

CITY OF HAMILTON

PUBLIC HEALTH SERVICES Health Protection Division

TO: Mayor and Members
Board of Health

WARD(S) AFFECTED: CITY WIDE

COMMITTEE DATE: June 18, 2012

SUBJECT/REPORT NO:

Retirement Homes Act, 2010 Implications BOH11008(a) (City Wide)

SUBMITTED BY:

Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services Department

SIGNATURE:

PREPARED BY:

Michelle Baird (905) 546-2424 Ext. 3529

RECOMMENDATION

- (a) That all Residential Care Facilities continue to be licensed under the Licensing By-Law, and retirement homes regulated under the *Retirement Homes Act, 2010* be exempted from the provisions of Schedule 20 that are now covered in the Act;
- (b) That the draft amendment to the Licensing By-law respecting Residential Care Facilities attached as Appendix A to Report BOH11008(a), which is in a form satisfactory to the City Solicitor, be passed;
- (c) That the per bed health fees associated with a Residential Care Facility licence be applied only to Residential Care Facilities not licensed or required to be licensed by the Retirement Homes Regulatory Authority and that the User Fees and Charges by-law be amended accordingly;
- (d) That the current service level with respect to Residential Care Facility nurse inspections be maintained;
- (e) That the staff within the Residential Care Facility Inspection program be reduced by 1 FTE Registered Nurse, effective August, 2012;

- (f) That, for 2012, any shortfall within the Residential Care Facility budget be funded firstly from any Public Health Services and/or corporate surplus, and secondly from the Tax Stabilization Reserve;
- (g) That the annualized impact of approximately \$36,000 be included in the 2013 Public Health Services operating budget;
- (h) That City of Hamilton request that the Ontario Senior's Secretariat expand the current scope of the *Retirement Homes Act, 2010* to include environmental design requirements.

EXECUTIVE SUMMARY

In 2010, the *Retirement Homes Act, 2010* was enacted. The *Retirement Homes Act, 2010*:

- Creates a regulatory authority with the power to license retirement homes and conduct inspections, investigations and enforcement, including issuing financial penalties or revoking licenses if necessary;
- Establishes mandatory care and safety standards, and requirements for emergency plans, infection control and prevention programs, assessment of care needs and care planning, police background checks and training for staff;
- Establishes residents' rights, including the right to know the true cost of care and accommodation and the right to live in an environment that promotes zero tolerance of abuse or neglect.

The Retirement Homes Act, 2010 defines a retirement home as a building or related group of buildings, or a part of a building or a part of a related group of buildings, with one or more rental units of living accommodation that meets the following criteria:

- Occupied primarily by persons who are 65 years or older;
- Occupied or intended to be occupied by at least six persons who are not related to the operator of the home;
- Makes at least two of the 13 care services set out in the Act available, directly or indirectly, to residents.

A retirement home does not include buildings or parts of buildings that receive funding or are governed by certain other laws (example: domiciliary hostels, homes for special care, nursing homes). Currently in the City of Hamilton retirement homes are licensed by the municipality as Residential Care Facilities under Schedule 20 of the Licencing By-law.

The Retirement Homes Regulatory Authority, which is independent of government, will regulate retirement homes and provide education about the Act. The Retirement Homes Regulatory Authority is now accepting applications for licences. As of July 3, 2012, homes that meet the definition of "retirement home" in the Act must have a licence from the RHRA to operate, or have applied to the RHRA for a licence by that date. All retirement homes will be deemed licensed as of July 3, 2012.

Although the *Retirement Homes Act, 2010* and regulation under the Act regulate operating standards with respect to care, safety, infection prevention and control, resident rights and staffing, the Act and regulations are silent with respect to design requirements within the facility. Requirements such as minimum room size, spacing between resident beds, ventilation requirements, secure space and lighting standards for example are absent from the provincial regulations.

Schedule 20 of the Licensing By-Law sets out requirements for care, safety, infection prevention and control, and staffing similar to those found in the *Retirement Homes Act, 2010.* It also includes environmental design standards as described above. Staff therefore recommends continuing to license all Residential Care Facilities, but exempt retirement homes from the provisions of Schedule 20 that are now covered in the Act. It is important to note that homes may move from falling under the *Retirement Homes Act, 2010* or not, based on who the residents of the facility are at any point in time.

As a result of these changes, retirement homes will continue to be inspected by Public Health Inspectors whose services are funded under the cost-shared public health budget. However, these homes will no longer be subject to nurse inspections, which had been cost-recovered through a per bed fee. This will result in a significant reduction in revenue to the program. All other Residential Care Facility or part of a Residential Care Facility not licensed or required to be licensed by the Retirement Homes Regulatory Authority would continue to be subject to all of Schedule 20 of the Licensing By-law and the Guidelines under the Medical Officer of Health in their entirety.

The current service level for nurse inspections in Residential Care Facilities is three inspections annually. As a result in this shift in the numbers of beds subject to nurse inspection fees there will be insufficient revenue to continue with 3 annual inspections for the remaining facilities subject to nurse inspections. The current fee of \$57 per bed will be sufficient to cover only 2 inspections annually.

Based on program inspection data, staff does not recommend reducing the inspection frequency from 3 inspections per year to 2 inspections per year at this time. The reduction in the number of facilities will allow for a 1.0 FTE reduction in staffing. However, there will remain a \$36,000 shortfall in funding on an annualized basis. For 2012, staff recommend funding firstly from departmental surplus, secondly from city surplus and thirdly from the Tax Stabilization Reserve. For 2013, the shortfall would be included in the PHS budget submission.

Staff will assess and evaluate the inspection data over the coming years, and report back on other options that may be feasible to reduce the levy impact of this program.

Alternatives for Consideration – See Page 9

FINANCIAL / STAFFING / LEGAL IMPLICATIONS (for Recommendation(s) only)

Financial:

A decrease in revenues will be realized as a result of approving this recommendation. Currently all residential care facilities pay nurse inspection fees in conjunction with their annual license application. The inspection fee is applied per bed and recover all costs for nurse inspections. In 2012 the fee is \$57 per bed. There are approximately 3,054 Residential Care Facility beds in Hamilton. This results in \$174,090 annually in revenue generated through health inspection fees. It is anticipated that approximately 1000 beds will not be subject to licensing by the Retirement Homes Regulatory Authority, and therefore will continue to pay the annual per bed health inspection fee. This will result in \$57,000 in revenue collected annually, a decrease of \$117,090.

All facilities licensed as residential care facilities, including those licensed as retirement homes by the Retirement Homes Regulatory Authority, will continue to pay the annual license fees; facilities with 4-10 beds pay \$159 annually while facilities with 11 beds or greater pay \$317 annually. The annual license fees are not nurse inspection fees.

Inspections of residential care facilities by Public Health Services are conducted by Registered Nurses and Public Health Inspectors. There is no financial implication as a result of this recommendation with respect to inspections conducted by Public Health Inspectors as these inspections are mandated under Ontario Public Health Standards and the *Health Protection and Promotion Act, 1990*.

The annual cost per FTE Registered Nurse is \$85,529 (salary and benefits) in addition to \$7,170 in operating costs for a total annual cost of \$92,699 (Table 1). Based on current inspection fees there will be a deficit of \$35,699 on an annualized basis. It is recommended that this additional cost be applied to municipal levy. This will result in no increased cost to residential care facility operators while still maintaining protection for residents residing within the licensed facilities. For the remainder of 2012 it is recommended that the additional costs be recovered first from any Public Health Services and/or corporate surplus, secondly from the Tax Stabilization Reserve.

Table 1 Summary of Residential Care Facilities Annual Budget 2012-2013

	2012 Council Approved Budget	2012 Anticipated Based on Recommendation	2013 Anticipated Based on Recommendation
Salaries and Benefits	\$171,058	\$135,428*	\$85,529
Operating Costs	\$14,340	\$11,000**	\$7,170
Insurance Recovery	\$237,280	\$237,280	Not known at this time
General Fees	\$174,090	\$95,000***	\$57,000

^{*}estimate based on FTE RN January-July and 1 FTE RN August-December.

Facilities licensed or deemed licensed as retirement homes as of July 3, 2012 will be entitled to reimbursement of a portion of the nurse inspection fees paid in 2012 for inspections that do not take place as a result of the recommendations being approved.

Staffing:

Presently there are 2.0 FTE Registered Nurses conducting inspections in Residential Care Facilities. As result of the recommendations, there will be a reduction of 1.0 FTE.

Food safety inspections within residential care facilities, as well as, environmental health inspections are conducted by Public Health Inspectors in Public Health Services and will continue. There is no staffing implication with respect to these inspections.

There is minimal impact to staffing requirements of Municipal Law Enforcement as a result of this recommendation.

Legal:

There are no implications in implementing the recommendations.

HISTORICAL BACKGROUND (Chronology of events)

April 14, 2010: Report 10-013,PED10005(a), approved regarding the new Schedule 20 of By-law No. 07-170 regarding Residential Care Facilities.

June 2010: The *Retirement Homes Act, 2010* received legislative approval. Regulations under the Act not yet released or enacted.

^{**}estimated based on 2 FTE RN January-July and 1 FTE RN August-December.

^{***}estimated based on approximately 2000 RCF beds becoming retirement homes and receiving 2/3 of annual inspection fees refunded.

March 29, 2011: Report BOH11008 brought before Board of Health recommending that staff submit comments on the proposed Regulations under the *Retirement Homes Act, 2010* to the Ontario Seniors' Secretariat. Comments included gaps identified between proposed legislation and current City of Hamilton By-law requirements regarding residential care facilities.

April 16, 2012: Ontario Retirement Homes Regulatory Authority announces that all retirement homes, defined as such under the *Retirement Homes Act, 2010*, are required to submit an application for licence prior to July 3, 2012.

July 3, 2012: All retirement homes, as defined by the Act, will be deemed licensed.

POLICY IMPLICATIONS

There are no implications in implementing the recommendations.

RELEVANT CONSULTATION

Corporate Services, Legal Services Division - Legal Services was consulted and the advice received is incorporated in this Report and reflected in the Recommendations.

Planning and Economic Development, Parking and By-law Services Division - Al Fletcher was consulted regarding the role of Parking and By-law Services licensing Residential Care Facilities. All Residential Care Facilities will continue to be licenses as Residential Care Facilities, including those regulated by the *Retirement Homes Act*, 2010.

Community Services, Housing Division - Gillian Hendry and Shari Webb were consulted regarding their role in Residential Care Facilities as domiciliary hostels. All domiciliary hostels, with the exception of beds regulated by the *Retirement Homes Act, 2010*, will continue to be licensed under Schedule 20 of the Licensing Code By-law.

City Manager's Office, Human Resources Division - Gordon Muise, Labour Relations Officer, was consulted with respect to the implications of the recommendations in this report regarding reduction in Registered Nurse positions.

Ontario Retirement Homes Regulatory Authority - John Risk and Sandra Pitters were consulted regarding the *Retirement Homes Act, 2010* and the role of the regulatory authority, in addition to plans for implementation of enforcement.

ANALYSIS / RATIONALE FOR RECOMMENDATION

(include Performance Measurement/Benchmarking Data, if applicable)

The amended Schedule 20 of the Licensing Code By-law with respect to residential care facilities attached in Appendix A to Report BOH11008(a) proposes continuing to license all residential care facilities within Hamilton. Retirement homes or portions of facilities licensed or intended to be licensed by the Retirement Homes Regulatory Authority as retirement homes will be exempt from sections of the by-law specific to the provision of care services as noted in the amended by-law. Retirement homes are subject to care standards provisions stipulated in the *Retirement Homes Act, 2010* that meet or exceed the requirements in the Residential Care Facilities by-law.

There are a number of facilities expected to become mixed use facilities where only a portion of the home is subject to the conditions of the *Retirement Homes Act, 2010* and the remainder of the facility, the domiciliary hostel beds, will be exempt from the requirements of the Act. The domiciliary hostel beds, although they are located within a retirement home, are exempt from the requirements of the Act because they receive provincial funding. The parts of the facility not subject to the *Retirement Homes Act, 2010* will be subject to the full provisions of the by-law. This will ensure that residents living in beds not covered by the Act will continue to be afforded protection offered by the by-law.

It is recommended that all residential care facilities continue to be licensed as residential care facilities in Hamilton for the following reasons:

- Design requirements such as bed size, room size, bed space, secured storage space and ventilation are important characteristics of residential care facilities, including retirement homes. The Retirement Homes Act, 2010 is silent with respect to design requirements. In order to ensure tenants residing within retirement homes in Hamilton continue to benefit from the design standards in Schedule 20 of the Licensing Code By-law we recommend that these provisions of the By-law be applied to all residential care facilities and license all facilities in order to apply these sections of the by-law appropriately. In order to address this problem in the future it is recommended that the City of Hamilton advocate to the Province of Ontario to include design standards in the Act.
- The definition of a retirement home in the Act is dependant upon the majority of tenants in a facility being 65 years of age or greater. This means that as the age of the tenant population varies the facility will vary with respect to whether or not it is licensed or requires to be licensed by the Retirement Homes Regulatory Authority. If all residential care facilities are not licensed it will be possible that a home that no longer requires to be licensed under the Act will not immediately become licensed as

a residential care facility leaving the tenants without the protection of either the Act or the By-law until the City of Hamilton is aware of the home's operation.

Staff from Planning and Economic Development, Parking and By-law Services, as well as, Public Health Services commit to monitoring the situation with respect to retirement homes as the provincial legislation is implemented. If further changes are needed to the local residential care facilities by-law a report will come forward with the appropriate recommendations at that time.

Currently, there are approximately 3000 licensed residential care facility beds in Hamilton in approximately 90 facilities. Although only 30-35 facilities (depending upon client demographics and provincial definition) will be licensed provincially as retirement homes by the Retirement Homes Regulatory Authority the majority of current residential care facility beds will be licensed as retirement homes. There will be approximately 60 residential care facilities remaining that will not be provincially licensed; however, there will be only 1000 beds remaining as the homes remaining as residential care facilities tend to be smaller homes with a lesser number of tenants. This means, that although we will see a decrease of approximately 30 residential care facilities we will see a decrease of 60% in numbers of beds and a corresponding decrease of 60% in inspection fees collected. Historically the larger facilities, those that will now be licensed provincially as retirement homes, funded a more significant portion of the cost of the residential care facility inspection program overall as a result of the numbers of beds housed within these facilities.

As a result in this shift in the numbers of beds subject to nurse inspection fees, there will be a service impact realized. Historically, until 2012, the per bed nurse inspection fees were sufficient to cover the costs of 3 inspections annually. With a reduction in fees without a similar reduction in numbers of facilities the current fee of \$57 per bed will be sufficient to cover only 2 inspections annually.

It is recommended that we maintain our current service level of 3 inspections annually in order to continue with the current protection of tenants residing within residential care facilities. The findings of current residential care facility inspections (2011 data) indicate an overall 50% re-inspection rate in all residential care facilities with the rate of re-inspection in non-retirement homes at 54% annually. This indicates an ongoing issue with by-law compliance. If the service level was reduced by 33% to two inspections annually it is anticipated that the non-compliance would continue to occur and facilities would be in non-compliance with the by-law for longer periods of time due to a longer gap between inspections.

Staff will continue to monitor the level of compliance and non-compliance with the By-Law and report back to the Board of Health on any further changes that may be possible to the program, including those that could reduce the levy impact of the program.

ALTERNATIVES FOR CONSIDERATION

(include Financial, Staffing, Legal and Policy Implications and pros and cons for each alternative)

Below are alternatives to the suggested recommendations which have been considered:

A) License and regulate residential care facilities and exempt homes defined as retirement homes under the *Retirement Homes Act, 2010* from Schedule 20 of the Licensing By-law entirely.

Retirement homes will be licensed and regulated by the Retirement Homes Regulatory Authority and subject to the *Retirement Homes Act*; therefore, these facilities could be exempt from municipal by-laws with respect to Residential Care Facilities.

Financial: No change compared to "recommendation (a), (b) and (c)" with respect to financial implications; general health inspection fees reduced at same rate as recommendation in this report.

Staffing: No change with respect to staffing implications for registered nurses; this option will still result in a reduction of 1 FTE registered nurse.

Legal: No change.

Policy Implications: None.

Pros: This means that retirement home owner/operators will be required to be licensed by only one agency and required to meet the requirements of only one of the Act or the By-law.

Cons: The *Retirement Homes Act, 2010* does not have any requirements with respect to design elements within a retirement home so it is possible that facilities would relax there current requirements allowing for smaller rooms, less bed space, or greater numbers of tenants to a room. The Act applies only to homes where greater than 50% of tenants are above the age of 65 years of age. The tenant demographic could change on an ongoing basis and if the home is no longer provincially licensed it will be challenging for the City to determine which homes should or should not be subject to a City license on an ongoing basis.

B) License and regulate residential care facilities and exempt homes defined as retirement homes under the *Retirement Homes Act, 2010* from Schedule 20 of the Licensing By-law entirely and reduce the current service level related to nurse inspections.

Retirement homes will be licensed and regulated by the Retirement Homes Regulatory Authority and subject to the *Retirement Homes Act, 2010;* therefore, these facilities could be exempt from municipal by-laws with respect to residential care facilities. Reduce the current service level related to nurse inspections to 2 inspections annually rather than the current 3 inspections annually for all remaining residential care facilities.

Financial: Health inspection fees remain at the current rate of \$57 per bed which will result in \$57,000 revenue. There will be no increase in municipal levy.

Staffing: This option will still result in a reduction of 1.4 FTE registered nurses.

Legal: No change.

Policy Implications: None

Pros: This means that retirement home owner/operators will be required to be licensed by only one agency and required to meet the requirements of only one of the Act or the By-law.

Cons: The Retirement Homes Act, 2010 does not have any requirements with respect to design elements within a retirement home so it is possible that facilities would relax there current requirements allowing for smaller rooms, less bed space, or greater numbers of tenants to a room. The Act applies only to homes where greater than 50% of tenants are above the age of 65 years of age. The tenant demographic could change on an ongoing basis and if the home is no longer provincially licensed it will be challenging for the City to determine which homes should or should not be subject to a City license on an ongoing basis. A reduction in the number of annual inspections could put residents residing in residential care facilities at risk, as there will be an increased period of time between inspections during which a facility could operate in noncompliance with the Licensing By-law. An increased number of re-inspections will be realized as a result of non-compliance. The costs to sustain the re-inspections will be realized via the User Fees and Charges By-law.

C) License and regulate all residential care facilities, including those defined as retirement homes under the *Retirement Homes Act, 2010* and reduce the current service level related to nurse inspections.

All residential care facilities will be licensed by the City of Hamilton, including those licensed and regulated by the Retirement Homes Regulatory Authority and subject to the *Retirement Homes Act, 2010.* Reduce the current service level related to nurse inspections to 2 inspections annually rather than the current 3 inspections annually.

Financial: Health inspection fees remain at the current rate of \$57 per bed which will result in \$57,000 revenue. There will be no increase in municipal levy.

Staffing: This option will result in a reduction of 1.4 FTE registered nurses.

Legal: No change.

Policy Implications: None

Pros: No change compared to "recommendation (a) and (b)". All residential care facilities will continue to be licensed by the City of Hamilton, including retirement homes under the Retirement Homes Regulatory Authority. This will allow the City to enforce design requirements currently included in the Licensing By-law but absent in the *Retirement Homes Act, 2010* and Regulations.

Cons: A reduction in the number of annual inspections could put residents residing in residential care facilities at risk, as there will be an increased period of time between inspections during which a facility could operate in non-compliance with the Licensing By-law. An increased number of re-inspections will be realized as a result of non-compliance. The costs to sustain the re-inspections will be realized via the User Fees and Charges By-law.

D) License and regulate all residential care facilities, including those defined as retirement homes under the *Retirement Homes Act, 2010* and increase annual health inspection fees to cover the cost of nurse inspections.

All residential care facilities will be licensed by the City of Hamilton, including those licensed and regulated by the Retirement Homes Regulatory Authority and subject to the *Retirement Homes Act.* 2010.

Financial: Increase general health inspection fees \$35.70 per bed annually to recover the additional costs. Total health inspection fee would be \$92.70 per bed annually. This is a 61.5% increase in health inspection fees. There will be no increase in municipal levy.

Staffing: No change with respect to staffing implications for registered nurses; this option will still result in a reduction of 1 FTE registered nurse.

Legal: No change.

Policy Implications: None

Pros: All residential care facilities will continue to be licensed by the City of Hamilton, including retirement homes under the Retirement Homes Regulatory Authority. This will allow the City to enforce design requirements currently included in the Licensing By-law but absent in the *Retirement Homes Act, 2010* and Regulations. There will be no increase in municipal levy.

Cons: There will be a significant financial impact for residential care facility owners.

E) License and regulate all residential care facilities, including those defined as retirement homes under the *Retirement Homes Act, 2010* and fully fund the cost of nursing inspections by removing all per bed health inspection fees and cover all nurse inspection costs via a levy contribution.

All residential care facilities will be licensed by the City of Hamilton, including those licensed and regulated by the Retirement Homes Regulatory Authority and subject to the *Retirement Homes Act.* 2010.

Financial: Eliminating the per bed health inspection fee and covering all costs of nurse inspections via the municipal levy will result in an annual levy cost of \$92,699. The current service level will be maintained.

Staffing: No change with respect to staffing implications for registered nurses compared to "recommendations (a), (b) and (c)"; this option will still result in a reduction of 1 FTE registered nurse.

Legal: No change.

Policy Implications: None

Pros: All residential care facilities will continue to be licensed by the City of Hamilton, including retirement homes under the Retirement Homes Regulatory Authority. This will allow the City to enforce design requirements currently included in the Licensing By-law but absent in the *Retirement Homes Act, 2010* and Regulations. There will be a decrease in annual fees for residential care facility owners.

Cons: There will be a municipal levy increase of \$92,699 annually.

F) License and regulate all residential care facilities, including those defined as retirement homes under the *Retirement Homes Act, 2010* and fully fund the cost of nursing inspections by removing all per bed health inspection fees and cover all nurse inspection costs via a levy contribution. Reduce current service level.

All residential care facilities will be licensed by the City of Hamilton, including those licensed and regulated by the Retirement Homes Regulatory Authority and subject to the *Retirement Homes Act, 2010.*

Financial: Eliminating the per bed health inspection fee and covering all costs of nurse inspections via the municipal levy will result in an annual levy cost of \$55,619. The service level will be reduced to 2 inspections annually rather than the current 3 inspections annually.

Staffing: This option will still result in a reduction of 1.4 FTE registered nurses.

Legal: No change.

Policy Implications: None

Pros: All residential care facilities will continue to be licensed by the City of Hamilton, including retirement homes under the Retirement Homes Regulatory Authority. This will allow the City to enforce design requirements currently included in the Licensing By-law but absent in the *Retirement Homes Act*, 2010 and Regulations. There will be a decrease in annual fees for residential care facility owners.

Cons: There will be a municipal levy increase of \$55,619 annually. A reduction in the number of annual inspections could put residents residing in residential care facilities at risk as there will be an increased period of time between inspections during which a facility could operate in non-compliance with the Licensing By-law.

G) Discontinue licensing all residential care facilities.

Retirement homes will be licensed and regulated by the Retirement Homes Regulatory Authority and subject to the *Retirement Homes Act, 2010*; therefore, these facilities could be exempt from municipal by-laws with respect to residential care facilities. Facilities with a domiciliary hostels subsidy contract with the City of Hamilton have operating requirements within their subsidy contract. These could be extended to cover operating criteria not currently established within the contract but established within Schedule 20 of the Licensing Code By-law.

Financial: Inspection fees remain unchanged at \$57 per bed.

Staffing: Reduction of 1.4 FTE Registered Nurses and 0.6 FTE Registered Nurse moved to Community Services.

Legal: No change.

Policy Implications: None

Pros: Retirement home owner/operators will be required to be licensed by only one agency and required to meet the legislation set out by only one agency.

Cons: The *Retirement Homes Act, 2010* does not have any requirements with respect to design elements within a retirement home so it is possible that facilities would relax their current requirements allowing for smaller rooms, less bed space, or greater numbers of tenants to a room. The Act applies only to homes where greater than 50% of tenants are above the age of 65 years of age and the domiciliary hostel contracts apply only to facilities with a subsidy contract. There is the potential that facilities catering to a younger demographic but operating without a subsidy contract would fail to be protected, as there would be an absence of applicable legislation. Community services staff has no means of inspecting to ensure care provisions are being met within domiciliary hostels and currently the expertise is not in place to carry out this activity. This model is not in place in other communities at this time.

CORPORATE STRATEGIC PLAN (Linkage to Desired End Results)

Focus Areas: 1. Skilled, Innovative and Respectful Organization, 2. Financial Sustainability, 3. Intergovernmental Relationships, 4. Growing Our Economy, 5. Social Development,

6. Environmental Stewardship, 7. Healthy Community

Skilled, Innovative & Respectful Organization

Council and SMT are recognized for their leadership and integrity

Financial Sustainability

 Delivery of municipal services and management capital assets/liabilities in a sustainable, innovative and cost effective manner

Intergovernmental Relationships

Influence federal and provincial policy development to benefit Hamilton

Social Development

Everyone has a home they can afford that is well maintained and safe

Healthy Community

 Adequate access to food, water, shelter and income, safety, work, recreation and support for all (Human Services)

APPENDICES / SCHEDULES

Appendix A - Draft Amendment to the Licensing By-law Respecting Residential Care Facilities

Authority: Item , Committee

Report (Staff report number)

CM: Date Bill No.

CITY OF HAMILTON

BY-LAW NO.	
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To Amend By-law No. 07-170, a By-law to License and Regulate Various Businesses

WHEREAS Council enacted a by-law to license and regulate various businesses being City of Hamilton By-law No. 07-170;

AND WHEREAS this By-law provides for amendments to Schedule 20 of By-law No. 07-170; **NOW THEREFORE** the Council of the City of Hamilton enacts as follows:

- 1. Section 1 of Schedule 20 of By-law No. 07-170 is amended by removing the lettering preceding each definition and by relettering the subsections under the definitions of "care services", "drug", "Officer", "rehabilitative services" and "tenant of a facility" accordingly.
- 2. Section 1 of Schedule 20 of By-law No. 07-170 is further amended by deleting the definition of "residential care facility" and replacing it with the following new definition:

"residential care facility" means a residential complex that is:

- (a) occupied or intended to be occupied by four or more persons for the purpose of receiving care services, whether or not receiving the services is the primary purpose of the occupancy; or
- (b) licensed or required to be licensed under the <u>Retirement Homes Act, 2010</u>, and the term "facility" has a corresponding meaning;
- 3. Schedule 20 of By-law No. 07-170 is amended by adding the following new section 2.1 after section 2:

2.1 The following provisions of this Schedule do not apply with respect to tenants subject to the Retirement Homes Act, 2010 but only to the extent that tenants of the same facility not subject to the Retirement Homes Act, 2010 are unaffected:

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subsection 5(1)(e);
section 7;
subsection 12(c);
paragraphs 12(f)(ii) to (v);
subsection 12(g)
section 13 to the extent that the section applies to volunteers;
section 15;
section 16;
section 17;
sections 32 to 53.
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- 4. Subsection 6(b) of Schedule 20 of By-law No. 07-170 is amended by adding the word "applicable" before "health".
- 5. Subsection 12(a) of Schedule 20 of By-law No. 07-170 is amended by adding the word "applicable" before "provisions".
- 6. Section 12 of Schedule 20 of By-law No. 07-170 is amended by adding following new subsection 12(j):
 - (j) where both tenants who are subject to the <u>Retirement Homes Act, 2010</u> and tenants who are not subject to the <u>Retirement Homes Act, 2010</u> reside in the facility, ensure that:
 - (i) an up-to-date list of tenants who are not subject to the <u>Retirement Homes</u>

 <u>Act, 2010</u> is maintained; and
 - (ii) the person with the primary duty of supervising the tenants under paragraph 17(2)(b) provides the list and identifies tenants who are not subject to the Retirement Homes Act, 2010 immediately upon the request of an Officer.

- 7. Subsection 54(1) of Schedule 20 of By-law No. 07-170 is amended by adding the words "where that subsection is applicable" after "subsection 49(1)".
- 8. Subsection 54(2) of Schedule 20 of By-law No. 07-170 is amended by adding the words "where that subsection is applicable" after "subsection 49(2)".
- 9. This By-law comes into force on the day it is passed.

Mayor

PASSED this	day of	, 20	
R Bratina		R Caterini	

City Clerk

