




1996-97 – Residential Care Facilities Survey

Si vous préférez ce questionnaire en français, veuillez cocher

Confidential when completed

Collected under the authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19

To reduce duplication and to ensure more uniform statistics, Statistics Canada has entered into an agreement under section 12 of the Statistics Act with the Canadian Institute for Health Information (CIHI) for the sharing of information from this survey. Under section 12 of the Statistics Act you may refuse to share your information with the Canadian Institute for Health Information by writing to the Chief Statistician and returning your letter of objection along with the completed questionnaire in the enclosed return envelope. 

REFER TO INSTRUCTIONS AND DEFINITIONS BEFORE COMPLETING REPORT

Verify information on the label above.
Indicate any changes below:

Approved Beds

Highest Level of Care (see Instruction Booklet, page 12)

Principle Characteristic of the Majority of Residents
(Check one only)

Aged

Alcohol/Drug Problems (Alc./Drug)

Physically Challenged &/or Disabled (Phs. Dis.)

Delinquents (Delinq.)

Developmentally Delayed (Dev. Del.)

Transients (Transnts)

Psychiatrically Disabled (Psych. Dis.)

Others

Emotionally Disturbed Children (Dst. Child.)

specify _____

Program Coverage (Refer to Instruction Booklet Appendix 2 for list of program codes for your province)

(Contact Name in block letters)

(Area code)

(Telephone No.)

Approved

(Authorized signature)

(Title)

(Date)

PLEASE COMPLETE AND RETURN THE LABELLED SURVEY IN THE ENCLOSED POSTAGE-PAID ENVELOPE



1996-97 — RESIDENTIAL CARE FACILITIES SURVEY

Name of Facility	City, Town, etc.						
A. Ownership (check one only)							
Proprietary	Ownership 102 <input type="checkbox"/>						
Religious	<input type="checkbox"/>						
Lay (not for profit, non-profit voluntary associations, societies)	<input type="checkbox"/>						
Municipal	<input type="checkbox"/>						
Provincial or Territorial	<input type="checkbox"/>						
Federal	<input type="checkbox"/>						
B. Beds (as at 31 March, 1997)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;"></td> <td style="width:20%; text-align: center;">Approved complement</td> <td style="width:20%; text-align: center;">Staffed and in operation</td> </tr> <tr> <td style="padding: 5px;">1. Number of Beds</td> <td style="text-align: center; padding: 5px;">121</td> <td style="text-align: center; padding: 5px;">122</td> </tr> </table>		Approved complement	Staffed and in operation	1. Number of Beds	121	122
	Approved complement	Staffed and in operation					
1. Number of Beds	121	122					
C. Total days of care during reporting period by responsibility for payment							
	Days						
1. Provincial Health Department or Ministry	131						
2. Provincial Social Service Department or Ministry	132						
3. Other Provincial Department or Ministry (specify)	133						
4. Municipalities, regional or district administration	134						
5. All other, including self-pay	135						
6. Total days (sum of boxes 131 to 135)	136						
D. Movement of residents							
	Residents						
1. In facility as at 1 April, 1996	151						
2. Admissions during reporting period	152						
3. Total under care (boxes 151 and 152)	153						
4. Discharges during reporting period	154						
5. Deaths during reporting period	155						
6. Total separations (boxes 154 and 155)	156						
7. In facility as at 31 March, 1997 (box 153 minus 156)	157 *						

* Box 157 must agree with page 2, boxes 221, 240 and 272

1996-97— RESIDENTIAL CARE FACILITIES SURVEY

E. Age and sex of residents in facility as at 31 March, 1997 (count each person once only)

Age Groups	Number of persons		Age Groups	Number of persons		
	1 Male	2 Female		1 Male	2 Female	
1. Less than 10 years..... ↗	201	202	6. 70 to 74 years..... ↗	211	212	
2. 10 to 17 years..... ↗	203	204	7. 75 to 79 years..... ↗	213	214	
3. 18 to 44 years..... ↗	205	206	8. 80 to 84 years..... ↗	215	216	
4. 45 to 64 years..... ↗	207	208	9. 85 years and over.... ↗	217	218	
5. 65 to 69 years..... ↗	209	210	10. Total residents (sum of lines 1 to 9). ↗	219	220	221 *

F. Types of care (refer to Instructions & Definitions)

Please group all residents in facility as at 31 March, 1997 into the following (count each person once only)

	Number of persons
1. Room and board only	228
2. Room and board with guidance/counselling with respect to social, employment, addiction problems, or parental guidance with skilled counselling (child care homes)	229
3. Room and board with custodial care and/or special school, sheltered workshop, etc.	230
4. Type I (i.e., supervision and/or assistance with daily living and meeting psycho-social needs)	232
5. Type II (i.e., medical and professional nursing supervision, etc.)	234
6. Type III (i.e., medical management, skilled nursing care, etc.)	236
7. Higher type	238
8. Total residents (sum of boxes 228 to 238)	240 *

G. Principal characteristics of residents in facility as at 31 March, 1997 (count each person once only)

	Number of Persons		Number of Persons
1. Aged	261	6. Alcohol/Drug Problems	266
2. Physically Challenged &/or Disabled	262	7. Delinquents/Young Offenders	267
3. Developmentally Delayed.....	263	8. Transients	269
4. Psychiatrically Disabled	264	9. Others specify	271
5. Emotionally Disturbed Children	265	10. Total residents (sum of boxes 261 to 271)	272 *

* Totals should agree

1996-97 — RESIDENTIAL CARE FACILITIES SURVEY

PERSONNEL			
H. Direct care to residents	Personnel employed as at 31 March, 1997		Total accumulated paid hours during reporting period
	Full-time	Part-time	
	301	302	303
1. Registered nurses	307	308	309
2. Registered qualified nursing assistants/licensed practical nurses	316	317	318
3. Physiotherapists/occupational therapists	319	320	321
4. Other therapists (specify)	322	323	324
5. Activity/recreation staff	328	329	330
6. Other care staff not included above (specify)	331	332	333
7. Total Direct care staff			
I. General services	351	352	353
1. Administration	354	355	356
2. Dietary (kitchen/food services)	357	358	359
3. Housekeeping, laundry	363	364	365
4. Plant operation, maintenance and security (janitorial services)	366	367	368
5. Other (specify)	369	370	371
6. Total General services staff			
TOTAL STAFF (line H.7 + I.6)	381	382	383

For information only

1996-97— RESIDENTIAL CARE FACILITIES SURVEY

EXPENSES			
For the 12 months ended March 31, 1997 (round to nearest dollar)	1 Salaries and wages	2 All other expenses	3 Total
J. Direct care to residents	401		402
1. Registered nurses	405		406
2. Registered qualified nursing assistants/licensed practical nurses	411	412	413
3. Physiotherapists/occupational therapists.....	414	415	416
4. Other therapists (specify) _____	417	418	419
5. Activity/recreation staff	423	424	425
6. Other care staff not included above (specify) _____		426	427
7. Drugs		428	429
8. Medical and surgical supplies		430	431
9. Other supplies (specify) _____	432	433	434
10. Total — direct care expenses	441	442	443
K. General services	444	445	446
1. Administration	449	450	451
2. Dietary (kitchen/food services).....	455	456	457
3. Housekeeping, laundry	458	459	460
4. Plant operation, maintenance and security (janitorial services).....	461	462	463
5. Other (specify) _____		462	463
6. Total — indirect care expenses		483	484
L. 1. Other (includes interest, rent, taxes, overhead (head office), depreciation, etc.)	495	496	497
TOTAL EXPENSES (line J.10 + K.6 + L.1)			

NOTE: Audited data not required

FOR OFFICE USE ONLY

DATE _____

- 1. REC _____
- 2. CLO _____
- 3. NU _____
- 4. CPN _____
- 5. DUP _____
- 6. REM _____
- 7. REF _____
- 8. NC _____
- 9. EDT _____
- 10. COM _____
- 11. KEY _____
- 12. EST _____
- 13. NR _____
- 14. OSC _____

EDITOR'S COMMENTS

For information only