

Yes	No	NA	Section 1 – Policy and Procedures	REG #
			Facility has a written primary purpose of the program services	5(1)
			Facility has written guidelines on security and safe storage of Resident records	24(1)
			Facility has an organizational chart*	19(1)(a)
			Written policy and procedures on the storage of drugs**	38(4)(b), s.2.1
			Storage of drugs policy and procedures reviewed once every two years	38(4)(b), s.2.2
			Written policy and procedures for administering medication**	42(1), s.3.1
			Written policy and procedures for responding to behaviour posing a safety risk	52(2), s.1.1
			Responding to behaviour posing a risk p&p reviewed once every two years	52(2), s.1.2
			Written policy regarding restrictive procedures**	52(2), s.1.3(a)
			Written policy and procedures for managing complaints**	20(c), s.4.1
			Complaint policy and procedures reviewed once every two years	20(c), s.4.7

Yes	No	NA	Section 2 – Facility Records	REG #
			Written record OH&S meetings discuss the care and well-being of the residents*	20B
			Written record OH&S meetings discuss the safety and security of the home	20B
			Written record Resident Council meetings discuss care, well-being of resident*	20C
			Written record Resident Council meetings discuss safety, security of the home*	20C
			Facility maintains a suitable food service accounting system*	36(5)
			Menus include 3 nutritionally well balanced meals that follow Canada food guide*	36(1)(a)
			Menus include two snacks	36(1)(c)
			Schedule of programs and activities include social opportunities	19(1)(e)
			Schedule of programs and activities include educational opportunities	19(1)(e)
			Schedule of programs and activities include vocational opportunities	19(1)(e)
			Schedule of programs and activities includes religious opportunities	19(1)(e)
			Schedule of programs and activities include recreational opportunities	19(1)(e)

## Homes for Special Care Licensing Checklist

Yes	No	NA	Section 3 – Safety and Building Records	REG #
			Written record of current liability insurance coverage	20D
			Written essential services contingency plan in place for work disruption	20A(1)
			Written emergency plan includes evacuation	27(1)(a)
			Written emergency plan includes relocation	27(1)(b)
			Written emergency plan includes expansion	27(1)(c)
			Written emergency plan includes isolation	27(1)(d)
			Emergency plan established in cooperation with local and provincial authorities	27(3)
			Emergency plan exercised and revised at least once every three years	27(4)
			Directory of personnel involved in the execution of the emergency plan	27(4)
			Record of call out procedures in emergency plan exercised at least once a year	27(4)
			Written record that fire drills are conducted at least once every 6 months	27(7)
			Written record of monthly testing of the fire protection equipment*	27(8)
			Written record of fire inspection completed and meets Fire Marshal requirements	27(10)(b)
			Written record facilities/equipment meet requirements of appropriate authority*	34(1)(b)
			Facility has adequate and competent staff to provide food service	20(a)
			Facility has adequate and competent staff for domestic and maintenance services	20(b)
			Facility has adequate and competent staff for program and activity services	20(c)
			Facility has adequate and competent staff to provide administrative services	20(d)
			No person shall be maintained in a home that is not approved by a Fire Marshal	27(11)

Yes	No	NA	Section 4 – Medication	REG #
			Written record of resident receiving drugs includes: name of resident	40
			Written record of resident receiving drugs includes: address of resident	40
			Written record of resident receiving drugs includes: age of resident	40
			Written record of resident receiving drugs includes: gender of resident	40
			Written record of resident receiving drugs includes: weight of resident	40
			Written record of resident receiving drugs includes: food and/or drug allergies	40
			Written record of resident receiving drugs includes: type and dosage	40
			Written record of resident receiving drugs includes: method of administration	40
			Written record of resident receiving drugs includes: prescription information*	40
			Written record all orders for drugs approved by qualified medical practitioner	41(1)
			Written record of all orders for drugs signed within 72 hours of an emergency	41(4)
			Written record of verbal orders for drugs includes name of registered nurse	41(2)
			All drugs stored in separate storage and no drugs stored in resident's room*	38(1)
			Storage area has appropriate lighting and temperature (incl. refrigeration)	38(3)
			Resident storing drugs in their room has proper authorization*	38(4)
			Drugs stored in a resident's room are safely stored at all times	38(6)
			Written record of medication received from pharmacy reviewed against the MAR	42(1), s.3.6
			Written record of medication review based on medical practitioner assessment	42(1), s.3.7
			Separate storage area for drugs is double-locked at all times**	38(4)(b), s.2.4

## Homes for Special Care Licensing Checklist

Yes	No	NA	Section 5 – Drugs in Bulk	REG #
			<b>Does this section need to be completed?</b>	
			Written record that facility, at least part time, employs a pharmacist*	37
			Written record of bulk drug order contains name, quantity and date received	39(1)(a)
			Written record of bulk drug order contains signature of person receiving	39(1)(a)
			Written record of bulk drug order contains the number of residents receiving	39(1)(b)
			Written record of bulk drug order contains the daily dosage for each resident	39(1)(b)
			Written record of weekly reviews by pharmacist to verify balance is correct	39(2)

Yes	No	NA	Section 6 – Personnel Records	REG #
			Written record stating staff have been trained to execute the emergency plan	27(6)
			Written record stating that Staff Orientation was completed	19(1)(d)
			Written record stating that In-Service Training was completed	19(1)(d)
			Written record stating that first-aid training was completed*	18(4)
			Written record stating policy and procedures for storage of drugs reviewed	38(4)(b), s.2.3
			Written record stating that Medication Awareness training was completed	42(1), s.3.2
			Written record that restrictive procedures policy reviewed yearly	52(2), s.1.4
			Written record that staff who utilize restrictive procedures are trained	52(2), s.1.6
			Written record that complaints policy and procedures have been reviewed	20(c), s.4.8

Yes	No	NA	Section 7 – Resident Records	REG #
			Written record that Level of Support (classification) has been completed	14(2)
			Resident's records are retained for five years following discharge or death	23(3)
			Written individualized plan of resident's needs and progress in those areas*	26(5)
			Written record of resident being seen by a qualified medical practitioner*	26(3)
			Written record retained in resident's file that includes all items in Form IV	23(1)
			Written record that current copy of resident's IP provided to Minister**	23(4)

## Homes for Special Care Licensing Checklist

Yes	No	NA	Section 8 – Physical Observation	REG #
			License is posted in a conspicuous place inside the main entrance of the home*	9(1)
			License is displayed in the home and made available upon request*	9(2)
			Facility is clean	29(2)
			Facility has suitable space for resident to relax and receive visitors*	22(1)
			Facility's exterior in good repair and grounds are clean and free from debris	30
			Building temperature is comfortable	51
			Resident's records kept in safe and secure location, accessible by staff	24(1)
			All rooms are clean, well ventilated and free from offensive odours	46(1)
			Furnishings are maintained in a good state of repair	31
			Facilities and equipment are adequate for the prep, serving and storage of food*	34(1)(a)
			RCF dining space accommodates 100% of residents	35(3)
			For a RCF, GH, DR, or SOH, each bedroom has appropriate floor area*	45(2)
			Facility has no bedrooms that accommodate more than 4 residents	45(3)
			Each resident is assigned a separate bed*	45(4)
			No bedrooms in basement, where bedroom floor is more than 3' below ground level	45(5)
			No bedrooms for residents or staff in the attic	45(6)
			Beds and mattresses are clean and comfortable	46(6)
			Bed linens and blankets are clean and are sufficient for comfort	46(6)
			Clean and dry towels are available to residents	46(7)
			There is at least 1 sink for every 6 residents	47
			There is at least 1 flush toilet for every 6 residents	47
			There is at least 1 bath for every 10 residents	47
			Evacuation plan and emergency telephone numbers posted in a conspicuous location	27(9)
			All doors leading to fire escapes remain unlocked from the inside at all times	52(1)
			Staff do not lock residents in any room or use restrictive procedures*	52(2)
			Complaints policy and procedures are accessible to staff and residents	20(c), s.4.9
			All complaints are documented, retained and available for review	20(c), s.4.4

Yes	No	NA	Section 9 – Administrator Interview	REG #
			Administrator responsible for the overall daily management of the home	19(1)(a)
			Administrator responsible for ensuring home complies with regulations	19(1)(b)
			Administrator responsible for ensuring residents receive standard of care	19(1)(c)
			Administrator responsible for staff orientation and in-service training programs	19(1)(d)
			Administrator responsible for planning and implementing programs and activities*	19(1)(e)
			Administrator responsible for ensuring all medications properly administered	42(1)
			Administrator indicates the facility has Occupational Health & Safety meetings	20B
			Administrator indicates the facility has Residential Council meetings	20C
			Administer uses proper isolation methods if resident has communicable disease	33(1)

## Homes for Special Care Licensing Checklist

Yes	No	NA	Section 10 – Staff Interviews	REG #
			Residents encouraged to participate in leisure activities with other residents	22(3)
			Residents able to see clergy	22(4)
			Residents able to see visitors	22(5)
			Residents able to attend religious services	22(6)
			Residents able to work	22(7)
			Residents able to go to school	22(8)
			Residents issued clean, adequate bedding once a week or as needed	46(8)
			Facility provides laundering services and facilities*	48(1)
			Residents clothing is appropriate, clean and in good repair	49
			Prior to their active duty, staff provided emergency procedure training*	27(6)
			Staff indicate medications are properly administered to residents in the home	42(1)
			Staff uses proper isolation techniques if resident has a communicable disease	33(1)

Yes	No	NA	Section 11 – Resident Interviews	REG #
			Residents state that they have never been locked in a room of the home	52(2)
			Residents encouraged to participate in leisure activities with other residents	22(3)
			Residents able to see clergy	22(4)
			Residents able to see visitors	22(5)
			Residents able to attend religious services	22(6)
			Residents able to work	22(7)
			Residents able to go to school	22(8)
			Residents state that there is a Resident’s Council meeting	20C
			Residents indicate that they see a medical practitioner of choice	26(1)
			Residents report that the temperature in their bedroom is satisfactory	46(3)
			Residents indicate that medications are properly administered	42(1)

## Homes for Special Care Licensing Checklist

Yes	No	NA	Section 12 – RRC/ARC Requirements	REG #
			<b>Does this section need to be completed?</b>	
			Food preparation area is at least 10 square ft per resident	34(2)
			Dining space for 100% who require personal care and 50% who require nursing care	35(2)
			Facility has at least 15 square ft per resident of dining space	35(2)
			Each bedroom has appropriate floor area*	45(1)
			Written record that facility has 1 Resident RN on duty for 8 hours*	18(2)
			Written record that the facility has a medical health advisor*	25(1)
			Pharmacy committee consists of the administrator of the home	44A(1)(a)
			Pharmacy committee consists of the home medical advisors	44A(1)(b)
			Pharmacy committee consists of practicing pharmacist designated by Administrator	44A(1)(c)
			Pharmacy committee consists of the director of nursing (if applicable)	44A(1)(d)
			Pharmacy committee consists of the dietician employed by the home	44A(1)(e)
			Pharmacy committee meets regularly re: storage, administration, control of drugs	44A(2)
			A supervisor of food services is designated by the administrator	36(3)
			Supervisor of food services plans menus and special diets	36(4)(a)
			Supervisor of food services ensures menus are evaluated by a dietician	36(4)(b)
			Supervisor of food services maintains a dated record of daily menus	36(4)(c)
			Supervisor of food services consults with dietician on planning, prep, storage	36(4)(d)

Yes	No	NA	Section 13 – Use of Restrictive Procedures	REG #
			<b>Does this section need to be completed?</b>	
			Restrictive procedures expressly permitted by the home's policy	52(2), s.1.3(b)
			Restrictive procedures carried out in accordance with that policy	52(2), s.1.3(c)
			Restrictive procedures are authorized by the administrator of the home	52(2), s.1.3(d)
			Written plan for use of restrictive procedures part of the resident's IPP	52(2), s.1.3(e)
			Risk assessment completed and adhered to in use of restrictive procedures	52(2), s.1.3(f)
			Written record in resident's file that alternatives tried and found ineffective	52(2), s.1.3(g)
			Resident consents to restrictive procedures, except in emergency situation**	52(2), s.1.3(h)