

YES	NO	N/A	SYSTEM CHECKLIST TEXT (80)	POL #
			<b>Section 1 -Policy and Procedures</b>	
			Home has organization's purpose statement	s 2.9
			Home has written guidelines on safe secure storage of resident records	s 1.13
			Written policy/procedure on staffing ratios/schedules including emergency staff	s 5.13
			Written Policy on the Storage of Drugs	s 4.1
			Storage of Drug Policy Reviewed every 2 years	38(4)(b)
			Written Policy and Procedure on the administration of Medication	s 4.1
			Written Policy and Pocedures responding to Behavior posing a Safety Risk	s 2.7
			Written Policy regarding use of Restrictive Procedures	s 3.1
			Written Policy and Procedure for managing complaints	s 2.3
			Written Policy for Hiring staff*	s 5.9
			Written Policy and Procedure for personnel disciplinary process/code of conduct	s 5.11
			Written Policy for Anti-Black Racism, Cultural Awarness and Diversity promotion	s 5.14
			Written Policies and procedures promoting work environment free of harassment	s 5.15
			Written Policy regarding use of personal devices for staff, children and youth*	s 7.4
			Policy and Procedures manual is reviewed every two years by the home	s 2.6
			Written policy and procedures for Admission and Discharge procedures	s 2.7
			Written policy and procedures for Communicable Disease	s 2.7
			Written policy and procedures for Critical Incidents	s 2.7

		Written policy and procedures for Transporting Child or Youth*	s 2.7
		Written policy and procedures for Fire Inspections and Drills	s 2.7
		Written policy and procedures for Emergency Evacuation process	s 2.7
		Written policy and procedures for handling Child or Youth monies	s 2.7
		Written policy and procedures for Health Precautions	s 2.7
		Written policy and procedures for Medical and Dental Care	s 2.7
		Written policy and procedures for missing Child or Youth	s 2.7
		Written policy and procedures for Nutrition for Child or Youth	s 2.7
		Written policy and procedures for OH&S process	s 2.7
		Written policy and procedures for Police involvement	s 2.7
		Written policy and procedures for Privacy, Searches, Possessions and Mail*	s 2.7
		Written policy and procedures for prohibited items	s 2.7
		Written policy and procedures for the retention of Child or Youth records	s 2.7
		Written policy for a smoke free environment	s 2.7
		Written policy and procedures for violence in the workplace	s 2.7
		Written policy and procedures for Confidentiality	s 2.7
		Written policy and procedures for responding to Behavior posing safety risk	s 2.7
		Written policy and procedures for Cultural Awareness and Anti-Black racism	s 2.7
		Written policy and procedures for Discipline	s 2.7
		Reporting Allegations of Abuse policy requires DSP Director approval*	s 2.8
		Use of restrictive procedures policy requires DSP Director approval*	s 2.8
		All allegations of abuse must be reported to the appropriate authorities*	s 2.14

		<b>Section 2 -Home Records</b>	
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		Licence is displayed and made available upon request.	s 1.36
		Evacuation plan/emergency telephone numbers posted in a conspicuous location	s 1.42
		The Home Organizational model is current and updated annually	s 2.10
		The home has written record of current liability insurance coverage.	s 2.11
		The home has a records management program.	s 2.12
		Written record menus evaluated by a dietician minimum every 2 years*	s 2.15
		Written record Menus have three nutritionally well-balanced meals and two snacks*	s 2.16
		There is a written record of any occurrences of communicable diseases.	s 2.17
		Written record OH&S meetings discuss the safety and security of the home	s 2.42
		Written record resident council meetings discuss care, well-being of child/youth	s 2.43
		Written record resident council meetings discuss safety and security of home	s 2.44
		Child/youth records are retained for five years following discharge or death	s 2.46
		The home has current written job descriptions for each staff position	s 5.3
		The home has established probationary period of 1500 hours for new staff	s 5.4
		Home's schedule of programs and activities includes educational opportunities.	s 9 10
		Schedules of programs and activities include social opportunities.	s 10.11
		Schedules of programs and activities include recreational opportunities.	s 10.12
		Home has adequate and competent staff to provide Domestic/Maintenance Services	Reg 20(b)
		Home has adequate and competent staff to provide Program/Activity Services	Reg 20( c)
		Home has adequate and competent staff to provide Administrative Services	Reg 20(d)
		Written Record Home/equipment meets requirements of appropriate authority	Reg 34(1)(b)

		<b>Section 3 -Safety Records</b>	
		Written essential services contingency plan in place for work disruption	s 6.12

		Emergency evacuation plan reviewed and approved by Office of the Fire Marshall	s 6.10
		Emergency evacuation plan revised, exercised every 3 years with fire dept	s 6.11
		Record of fire inspection	s 6.13
		Written record of fire drills, date and time, conducted monthly	s 6.14
		Fire drills using alarm, 50% are at night & 1/year between 12am&5am	s 6.15
		Firearms are not kept on the premises	s 6.16
		Sprinkler heads and fire detector heads are not painted/unabstructed	s 6.17
		Monthly inspection ensuring fire doors function, closed, exits unobstructed	s.618
		Monthly Inspection of battery indicator of smoke detectors	s 6.18
		Monthly Inspection of all safety equipment	s 6.18
		Monthly inspection of battery operated smoke detectors	s 6.18
		Monthly Inspection of Fire extinguishers are undamaged and in place	s 6.18
		Monthly inspection includes checking of emergency power systems	s 6.18
		Annual Inspection Includes install new batteries in smoke detectors	s 6.19
		Annual Inspection of Fire Alarm system	s 6.19
		Annual Inspection of Portable Fire Extinguishers	s 6.19
		Annual Inspection of Sprinkler Systems	s 6.19
		Annual Inspection of Generator and service as required	s 6.19
		Annual Inspection of emergency lighting	s 6.19
		Annual Inspection of fuel fired appliances, Chimney/flues	s 6.19
		Electrical system must be inspected by licensed electrician every 5 years	s 6.20
		Emergency plan has been created with local and provincial authorities.	s 6.23
		Staff and their position in the home are clearly identified on Emergency Plan	s 6.24
		Record of call out procedures in Emergency Plan exercised once a year	s 6.25

		All persons must be maintained in a home that is approved by a Fire Marshal	s 1.1
		Specialized equipment/lifts meet CSA standards inspected by professionals*	s 1.11
		All exits are in compliance with Fire Marshall requirements	s 1.43
		Written Emergency plans includes Expansion	Reg 27(1)(c)
		Written Emergency Plan includes Isolation	Reg 27(1)(d)
		Written Emergency Plan includes Relocaton	Reg 27(1)(b)
		Written Emergency plan includes Evacuation	Reg 27(1)(a)
		Directory of personnel involved in the execution of emergency plan	Reg 27(4)
		Emergency plan exercised/revised every 3 years	Reg 27(4)
		Monthly Inspection of Emergency Lighting	s 6.18

		<b>Section 4 -Medication records</b>	
		Record of the administration of medication contains name of child/youth	s 2.40
		Record of the administration of medication contains age of child/youth	s 2.40
		Record of the administration of medication contains the weight of child/youth	s 2.40
		Record of the administration of medication contains food/drug allergies	s 2.40
		Record of administration of medication contains method, type and dosage given*	s 2.40
		Record of administration of meds indicates meds prescribed or non-prescription	s 2.40
		Record of admin of meds lists physician name, date prescribed, date discontinued	s 2.40
		Record of administration of medication contains the date and time administered	s 2.40
		Record of administration of meds contain name of person administering med	s 2.40
		Record of Administration of meds contain address of child/youth	Reg 40
		Record of Administration of meds contain gender of child/youth	Reg 40
		Separate storage area for medications is double locked at all times	s 4.2

		All meds stored in separate storage, no meds stored in child/youth's room*	s 4.3
		Medication prescribed must be in a proper medication container	s 4.4
		Record of meds received from pharmacy reviewed against the MAR*	s 4.5
		Record of med review based on med practitioner assessment, updated annually	s 4.6
		Processes/procedures developed for self-admin of meds with recorded permission	s 4.7
		Staff do not give medication prescribed for one child to another child	s 4.8
		Meds stored in Child/Youth room must be locked at all times	Reg 38(6)
		Med Storage area has proper lighting/temperature( ie. refrigeration if required)	Reg 38(3)

		<b>Section 5 -Personnel Records</b>	
		Staff qualifications include high school diploma or equivalent	s 5.2
		Records include descriptions of qualifications and application for employment	s 5.5
		Records include a Child Abuse Register check completed at time of employment	s 5.6
		Records include Criminal Record Check with vulnerable sector search	s 5.7
		Record of all employees with Food Hygiene Training	s 5.24
		Staff receive orientation training to the home within 15 days of hire date	s 5.26
		Staff trained in cultural competency within 3 months of hire date	s 5.27
		Staff are trained in a crisis management model prior to starting work	s 5.28
		Staff are trained in mental health first aid within 3 months of hire date	s 5.29
		Staff trained in child development/trauma-informed care within 3 months of hire	s 5.30
		Staff are trained on recognizing/report signs of abuse prior to starting work*	s 5.31
		Staff are trained in medication awareness within 3 months of hire date*	s 5.32
		Staff are trained in fire and life safety during home orientation*	s 5.33
		Staff are trained on the emergency plan during home orientation*	s 5.34

		Staff are certified and trained in First Aid and CPR prior to the hire date	s 5.35
		A written record is maintained of each employee's training and development	s 5.36
		Written record policy/procedure for drug storage reviewed every 2 years by staff	Reg 38(4)(b)
		A written record that the restrictive procedures policy reviewed yearly by staff	Reg 52(2)
		A written record complaints policy and procedures have been reviewed by staff	Reg 20 C

		<b>Section 6 - Administrator Interview</b>	
		Supervisors confirm child/youth feel safe in presence of staff/participants	s 6.1
		Supervisors assigned to child/youth for one-on-one safety/wellness meetings*	s 6.1
		Supervisors confirm with child/youth, staff members respectful and responsive*	s 6.2
		Supervisors confirm with child/youth staff address emotional/behavioural needs	s 8.1
		Supervisors confirm with child/youth staff members respond quickly/effectively*	s 6.3
		The administrator is responsible for ensuring home complies with regulations	s 2.48
		The administrator is responsible for children/youth receive standard of care	s 2.49
		Home has a screening/selection process to ensure selection of qualified staff	s 5.1
		Children and youth have access to staff members at all times	s 5.8
		The home provides staff with annual, written performance evaluations	s 5.10
		Home facilitates communication among staff via logs/meetings/conferences monthly*	s 5.12
		Home has adequate and awake staff on duty through night to monitor Child/Youth	s 5.16
		Use of proper isolation methods if child/youth has communicable disease	Reg 33(1)
		Home ensures they have a sufficient number of employees	s 5.17
		Home is able to indicate who can and cannot be included in the staff ratio	s 5.17
		The home reports that a supervisor is available as required after hours	s 5.18
		Home reports how they oversee employees planning and supervision of programs	s 5.19

		Home ensures a mentor and supervisor for each volunteer/student placements	s 5.20
		Home must ensure there is an orientation for volunteers/student placements	s 5.21
		Administrator has delegated a person who is responsible for Food services*	s 5.23
		Administrator indicates Home has Occupational Health and Safety meetings	s 5.25
		Staff are fair/consistent managing child/youth behaviour. Staff follow care plan	s 8.6
		Program and activities are to be implemented and approved by administrator	s 8.13
		Home has written policies prohibiting discriminatory behavior*	s 11.4

		<b>Section 7 - Staff Interviews</b>	
		Critical Incident Procedures are easily accessible to employees	s 6.4
		Staff report vehicles have a first aid kit when transporting children and youth	s 6.22
		Staff identify the employee in charge of fire alarm procedures for the shift	s 5.22
		Schedule of visual checks at night considers age/risk factors of child/youth	s 5.16
		Staff know DCS's position regarding the use of corporal punishment	s 5.37
		Staff know location of home's policy and procedures manual	s 5.38
		Staff utilize digital educational resources as part of the individual's support plan	s 7.1
		Child/youth are able to use the telephone to communicate with support circle*	s 7.2
		Child/youth have access to computers/online communication for schoolwork	s 7.5
		Internet access monitored using appropriate site blocking tools*	s 7.6
		Staff have access to range of interventions/programming to support behaviours	s 8.2
		Child and youth are informed of natural consequences associated with behaviour	s 8.8
		Staff assist children and youth in meeting behaviour expectations	s 8.9
		Staff proactively plan supports for child/youth with knowledge of their triggers	s 8.11
		Home meeting held monthly to allow staff time to review/reflect/plan activities	s 8.12



		Child and youth have access to culturally appropriate educational opportunities	s 9.4
		Children and youth have appropriate and regular contact with family members*	s 10.1
		Child/youth have opportunity to engage in the local community activities	s 10.2
		Children and youth have opportunity to engage in positive peer relationships	s 10.3
		Child/youth supported in having existing healthy relationship with Family/friend*	s 10.4
		Child/youth have opportunity to engage in Cultural traditions/customs/language*	s 10.6
		Child/youth have opportunity to learn of appropriate boundaries in relationships	s 10.7
		Social opportunities are driven by the child or youth's choice*	s 10.9
		Child/youth encouraged to participate in leisure activities with other residents	s 10.13
		Staff support children/youth to identify, celebrate activities child/youth enjoy	s 11.1
		Staff encourage participation in cultural activities and at-home participation	s 11.2
		Staff understand and support the child/youth during the developmental milestones	s 11.3
		Staff support children and youth to access sexual education programs/services	s 11.6
		Staff support children and youth to access LGBTQ community programs/services	s 11.7
		Staff ensure children/youth able maintain appropriate levels of hygiene*	s 12.1
		Staff support child/youth to understand safe and appropriate online behavior*	s 12.3
		Staff ensure opportunities for child/youth to practice social skills*	s 12.4
		Staff ensure children/youth clothing is appropriate, clean and in good repair	s 12.6
		Staff monitor the health needs of the child or youth and respond accordingly	s 13.1
		Staff work with parent ensure child/youth health needs assessed by professionals*	s 13.2
		Staff support children/youth to access health education programs/services*	s 13.4
		Child/youth supported to learn age/developmentally appropriate living skills*	s 14.1
		Staff support child/youth to set and work towards personal goals*	s 14.2
		Children and youth's monies are retained in a secure location	s 1.12

		All records are kept in a secure location accessible only by staff	s 1.13
		Bedding washed as needed and sheets must be washed atleast once per week	s 1.41
		Clean towels, face cloths, bedding provided to child/youth weekly or as needed	s 12.2
		Child and youth able to see visitors	Reg 22(5)
		Staff indicate medications are properly administered to child and youth	Reg 42(1)
		Staff use proper isolation methods if child/youth have a communicable disease	Reg 33(1)

		<b>Section 8 -Child or Youth Interview</b>	
		Child/youth have access to communication devices to contact family or friends	s 7.3
		Children and youth are aware of prohibited behaviour management practices	s 8.7
		Children and youth are aware of the positive behaviours expected of them	s 8.10
		Participation in Home with family/cultural community members are supported*	s 10.5
		Children and youth state that the home has council meetings that they are able to attend.	s 10.4
		Children/youth have opportunity to express themselves through choice in clothing	s 12.5
		Children/youth have opportunity to have input in decisions affecting Home life	s 14.3
		Children/youth have involvement developing care plan, decision making	s 14.4
		Child/youth have direct influence on the look and feel of their personal space*	s 1.5
		Children and youth are provided with adequate personal space and privacy	s 1.35
		Children and youth report that temperature in their bedroom is comfortable	s 1.44
		Children and youth indicate they have never been locked in a room of Home	Reg 52(2)
		Children and youth able to see Clergy	Reg 22(4)
		Children and Youth able to see visitors	Reg 22(5)
		Children and Youth able to attend religious services	Reg 22(6)
		Children and youth able to work	Reg 22(7)

		Children and youth able to go to school	Reg 22(8)
		Children and Youth indicate medications are properly administered	Reg 42(1)

		<b>Section 9 -Critical Incident Reporting and Missing Children/Youth</b>	
		Record on child's file agency has been notified within 24 hours of critical incident	s 6.5
		Record incident form provided to care coordinator/social worker within 72 hours	s 6.6
		Record of incident report, follow-up and status provided within 2 weeks	s 6.7
		Safety plan for missing child or youth created upon admission*	s 6.8
		Written record of all who are notified a child or youth has gone missing	s 6.9

		<b>Section 10 - Child and Youth Records</b>	
		Consent for information sharing completed during admission/annually, on file	s 2.1
		Record handbook provided to support circle of children and youth at admission*	s 2.2
		Record the Children or youth are provided a home handbook	s 2.3
		Record of communication with Child or Youth's parents*	s 2.4
		Record of Discharge reports shared with Child or Youth support circle	s 2.5
		Record of description of programs provided to socialworker/carecoordinator/child	s 2.18
		Each child or youth must have their own individual log	s 2.19
		Log documentation is adequate, specific, clear concise, complete and relevant	s 2.20
		Logs are objective, professional, opinion free, non-judgmental, non-prejudicial	s 2.21
		All written documentation id's each child and youth or others by their full name*	s 2.22
		Handwritten logs must be legible and in ink	s 2.23
		Each incident affecting health and safety of children/youth must be in the log	s 2.24
		Night staff must document any unusual activity in the child or youth's log	s 2.26

		Individual plan of care is created within 30 days of admission reviewed monthly*	s 2.27
		Plan of care has summary of behavior/goals/supports in home, review dates*	s 2.28
		Individual plan of care is shared with the Department*	s 2.29
		Social, educational and vocational progress reports completed every 3 months	s 2.30
		Record each child or youth has had medical exam every 12 months	s 2.31
		There is a record of all medical, dental and optical information	s 2.32
		Record children and youth were informed of rights and responsibilities	s 2.33
		Communication with social worker/ care coordinator/approved family in daily log	s 2.34
		Records if child or youth requires supervision for communication*	s 2.35
		Child/Youth, parent or guardian, may submit any concern/complaint to Director*	CYFS Reg 31(1)
		Written complaints from child/youth/support circle are reported and documented*	s 2.36
		Record children/youth received training on emergency plan at time of admission	s 2.37
		Written record the Harmful Behaviour Policy has been explained to child or youth	s 2.38
		The register of children and youth contains the name of the child or youth	s 2.39
		The register of children and youth contains age and date of birth	s 2.39
		The register of children and youth contains MSI number	s 2.32
		The register of children and youth contains usual place of residence	s 2.39
		The register of children and youth contains name of parent or guardian	s 2.39
		The register of child or youth contains First Nation/Band/Indigenous affiliation	s 2.39
		The register of children and youth contains the child/youth's admission form	Reg 23(1)
		The register of children and youth contains the child/youth's date of admission	s 2.39
		The register of children and youth contains Guardian/Emergency Contact	s 2.39
		The register of children and youth contains Physician info	Reg 23(1)
		The register of children and youth contains name/contact for care coordinator	s 2.39

		The register of children and youth contains a Discharge form	s 2.39
		The register of children and youth contains form with date of discharge	s 2.39
		The register of child and youth contains form with discharge address	Reg 23(1)
		The register of child and youth contains form with date of death	Reg 23(1)
		There is a record of Child and Youth's personal items	Reg 23(1)
		Complaints are documented, retained and available for review*	s 2.41
		Written record that Level of Support (classification) has been completed*	s 2.45
		Children and youth have developed transportation plans on file	s 6.21
		Behaviour concerns are outlined in case plan used to generate/monitor a plan	s 8.3
		Home developed behaviour de-escalation plans with support circle/child/youth	s 8.4
		Sensory triggers are identified in individual care plan	s 8.5
		Home works proactively with School/Dept of Ed to meet needs of child/youth*	s 9.1
		Home arranges for child/youth to access items required to conduct their studies*	s 9.2
		Staff records child/youth school involvement, report cards/suspensions/expulsion	s 9.3
		Home advises Support Circle if tutor recommended and explores resources*	s 9.5
		Home informs child's Support Circle of school issues/meetings*	s 9.6
		There is a written record that parents receive report cards	s 9.7
		Parent/social worker(for children in care)receive notice of suspension/expulsion*	s 9.8
		Child/youth registered in School/Employment/training or volunteer program*	s 9.9
		Support Circle consulted at placement for insight on child/youth likes/triggers*	s 10.8
		Families encouraged to contribute to program planning, attend social outings*	s 10.10
		Care plan outlines how child/youth wants to participate in self awareness*	s 11.5
		Child/youth's physician participates in care planning with Support Circle*	s 13.3
		Children and youth have bank accounts	s 14.5

		Record that department was consulted if siblings are sharing a bedroom	s 1.24
		Record of Dietary requirements for child and youth	36(4)(a)(b)

		<b>Section 11 -Physical Observation</b>	
		Home has accessible green space for recreation for all children/youth in home	s 1.2
		The home design provides privacy for children and youth	s 1.4
		The home has no fluorescent lighting	s 1.6
		Items hazardous to child/youth are safely managed and/or locked as necessary	s 1.7
		Homes space enables all children/youth to participate in activities together	s 1.8
		The home's dining table seats 6 – 8 participants and staff for meals	s 1.9
		The home has access to residential-level internet	s 1.10
		All furnishings/equipment of home maintained in a good state of repair	s 1.14
		Space for private communication between child/youth/Support Circle*	s 1.15
		Home temperature is kept at a comfortable level	s 1.16
		Water heater temp is not less than 54°C, taps between 43°C and 49°C	s 1.17
		Bedrooms must have a window meeting Building Code/Fire Approval	s 1.18
		No basement room 3ft below grade can be used for child/youth bedroom	s 1.19
		No bedrooms for children, youth or staff in the attic	s 1.20
		Minimum bedroom area of 9.29 square metres (100 square feet)	s 1.21
		Child/youth has own bedroom, bed & clean mattress suitable to their age/size	s 1.22
		Each child or youth has bedding suitable to the weather and climate	s 1.23
		No child or youth shares a bedroom with another child of the opposite sex	s 1.24
		Furnishings reflect safety best practices (ie. heavy dresser bolted to wall)	s 1.25
		Windows must have adequate window coverings	s 1.26

		Children/youth have access to a lockable space for personal belongings	s 1.27
		One sink and one flush toilet for every five children and youth in Home*	s 1.28
		One bath and one shower for every four children and youth*	s 1.29
		Bathroom door locks must be capable of being opened from the outside by staff	s 1.30
		Bathrooms must be easily accessed by children and youth	s 1.31
		Bathing and toilet areas must be cleaned daily	s 1.32
		96 square feet of outdoor recreational space per child or youth on site*	s 1.33
		Outdoor space maintained in safe/sanitary condition and accessible to all*	s 1.34
		Home has suitable space for children/youth to relax and receive visitors	s 1.37
		Home exterior/interior in good repair, grounds are clean, free from debris	s 1.38
		Home's civic number is clearly posted	s 1.38
		Rooms are clean, well ventilated/no odours/ dehumidifiers used as required	s 1.39
		Facilities/equipment are adequate for the prep, serving and storage of food	s 1.40
		Beds, mattresses, bed linens, and blankets are clean and sufficient for comfort	s 1.41
		Food preparation area is at least 10 square ft per child or youth	s 1.45
		Home's dining room is minimum of 100 sq ft or 25 sq. ft. per child/youth	s 1.46
		Home provides laundering services and facilities	s 1.47
		All doors leading to Fire escapes remain unlocked from inside at all times	Reg 52(1)

		<b>Section 12 -Video Surveillance</b>	
		Does this section require completion	
		Video Surveillance Systems require DSP Director approval	s 3.15
		Video Surveillance Systems are only permitted in common areas of the home*	s 3.15
		Signs notifying public of video surveillance must be prominently displayed	s 3.16

		Video monitors must not be located in a position that enables public viewing	s 3.17
		Logs kept of all instances of access to, and use of, recorded video material	s 3.18
		Storage retention log form completed before video disclosed to authorities	s 3.19
		Staff trained on video surveillance policy and reviewed annually	s 3.20
		Video surveillance policy reviewed every two years	s 3.21
		Video equipment is within a distance that allows for immediate intervention	s 3.22

		<b>Section 13 -Restrictive Procedures</b>	
		Does this section require completion	
		Restrictive Procedures carried out according to Home Policy	s 3.2
		File record of debriefing session after physical restraint used with child/youth	s 3.3
		Written plan for restrictive procedures use in child/youth's IPP/Care plan*	s 3.4
		Risk assessment is completed and adhered to in use of restrictive procedures	s 3.5
		Children/youth made aware of home's restrictive procedure upon admission	s 3.6
		Restrictive procedures are authorized by the administrator of the home	s 3.7
		Record Social Worker/Care Coordinator aware of restraint within 1 business day*	s 3.8
		Written plans developed for children/youth with chronic patterns of aggression	s 3.9
		Child/youth's log contains record of the personal search of the child or youth	s 3.10
		Written summaries of possible violations of restraint policy forwarded to Dept	s 3.11
		All incidents of restraints must be cited in child or youth's Daily Log	s 3.12
		Home relies on trained staff in circumstances where restraints are required	s 3.13
		Children and youth are informed of the procedure for personal searches	s 3.14
		Written record in child/youth's file alternatives tried and found ineffective*	s 2.46



		<b>Section 14 -DSP Youth</b>	
		Does this section need to be completed	
		Youth indicate they are able to see medical practitioner of choice	Reg 26(1)
		Youth choice for preferred community(s) for home is documented on IPP*	s 14.6
		Youth have access to vocational skill training/experiential learning/volunteering	s 14.7
		Youth begin transition plan discussions in their care plan at age 16	s 14.8
		Youth are able to work if they choose	s 14.9