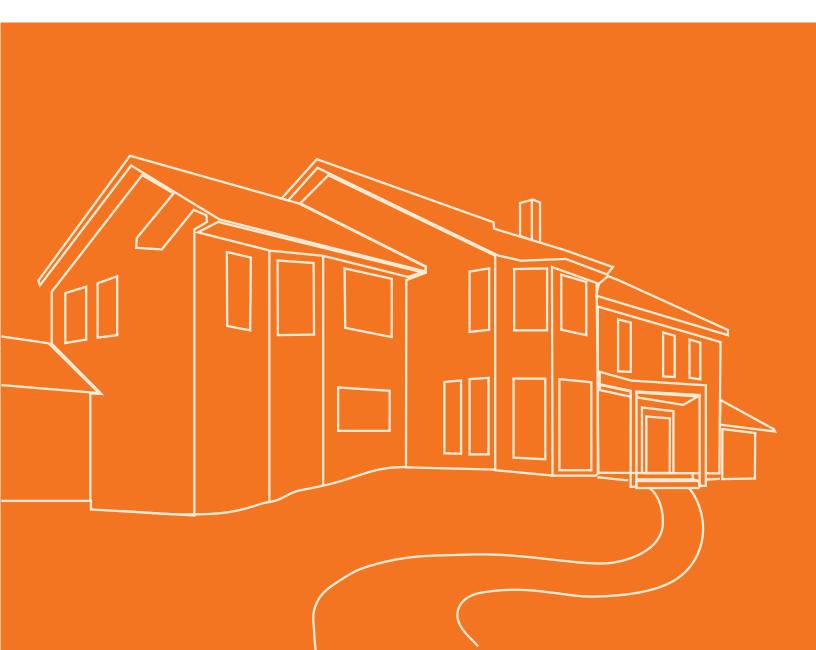
Office of the Assisted Living Registrar

Assisted Living Should I Register My Residence?



A Message from the Assisted Living Registrar

British Columbia is the first province in Canada to regulate assisted living residences.

Residences that meet the definition of an assisted living residence as set out in the *Community Care and Assisted Living Act* must be registered by September 30, 2004. Applications are due at the Registrar's office by September 3, 2004.

The purpose of this guide is to help you assess whether you are operating an assisted living residence. If you meet the definition of assisted living residence in the Act, you must submit your application by September 3, 2004. Should you have to register your residence, an application form is attached. We have also provided you with additional information in the accompanying *Assisted Living, Information for Applicants* booklet.

We want to thank the operators and community, government and health authority representatives who helped us develop this guide.

If you need more information or assistance, refer to the 'Where can I get help?' on page 6 of this guide.

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Assisted Living: The Requirement for Registration

If your residence meets the definition of an assisted living residence, as set out in the *Community Care and Assisted Living Act*, you must register it with the Office of the Assisted Living Registrar by September 30, 2004. Applications must be submitted by September 3, 2004. The requirement to register applies equally to privately and publicly funded residences.

Once registered, you must meet health and safety standards in the delivery of services in your residence and comply with the other requirements of the Act and regulations and Registrar's policies. After September 30, you must not operate an assisted living residence in BC that is not registered.

How will Registration Work?

You must apply to register each residence you operate that meets the definition of assisted living residence in the Act. The Registrar will review your application and, as part of the review, may visit your residence.

If your application is approved, you will receive a registration certificate that you must display in your residence.

The Registrar will provide at least 30 days' notice if the Registrar intends to decline your application. You then have the opportunity to provide additional information to the Registrar in support of your application.

If, upon reconsideration, the Registrar still declines your application, you can appeal the decision to the Community Care and Assisted Living Appeal Board.

Length of Registration

Registrations will expire on March 31 each year and must be renewed annually. There is an annual registration fee based on the number of registered resident units. Half of the annual registration fee will be charged for a partial registration year.

Am I Operating an Assisted Living Residence?

Under the *Community Care and Assisted Living Act*, an assisted living residence is defined as:

a premises or part of a premises in which housing, hospitality, and at least one but not more than two prescribed services are provided by or through the operator to three or more adults who are not related by blood or marriage to the operator.

You must register your residence or the part of your residence where you offer all three components of assisted living: housing, hospitality services and one or two personal assistance services provided at the prescribed services level. To meet the definition of assisted living residence, the three components of service must be provided to three or more adults to whom you are not related by blood or marriage.

The words "by or through the operator" mean that you meet the definition of assisted living residence, regardless of whether you provide the three components of assisted living directly or through contractual arrangements with other service providers.

Facts to Know

Registration does not apply to supportive housing.

Supportive housing operators do not need to register their residences. Supportive housing refers to situations where an operator **offers only two** components: housing and hospitality services.

Some supportive housing operators may also offer personal assistance but only at a support level, not at a prescribed services level. This situation does not meet the definition of assisted living residence. To learn more about the difference between the support and prescribed services levels of personal assistance, see the section "What are prescribed services?" on page 4 of this guide.

Some supportive housing residents may purchase personal assistance independently of the operator or qualify to receive equivalent home support services from their local health authority. Since the operator is not offering personal assistance services to all residents as a part of the occupancy agreement, this situation does not meet the definition of assisted living residence.

In some cases, where a significant number of supportive housing residents quality for home support services, a health authority may decide, for efficiency reasons, to assign a staff person to be onsite some portion of each day to provide home support services to that group of residents. This service delivery model of the health authority does not meet the definition of assisted living because, again, the operator is not offering personal assistance services to all residents as a part of the occupancy agreement.

However, there is a situation that does meet the definition of assisted living. It occurs when a health authority enters into a contractual arrangement with a supportive housing operator and the health authority provides personal assistance to all residents in the residence and manages who is admitted to the residence or leaves as a result of needing another level of care. In this situation, the health authority and/or operator is viewed as operating an assisted living residence and must register it as assisted living.

Registration does not apply to family care home situations.

Operators do **not** need to register their residences if they offer one or two prescribed services to:

- only one or two adults to whom they are not related; or
- ▶ to any number of adults to whom they are related by blood or marriage.

These situations do not require registration because the Act only applies to residences serving three of more adults to whom the operator is not related by blood or marriage.

Registration does not apply if residents are in need of ongoing, "hands on" professional care.

Assisted living provides a non-professional staffing environment. The Assisted Living Registrar has adopted the Ministry of Health Services' *Personal Assistance Guidelines*¹ as a standard for the provision of personal assistance services. Where personal assistance tasks require delegation by professionals, operators need to engage professional staff.

¹ Sets out the personal assistance tasks that have been assigned to home support workers versus professional tasks that may be delegated, by professionals, to home support workers.

Residents of assisted living are expected to receive professional care in the same way they would if they were living independently in the community. Professional services can be obtained by accessing health authority programs (home care nursing, physiotherapy, dietitian) or purchasing these services from a private agency.

When a resident requires 24-hour supervision and continuous professional care, the person must leave assisted living. Most often, the person would move to a licensed community care facility. However, in some cases, the person may move to a family home or other setting.

Recognizing that residents may encounter episodes of decreased physical or mental functioning (while recovering from an injury, an acute illness or complications from a chronic illness), the Registrar has adopted a policy that registered assisted living operators may provide ongoing professional care² to such residents on a short-term basis.

By the same policy, additional short-term professional care may be provided to residents receiving palliative care or who are awaiting transfer to a licensed care facility.

Registration does not apply if residents are unable to make decisions on their own behalf.

Assisted living is intended for people who are able to select and direct the personal assistance services they need. The Act places an obligation on operators not to house people who are unable to make decisions on their own behalf. Exceptions are made for residents living with a

spouse or who are involuntary patients on leave under section 37 of the *Mental Health Act*.

However, some residents who are palliative, convalescent or transitional (awaiting placement in a licensed community care facility) may also be unable to make decisions on their own behalf. The Registrar's policy enables registered assisted living operators to provide professional care to such residents on a short-term basis.

An operator may currently be providing one or two prescribed services to several people in a residence who are unable to make decisions on their own behalf. This situation is acceptable if all these residents are awaiting transfer to a higher level of care or are palliative or recovering from an acute episode of illness or an injury. If this is not the case, and the situation is ongoing, the residence would require licensing because an assisted living operator cannot, on an ongoing basis, house individuals who are unable to make decisions on their own behalf.

² Includes "hands on" or direct services provided by a registered nurse, licensed practical nurse, physiotherapist, occupational therapist or mental health professional.

What are Prescribed Services?

Six personal assistance service areas have been identified, in regulations, as prescribed services:

- ▶ activities of daily living;
- ► central storage of medication, distribution of medication, administering medication or monitoring the taking of medication;
- ▶ maintenance or management of resident cash resources or property;
- ▶ monitoring of food intake or therapeutic diets:
- ▶ structured behavioural program; and
- ▶ intensive physical rehabilitation or psychosocial rehabilitation.

In each personal assistance service area, you can choose to deliver services at either a less intensive support level or a more intensive prescribed services level.

An assisted living residence can provide any number of personal assistance services at the support services level. However, the Act limits assisted living residences to providing one or two personal assistance services at the prescribed services level.

Am I providing prescribed services?

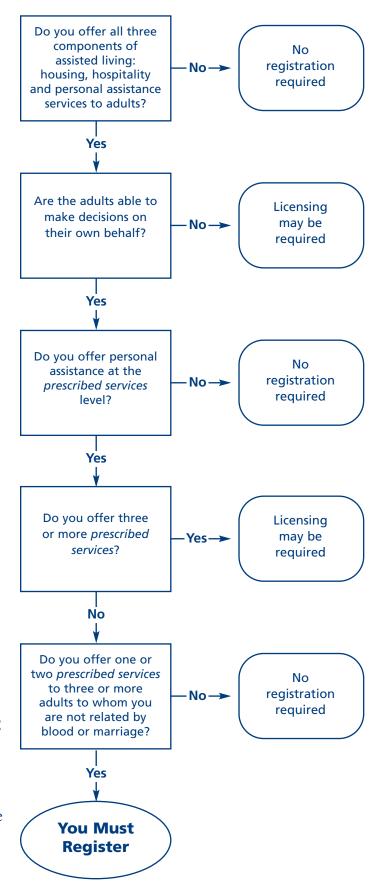
Please refer to the enclosed <u>Personal Assistance</u> <u>Services Self-assessment Worksheet</u>, which describes the services classified as support versus prescribed.

You can use this self-assessment worksheet to record whether your residence is offering personal assistance services at a support services level, the prescribed services level, or not at all.

Your Registration Decision Chart

This decision chart will help you determine if you must register your residence. The <u>Personal Assistance Services Self-assessment Worksheet</u> you complete can assist you in answering these questions.

If you are required to register, the *Application for Registration* form is included with this registration package



What about housing and hospitality services?

Building standards for assisted living are not specifically defined in regulation or policies. As an operator, you must ensure that your building's design and fire safety features address the housing needs of your target resident population.

On the <u>Application for Registration</u> form, you will need to specify the hospitality services you offer. By definition, an assisted living residence provides five hospitality services – meals, housekeeping, laundry, social and recreational opportunities and a 24-hour emergency response system.

While the general intention is that assisted living operators will provide all five hospitality services, at times, this may not be possible or appropriate. In such cases, the Registrar could seek to have the residence designated as an assisted living residence.

For additional discussion of housing matters and hospitality services, please see the accompanying <u>Assisted Living</u>, <u>Information for Applicants</u> booklet.

What about multiple resident populations?

Operators must identify their target resident population on the application for registration form. Many residences will cater to more than one resident group whose service needs can be accommodated within the one or two prescribed services offered by the residence. For example, one residence may offer the activities of daily living and medication prescribed services to seniors and adults with disabilities. Another residence may offer the psychosocial rehabilitation and medication prescribed services to adults with mental disorders and substance use disorders.

Where an operator wishes to cater to two distinct assisted living resident populations that require different prescribed services, the two population groups must be housed in distinct areas of the residence, which are registered seperately. The two applications for registration can be submitted together and only one application fee will apply.

Steps to Registration

- 1. Complete the <u>Personal Assistance Services</u> <u>Self-assessment Worksheet</u>, enclosed with this booklet.
- 2. Attach the <u>Personal Assistance Services</u> <u>Self-assessment Worksheet</u> to your application form.
- 3. Mail the <u>Application for Registration form</u> and <u>Personel Assistance Services Self-assessment</u> <u>Worksheet</u> to the Office of the Assisted Living Registrar, following the instructions on the form.

Where Can I Get Help?

If you have additional questions or would like help with the registration process, please contact any of the following:

- ▶ the Office of the Assisted Living Registrar toll free at 1-866-714-3378
- ▶ your operator association
- ▶ the Assisted Living Centre of Excellence at 1-604-266-2413
- ▶ your local health authority:
 - → home and community care office, or
 - → mental health and addictions office.

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