



**Continuing Care Facilities Legislation for the Northwest Territories
Discussion Paper**

**Department of Health and Social Services
Government of the Northwest Territories
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Table of Contents

Glossary of Terms	3
I. Introduction	5
A. What is Continuing Care?.....	5
B. How are Continuing Care Facilities Currently Regulated in the NWT?	6
C. Why is Continuing Care Legislation Important?	6
D. What is the DHSS Proposing?	6
II. Proposed Continuing Care Legislation in the NWT	7
A. Structuring the Proposed Legislation	7
i. Proposed Classification of Continuing Care Facilities.....	7
ii. Services Offered by Facility Type	8
B. Licensing of Facilities	9
i. Proposed Role of the Director of Continuing Care	9
ii. Proposed Licensing Process	10
iii. Establishment of Public Registry	10
C. Client Eligibility and Admissions	11
i. Current Role of the NWT Territorial Admissions Committee (TAC).....	11
ii. Proposed Role of TAC and Admission Processes	11
iii. Residential Agreements.....	12
D. Client Care Standards	13
i. Current NWT <i>Continuing Care Standards</i>	13
ii. Proposed Implementation, Review, and Amendment of Standards.....	13
E. Maintenance and Enforcement of Standards	14
i. Powers of the Director.....	14
ii. Inspections of Facilities.....	14
iii. Complaints	15
iv. Enforcement Action- Orders, Fines and Penalties	16
F. Accountability and Other Issues	18
i. Annual Report of the Director	18
ii. Reporting requirements for operators	18
iii. Resident rights and responsibilities	18
iv. Resident and family councils	19
v. Protection of personal information and health information	19
III. Contact for Further Information	20

Glossary of Terms

Term	Description
Continuing care services	A range of health care, personal care, accommodation, and other support provided to individuals of varying needs in three areas: home and community care; long-term care; and supported living.
Corrective plan	A list of steps developed by a continuing care facility to address any concern raised by the Director of Continuing Care following an inspection or investigation.
Enforcement action	A number of acts that may be taken by the Director to ensure facilities are complying with the Proposed Legislation. Enforcement action may include making orders, placing conditions on licenses, taking away licenses, and taking steps to issue fines and penalties.
Government Facilities	Continuing care facilities that are either government funded or operated. All continuing care facilities currently operating in the NWT are Government Facilities.
Home and community care services	Nursing care and support for personal care and daily living activities provided in the community to individuals who are unable to perform these activities on their own (as a result of age, disability, injury, or illness).
Internal resolution process	A series of actions or steps developed by a continuing care facility designed to address and resolve concerns from residents or the public before the Director becomes involved.
Licensing	A process overseen by the Director of granting a continuing care facility operator the ability to operate a facility.
Long-term care services	24-hour residential care services provided for people who no longer are able to live independently and require onsite nursing care, 24-hour supervision, and personal care.
Private Facilities	Continuing care facilities that are not government funded or operated. There are currently no Private Facilities operating in the NWT.
Proposed Legislation	The set of laws and regulations being proposed by the GNWT to regulate continuing care facilities operating in the NWT.
Policy	A government commitment to the public to follow an action or course of action in pursuit of approved objectives.
Public registry	A list of licensed continuing care facilities, maintained by the Director and accessible by the public.

Regulations	Regulations are issued by various government departments and agencies to carry out the intent of legislation.
Residential Care Facilities	<p>Residential care facilities provide accommodation, meals, and nursing care, support, and supervision based on the person's needs. There are a wide variety of settings where residential care is provided, such as small home-like facilities for persons with physical or developmental disabilities, to large-scale facilities primarily for frail or elderly seniors.</p> <p>Residential care encompasses a range of living options for people, primarily seniors, with different support needs. Residential care facilities can include lodges, assisted living, supportive housing, and long-term care homes. Other terms across Canada are nursing and personal care homes. These facilities offer different levels of care and may be free-standing or co-located with other types of care or hospitals. These facilities serve diverse populations who need access to 24-hour nursing care, personal care, and other therapeutic and support services.</p> <p>Residential care facilities: They include all residential facilities in Canada with four or more beds providing counselling, custodial, supervisory, personal, basic nursing and/or full nursing care to at least one resident. Excluded are those facilities providing active medical treatment (general and allied special hospitals).</p>
Standard	A statement of expectations that describe the basic rules which must always be met when designing or delivering a program or service.
Statute	A written law passed by a legislative body.
Supported living services	24-hour support and supervision for individuals who are not able to live independently in the community because of physical, cognitive, and/or mental health challenges (e.g. decreased ability to move, understand, and/or remember, and/or manage their mood, emotions, and behaviors.)
Territorial Admissions Committee	The Government of the Northwest Territories Territorial Admissions Committee (TAC) is mandated to provide a territory-wide process for application and admission to NWT facilities.

I. Introduction

The Government of the Northwest Territories (GNWT) Department of Health and Social Services (DHSS) is proposing new legislation to regulate continuing care facilities. The goal of the proposed continuing care facilities legislation (the “Proposed Legislation”) is to ensure continuing care facilities provide high quality and safe services to people living in the Northwest Territories (NWT).

This Discussion Paper outlines the content that the DHSS is considering to include in the Proposed Legislation, and the DHSS welcomes your feedback on what is currently being proposed, and what additional content may need to be included.

A. What are Continuing Care Services?

Continuing care services in the NWT provide individuals with health care, personal care, accommodation, and other supports to improve their quality of life. Individuals relying on continuing care services vary in age and may be living in their own home or community. Continuing care services are provided to individuals with different needs in three main service areas: home and community care, long-term care, and supported living.

- *Home and community care services* provide individuals living in the community with nursing care and support for personal care and daily living activities when they are unable to perform these activities on their own (as a result of age, disability, injury, or illness). These services help them to continue living in their own homes rather than a hospital or long-term care facility.
- *Long-term care facilities* are home-like facilities that provide 24 hour care and services for people who no longer are able to live independently and require onsite nursing care, 24-hour supervision, and personal support. Long-term care facilities may also have specialized services, like those used to support patients living with dementia.
- *Supported living facilities* provide 24-hour support and supervision for individuals who have physical, cognitive, and/or mental health challenges (e.g. decreased ability to move, think, or remember). The types of services offered by supported living facilities may overlap with those provided by long-term care facilities. However, nursing care services are not provided in supported living facilities.

Long-term care facilities and supported living facilities that currently exist in the NWT are either operated by the GNWT or by organizations who receive funding from the GNWT (“Government Facilities”). It is expected that the population of seniors residing in the NWT will continue to grow, and the need for long-term care facilities will increase. As a result of this, and changing economic conditions, there may be an increased need for facilities that are not operated or funded by the government (i.e. “Private Facilities”) to provide continuing care services in the future. It is important that all facilities, including Private Facilities, be held to consistent standards.

The Proposed Legislation would set and enforce standards in long-term care and supported living facilities. Home and community care services would not fall under the Proposed Legislation, as those services are delivered in the homes of clients.

B. How are Continuing Care Facilities Currently Regulated in the NWT?

The regulation of continuing care facilities is different in each province and territory in Canada. However, most provinces have legislation that specifically addresses continuing care and how facilities are to operate within their province. Some provinces have multiple pieces of legislation to address the wide range of health services that can fall under the definition of continuing care (e.g. one set of legislation for long-term care facilities and another set of legislation for supported living facilities).

The NWT does not currently have legislation specifically directed at regulating continuing care facilities. The *Health Insurance and Health and Social Services Administration Act*, RSNWT 1988, c T-3 (HIHSSA) regulates how health and social services are delivered in the NWT, but does not directly address the regulation of continuing care facilities. As a result, there are currently a number of gaps. For example, there is currently no way for the GNWT to inspect Private Facilities.

C. Why is Continuing Care Facilities Legislation Important?

The primary purpose of the Proposed Legislation is to protect the residents of continuing care facilities by ensuring that all continuing care facilities meet a consistent standard, whether they are Government or Private Facilities. Facility operators would be informed of what standards they need to adhere to, and the consequences of failing to meet these standards.

While facilities may vary in size and the types of services provided, the DHSS wants to create consistency of standards to ensure that the people living in these facilities are provided with safe, effective, quality care to meet their needs. The population of individuals living in continuing care facilities are often vulnerable and may have a limited support network. Creating consistent standards allows the public to become aware of what they can expect from a continuing care facility operating in the NWT, become confident that they are living in a safe and supportive environment, and understand what steps they can take to have concerns addressed.

D. What is the DHSS Proposing?

The Proposed Legislation would establish standards in licensing and registration of continuing care facilities, and provide powers for the GNWT to inspect facilities and enforce standards. Individuals concerned with the operations of a continuing care facility will have the ability to make complaints and have their concerns addressed. The GNWT will have the ability to investigate facilities and will be provided with a number of tools to determine what actions need to be taken to correct any issues that are identified. Facilities that fail to follow the Proposed Legislation will be subject to further orders, fines, and/or penalties.

Additionally, the Proposed Legislation would support resident centered care. Facilities would be required to set out clear rights that a resident is entitled to, and resident and family councils may be established in each continuing care facility to promote the well-being of all residents.

Questions for Consideration:

- 1. Do you think that creating new laws for continuing care facilities is important? Why?**
- 2. Have you had any positive or negative experiences with the quality or safety of care provided by a continuing care facility that you would like to share?**
- 3. What would you like to see included in the law to make sure these services are high quality and safe?**

II. Proposed Continuing Care Legislation in the NWT

A. Structuring the Proposed Legislation

i. Proposed Classification of Continuing Care Facilities

The Proposed Legislation would apply to all facilities classified as “continuing care facilities,” regardless of whether they are Government or Private Facilities. The proposed definition of continuing care facilities would include all residential facilities that provide health care, personal care, and other supports to promote independence and improve quality of life for residents living within the facility.

Continuing care facilities would be separated into different *classes* of facilities based on the types of services offered by the facility and the types of needs that the facility intends to serve. Initially, there would be two classes of facilities: long-term care facilities and supported living facilities. Other classes of continuing care facilities may exist in the future, and the legislation would be designed to include the regulation of these new facilities as needed.

The Proposed Legislation would be made up of one main statute as well as a number of regulations. Together, the statute and the regulations form the laws that regulate continuing care facilities. The statute would address a number of areas that are applicable to all continuing care facilities, including:

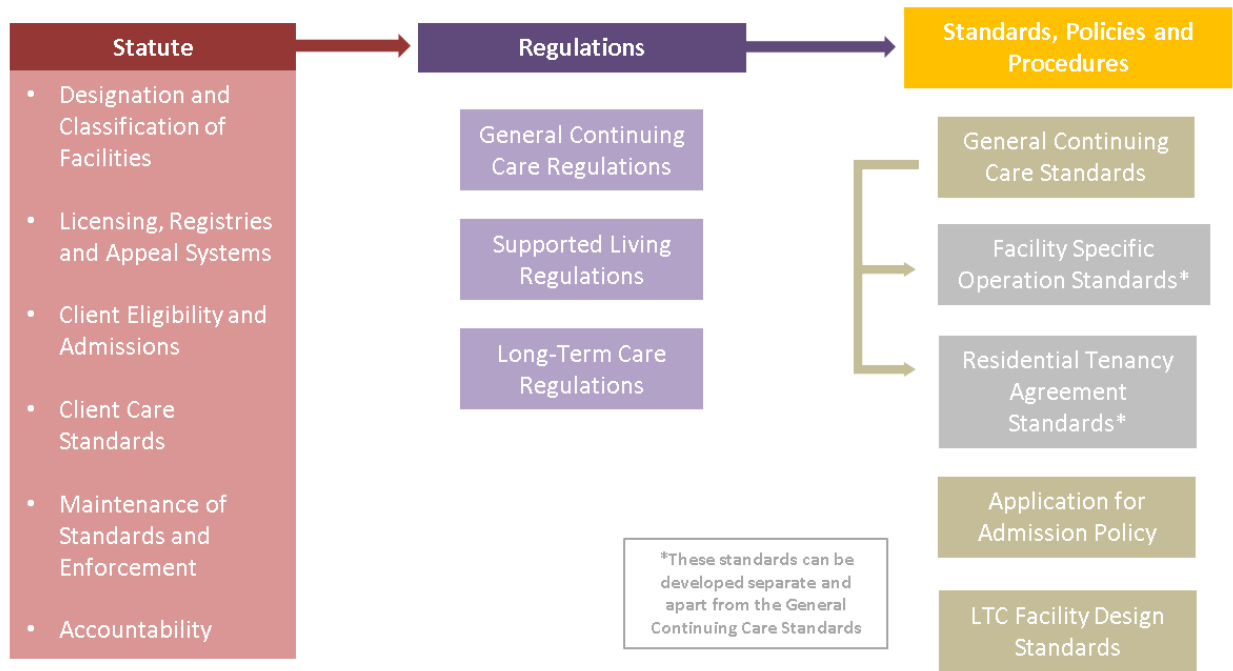
- Who will be responsible for managing the regulation of continuing care facilities.
- How continuing care facilities are classified.
- How continuing care facilities will be licensed in the NWT and how the GNWT will keep track of these facilities.
- How individuals are determined to be eligible for admission into continuing care facilities, and how they will be admitted.
- The care standards that apply to a facility.
- Inspections and enforcement of standards.
- Complaints and penalties.
- How facilities will be held responsible to the public.

Regulations would also be developed to support the statute. General continuing care regulations would be developed to provide more detail about areas covered in the statute, including administrative processes in the regulation of continuing care facilities (for

example, licensing). Class-specific regulations would also be developed to address issues that are particular to a specific class of continuing care facility. For example, a specific regulation would be created for long-term care facilities to deal with specific issues that will only be applicable to long-term care facilities and not any other class of continuing care facility.

The statute would also provide a Director of Continuing Care with the power to establish other standards, policies, or procedures to address more specific topics (e.g. care standards and facility design standards). The proposed powers of this individual are further outlined later in this discussion paper.

The general structure of the Proposed Legislation is outlined in the diagram below.



ii. Services Offered by Facility Type

The Proposed Legislation would outline the general nature of the programs and services that are offered in each type of facility.

The proposed definition of *long-term care facilities* would include continuing care facilities that provide personal care, nursing care, and other supports to residents who are unable to fully care for themselves and required prolonged care, whether temporary or permanent. Basic programs and services provided by long-term care facilities would include:

- Accommodation and meals;
- Facility services (including laundry/linen services);
- Nursing services (24-hour access);
- Personal services;
- Dietary services (including therapeutic and special diets, as required);
- Medication supervision and administration; and

- Life enrichment services (including social and recreational services).

The proposed definition of *supported living facilities* would include facilities that provide 24-hour support and supervision for people who have a physical, cognitive, and/or mental health challenge, but do not need nursing care. Supported living provides services in a home-like setting while helping individuals maintain as much independence as possible. Basic programs and services offered by supported living facilities would include:

- Accommodation and meals;
- Facility services (including laundry/linen services);
- Personal services;
- Dietary services (including therapeutic and special diets, as required);
- Medication supervision and administration; and
- Life enrichment services (including social and recreational services).

Questions for Consideration:

- 1. Are there any other classes of facilities that you would consider to be continuing care facilities that should be included in the Proposed Legislation?**
- 2. Do you think that the description of long-term care and supported living is clear?**

B. Licensing of Facilities

Licensing refers to the process where a facility must meet a number of minimum requirements before it would be allowed to operate as a continuing care facility. No continuing care facility would be able to operate in the NWT without a license. This helps ensure that the public is protected and facility operators are able to maintain their reputation by demonstrating they are properly licensed.

i. Proposed Role of the Director of Continuing Care

The Proposed Legislation would allow the NWT Minister of Health and Social Services to appoint a Director of Continuing Care (the “Director”) to manage the licensing process. The Director would have the ability to make decisions on whether a new license application or renewal application is approved. The Director would also have the ability to place conditions on, suspend, or take away a license if a facility operator has not been following the Proposed Legislation (including its regulations, standards, policies, or procedures).

In order for the Director to be able to carry out their duties, they would have the ability to inspect a continuing care facility that is applying for a new license or the renewal of a license. They could also inspect a facility that is being suspected of operating as a continuing care facility without a license. Inspections are discussed later in this Discussion Paper.

ii. Proposed Licensing Process

An operator applying for a license would need to provide information to the Director to demonstrate, among other things, that they have the necessary safety plans, financing, and insurance in place to operate a continuing care facility. The Director may ask for additional information after reviewing the license application. The duration of a license could vary significantly. In other provinces, the duration of a license can vary anywhere between 1-30 years.

Facility operators would be required to provide the Director with updated information that may affect their licensing status during the periods between license renewals. This may include unexpected changes in their insurance coverage, building and mechanical failures, or any other incidents or events that may affect the facility's ability to meet safety standards that are in place.

In the event that the Director places conditions on a license, refuses an application for a new license, refuses the renewal of a license, or suspends or takes away a license, the operator would have an opportunity to appeal the decision through the courts.

iii. Establishment of Public Registry

The Director would also have the task of maintaining a list of licensed continuing care facilities, called a public registry. Certain information from this public registry would be available to the public for review. For example, an individual considering whether they want to move into a long-term care facility can ensure that it is properly licensed, and determine whether there are any areas where the facility is not following the Proposed Legislation. Information provided in the public registry may include:

- The name of the facility;
- Class of continuing care facility being operated;
- How many people can reside in the facility;
- Date license was issued and expiry date;
- Summaries of inspection or investigation reports;
- Any conditions that have been placed on the license; and
- Any orders that have been made against the facility.

Questions for Consideration

- 1. What criteria or factors should a Director consider when approving a license?**
- 2. Do you think licensed continuing care facilities should be able to operate other businesses within the same facility (e.g. stores and other services)? Do you think this is something that should be approved by the Director as part of the licensing process?**
- 3. How long should a license be valid before an operator needs to have it renewed?**
- 4. What information would be useful for you to see in the Public Registry, if you or a family member were considering moving to a facility or were staying in a facility?**
- 5. What would be the best way for you or your family members to access the Public Registry (e.g. online, though an office, etc.)?**

C. Client Eligibility and Admissions

One of the purposes of the Proposed Legislation is to provide a consistent approach for determining eligibility and admissions to Government Facilities in the NWT. Other provinces sometimes include eligibility requirements in their legislation, but with different levels of detail. When eligibility requirements are included, they usually focus on the needs of a resident and whether a facility will be able to accommodate that need. A review of applications is often completed by a committee like NWT Territorial Admissions Committee (TAC) to determine eligibility.

i. Current Role of the NWT Territorial Admissions Committee (TAC)

The TAC currently reviews applications of individuals to determine their eligibility for placement in long-term care facilities operated or funded by the government, in accordance with the DHSS' *Long-Term Care Application for Admission Policy*. TAC also reviews applications for the Hay River Supportive Living Campus (a supported living facility). The eligibility of applicants is based on their care needs. TAC is also responsible for maintaining a territorial waitlist of eligible applicants when a bed is not available at the time of application, and for determining who on the Territorial Waitlist is offered the next available bed in a facility. When a bed becomes available, it is given to the individual with the highest care need on the waitlist.

Eligibility and admissions in other supported living facilities are managed by the Northwest Territories Health and Social Services Authority, Tlicho Community Services Agency, and Hay River Health and Social Services Authority.

ii. Proposed Role of TAC and Admission Processes

Under the Proposed Legislation, TAC would remain responsible for determining the eligibility of individuals who apply for admission into a Government Facility and implementing procedures for how it will review those applications. TAC would also remain responsible for maintaining a waitlist of eligible applicants and determining who is offered the next available bed in Government Facility. Private Facilities that receive no public

funding to operate would need to establish their own admissions policies and procedures, but may consult with the DHSS to ensure that their policies and procedures are consistent with those that are developed for TAC.

iii. Residential Agreements

Another purpose of the Proposed Legislation is to ensure that expectations are clear to both the resident and operator when a resident moves into a facility. Many residents will be trying to make the facility their new home. In some ways, this is no different from any other individual who is renting a living accommodation from a landlord.

The NWT *Residential Tenancies Act* (RTA) currently governs landlord-tenant relationships in the NWT. However, living accommodations provided by continuing care facilities are not covered by the RTA, which means that residents living in a continuing care facility do not get the legal protections that tenants benefit from under the RTA.

To ensure that expectations are clear between a resident and a facility operator, the Proposed Legislation would require a written agreement between the resident and operator. A number of areas would be addressed by the agreement, including:

- Services to be provided;
- Roles and responsibilities of the facility operator;
- Roles and responsibilities of resident and/or guardian of the resident;
- Payment of security deposit;
- Payment of accommodation fees (these are the fees that residents will be required to pay to cover accommodation, meals, and other expenses that are not covered by government funding);
- Notification requirements for change in fees;
- Procedures for operator inspections at the beginning, during, and at the end of the tenancy;
- Notice period for termination of the residential agreement and process for termination;
- Emergency termination of residential agreement by operator;
- Termination of residential agreement upon death;
- Termination upon transfer to higher level of care; and
- Service of notices and documents (how the resident will bring issues to the attention of the operator, and how the operator will bring issues to the attention of the resident).

Questions for Consideration

1. What other information or factors do you think TAC should consider when determining eligibility for admission into a continuing care facility?
2. If an individual disagrees with a decision that TAC makes about their eligibility, what options should the individual or their family members have?
3. What other terms would you like to see in a Residential Agreement?
4. Do you think that the admissions process for Private Facilities should be regulated? If so, what aspects of admissions should be regulated?

D. Operational Standards

i. Current NWT *Continuing Care Standards*

In the NWT, there is already a set of *Continuing Care Standards* (Standards) in place which must be followed by Government Facilities currently operating in the NWT. The Standards cover topics like admission and care plans, personal care standards, staffing standards, facility requirements, food services, requirements for programming, cleanliness and maintenance, use of physical restraints, and medication/prescriptions.

Some provinces have integrated parts of their operational standards into their legislation, while others have left the standards as a stand-alone document (similar to what the NWT has right now with the *Continuing Care Standards*).

ii. Proposed Implementation, Review, and Amendment of Standards

Under the Proposed Legislation, the Director would have the ability to establish and adopt standards, policies, or procedures. The current *Continuing Care Standards* would be adopted as a set of standards that all continuing care facilities would need to adhere to.

Operational standards will naturally change over time as best practices change. Therefore, it is important that the *Continuing Care Standards* be reviewed on a regular basis. The current *Continuing Care Standards* are reviewed every three years, or whenever the Minister directs a review.

Questions for Consideration

1. What other items should be addressed in the Continuing Care Standards?
2. Who should be involved in reviewing the Continuing Care Standards?
3. How often do you think the Continuing Care Standards should be reviewed?
4. What would be the best way for residents or their families to get access to the Continuing Care Standards, or any other standards, policies, or procedures?

E. Maintenance and Enforcement of Standards

Licensing is a first step in ensuring that public safety is protected and that a facility meets an adequate level of care. However, issues may arise in between periods of licensing renewal, which need to be addressed and brought to the immediate attention of the Director in certain circumstances. All provinces have set out a complaints, inspection, and investigation process to ensure continuing care facilities comply with the standards in place. Failure to adhere to those standards may lead to fines, penalties, and other actions like the revocation of a license.

i. Powers of the Director

Under the Proposed Legislation, the Director would have responsibility over the following in order to maintain and enforce standards:

- Establishing inspection schedules;
- Receiving and processing complaints from residents and members of the public;
- Appointing inspectors and investigators;
- Establishing processes for inspections and investigations;
- Placing conditions on licenses;
- Approving correction plans submitted by operators and monitoring the fulfillment of its terms;
- Issuing enforcement orders; and
- Revoking licenses.

ii. Inspections of Facilities

It would not be possible for a single individual to carry out all of the above responsibilities. As a result, the Proposed Legislation would allow the Director to appoint inspectors to conduct inspections on the Director's behalf. Inspectors would review adherence to care standards, including standards relating to health and personal care, physical facilities, maintenance, and record keeping.

An inspector may be authorized by the Director to exercise the following powers:

- Enter into a facility at a reasonable time to conduct an inspection;
- Examine records and documents;
- Inspect and take samples of any material, food, or equipment;
- Perform testing, take photographs, or make recordings;
- Interview operators, employees, residents, relatives or legal representatives of the resident, and any other person (resident and family surveys may be employed); and
- Retain an expert that the inspector deems necessary to complete an inspection.

A report would be created by the inspector to summarize the inspection. Summaries of inspection reports may be posted on the public registry with personal information

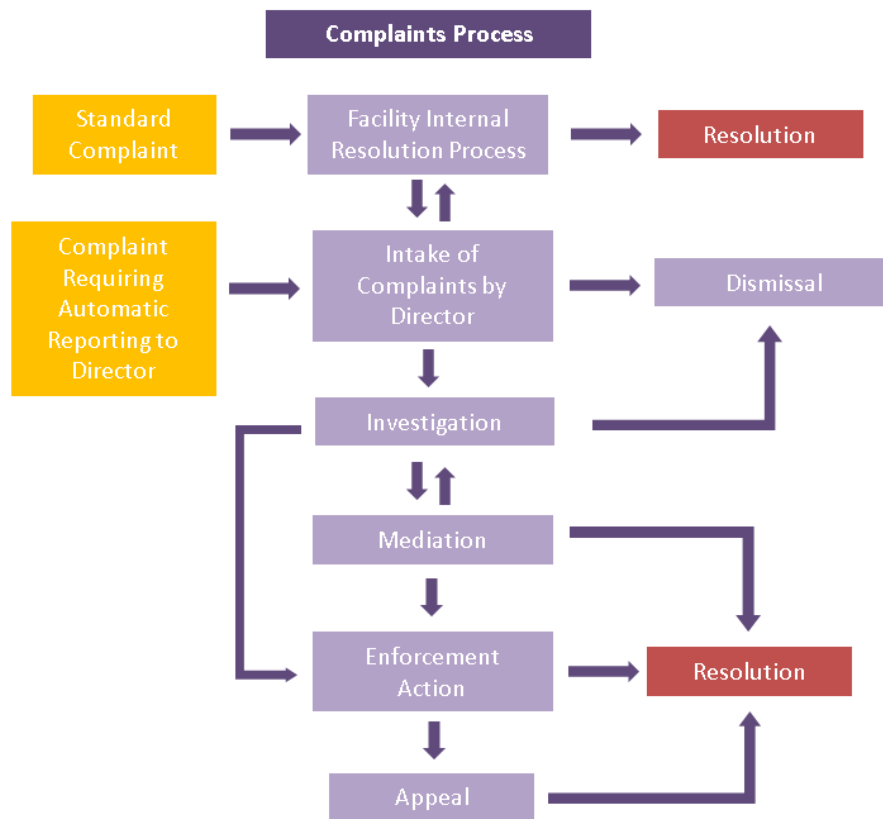
belonging to individuals removed. If a report reveals further follow up is required, then it may be referred back to the Director for further action.

iii. Complaints Process

The Proposed Legislation would put in place a complaints process to allow residents, their family members, and any other interested parties to raise concerns about the care provided by operators. The purpose of the Proposed Legislation is to provide an opportunity for the party making the complaint to first attempt to resolve the issue with the facility operator directly. The Proposed legislation would require all operators to have an internal resolution process in place. However, there are some issues that the facility operator may not resolve to the satisfaction of the individual(s) making the complaint, and there would be some issues that are serious enough to warrant automatic immediate notification to the Director as discussed in the next section.

When a complaint reaches the Director, an investigation may take place. Investigators would be appointed by the Director, and given powers similar to an inspector, and a resolution may be mediated between the resident and the facility operator. The Director may also take further enforcement action, like scheduling further follow up inspections. In instances where the Director does not believe a complaint is supported, the Director would have the ability to dismiss a complaint.

The following figure outlines the proposed complaints process.



iv. Enforcement Action- Orders, Fines, and Penalties

The Director would be given the ability to issue a range of orders under the Proposed Legislation to ensure action is taken by a facility operator. In most cases where an inspection or investigation has revealed that a facility operator has failed to follow the Proposed Legislation or failed to comply with standards, the Director would try to encourage change by requiring the facility operator to develop a corrective plan, which must be approved by the Director. The Director may also choose to issue a compliance order (requiring a facility operator to perform certain tasks) if there are a limited number of issues that can be easily addressed through such an order.

In instances where more serious violations have taken place, the Director could place conditions on a license which may limit the types of programs and services offered by a facility, place restrictions on the types of activities that can be performed by staff members, or limit the amount of residents that can reside at a facility. The public registry would be updated to reflect these conditions.

In exceptional circumstances, a license may be suspended for a period of time or revoked. This would take place when a facility operator has had a history of repeated or serious violations, and where the health or safety of a resident is compromised or at risk of being compromised. The Director may appoint an “administrator” to help temporarily operate the facility. The administrator is an individual appointed by the GNWT to temporarily take over the operation of a continuing care facility while the operator takes steps to comply with the legislation.

In instances where abuse, criminal offences, or other regulatory offences are involved, the Director may refer the matter to another government department and/or the RCMP.

An operator who is the subject of an order made by the Director would be given an opportunity to appeal the order before the court within a specified period of time.

Certain misconduct by the facility operator would constitute an offence under the Proposed Legislation, and fines may be issued. Offences may include failing to cooperate with an inspection or investigation, destroying or falsifying records, or failing to comply with an order of the Director. The proposed fines and penalties are meant to reflect the seriousness of not following the Proposed Legislation, and are consistent with other laws like the *Public Health Act*.

The proposed fines and penalties under the Proposed Legislation are as follows:

	Individual	Corporation
First Offence	<p>Fine not exceeding \$10,000, or to imprisonment for a term not exceeding six months, or to both, and</p> <p>To a further fine of not more than \$1,000 for each day during which the offence continues.</p>	<p>Fine not exceeding \$50,000, and</p> <p>To a further fine of not more than \$2,500 for each day during which the offence continues.</p>
Second or Subsequent Offence	<p>Fine not exceeding \$25,000, or to imprisonment for a term not exceeding 12 months, or to both, and</p> <p>To a further fine of not more than \$2,500 for each day during which the offence occurs.</p>	<p>Fine not exceeding \$100,000, and</p> <p>To a further fine of not more than \$5,000 for each day during which the offence continues.</p>

For example, the Director may have ordered a supported living facility operator to fix a fire alarm in the common area of the facility. If the facility operator has failed to comply with the order within the set period of time, their non-compliance may constitute an offence and they can be fined up to \$50,000.00. For each day that the fire alarms continue to remain out of operation, the facility operator can be fined an additional \$2,500.00 per day. These fines are in addition to any other fines that may be issued under other laws.

As another example, a manager of a long-term care facility is found to have falsified maintenance records for a piece of medical equipment in their facility to avoid failing an inspection. The manager also falsified a previous record in an inspection from the previous year, making this the manager's second offence. The manager may be fined up to \$25,000.00 or sentenced to a term of imprisonment not exceeding 12 months.

Questions for Consideration

- 1. What other powers should be provided to the Director (or someone assisting the Director) to ensure standards are maintained and enforced?**
- 2. How often should inspections take place?**
- 3. What makes a complaint process fair to all the parties involved?**
- 4. Do you think the proposed fines and penalties are appropriate?**
- 5. What other ways can be used to ensure that facilities are meeting care standards?**

F. Accountability and Other Issues

i. Annual Report of the Director

The Proposed Legislation would require the Director to complete an annual report, available for the public for review, which would outline the status of licenses in all continuing care facilities. The Director would also have the discretion to publish information relating to complaints, inspections, investigations, and orders made relating to a facility.

ii. Reporting requirements for operators

Facility operators would be required to provide the Director with information as requested, including operational plans, financial information, and care plans. During the licensing renewal process, facility operators would be required to provide a report outlining the activities of the operator and financial statement from the previous fiscal year, as well as any other information that the Director requires.

Certain serious incidents would also require automatic reporting to the Director. This includes:

- Any emergencies requiring the evacuation of residents;
- A sudden or unexplained death of a resident;
- A missing resident; and
- An outbreak of disease of public health significance.

iii. Resident rights and responsibilities

Every facility operator would be required to create a document that sets out the rights and responsibilities of a resident admitted into their facility. The Proposed Legislation would include a number of rights, including:

- The right to be treated with respect, dignity, and kindness;
- The right to voice concerns or recommendations for change;
- The right to make complaints to the operator, and to the Director if resolution is not achieved;
- The right to have their religious, spiritual, and cultural beliefs respected;

- The right to be free from discrimination;
- The right to have the sole use of personal possessions;
- The right to have visitors within reasonable hours set by the operator;
- The right to privacy and confidentiality; and
- The right to be free from abuse or harassment.

The Proposed Legislation would require the rights and responsibilities document to be brought to the attention of residents during the admissions process and also be available within the facility.

iv. Resident and family councils

Other provinces require facilities to establish a resident and family council for long-term care and supported living facilities. The purpose of these councils is to establish a forum for residents and family members to discuss issues affecting residents before they become more serious problems.

The Proposed Legislation would require continuing care facilities to establish resident and family councils. The governance of these councils would generally be left to the discretion of each facility, but the facility operator would be required to have a representative present at council meetings upon the reasonable request of the council.

v. Protection of personal information and health information

Operators are generally required to keep the personal information of residents confidential in accordance with provincial and federal legislation. The NWT *Health Information Act*, SNWT 2014, c. 2 already governs the collection, use, and disclosure of health information as well as an individual's right to access their own personal health information. The Proposed Legislation would make all facility operators subject to the *Health Information Act*.

Questions for Consideration

- 1. What other incidents should be directly reported by the facility operator to the Director?**
- 2. What information would you like to see in the Director's annual report to the public?**
- 3. What other rights do you think are important for the resident or the resident's family?**
- 4. What responsibilities should be placed on a facility operator to help establish resident and family councils and run meetings?**
- 5. What other ways can a resident or their family participate in raising concerns to a facility?**
- 6. What other ways can a resident or their family cooperate with a facility to address concerns?**

III. Contact for Further Information

The DHSS will be consulting with a number of different individuals and groups to discuss the Proposed Legislation.

The DHSS invites you to consider the information in this Discussion Paper and the questions raised for consideration and share your feedback. Questions that you may have relating to this Discussion Paper and your feedback may be sent by:

- Email: CCF_Legislation@gov.nt.ca
- Fax: 867-873-0204
- Mail: ATTN: CCF Legislation
Policy, Legislation, and Communications
Department of Health and Social Services
P.O. Box 1320
Yellowknife NT X1A 2L9
- Contacting your local Government Service Officer:
<https://www.eia.gov.nt.ca/en/priorities/access-government-programs-and-services-through-single-window-service-centres>