberta and will have all relevant licenses and permits, as may be required by the local municipality.

Source Legislation, Codes and Standards: *Alberta Housing Act (A.H.A.)* Management Body Operation and Administration Regulation (M.B.O. & A. R.); *Business Corporation Act (B.C.A.)*; *Societies Act (S.A.)*; *Companies Act (C.A.)*

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Is the organization incorporated under Alberta law?	Y	<i>A.H.A. M.B.O. & A. R.; B.C.A.; S.A.; C.A.</i>
	N	

Standard 36 Insurance

The facility has adequate and up-to-date insurance coverage related to accommodation services that reflects the services provided by the employee and/or contracted service providers and the property owned and/or operated.

36.1 The Operator will ensure that the Facility is properly insured with adequate coverage that includes all risk/peril, property and liability insurance; boiler insurance; machinery and equipment insurance as well as crime and fidelity bonding.

Source Legislation, Codes and Standards: *Alberta Housing Act (A.H.A.)* Management Body Operation and Administration Regulation (M.B.O. & A. R.)

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the organization have insurance coverage that includes:	<i>A.H.A. M.B.O. & A. R. S. 34(1-8)</i> Verify by checking insurance documents.	
Property?	Y	
	N	

Standard 36 Insurance (cont.)

INDICATOR	COMMENTS AND OBSERVATIONS	
All-Risk/Peril?	Y	
	N	
Building?	Y	Only if the management body has title for the building.
	N	
Contents?	Y	A.H.A. M.B.O. & A.R. S. 34(5)
	N	
Mobile Equipment?	Y	Tractors, lawn mowers, trailers, snow blowers, etc.
	N	
Comprehensive General Liability?	Y	A.H.A. M.B.O. & A.R. S. 34(1) \$1M per occurrence; \$2M against bodily injury and property damage
	N	
Directors, Officers & Administrative Errors or Omissions?	Y	
	N	
Tenant Legal Liability?	Y	This may or may not be included in the General Comprehensive liability policy.
	N	
Medical Malpractice?	Y	If a Registered Nurse is hired or any professional (such as L.P.N.) as designated by the <i>Health Professional Act</i> , additional liability insurance is required over the basic liability limit covered under General Comprehensive Liability.
	N	
Bond & Crime?	Y	A.H.A. M.B.O. & A.R. S.34 (7)
	N	
Boiler and Machinery & Equipment?	Y	Includes Mechanical and Electrical equipment. This is required if the facility has title to the property.
	N	
Automobile?	Y	A.H.A. M.B.O. & A.R. S. 34(6)
	N	
Resident transportation (i.e. Handivan) liability?	Y	If the facility has resident transportation, an extension of liability insurance may be required.
	N	

Standard 37 Information Management

Policies and procedures that ensure the protection of personal information are developed and maintained.

37.1 The Operator will ensure that the privacy and personal information of residents is protected.

Source Legislation, Codes and Standards: *Freedom of Information and Protection of Privacy (F.O.I.P.P.)*

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the policy and procedure include the purpose, manner and use of personal information?	Y	<i>F.O.I.P.P. (a-c)</i> Check policy and procedures.
	N	
2. Does policy include disclosure of personal information?	Y	Check policy and any documentation that may include this disclosure (e.g. application form).
	N	

Standard 38 Contract Administration Policies and Procedures

Policies and procedures in regards to contracted services are developed and maintained, Contract services are supported by the appropriate contract documentation that outlines the services to be provided.

38.1 The Operator will ensure that any contractor that provides services is qualified, properly trained, licensed (where applicable) and carries appropriate liability insurance.

Source Legislation, Codes and Standards: *Occupational Health and Safety Act (O.H.S.)*

INDICATOR	COMMENTS AND OBSERVATIONS	
1. Does the operator ensure that contracted service providers are qualified and properly trained with appropriate trades license(s), liability insurance and WCB where applicable?	Y	Check contract agreements or prescreened agreements. Check contracts for required licensing, liability insurance and WCB.
	N	
2. Do the contracted service providers adhere to Alberta legislation and municipal bylaws?	Y	Is the contractor required to obtain a municipal license?
	N	Is the contractor aware of their responsibilities as per the O.H.S. ?

Schedule A

Major Occupancy as per Alberta Building Code Portion of Table 3.1.2.1.

Group	Division	Description of Major Occupancies
B	2	Care of detention occupancies which persons having cognitive or physical limitations require special care or treatment
C		Residential Occupancies

Schedule B

FIRE SAFETY PLANS AND INSPECTIONS FOR FACILITIES

In the Province of Alberta, all facilities must comply with the regulations of the *Alberta Fire Safety Code* based on the Major Occupancy classification of the facility. The Supportive Living Accommodation Standards review team will review the Facility's approved fire safety plan as developed with the cooperation of the fire department and other regulatory authorities. If the plan has not been developed with input from those departments, it is recommended that inspections be completed by an authority having jurisdiction or in the absence of a Safety Inspection Officer, a member of the local fire department, in cooperation with the Facility prior to the Supportive Living Accommodation Standards Review team site visit. Attached is a Fire Safety checklist guideline that can be completed, to ensure the review team that the Facility has complied with the *Alberta Fire Code* and relevant regulations.

“Authority having jurisdiction” refers to a safety codes officer as the appointed individual responsible for decision making in a number of areas. In most cases, this individual will be a member of an accredited municipal fire department. In municipalities that use accredited agencies for their inspection and enforcement, the fire department may not be involved. It is important that both accredited and non-accredited municipalities employing accredited agencies properly designate the person(s) acting as the authority having jurisdiction. In addition, municipalities using accredited agencies should ensure that the agency has a close working relationship with the fire department during the decision making process.

Fire Safety Plan Checklist Guideline

A.F.C. S. 2.8.2.1. States “A Fire Safety Plan” shall be prepared in cooperation with the fire department and other regulatory authorities and shall include the following:

1. Sounding of alarm	Y	
	N	
2. Notifying Fire Department	Y	As per A.F.C. , B 2 facilities are required to have a fire alarm system that connects to fire alarm notification and transmits a signal to fire department.
	N	
3. Instructing the residents on fire procedures and evacuation	Y	
	N	
3. Special provision for persons requiring assistance	Y	Check plan for the procedure of providing assistance to residents.
	N	
5. Posting of Fire Emergency Procedures in common areas and available in resident rooms	Y	
	N	
6. Confining, controlling and extinguishing the fire	Y	
	N	
7. Appointment and organization of designated supervisory staff to carry out fire safety	Y	
	N	
8. Training of supervisory staff and residents for fire safety	Y	
	N	
9. Documents, including diagrams, showing type, location and operation of building fire emergency systems	Y	
	N	
10. Holding of fire drills <ul style="list-style-type: none"> o Major Occupancy – <u>Group B</u> (Not greater than 1 month) o <u>Group C</u>, at least once yearly for supervisory staff 	Y	Check fire drill records for frequency, as described for major occupancy; date; evacuation time; comments and recommendations.
	N	
11. Review of fire safety procedures	Y	
	N	

Fire Safety Inspection and Maintenance Checklist Guideline (cont.)

12. Testing and recording of doors and means of egress	Y	All doors (including sliding doors) forming a part of egress shall be tested at intervals not greater than one month to ensure they are operable.
	N	
13. Fire detection system	Y	Fire alarm system and detection equipment must be tested daily and maintained annually by qualified personnel. Records shall be kept of all tests. Tested daily means checking power indicator light and for any trouble signals.
	N	
14. Fire extinguishers	Y	Fire extinguishers are to be inspected monthly and the tag signed by the owner and annually by a certified agency with a qualified person performing the maintenance.
	N	
15. Annual maintenance, servicing and recharging performed by a certified agency with a qualified person performing the maintenance	Y	
	N	
16. Inspection tags shall be dated and initialed by the person performing the owners monthly inspection	Y	There must be a record of the past 12 months manual inspections.
	N	
17. Location indicated if visual obstruction cannot be avoided	Y	Signage not required if not visible but is at the discretion of the local authority.
	N	
18. Are electromagnetic locks installed? If installed, are they inspected at least once every 12 months?	Y	
	N	
19. Kitchen fire suppression systems	Y	Must be inspected every 6 months by a qualified person.
	N	
20. Kitchen hood and exhaust system	Y	Must be cleaned at frequent intervals or according to conditions created by cooking use. (More often if deep frying).
	N	
21. Sprinkler system	Y	Must be inspected annually by personnel with a Sprinkler Systems Installer trades certificate or plumber with specialized training. NB – This is for a system with 9 or more heads.
	N	
22. Fire standpipe and hose systems	Y	Inspection on hose shall be service tested in intervals not exceeding 5 years from purchase or last repair, every 3 years thereafter. There is a Standata allowing the removal of hose IF it is a sprinklered building. Hose cabinets shall be inspected monthly to ensure the hose is in proper position and all equipment is in place and operable condition. If a tamper proof device is installed on the cabinet, inspections on hose stations and cabinets must be annual. Standpipes flow tested at intervals not greater than 5 years.
	N	

Fire Safety Inspection and Maintenance Checklist Guideline (cont.)

23. Flame resistant drapes, curtains and decorative materials	Y	AFC – S. 2.3.2.1.1(a-c) All drapes, curtains and decorative materials in rooms, common areas and lobbies must be flame resistant or be of a fire proof material.
	N	
24. Mattresses, bed linen, cubicle curtains and window drapes must be flame resistant	Y	AFC –S.2.3.2.3 – 1 <u>Group B, Division 2</u> – Shall conform to “Hospital Textiles – Flammability Performance Requirements” for the described items.
	N	
25. Fire Marshall	Y	A.F.C. S. 2.16.1.1(1-3) <u>Group B, Division 2</u> occupancy shall appoint a fire marshal.
	N	
26. Inspect and provide written report of fire hazards and other conditions relative to fire safety	Y	The Fire Marshall is to inspect all Group B, Division 2 buildings for fire hazards and provide a written report indicating condition of the exits, fire extinguishers and fire alarm equipment and any other conditions relative to fire safety in the building or related buildings.
	N	
27. Copy of report sent to authority having jurisdiction	Y	
	N	
28. Posting of notification of fire department and telephone number where alarm does not transmit to fire department	Y	
	N	

Fire Safety Plans for High Buildings

29. Is the plan reflective of "High Buildings" as applicable to <i>Alberta Fire Code</i> regulations?	Y	Alberta Fire Code S. 2.8.2.4. This section is for any facility that is over 6 stories high. Documentation should include: training of supervisory staff in voice communication system; procedure for use of elevators; actions to be taken by supervisory staff prior to fire department arriving; fire department procedures for access; and fire location within building.
	N	
30. Inspection, testing and maintenance of fire emergency systems, elevators and smoke control measures in conformance with Part 7 of the <i>Alberta Fire Code</i>	Y	Fire fighting procedures shall be prepared by the fire department in cooperation with the person in charge of the building.
	N	
31. Storage and handling of combustible materials	Y	Organization is to ensure combustible materials do not accumulate in any part of a means of egress, elevator shaft or ventilation shaft.
	N	
32. Fire department access and key boxes	Y	Emergency vehicle access routes and key boxes are accessible to emergency personnel at all times.
	N	
33. Dangerous Goods	Y	Storage of dangerous goods conforms to <i>Part 3 of Alberta Fire Code</i> (e.g. paint, oxygen, compressed gases).
	N	
33. Retention of Fire Safety Plans in the building	Y	
	N	
34. Copies of fire emergency procedures to supervisory staff	Y	
	N	
36. Posting of Fire Emergency Procedures on each floor area	Y	
	N	

Schedule C

PREVENTATIVE MAINTENANCE PROGRAM

CHECKLIST FOR ROUTINE AND PREVENTATIVE MAINTENANCE PROCEDURES

Does the maintenance program include the checking and recording of the following, at least to the minimum requirements?

NB. For all annual inspections or required servicing on any particular equipment carried out by qualified personnel; qualified shall be as defined by the manufacturer's recommendations for that specific equipment.

1. Heating equipment, boilers, pumps, filters, air compressors as to:	Check and verify documentation of maintenance records.	
➤ Safety controls (low water cut off, flow switch, etc.)	Y	Minimum – Monthly
	N	
➤ Heating pumps	Y	Minimum – Weekly
	N	
➤ Side stream filters	Y	Minimum – Weekly
	N	
➤ Boiler water	Y	Minimum – Monthly
	N	
➤ Testing of pH	Y	Minimum – Monthly
	N	
➤ Dissolved solids	Y	Minimum – Monthly
	N	
➤ Safety controls (low water cut off, flow switch, etc.)	Y	Minimum – Monthly
	N	
➤ Check oil in air compressor	Y	Minimum – Weekly
	N	
➤ Performance, building temperatures	Y	Minimum – Weekly
	N	
➤ Expansion Tanks	Y	Minimum – Weekly
	N	
➤ Alternate Heating pumps	Y	Minimum – Monthly
	N	
➤ Inspected/serviced by qualified personnel as indicated in applicable regulation	Y	Minimum – Annually
	N	
2. Emergency power systems	Y	A.F.C. S.3.2.7.3 & 3.2.7.4
	N	
	N/A	
➤ Generator is being run on a periodic basis	Y	Minimum – Weekly by in-house employees
	N	
➤ Annual full load test	Y	The Load Capacity should be checked at least annually to automatically assume the electrical load for: 2 h (High Rise Bldg.); 1 h (Hospitals or any B2 Bldg.); 30 min. (Group C) conducted by a licensed and bonded tradesperson.
	N	

Preventative Maintenance and Repair Program (cont.)

INDICATOR	COMMENTS AND OBSERVATIONS	
Emergency power systems (cont.)		
➤ Annual inspection completed by facility	Y	There should be one log located with emergency power system that indicates maintenance and inspections.
	N	
➤ Specialized duties completed by qualified personnel	Y	Minimum – Annually
	N	Look at inspection or work sheets for work completed by qualified personnel.
➤ Liquid fuel should be drained and changed at least annually	Y	Minimum – Annually but based on the operating schedule and the fuel consumption. Look at maintenance log.
	N	
Are systems inspected and tested, and are written records maintained?	Y	Check maintenance records and procedures.
	N	
3. Emergency lighting		
➤ Test monthly	Y	Look at maintenance and testing records.
	N	
➤ Test annually	Y	Annually by certified fire alarm technician.
	N	
4. Air conditioning coils		
➤ Check for damaged coil tubing or fins	Y	Minimum - Annually
	N	
	N/A	
➤ Check coils for scale or airborne contaminate build up	Y	Remove debris from within and around unit. Brush and vacuum coil from the air entering side.
	N	
➤ Check condensate pan for plugged drain and overflow	Y	Make sure P-trap has been installed in the pan and operates properly.
	N	
➤ Air-cooled condensing unit start up inspection	Y	Performed by a certified and bonded trade mechanic in accordance with manufacturer recommendations.
	N	
5. Make up air equipment		
➤ Operating controls	Y	Minimum – Monthly
	N	
➤ Performance	Y	Minimum – Weekly (Does it supply adequate temperatures to all parts of the building?)
	N	
➤ Outside and inside grilles	Y	Minimum – Weekly
	N	
➤ Serviced by qualified personnel	Y	Minimum – Annually
	N	
➤ Filters	Y	Minimum – Weekly. Check for clean filters.
	N	

Preventative Maintenance and Repair Program (cont.)

INDICATOR	COMMENTS AND OBSERVATIONS	
6. Domestic hot water heating equipment	Check documentation of maintenance records	
➤ Temperature settings	Y	Minimum – Weekly (No less than 45°C/115°F). Recommend no more than 54°C/129°F) at faucet source. Tank source should be 45 to 60 degrees Celsius.
	N	
➤ Recirculation pump	Y	Minimum – 18 week intervals
	N	
➤ Drained until accumulated sediments are removed	Y	Minimum – Annually
	N	
➤ Serviced by qualified personnel	Y	Minimum – Annually
	N	
7. Kitchen and laundry equipment:	Y	Check documentation of maintenance data records.
	N	
➤ Range	Y	Minimum – Semi-Annually
	N	
➤ Range exhaust duct	Y	Minimum – Check semi-annually by in-house personnel. Cleaned annually by professionals (trained and knowledgeable personnel). A certificate should be available from cleaning company.
	N	
➤ Dishwasher	Y	Minimum – Semi-Annually
	N	
➤ Cooler	Y	Minimum – Semi-Annually
	N	
➤ Freezer	Y	Minimum – Semi-Annually
	N	
➤ Washer and dryer	Y	Minimum – Semi-Annually
	N	
8. Plumbing and drainage system	Y	Check documentation of maintenance data records.
	N	
➤ Grease trap	Y	Minimum – Monthly
	N	
➤ Kitchen floor drains	Y	Minimum – Monthly
	N	
➤ Roof drains	Y	Minimum – Semi-Annually
	N	
➤ Roof vents	Y	Minimum – Semi-Annually
	N	
➤ Fixtures – toilet/sink/tubs/showers	Y	Minimum – Annually
	N	

Preventative Maintenance and Repair Program (cont.)

INDICATOR	COMMENTS AND OBSERVATIONS	
9. Swimming pool	Y	Public Health Act – Swimming Pool Regulation
	N	Minimum – Semi-Annually (trained personnel).
	N/A	
Is the swimming pool licensed?	Y	S. 2(1) Check license.
	N	
Are there trained personnel responsible for pool operation, water chemistry, pool filtration and maintenance?	Y	S.6 Check training records of personnel.
	N	
➤ Filter and pump servicing	Y	
	N	
➤ Pool heater	Y	
	N	
➤ Drain, wash out and fill	Y	
	N	
➤ Treat water and test	Y	Minimum – If automated chemical monitoring and feeding equipment, manual testing every 24 hours.
	N	
➤ Bacteriological sample	Y	Minimum – Sample to be submitted every 7 days to Provincial Laboratory.
	N	
➤ Handrails secure	Y	
	N	
<i>Is a notice posted, setting out the “Rules and Regulations” to which persons using the swimming pool are subject to?</i>		S. 22 (1) Check to see if these notices are posted conspicuously in the dressing rooms, pool area and the office area.
		Y
	N	
10. Building interior	Check documentation of maintenance data records.	
➤ Crawl space	Y	
	N	
○ Free of water infiltration & accumulation	Y	
	N	
○ Access openings	Y	
	N	
○ Ventilation	Y	
	N	
➤ Attic space	Y	Minimum – Monthly
	N	
➤ Lighting	Y	Minimum – Weekly
	N	
➤ Security (windows and doors)	Y	Minimum – Weekly
	N	
➤ Door alarm security system	Y	Minimum – Quarterly or more often during winter months.
	N	
	N/A	

Preventative Maintenance and Repair Program (cont.)

INDICATOR	COMMENTS AND OBSERVATIONS	
➤ Personal Response System	Y	Minimum – Quarterly. This may be determined by the type of system if it has a built-in alarm system when battery is low or malfunctions occur.
	N	
	N/A	
➤ Common areas	Y	Minimum – Monthly
	N	
➤ Resident rooms	Y	Minimum – Annually
	N	
11. Building Exterior		
➤ Roofing	Y	Minimum – Semi-annually
	N	
➤ Sidewalks, ramps, handrails, etc.	Y	Minimum – Weekly
	N	
➤ Siding, soffit, fascia, etc.	Y	Minimum – Semi-annually
	N	