Welcome to ‘Special Care Homes’

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Compliance Review		
Name of home		Foam Lake Jubilee Home
Location		Foam Lake, SK
Date of review		Monday, May 11, 2026
Date of initial report due (60 business days post review)		Thursday, August 6, 2026
Date of final report (full compliance)		Monday, August 10, 2026
Standards found non-compliant at time of review – SHA Compliance Status at 60-days post review		
Standard	**Criteria Observed**	**SHA Reported Compliance with Standards (Yes/No)**
1.1.12 Resident Rights & Responsibilities. Special-care homes shall respect the legal rights of every resident in so far as they are competent and capable of looking after their own affairs as is embodied in The Saskatchewan Human Rights Code and The Canadian Charter of Rights and Freedoms.	Resident Rights and Responsibility poster & Ombudsman contact information are posted in a common area	YES
1.1.15 Health Care Directives and Substitute Health Care Decision Makers. Special-care homes shall support residents to develop health care directives, and where a health care directive is established and the individual can no longer communicate their medical care wishes, their directive shall be respected.	The Health Care Directives and Substitute Health Care Decision Maker's Act shall be referred to, and followed to determine the appropriate decision maker for health-related decisions when the resident is not able and a health proxy has not been appointed.	YES
	A copy of the health care directive shall be in the resident chart and accompany the resident being admitted to an acute care hospital/treatment centre.	YES
1.2.1 Long-term Care (Includes 1.2.1.1- 1.2.1.3) . The Special-care Homes Rates Regulations sets out the process for determining the income-tested resident charge that shall be applied to residents residing in a publicly subsidized designated home (i.e. a long-term care bed in a facility designated as a Special-Care Home, Hospital or Health Centre), and residents that have qualified for long-term care services and are receiving care in an acute care or health centre bed waiting for placement in a home.	The home has a process to ensure that at end of service there is flexibility to charge up to 3 days following the date of discharge.	YES

Standard	Criteria Observed	SHA Reported Compliance with Standards (Yes/No)
1.3.1 Clinical Assessments. All residents moving into special-care homes for long-stay care shall have an assessment completed using an assessment instrument approved by the Ministry. The information obtained from the assessment shall inform the resident's care plan. Assessment information shall be provided to the Ministry in a format approved by the Ministry.	There is documentation that all long-stay residents have an assessment: Quarterly	YES
1.3.2 Care Plans. Special-care homes shall ensure that each resident has an appropriate comprehensive and individualized care plan developed upon arrival in collaboration with a multidisciplinary team; the resident and their most responsible person shall be included in the care plan development.	Resident/family and care team are involved in developing the care plan.	YES
	A care conference occurred with the resident/most responsible person/care team during the last year.	YES
	The most responsible person was notified when a change in the care plan/condition occurred.	YES
	Does the care plan address the resident's physical/psychological/spiritual/cultural/social needs and corresponding goals?	YES
	The care plan is developed within four days of arrival and reviewed quarterly or when there is a change in health status.	YES
1.3.3 Personal Care. Special-care homes shall provide residents with personal care that is consistent with the care plan to support quality outcomes through the promotion of health, safety, independence, and comfort considering the individual rights of each resident within the inherent	Residents received a minimum of 1 bath/shower in the last 7 days, or documentation is provided as to why this did not occur.	YES
	Residents receive oral care minimum of once daily.	YES
	Bowel/bladder care is monitored and documented.	YES
1.3.5 Falls Prevention and Injury Reduction Program. Special-care homes shall have a Falls Prevention and Management Program that fosters resident independence and quality of life while mitigating risk for the residents and staff.	There is evidence that the falls prevention and management program is reviewed annually or when there is a significant change.	YES
	There is documentation on the care plan when resident is assessed as "at risk for falls".	YES
	If an individual is assessed as "at risk for falls", there are interventions in place to reduce the frequency of falls.	YES
1.3.6 Restraints. Special-care homes shall only restrain residents (environmental, chemical or physical restraints)	There is a written physician's or nurse practitioner's order for the restraint on the chart.	YES
	Initial (within 24 hours) and on-going regular assessments of the resident, as well as the outcomes of the restraint used, are documented including rational for using the restraint.	YES

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residents (environmental, chemical or physical restraints) as a last resort, when there is an identified risk of injury to self and/or others and all other alternatives have proven ineffective.	A review was completed, at minimum, within the last 3 months when restraints are in use.	YES
	The period for regular resident monitoring is documented in the care plan according to the type of restraint used.	YES
	Are any residents in a mechanical restraint (i.e. seatbelt, lap tray etc.) Ask for resident's name to do chart review. Is there a written physician's or nurse practitioner's order for the restraint on the chart?	YES
1.3.7 Skin Integrity and Wound Care. Special-care homes shall provide skin and wound care to preserve residents' skin integrity, prevent pressure injuries, promote comfort and mobility, and prevent infection.	There is documentation in the resident care plan regarding wound management and treatments.	YES
	There is a documentation in the resident chart regarding the status of the wound.	YES
1.3.8 Pain Management. Special-care homes shall establish a policy/procedure to assess and manage residents' pain on a regular (at least daily) basis to facilitate residents' optimal comfort, dignity and quality of life.	Pain is assessed daily and is documented on the resident's chart.	YES
	Interventions to manage pain are documented.	YES
	The effectiveness of the pain management strategy is evaluated and documented in the resident's chart.	YES
1.3.9 Managing Responsive behaviors. Special-care homes shall appropriately document and manage responsive behaviors in accordance with the care plan.	If a resident is experiencing responsive behaviors, the care plan has been reviewed within the last 90 days, or more frequently if behaviors change.	YES
1.3.16 Medication Management. Special-care homes shall ensure residents receive safe, reliable and cost-efficient drug management services that comply with The Housing and Special-care Homes Regulations and are administered by persons practising within their scope of practice.	There is documentation that a multidisciplinary medication review has been completed at regular quarterly intervals, when an adverse effect occurs, or when a significant change in health status takes place.	YES
	All medications are ordered by physician/nurse practitioner.	YES
	There is documentation of medication reconciliation upon move-in and transfer.	YES
	All medications are kept in locked cabinets.	YES
	Controlled drugs and substances (e.g. narcotics) must be stored in a double locked system.	YES
	There is a record of all persons accessing controlled drugs and substances (e.g. narcotics) including a documentation that quantities are monitored and that each drug accessed can demonstrate a trail to a resident having received the drug.	YES
	Are all medications signed for?	YES
	Medications are within their expiry dates?	YES

Standard	Criteria Observed	SHA Reported Compliance with Standards (Yes/No)
	Items are labelled and not used communally (creams, lotions etc.).	YES
	Supplies are within their expiry date?	YES
	Did the staff follow all the rights of drug admin?	YES
1.3.18 Purposeful Rounding. Special-care homes shall implement purposeful rounding - the timed, planned intervention of healthcare staff in order to address common elements of care, typically by means of a regular bedside round that proactively seeks to identify and meet residents' fundamental care needs and psychological safety.	Are call bells answered in a timely manner/ Purposeful Rounding Observed?	YES
1.3.19 Resident Care Records. Special-care homes shall ensure every resident has a standardized resident care record starting upon move in and maintained up-to-date for the duration of the stay in compliance with The Housing and Special-care Homes Regulations.	Documentation occurs immediately after a particular event(s). The care provider who observed an event or attended to the resident should complete the recording in an accurate and legible manner.	YES
1.3.20 Death of a Resident . Special-care homes shall have a policy regarding pronouncing resident death, certifying death, notifying the most responsible person, and legal documentation.	A process is in place to follow when a resident's most responsible persons are not available to be notified.	YES
1.4.5 Environmental Services. Special-care homes shall provide environmental services to ensure the home is a clean, safe and comfortable environment.	Chemicals are stored correctly and properly labeled?	YES
1.5.1 Infection Prevention and Control. Special-care homes shall monitor, reduce and/or control the spread of infectious organisms to residents, staff and visitors through the surveillance, identification, prevention, control, and reporting of infections and shall establish an infection prevention and control policy.	Evidence of regular hand washing audits are completed as per Accreditation Canada standards.	YES
	Are personal care products labeled appropriately and labelled for individual use?	YES
	Wound supply products are stored in a clean space; products opened are labeled with patient's name.	YES
	Is the tub clean?	YES
1.5.6 Fire Safety. Special-care homes shall have a fire safety plan, including fire inspections, that meets all national, provincial and municipal requirements.	The fire plan is accessible to staff and outlines the frequency of alarm tests and drills.	YES
	There is documentation that a fire drill, with attendance, is completed as per the home's fire safety plan monthly	YES

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1.5.7 Design and Aesthetics. Special-care homes shall create a cheerful and home-like environment to meet resident care needs, assure their quality of life, and to provide a healthy work environment for employees.	There is documentation of regular building monitoring to detect safety issues.	YES
1.5.8 Water Temperature. The temperature of water in hot water holding tanks and at points of use shall be maintained at an appropriate temperature for the intended use.	The bath water temperature is checked and documented prior to each bath.	YES
1.6.3 Medical Coverage/Physician Services. Homes shall provide medical coverage in a manner consistent with The Housing and Special-Care Homes Regulations	Medical coverage includes the arrangement for a physician or NP to be on call and available to receive calls at all times.	YES
	An examination by the physician or NP must be completed and documented, upon move-in, where a nursing assessment indicates that the resident's condition requires attention by a physician or NP, or not less than once a year.	YES
1.7.2 Concern Handling. Special-care homes shall have a documented process to ensure that residents/most responsible person/employees, and any other person having a concern related to the care a resident is receiving, have the opportunity to report the concern, and receive a response in a timely manner, without fear of retribution.	There is a documented concern handling policy, a copy of which is included in resident handbook or otherwise shared with residents/families.	YES
	A procedure is in place to inform residents/responsible persons that they can speak with the office of the Ombudsman at any time, in private.	YES

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1.7.4 Reporting. Special-care homes shall report the following to the Ministry of Health: All move-ins, transfers and discharges as prescribed by the Ministry; Any changes to incorrect move-in information previously provided to the Ministry; Where residents provide their annual reported income to the home it shall be provided to the Ministry of Health for the purpose of setting the income-tested charge; Any changes to resident income will be reported immediately to ensure a timely change to the income-tested resident charge; Total bed counts identifying the number of permanent placement beds and the number of temporary care beds used for respite care, convalescent care or other short stays; Ongoing changes made on a permanent basis to long-term care bed numbers as approved by the Ministry of Health; and, Other information as required by the Ministry of Health. Homes shall report data to CIHI as directed by the Ministry of Health.	The home has a procedure that identifies all reporting requirements.	YES
1.3.15 Special-care homes shall ensure safe food handling in compliance with The Food Safety Regulations and accompanying Public Eating Establishment Standards.	Snack cart did not identify specific resident dietary needs.	YES
	Snack cart did not have any specific dietary information of the residents.	YES
Special-care homes shall ensure safe food handling in compliance with The Food Safety Regulations and accompanying Public Eating Establishment Standards.	no expiry dates noted to decanted items.	YES