

**CHESHIRE HOMES OF SASKATOON**  
**RESIDENT POLICY AND PROCEDURE MANUAL**

The policies and procedures detailed in this manual are in no way intended to override any laws or regulations. In the case of a conflict or omission, legislative and regulatory requirements must supersede the policies and procedures contained herein.

Revised 2004

## **RESIDENTS RIGHTS REGARDING ATTENDANT CARE SERVICES**

### **POLICY STATEMENT**

Each resident of Cheshire Homes has the right to refuse care which she/he deems to be dangerous to their personal health or safety and/or to the health and safety of others including, but not limited to, attendant care workers.

### **PROCEDURES**

1. The resident will inform the worker(s) of his/her safety concerns.
2. The resident and worker will work out a mutually satisfactory solution to the immediate situation which may include, but not limited to, seeking assistance or advice from others.
3. The resident will complete an Incident Report Form if the situation is not resolved.
4. Management, or designate, will investigate the incident within seven days.
5. Sufficient steps will be taken to rectify the situation to the satisfaction of the resident and the worker(s) involved.

## **FEMALE CARE ATTENDANT REQUEST POLICY**

### **POLICY STATEMENT**

A resident may request a female attendant care worker for intimate care if he/she feels uncomfortable working with a male attendant care worker.

### **PROCEDURES**

A resident may request a female staff member over a male staff member; however, he/she must make this request without discrimination. Therefore, all intimate care provided by any male attendant worker must be refused by the resident making the request.

When a resident requires intimate care and a male employee is working, the resident must request a switch from the on duty staff member. The on duty staff member will then contact a female employee working on site and she will be pulled from another house to perform the task. The male employee will attend to the tasks in the house where the female employee has left. To clarify, the male and female employees will switch homes for the duration of the care request provided to the resident.

If the on duty staff member has difficulty arranging a switch in staff, on call management is to be called for assistance.

## **MALE CARE ATTENDANT REQUEST POLICY**

### **POLICY STATEMENT**

A resident may request a male attendant care worker for intimate care if she/he feels uncomfortable working with a female attendant care worker if applicable.

### **PROCEDURES**

A resident may request a male staff member over a female staff member; however, she/he must make this request without discrimination. Therefore, all intimate care provided by any female attendant worker must be refused by the resident making the request.

When a resident requires intimate care and a female employee is working, the resident must request a switch from the on duty staff member. The on duty staff member will then contact a male employee working on site and he will be pulled from another house to perform the task. The female employee will attend to the tasks in the house where the male employee has left from. To clarify, the male and female employees will switch homes for the duration of the care request provided to the resident.

If the on duty staff member has difficulty arranging a switch in staff, on call management is to be called for assistance.

## ABUSE

### POLICY STATEMENT

Cheshire Homes is committed to ensuring an abuse free environment for both residents (individuals who receive direct services from Cheshire Homes) and staff (persons providing services directly or indirectly, through Cheshire Homes, to or on behalf of residents).

Abuse in any form shall not be tolerated. Abuse can be:

1. **Physical:** Physical abuse is the infliction of bodily pain by one or more instances of striking, shoving, slapping, pinching, choking, or kicking. Also includes the use of unapproved restraining techniques.
2. **Sexual:** Sexual abuse is any form of unwanted or exploitative sexual behavior including harassment or acts of assaults.
3. **Emotional:** Emotional abuse is the infliction of emotional pain through verbal or written expressions of intimidation, humiliation, ridicule, contempt or hatred. Including yelling, swearing, or screaming at others.
4. **Misuse of Property:** Property abuse is the misuse of an individual's funds or assets without consent, including unauthorized use of bank accounts or denial of personal possessions
5. **Misuse of Medication:** Medication abuse is the noncompliance with policies and procedures relating to medication administration, including withholding medication or over-medication, inappropriate use of medication, or failure to facilitate access to health services.
6. **Denial of Opportunity:** Denial of opportunity abuse is the unreasonable denial of opportunity for economic opportunity, advancement, or intentional withholding of access to available opportunity to meet needs of spiritual, mental, or personal growth.
7. **Neglect:** Abuse or neglect is the failure to provide the necessary care, assistance, guidance, or attention, which results in physical or emotional harm or loss to the adult or property. May be caused by an action or failure to act, and may or may not be intentional.

The rights of participants under the Charter of Rights and Freedoms and other Canadian Law shall not be denied.

All actions taken by those associated with Cheshire Homes are to be respectful of the dignity, and in the best interests, of residents and staff.

If is the responsibility of Cheshire Homes to ensure ongoing resident and staff safety as well as the protection of any victim of alleged abuse from further victimization insofar as this organization has the power to do so. The primary responsibility of Cheshire Homes is the residents and staff.

Residents, staff and others associated with Cheshire Homes shall report all allegations, observations, and disclosures of abuse and shall do so without fear of retaliation within this organization.

In the event of an abuse allegation, Cheshire Homes shall take whatever steps are necessary to preserve the integrity of this organization and the services we provide.

## **PROCEDURES**

### **Prevention**

1. Residents, staff, and others associated with Cheshire Homes are expected to be informed of the information contained in the Abuse Policy.
  - a. This policy shall be reviewed with all residents, staff, and others associated with Cheshire Homes upon adoption of this policy.
  - b. Management or designate shall review this policy with new staff and residents within the first month of their employment or involvement with Cheshire Homes.
  - c. Continuing education with respect to the prevention of abuse shall be made available upon request to management by residents and staff.
2. Cheshire Homes shall maintain a policy of governing use of restrictive procedures and shall review with all residents and staff on an annual basis.
3. Residents and staff are encouraged to discuss with management, or designate, any questions they might have relating to what constitutes abusive or unacceptable action.
4. Anyone who becomes aware of the potential for abusive interactions is directed to discuss the matter with management, or designate.

### **Reporting Responsibilities and Immediate Actions**

1. Immediate Safety
  - a. Any individual observing abuse as outlined above shall take responsible action to stop the abuse and ensure immediate safety.
  - b. Further steps that may be necessary to ensure the immediate safety of the alleged victim shall be taken. *Refer to the decision tree in the appendix when necessary.*

## 2. Reporting

- a. Any resident or staff who observes or becomes aware of an abusive situation shall complete an Incident Report and submit it to management, or designate, immediately.
- b. There may be situations where the manager receives a report of an allegation from a third party (see the alleged victim)

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- ii. Whether an internal investigation, apart from any police investigation, is warranted, where the alleged perpetrator is a resident, staff, or other person associated with Cheshire Homes.
    - iii. Whether any immediate disciplinary actions, where none have yet been taken, are necessary (Section 5.5.3)
  - c. A recommendation shall be made within 24 hours as to whether:
    - i. The allegation of physical or sexual abuse shall be reported to the police.
    - ii. An internal investigation is warranted.
  - d. An internal investigation shall be conducted in all cases where:
    - i. There has been an allegation of sexual or physical abuse (unless the allegation has been deemed not credible); or
    - ii. Injury has occurred; or
    - iii. There have been repeated documented instances of unsatisfactory interactions with participants by the alleged perpetrator(s) in the past; or
    - iv. Other circumstances warrant such an investigation.
- 4. Action to be taken with Respect to the Alleged Victim
  - a. Management, or designate, shall request the alleged victim (through his/her advocate as circumstance warrants) to undergo a medical examination whenever relevant physical evidence may be present.
  - b. Where possible, the examination is to be conducted within 48 hours of the time of the alleged incident.
  - c. All steps shall be taken to preserve any evidence related to the allegation.
  - d. The alleged victim shall be offered counseling services and access to those services shall be arranged in consultation with Community Living Division.
  - e. Management, or designate, in consultation with Community Living Division shall seek police assistance if attempts to continue contact between the alleged perpetrator and the alleged victim are likely and the potential for further abuse exists.
- 5. Immediate Actions with Respect to the Alleged Perpetrator

- a. Where an alleged perpetrator is a fellow resident, staff, board member, or other person associated with Cheshire Homes.
- b. Any and all official communication between the agency and the alleged perpetrator shall be conducted by Management, or designate, of Cheshire Homes.
- c. Where a police investigation is to be conducted, the police shall inform the alleged perpetrator of the allegation prior to Management advising the person that he/she is under investigation.
- d. If the initial interview indicates that the incident may require disciplinary action, the alleged perpetrator may be suspended with pay, redeployed or requested to stay away from the agency or individual for the balance of any investigation, as justified by the circumstances.
- e. In instances requiring immediate removal of the alleged perpetrator from the worksite, the alleged perpetrator will be informed of the allegation (i.e. what he/she was alleged to have done and to whom) and told not to contact the alleged victim or return to the worksite unless asked to do so by the agency. The alleged perpetrator will be informed that an investigation is taking place.

## **Investigations**

The following protocol shall be implemented in situations where an internal investigation has been deemed to be warranted.

1. Timing of Investigation
  - a. Where a police investigation is to be conducted, Cheshire Homes shall inform the police, PRIOR to beginning the internal investigation, that an internal investigation is being initiated.
  - b. During the initial investigation, all efforts shall be made to avoid jeopardizing any criminal investigation.
2. Investigation Committee

An Investigation Committee shall be struck by Cheshire Homes and shall be composed of:

- a. Management, or designate, of Cheshire Homes and a designated representative.

- b. The Community Living Division Social Worker, or in situations where the alleged victim is not involved with Community Living Division, an alternate may be recommended by Community Living Division.
- c. One member from the community, to be selected by consensus between Cheshire Homes and Community Living Division (or alternate).

### 3. Considerations

- a. In all cases, the alleged victim shall be given every opportunity throughout this investigation to communicate with the Committee on his/her behalf.
- b. The alleged victim shall be informed that they must use an advocate to represent their interests.
- c. In all cases where uncertainty exists about the individual's ability to represent his/her interests, an advocate shall be utilized. The Saskatchewan Association for Community Living or other appropriate organization shall be requested, as necessary, to assist in securing the services of an advocate.
- d. Both the person alleging the abuse and the person alleged to have conducted the abuse shall have third party representation while they are being interviewed. These representatives shall not attend interviews of other witnesses or individuals associated with the case.
- e. The person ordinarily responsible for the alleged victim, the alleged victim's advocate, and the alleged victim where possible, shall be advised by management of Cheshire Homes that they are free to communicate with the Investigation Committee provided that such communication does not interfere with any internal or police investigation of the allegations.

### 4. Outcome

- a. A record of the investigation shall be made in the file of the alleged victim, the agency file opened on the allegation and the file of the alleged perpetrator.
- b. Within 30 days of the team's appointment:
  - i. A final report shall be prepared, summarizing the outcome of the investigation.
  - ii. The final report shall be given to the Board of Directors and Community Living Division.
  - iii. Where the alleged perpetrator is represented by a union, a copy of the final report will be forwarded to the union at the time of the imposition of any disciplinary action.
  - iv. In the absence of union certification, a copy of the report will be provided to the alleged perpetrator.

- v. Where the alleged perpetrator has been cleared of any wrong doing, he/she shall be advised of this in writing with a copy of the letter placed in his/her personnel file.
  - vi. Others directly involved with a particular investigation shall be informed of the outcome of the investigation.
- c. Where appropriate, the Investigation Committee shall consider:
- i. Any further disciplinary actions to be taken with respect to the alleged perpetrator, and/or
  - ii. Any necessary training to be provided to the alleged perpetrator to prevent further occurrences of the action of abuse, and shall include such recommendations in the final report.
5. Written Reprimand
- a. Where formal counseling has been ineffective, and where suspension or dismissal is not warranted, the resident or staff shall be formally warned by means of a letter signed by management, outlining consequences of recurring instances of unsatisfactory interactions. A copy of this letter shall be retained in confidential management files.

## **Visitor Protocol Policy**

### **POLICY STATEMENT**

Cheshire Homes strives to maintain a cooperative-operative living environment which respects the rights of all residents and staff. With this in mind, visitors (residents guests, persons touring, and interested persons invited by management) are to be welcomed by residents and staff.

Residents are responsible for monitoring the behavior of their personal guests.

Staff is responsible for ensuring the comfort, safety, and rights of residents and other staff are respected.

### **PROCEDURES**

Residents must:

1. Be with their guest(s) the duration of their visit to Cheshire Homes. For example, when your guest(s) are watching television, you are not in your room.
2. Ensure that guests are not in the kitchen area unless assisting a resident in serving coffee or tea or when invited to be a meal guest, unless authorized by management.
3. Inform staff of any guest(s) expected to arrive after 11:00pm. Only in exceptional circumstances are guests to be entertained between 11:00pm and 7:00am between Sunday and Thursday.
4. Inform guest(s) that they are to enter and exit through the main entrance only. If resident is not in, guest(s) are invited to come back or to phone to see if the resident is back.
5. Keep the noise and activity level to a minimum between 11:00pm and 7:00am in accordance with Labor Standards. Should a resident not adhere to this policy, the staff on duty is responsible for monitoring the situation by informing the resident of the problem once and if it continues, informing the resident that their guests must leave immediately. Residents are to write up an incident report if the noise level between 11:00pm and 7:00am is infringing upon their right(s).
6. Ensure payment of meal and room charges for any of their guest(s). Meal prices are \$2.00 breakfast, \$2.00 lunch, and \$5.00 supper. Overnight prices are \$12.00 per guest if the guest stays in the resident's room or elsewhere on the property. Exception: the decision to wave the overnight charge is at the discretion of management (i.e. in a dating relationship). Payment is to be made in advance.

Payment will be made to the staff member working or to the office during office hours. Staff are not expected to ask for the payment.

7. Have use of the recreation room for entertainment purposes. Room can be reserved by pre-booking a date on the calendar or used on a first come, first serve basis. The room must be left tidy and free of smoke and garbage.

The above procedures are to be adhered to both in each home and in the recreation room.

Should any resident or staff suspect illegal behavior or activities occurring on Cheshire property, an incident report is to be written up for management. Should the situation be considered an emergency (endangering one's life or Cheshire property), the police are to be called.

## **RESIDENTS' POSSESSIONS**

### **POLICY STATEMENT**

Residents are responsible for damage or loss to their personal possessions except when damage or loss results from theft or negligence on the part of paid staff or volunteers.

### **PROCEDURES**

1. Residents should maintain a current inventory of personal possessions.
2. Residents are expected to have a personal insurance policy to cover replacement costs of possessions in the event of fire or theft.
3. In the event of alleged theft or negligence, residents will report, in writing, to management.
4. Management will review the information and reach a decision on how best to proceed.
5. Management must convene a review committee to adjudicate the matter in unresolved situations.

**USE OF SOROPKIN PLACE**  
(RECREATION ROOM)

**POLICY STATEMENT**

Soropkin Place will be effectively managed by Cheshire Homes (Management) to maintain a cooperative living environment and to limit safety and liability risks.

**PROCEDURES**

1. All users of Soropkin Place are to sign an agreement agreeing to conditions and terms of use.
2. The Soropkin Place agreement is reviewed and presented on the day you move into Cheshire. It is expected that the terms and conditions of this use agreement are adhered to.
3. Any resident or staff who suspect's illegal behavior or activities occurring on Cheshire property are to write up an incident report or in cases deemed to be an emergency, the police are to be called.

**AGREEMENT FOR USE OF SOROPKIN PLACE**  
(RECREATION ROOM)

By signing this agreement the user agrees to the following conditions and consequences:

**CONDITIONS**

1. To assume full responsibility for the conduct of all guests. This includes, but is not limited to, ensuring that no illegal activities occur such as: underage drinking, use of illegal drugs, or loitering.
2. To supervise guests at all times ensuring that the comfort, safety, and rights of all residents and staff are respected.
3. To ensure that the premises are left clean and orderly. This includes Soropkin Place, office washroom, and general grounds. Clean up must be completed by 12:00 noon following the date of use.
4. To assume legal responsibility for any property damage, including interior and exterior of the building, clean up costs or acts relating to the use of Soropkin Place.

**CONSEQUENCES**

1. If any of these conditions are not met, a suspension of up to 6 months for use of Soropkin Place will be ordered. A second offense will be up to a 1 year suspension. A third offense will be a lifetime ban.
2. If clean up is not completed by 12:00 noon the following day a charge of \$25.00 will be issued for the cleaning.

\_\_\_ Yes, I will be using the Recreation Room during my residency.

\_\_\_ No, I will not be using the Recreation Room during residency.

User: \_\_\_\_\_

Cheshire Homes: \_\_\_\_\_

Fee Paid: \_\_\_\_\_

Date: \_\_\_\_\_

## **USE OF RECREATION ROOM IN INDEPENDENCE HOUSE**

### **POLICY STATEMENT**

The Recreation Room in Independence House will be effectively managed by Cheshire Homes (Management) to maintain a cooperative living environment and to limit safety and liability risks.

### **PROCEDURES**

1. All users of The Recreation Room in Independence House are to sign an agreement agreeing to conditions and terms of use.
2. The Recreation Room in Independence House agreement is reviewed and presented on the day you move into Cheshire. It is expected that the terms and conditions of this use agreement are adhered to.
3. Any resident or staff who suspect's illegal behavior or activities occurring on Cheshire property are to write up an incident report or in cases deemed to be an emergency, the police are to be called.

**AGREEMENT FOR USE OF THE RECREATION ROOM IN INDEPENDENCE HOUSE**

By signing this agreement the user agrees to the following conditions and consequences:

**CONDITIONS**

- 5. To assume full responsibility for the conduct of all guests. This includes, but is not limited to, ensuring that no illegal activities occur such as: underage drinking, use of illegal drugs, or loitering.
- 6. To supervise guests at all times ensuring that the comfort, safety, and rights of all residents and staff are respected.
- 7. To ensure that the premises are left clean and orderly. This includes The Recreation Room in Independence House, washrooms, and general grounds. Clean up must be completed by 12:00 noon following the date of use.
- 8. To assume legal responsibility for any property damage, including interior and exterior of the building, clean up costs or acts relating to the use of The Recreation Room in Independence House.

**CONSEQUENCES**

- 3. If any of these conditions are not met, a suspension of up to 6 months for use of The Recreation Room in Independence House will be ordered. A second offense will be up to a 1 year suspension. A third offense will be a lifetime ban.
- 4. If clean up is not completed by 12:00 noon the following day a charge of \$25.00 will be issued for the cleaning.

\_\_\_ Yes, I will be using the Recreation Room during my residency.

\_\_\_ No, I will not be using the Recreation Room during residency.

User: \_\_\_\_\_

Cheshire Homes: \_\_\_\_\_

Fee Paid: \_\_\_\_\_

Date: \_\_\_\_\_

## MEDICATION MANAGEMENT POLICY

### INTENT

The intent of this policy is to ensure the effective management of medication.

### POLICY STATEMENT

The effective management of medication is critical to limiting health, safety, and liability risks.

### PROCEDURES

1. All residents are required to review with Management the Medication Policy, the Medication Management Form and the Medication Waiver as a condition of residency.
2. A completed Medication Management form from each resident will be placed in their personal care plans.
3. If required, staff will assist with administering medications. As standard practice, medications will be administered by staff only if the medications are in a pill pack provided by the pharmacy.
4. The restrictions as noted in #3 above will not apply where a resident has discussed with Management and signed a waiver form entitled “Resident’s Responsibility for Medication and Agreement Not to Sue”, accepting responsibility for directing their medications. A resident who has signed a waiver may request staff assistance in administering medications that are not in pill packs. **At no time will staff administer medications contrary to pill bottle label instructions.** A copy of this waiver will be placed in the resident’s personal care plan.
5. When distributing pill packs to residents, check the name on the pack carefully as staff hands the pack or individual pills to each resident. Ask the resident as staff hands over the pack or pills to confirm that this is their medication and again check the label to limit any chance of errors.
6. Staff shall have discretion to refuse a resident’s medication request where the resident is intoxicated or otherwise incapable of sound judgment.

For residents requesting Cheshire involvement in ordering medications, the following procedures will be adhered to:

1. Management or designate faxes a monthly standing order to Nordon Drugs. Doctor’s orders must be faxed to Nordon Drugs directly from the attending physician.

2. Resident medications that are ordered through the office will be distributed weekly to each house.
3. The ordered medications will be kept in the LOCKED cupboards and disbursed to each resident in accordance with the Individual Care Plans.

Staff members will monitor the Management of Medications and will report, in writing on an incident report form, to Management, or designate, any observed concerns or infractions.

12/10/1997  
Revised 28/11/2002  
Revised 20/08/2003

### MEDICATION MANAGEMENT

THESE FORMS ARE TO BE COMPLETED BY ALL RESIDENTS AND PLACED IN THE SELF-CARE BINDERS.

In order to ensure the effective management of medications, each resident is required to complete the following form. This will provide guidelines for staff and will minimize risks related to liability issues.

I, \_\_\_\_\_, take full responsibility for all matters related to my personal health including medication management, scheduling appointments, and in directing staff in general or emergency situations when assistance may be required. Except in situations deemed to be negligent, my signature below absolves Cheshire Homes of any responsibility relating to my personal health.

\_\_\_\_\_  
Resident

\_\_\_\_\_  
Management

I, \_\_\_\_\_, am directing staff to provide the following assistance with respect to my personal health. Be specific about what is required (ordering medication, booking appointments, handing out medications, physically placing any medications in my mouth, handling emergency situations, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Except in situations deemed to be negligent, my signature below absolves Cheshire Homes of any responsibility for my personal health when the above procedures are followed.

\_\_\_\_\_  
Resident/Designate

\_\_\_\_\_  
Management

## **RESIDENT'S RESPONSIBILITY FOR MEDICATION AND AGREEMENT NOT TO SUE**

IF YOU SIGN THIS FORM, SHOULD YOU BE INJURED OR KILLED AS A RESULT OF TAKING MEDICATIONS, YOU CANNOT SUE THE CORPORATION CHESHIRE HOMES OF SASKATOON (MANAGEMENT) OR ANY OF ITS EMPLOYEES, MANAGEMENT, OR BOARD OF DIRECTORS.

1. I understand that there are risks associated with taking prescription and non-prescription medications. I hereby assume all responsibilities to direct the staff as to what medication I will take and when I will take them. This direction may include removing the medication from their bottles or pill packages, and placing the medication in my mouth.
2. I acknowledge that my right to direct staff regarding medications is subject to the policy of Cheshire Homes of Saskatoon (Management) regarding the number of pills staff will administer in a given time period. This grants the staff the right to use discretion and/or refuse a medication direction when I am intoxicated or otherwise incapable of sound judgment.
3. I hereby voluntarily assume all the physical and legal risks associated with directing staff and taking my medication. This includes the risk of death, physical injury, loss or damage of my personal property, mental harm, or financial loss, howsoever caused, except in the case of staff gross negligence, willful disregard, or recklessness.
4. I understand that the above assumption of risk includes not only the physical risks involved in taking the medication, but also the legal risks and legal consequences which flow from these risks.
5. I hereby agree not to sue Cheshire Homes of Saskatoon (Management) or any of its employees, management, or Board of Directors, in respect to my death, injury, loss, or damage to property, mental harm, or financial loss associated with my directing staff and taking medications, howsoever caused, except in cases of gross staff negligence, willful disregard, or recklessness and hereby GIVE UP ANY RECOURSE WHATSOEVER TO THE COURTS FOR ANY DAMAGE WHATSOEVER.
6. I hereby agree to have a copy of this form placed in my personal care plan and available for staff to refer to.

I, the undersigned, have carefully read this form, or have it read to me, and I fully understand it and agree to all the above terms and conditions.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the presence of \_\_\_\_\_.  
(witness)

\_\_\_\_\_  
Resident

\_\_\_\_\_  
Witness

## **ILLEGAL DRUG USE POLICY**

### **INTENT STATEMENT**

The intent of this policy is to ensure a safe and healthy living and working environment for all individuals residing at Cheshire Homes and for the support staff.

### **POLICY STATEMENT**

Any drugs deemed illegal by the police are considered illegal on Cheshire property.

With the understanding that other than prescription drugs, the use of illegal drugs on Cheshire property is not tolerated and is grounds for discharge.

Based on the knowledge that the use of other than prescription drugs may be harmful to the health of the user and others in the surrounding environment, an illegal drug free environment will be provided in all areas of each home for all staffs and guests.

### **PROCEDURES**

1. All residents are required to review with Management the illegal drug use policy as a condition of residency.
2. Illegal drugs are not to be used on Cheshire property by residents or guests/visitors.
3. When drug use is witnessed, it is the responsibility for the witnessing party to call the police at 975-8300 and report illegal drug use.
4. When drug use is witnessed, it is the responsibility for the witnessing party to call Management at either the office phone during office hours or on the emergency cell phone.
5. When drug use is witnessed, and/or the possession of drugs and/or paraphernalia is discovered, it is the responsibility of the resident and/or support staff discovering the drugs and/or paraphernalia to report to Management on an incident report form.
6. Management will review the incident, interview the suspected user and witness(s) and determine if further investigation is warranted.
7. Management will advise the residency task group committee members of the incident, and outcome of the investigation.
8. Management will inform the suspected user of the RTG decision.

## **SMOKING/NON-SMOKING**

### **POLICY STATEMENT**

Based on the knowledge that smoking is harmful to the health of the smoker and others in the adjacent environment, a non-smoking policy within the homes has been enforced for all employees and guests.

Residents and their guests are required to smoke outside, at a distance of **10 meters** from the door.

### **PROCEDURES**

1. Residents, Guests, and Employees must:
  - a. Ensure safe smoking practices.
  - b. Smoke outside in designated areas only.
  - c. Ensure respect for property by cleaning up debris and furniture.

## **PET VISITATION or RESIDENT PET OWNERSHIP**

### **POLICY STATEMENT**

Cheshire Homes acknowledges the therapeutic benefits of owning and visiting pets. Residents, staff, and guests are encouraged to have pets on Cheshire Homes property when the following procedures have been met.

With respect to “guest” pets, the visits will be short term and deemed to be beneficial for the residents.

### **PROCEDURES**

1. A pet owner must:
  - a. Obtain the unanimous consent from the individuals living in the home and the staff members working in the home to have a pet on a trial basis.
  - b. Respect the right of any resident or staff to refuse on the basis of personal or health reasons.
  - c. Obtain management (or designate) approval for request.
  - d. At the conclusion of the trial period, obtain consent (as in ‘a.’ above) for the pet to be accepted on a permanent basis.
  
2. Once consent has been obtained, the pet owner must:
  - a. Ensure that the pet meets all health and safety regulations, as well as behavior expectations.
  - b. Assume full responsibility for the pet’s care, financial costs, and general liability, should an incident of injury or property damage occur.

## **TELEPHONE USEAGE**

### **POLICY STATEMENT**

A telephone in each home is provided for use by residents for personal calls and by staff for business related or personal emergency calls.

### **PROCEDURES**

1. To avoid added cost, for local calls, always refer to the telephone book for the telephone number information rather than calling directory services.
2. Long distance calls are to be logged in the notebook beside the telephone and reported to the office with the telephone number, location of the call, and the person responsible for the cost.
3. A bill will be issued from Cheshire Homes and payment is expected for these calls within 30 days of invoice date.
4. Unpaid long distance calls may result in the withdrawal of telephone privileges.
5. As a shared business telephone, generally limit calls to five minutes in length.

**CHESHIRE HOMES OF SASKATOON**

**RESIDENCY EXPECTATIONS**

### **RESIDENCY EXPECTATIONS**

1. Residents must take responsibility for their care and progress by:
  - a. Doing as much as their physical abilities allow
  - b. Advising staff of physical needs and care requirements
2. Residents must be responsible for looking after their medical needs or capable of requesting assistance from staff in scheduling appointments and transportation.
3. Residents must be able to handle or direct their own affairs while away from Cheshire Homes with respect to such things as medical appointments, personal shopping, and banking.
4. Residents must respect the rights of others and have the social skills needed to live co-operatively in a group setting.
5. Residents must make use of specialized equipment recommended by professionals that relate to such things as personal safety and to assist with activities of daily living.
6. Residents must participate within their capabilities in the operation of the home. This includes, but is not restricted to, meal planning and preparation, housekeeping, and laundry.
7. Residents are encouraged to contribute to the betterment of the homes by attending and participating in resident meetings.

### **SERVICES PROVIDED BY CHESHIRE HOMES**

1. Personal care based on individual needs.
2. Assistance in identifying and accessing community resources such as educational, vocational, and recreational.
3. Encouragement and support in pursuing personal goals.
4. Meal preparation, housekeeping, and laundry.

**CHESHIRE HOMES OF SASKATOON**  
**CHESHIRE HOMES RESIDENT COUNCIL**  
**(CHRC)**

## **Cheshire Homes Resident Council (CHRC)**

*Established 1997*

### **Guidelines**

#### **Purpose**

1. To provide a voice and a forum for meaningful resident input into the operations of Cheshire Homes.
2. The focus of the CHRC is to represent the COLLECTIVE interests of residents to management.

#### **Membership**

1. All residents currently living at Cheshire Homes of Saskatoon are eligible for membership in the Council.
2. All residents are expected to be involved in the betterment of Cheshire Homes as part of their admission process, and are encouraged to attend and participate in the annual informational meetings held by the CHRC.

#### **Structure**

1. The Council will consist of six (6) directors, having at least one representative from each house.
2. Elections will be held annually. Positions will expire on March 31 each year. All residents are free to give feedback to the President or Vice-President on the performance of the directors. If the President or Vice-President receives negative feedback about the performance of a director, the performance will be reviewed. Should the majority of the elected directors vote to remove the representative for non-performance, the position may be filled through an election for the remainder of the term.
3. The quorum for conducting meetings is four (4) directors.

## CHRC RESPONSIBILITIES

### Advocacy

1. To represent the *collective* interests of the residents.
2. To represent a resident who is not satisfied with management resolution of an issue, if deemed appropriate.

### Confidentiality

1. Information shared between members of the CHRC must not be disclosed to anyone who is not a member of the council, unless deemed appropriate by the council.

### Conflict of Interest

1. A member of the CHRC who is in a conflict of interest situation may participate in the discussion, but must refrain from voting on the issue. This director may be excused from the meeting if the CHRC would like a private discussion. If a vote is required, the director in question will excuse himself/herself from the meeting during the voting process.

### Finance

1. May become involved in fund-raising for unfunded extras for residents.
2. Coordination of any grants that may come available.
3. To oversee bank accounts of the resident council in accordance with accepted accountancy principles.

### Information Dissemination

1. Act as a resource by collecting and distributing information on matters relating to residents and operations.
2. To communicate the activities of the CHRC to all residents or Cheshire. Directors **must not** disclose confidential information, but should answer questions from interested residents. All residents may also request to view the minutes from CHRC meetings, but must read them in the presence of a director.
3. To conduct an annual meeting near the end of the term, at which elections will be held to fill positions of directors. A review of the CHRC's activities for the term will be held.

**Personnel**

1. Ensure that residents are involved in the hiring process.
2. To encourage residents to actively participate in performance appraisals conducted by management for input into staff performance.
3. To document (in writing) on an ongoing basis, any collective issues relating to an employee's non-performance of duties.
4. To make recommendations to management on how to resolve employee issues.

**Communication**

1. To communicate with Cheshire Management, external organizations, businesses, and individuals on matters of interest to the residents of Cheshire.
2. To communicate the activities of the CHRC to all residents of Cheshire Homes of Saskatoon.

**Other**

1. To have an active role in policy development and review.
2. To coordinate social, leisure, and educational programs.
3. To conduct the orientation for interested applicants to Cheshire Homes.
4. To undertake other initiatives as the needs/opportunities arise.

**Cheshire Homes of Saskatoon Resident Council (CHRC)**  
*Established 1997*

**Roles and Responsibilities of Directors**

All directors of the CHRC must adhere to all policies in this manual. The intent of this document is to clarify the various policies mentioned above, as well as to portray the specific responsibilities of the executive positions.

**President**

1. Develop agenda
2. Distribute agenda to directors two (2) days prior to meetings, when possible.
3. Chair meetings
  - i. Ensure an orderly flow of information.
  - ii. Try to get active participation from everyone in attendance.
  - iii. Use the consensus decision making process when possible. Voting on issues should occur only after trying to incorporate everyone's concerns into a decision.
4. Arrange meeting dates
  - i. Regular meetings should be held monthly. Meetings are currently held on the 2<sup>nd</sup> Thursday of every month, but this may change from time to time, as deemed appropriate by the council.
  - ii. Special meetings may be called as required to deal with issues not suited for the next regular meeting.
  - iii. Annually all residents of Cheshire will be invited to a special meeting, at which they will be informed of the CHRC's activities. An interactive discussion will occur if required.
5. To act as a liaison between the CHRC and Management.
6. To communicate with businesses, individuals, and organizations on behalf of the CHRC.

**Vice-President**

1. Assume all duties of the President in his/her absence.
2. Assist the President in gathering and distributing information as the need arises.

### **Secretary**

1. Record minutes at meetings.
2. Distribute completed minutes to directors no later than seven (7) days before the next meeting takes place.
  - i. Must be done in accordance with accepted principles.
3. Store historical data (minutes from previous meetings, policies, etc.)
  - i. On both paper and computer, to facilitate easy updates and reproductions.
  - ii. Ensure that this historical record is stored in the office of Cheshire Management.

### **Treasurer**

1. Oversees financial accounts of the resident council (bank accounts and slush fund)
  - i. Must be done in accordance with accepted accountancy principles.
  - ii. Expenditures must be authorized by the CHRC
  - iii. Expenditures must be signed by two people with signing authority.
    - i. The Treasurer will have signing authority.
    - ii. Two other directors will have signing authority, preferably the President and Vice-President
  - iii. The Treasurer will be personally liable for funds missing from financial accounts.
2. Present financial report.
  - i. Written reports to be presented in the 6<sup>th</sup> and 12<sup>th</sup> month of the treasurer's one-year term.
  - ii. Oral reports to be given to each CHRC meeting.