



WEST MONTREAL READAPTATION CENTRE

SUBJECT: Standards of Care and Environment Criteria of User and Caregiver Family-Type and Contractual Resources	IDENTIFICATION: DSP-99.01
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GOAL

To ensure that care to users in both family-type and contractual resources reflects the mission and values of the establishment and promotes optimal safety and quality of life.

POLICY

Caregivers who are contracted with our organization must follow basic standards of care as well as standards for the environment of their home.

As the matching of residents with caregivers who are able to provide for their needs is essential, there will also be criteria developed for residents and caregivers for both family-type resources and contractual resources.

PROCEDURE

1. There will be standards of care for family-type and contractual resources (Annex I).
2. There will be standards for the environment of family-type and contractual resources (Annex II).
3. There will be criteria for users residing in family-type resources (Annex III).
4. There will be criteria for users residing in contractual resources (Annex IV).
5. There will be criteria for family-type resource caregivers (Annex V).
6. There will be criteria for contractual type resource caregivers (Annex VI).

ABSENCE OF CAREGIVER

1. Any caregiver who will be absent from his home for more than 48 hours must inform the head of service or his representative.
2. The head of service will determine the need to evaluate the back-up caregiver.
3. Where indicated by the head of service, the Department of Professional Services will validate a back-up caregiver.
4. In the case of children, any caregiver absent overnight must report the anticipated absence to the head of service or his representative.

DEPARTMENT: Professional Services	DATE ENFORCED: 99.03.04
REVISED ON:	REPLACES POLICY: DSP
SIGNATURE OF DIRECTOR RESPONSIBLE:	
DISTRIBUTION: General management, client services, Department of Professional Services, Department of Financial & Technical Services	

BASIC STANDARDS OF CARE IN RESIDENTIAL RESOURCES

1. Care with respect and compassion.
2. Health, emotional and physical well-being.
3. Supervision and support.
4. Partnership and collaboration.
5. Relationship with the natural family.

PRINCIPLES

1. CARE WITH RESPECT AND COMPASSION

Each person is entitled to be cared for with respect, consideration and compassion. Therefore, the caregiver must:

- ensure that the person has adequate opportunity to exercise his/her right in decision-making;
- treat the person in a positive supportive way;
- respect the person's right for self-expression, including background, beliefs, sexual expression, etc.;
- respect the person's right for confidentiality;
- speak to the person with the respect accorded to adults;
- call the person by the name of his/her choice.

2. HEALTH, EMOTIONAL AND PHYSICAL WELL-BEING

a) In order to promote the health, emotional and physical well-being of the person, the caregiver must:

- ensure prompt and adequate medical care;
- ensure the maintenance of a medical binder;
- ensure a nutritious diet (three times a day and snacks) according to the person's preferences and according to medical specifications (e.g. dietary needs related to prescription drugs);

- ensure appropriate personal hygiene;
- maintain clean, comfortable and appealing living conditions;
- ensure a safe and secure environment;
- provide opportunity and space for privacy at appropriate times;
- ensure appropriate clothing to meet the person's needs;
- ensure that the person has the opportunity to be physically active, according to his/her preference;
- ensure the person sleeps 6-8 hours a night and has the opportunity to rest when tired; Children require 10-12 hours of sleep;
- provide a smoke free environment, unless otherwise approved;
- help the person to celebrate significant events, such as birthdays, holidays, personal accomplishments;
- help support the person emotionally during difficult periods (e.g. death of a family member or a friend);
- Help the person adjust to changes within the living environment.

b) Each person is entitled to have a socially valorizing appearance; therefore, the caregiver must:

- intervene to correct or eliminate anything which will socially devalue the person;
- teach and help the person to improve his/her self image; including enabling the person to dress and groom himself/herself age appropriately and according to the style and fashions of those among whom he/she lives;
- guide the person in his/her choices.

c) Each person is entitled to experience a wide variety of social/vocational activities, including professional, cultural, sporting, and educational; therefore, the caregiver must:

- help prepare the person for community integration, which includes promoting integration and participation in age-appropriate activities;
- provide support to the person in his/her activities;
- encourage the person to experience a wide variety of activities in the community which will enable the person to learn from his/her peers and develop socially valorizing behaviours;
- assist in budgeting his/her finances in order to participate in activities.

3. SUPERVISION AND SUPPORT

Individual supervision of each user must be tailored to meet the user's needs.

The caregiver must:

- ensure a complete range of supervision and support, both on a regular basis and for emergency situations;
- be available to the residents to provide advice/guidance as needed, (ex. supportive discussions regarding work or social related problems);
- Be aware of the users' whereabouts; a lengthy absence must be investigate and reported. In the case of children, they must always be supervised.
- observe significant changes in the residents (i.e. weight loss, sleeping problems, mood and behaviour changes including an increase in intensity and frequency, irregular behaviour to stressful events) and report them to the Clinical Worker/Manager of Community Services in a timely manner;
- inform the Manager of Community Services of his/her absence as per the policy;
- ensure that his/her back-up provides the same services he/she, as the primary caregiver, is expected to provide. The caregiver is responsible for providing user information, emergency procedures, telephone numbers of professional and family involved, including telephone number(s) to reach primary caregiver at all times.

4. PARTNERSHIP AND COLLABORATION

In order to promote the personal growth and the quality of life of the person there must be a common vision among all those involved in the person's life; therefore, the caregiver must:

- work collaboratively with all those who are involved in the person's life, both professionally and socially;
- participating in training programs, review meetings, etc.;
- be involved in the formation and review of the person's Intervention Plan;
- follow the Intervention Plan.

5. RELATIONSHIP WITH THE NATURAL FAMILY

Each person has the right to maintain close, supportive relationships with his / her family. Therefore, the caregiver must:

- recognize the importance that the person's family plays in his/her life;
- develop and implement strategies that facilitate the person's relationship with his/her family.

Annex II

ENVIRONMENT STANDARDS

THE HOME

The evaluation of the home of the applicant is based on specific standards as outlined below to ensure the suitability of the physical environment to meet the specific needs of the user. Inspection is conducted by the Validation Worker, (Social Worker, Department of Professional Services) as part of the *initial* evaluation in determining the applicant's suitability. External resources, such as municipal fire departments, will be called upon by the applicant to perform a fire safety evaluation of the home wherever possible (see Fire Safety Section below).

In situations where the applicant is renting the home, it is required that the landlord provide written consent as to the use of the residence as a family-type resource for intellectually handicapped persons.

Location and Accessibility:

- The location must be in an area that meets the specific needs of the users placed in the home.
- Depending on the individual needs of the user, the home should be accessible to services such as public transport, adapted transport, sports and recreation centre, community centre, CLSC, medical clinics, hospital, shopping centre, work, etc.
- The home should be accessible to sidewalks for users who may have mobility problems.

Accessibility of Caregiver:

- The primary caregiver must live on the premises and share all living space with the residents other than their own private bedroom.
- Duplex situations, with separate living quarters, are not acceptable for the intellectually handicapped population of our Corporation.
- The caregiver must be readily available to respond to the needs of his residents and must provide adequate supervision at all times.
- A substitute caregiver who has been oriented to the structure of the home and routines of the residents must be readily available.

Physical Standards:

Rooms and furniture should be adequately provided for the residents, guided by the following principles:

- Private bedrooms are always preferable and should measure a minimum of 80 square feet (8' x 10') for one single bed and dresser.

- Rooms with two single beds and two dressers should measure a minimum of 140 square feet (10' x 14').
- Bedrooms must have at least one window with privacy shades.
- Bars on windows are prohibited.
- Bedrooms must have closet space.
- No more than two people live in one room and one single twin size bed (minimally) should be provided for each resident (no pull-out beds or folding beds).
- One full bathroom with shower, toilet, sink, bath, mirror, per four people (including caregiver and his family).
- One common living room with adequate space for all residents, caregiver and family.
- One dining room which may be in combination with the kitchen with enough space to sit all residents while eating.
- Unfinished basements are not acceptable as a living or T.V. room space.
- Bedrooms in basements must be approved.

Quality of Life:

The home must be conducive to quality of life for the residents.

- Premises must be clean and well maintained.
- Furniture must be in good condition.
- Ambiance of the home must be bright and homelike.
- Residents must be involved in decorating their own rooms.
- Beds and linens should be changed weekly.
- Bathrooms and bedrooms should have appropriate place for personal items such as towels, face cloths, toothbrush, hairbrush, etc.
- Waste baskets with removable liners should be provided.
- Temperature levels in the home must be kept comfortable at all times; in winter the minimum temperature level should be 70°F or 21°C. In summer, if air conditioning is not available, fans must be provided.
- Hot water must be supplied at all times.
- Lighting must be adequate in each room of the house, with a bedside lamp beside each bed.

- Supplies which are basic to the day-to-day living of the residents should be provided as required: bedding, pillows and blankets for each resident's bed; soap, toilet paper, hand towels in the bathroom; sufficient cutlery, utensils, glasses, dishes in the kitchen.
- Residents should have free access to the telephone.

Privacy:

- In general, all users within the home should have a right to privacy and confidentiality.
- High traffic of volunteers or workers should be discouraged in the home.
- Rooms, especially the bedrooms, bathrooms and toilets must have doors (curtains unacceptable), shower stall with curtain or shower door, privacy blinds on windows.
- Hallways are prohibited for use as living space.

Confidentiality and Security:

- There should be a locked filing space for confidential records, documents, logbooks, etc.
- Medication must be properly labelled and kept in a secure, locked place.

Safety and Security:

The home must provide a safe and secure place for residents, following certain principles:

- The building must be safe from fire and structural hazards, according to the safety standards set by the municipalities building code.
- Insurance coverage must be provided and verified by the Head of Service.
- Permanent fixtures such as doors, baths, toilets, sinks stairs, windows and other must be of standard size, not damaged and in good working condition.
- Safety arrangements based on the specific needs of the user must be acted upon. For example, users with mobility problems who have difficulty negotiating stairs should be placed at ground level with amenities at their disposal; stairs should not be steep and should have hand-rails; grab bars, guard rails, rubber mats, must be placed in shower or tub, non-slip rugs, non-skid floors *are a must*.
- Doors with dead bolt locks or double cylinder locks should be prohibited.

Fire and Safety Regulations:

- All family-type resources must meet the fire and safety regulations as established by the local municipality.
- All potential family-type resources must have their homes inspected by the local municipal fire department prior to the signing of the contract. Proof of this inspection must be

presented to the assessment worker.

- Notwithstanding the regulations of the local municipal fire department, all family-type resources must meet the following criteria.

Smoke Detectors and Fire Extinguishers:

- There must be at least one (1) fire extinguisher of the type 2A 10BC on each floor.
- There must be appropriately placed smoke detectors, on each floor and in every bedroom.
- Smoke detectors must be checked every 6 months, jointly by the caregiver and Head of Service or his/her delegate. Verification of smoke detectors is documented in the resource file.
- A carbon monoxide detector is mandatory if there are gas or wood-burning stoves in the home.

Safety Exits:

- There must be a minimum of two (2) exits per floor. On upper level or basement, windows may be considered exits.
- All exit door locks must have single cylinder locks.
- No storage of any kind is permitted in exit areas or in stairwells.
- All exits and balconies must be clear of debris and/or snow, and well salted for ice at all times.

Lighting:

- All family-type resources must have a working night light in the hallway.
- There must be a flashlight accessible on each floor.

Smoking:

- Smoking must only occur in specified area(s).
- Absolutely no smoking in bedrooms.
- The smoking area(s) should have adequate ventilation.
- Users with respiratory problems such as asthma or non-smoking users should have the right to a smoke-free environment.
- Caregivers who have difficulties controlling smoking of residents should discuss these difficulties with the Manager or user worker. Subsequently a plan should be set up.

Fire Safety:

- All family-type resources must have an evacuation plan posted on the wall in plain view.

- Caregivers must explain the evacuation plan to the residents in the presence of the Head of Service or his representative.

Dangerous Materials and Products:

- All dangerous materials and products (i.e. tools, supplies, etc.) must be stored in a safe, locked place.

Annual Evaluation:

- The Head of Service must ensure that an evaluation is done annually via the use of the Annual Checklist to verify whether the above safety regulations have been put into effect (see Appendix I).

Appendix I

ANNUAL SAFETY CHECKLIST / REVISED JUNE 2009

	Yes	No
1. Are there smoke detectors in the home and are they working?		
2. Is there a fire extinguisher on each floor and has it been checked in the last year?		
3. When applicable is there a functioning carbon monoxide detector?		
4. Is there a flashlight in working order accessible on each floor?		
5. Are the exits freely accessible?		
6. Do the exit doors work properly?		
7. Is there adequate lighting at each exit?		
8. Do all exit doors have single cylinder locks?		
9. Are bedroom doors lock free?		
10. Are the outside balconies cleared of ice and snow or any obstructions?		
11. Is there a working night light in the hallway?		
12. Are all dangerous and toxic materials locked away?		
13. Is there one designated smoking area in the home and is it adequately ventilated?		
14. Do the caregiver/clients/back-ups understand the procedures for evacuation?		
15. Has a fire drill exercise been completed during spring and fall?		
16. Does the resource conform to municipality security norms?		
17. Has the pool safety checklist been completed?		
18. Is the resource back up familiar with the procedures, routines and policies of this establishment?		
19. Have all new persons living or working with users been submitted to a verification of judicial records?		

Immediate actions required:

Safety Check list must be completed 2 times per year.

1. Annually by WMRC as part of the re-evaluation and support plan of the resource.
2. Annually in November by caregivers and returned to WMRC.

Date of Verification: _____

Signature of Resource

Signature of Human Relations Agent

Signature of Head of Rehabilitation

Annex III

Criteria for Users Residing in Family-Type Resources

1. The nature of the difficulties of the potential user should be clear and less complex than that of users living in contractual resources;
2. In addition to the diagnosis of mental retardation, the potential user may have accompanying disabilities including behavioural and medical problems which can be described as mild and easily managed in a family environment.
3. The potential user's medical and dental needs require regular review and follow-up on an annual or semi-annual basis. Coordination of professional appointments, accompaniment to appointments and assistance regarding treatment recommendations is required.
4. Generally, the user is able to participate in an external day program, on a regular basis. Exceptional circumstances: caregiver and user are in mutual agreement Re: no day program.
5. In addition to the activities organized by the Family-Type Resource, the potential user is able to participate in external social/recreational activities of his/her choice during leisure periods with assistance for initiation and coordination.
6. The potential user travels independently using public transportation or adapted transportation. Accompaniment by the caregiver only occurs in exceptional situations.

Annex IV

Criteria for Users Residing in Contractual Resources

1. The potential user has a dual diagnosis (ex. intellectual disability with psychiatric difficulties, physical or sensorial problems);
2. The potential user may have had previous several unsuccessful placement attempts, as a result of unmet user needs;
3. The potential user displays behaviours that are intensive, challenging, or difficult to manage;
4. The user has intensive medical needs (i.e. prognosis, severity, treatments and interventions required);
5. The level of assistance and supervision for the user's activities of daily living is intensive.
6. The potential user is unable to participate in a day program. Therefore, his/her programmed activity will be provided within the residential resource.
7. The potential user may require additional support and extensive supervision to be able to participate in external social/recreational activities of his/her choice;
8. The potential user may require accompaniment while using adapted transport, or may need to be supervised while using public transportation.

Annex V

Criteria for Family-Type Resource Caregiver

1. The caregiver, in addition to having qualities such as warmth, compassion, empathy, patience and respect for others with different values, beliefs, cultures, etc., must display the ability to be consistent, must be able to request assistance when needed, follow recommended intervention plans, and work collaboratively with others;
2. The caregiver should have some degree of educational and/or work related experience and training regarding caring for disabled individuals. He/she must participate in required workshops/in-service programs;
3. The caregiver must be able to care for individuals with an intellectual disability who may also possess other limitations, including physical and medical disabilities, and who may display mild behavioural difficulties;
4. The caregiver and his/her family are expected to be the users' primary care provider. The caregiver must assume continual responsibility for those in his/her care, and must potentially be available on an on-going basis. He/she is responsible for establishing an emergency back-up person(s). The occasional presence of others acting as substitute caregivers (back-up persons) is seen to be the exception. Substitute caregivers are generally used to enable the caregiver to have a vacation from his/her responsibilities, or during times of emergencies.
5. The caregiver must demonstrate the capacity to manage a budget and be able to cover their own and their family's financial needs outside the user's contribution.
6. The caregiver is expected to potentially be able to care for a maximum of 6 users in his/her residential resource. In order to promote a family-like atmosphere the maximum number of residents/users in a Family-Type Resource has been reduced, by our organisation from 9 to 6 users moving towards an ideal maximum of 4. In some situations there may be the potential for an extra bed to be used as an emergency or transition bed.
7. Health, financial, and emotional stability of the caregiver is a key element in his/her ability to provide the same for the client.
8. The caregiver's premises must be easily accessible to community services and to public transportation to facilitate social integration. The physical environment must conform to the municipal norms in force concerning health and safety. The space must meet the particular needs of the client(s). In situations where the premises are leased, the written authorization of the landlord is needed allowing the utilization of the premises for this purpose.
9. The state of the health of the Caregiver must not present a risk to the client(s) and this must be confirmed by a medical certificate.

N.B. For children, the resource will not exceed four (4) users.

Criteria for Contractual Resource Caregiver

1. The caregiver, in addition to having qualities such as warmth, compassion, empathy, patience and respect for others with different values, beliefs, cultures, etc., must display the ability to be consistent, must be able to request assistance when needed, follow recommended intervention plans, and work collaboratively with others.
2. In addition to the above, the caregiver has collegial education or experience judged to be equivalent especially regarding caring for disabled individuals. Priority will be given to caregivers with the most expertise and experience. He/she must participate in specially designed crisis intervention workshop/in-service programs.
3. The caregiver must be able to care for individuals with intellectual disability who also possess other disabilities/limitations, and especially, difficult to manage behaviours.
4. The caregiver must have confidence and a good knowledge base on psychiatric and behavioural interventions, including data collection on behavioural antecedents, behavioural modification techniques, etc.
5. The caregiver must be able to identify potential signs of deterioration such as in behavioural, mental, physical, or medical status, (ex.: reporting out-of-the-ordinary behaviour(s) that has resurfaced or that has increased in frequency, intensity, or occurrence).
6. The caregiver must possess a strong knowledge base regarding prescription medications, particularly psychiatric medications and administering PRN's.
7. The caregiver must demonstrate strong organizational skills, the capacity to manage a budget and be able to cover his/her own and his/her family's financial needs outside the user's contribution.
8. The caregiver is expected to assume continual responsibility for the users in his/her care. Therefore, the caregiver is expected to establish an emergency back-up system.
9. The caregiver is expected to potentially be able to care for a maximum of four (4) users in his/her contractual resource. In some situations there may be the potential for a 5th bed to be available in order to be used as an emergency or transitional bed.
10. Health, financial, and emotional stability of the caregiver is a key element in his/her ability to provide the same for the user.
11. The state of health of the caregiver must not present a risk to the user(s) and this must be confirmed by a medical certificate.
12. The caregiver's premises must be easily accessible to community services and to public transportation to facilitate social integration. The physical environment must conform to municipal norms in force concerning health and safety. The space must meet the particular needs of the user(s). In situations where the premises are leased, the written authorization

of the landlord is needed allowing the utilization of the premises for this purpose.

13. At times, a contractual resource will be validated for a specific user, and is therefore considered a specific contractual resource.

SPECIFIC RESPONSIBILITIES OF THE ORGANIZATION AND THE CAREGIVER

The caregiver is expected to receive higher premiums than those received by the Family-Type Resource caregivers, due to the level of intensity and specificity of the users' needs. Therefore, the caregiver is responsible for hiring/employing **additional** staff in order to best meet the users' needs.