

SPECIALIZED RESIDENTIAL CARE for CHILDREN & YOUTH

IN ONTARIO

Policies & Procedures Manual

TABLE OF CONTENTS

Policy 001: Administrative Structure Policy	1
1.1 Purpose of the Manual	1
1.2 Scope.....	1
1.3 Organizational Overview	1
1.4 Organizational Management	2
1.5 Service Description.....	2
1.6 Definitions	4
1.7 Resident Records	4
1.8 Initial Training and Annual Review: Policies and Procedures.....	6
1.9 Access to Policies and Procedures	6
1.10 Contravention of Policies and Procedures	6
Policy 002: Pre-Admission Assessment for Child Residential Placement	7
2.1 Purpose	7
2.2 Additional Authority	7
2.3 Scope	7
2.4 Responsible Party	7
2.5 Definitions.....	7
2.6 Policy Statement	7
2.7 Policy.....	8
2.8 Procedure.....	10
2.9 Review and Revision.....	12
2.10 References.....	12
2.11 Approval Signatures.....	12
2.12 Policy Distribution.....	13
Policy 003: Security Policy: Daily Log for Documenting Health, Safety, and Well-Being Events in Residential Care	14
3.1 Purpose	14
3.2 Additional Authority	14
3.3 Scope	14
3.4 Responsible Party	14
3.5 Definitions.....	14
3.6 Policy Statement	15
3.7 Policy.....	15
3.8 Procedure.....	16
3.9 Review and Revision.....	18
3.10 References.....	18
3.11 Approval Signatures.....	18

3.12 Policy Distribution.....	18
Policy 004: Agreement for Service in Providing Care and Authorization for Treatment and Records Management.....	19
4.1 Purpose	19
4.2 Additional Authority	19
4.3 Scope	19
4.4 Responsible Party	19
4.5 Definitions.....	19
4.6 Policy Statement	20
4.7 Policy.....	20
4.8 Procedure.....	22
4.9 Review and Revision.....	23
4.10 References.....	23
4.11 Approval Signatures.....	23
4.12 Policy Distribution.....	23
Policy 005: Residence Maintenance Policy and Agreement for Service - Financial Arrangements, Review and Fire Safety	24
5.7 Policy.....	24
5.8 Procedure.....	25
5.9 Review and Revision.....	27
5.10 References.....	27
5.11 Approval Signatures.....	27
5.12 Policy Distribution.....	27
Policy 006: Agreement for Service.....	28
6.6 Policy Statement	28
6.7 Policy.....	28
6.8 Procedure.....	30
Policy 007: Admission and Residents Orientation.....	32
7.1 Purpose	32
7.2 Additional Authority	32
7.3 Scope	32
7.4 Responsible Party	32
7.5 Definitions.....	32
7.6 Policy Statement	33
7.7 Policy.....	33
7.7.4 Rights and Responsibility Review Intervals	34
7.7.5 Complaint Handling	34
7.8 Procedure.....	34
7.11 Review and Revision.....	37
7.12 References.....	37
7.13 Approval Signatures.....	37
7.14 Policy Distribution.....	37
Policy 008: Plan of Care Development and Review for Residential Children	38

8.1 Purpose	38
8.2 Additional Authority	38
8.3 Scope	38
8.4 Responsible Party	38
8.5 Definitions	38
8.6 Policy Statement	39
8.7 Policy	39
8.8 Procedure	Error! Bookmark not defined.
8.9 Review and Revision	Error! Bookmark not defined.
8.10 References	Error! Bookmark not defined.
8.11 Approval Signatures	Error! Bookmark not defined.
8.12 Policy Distribution	Error! Bookmark not defined.
Policy 009: Plan of Care	Error! Bookmark not defined.
9.1 Purpose	Error! Bookmark not defined.
9.2 Additional Authority	Error! Bookmark not defined.
9.3 Scope	Error! Bookmark not defined.
9.4 Responsible Party	Error! Bookmark not defined.
9.5 Definitions	Error! Bookmark not defined.
9.6 Policy Statement	Error! Bookmark not defined.
9.7 Policy	Error! Bookmark not defined.
9.8 Procedure	Error! Bookmark not defined.
9.9 Review and Revision	Error! Bookmark not defined.
9.10 References	Error! Bookmark not defined.
9.11 Approval Signatures	Error! Bookmark not defined.
9.12 Policy Distribution	Error! Bookmark not defined.
Plan of Care Template	Error! Bookmark not defined.
1. Personal Strengths	Error! Bookmark not defined.
2. Identity Characteristics	Error! Bookmark not defined.
3. Needs and Behaviors	Error! Bookmark not defined.
4. Services and Treatment	Error! Bookmark not defined.
5. Medications	Error! Bookmark not defined.
6. Identification and Achievement of Goals	Error! Bookmark not defined.
7. Adult Ally	Error! Bookmark not defined.
8. Family and Placing Agency Involvement	Error! Bookmark not defined.
9. Safety Planning	Error! Bookmark not defined.
10. Desired Outcomes	Error! Bookmark not defined.
11. Education	Error! Bookmark not defined.
12. Activities and Supports	Error! Bookmark not defined.
13. Meals and Nutrition	Error! Bookmark not defined.
14. Access to Electronic Devices and the Internet	Error! Bookmark not defined.
15. Child's Preferences and Wishes	Error! Bookmark not defined.
16. Transfer or Discharge Plans	Error! Bookmark not defined.

17. Revisions	Error! Bookmark not defined.
Signatures	Error! Bookmark not defined.
Policy 10: Safety Planning Policy, Rights and Responsibilities, and Secure De-escalation Policy	Error! Bookmark not defined.
10.1 Purpose	Error! Bookmark not defined.
10.2 Additional Authority	Error! Bookmark not defined.
10.3 Scope	Error! Bookmark not defined.
10.4 Responsible Party	Error! Bookmark not defined.
10.5 Definitions	Error! Bookmark not defined.
10.6 Policy Statement	Error! Bookmark not defined.
10.7 Policy	Error! Bookmark not defined.
10.8 Procedure	Error! Bookmark not defined.
10.9 Review and Revision	Error! Bookmark not defined.
10.10 References	Error! Bookmark not defined.
10.11 Approval Signatures	Error! Bookmark not defined.
10.12 Policy Distribution	Error! Bookmark not defined.
Safety Plan: [Company Name]	Error! Bookmark not defined.
1. Purpose of the Safety Plan	Error! Bookmark not defined.
2. Risk Factors and Concerns	Error! Bookmark not defined.
3. Supervision Requirements	Error! Bookmark not defined.
4. De-Escalation Strategies	Error! Bookmark not defined.
5. Emergency Response Plan	Error! Bookmark not defined.
6. Communication with External Stakeholders	Error! Bookmark not defined.
7. Clinical and Therapeutic Support	Error! Bookmark not defined.
8. Involvement of the Child in the Plan	Error! Bookmark not defined.
9. Consultation and Collaboration	Error! Bookmark not defined.
10. Plan Review and Amendments	Error! Bookmark not defined.
11. Staff Training and Sign-Off	Error! Bookmark not defined.
12. Approval Signatures	Error! Bookmark not defined.
13. Distribution and Accessibility	Error! Bookmark not defined.
Policy 011: Medical and Dental Examinations, Immediate Medical Treatment, and Prescribed Medication Management for Residents at [Company Name]	Error! Bookmark not defined.
11.1 Purpose	Error! Bookmark not defined.
11.2 Additional Authority	Error! Bookmark not defined.
11.3 Scope	Error! Bookmark not defined.
11.4 Responsible Party	Error! Bookmark not defined.
11.5 Definitions	Error! Bookmark not defined.
11.6 Policy Statement	Error! Bookmark not defined.
11.7 Policy	Error! Bookmark not defined.
11.8 Procedure	Error! Bookmark not defined.
11.9 Review and Revision	Error! Bookmark not defined.
11.10 References	Error! Bookmark not defined.
11.11 Approval Signatures	Error! Bookmark not defined.

11.12 Policy Distribution.....	Error! Bookmark not defined.
Policy 12: Record of Medical and Dental Care and Regular Medical Intervals for Residents	
.....	Error! Bookmark not defined.
12.1 Purpose	Error! Bookmark not defined.
12.2 Additional Authority	Error! Bookmark not defined.
12.3 Scope	Error! Bookmark not defined.
12.4 Responsible Party	Error! Bookmark not defined.
12.5 Definitions.....	Error! Bookmark not defined.
12.6 Policy Statement	Error! Bookmark not defined.
12.7 Policy	Error! Bookmark not defined.
12.8 Procedure.....	Error! Bookmark not defined.
12.9 Review and Revision.....	Error! Bookmark not defined.
12.10 References	Error! Bookmark not defined.
12.11 Approval Signatures	Error! Bookmark not defined.
12.12 Policy Distribution.....	Error! Bookmark not defined.
Policy 013: Medical and Dental Care - Provided in Community	Error! Bookmark not defined.
13.1 Purpose	Error! Bookmark not defined.
13.2 Additional Authority	Error! Bookmark not defined.
13.3 Scope	Error! Bookmark not defined.
13.4 Responsible Party	Error! Bookmark not defined.
13.5 Definitions.....	Error! Bookmark not defined.
13.6 Policy Statement	Error! Bookmark not defined.
13.7 Policy	Error! Bookmark not defined.
13.8 Procedure.....	Error! Bookmark not defined.
13.9 Review and Revision.....	Error! Bookmark not defined.
13.10 References	Error! Bookmark not defined.
13.11 Approval Signatures	Error! Bookmark not defined.
13.12 Policy Distribution.....	Error! Bookmark not defined.
Policy 014: Self-Medication Plan for Children in Residential Care	Error! Bookmark not defined.
14.1 Purpose	Error! Bookmark not defined.
14.2 Additional Authority	Error! Bookmark not defined.
14.3 Scope	Error! Bookmark not defined.
14.4 Responsible Party	Error! Bookmark not defined.
14.5 Definitions.....	Error! Bookmark not defined.
14.6 Policy Statement	Error! Bookmark not defined.
14.7 Policy	Error! Bookmark not defined.
14.8 Procedure.....	Error! Bookmark not defined.
14.9 Review and Revision.....	Error! Bookmark not defined.
14.10 References	Error! Bookmark not defined.
14.11 Approval Signatures	Error! Bookmark not defined.
14.12 Policy Distribution.....	Error! Bookmark not defined.
Policy 015: Serious Occurrence Reporting Policy	Error! Bookmark not defined.

15.1 Purpose	Error! Bookmark not defined.
15.2 Additional Authority	Error! Bookmark not defined.
15.3 Scope	Error! Bookmark not defined.
15.4 Responsible Party	Error! Bookmark not defined.
15.5 Definitions.....	Error! Bookmark not defined.
15.6 Policy Statement	Error! Bookmark not defined.
15.7 Policy.....	Error! Bookmark not defined.
15.8 Procedure.....	Error! Bookmark not defined.
15.9 Review and Revision.....	Error! Bookmark not defined.
15.10 References	Error! Bookmark not defined.
15.11 Approval Signatures.....	Error! Bookmark not defined.
15.12 Policy Distribution.....	Error! Bookmark not defined.
Policy 16: Duty to Report Policy: Child Protection Reporting on File	Error! Bookmark not defined.
16.1 Purpose	Error! Bookmark not defined.
16.2 Additional Authority	Error! Bookmark not defined.
16.3 Scope	Error! Bookmark not defined.
16.4 Responsible Party	Error! Bookmark not defined.
16.5 Definitions.....	Error! Bookmark not defined.
16.6 Policy Statement	Error! Bookmark not defined.
16.7 Policy.....	Error! Bookmark not defined.
16.8 Procedure.....	Error! Bookmark not defined.
16.9 Review and Revision.....	Error! Bookmark not defined.
16.10 References	Error! Bookmark not defined.
16.11 Approval Signatures.....	Error! Bookmark not defined.
16.12 Policy Distribution.....	Error! Bookmark not defined.
Policy 017: Education, Parent Involvement, and Child's Rights in Residential Care.....	Error! Bookmark not defined.
17.1 Purpose	Error! Bookmark not defined.
17.2 Additional Authority	Error! Bookmark not defined.
17.3 Scope	Error! Bookmark not defined.
17.4 Responsible Party.....	Error! Bookmark not defined.
17.5 Definitions.....	Error! Bookmark not defined.
17.6 Policy Statement	Error! Bookmark not defined.
17.7 Policy.....	Error! Bookmark not defined.
17.8 Procedure.....	Error! Bookmark not defined.
17.9 Review and Revision.....	Error! Bookmark not defined.
17.10 References	Error! Bookmark not defined.
17.11 Approval Signatures.....	Error! Bookmark not defined.
17.12 Policy Distribution.....	Error! Bookmark not defined.
Policy 018: Food and Nutrition Policy: Special Dietary Requirements, Medical Advice, and Access to Food	Error! Bookmark not defined.
18.1 Purposes	Error! Bookmark not defined.

18.2 Additional Authority	Error! Bookmark not defined.
18.3 Scope	Error! Bookmark not defined.
18.4 Responsible Party	Error! Bookmark not defined.
18.5 Definitions.....	Error! Bookmark not defined.
18.6 Policy Statement	Error! Bookmark not defined.
18.7 Policy	Error! Bookmark not defined.
18.8 Procedure.....	Error! Bookmark not defined.
18.9 Review and Revision.....	Error! Bookmark not defined.
18.10 References	Error! Bookmark not defined.
18.11 Approval Signatures	Error! Bookmark not defined.
18.12 Policy Distribution.....	Error! Bookmark not defined.
Resident Dietary and Nutrition Plan Template	Error! Bookmark not defined.
Instructions for Use:	Error! Bookmark not defined.
Policy 19: Resident Complaints Policy: Handling Written Communication and Complaint Documentation in Residential Care	Error! Bookmark not defined.
19.1 Purpose	Error! Bookmark not defined.
19.2 Additional Authority	Error! Bookmark not defined.
19.3 Scope	Error! Bookmark not defined.
19.4 Responsible Party	Error! Bookmark not defined.
19.5 Definitions.....	Error! Bookmark not defined.
19.6 Policy Statement	Error! Bookmark not defined.
19.7 Policy	Error! Bookmark not defined.
19.8 Procedure.....	Error! Bookmark not defined.
19.9 Review and Revision.....	Error! Bookmark not defined.
19.10 References	Error! Bookmark not defined.
19.11 Approval Signatures	Error! Bookmark not defined.
19.12 Policy Distribution.....	Error! Bookmark not defined.
Appendix	Error! Bookmark not defined.
1. Written Communication Handling Form	Error! Bookmark not defined.
2. Complaint Filing Form	Error! Bookmark not defined.
3. Complaint Review and Investigation Form	Error! Bookmark not defined.
4. Complaint Debriefing Form	Error! Bookmark not defined.
5. Improper Material Removal Form	Error! Bookmark not defined.
6. Communication and Complaint Monitoring Log	Error! Bookmark not defined.
Policy 020: Clothing Provision and Documentation	Error! Bookmark not defined.
20.6 Policy Statement	Error! Bookmark not defined.
20.7 Policy	Error! Bookmark not defined.
20.8 Procedure.....	Error! Bookmark not defined.
20.9 Review and Revision.....	Error! Bookmark not defined.
20.10 References	Error! Bookmark not defined.
20.11 Approval Signatures	Error! Bookmark not defined.
20.12 Policy Distribution.....	Error! Bookmark not defined.

Policy 21: Discipline and Intervention Policy: Mechanical Restraint Policy: Record of Use of Discipline and Physical Restraints in Residential Care Error! Bookmark not defined.

21.1 Purpose	Error! Bookmark not defined.
21.2 Additional Authority	Error! Bookmark not defined.
21.3 Scope	Error! Bookmark not defined.
21.4 Responsible Party	Error! Bookmark not defined.
21.5 Definitions.....	Error! Bookmark not defined.
21.6 Policy Statement	Error! Bookmark not defined.
21.7 Policy	Error! Bookmark not defined.
21.8 Procedure.....	Error! Bookmark not defined.
21.9 Review and Revision.....	Error! Bookmark not defined.
21.10 References	Error! Bookmark not defined.
21.11 Approval Signatures	Error! Bookmark not defined.
21.12 Policy Distribution.....	Error! Bookmark not defined.

Appendix: Incident Documentation and Debriefing Form	Error! Bookmark not defined.
--	------------------------------

Policy 022: Cultural Competency Policy: Cultural Sensitivity in Child Care Services..... Error! Bookmark not defined.

22.1 Purpose	Error! Bookmark not defined.
22.2 Additional Authority	Error! Bookmark not defined.
22.3 Scope	Error! Bookmark not defined.
22.4 Responsible Party	Error! Bookmark not defined.
22.5 Definitions.....	Error! Bookmark not defined.
22.6 Policy Statement	Error! Bookmark not defined.
22.7 Policy	Error! Bookmark not defined.
22.8 Procedure.....	Error! Bookmark not defined.
22.9 Review and Revision.....	Error! Bookmark not defined.
22.10 References	Error! Bookmark not defined.
22.11 Approval Signatures	Error! Bookmark not defined.
22.12 Policy Distribution.....	Error! Bookmark not defined.

Cultural Competency and Individual Needs Assessment Form . Error! Bookmark not defined.

Signatures	Error! Bookmark not defined.
------------------	------------------------------

Policy 023: Medication Safety and Monitoring Error! Bookmark not defined.

23.1 Purpose	Error! Bookmark not defined.
23.2 Additional Authority	Error! Bookmark not defined.
23.3 Scope	Error! Bookmark not defined.
23.4 Responsible Party	Error! Bookmark not defined.
23.5 Definitions.....	Error! Bookmark not defined.
23.6 Policy Statement	Error! Bookmark not defined.
23.7 Policy	Error! Bookmark not defined.
23.8 Procedure.....	Error! Bookmark not defined.
23.9 Review and Revision.....	Error! Bookmark not defined.
23.10 References	Error! Bookmark not defined.
23.11 Approval Signatures	Error! Bookmark not defined.

23.12 Policy Distribution.....	Error! Bookmark not defined.
Medication Administration and Monitoring Log	Error! Bookmark not defined.
Notes for Completing the Log:	Error! Bookmark not defined.
Policy 024: Admission Health Records Management	Error! Bookmark not defined.
24.1 Purpose	Error! Bookmark not defined.
24.2 Additional Authority	Error! Bookmark not defined.
24.3 Scope	Error! Bookmark not defined.
24.4 Responsible Party	Error! Bookmark not defined.
24.5 Definitions.....	Error! Bookmark not defined.
24.6 Policy Statement	Error! Bookmark not defined.
24.7 Policy	Error! Bookmark not defined.
24.8 Procedure.....	Error! Bookmark not defined.
24.9 Review and Revision.....	Error! Bookmark not defined.
24.10 References	Error! Bookmark not defined.
24.11 Approval Signatures	Error! Bookmark not defined.
24.12 Policy Distribution.....	Error! Bookmark not defined.
Health Records Admission Form Template	Error! Bookmark not defined.
Policy 025: Prescription Medication Management and Communication	Error! Bookmark not defined.
25.1 Purpose	Error! Bookmark not defined.
25.2 Additional Authority	Error! Bookmark not defined.
25.3 Scope	Error! Bookmark not defined.
25.4 Responsible Party	Error! Bookmark not defined.
25.5 Definitions.....	Error! Bookmark not defined.
25.6 Policy Statement	Error! Bookmark not defined.
25.7 Policy	Error! Bookmark not defined.
25.8 Procedure.....	Error! Bookmark not defined.
25.9 Review and Revision.....	Error! Bookmark not defined.
25.10 References	Error! Bookmark not defined.
25.11 Approval Signatures	Error! Bookmark not defined.
25.12 Policy Distribution.....	Error! Bookmark not defined.
Policy 026: Short-Term Absences – Communication and Medication Information Management	Error! Bookmark not defined.
26.1 Purpose	Error! Bookmark not defined.
26.2 Additional Authority	Error! Bookmark not defined.
26.3 Scope	Error! Bookmark not defined.
26.4 Responsible Party	Error! Bookmark not defined.
26.5 Definitions.....	Error! Bookmark not defined.
26.6 Policy Statement	Error! Bookmark not defined.
26.7 Policy	Error! Bookmark not defined.
26.8 Procedure.....	Error! Bookmark not defined.
26.9 Review and Revision.....	Error! Bookmark not defined.
26.10 References	Error! Bookmark not defined.

26.11 Approval Signatures	Error! Bookmark not defined.
26.12 Policy Distribution	Error! Bookmark not defined.
Policy 27: Attendance at Scheduled Medical Appointments	Error! Bookmark not defined.
27.1 Purpose	Error! Bookmark not defined.
27.2 Additional Authority	Error! Bookmark not defined.
27.3 Scope	Error! Bookmark not defined.
27.4 Responsible Party	Error! Bookmark not defined.
27.5 Definitions.....	Error! Bookmark not defined.
27.6 Policy Statement	Error! Bookmark not defined.
27.7 Policy	Error! Bookmark not defined.
27.8 Procedure.....	Error! Bookmark not defined.
27.9 Review and Revision.....	Error! Bookmark not defined.
27.10 References	Error! Bookmark not defined.
27.11 Approval Signatures	Error! Bookmark not defined.
27.12 Policy Distribution.....	Error! Bookmark not defined.
Policy 28: Hospital Admission and Emergency Communication Procedures	Error! Bookmark not defined.
28.1 Purpose	Error! Bookmark not defined.
28.2 Additional Authority	Error! Bookmark not defined.
28.3 Scope	Error! Bookmark not defined.
28.4 Responsible Party	Error! Bookmark not defined.
28.5 Definitions.....	Error! Bookmark not defined.
28.6 Policy Statement	Error! Bookmark not defined.
28.7 Policy	Error! Bookmark not defined.
28.8 Procedure.....	Error! Bookmark not defined.
28.9 Review and Revision.....	Error! Bookmark not defined.
28.10 References	Error! Bookmark not defined.
28.11 Approval Signatures	Error! Bookmark not defined.
28.12 Policy Distribution.....	Error! Bookmark not defined.
Policy 29: Transfer of Medication, Medical Records, and Case Record Closure	Error! Bookmark not defined.
29.1 Purpose	Error! Bookmark not defined.
29.2 Additional Authority	Error! Bookmark not defined.
29.3 Scope	Error! Bookmark not defined.
29.4 Responsible Party	Error! Bookmark not defined.
29.5 Definitions.....	Error! Bookmark not defined.
29.6 Policy Statement	Error! Bookmark not defined.
29.7 Policy	Error! Bookmark not defined.
29.8 Procedure.....	Error! Bookmark not defined.
29.9 Review and Revision.....	Error! Bookmark not defined.
29.10 References	Error! Bookmark not defined.
29.11 Approval Signatures	Error! Bookmark not defined.
29.12 Policy Distribution.....	Error! Bookmark not defined.

Policy 030: Identity Policy: Services to Children and Identity-Related Support..Error! Bookmark not defined.

30.1 Purpose	Error! Bookmark not defined.
30.2 Additional Authority	Error! Bookmark not defined.
30.3 Scope	Error! Bookmark not defined.
30.4 Responsible Party	Error! Bookmark not defined.
30.5 Definitions.....	Error! Bookmark not defined.
30.6 Policy Statement	Error! Bookmark not defined.
30.7 Policy	Error! Bookmark not defined.
30.8 Procedure.....	Error! Bookmark not defined.
30.9 Review and Revision.....	Error! Bookmark not defined.
30.10 References	Error! Bookmark not defined.
30.11 Approval Signatures.....	Error! Bookmark not defined.
30.12 Policy Distribution.....	Error! Bookmark not defined.

Policy 031: Use of Mechanical Restraints Error! Bookmark not defined.

31.1 Purpose	Error! Bookmark not defined.
31.2 Additional Authority	Error! Bookmark not defined.
31.3 Scope	Error! Bookmark not defined.
31.4 Responsible Party	Error! Bookmark not defined.
31.5 Definitions.....	Error! Bookmark not defined.
31.6 Policy Statement	Error! Bookmark not defined.
31.7 Policy	Error! Bookmark not defined.
31.8 Procedure.....	Error! Bookmark not defined.
31.9 Review and Revision.....	Error! Bookmark not defined.
31.10 References	Error! Bookmark not defined.
31.11 Approval Signatures.....	Error! Bookmark not defined.
31.12 Policy Distribution.....	Error! Bookmark not defined.

Appendix Error! Bookmark not defined.

Consent Form for the Use of Mechanical Restraints and PASD Error! Bookmark not defined.

1. Authorization for the Use of Mechanical Restraints.....	Error! Bookmark not defined.
2. Authorization for the Use of PASD (if applicable)	Error! Bookmark not defined.
3. Consent for Plan of Treatment.....	Error! Bookmark not defined.
Acknowledgement.....	Error! Bookmark not defined.
Plan of Treatment Template.....	Error! Bookmark not defined.
1. Clinical Justification for the Use of Mechanical Restraints	Error! Bookmark not defined.
2. Plan for the Use of PASD (if applicable)	Error! Bookmark not defined.
3. Clinical and Support Services	Error! Bookmark not defined.
4. Duration of Mechanical Restraint Use	Error! Bookmark not defined.
5. Monitoring Plan	Error! Bookmark not defined.
6. Repositioning and Removal of PASD	Error! Bookmark not defined.
7. Plan of Treatment Review and Amendments	Error! Bookmark not defined.
Signatures	Error! Bookmark not defined.

Acknowledgement	Error! Bookmark not defined.
Policy 032: Mechanical Restraints – Secure Treatment Program ...	Error! Bookmark not defined.
32.1 Purpose	Error! Bookmark not defined.
32.2 Additional Authority	Error! Bookmark not defined.
32.3 Scope	Error! Bookmark not defined.
32.4 Responsible Party	Error! Bookmark not defined.
32.5 Definitions.....	Error! Bookmark not defined.
32.6 Policy Statement	Error! Bookmark not defined.
32.7 Policy	Error! Bookmark not defined.
32.8 Procedure.....	Error! Bookmark not defined.
32.9 Review and Revision.....	Error! Bookmark not defined.
32.10 References	Error! Bookmark not defined.
32.11 Approval Signatures	Error! Bookmark not defined.
32.12 Policy Distribution.....	Error! Bookmark not defined.
Appendix	Error! Bookmark not defined.
Mechanical Restraint Incident Report and Behavior Intervention Documentation Form.....	Error! Bookmark not defined.
Instructions for Completing the Form:	Error! Bookmark not defined.



Copyright – The Write Direction Inc.





Policy 001: Administrative Structure Policy

1.1 Purpose of the Manual

The policies and procedures detailed in this manual serve to provide clear, consistent guidance for [Company Name] in operating a children's residence. The purpose is to ensure alignment with the *Child, Youth, and Family Services Act, 2017* (CYFSA) and all relevant regulations governing the care of children and youth in Ontario. By adhering to these policies, [Company Name] demonstrates its commitment to promoting the best interests, protection, and well-being of the children and youth it serves.

This manual ensures that the group home meets all legislative requirements, maintains high standards of care, and provides structured operational protocols. Through consistent application of these policies, the organization fosters an environment where children's safety, dignity, and personal development are prioritized. This manual also serves as a reference point for staff, outlining roles and responsibilities to ensure compliance with regulatory obligations.

1.2 Scope

The policies and procedures contained within this manual apply to all individuals and stakeholders involved with [Company Name]. This includes the licensee ([Company Name]), its staff, the residents in care, their parents and guardians, as well as placing agencies. These guidelines ensure that all parties understand their roles and the processes that support the provision of care in the residence.

The manual is intended to guide day-to-day operations within the residence, providing a framework for decision-making and the management of various situations that may arise. It covers all activities related to the intake, care, and discharge of residents, ensuring the well-being of children and youth while respecting their rights under CYFSA and related laws. Staff members at all levels of the organization refer to this document to inform their practices, which ensures consistency and transparency in service delivery.

1.3 Organizational Overview

[Company Name] was established in Ontario with a profound commitment to creating a nurturing, stable, and secure environment for children and youth who have experienced trauma. The organization's overarching mission is to provide a supportive, family-like setting where children and youth are given the opportunity to heal, grow, and realize their full potential. [Company Name] operates with a deep understanding of the long-lasting effects of trauma on a child's development and is dedicated to offering culturally sensitive, trauma-informed care that emphasizes the holistic well-being of each resident.

The core belief at [Company Name] is that every child, regardless of their background or experiences, deserves an environment that fosters emotional, physical, mental, and spiritual growth. This philosophy is grounded in the principles of empathy, respect, and the intrinsic value of each child, guiding the organization's approach to care. By partnering with the child, their family (when possible), community resources, and cultural supports, [Company Name] ensures that its services are both inclusive and personalized, meeting the unique needs of each child it serves.

[Company Name] aims to create not only a residence for children but also a therapeutic environment where they can overcome past traumas and prepare for a successful future. This is achieved through a blend of therapeutic approaches, culturally informed practices, and a nurturing home environment, positioning [Company Name] as a leading provider of specialized care for children and youth in Ontario.

1.4 Organizational Management

The management structure at [Company Name] is designed to ensure efficient operation while maintaining the highest standards of care and compliance with regulatory frameworks, particularly the *Child, Youth and Family Services Act, 2017* (CYFSA). Leadership at [Company Name] consists of a highly skilled team dedicated to the well-being of the children and youth in its care, led by the Chief Executive Officer (CEO)/President who oversees all operations. The CEO is responsible for strategic planning, compliance with CYFSA requirements, and ensuring that the organization's vision and mission are consistently upheld.

The **CEO/President** leads a management team that includes the **Clinical Supervisor**, **Care Providers**, **Intake Coordinator**, and **Case Managers**. Each of these roles has distinct responsibilities, but all work collaboratively to deliver comprehensive care to residents.

- i. The **CEO/President** is primarily responsible for [REDACTED]
- ii. The **Clinical Supervisor** oversees the [REDACTED]
- iii. **Care Provider and Case Manager:** Responsible for the [REDACTED]
- iv. The **Intake Coordinator** manages the [REDACTED]

All staff members undergo continuous professional development and training in trauma-informed care, cultural competence, and best practices in child welfare. This ensures that [Company Name] provides consistent, high-quality care to all residents while adhering to the principles of empathy, respect, and individualized attention.

1.5 Service Description

[Company Name] provides specialized residential care for children and youth aged 12 to 18 years, focusing particularly on those who have experienced trauma, neglect, or abuse. The organization operates a staff-model home that accommodates up to three children/youth, with the flexibility to expand in cases of sibling placements. The program is designed to offer a safe, therapeutic, and culturally enriched environment that promotes healing, personal growth, and preparation for reintegration into family settings or independent living.

1.5.1 Trauma-Informed and Culturally Sensitive Care

[Company Name] employs a trauma-informed approach that recognizes the profound impact that trauma has on a child's development and behavior. This approach shifts the focus from "What's wrong with this child?" to "What happened to this child?" By understanding the root causes of a child's

behavioral and emotional challenges, the care team at [Company Name] is able to provide interventions that are both compassionate and effective.

The care provided is also culturally sensitive, with a particular focus on the needs of youth. [Company Name] recognizes the importance of cultural identity and spirituality in the healing process and integrates cultural teachings, practices, and the wisdom of Elders into its program. This ensures that children feel a deep connection to their heritage and are provided with opportunities to explore their identity in a supportive environment. The use of the Medicine Wheel, with its focus on mental, spiritual, emotional, and physical well-being, is a cornerstone of the organization's service philosophy for the youth.

1.5.2 Family-Centered and Individualized Care Plans

Each child or youth admitted to [Company Name] receives an individualized care plan that is developed in collaboration with the child, their family (when possible), and other stakeholders such as placing agencies or external therapists. These care plans address the child's unique emotional, behavioral, educational, and cultural needs and are reviewed and updated regularly to reflect the child's progress and any changing circumstances.

Family involvement is a key aspect of the care model at [Company Name]. Whenever possible, the organization works to reintegrate children with their families or prepare them for placement in less restrictive environments such as foster care or independent living. Family visits, cultural supports, and therapeutic interventions are provided to help strengthen family bonds and promote healthy attachments.

1.5.3 Therapeutic Milieu

The residential environment at [Company Name] is designed to provide a therapeutic milieu where children can feel safe, respected, and valued. The home is structured to offer a balance of routine and flexibility, giving children the security of predictable boundaries while also fostering independence and personal responsibility.

The therapeutic programming focuses on developing essential life skills, emotional regulation, and interpersonal relationships. Children are supported in

In addition to skill-building, the program places a strong emphasis on

1.5.4 Support for High-Risk and Complex Needs

[Company Name] is equipped to care for children and youth with complex needs, including those with mental health challenges, behavioral issues, and trauma-related responses. The organization works closely with external mental health professionals, counselors, and social workers to ensure that all residents receive the specialized care they require. Children with high-risk behaviors are provided with additional support to ensure their safety and the safety of others in the home.

The program's therapeutic interventions are designed to address issues such as grief, loss, attachment disruptions, and behavioral difficulties. These interventions are tailored to each child's unique circumstances and are delivered by trained care providers who have expertise in trauma-informed care and crisis intervention.

1.5.5 Outcome-Focused Programming

The ultimate goal of [Company Name] is to help children and youth achieve a successful transition to a more stable and less intrusive environment, whether that is reunification with their family, foster care, or independent living. The organization's programming is outcome-focused, with clear goals and measurable indicators of success for each child.

Progress is monitored through [REDACTED]

1.5.6 Community and Cultural Integration

A critical aspect of the [Company Name] service model is the integration of community and cultural resources into the care of its residents. The organization collaborates with local community centers, cultural organizations, and spiritual leaders to provide children with access to a broad network of support. Whether through participation in community events, cultural ceremonies, or mentorship programs, children at [Company Name] are given the tools to engage with their community and develop a strong sense of belonging.

This integration of community and cultural resources not only enhances the child's development but also ensures that they have a support network in place when they leave the program. By building relationships with community members and learning about their cultural heritage, children are better equipped to face the challenges of life beyond the residential setting.

1.6 Definitions

This section outlines the key terms used within the policies and procedures manual. By clarifying these terms, [Company Name] ensures that all staff and stakeholders understand the specific meanings attributed to these concepts within the context of the group home's operations.

- i. **Resident:** A child or youth placed in the care of [Company Name]
- ii. **Placing Agency:** An organization or individual responsible for the placement of a child or youth into the residence. This may include child protection agencies, parents, or guardians.
- iii. **Care Provider:** Staff members at [Company Name] who are responsible for the day-to-day care and supervision of residents.
- iv. **Licensee:** [Company Name], as the organization holding the license to operate a children's residence under the CYFSA.
- v. **Case Record:** The collection of all documents and information related to a specific resident, including personal history, legal documents, assessments, and other pertinent information required by the CYFSA.

1.7 Resident Records

[Company Name] maintains a comprehensive case record for each resident, ensuring that all legal, personal, and procedural information is documented in compliance with *O. Reg. 156/18 of the Child, Youth, and Family Services Act*. These records are securely stored and are available to authorized personnel, ensuring confidentiality and the protection of residents' personal information. The following subsections detail the specific requirements for resident records.

1.7.1 Resident's Name, Sex, and Date of Birth

[Company Name] includes the full name, sex, and date of birth of each resident in their respective case records. This essential information is recorded upon admission and is maintained throughout the resident's stay. The care team ensures this information is accurate and accessible for the purposes of identification and care planning. {O. Reg. 156/18, s.93(1)(a)}

1.7.2 Parent/Guardian/Placing Agency Contact Information

The case record for each resident includes the name, address, and telephone number of the parent or guardian, as well as any placing agency or individual who facilitated the placement of the resident in the home. [Company Name]'s intake coordinator collects and verifies this contact information at the time of admission, ensuring that it is updated as necessary during the resident's stay. {O. Reg. 156/18, s.93(1)(b)}

1.7.3 Social and Family History/Assessment on File

[Company Name] collects and retains any personal, family, and social history that has been provided or prepared for each resident. This history is crucial in understanding the background and unique needs of the resident, and it informs individualized care plans. The care team ensures that this assessment is kept current and reflects any significant changes in the resident's circumstances or family dynamics. {O. Reg. 156/18, s.93(1)(d)}

1.7.4 Reason for Admission

At the time of intake, [Company Name] records the reason for each resident's admission. This information, which may include factors such as safety concerns, behavioral issues, or the need for specialized care, is documented in the resident's case record to provide context for their stay and to guide the development of care plans. {O. Reg. 156/18, s.93(1)(c)}

1.7.5 Legal Documents Concerning Admission

[Company Name] includes in the resident's case record any legal documents pertaining to their admission and stay in the residence. This includes, when available, consent forms for admission, treatment, and the release of information. The intake coordinator ensures that these documents are obtained and filed at the time of admission, and any updates or additional documents are added to the record as necessary. {O. Reg. 156/18, s.93(1)(f)}

1.7.6 Agreement for Service

For each resident, [Company Name] includes a copy of the service agreement, as described in section 88 of the CYFSA, in their case record. This agreement outlines the terms and conditions of the resident's care, and it is reviewed and updated as needed. All reviews and revisions of the agreement are documented in the case record to ensure transparency and accountability in the provision of care. {O. Reg. 156/18, s.93(1)(g)}

1.7.7 Court Experience/Involvement

[Company Name] ensures that any involvement a resident has with the court system is documented in their case record. This may include court appearances, legal orders, or any other court-related matters relevant to the resident's care and stay in the residence. This documentation allows the care team to coordinate with legal representatives and provide appropriate support for the resident. {O. Reg. 156/18, s.93(1)(m)(ii)}

1.7.8 Experiences of Separation

[Company Name] documents any experiences of separation that a resident has had from significant individuals in their life, including family members or caregivers. These experiences are crucial to understanding the emotional and psychological needs of the resident and inform the development of therapeutic and supportive interventions. The care team updates this information regularly to ensure that all significant events are captured. {O. Reg. 156/18, s.93(1)(m)(iii)}

1.7.9 French Language Services

[Company Name] provides French language services to residents and their families where appropriate, in accordance with *CYFSA section 16*. This commitment ensures that linguistic needs are met and that residents and their families can communicate effectively with the care team in their preferred language. The availability of French language services is documented in the resident's case record. {CYFSA s.16}

1.7.10 Other Information

[Company Name] includes any other information required under the regulations or deemed necessary by the licensee in the resident's case record. This may include additional assessments, reports, or notes that are relevant to the care and well-being of the resident. The care team ensures that all pertinent information is captured and appropriately filed, supporting a holistic approach to care. {O. Reg. 156/18, s.93(1)(o)(p)}

1.8 Initial Training and Annual Review: Policies and Procedures

[Company Name] ensures that all staff receive comprehensive training on the residence's policies and procedures within 30 days of commencing employment. This includes training on emergency procedures and specific protocols required by the CYFSA. Staff also review these policies annually to ensure continuous alignment with current practices and regulatory standards. The Clinical Supervisor coordinates this training, ensuring all team members are well-prepared to handle their responsibilities effectively.

1.9 Access to Policies and Procedures

Staff have access to all policies and procedures, which are stored in a central, easily accessible location. [Company Name] ensures these documents are regularly updated to reflect current regulations and best practices. Staff are responsible for staying informed of these updates and applying them in their daily work, ensuring alignment with the CYFSA and other relevant laws. The Intake Coordinator verifies that all new staff receive and understand these documents, and the Clinical Supervisor ensures ongoing compliance.

1.10 Contravention of Policies and Procedures

In situations where policies or procedures are not followed, staff report these incidents immediately to the Clinical Supervisor or CEO/President. [Company Name] has protocols in place for addressing non-compliance, including documenting the incident, conducting a review, and implementing corrective actions. Staff are made aware of these protocols during their initial training, and the Clinical Supervisor monitors adherence to policies to prevent future contraventions.

Policy 002: Pre-Admission Assessment for Child Residential Placement

2.1 Purpose

[Redacted content]

2.2 Additional Authority

- **Ontario Regulation 156/18, s.86.1** – Content and Process for Pre-Admission Assessment
- **Ontario Regulation 156/18, s.86.2** – Conditions and Requirements for Placement

2.3 Scope

This policy applies to all children and youth considered for placement at [Company Name], as well as to all staff involved in the assessment, evaluation, and admission process. This includes the Residential Care Manager, caseworkers, social workers, residential care staff, and any other relevant personnel involved in the pre-admission procedures.

2.4 Responsible Party

The **Residential Care Manager** at [Company Name] is responsible for overseeing, administering, and ensuring the implementation and compliance of this policy.

2.5 Definitions

- **Licensee:** [Redacted]
- **Placing Agency:** [Redacted]
- **Safety Plan:** [Redacted]

2.6 Policy Statement

[Company Name] is committed to providing a nurturing, safe, and developmentally appropriate environment for children and youth placed in its care. The pre-admission assessment process is a critical component in ensuring that the residential setting can meet the immediate and ongoing needs of the child, while also considering the impact on the current residents. This policy ensures compliance

with **Ontario Regulation 156/18** and reflects the organization's commitment to upholding the highest standards of care for children in residential settings. The pre-admission assessment helps [Company Name] make informed decisions regarding each potential placement, ensuring safety, well-being, and compliance with legal and regulatory requirements.

2.7 Policy

2.7.1 Content of Assessment:

1. The **Residential Care Manager** ensures that a comprehensive written report is included in the child's case record. The report is completed prior to making a decision to admit the child and is dated accordingly. This report must demonstrate that an evaluation was carried out before admission. The report includes the following essential information:
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
2. Additionally, the **Residential Care Manager** ensures that any information about existing residents in the home (children or adults) relevant to the admission is included in the assessment. This includes:
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
3. The **Residential Care Manager** must also provide detailed information regarding the training completed by staff who will provide direct care to the child, ensuring the staff are adequately prepared to meet the specific needs of the child being admitted.

2.7.2 Written Report Provided to Placing Agency – Needs:

1. Based on the evaluation of the child's needs, the **Residential Care Manager** ensures that a written report summarizing the pre-admission assessment is included in the child's case file. The report must include:
 - [REDACTED] needs.
 - [REDACTED]
 - [REDACTED]
2. This written report is provided to the placing agency or individual before a final decision on admission is made, in [REDACTED]. The **Residential Care Manager** [REDACTED]

2.7.3 Written Report Provided to Placing Agency – Other Residents and Staff Training:

1. A separate written report is provided to the placing agency regarding other individuals currently residing in the home. This report includes:
 - [REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]

2. The **Residential Care Manager** ensures that the written report is shared with the placing agency or individual, documenting confirmation that the report has been provided and reviewed. In compliance with privacy laws, no personal information regarding other residents is shared with the placing agency.

2.7.4 Conditions on Placement:

The **Residential Care Manager** ensures that the child is only admitted to the residence after the following steps have been completed:

1. [REDACTED]
2. [REDACTED]

2.7.5 Information Gathered within 30 Days:

Within 30 days of the child's admission, the **Residential Care Manager** collects and documents any additional information not obtained during the pre-admission process, ensuring that the following details are complete and up to date:

1. [REDACTED]
2. [REDACTED]
3. [REDACTED]

2.7.6 Disciplinary Procedures

[Company Name] strictly adheres to Ontario Regulation 156/18 regarding disciplinary measures. All staff members are informed of acceptable and unacceptable methods of discipline. No harsh or degrading practices, such as depriving residents of basic needs, are permitted. Staff are trained to recognize behaviors that may warrant intervention and the appropriate steps to take.

2.7.7 Record of Disciplinary Procedures

Any disciplinary measures are promptly recorded in the resident's case file by the individual administering the intervention. The **Residential Care Manager** is informed of all disciplinary actions to ensure compliance with Ontario Regulation 156/18.

2.7.8 Corporal Punishment

[Company Name] strictly prohibits corporal punishment in any form, in accordance with the **CYFSA Part II, s.4**.

2.7.9 Locked Premises

Children at [Company Name] are never detained in locked premises, as per **CYFSA Part II s.5**. All staff are trained to manage behaviors without resorting to confinement.

2.8 Procedure

2.8.1 Pre-Admission Assessment Procedure:

1. Initial Contact:

- Upon receiving a referral for placement, the **Residential Care Manager** promptly schedules an initial meeting with the placing agency or individual responsible for the child. The purpose of this meeting is to [REDACTED]
- During this initial meeting, the **Residential Care Manager** collects basic information about the child, including:
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]

2. Comprehensive Evaluation Process:

The **Residential Care Manager**, along with relevant staff members, conducts a detailed and thorough evaluation of the child's current needs. This evaluation will include a multi-disciplinary approach to ensure a complete understanding of the child's developmental, emotional, medical, and psychological condition. The following areas must be evaluated:

○ Medical History:

- [REDACTED]
- [REDACTED]
- [REDACTED]

○ Psychological and Behavioral History:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

○ Educational Background:

- [REDACTED]
- [REDACTED]

- Coordination with local educational services to ensure that the child's educational needs are met upon placement, including enrollment in appropriate schooling, tutoring, or special education programs.
- **Social and Family History:**
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
- 3. **Risk and Safety Assessment:**
 - The **Residential Care Manager** and team conduct a thorough risk assessment to evaluate any behaviors that may pose risks to the child or others within the residential setting. This assessment will focus on:
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
- 4. **Compatibility Review:**
 - The **Residential Care Manager** performs a compatibility review to assess the potential impact of the new child on existing residents and vice versa. This includes:
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
- 5. **Training Review:**
 - The **Residential Care Manager** verifies that all staff members who will be directly involved in the care of the new child have received appropriate training. This includes:
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
- 6. **Report Preparation and Documentation:**
 - Once the evaluation is complete, the **Residential Care Manager** prepares a detailed written report that documents all findings from the pre-admission assessment. This report will include:
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]

- [REDACTED]
- [REDACTED]
- The report must be shared with the placing agency or individual before a decision is made regarding admission. The **Residential Care Manager** ensures that the report is transmitted securely, and confirmation of receipt and review is obtained from the placing agency.

2.8.2 Post-Admission Follow-Up:

1. First 30 Days of Placement:

- After the child has been admitted to the residential setting, the **Residential Care Manager** ensures that ongoing monitoring and assessment are conducted during the first 30 days of placement. This includes:
 - **Daily Observation:** [REDACTED]
 - **Regular Communication:** [REDACTED]
 - **Additional Assessments:** [REDACTED]

2. Updating Care Plans:

- Based on observations and any additional information gathered during the first 30 days, the child's care plan is updated to reflect their current needs. This involves:
 - **Reassessing Needs:** [REDACTED]
 - **Modifying Interventions:** [REDACTED]
 - **Ensuring Compliance:** [REDACTED]

2.9 Review and Revision

This policy will be reviewed and revised annually or as needed to ensure ongoing compliance with regulatory requirements and alignment with best practices in residential care. The **Residential Care Manager** is responsible for initiating the review and revision process.

2.10 References

- Ontario Regulation 156/18, s.86.1
- Ontario Regulation 156/18, s.86.2

2.11 Approval Signatures



- Residential Care Manager: _____ Date: _____

2.12 Policy Distribution



Copyright – The Write Direction Inc.



Policy 003: Security Policy: Daily Log for Documenting Health, Safety, and Well-Being Events in Residential Care

3.1 Purpose

The purpose of this policy is to ensure that [Company Name] maintains comprehensive, accurate, and up-to-date daily logs documenting any events that affect or may affect a resident's health, safety, or well-being. These logs are critical to ensuring the protection and well-being of children placed in care and are required under the **Minister's Regulation 95 clause (2)(e)**. The logs serve as a fundamental tool for monitoring the day-to-day experiences of residents, facilitating communication between staff, and ensuring that all significant events are addressed promptly and appropriately. This policy ensures that all documentation aligns with regulatory requirements and the high standards of care provided by [Company Name]

3.2 Additional Authority

- **Minister's Regulation 95(2)(e)** – Requirements for documenting events affecting a resident's health, safety, or well-being in a children's residence.
- **Child, Youth and Family Services Act (CYFSA), 2017** – Governing legislation for the care and protection of children in Ontario.
- **Ontario Regulation 156/18, s.86.2** – Residential care standards and requirements.

3.3 Scope

This policy applies to all residents of [Company Name] and covers all events, incidents, or situations that could impact their health, safety, or well-being. All staff involved in direct care, administration, or supervision of the residential setting, including residential caregivers, caseworkers, and the Residential Care Manager, are responsible for complying with this policy. The policy applies to any event observed, reported, or suspected, and to all documentation created as part of the daily log process.

3.4 Responsible Party

The **Residential Care Manager** at [Company Name] is responsible for [REDACTED]

3.5 Definitions

- **Daily Log:** A written or digital record maintained daily by [Company Name] to document any event, incident, or situation that affects or may affect a child's health, safety, or well-being.
- **Health:** Any physical or mental condition that affects the child, including medical issues, medication administration, and any new or worsening symptoms.
- **Safety:** Any event or risk that could compromise the physical safety of the child, including accidents, injuries, aggressive behavior, or environmental hazards.

- **Well-Being:** A holistic measure that includes the emotional, psychological, and social health of the child, as well as their overall comfort and happiness in the residential setting.
- **Serious Occurrence:** An event as defined under the **Child, Youth, and Family Services Act** that requires immediate reporting to the Ministry of Children, Community, and Social Services, such as abuse, serious injury, or missing persons.

3.6 Policy Statement

[Company Name] is committed to the ongoing health, safety, and well-being of every child placed in its care. As part of this commitment, staff document daily any events or incidents that may impact the residents in accordance with **Minister's Regulation 95**. The use of daily logs ensures that all relevant information is available to assess the needs of the children, mitigate any potential risks, and provide transparent communication between staff members, management, and relevant external agencies.

All documented events are reviewed regularly to ensure that appropriate action is taken to address any concerns. This policy reflects [Company Name]'s dedication to providing a safe, nurturing environment where each resident's physical and emotional needs are fully supported.

3.7 Policy

3.7.1 Daily Log: Health, Safety, and Well-Being Documentation

1. Documentation of Events:

- All staff are required to document any event that affects or may affect the health, safety, or well-being of a resident in the daily log. The following types of events must be recorded:

- **Health:** [REDACTED]
- **Safety:** [REDACTED]
- **Well-Being:** [REDACTED]

- The entry for each event must include:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

2. Serious Occurrences:

- If the event constitutes a **serious occurrence** as defined by the **CYFSA** or **Minister's Regulation 95**, staff must immediately notify the **Residential Care Manager**. Serious occurrences include:

- [REDACTED]
- [REDACTED]
- [REDACTED]

- In these cases, the **Residential Care Manager** ensures that the incident is reported to [REDACTED]

3. Review and Follow-Up:

- The **Residential Care Manager** reviews all [REDACTED]
[REDACTED]
[REDACTED] If necessary, the **Residential Care Manager** follows up [REDACTED].
 - In the case of recurring events or patterns (e.g., repeated medical issues or behavioral incidents), the **Residential Care Manager** [REDACTED]
[REDACTED].
4. **Staff Communication and Handovers:**
- The daily log is used as a critical tool for communication during staff handovers and team meetings. The **Residential Care Manager** ensures [REDACTED]
[REDACTED].
5. **Parental and Placing Agency Communication:**
- For any significant events that may affect the health, safety, or well-being of the child, the **Residential Care Manager** ensures that the [REDACTED]
[REDACTED].

3.7.2 In Charge

When more than one staff member is on duty, one person is always designated by the management as the individual in charge of the shift. In relation to physical restraints, there is always at least one staff member on duty who has completed the required training in accordance with **O. Reg. 156/18, s.98(3)**. The **Residential Care Manager** [REDACTED]
[REDACTED].

3.7.3 Absence

In the event that the **Residential Care Manager** is unavailable, the [REDACTED]
[REDACTED] 2 is designated to act on their behalf. This ensures continuity in the day-to-day management [REDACTED]
[REDACTED].

3.8 Procedure

3.8.1 Daily Log Procedure

1. **Daily Logging Process:**

- [REDACTED]
[REDACTED].
- [REDACTED]
[REDACTED].
- [REDACTED]
[REDACTED].
- Logs must include the following key details:
 - [REDACTED].
 - [REDACTED].

- [REDACTED]
- [REDACTED]
- [REDACTED]

2. Incident Types:

The following incidents must be recorded in detail:

- **Medical Incidents:**
 - All medical issues or interventions, [REDACTED]
- **Behavioral Incidents:**
 - Any behavioral issues that affect the safety or well-being of the resident or others, [REDACTED]
- **Environmental Incidents:**
 - Any safety hazards in the environment that could affect the resident's well-being, [REDACTED]
- **Well-Being Concerns:**
 - Any changes in a resident's emotional or psychological state [REDACTED]

3. Serious Occurrences:

- In cases where the event is categorized as a **Serious Occurrence** under the **CYFSA**, staff must follow the serious occurrence reporting protocol, which includes:
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]

4. End-of-Shift Review:

- At the end of each shift, the **Residential Care Manager** or the designated shift supervisor reviews the daily logs to ensure all incidents are recorded comprehensively. The review focuses on verifying:
 - [REDACTED]
 - [REDACTED]
- The **Residential Care Manager** documents any patterns of behavior, [REDACTED]

5. Monthly Review:

- Once a month, the **Residential Care Manager** conducts a full review of the daily logs [REDACTED]

- Following the review, the **Residential Care Manager** develops action plans to address any concerns that arise. For example:

- **Behavioral Trends:** If a resident exhibits ongoing behavioral challenges, [REDACTED]
- **Health Concerns:** Recurrent medical issues, such as asthma attacks or [REDACTED]
- **Safety Risks:** If environmental hazards, such as faulty equipment or structural [REDACTED]

6. **Staff Training:**

- [Company Name] ensures that all staff members are trained in the proper use of the daily logs, including the documentation of events, the categorization of incidents, and the follow-up actions required. The **Residential Care Manager** [REDACTED]
- Staff are also trained on how to identify and report serious occurrences, the importance [REDACTED]

3.9 Review and Revision

This policy is reviewed annually or whenever necessary to ensure that it remains in compliance with regulatory changes or internal process updates. The **Residential Care Manager** is responsible for initiating the review process and ensuring that all staff are informed of any changes to the policy.

3.10 References

- **Minister's Regulation 95(2)(e)** – Documentation of events affecting resident health, safety, or well-being.
- **Child, Youth and Family Services Act (CYFSA), 2017**
- **Ontario Regulation 156/18, s.86.2** – Residential care standards.

3.11 Approval Signatures

[REDACTED]

3.12 Policy Distribution

- [REDACTED]

Policy 004: Agreement for Service in Providing Care and Authorization for Treatment and Records Management

4.1 Purpose

The purpose of this policy is to outline the procedures and requirements for obtaining and maintaining a formal Agreement for Service between [Company Name] and the placing agency or legal guardian of each child. This agreement is vital to ensuring that appropriate legal consent and authorization are in place to provide residential care, seek emergency medical treatment, and access the child's records when necessary. These agreements protect the rights of the child while ensuring that [Company Name] operates in full compliance with the **Minister's Regulation 88 (2)** and other applicable laws. The agreement covers several key areas: permission for care, authority for emergency medical decisions, and access to records or reports relevant to the child's well-being and safety.

4.2 Additional Authority

- **Minister's Regulation 88 (2) Paragraph 1(i)** – [REDACTED]
- **Minister's Regulation 88 (2) Paragraph 1(ii)** – [REDACTED]
- **Minister's Regulation 88 (2) Paragraph 1(iii)** – [REDACTED]

4.3 Scope

This policy applies to all children placed in the care of [Company Name]. The **Residential Care Manager**, case managers, social workers, and legal guardians or placing agencies involved in the child's placement are responsible for ensuring that all required consents and agreements are properly documented, reviewed, and maintained. This policy guides the actions of staff members in securing the appropriate authorization to provide care, seek emergency medical treatment, and obtain necessary records for the care and management of each child.

4.4 Responsible Party

The **Residential Care Manager** at [Company Name] is [REDACTED]

The **Case Manager** or designated staff [REDACTED]

4.5 Definitions

- **Agreement for Service:** A legal document that outlines the authorization and consent given by the legal guardian or placing agency for [Company Name] to provide residential care, seek medical treatment, and access pertinent records regarding the child.

- **Placing Agency:** An external organization, such as a child welfare agency or legal guardian, responsible for the placement of the child in a residential care facility.
- **Consent for Emergency Medical Treatment:** A section within the Agreement for Service that provides authorization for [Company Name] to make emergency medical decisions on behalf of the child if needed.
- **Records and Reports Authorization:** Consent provided by the legal guardian or placing agency that allows [Company Name] to request, inspect, and maintain relevant records and reports regarding the child's history, health, and well-being.

4.6 Policy Statement

[Company Name] is committed to ensuring that all necessary consents and authorizations are in place before providing care, medical treatment, or accessing the records of any child in its care. The Agreement for Service is a key legal document that protects the child's rights and ensures that the home operates within legal and ethical boundaries. Through the Agreement for Service, [Company Name] secures the authority to provide comprehensive care and respond effectively to medical emergencies while safeguarding the privacy and well-being of each child.

The policy ensures that every child's case file includes a signed Agreement for Service that authorizes [Company Name] to:

1. [Redacted]
2. [Redacted]
3. [Redacted]

By adhering to this policy, [Company Name] remains compliant with Ontario regulations while ensuring the safety, health, and welfare of all children in care.

4.7 Policy

4.7.1 Agreement for Service – Provide Care for the Child

1. Consent to Provide Care:

- The child's case record at [Company Name] includes a comprehensive Agreement for Service, [Redacted]
- The **Case Manager** coordinates with the placing agency or legal guardian to ensure [Redacted]
- The signed Agreement for Service is maintained in the child's case record, [Redacted]

2. Documentation and Record-Keeping:

- The **Residential Care Manager** is responsible for ensuring that the original signed [Redacted]

- In cases where the placing agency is responsible for authorizing the agreement, the **Case Manager**

4.7.2 Agreement for Service – Emergency Medical Treatment

1. Consent to Obtain Emergency Medical Treatment:

- The Agreement for Service also includes a specific clause granting [Company Name] the authority to
- The **Residential Care Manager**, in consultation with the **Case Manager**, ensures that this clause is fully understood

2. Medical Emergency Protocols:

- In the event of a medical emergency, the **Residential Care Manager** is
- Following the emergency, the **Residential Care Manager** completes an **Emergency Medical Incident Report** that details the event,

3. Review and Update of Medical Authorizations:

- The **Residential Care Manager** reviews the Agreement for Service annually or when the child's health needs change significantly to ensure

4.7.3 Agreement for Service – Inspect and Obtain Records/Reports

1. Consent to Access Records and Reports:

-
-

2. Records Management:

-
-

○

4.7.4 Code of Conduct for Staff

1. **Awareness of Code of Conduct:** All staff at [Company Name] are aware of and comply with the written policies and procedures related to the **Code of Conduct**.
2. **Disciplinary Procedures:** The **Residential Care Manager** oversees the implementation of the code and ensures that

4.8 Procedure

4.8.1 Agreement for Service Procedure

1. **Initial Agreement Process:**
 - Upon the placement of a child at [Company Name], the **Case Manager** works directly with the placing
 - The **Case Manager** provides a thorough explanation of the agreement, answering any questions the
 - Once completed, the original signed Agreement for Service is securely filed in the
2. **Consent for Emergency Medical Treatment:**
 - The **Residential Care Manager** ensures that all staff members are aware of the
 - **Staff Training:** All staff at [Company Name] are trained on the medical emergency
3. **Access to Records and Reports:**
 - When additional records or reports are required to provide adequate care, the **Case Manager**
 - The **Residential Care Manager** ensures that all records obtained are reviewed, filed,
4. **Annual Review of Agreement for Service:**

- The **Residential Care Manager** conducts an annual review of the Agreement for Service for each child in care to [REDACTED].
- During this review, the **Residential Care Manager** ensures that the [REDACTED].

4.9 Review and Revision

This policy is reviewed annually to ensure compliance with regulatory requirements and the changing needs of the children in care. [REDACTED].

4.10 References

- **Minister's Regulation 88 (2)** – Legal requirements for consent and authorization in residential care.
- **Child, Youth and Family Services Act (CYFSA), 2017** – Governing legislation for children's residential care in Ontario.

4.11 Approval Signatures

[REDACTED]

4.12 Policy Distribution

- [REDACTED]

Policy 005: Residence Maintenance Policy and Agreement for Service - Financial Arrangements, Review and Fire Safety

5.1 Purpose

The purpose of this policy is to ensure that all financial arrangements related to the [REDACTED]

5.2 Additional Authority

- Minister's Regulation s. 88 (2) Paragraph 2
- Minister's Regulation s. 88 (2) Paragraph 3
- Child, Youth and Family Services Act (CYFSA), 2017

5.3 Scope

This policy applies to all children and youth placed at [Company Name] and to all staff [REDACTED]

5.4 Responsible Party

The **Residential Care Manager** at [Company Name] [REDACTED]

5.5 Definitions

- **Financial Arrangement:** The documented terms and conditions of the financial obligations between [Company Name], the placing agency, and any legal guardians.
- **Placing Agency:** The organization responsible for placing the child and overseeing financial obligations related to the child's care.
- **Agreement for Service:** A legally binding document detailing the terms of care and financial responsibilities for a child or youth placed in the home.

5.6 Policy Statement

[Company Name] is committed to ensuring that all financial agreements for the care of children and youth are [REDACTED]

5.7 Policy

5.7.1 Financial Arrangements in the Agreement for Service

1. **Residential Care Manager's Role:**

The **Residential Care Manager** ensures that a written [REDACTED]

2. **Consent and Authorization:**

The child's case record must include a signed consent and authorization from the placing agency or the legal guardian to agree to the financial arrangements. [REDACTED]

Documentation in the Child's Record:

The **Residential Care Manager** ensures that the completed Agreement for Service, [REDACTED]

5.7.2 Review of Agreement for Service

1. **Annual Review:**

The **Residential Care Manager** conducts an annual review of the Agreement for Service to [REDACTED]

2. **Request for Review:**

Any party involved in the Agreement for Service—whether the child, the legal guardian, the placing agency, [REDACTED]

3. **Documentation of Changes:**

The **Residential Care Manager** ensures that any revisions to the financial arrangements are [REDACTED]

4. **Transparency and Communication:**

5. is maintained between [Company Name] and the placing agency or legal guardian regarding [REDACTED]

5.7.3 Fire Safety Policies

All staff and children at [Company Name] receive thorough instruction on fire safety procedures, including fire alarm protocols, roles during emergencies, and fire extinguisher usage. [REDACTED]

5.8 Procedure

5.8.1 Procedure for Establishing Financial Arrangements

1. **Initial Contact and Assessment:**

- Upon referral for placement, the **Residential Care Manager** and the **CFO** collaborate [REDACTED]

- A meeting is held between [Company Name], the placing agency, and the legal guardian to [REDACTED]

2. **Creation of the Agreement for Service:**

- The **Residential Care Manager** drafts the Agreement for Service, including the financial arrangements. [REDACTED]
- The **CFO** reviews the financial section of the agreement for accuracy, [REDACTED]
- The agreement is signed by the placing agency or [REDACTED]

3. **Documentation and Filing:**

- [REDACTED]
- [REDACTED]

4. **Monitoring and Invoicing:**

- The **CFO** manages the invoicing [REDACTED]

5.8.2 Procedure for Reviewing Financial Arrangements

1. **Initiating a Review:**

- [REDACTED]
Residential Care Manager.
- Upon receiving the request, the **Residential Care Manager** [REDACTED]

2. **Review Process:**

- The **Residential Care Manager** conducts a formal meeting with the [REDACTED]
- The **CFO** provides financial reports as needed to support the review process, [REDACTED]
- [REDACTED]
the **Residential Care Manager** and signed by all relevant parties.

3. **Finalizing the Review:**

- [REDACTED]
- The **CFO** updates [REDACTED]
- The **Residential Care Manager** [REDACTED]

5.8.3 Fire Safety Procedures

5.8.3.1 Fire Safety – Procedures Instruction for Staff and Children

1. **Fire Alarm Procedures:**

Upon admission, each child is instructed on the fire safety procedures appropriate for their [REDACTED]

2. **Staff Training on Fire Safety:**

All staff members receive regular training on fire safety procedures, including their roles when [REDACTED]

5.8.3.2 Fire Safety – Fire Drills and Inspection of Residence

1. **Nightly Inspections:**

Each night, **Residential Care Staff** conduct a thorough inspection of the residence, focusing on potential fire hazards in [REDACTED]

2. **Monthly Fire Drills:**

Fire drills are conducted once a month, initiated by the fire alarm system. The **Residential Care Manager** [REDACTED]

5.8.3.3 Fire Extinguisher Training

All staff members are trained in the proper use of fire extinguishing equipment. The **Residential Care Manager** [REDACTED]

5.9 Review and Revision

This policy is reviewed annually by the **Residential Care Manager** and the **CFO** to [REDACTED]

5.10 References

5.11 Approval Signatures

5.12 Policy Distribution

This policy is distributed to all relevant staff, including the **CFO**, **Residential Care Manager**, and staff involved in case management. [REDACTED]

Policy 006: Agreement for Service

6.1 Purpose

This policy outlines the required documentation and agreements necessary for children placed in the care of [Company Name]. These agreements ensure [REDACTED]

6.2 Additional Authority

- [REDACTED]
- [REDACTED]
- [REDACTED]

6.3 Scope

This policy applies to all children placed in the care of [Company Name], as well as the [REDACTED]

6.4 Responsible Party

The CEO/President of [Company Name] is responsible [REDACTED]

6.5 Definitions

- *Agreement for Service*: A legal and binding document outlining the terms of the care provided to a child by [Company Name], signed by relevant parties.
- *Placing Agency*: The organization responsible for placing the child in the care of [Company Name], including child welfare agencies and legal guardians.
- *Society*: Refers to a children's aid society under Ontario's child welfare system.
- *Capacity*: As defined in subsection 21 (1) of the CYFSA, the child's ability to understand and consent to their care arrangements.

6.6 Policy Statement

[Company Name] is committed to ensuring that every [REDACTED]

6.7 Policy

6.7.1 Agreement for Service

1. Licensee/Divine Quality Care

[Company Name] ensures that every child's case record contains an agreement for service

2. Parent/Other Person Placing the Child

If a child is placed by a parent, placing agency, or another legal representative, the child's

3. The Society

For children placed in the care and custody of a society, the child's case record includes an agreement for service signed by the society, in

4. Child of Sixteen Years or Older

If a child is 16 years or older and possesses the capacity to consent, as defined in

5. Nearest Relative of the Child

If the child lacks the capacity to consent as per Section 21 (1) of the CYFSA,

6. File Notation for No Signature

In cases where it is not possible for all necessary parties to sign the agreement for service,

7. Child Acknowledging Explanation

Every agreement for service includes documentation confirming that the child has been given an appropriate explanation of the agreement's terms, relative to their age and maturity.

Before any signatures are obtained,

6.7.2 Child Protection Policies

6.7.2.1 Child Protection – Duty to Report

All staff at [Company Name] are fully aware of their legal duty to report any concerns that a child may be in need of protection under **CYFSA Part V, s.125**. This duty applies to situations where there is a suspicion of abuse, neglect, or any other circumstances that could endanger the child's well-being. Staff are trained to immediately report any concerns to the appropriate authorities, including local children's aid societies.

6.7.2.2 Child Protection – Protocols with Children’s Aid Societies (CAS)

Staff are familiar with local protocols established by children’s aid societies (CAS) for reporting and investigating protection concerns, including cases of resident-on-resident abuse. [Company Name] maintains close communication with CAS to ensure smooth coordination during investigations and ensures that staff are equipped with the knowledge and procedures to report incidents in accordance with the established protocols.

6.7.2.3 Child Protection – Staff Support

Staff are aware of internal policies designed to support and protect them when making a report. [Company Name] encourages and supports staff in fulfilling their reporting obligations, ensuring that they are protected from liability unless it is determined that the report was made maliciously or without reasonable grounds. The **Care Manager** and **CEO/President** ensure staff feel supported in their duty to report and are not penalized for carrying out this responsibility.

6.8 Procedure

1. Initial Documentation of Service Agreement

Upon the child’s admission to [Company Name], the care manager oversees the preparation and signing of the service agreement. This process involves:

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

2. Ongoing Review and Amendment of Service Agreements

Service agreements are reviewed regularly, especially when there are changes in the child’s care plan or living situation. The care manager at [Company Name] is responsible for ensuring that:

- [Redacted]
- [Redacted]
- [Redacted]

3. Child’s Acknowledgment and Understanding

Before signing, [Company Name] ensures that each child, depending on their age and

[Redacted]

4. Record Keeping and File Management

All agreements for service are stored in the child’s individual case record. [Company Name]

[Redacted]

5. Reporting Child Protection Concerns

When a staff member suspects that a child may be in need of protection, they immediately

[Redacted]

6. Resolution of Discrepancies

In cases where discrepancies arise between involved parties ([REDACTED]

6.9 Review and Revision

6.10 Approval Signatures

6.11 Distribution

- [REDACTED]

Policy 007: Admission and Residents Orientation

7.1 Purpose

The purpose of this policy is to outline the procedures for conducting a thorough orientation for every child admitted to [Company Name]. The orientation ensures

[Redacted text block]

7.2 Additional Authority

-
-
-
-
-

[Redacted text block]

7.3 Scope

This policy applies to all children admitted to [Company Name],

[Redacted text block]

7.4 Responsible Party

The **Residential Care Manager** at [Company Name]

[Redacted text block]

7.5 Definitions

- **Orientation:** A process by which children are introduced to the residence, its programs, policies, and procedures, particularly those relating to safety, emergency protocols, and their personal rights.
- **Physical Restraint:** The use of physical force to restrict the movement of a child in care in order to prevent harm to themselves or others.
- **Mechanical Restraint:** The use of a device or equipment to restrict the movement of a child in care, only used under specific and regulated conditions.
- **Ombudsman:** An independent officer of the Ontario legislature who handles complaints and concerns related to public services, including the care provided in residential homes.

7.6 Policy Statement

[Company Name] is committed to providing a safe, welcoming, and informed environment for every

[Redacted text block]

7.7 Policy

7.7.1 Admission – Orientation of Residence

1. Orientation Process:

The **Residential Care Manager** ensures that, upon admission, each child receives a comprehensive orientation to the residence. This orientation is conducted in a language and manner suitable to the child's level of understanding, age, and maturity, ensuring that the child feels comfortable and informed in their new environment. The orientation includes:

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

2. Age-Appropriate Communication:

The **Residential Care Manager** or designated staff conducting the orientation tailors the delivery of information to ensure it is appropriate for the child's comprehension level.

[Redacted text block]

3. Review of Physical and Mechanical Restraints:

The child is informed about the residence's policies on physical and mechanical restraints during

[Redacted text block]

7.7.2 Admission – Review of Orientation

1. Initial Review After Admission:

The **Residential Care Manager** ensures that the content covered during the orientation is

[Redacted text block]

rights.

2. Ongoing Review on Request:

The child is encouraged to request a review of the orientation content at any time. Whenever the child expresses uncertainty or concern regarding any of the information shared during the

3. **Review at the Licensee's Discretion:**

The **Residential Care Manager** or other designated staff members may also initiate a review of the orientation materials with the child if they deem it necessary.

7.7.3 Admission – Orientation Documentation

1. **Initial Documentation:**

Upon completion of the orientation, the child's case record includes a written statement indicating the date on which the orientation was provided. The **Residential Care Manager** ensures

2. **Review Documentation:**

The child's case record also includes documentation of each subsequent review of the orientation materials.

3. **Secure Record Keeping:**

All orientation and review documentation is securely stored in the child's case record,

7.7.4 Rights and Responsibility Review Intervals

7.7.5 Complaint Handling

When a complaint is made, the Residential Care Manager

7.8 Procedure

7.8.1 Procedure for Conducting Admission Orientation

1. **Initial Admission Process:**

○

2. **Content of Orientation:**

○ **Residence Overview:**

○ **Emergency Procedures:**

○ **Restraint Policies:**

○ **Child's Rights:**

3. **Tailoring Information to the Child:**

4. **Signature Collection and Documentation:**

7.8.2 Procedure for Reviewing Orientation After Admission

1. **Seven-Day Review:**

2. **Review on Request:**

3. **Review at Staff Discretion:**

4. **Signature and Documentation:**

7.8.3 Orientation of Residents / Complaints Procedure

Upon admission, **[COMPANY NAME]** ensures each child receives a personalized orientation tailored to their understanding, age, and maturity. The orientation covers the following aspects:

- i.
- ii.
- iii.
- iv.

7.8.4 Orientation of Residents / Rights and Responsibilities

Each child is informed of their rights and responsibilities upon admission to **[COMPANY NAME]**, in language they can understand. This includes:

- i.
- ii.
- iii.

7.8.5 Rights and Responsibilities / Complaints Procedure – Review Intervals

To ensure ongoing awareness of rights and responsibilities, the **Residential Care Manager** at **[COMPANY NAME]** reinforces this information at the following intervals:

-
-
-

7.8.6 Complaint Procedures – Internal

When a child or parent submits a complaint, **[COMPANY NAME]** follows a written, structured

7.8.7 Complaint Procedure – Providing Written Summary

After investigating a complaint, **[COMPANY NAME]** provides a written summary of the findings and actions taken. This summary is delivered to:

1. The child's placing agency or the person responsible
2. The residential care provider, if the complaint concerns the placing agency.

7.8.8 Complaint Procedure – Debriefing Required

Following the review of a complaint, [COMPANY NAME] conducts a debriefing session, ensuring all involved parties are supported. The debriefing is conducted in three stages:

[REDACTED]

7.8.9 Complaint Procedure – Debrief with Child

The debriefing process with the child focuses on understanding their experience, [REDACTED]

[REDACTED]

7.8.10 Complaint Procedure – Debrief within 7 Days

The debriefing process takes place within seven days after a complaint has been reviewed by [REDACTED]

[REDACTED]

7.11 Review and Revision

This policy is reviewed annually or as necessary to ensure compliance with changes in regulations and to reflect updates in the procedures for admissions and orientation. [REDACTED]

[REDACTED]

7.12 References

- [REDACTED]
- [REDACTED]
- [REDACTED]

7.13 Approval Signatures

- [REDACTED]
- [REDACTED]

7.14 Policy Distribution

Copies of this policy are distributed to all relevant staff involved in the admissions and orientation process. An electronic version is made available on the internal network of [Company Name] for easy reference.

Policy 008: Plan of Care Development and Review for Residential Children

8.1 Purpose

The purpose of this policy is to outline the procedures and requirements for developing, reviewing, and maintaining a comprehensive Plan of Care for each child placed at [Company Name]. This policy

The policy emphasizes compliance with Ontario Regulation 156/18, ensuring

8.2 Additional Authority

-
-
-
-

8.3 Scope

This policy applies to all children placed in the care of [Company Name], and to all staff involved in the development, review, and execution of a child's Plan of Care. The policy ensures that staff,

8.4 Responsible Party

The **Residential Care Manager** at [Company Name] oversees the development, implementation, and

8.5 Definitions

- **Plan of Care:** A detailed and individualized plan developed for each child, outlining the [REDACTED]
- **Review of Plan of Care:** A process that involves evaluating and updating the Plan of Care to [REDACTED]
- **Material Change:** Any significant change in the child's circumstances, health, [REDACTED]
- **Placing Agency:** The organization responsible for placing the child in care, such as [REDACTED]

8.6 Policy Statement

[Company Name] is committed to providing personalized and holistic care for each child through a carefully developed Plan of Care. Each child's Plan of Care is a living document. [REDACTED]

8.7 Policy

8.7.1 Development of the Plan of Care Within 30 Days

1. **Initial Development:**
The **Residential Care Manager** ensures [REDACTED]
2. **Components of the Plan of Care:**
The Plan of Care includes the following elements:
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
3. **Meeting with the Child:**
Before finalizing the Plan of Care, the **Residential Care Manager** meets with the child to explain [REDACTED]

8.7.2 Timelines for Review of the Plan of Care

1. **90-Day Review:**
The **Residential Care Manager** reviews and updates [REDACTED]

2. **180-Day Review:**

Following the 90-day review, the Plan of Care is reviewed again at the 180-day [REDACTED]

8.7.3 Additional Reviews of the Plan of Care

1. **Material Changes and New Information:**

The **Residential Care Manager** ensures [REDACTED]

2. **Requests for Review:**

The Plan of Care is reviewed at the request of the [REDACTED]

8.7.4 Ensuring Information in the Plan of Care is Current

1. **Regular Updates:**

During each review, the **Residential Care Manager** [REDACTED]

Documenting Services Provided:

Note to Readers:

Thank you for exploring this sample of our work. To keep our online showcase concise, we have provided only a selection from this piece.

Should you be interested in viewing the complete work or explore more of our portfolio, please don't hesitate to reach out. We're more than happy to provide additional samples upon request.

Thank you,
The Write Direction Team