

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Developmental Service (DS) Compliance Inspections: Indicator List

For APPLICATION ENTITIES

Ontario Regulation 299/10 – Quality Assurance Measures and Policy Directives for Application Entities made under *the Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008 (SIPDDA)*

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Table of Contents

Foreword	3
Policies and Procedures	4
Board Records	22
Staff-Volunteer Records	32
Individual Records	52
Records and Documentation	112

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Foreword

- As part of the developmental services (DS) transformation, the government passed the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008* (SIPDDA). The government also set out in Ontario Regulation 299/10 - Quality Assurance Measures (QAM) requirements under SIPDDA that promote social inclusion for individuals with developmental disabilities.
- Under the authority of SIPDDA, the Ministry of Children, Community and Social Services (MCCSS) has the authority to inspect Developmental Services Ontario (DSO) offices. Compliance inspections are completed by ministry staff, referred to as Program Advisors (inspectors).
- Compliance inspections confirm whether DSO offices are complying with the minimum standards outlined in Ontario Regulation 299/10 Quality Assurance Measures (QAM) and the Policy Directives for Application Entities (also referred to as DSOs).
- This Indicator List replicates the DS Compliance Inspection Report (used by Program Advisors during a compliance inspection. This Indicator List categorizes the QAM and policy directive requirements into specific categories (i.e. Policy/Procedures, Board Records, Records/Documentation, Individual Records and Staff-Volunteer Records).
- The Indicator List further outlines:
 - Policy intent of the QAM and policy directives requirements;
 - Applicability of the QAM and policy directives requirements to SIPDDA-funded services and supports;
 - Specific indicators to confirm and verify compliance; and,
 - Agency actions required to address areas of non-compliance.
- We encourage DSOs to use the information provided throughout the Indicator List to further educate and support compliance within their organizations.
- If you have any questions or concerns, please contact DSCompliance@ontario.ca and a member of the DS Compliance team will be happy to assist you.

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Policies and Procedures	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>1. Follow P&P</p> <p>Where an application entity is required to have policies and procedures in respect of its quality assurance measures, the agency shall follow the policies and procedures and shall ensure that its staff members, volunteers and members of its board of directors follow them, to the degree that is appropriate given the role of the staff member, volunteer and board member.</p> <p>O.Reg.299/10 , 1(3)(a)</p>	<ul style="list-style-type: none"> Application entity staff, volunteers and board members are aware of the agency policies and are informed of how these policies are applied in practice. Easy access to the policies and procedures ensures staff/volunteers are able to refer to them as necessary. 	<p>Policies and procedures, with respect to QAM, will be reviewed.</p> <p>All staff members, volunteers and board members at each service location have access to the agency operational policies and procedures.</p> <p>P&P's are reviewed with staff, volunteers and with members, of the board of directors as evidenced by records of:</p> <ul style="list-style-type: none"> Staff meetings minutes/notes Board meeting minutes/agendas Orientation meetings Performance review/attestations <p>Evidence of instances where P&P's are not being followed by staff, volunteers and board members.</p>	<p>The application entity did not follow their policies and procedures regarding (specify).</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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Policies and Procedures	Intent	Indicator	Observed Non-Compliance	Required for Compliance
2. Writing, Date, Current Practice Where an application entity is required to have policies and procedures in respect of its quality assurance measures, the agency shall ensure that the policies and procedures are in writing, are dated and reflect the application entity's most current practice. O.Reg.299/10, 1(3)(b)	<ul style="list-style-type: none"> Written policies set out the framework within which the application entity must operate. The written procedures specify how the policies are to be applied in practice. To ensure the application entity has written policies and procedures that contribute to a consistent understanding of the role, function, and services carried out by staff. 	Review P&P that reflect QAM requirements and ensure that they: <ul style="list-style-type: none"> Are in writing; Are dated; Are reviewed and/or approved by the board of directors; and, Reflect the application entity's most current practice. 	The application entity's policies are not in writing, dated, there is no indication of having being approved, and/or do not reflect current practice.	Final/approved written & dated policies and procedures.

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3. Mission Statement Each application entity shall include in its policies and procedures a mission statement that promotes social inclusion. O.Reg.299/10, 29(1)(1)	<ul style="list-style-type: none"> Application entity purpose and primary objectives include the promotion of social inclusion. 	Review P&P for current mission statement that promotes social inclusion, which could include service principles: <ul style="list-style-type: none"> ✓ Individual choice, independence and rights ✓ Accessibility ✓ Safety and Security ✓ Accountability ✓ Sustainability May have been developed with input from individual, community, staff, board members, etc.	The application entity's policies and procedures do not include a mission statement that promotes social inclusion.	Final/approved written & dated policies and procedures.

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<p>4. Service Principles</p> <p>Each application entity shall include in its policies and procedures service principles that promote individualized approaches to supporting persons with developmental disabilities.</p> <p>O.Reg.299/10, 29(1)(2)</p>	<ul style="list-style-type: none"> Application entity purpose and primary objectives include the promotion of social inclusion. 	<p>Review P&P for service principles that promote individualized approaches to supporting persons with developmental disabilities.</p> <p>Service Principles could include, but are not limited to references about:</p> <ul style="list-style-type: none"> Social Inclusion Individual Choice Independence and Rights <p>Documentation outlining values and/or service principles of community inclusion with an individualized approach.</p>	<p>The service principles do not promote individualized approaches to supporting persons with developmental disabilities.</p>	<p>Final/approved written & dated policies and procedures.</p>

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5. Statement of Rights Each application entity shall include in its policies and procedures a statement that outlines the rights of persons with developmental disabilities who have applied for services and supports or funding and is based on respect for, and the dignity of, the individual. O.Reg.299/10, 29(1)(3)	<ul style="list-style-type: none"> To ensure persons applying for services are aware of their rights when interacting with the application entity. The intent of the requirement is a stand-alone statement that outlines the rights of persons with developmental disabilities. 	<p>Statement of rights should be based on respect for, and the dignity of, the individual.</p> <p>Written materials or visual aids may be used to assist persons with developmental disabilities and their family/support network to understand their rights.</p>	<p>The application entity's policies and procedures do not include a statement that outlines the rights of persons with developmental disabilities who have applied for services and supports or funding and is based on respect for, and dignity of, the individual.</p>	<p>Final/approved written & dated policies and procedures.</p>

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<p>6. Abuse, Documentation and Reporting</p> <p>Each application entity shall include in its policies and procedures the documentation and reporting of any alleged, suspected or witnessed incidents of abuse of persons with developmental disabilities.</p> <p>O.Reg.299/10, 30(1)(1)</p>	<ul style="list-style-type: none"> To ensure zero tolerance of abuse: all application entity staff and volunteers are aware of obligations relating to concerns about abuse, including signs of abuse, responsibilities to report and document suspicions and observations of abuse. To ensure that if an abuse allegation is made or suspected, or abuse is witnessed, staff and volunteers are prepared in advance and clearly understand the procedure to follow to deal with the alleged or witnessed abuse. 	<p>Review P&P re:</p> <ul style="list-style-type: none"> Documentation (internal incident reports and MCSS Serious/Enhanced Serious Occurrence Reports) <p>Reporting (that complies with all legislation, regulations, Policy Directives/Guideline (example: Occurrence Reporting) requirements of any alleged, suspected or witnessed incidents of abuse.</p>	<p>The application entity's policies and procedures do not include the documentation and reporting of any alleged, suspected or witnessed incidents of abuse of persons with developmental disabilities.</p>	<p>Final/approved written & dated policies and procedures.</p>

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7. Abuse, Supporting Persons Each application entity shall include in its policies and procedures the manner of supporting a person with a developmental disability, where abuse of the person has been alleged or witnessed or is suspected. O.Reg.299/10, 30(1)(2)	<ul style="list-style-type: none"> The intent of this requirement is to have policies and procedures that address how the organization will support a person with a developmental disability where abuse of that person is alleged, suspected or witnessed. To provide support and protection for victims of abuse/suspected/alleged abuse To safeguard the health, safety, rights and dignity of the abused/alleged abuse person. 	Review P&P to ensure it includes the manner of supporting a person with a developmental disability, where abuse of the person has been alleged or witnessed or is suspected. Manner of supporting a person could include: <ul style="list-style-type: none"> Referral to appropriate medical and/or community services Providing support during the inquiry process from someone with whom she/he feels comfortable Reporting/discussing alleged abuse using communication methods familiar to the person Providing information or other resources that may be of assistance to the individual Where required, providing information regarding what to expect during a police inquiry and legal proceedings.	The application entity's policies and procedures do not include the manner of supporting a person with a developmental disability, where abuse of the person has been alleged or witnessed or is suspected.	Final/approved written & dated policies and procedures.

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<p>8. Abuse, Dealing with Staff and Volunteers</p> <p>Each application entity shall include in its policies and procedures the manner of dealing with application entity staff members and volunteers who have abused or are alleged to have abused persons with developmental disabilities who have applied for services and supports or funding.</p> <p>O.Reg.299/10, 30(1)(3)</p>	<ul style="list-style-type: none"> To ensure the application entity has considered and articulated procedures to respond to the disclosure of abuse, or suspected abuse, or witnessed abuse, and to ensure all staff and volunteers will be treated in accordance with the policies and procedures. 	<p>Review of P&P for the current manner of dealing with the application entity's:</p> <ul style="list-style-type: none"> staff members who have abused or are alleged to have abused persons with developmental disabilities Volunteers who have abused or are alleged to have abused persons with developmental disabilities. <p>This could include policies relating to actions and safeguards to put in place during any investigative process relating to abuse allegations; respecting all privacy/confidentiality obligations during any reporting/investigation process; ensuring the safety of persons with disabilities both during and following any investigations.</p>	<p>The application entity's policies and procedures do not include the manner of dealing with application entity staff members and volunteers who have abused or are alleged to have abused persons with developmental disabilities who have applied for services and supports or funding.</p>	<p>Final/approved written & dated policies and procedures.</p>

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9. Abuse, Zero Tolerance An application entity's policies and procedures on abuse shall promote zero tolerance toward all forms of abuse. O.Reg.299/10, 30(3)	<ul style="list-style-type: none"> To ensure that each person is supported in a safe and respectful environment where abuse will not be tolerated. 	Review P&P to ensure the service agency promotes zero tolerance toward all forms of abuse. This could include holding staff, volunteers and board members accountable to report all suspected, alleged and/or witnessed incidents of abuse and protecting anyone reporting abuse; taking appropriate action where abuse is found to have occurred. Policies could include initial and annual abuse policy review to inform learning for all board, staff members including mandatory education and awareness training for persons receiving supports.	Policies and procedures do not promote zero tolerance towards all forms of abuse.	Final/approved written & dated policies and procedures.

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<p>10. Abuse, Notification</p> <p>An application entity shall have policies and procedures on the notification of persons acting on behalf of the person with a developmental disability of an alleged, suspected or witnessed incident of abuse.</p> <p>O.Reg.299/10, 31(1)</p>	<ul style="list-style-type: none"> To ensure that if an abuse allegation is made or suspected, or abuse is witnessed, staff and volunteers are prepared in advance and clearly understand the notification procedure for informing people acting on behalf of the person with a disability. 	<p>Review P&P re: notification of persons acting on behalf of the person with a developmental disability of an alleged, suspected or witnessed incident of abuse.</p> <p>Notification may include:</p> <ul style="list-style-type: none"> Who (define persons acting on behalf of the individual) A process via phone, email, letter, etc. Timelines for notification (example: within 1 hour, 1 day, etc.) 	<p>Policies and procedures do not address the notification of persons acting on behalf of the person with a developmental disability of an alleged, suspected or witnessed incident of abuse.</p>	<p>Final/approved written & dated policies and procedures.</p>

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11. Abuse Notification, Consent The policies and procedures on notification shall require the application entity to obtain the consent of the person with a developmental disability before notifying others, if the person is capable of providing consent. O.Reg.299/10, 31(2)	<ul style="list-style-type: none"> To protect and safeguard the rights of persons in receipt of services. 	Review P&P re: application entity obtaining the consent of the person with a developmental disability before notifying others, if the person is capable of providing consent. P&P re: obtaining consent may include: <ul style="list-style-type: none"> Application entity's process to obtain consent Consent from individual (verbal, written, etc.) via phone, email, letter, etc. Process for notifying persons acting on behalf of alleged victim involves consent if person is capable 	Policies and procedures do not address obtaining the consent of the person with a developmental disability, if the person is capable of providing consent, prior to notifying others.	Final/approved written & dated policies and procedures.

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<p>12. Privacy and Confidentiality</p> <p>Each application entity shall have policies and procedures that ensure compliance with applicable privacy legislation and its privacy and confidentiality obligations under any funding agreement made under the Act.</p> <p>O.Reg.299/10, 32(1)(1)</p>	<ul style="list-style-type: none"> To protect the personal information of persons applying for services. To ensure persons applying for services understand how, why and what information about them is collected and stored, and for how long, as well as how and with whom it may be shared and for what purpose. 	<p>Review P&P re: the application entity ensuring compliance with its privacy and confidentiality obligations under applicable legislation and any funding agreement made under the Act.</p> <p>May include:</p> <ul style="list-style-type: none"> Statement of Attestation Staff Code of Conduct Oath of Confidentiality Statement of Rights when and how to comply with any applicable legislation 	<p>Policies and procedures do not comply with applicable privacy legislation and its privacy and confidentiality obligations under any funding agreement made under the Act.</p>	<p>Final/approved written & dated policies and procedures.</p>

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13. Personal Information Consent Each application entity shall have policies and procedures regarding consent to any collection, use or disclosure of personal information. O.Reg.299/10, 32(1)(2)	<ul style="list-style-type: none"> To ensure persons applying for services understand their right to confidentiality and give informed consent. 	Review P&P re: consent to any collection, use or disclosure of personal information. Evidenced by: <ul style="list-style-type: none"> Process for explaining and receiving consent Procedures regarding how personal information is collected, used or disclosed 	Policies and procedures do not address the consent to the collection, use or disclosure of personal information.	Final/approved written & dated policies and procedures.

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<p>14. Equipment Maintenance</p> <p>An application entity shall have policies and procedures regarding the maintenance of equipment on premises owned or operated by the entity and shall maintain the equipment as recommended by the manufacturer.</p> <p>O.Reg.299/10, 33(3)</p>	<ul style="list-style-type: none"> To ensure that equipment on premises is maintained in good working order, as recommended by the manufacturer. To ensure the application entity takes all reasonable care to promote and maintain a safe environment. 	<p>Review application entity policies and procedures to determine if the equipment is maintained as recommended by the manufacturer, may include:</p> <ul style="list-style-type: none"> Who inspects and maintains equipment (e.g. typically a qualified technician)? How often Which equipment Reference to ongoing maintenance requirements Maintenance of elevator(s), escalator(s) or lift(s) Maintenance of smoke detectors, fire extinguishers, carbon monoxide detectors and sprinkler systems <p>Consider also that the application entity may lease their office space and/or office.</p>	<p>Policies and procedures do not address the maintenance of equipment on the premises owned or operated by the entity, as recommended by the manufacturer.</p>	<p>Final/approved written & dated policies and procedures.</p>

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<p>15. Orientation and Initial Training</p> <p>Each application entity shall have policies and procedures for staff members and volunteers that address the orientation and initial training on the application entity and its policies and procedures.</p> <p>O.Reg.299/10, 34(1)(1)</p>	<ul style="list-style-type: none"> To ensure staff and volunteers are aware of and understand the application entity policies and procedures including their specific responsibilities and how they fit within the overall services/supports. This will be conducted within the initial months of commencing employment. 	<p>Review P&P for staff re: orientation and initial training on the application entity and its P&P.</p> <ul style="list-style-type: none"> Current list of all training Training completion dates <p>Documentation could be included in:</p> <ul style="list-style-type: none"> Orientation Checklists Training Acknowledgement Forms Orientation Packages Electronic Training 	<p>Policies and procedures do not address the orientation and initial training on the application entity and its policies and procedures.</p>	<p>Final/approved written & dated policies and procedures</p>

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<p>16. Training Ongoing</p> <p>Each application entity shall have policies and procedures for staff members and volunteers that address regular ongoing training for staff members and volunteers as may be appropriate or required.</p> <p>O.Reg.299/10, 34(1)(2)</p>	<ul style="list-style-type: none"> To ensure that the application entity staff and volunteers maintain appropriate knowledge and understanding of the application entity policies and procedures as may be needed to fulfill their duties and to support persons with a developmental disability. 	<p>Review P&P for staff re: regular ongoing training for staff as may be appropriate or required, to include:</p> <ul style="list-style-type: none"> Current list of all training Tracking training completion and expiration <p>Training could include:</p> <ul style="list-style-type: none"> HR policies WHMIS Abuse First-Aid & CPR Mission/Principles/Rights <p>Review P&P for volunteers re: regular ongoing training for staff as may be appropriate or required, may include:</p> <ul style="list-style-type: none"> Current list of all training Tracking training completion and expiration 	<p>Policies and procedures do not address regular ongoing training for staff members and volunteers.</p>	<p>Final/approved written & dated policies and procedures.</p>

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17. Record Retention, Storage Each application entity shall have policies and procedures on record retention and secure storage. O.Reg.299/10, 35(1)(b)	<ul style="list-style-type: none"> To ensure that the application entity considers and articulates its record keeping practices intended to maintain security of records. 	Review P&P on record retention and secure storage, could include: <ul style="list-style-type: none"> Security (example: use of locks, passwords, encryption) Loss and/or theft Fire Defacement, tampering and copying or use by unauthorized person Minimum 7 year retention schedule Rules for discarding records no longer required to be retained Use and maintenance of Electronic records 	Policies and procedures do not address record retention and secure storage.	Final/approved written & dated policies and procedures

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<p>18. Feedback, Concerns/Customer Service, AODA & O.Reg.429/07</p> <p>The Application Entity shall develop and implement policies and procedures for gathering feedback and addressing concerns about its customer service in compliance with the <i>Accessibility for Ontarians with Disabilities Act, 2005</i> and O. Reg. 429/07.</p> <p>Policy Directives for Application Entities: 7.0 Feedback Process</p>	<ul style="list-style-type: none"> That the application entity can demonstrate it has policies and procedures that set out its processes for gathering feedback and addressing concerns about customer service that complies with the AODA. To ensure that Application Entities have a provincially-consistent process in place to receive feedback about the services that they provide. 	<p>Review application entity's P & Ps regarding gathering feedback and addressing concerns about its customer service in compliance with the AODA.</p>	<p>The Application Entity did not develop and implement policies and procedures for gathering feedback and addressing concerns about its customer service in compliance with the <i>Accessibility for Ontarians with Disabilities Act, 2005</i> and O. Reg.429/07.</p>	<p>Final/approved written & dated policies and procedures.</p>

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Board Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>1. Mission Statement, Service Principles, Statement of Rights</p> <p>Each application entity shall conduct a mandatory orientation to its mission statement, service principles and statement of rights with its new members of its board of directors.</p> <p>Regulation 299/10, 29(2)(a)</p>	<ul style="list-style-type: none"> Orientation, as used in the regulation, means a higher-level overview of a subject matter that promotes awareness and understanding. This may be done through an oral presentation, video, or reading materials. This is often the level of information that members of the board of directors need to fulfill their organizational oversight responsibilities. 	<p>Review Board Records to ensure that the service agency conducts a mandatory orientation to its mission statement, service principles and statement of rights with its new members of its board of directors.</p> <p>Confirmation of orientation completed within last 12 months, example:</p> <ul style="list-style-type: none"> Orientation Checklist/Package Acknowledgement Forms Board Meetings with attendance information Meeting Minutes 	<p>Insufficient evidence confirming the application entity conducted a mandatory orientation to its mission statement, service principles and statement of rights with new members of its board of directors.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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<p>2. Mission Statement, Service Principles, Statement of Rights/Annual Review</p> <p>Each application entity shall ensure that its board of directors conduct an annual review of its mission statement, service principles and statement of rights, which shall include updating as necessary.</p> <p>Regulation 299/10, 29(2)(b)</p>	<ul style="list-style-type: none"> To ensure mission statement, service principles and statement of rights are reviewed annually to assess their effectiveness and updated as needed. The intent of the requirement is that they are completed annually to ensure that they are current. 	<p>Confirmation of annual review completed within last 12 months:</p> <ul style="list-style-type: none"> Board Meeting Minutes Annual Acknowledgement <p>For compliance, must be completed in consecutive years.</p>	<p>Insufficient evidence confirming the application entity ensured that its board of directors conducted an annual review of its mission statement, service principles and rights with board members.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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3. Mission Statement, Service Principles, Statement of Rights/Recording Dates Each application entity shall record the dates of all orientations, refreshers and reviews conducted under clauses (a) and (b). Regulation 299/10, 29(2)(c)	<ul style="list-style-type: none"> To ensure that information to demonstrate compliance is recorded. 	Review Board Records to ensure the Service agency records the dates for: <ul style="list-style-type: none"> orientation to the mission statement, service principles and statement of rights annual refresher Annual review by the board of directors of the mission statement, service principles and statement of rights, which shall include updating as necessary. 	Dates of the orientations, refreshers and reviews were not recorded.	A letter and/or documentation confirming completion of corrective action.

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<p>4. Abuse Prevention, Orientation</p> <p>Each application entity shall provide a mandatory orientation to all new members of the board of directors on the entity's policies and procedures on abuse prevention, identification and reporting.</p> <p>Regulation 299/10, 30(2)(b)</p>	<ul style="list-style-type: none"> To ensure that all new board members receive mandatory orientation to understand the entity's policies and procedures on abuse prevention, identification and reporting. 	<p>Evidence may include:</p> <ul style="list-style-type: none"> Electronic training document Meeting minutes Acknowledgement forms or training attendance logs 	<p>Insufficient evidence confirming the application entity provided a mandatory orientation to all new members of the board of directors on the entity's policies and procedures on abuse prevention, identification and reporting.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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<p>5. Abuse Prevention, Annual Refresher</p> <p>Each application entity shall provide an annual refresher to members of the board of directors on the entity's policies and procedures on abuse prevention, identification and reporting.</p> <p>Regulation 299/10, 30(2)(b)</p>	<ul style="list-style-type: none"> To ensure that all members of the board of directors receive a refresher relating to procedures on abuse prevention, identification and reporting on a yearly basis, 	<p>Annual refresher should be completed within 12 months of the last completion date, evidence may include:</p> <ul style="list-style-type: none"> Electronic training document Meeting minutes <p>Acknowledgement forms or training attendance logs</p> <p>Dated within the last 12 months.</p> <ul style="list-style-type: none"> For compliance, must be completed in consecutive years. 	<p>Insufficient evidence confirming the application entity provided an annual refresher to all members of the board of directors on the entity's policies and procedures on abuse prevention, identification and reporting.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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Board Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
6. Privacy and Confidentiality, Orientation Each application entity shall provide an orientation to its new members of its board of directors regarding its policies and procedures respecting privacy and confidentiality and consent to collection, use or disclosure of personal information. Regulation 299/10, 32(2)	<ul style="list-style-type: none"> To ensure that the application entity provides orientation to new members of the board respecting privacy and confidentiality expectations. To ensure that new members of the board of directors are oriented and aware of the entity's policies and procedures regarding privacy, confidentiality and consent to collection, use or disclosure of personal information. 	Evidence may include: <ul style="list-style-type: none"> Electronic training document Meeting minutes Acknowledgement forms or training attendance logs	Insufficient evidence confirming the application entity provided an orientation to its new members of its board of directors regarding its policies and procedures respecting privacy and confidentiality and consent to collection, use or disclosure of personal information.	A letter and/or documentation confirming completion of corrective action.

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Board Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>7. References</p> <p>The application entity shall arrange for a personal reference check and require a police records check for new board members where they will have direct contact with the persons with developmental disabilities.</p> <p>Regulation 299/10, 34(2)</p>	<ul style="list-style-type: none"> To ensure that the application entity screens new board members who will have direct contact with persons with developmental disabilities in order to promote safety and security, O.Reg.299/10 does not define direct contact. Policies and procedures may need to account for board members where they do not have direct contact with the persons with developmental disabilities. Consider that, if a board member does not have direct contact with people with a developmental disability when at the application entity, then a personal reference check and police records check for the board member would not be required. Consider that direct contact could mean when board members provide <u>unsupervised</u> services and supports to persons with developmental disabilities, or unless otherwise stated in the agency's policies/procedures (agency discretion). 	<p>Review Board Records, for new board members <u>who will have direct contact</u> with persons with developmental disabilities, for:</p> <p>Personal Reference and Criminal records check or written confirmation arrangements have been made for both.</p> <p>Police Records Check (must include Vulnerable Sector Screen) Can be in a sealed envelope with a description, date, signoff that original has been verified. This could be combined with item #8 on the following page.</p> <p>Check CRC policy.</p>	<p>No evidence that personal reference checks were arranged for board members.</p> <p>No evidence that police record checks were arranged for board members.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Board Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>8. References, ASAP</p> <p>The application entity shall ensure that the personal reference check and police records check are completed as soon as possible for a new board member before or after they assume their responsibilities with the entity.</p> <p>Regulation 299/10, 34(3)</p>	<ul style="list-style-type: none"> To be proactive and diligent in the screening processes, so as to assess board member's suitability before taking on their responsibilities with the application entity and with individuals with a developmental disability. 	<p>Review Board Records for:</p> <p>The personal reference and police records check are completed as soon as possible for a new board member before or after they assume their responsibilities with the agency</p> <p>Police Records Check (must include Vulnerable Sector Screen) or written confirmation the agency has made arrangements for a Police Records Check.</p> <p>Can be in a sealed envelope with a description, date, signoff and if original has been verified.</p> <p>Reference to #7, 9.</p>	<p>Insufficient evidence confirming the application entity completed personal and police record check as soon as possible for new board members before or after assuming their responsibilities with the entity.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Board Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>9. References, Supervision</p> <p>Until the completion of their reference check, their police records check and their orientation and initial training, a staff member, volunteer or board member shall have direct contact with persons with developmental disabilities only when being supervised.</p> <p>Regulation 299/10, 34(4)</p>	<p>To promote the safety of persons with developmental disabilities, an application entity must put in place restrictions on a potential employee's, volunteer's or board member's direct contact with persons with developmental disabilities until there has been appropriate screening by the application entity. .</p>	<p>Review Board Records to ensure: Date references were obtained and orientation and training were provided.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Documentation that indicates a staff member, volunteer or board member does not have direct contact with persons with developmental disabilities unless supervised until completion of references, orientation and initial training 	<p>Insufficient evidence confirming new board members were supervised when in direct contact with persons with developmental disabilities prior to the completion of their orientation and reference checks.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Board Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>10. Feedback, Concerns/Annual Review/Analysis/Evaluation</p> <p>The Application Entity shall conduct an annual review and analysis of feedback received and how concerns raised in the feedback were addressed, and evaluate the effectiveness of its policies and procedures on the feedback process for the Board of Directors.</p> <p>Policy Directives for Application Entities: 7.0 Feedback Process</p>	<ul style="list-style-type: none"> To ensure that application entities have a process in place to review and analyze feedback and how concerns raised in the feedback were addressed, in order to evaluate the effectiveness of the policies and procedures. 	<p>Review Board Records to ensure the application entity:</p> <ul style="list-style-type: none"> Conducts an annual review and analysis of feedback received and how concerns raised in the feedback were addressed, Evaluates the effectiveness of its policies and procedures on the feedback process for the Board of Directors. <p>Evidence from the past 12 months may include:</p> <ul style="list-style-type: none"> Solicitation of feedback, surveys, letters, Board meeting minutes that outline annual analysis of concerns and process to address feedback. Complaints log Serious occurrence reports 	<p>Insufficient evidence confirming the application entity conducted an annual review and analysis of feedback received and how concerns raised were addressed, and evaluated the effectiveness of its policies and procedures on the feedback process for the Board of Directors.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>1. Mission Statement, Service Principles, Statement of Rights</p> <p>Each application entity shall conduct a mandatory orientation to its mission statement, service principles and statement of rights with its new staff members, new volunteers.</p> <p>Regulation 299/10, 29(2)(a)</p>	<ul style="list-style-type: none"> To ensure that new staff and volunteers are informed of the application entity's mission statement, service principles and statement of rights. 	<p>Review new Staff/Volunteer Records for re: orientation, to include:</p> <ul style="list-style-type: none"> mission statement service principles statement of rights <p>Evidence may include:</p> <ul style="list-style-type: none"> Electronic training document Meeting minutes Performance appraisals Acknowledgement forms or training attendance logs 	<p>Insufficient evidence confirming the application entity conducted a mandatory orientation to its mission statement, service principles and statement of rights with its new staff members, new volunteers.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>2. Mission Statement, Service Principles, Statement of Rights, Annual refresher</p> <p>Each application entity shall conduct an annual refresher for staff and volunteers of the mission statement, service principles and statement of rights thereafter.</p> <p>Regulation 299/10, 29(2)(b)</p>	<ul style="list-style-type: none"> To ensure that staff and volunteers receive refreshers on an annual basis with respect to the application entity's mission statement, service principles and statement of rights. 	<p>Annual refresher should be completed within 12 months of the last completion date for staff/volunteers</p> <ul style="list-style-type: none"> mission statement service principles statement of rights <p>Evidence from the past 12 months may include:</p> <ul style="list-style-type: none"> Electronic training document Meeting minutes Performance appraisals Acknowledgement forms or training attendance logs 	<p>Insufficient evidence confirming the application entity conducted an annual refresher for staff and volunteers of the mission statement, service principles and statement of rights.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>3. Mission Statement, Service Principles, Statement of Rights, Dates</p> <p>Each application entity shall record the dates of all orientations, refreshers and reviews conducted under clauses (a) and (b).</p> <p>Regulation 299/10, 29(2)(c)</p>	<ul style="list-style-type: none"> To ensure that a record is kept of all orientations, refreshers and reviews for staff, volunteers and boards of directors. 	<p>Review Staff Records for recorded dates, to include: orientation and an annual refresher for staff thereafter.</p> <p>Review Volunteer Records for recorded dates, to include: and an annual refresher for volunteers thereafter</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Electronic training document Meeting minutes Performance appraisals Acknowledgement forms or training attendance logs 	<p>Dates of the orientation, refreshers and reviews of the agency's mission statement, service principles and statement of rights were not recorded.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>4. Abuse, Training</p> <p>Each application entity shall provide mandatory training on abuse prevention, identification and reporting to all of its staff members and volunteers who have direct contact with persons with developmental disabilities who have applied for services and supports or funding.</p> <p>Regulation 299/10, 30(2)(a)(i)</p>	<ul style="list-style-type: none"> To ensure that all staff and volunteers who have direct contact with persons with developmental disabilities receive training with respect to abuse prevention, identification and reporting to prepare them for their roles. 	<p>Staff Records will be reviewed for those who have direct contact with persons with developmental disabilities</p> <p>Volunteer Records will be reviewed for those who have direct contact with persons with developmental disabilities</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Electronic training document Meeting minutes Performance appraisals Acknowledgement forms or training attendance logs Orientation checklist confirming review of agency abuse policy 	<p>Insufficient evidence confirming the application entity provided mandatory training on abuse prevention, identification and reporting to all of its staff members and volunteers who have direct contact with persons with developmental disabilities who have applied for services and supports or funding.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>5. Abuse, Annual Training</p> <p>Each application entity shall provide a refresher course on the matters referred to in sub clause (i) every year thereafter.</p> <p>Regulation 299/10, 30(2)(a)(ii)</p>	<ul style="list-style-type: none"> To ensure that staff receive ongoing (annual) refreshers respecting abuse prevention, identification and reporting. 	<p>Annual refresher should be completed within 12 months of the last completion date.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Meeting Minutes Electronic training Training certificates Performance appraisals Acknowledgement forms or training attendance logs <p>For compliance, must be completed in consecutive years.</p>	<p>Insufficient evidence confirming the application entity provided a yearly refresher on abuse prevention, identification and reporting to staff members and volunteers.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>6. Privacy and Confidentiality, Training</p> <p>Each application entity shall train its staff members and volunteers regarding its policies and procedures respecting privacy and confidentiality and consent to collection, use or disclosure of personal information.</p> <p>O.Reg.299/10, 32(2)</p>	<ul style="list-style-type: none"> The intent of this requirement is for staff members and volunteers to be trained on and understand the application entity's policies and procedures regarding privacy and confidentiality and consent to collection, use or disclosure of personal information. 	<p>Review Staff Records.</p> <p>Review Volunteer Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Meeting Minutes Electronic training Training certificates Performance appraisals Acknowledgement forms or training attendance logs Orientation checklist Oath of Confidentiality 	<p>Insufficient evidence confirming the application entity trained its staff members and volunteers on its policies and procedures respecting privacy and confidentiality and consent to collection, use or disclosure of personal information.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
7. Emergency Preparedness Plan, Training Each application entity shall have training for its staff members and volunteers in the procedures outlined in the emergency preparedness plan. O.Reg.299/10, 33(1), para 3.	<ul style="list-style-type: none"> To ensure that each staff person and volunteer receives training in the procedures of the emergency preparedness plan in order to be aware of the specific course of action to take to handle emergencies effectively. 	Evidence may include: <ul style="list-style-type: none"> Meeting Minutes Electronic training Training certificates Performance appraisals Acknowledgement forms or training attendance logs Orientation checklist 	Insufficient evidence confirming the application entity trained its staff members and volunteers on the procedures outlined in the emergency preparedness plan.	A letter and/or documentation confirming completion of corrective action.

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Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>8. Orientation and Initial Training, P & P's</p> <p>In addressing quality assurance measures respecting human resource practices, each application entity shall have policies and procedures for staff members and volunteers that address the orientation and initial training on the application entity and its policies and procedures.</p> <p>O.Reg.299/10, 34(1), para 1</p>	<ul style="list-style-type: none"> To ensure that human resource practices of the application entity reflect the availability of policies and procedures for staff and volunteers that provide information about orientation and initial training about the application entity and its policies and procedures. 	<p>Review staff/volunteer records for completion for orientation and initial training on the service agency and its P&P.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Meeting Minutes Electronic training Training certificates Performance appraisals Acknowledgement forms or training attendance logs Orientation checklist 	<p>Insufficient evidence confirming the application entity addressed the orientation and initial training of new staff members and volunteers on the application entity and its policies and procedures.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>9. Training, Ongoing</p> <p>In addressing quality assurance measures respecting human resource practices, each application entity shall have policies and procedures for staff members and volunteers that address regular ongoing training for staff members and volunteers as may be appropriate or required.</p> <p>Regulation 299/10, 34(1), para 2</p>	<ul style="list-style-type: none"> To ensure that human resource practices of the application entity reflect the availability of policies and procedures for staff and volunteers that address ongoing training as appropriate or required. 	<p>This could include: first aid, CPR, etc.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Meeting Minutes Electronic training Training certificates Performance appraisals Acknowledgement forms or training attendance logs 	<p>Insufficient evidence confirming the application entity provided any regular ongoing training to staff and volunteers.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>10. References, Staff</p> <p>An application entity shall arrange for a personal reference check and a police records check for new staff members and volunteers where they will have direct contact with the persons with developmental disabilities.</p> <p>Regulation 299/10, 34(2)</p>	<ul style="list-style-type: none"> To be proactive about safety and security of DS individuals in the recruitment process by assessing a potential employee's and/or volunteer's suitability for working at the agency and directly with individuals with a developmental disability. MCCSS have been advised that criminal reference checks and vulnerable sector screens can only be obtained through the OPP or local police detachment. 	<p>Review new staff/volunteer records for:</p> <p>Personal Reference and Criminal records check or written confirmation arrangements have been made for both.</p> <p>Police Records Check (must include Vulnerable Sector Screen)</p> <ul style="list-style-type: none"> It is not a requirement for ministry staff to physically see the Criminal Reference Check (CRC). However, there needs to be evidence of a CRC (example: a sealed envelope describing its contents, date received and signature) and that the CRC included a vulnerable sector screen (typically outlined in the agency's policies and procedures). The 1995 policy may not have been so explicit as to require a VSS for staff hired prior to 2011. <p>Note: Do not open sealed envelopes.</p>	<p>Insufficient evidence confirming the application entity arranged for a personal reference check /criminal records check for new staff members/volunteers.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>11. References, ASAP</p> <p>The application entity shall ensure that the personal reference check and police records check are completed as soon as possible for a new staff member and volunteer before or after they assume their responsibilities with the entity.</p> <p>Regulation 299/10, 34(3)</p>	<ul style="list-style-type: none"> To ensure that new staff members and volunteers have the mandatory checks conducted as soon as possible either before or after they commence working in order to assess their suitability to perform their duties for the DSO. 	<p>Review Staff and Volunteer Records for:</p> <ul style="list-style-type: none"> The personal reference check and police record check is completed as soon as possible for a new staff member/volunteer before or soon after they assume their responsibilities with the agency. Date on the sealed envelope <p>Police Records Check (must include Vulnerable Sector Screen) or written confirmation the Service agency has made arrangements for a Police Records Check. Can be in a sealed envelope with a description, date, signoff and if original has been verified.</p> <p>Sealed envelopes are not to be opened during the compliance inspection.</p>	<p>Insufficient evidence confirming the application entity ensured the personal reference check and police records check were completed as soon as possible for a new staff member and volunteer before or after assuming their responsibilities with the entity.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>12. References, Supervision</p> <p>Until the completion of their reference check, their police records check and their orientation and initial training, a staff member or volunteer shall have direct contact with persons with developmental disabilities only when being supervised.</p> <p>Regulation 299/10, 34(4)</p>	<ul style="list-style-type: none"> Oversight of new staff and volunteers by trained staff is intended to provide safeguards for persons with developmental disabilities who are receiving care until such time as the required assessments and training are conducted for new staff and volunteers. 	<p>Review Staff and Volunteer Records that outline staff and volunteers shall have direct contact with persons with developmental disabilities only when being supervised, until the completion of:</p> <ul style="list-style-type: none"> reference check police records check orientation and initial training, <p>Evidence may include:</p> <ul style="list-style-type: none"> Schedules Communication Logs Case notes Application dates Orientation checklist 	<p>Insufficient evidence confirming the supervision of staff and/or volunteers in direct contact with persons with developmental disabilities prior to completing the orientation, initial training and reference checks.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>13. Written Protocols, Local Police</p> <p>An application entity shall have written protocols with their local police services to ensure that the type of information provided through a police records check is appropriate to the position being applied for.</p> <p>Regulation 299/10, 34(5)</p>	<ul style="list-style-type: none"> Application entities should work with their local police service to ensure the police records check includes the appropriate/relevant information, specifically for the position being applied for. The agency could have the local police review their policy, however, there is no requirement for the local police service to review and/or sign off. 	<ul style="list-style-type: none"> CRC Policies and Procedures include VSS; Standard agency form/letter prospective applicant brings to local police indicating VSS requirement. Letter/email/documentation from police department/OPP acknowledging written protocol with agency <p>Police Departments have existing protocols standardized form that agencies must complete confirming who they are and that they work with a vulnerable population example: Toronto Police Service has this form on their web site. OPP has standardized form.</p>	<p>Insufficient evidence confirming the application entity has written protocols with their local police services to ensure that the type of information provided through a police records check is appropriate to the position being applied for.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>14. Administration, Application Package</p> <p>The Application Entity shall assign responsibility to qualified assessors for the administration of the ministry mandated Application Package to collect data on the support needs, priorities and circumstances of persons with developmental disabilities. The Application Package consists of the Application for Developmental Services and Supports (ADSS) and the Supports Intensity Scale –Adult Version™ (SIS-A™).</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review Staff Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Meeting Minutes Electronic training Training certificates Performance appraisals Acknowledgement forms or training attendance logs <p>Evidence must include: MCCSS Assessor Training and Quality Assurance Program Certificates and/or written confirmation of successful program completion.</p> <p>The Application Entity shall also ensure that assessors who administer the Application Package are independent from direct provision of developmental services (are not employed in a service agency that delivers residential services and supports or community participation services and supports under the authority of the Act). [Requirement set out in the Policy Directive for Application Entities]</p>	<p>Insufficient evidence confirming the application entity assigned responsibility to qualified assessors for the ministry mandated Application Package to collect data on the support needs, priorities and circumstances of persons with developmental disabilities.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>15. Assessor Training</p> <p>The Application Entity shall ensure assessors participate in all required ministry-led assessor training and data quality assurance events and ensure that they adhere to and maintain the provincially-consistent standards when using the Application Package as well as the ministry assessor reporting document (the Assessor Summary Report). A support needs assessment is valid and complete only when conducted by an assessor who has successfully completed the ministry's assessor training and data quality assurance program within the last 18 months.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review Staff Records.</p> <p>Evidence must include:</p> <ul style="list-style-type: none"> MCCSS Assessor Training and Quality Assurance Program certificates and/or written acknowledgement of successful program completion <p>Evidence may include:</p> <ul style="list-style-type: none"> Meeting Minutes Electronic training Training certificates Performance appraisals Acknowledgement forms or training attendance logs 	<p>Insufficient evidence confirming the assessor participated in all required ministry-led assessor training and data quality assurance events.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>16. Assessor qualifications</p> <p>The Application Entity shall ensure that assessors who administer the Application Package have the following qualifications:</p> <ul style="list-style-type: none"> • completed formal education of an undergraduate degree or equivalent, in a field related to human services (such as psychology, sociology, or social work); • a minimum of five years recent experience working directly in the field of developmental services, or equivalent experience working in an occupation related to human services; • experience in intake, case management, service coordination, direct support and/or advocacy roles; • relevant computer skills as required to use ministry documents, and ministry-mandated information technology systems, including SIS-A™ electronic form for collecting support needs assessments information of people applying for ministry funded developmental services and supports, and • successfully completed training on the administration of the Application Package through the ministry's assessor trainer and data quality assurance program. (Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs) 	<ul style="list-style-type: none"> • To identify qualifications that relate to skills and abilities needed by assessors to complete their work, which, in turn, aims to promote provincially consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review Staff Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • Resume • Cover Letter <p>Evidence must include: MCCSS Assessor Training and Quality Assurance Program Certificates and/or written confirmation of successful program completion.</p>	<p>Insufficient evidence confirming the assessor administering the Application Package has the following qualification: (please specify)</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>17. Assessors, ongoing training</p> <p>Assessors shall meet the following ongoing training and experience requirements to ensure that their skills continue to meet the ministry's standards: Successfully complete interviewer reliability reviews through the ministry's assessor training and data quality assurance program every 18 months.</p>	<ul style="list-style-type: none"> To evaluate and reaffirm assessment skills and understanding of processes and tools, to ensure provincially consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review Staff Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Meeting Minutes Electronic training Training certificates Performance appraisals Acknowledgement forms or training attendance logs <p>Evidence must include: MCCSS Assessor Training and Quality Assurance Program Certificates and/or written confirmation of successful program completion.</p>	<p>Insufficient evidence confirming the assessor successfully completed interviewer reliability reviews through the ministry's assessor training and data quality assurance program every 18 months.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>18. Assessor standards, Administration of application package</p> <p>Assessors shall meet the following ongoing training and experience requirements to ensure that their skills continue to meet the ministry's standards: Ongoing administration of the Application Package with applicants on a regular basis. The assessors should administer at least 36 Application Packages in the 18-month (as a best practice at least 2 assessments per month) period between each successful completion of the interviewer reliability review through the ministry's assessor trainer and data quality assurance program.</p> <p>(Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs)</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. To meet requirements specified by the American Association on Intellectual and Developmental Disabilities regarding the use of the Supports Intensity Scale - Adult". 	<p>Review Staff Records and DSCIS</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Assessment completion reports Assessment scheduling and/or tracking records 	<p>Insufficient evidence confirming the assessor administered 36 Application Packages in the 18-month period between each successful completion of the interviewer reliability review through the ministry's assessor trainer and data quality assurance program.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>19. Assessor standards, Return from leave of absence</p> <p>The Application Entity shall ensure that assessors who administer the Application Package have the following qualifications: Assessors who return from a leave of absence are required to follow the ministry guidelines for maintaining assessor qualifications provided through the ministry's assessor trainer and data quality assurance program, specifically the sections that pertain to 'leave of absence'.</p> <p>(Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs)</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review Staff Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Meeting Minutes Electronic training Training certificates Performance appraisals Acknowledgement forms or training attendance logs <p>Evidence must include: MCCSS Assessor Training and Quality Assurance Program certificates and/or written acknowledgement of successful program completion</p>	<p>Insufficient evidence confirming the assessor who returned from a leave of absence followed the ministry guidelines for maintaining assessor qualifications provided through the ministry's assessor trainer and data quality assurance program.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Staff-Volunteer Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>20. Assessor standards, Independent from direct provision of developmental services</p> <p>The Application Entity shall also ensure that assessors who administer the Application Package are independent from direct provision of developmental services (are not employed in a service agency that delivers residential services and supports or community participation services and supports under the authority of the Act).</p> <p>(Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs)</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by assessors employed by application entities who should be independent from direct provision of developmental services (to avoid conflict of interest). 	<p>Review Staff Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> written confirmation from the assessor to the Application entity confirming this requirement is met written confirmation from the application entity that this has been confirmed with the assessor <p><i>The Application Entity is obligated to confirm adherence with this requirement.</i></p>	<p>The Application Entity did not ensure that the assessor who administered the Application Package was independent from direct provision of developmental services.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>1. Eligibility for Ministry Funded Adult DS Services and Supports/Supported Documentation</p> <p>The Application Entity shall review supporting documentation provided by the individual or representative of their choice, to confirm whether an applicant is eligible for ministry funded adult developmental services and supports.</p> <p>Policy Directives for Application Entities: 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports</p>	<ul style="list-style-type: none"> To outline the eligibility confirmation tools and procedures to be used by application entities to confirm eligibility status for ministry-funded adult developmental services and supports. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence must include:</p> <ul style="list-style-type: none"> Assessment or signed report by a psychologist or psychological associate stating the individual has a developmental disability Proof of age Proof of Ontario Residency 	<p>Insufficient evidence confirming the application entity reviewed supporting documentation to confirm whether the applicant is eligible for ministry funded adult developmental services and supports.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>2. Adult DS Services and Supports/Required Documentation</p> <p>Required documentation includes: a psychological assessment or report signed by a psychologist or psychological associate registered with the College of Psychologists of Ontario (or equivalent body in another province) that states the individual has a developmental disability in accordance with the Act and Regulation.</p> <p>Policy Directives for Application Entities: 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports</p>	<ul style="list-style-type: none"> To outline SIPDDA/regulation eligibility requirements for adult developmental services and supports and the procedures to be used by application entities to confirm applicants' eligibility status for ministry-funded adult developmental services and supports. 	<p>Review electronic or hard copy Individual Records to ensure the required documentation is present, to include:</p> <ul style="list-style-type: none"> a psychological assessment or report signed by a psychologist or psychological associate stating the individual has a developmental disability in accordance with the Act and Regulation. <p>Documents may be originals or photocopies.</p>	<p>Required documentation did not include a psychological assessment or report signed by a psychologist or psychological associate registered with the College of Psychologists of Ontario (or equivalent body in another province) that states the individual has a developmental disability in accordance with the Act and Regulation.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>3. Adult DS Services and Supports/ Proof of Age</p> <p>Required documentation includes: proof of age (official document displays individual's name and date of birth).</p> <p>Policy Directives for Application Entities: 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports</p>	<ul style="list-style-type: none"> To identify the eligibility criterion applicants must meet and set out documents that may be used to confirm the applicant meets eligibility requirements. 	<ul style="list-style-type: none"> Review electronic or hard copy Individual Records. Documents may be originals or photocopies. Documents confirming age include but are not limited to: <ul style="list-style-type: none"> Birth certificate or baptismal certificate Passport Driver's licence 	<p>Required documentation did not include proof of age.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>4. Adult DS Services and Supports/ Ontario Residency</p> <p>Required documentation includes: proof of Ontario residency (document displays the individual's name and address).</p> <p>Policy Directives for Application Entities: 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports</p>	<ul style="list-style-type: none"> To identify the eligibility criterion applicants must meet and set out documents that may be used to confirm the applicant meets eligibility requirements. 	<p>Documents may be originals or photocopies</p> <p>Documents confirming Ontario residency include but are not limited to:</p> <ul style="list-style-type: none"> Ontario photo card ODSP direct deposit statement Employer record (e.g., pay stub or letter from employer on company letterhead) Rental or lease agreement Mailed bank account statements (but not automated teller receipts or bank books) Utility bill Proof of Canadian Citizenship, landed immigrant status, refugee status or permission to stay by Citizenship and Immigration 	<p>Required documentation did not include proof of Ontario residency.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>5. Adult DS Services and Supports/ Ministry Approved Tools</p> <p>The Application Entity shall use ministry approved decision-making tools to confirm whether an applicant is eligible for ministry funded adult developmental services and supports.</p> <p>Policy Directives for Application Entities: 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports</p>	<ul style="list-style-type: none"> To outline and ensure consistency in the procedures used by application entities to confirm eligibility status for ministry-funded adult developmental services and supports. 	<p>Review electronic or hard copy individual records to determine if the DSO used ministry approved decision-making tools.</p> <p>Evidenced by:</p> <ul style="list-style-type: none"> Case Notes Eligibility confirmation checklist 	<p>The Application Entity did not use ministry approved decision-making tools to confirm whether an applicant is eligible for ministry funded adult developmental services and supports.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>6. Eligibility for Ministry Funded Adult DS Services and Supports/Confirmation</p> <p>Where an individual's documentation demonstrates the individual has a developmental disability in accordance with the Act and Regulation, and meets all eligibility criteria, the Application Entity shall confirm the individual's eligibility for ministry funded adult developmental services and supports.</p> <p>Policy Directives for Application Entities: 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to confirm eligibility status for ministry-funded adult developmental services and supports. 	<p>Review electronic or hard copy Individual Records.</p> <p>Confirmation of individuals eligibility, evidence may include:</p> <ul style="list-style-type: none"> Case Notes Letter or documentation Notation and/or documents in DSCIS 	<p>There is no evidence the Application Entity confirmed the individual's eligibility for ministry funded adult developmental services and supports.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>7. Ineligible for Ministry Funded Adult DS Services and Supports</p> <p>Where an individual's documentation indicates the individual does not have a developmental disability or does not meet all eligibility criteria in accordance with the Act and Regulation, the Application Entity shall find the individual ineligible for ministry funded adult developmental services and supports.</p> <p>Policy Directives for Application Entities: 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to confirm eligibility status for ministry-funded adult developmental services and supports. 	<p>Review electronic or hard copy Individual Records.</p> <p>Confirmation of individuals ineligibility Evidence:</p> <ul style="list-style-type: none"> Letter Report Notation in DSCIS Case Notes Eligibility checklist 	<p>Insufficient evidence confirming the Application Entity found the individual ineligible for ministry funded adult developmental services and supports where the individual's documentation indicated the individual did not have a developmental disability or does not meet all eligibility criteria in accordance with the Act and Regulation.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>8. Eligibility for Ministry Funded Adult DS Services and Supports/ Insufficient Information-Referral</p> <p>Where an individual's documentation does not provide sufficient information, diagnostic conclusions, or a clear determination by a psychologist or psychological associate that the individual has a developmental disability, the Application Entity cannot confirm the individual's eligibility for ministry funded adult developmental services and supports. The following procedures are to be followed in these cases: if the individual is 18 years of age or older and does not have a psychological assessment or report by a psychologist or psychological associate but the documentation provided indicates the presence of a developmental disability (e.g., school or medical records), the Application Entity will facilitate referral to a ministry funded agency for assessment by a psychologist or psychological associate to determine whether the individual has a developmental disability as defined in the Act and regulation.</p> <p>Policy Directives for Application Entities: 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports</p>	<p>To outline the procedures used by application entities to confirm eligibility status for ministry-funded adult developmental services and supports.</p>	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include: Documentation or letter Case Notes Notation in DSCIS Copy of referral</p>	<p>Documentation does not confirm that the Application Entity facilitated a referral to a ministry funded agency for assessment by a psychologist or psychological associate to determine whether the individual has a developmental disability as defined in the Act and regulation.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>9. Eligibility for Ministry Funded Adult DS Services and Supports/Ministry Funded Agency</p> <p>Where an individual's documentation does not provide sufficient information, diagnostic conclusions, or a clear determination by a psychologist or psychological associate that the individual has a developmental disability, the Application Entity cannot confirm the individual's eligibility for ministry funded adult developmental services and supports. The following procedures are to be followed in these cases: If the individual is 18 years of age or older and the psychological assessment or report by a psychologist or psychological associate provided indicates the presence of a developmental disability but the information in the assessment or report is unclear or insufficient to confirm whether the individual has a developmental disability as defined in the Act and regulation, the Application Entity shall ask the individual to obtain the required information from the psychologist or psychological associate who prepared the original report. If the individual cannot obtain the information required from the psychologist or psychological associate who completed the assessment, the Application Entity shall forward the individual's documentation to a ministry funded agency to determine whether the individual has a developmental disability as defined in the Act and regulation.</p> <p>Policy Directives for Application Entities 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports</p>	<p>To outline the procedures used by application entities to confirm eligibility status for ministry-funded adult developmental services and supports.</p>	<p>Review electronic and hard copy Individual Records.</p> <p>Evidence may include: Case Notes Letter to the applicant or to the psychologist or psychological associate requesting required documentation and/or clarification. Response/documentation from the applicant or the psychologist or psychological associate Documentation confirming the submission of a referral to a ministry funded agency, and the agency's response</p>	<p>Insufficient evidence confirming the Application Entity forwarded the individual's documentation to a ministry funded agency to determine whether the individual has a developmental disability as defined in the Act and regulation, in situations where the individual could not obtain the information required from the psychologist or psychological associate who completed the assessment.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>10. Eligibility for Ministry Funded Adult DS Services and Supports/Cannot Confirm</p> <p>Where an individual's documentation does not provide sufficient information, diagnostic conclusions, or a clear determination by a psychologist or psychological associate that the individual has a developmental disability, the Application Entity cannot confirm the individual's eligibility for ministry funded adult developmental services and supports. The following procedures are to be followed in these cases: Following a review of the individual's documentation, if the psychologist or psychological associate determines that additional assessment of the individual is required to determine whether the individual has a developmental disability as defined in the Act and regulation, the psychologist or psychological associate shall advise the Application Entity. The Application Entity shall refer the applicant to a Ministry-funded agency for assessment by a psychologist or psychological associate to determine whether the individual has a developmental disability as defined in the Act and regulation.</p> <p>Policy Directives for Application Entities: 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to confirm eligibility status for ministry-funded adult developmental services and supports. 	<p>Review electronic or hard copy individual records</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Documentation confirming a referral and a response from the psychologist or psychological associate. 	<p>Insufficient evidence confirming the Application Entity referred the applicant to a Ministry-funded agency for assessment by a psychologist or psychological associate, in situations where additional assessment of the individual was required to determine whether the individual has a developmental disability as defined in the Act and regulation.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>11. Eligibility for Ministry Funded Adult DS Services and Supports/Advise in Writing</p> <p>The Application Entity shall advise the individual, or representative of their choice, in writing whether the individual is eligible for Ministry-funded adult developmental services and supports in accordance with the Act and Regulation, within 20 business days of receipt of all documentation.</p> <p>Policy Directives for Application Entities: 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to confirm eligibility status for ministry-funded adult developmental services and supports. 	<p>Review electronic or hard copy Individual Records</p> <p>Evidenced by:</p> <ul style="list-style-type: none"> Letter or documentation advise the individual, or representative of their choice, whether the individual is eligible Letter or documentation completed within 20 business days of receipt of all documentation. Eligibility checklist Case Notes Notation in DSCIS to Applicant's file 	<p>Documentation reviewed indicates that the Application Entity did not advise the individual, or representative of their choice, in writing whether the individual was eligible for Ministry-funded adult developmental services and supports in accordance with the Act and Regulation, within 20 business days of receipt of all documentation.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>12. Confirmed Eligibility/Ineligibility/Record</p> <p>Once eligibility or ineligibility has been confirmed, the Application Entity shall record the decision in the individual's file.</p> <p>Policy Directives for Application Entities: 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to confirm eligibility status for ministry-funded adult developmental services and supports. 	<p>Review Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Individual's file indicates the decision of eligibility or ineligibility. Notation in DSCIS to Applicant's file Case Notes 	<p>The application entity did not record the decision in the individual's file once eligibility or ineligibility had been confirmed.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>13. Eligibility for Ministry Funded Adult DS Services and Supports/Dispute</p> <p>An Application Entity shall use a three-stage approach to review a decision on eligibility that is under dispute.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic or hard copy Individual Records.</p> <p>Confirmation that the three-stage approach to review a decision regarding eligibility that is under dispute was used. Evidence may include:</p> <ul style="list-style-type: none"> Notation in DSCIS /Case Notes <p>Stage 1 states: The individual, and/or representative of their choice, has 25 business days from the date of the letter informing them of their ineligibility to provide the Application Entity with a written request for a review of that decision.</p> <p>Stage 2: Within 10 business days of receiving a decision on their Stage 1 eligibility decision review, the individual and/or representative of their choice may request in writing that the Executive Director of the Application Entity review the individual's case</p> <p>Stage 3: Within 10 business days of receiving a decision on their Stage 2 eligibility decision review, the individual and/or representative of their choice may request, in writing, a Stage 3 review by the Executive Director (or delegate) of an Application Entity in another region of the province.</p>	<p>Insufficient evidence confirming the application entity used the three-stage approach to review the decision on eligibility that was under dispute.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>14. Three Stage Review Process/Stage 1, Timeline</p> <p>Stage 1 of the review process will be conducted by the specific Application Entity staff who made the decision on eligibility based on the documents submitted by the individual in question, and the staff supervisor. The Application Entity must complete this stage within 15 business days of receiving the request to review the decision on eligibility.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Case notes Documentation that the Stage 1 of the review process was/will be conducted by: <ol style="list-style-type: none"> the DSO staff that made the decision on eligibility based on the documents submitted by the individual in question The staff supervisor. Documentation that the DSO completes this stage within 15 business days of receiving the request to review the decision on eligibility. 	<p>Stage 1 of the review process was not conducted by the specific application entity staff that made the decision on eligibility and/or within 15 business days of receiving the request to review the decision on eligibility.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>15. Eligibility Criteria, Provided to Person and/or Representative</p> <p>At this stage of the review process, the Application Entity shall provide the individual and/or representative of their choice with: a copy of the definition of a person with a developmental disability and eligibility criteria as set out in the Act and Regulation and provide an opportunity for the individual and/or their representative to provide further evidence to support their position regarding eligibility.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic or hard Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Meeting Notes/Minutes Case Notes Notation in DSCIS to update Applicant's file Letter or documentation to the applicant and/or representative of their choice with: <ul style="list-style-type: none"> ➤ copy of the definition of a person with a developmental disability ➤ eligibility criteria as set out in the Act and Regulation 	<p>Insufficient evidence confirming the Application Entity provided the individual and/or representative of their choice with a copy of the definition of a person with a developmental disability and eligibility criteria as set out in the Act and Regulation.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>16. Eligibility Criteria, Demonstrate Inaccurately Applied</p> <p>At this stage of the review process, the Application Entity shall provide the individual and/or representative of their choice with: an opportunity to demonstrate that the eligibility criteria set out in the Act and Regulation have not been accurately applied in their case.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Meeting Notes/Minutes Case Notes Notation in DSCIS to update Applicant's file Letter or documentation to the applicant and/or representative of their choice with: <ul style="list-style-type: none"> an opportunity to demonstrate that the eligibility criteria set out in the Act and Regulation has not been accurately applied in their case. 	<p>Insufficient evidence confirming the Application Entity provided the individual and/or representative of their choice with an opportunity to demonstrate that the eligibility criteria set out in the Act and Regulation had not been accurately applied in their case.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>17. Eligibility Criteria, Additional Supporting Documentation</p> <p>At this stage of the review process, the Application Entity shall provide the individual and/or representative of their choice with: an opportunity to provide any additional supporting information and documentation that may have a bearing on the eligibility decision.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Meeting Notes/Minutes Case Notes Notation in DSCIS to update Applicant's file Letter or documentation to the applicant and/or representative of their choice with: <ul style="list-style-type: none"> an opportunity to provide any additional supporting information and documentation that may have a bearing on the eligibility decision. 	<p>Insufficient evidence confirming the application entity provided the individual and/or representative of their choice with an opportunity to provide any additional supporting information and documentation that may have had a bearing on the eligibility decision.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>18. Eligibility Criteria, Staff and Supervisor Review</p> <p>The Application Entity staff and staff supervisor shall: review the individual's documentation, and any additional information or supporting documentation provided to the Application Entity, to confirm whether or not the individual meets the eligibility criteria in accordance with the Act and Regulation.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Notation in DSCIS to update Applicant's file Case Notes Letter or documentation to confirm DSO staff and staff supervisor reviewed the individual's documentation, and any additional information or supporting documentation provided, to confirm whether or not the person meets the eligibility requirements. <p>Evidenced by:</p> <ul style="list-style-type: none"> Copy of individual's response 	<p>Insufficient evidence confirming the Application Entity staff and staff supervisor reviewed the individual's documentation, and any additional information or supporting documentation provided to the Application Entity, to confirm whether or not the individual met the eligibility criteria in accordance with the Act and Regulation.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>19. Eligibility Criteria, Meet with Individual and/or Representative</p> <p>The Application Entity staff and staff supervisor shall: if requested, meet with the individual and/or representative of their choice to discuss the individual's file and supporting documentation and to explain the eligibility criteria and how the criteria apply to their case.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic and hard copy Individual Records.</p> <ul style="list-style-type: none"> Letter or documentation from individual to request to meet with DSO Meeting Notes/minutes Case Notes Notation in DSCIS to update Applicant's file 	<p>Insufficient evidence confirming the Application Entity staff and staff supervisor, where requested, met with the individual and/or representative of their choice to discuss the individual's file and supporting documentation and explained the eligibility criteria and how the criteria applied to their case.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>20. Eligibility Criteria, New Decision/Timeline</p> <p>The Application Entity staff and staff supervisor shall: render a new decision on eligibility, and notify the individual and/or representative of their choice of the outcome of the Stage 1 review, within 15 business days.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic and hard copy Individual Records.</p> <p>Evidence may include a letter or documentation that:</p> <ul style="list-style-type: none"> Case Notes Outlines a new decision on eligibility. Notifies the individual and/or representative of their choice of the outcome of the Stage 1 review. Is completed within 15 business days. 	<p>Insufficient evidence confirming the Application Entity staff and staff supervisor rendered a new decision on eligibility, and notified the individual and/or representative of their choice of the outcome of the Stage 1 review, within 15 business days.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>21. Stage 2/Executive Director Review Request</p> <p>Within 10 business days of receiving a decision on their Stage 1 eligibility decision review, the individual and/or representative of their choice may request in writing that the Executive Director of the Application Entity review the individual's case. The Application Entity must then complete Stage 2 of the eligibility review within 15 business days of receiving the written request.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic and hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Case Notes Letter or documentation from the individual and/or the representative of their choice to request a review, within 10 business days of receiving the decision of the Stage 1 review., Stage 2 of the eligibility review is completed within 15 business days of receiving the written request. 	<p>Insufficient evidence the Application Entity completed Stage 2 of the eligibility review within 15 business days of receiving the written request.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>22. Executive Director Review, Stage 1 Observed</p> <p>The Executive Director (or delegate) of the Application Entity shall: determine if the rules in Stage 1 of the review were observed.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic and hard copy Individual Records.</p> <p>Evidenced by:</p> <ul style="list-style-type: none"> Notation in DSCIS to update Applicant's file Case Notes Documentation that determines Stage 1 process was followed. 	<p>Insufficient evidence confirming the Executive Director (or delegate) of the Application Entity determined if the rules in Stage 1 of the review were observed.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>23. Executive Director Review, Additional Info/Documentation</p> <p>The Executive Director (or delegate) of the Application Entity shall: provide the individual and/or representative of their choice with an opportunity to submit any additional information and supporting documentation that may have a bearing on the review process and original eligibility decision.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility :</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic and hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Case Notes Notice or documentation. Notation in DSCIS to update Applicant's file 	<p>Insufficient evidence confirming the Executive Director (or delegate) of the Application Entity provided the individual and/or representative of their choice with an opportunity to submit any additional information and supporting documentation that may have a bearing on the review process and original eligibility decision.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>24. Executive Director Review, Info/Documentation Meets Eligibility</p> <p>The Executive Director (or delegate) of the Application Entity shall: review the individual's information and supporting documentation to confirm whether or not the individual meets the eligibility criteria set out in the Act and Regulation.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review hard copy and electronic Individual Record.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Documentation. Notation in DSCIS to update Applicant's file Meeting minutes Case notes 	<p>Insufficient evidence confirming the Executive Director (or delegate) of the Application Entity reviewed the individual's information and supporting documentation to confirm whether or not the individual met the eligibility criteria set out in the Act and Regulation.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>25. Executive Director Review, Decision & Notification</p> <p>The Executive Director (or delegate) of the Application Entity shall: render a decision and notify the individual and/or representative of their choice of the decision within 15 business days.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review hard copy and electronic Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • Notation in DSCIS • Case Notes • A letter, documentation and/or file notation confirming the Executive Director (or delegate): <ul style="list-style-type: none"> ➤ Rendered a decision; and ➤ Notified the individual /representation within 15 business days. 	<p>Insufficient evidence confirming the Executive Director (or delegate) of the Application Entity rendered a decision and notify the individual and/or representative of their choice of the decision within 15 business days.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>26. Request for Stage 3, Application Entity Review/Another Region</p> <p>Within 10 business days of receiving a decision on their Stage 2 eligibility decision review, the individual and/or representative of their choice may request, in writing, a Stage 3 review by the Executive Director (or delegate) of an Application Entity in another region of the province.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Letter or documentation Case Notes Notation in DSCIS to update Applicant's file <p>Consider what the DSO has done or will do upon receipt of this request:</p> <ul style="list-style-type: none"> Within 10 business days Post 10 business days 	<p>Insufficient evidence confirming that within 10 business days of receiving a decision on their Stage 2 eligibility decision review, the individual and/or representative of their choice requested, in writing, a Stage 3 review by the Executive Director (or delegate) of an Application Entity in another region of the province.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>27. Stage Three Review Timeline</p> <p>Where a request has been received within 10 days of notification of the outcome of a Stage 2 review, the Application Entity that conducted the Stage 2 review shall send the written request for a Stage 3 review to the Executive Director (or delegate) of the Application Entity. The Executive Director of the Application Entity who receives this request for review must comply with the request and complete the Stage 3 eligibility review within 15 business days of receiving the written request.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<ul style="list-style-type: none"> Review electronic or hard copy Individual Records. Evidence may include: <ul style="list-style-type: none"> Notation in DSCIS to update the Applicant's file Case Notes Letter and/or documentation to confirm 	<p>The Executive Director of the Application Entity who received this request for review did not comply with the request and did not complete the Stage 3 eligibility review within 15 business days of receiving the written request.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>28. Stage Three, Participants</p> <p>The Application Entity that has deemed the individual ineligible at Stages 1 and 2 of the eligibility review process shall not participate in the Stage 3 review.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Notation in DSCIS to update the Applicant's file Case Notes <p>Letter and/or documentation to confirm that those who were involved in the Stage 1 and Stage 2 reviews are not involved in Stage 3 (i.e., that the letter to the application entity is a different entity than those used in previous stages)</p>	<p>Insufficient evidence confirming the Application Entity that deemed the individual ineligible at Stages 1 and 2 of the eligibility review process also participated in the Stage 3 review.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>29. Stage 3, Additional Info/Documentation</p> <p>In the Stage 3 review process, the Executive Director (or delegate) of the Application Entity shall: provide the individual and/or representative of their choice with the opportunity to provide any additional information and supporting documentation that may have a bearing on the review process and decision on eligibility.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> A letter or documentation Case Notes Notation in DSCIS to update Applicant's file 	<p>Insufficient evidence confirming that in the Stage 3 review process, the Executive Director (or delegate) of the Application Entity provided the individual and/or representative of their choice with the opportunity to provide any additional information and supporting documentation that may have a bearing on the review process and decision on eligibility.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>30. Stage 3, Stage 2 Observed</p> <p>In the Stage 3 review process, the Executive Director (or delegate) of the Application Entity shall: determine if the rules in Stage 2 of the review were observed.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Case Notes <p>Documentation, in the Stage 3 review process, to confirm that the Executive Director (or delegate) determined if the rules in Stage 2 of the review were observed.</p>	<p>Insufficient evidence confirming that in the Stage 3 review process, the Executive Director (or delegate) of the Application Entity determined if the rules in Stage 2 of the review were observed.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>31. Stage 3, Info/Documentation Meets Eligibility</p> <p>In the Stage 3 review process, the Executive Director (or delegate) of the Application Entity shall: review the individual's information and supporting documentation to confirm whether or not the individual meets the eligibility criteria set out in the Act and Regulation.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Case Notes <p>Documentation, in the Stage 3 review process, to confirm that the Executive Director (or delegate) determined if the rules in Stage 2 of the review were observed.</p>	<p>Insufficient evidence confirming that as part of the Stage 3 review process, the Executive Director reviewed the individual's information and supporting documentation to confirm whether or not the individual meets the eligibility criteria.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>32. Stage 3, Decision & Notification</p> <p>In the Stage 3 review process, the Executive Director (or delegate) of the Application Entity shall: render a Stage 3 review decision and notify the individual and/or representative of their choice of the decision in writing.</p> <p>Policy Directives for Application Entities: 3.0 Review Processes for Decisions on Eligibility</p>	<ul style="list-style-type: none"> To outline the procedures used by application entities to review decisions of ineligibility for ministry-funded adult developmental services and supports. To ensure that the process used by application entities to review a decision where an individual is deemed ineligible for ministry-funded adult developmental services and supports adheres to the principles and objectives of equity, fairness, and provincial consistency. 	<p>Review Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Notation in DSCIS to update Applicant's file Case Notes <p>Eligibility Checklist Letter or documentation to notify the individual and/or representative of their choice of the decision in writing.</p>	<p>Insufficient evidence confirming that in the Stage 3 review process, the Executive Director (or delegate) of the Application Entity rendered a Stage 3 review decision and notified the individual and/or representative of their choice of the decision in writing.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>33. Assess Support Needs, Application Package</p> <p>The Application Entity shall use the ministry mandated Application Package, consisting of the Application for Developmental Services and Supports (ADSS) and the Supports Intensity Scale - Adult Version™ (SIS-A™), as the provincially-consistent tool to assess the support needs of applicants eligible for ministry-funded adult developmental services and supports in accordance with the Act.</p> <p>Policy Directives for Application Entities: 4.0 Assessment of Support Needs</p>	<ul style="list-style-type: none"> Application entities shall use a provincially consistent method to assess the support needs of applicants eligible for ministry-funded adult developmental services and supports to be provided in accordance with the legislation and policy directives. 	<p>Review electronic and hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> References in DSCIS Review individuals' files to see that there are completed copies of the Application Package in the files 	<p>Insufficient evidence confirming the application entity used the ministry mandated Application Package, consisting of the Application for Developmental Services and Supports (ADSS) and the Supports Intensity Scale - Adult Version™ (SIS-A™), as the provincially-consistent tool to assess the support needs of applicants eligible for ministry-funded adult developmental services and supports.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>34. Assessors, Collection of Information</p> <p>The Application Entity shall ensure that the Application Package data is collected, stored and maintained accurately and consistently to ensure the protection of personal and sensitive information and meets the quality standards required by the Ministry as set out by the assessor training and data quality assurance program.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Notation in DSCIS Eligibility Checklist Application Package data is: <ul style="list-style-type: none"> Collected, stored and maintained accurately and consistently Meets the quality standards required by the Ministry as set out by the assessor training and data quality assurance program within the last 18 months. <p>Note: The quality standards required by the Ministry are set out in the assessor training and data quality assurance program.</p> <p>Consider reviewing DSO P&Ps for further direction.</p>	<p>The Application Entity did not ensure that the Application Package data is collected, stored and maintained accurately and consistently and met the quality standards required by the Ministry as set out by the assessor training and data quality assurance program.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>35. Assessors, Collection of Information</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: Information about an applicant may only be collected after the applicant has been informed and understood the purpose of information collection and sharing in accordance with the Act.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Evidence could include electronic or hard copy:</p> <ul style="list-style-type: none"> Signed consent Case notes Email Letter 	<p>Insufficient evidence confirming information about an applicant was only collected after the applicant had been informed, and understood the purpose of information collection and sharing in accordance with the Act.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>36. Assessors/Interview</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: Administration of the Application Package shall involve two semi-structured interviews held by an assessor with the eligible applicant as well as at least one additional respondent, but no more than four respondents, following the approach described in the assessor training and quality assurance program and the Application Package training manuals (Best practice standard is that the interviews happen on different days. Assessments scheduled on the same day should be exceptional and the justification must always lie with the best interests of the applicant).</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>A review of the policies/service standards for assessors to follow to ensure this requirement is included.</p> <p>Evidence could include electronic or hard copy:</p> <ul style="list-style-type: none"> Case notes <p><i>*In exceptional circumstances, the applicant may attend an interview in part or the interview can be held with the applicant alone:</i></p> <ul style="list-style-type: none"> <i>the applicant may attend an interview in part where the applicant is clearly not benefiting from the interview but wishes to complete an Application Package;</i> <i>should the applicant be unable to fully answer/participate, a second respondent is to be included to ensure at least two people (individual/respondents) can fully participate and answer all of the interview questions; or</i> <i>the interview may be held with the applicant alone if the applicant does not have someone who knows them well for at least the last three months and/or the applicant demonstrates a strong preference to represent him/herself.</i> 	<p>The application entity was not able to provide sufficient evidence confirming the administration of the Administration Package involved two semi-structured interviews held by an assessor with the eligible applicant as well as at least one additional respondent, but no more than four respondents, following the approach described in the assessor training and quality assurance program and the Application Package.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>37. Assessors/Interview, Respondent</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: A respondent is defined as someone who has known the applicant well for at least the last three months and has had the opportunity to observe the applicant in one or more environments for substantial periods of time. A respondent also has to be able to understand and answer all questions.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To provide clarity on the individuals who should participate in the interview(s) so as to obtain accurate and detailed information to inform the assessment. This would, in turn, ensure provincially consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>A review of the policies/service standards for assessors to ensure this definition is included.</p> <p>Evidence could include electronic or hard copy:</p> <ul style="list-style-type: none"> Case notes 	<p>Insufficient evidence confirming the respondent was someone who has known the applicant for at least the last three months and was able to understand and answer all questions.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>38. Assessors, Interview/ Respondent criteria</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: A respondent can be a parent, sibling, other relative, guardian, direct support staff, work supervisor, teacher, or any other individual who supports, works with, or lives with the applicant being assessed and understands the applicant and his or her specific support needs.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To provide clarity on the individuals who should participate in the interview(s) so as to obtain accurate and detailed information to inform the assessment. This would, in turn, ensure provincially consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review the application entities service standards/policies for assessors to ensure this requirement is incorporated.</p> <p>Evidence could include electronic or hard copy:</p> <ul style="list-style-type: none"> Case notes 	<p>Insufficient evidence confirming the respondent who supports, works with, or lives with the applicant being assessed and understands the applicants and his or her specific support needs.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>39. Assessors, Interview/Applicant Present</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: Every effort should be made by the Application Entity to ensure that the applicant is included and present at both Application Package interviews.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. The requirement aims to gather information from the individual so as to hear, first hand, their thoughts, ideas, skills, abilities, etc. 	<p>Review the application entities service standards/policies for assessors to ensure this requirement is incorporated.</p> <p>Evidence could include electronic or hard copy:</p> <ul style="list-style-type: none"> Case notes 	<p>Insufficient evidence confirming that every effort was made to include the applicant during both interviews.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>40. Assessors/Interview Timelines</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: Only in exceptional circumstances, or if the applicant requests or requires it, should there be more than 15 business days between the first and second interview.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review the application entities service standards/policies for assessors to ensure this requirement is incorporated.</p> <p>Review electronic or Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> The dates of interviews on letter or documentation (second interview was completed 15 days after the first). Letter or documentation to support exceptional circumstances or that the applicant requested or required additional time between interviews. <p>Consider both DSO and applicant exceptional circumstances.</p> <p>Consider reviewing DSO P&Ps</p>	<p>The application entity was not able to produce evidence confirming the applicant request or exceptional circumstances which prevented the first and second interview to be held within 15 business days or less.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>41. Assessors/Interview, Provision of Information</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: The Application Entity shall provide background information about the interviews, and the Application Package to the applicant and respondent(s) at least (10) business days before the first interview.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review the application entities service standards/policies for assessors to ensure this requirement is incorporated.</p> <p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Notations in DSCIS A letter or documentation that the information was sent. <p>Consider the review dates of sent documentation to ensure the information was provided at least 10 business days before first interview.</p>	<p>Insufficient evidence confirming the Application Entity provided background information about the interviews, and the Application Package to the applicant and respondent(s) at least (10) business days before the first interview.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>42. Assessors/record validation</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: The assessor must record a valid response for all questions included in the Application Package.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review the application entities service standards/policies for assessors to ensure this requirement is incorporated.</p> <p>Review the Application Package.</p>	<p>The assessor did not record a valid response for all questions included in the Application Package.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>43. Assessors, Reassessment</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: The Application Entity shall reassess the support needs of persons with developmental disabilities on the wait list and those in service every five years: Reassessment shall take place at five-year intervals based on the date of the last completed Application Package.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Notation in DSCIS Letters or documentation with a file notation to support the reassessment every 5 years. <p><u>TEMPORARY SUSPENSION OF FIVE YEAR REASSESSMENT REQUIREMENT</u></p> <p><i>Memo dated October 2017 provided a temporary suspension of the five year reassessment requirement in Policy Directive 5.0 for Application Entities is in effect, with the result that Developmental Services Ontario (DSO) offices are not required to conduct mandatory five year reassessments.</i></p> <p><i>The temporary suspension does not relate to the requirement contained in Policy Directive 5.0 that requires DSO offices to consider if a person with a developmental disability's support needs or personal circumstances change significantly in which case DSO offices shall continue to make arrangements for reassessment of individuals in these circumstances.</i></p>	N/A	N/A

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>44. Assessors, Reassessment/Service Standards</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: The Application Entity shall reassess the support needs of persons with developmental disabilities on the wait list and those in service every five years: The Application Entity shall ensure that assessors adhere to the service standards for administering the Application Package when they conduct reassessments of the support needs of persons with developmental disabilities.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review electronic and hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • Notation in DSCIS • Application Package • Letters or documentation, to adhere to the service standards for administering the Application Package when they conduct reassessments (e.g., that information is provided 10 days in advance, that efforts are made to include the individual). <p><u>TEMPORARY SUSPENSION OF FIVE YEAR REASSESSMENT REQUIREMENT</u></p>	N/A	N/A

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>45. Assessor, Reassessment/New Application Package</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: The Application Entity shall reassess the support needs of persons with developmental disabilities on the wait list and those in service every five years: The reassessment will comprise completing a new Application Package, including a new ADSS and a new SIS-A.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Letters or documentation, to confirm reassessment. Notation in DSCIS New Application Package, including a new ADSS and a new SIS® was used. <p><u>TEMPORARY SUSPENSION OF FIVE YEAR REASSESSMENT REQUIREMENT</u></p> <p><i>Memo dated October 2017 provided a temporary suspension of the five year reassessment requirement in Policy Directive 5.0 for Application Entities is in effect, with the result that Developmental Services Ontario (DSO) offices are not required to conduct mandatory five year reassessments.</i></p> <p><i>The temporary suspension does not relate to the requirement contained in Policy Directive 5.0 that requires DSO offices to consider if a person with a developmental disability's support needs or personal circumstances change significantly in which case DSO offices shall continue to make arrangements for reassessment of individuals in these circumstances.</i></p>	N/A	N/A

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>46. Assessor, Immediate Reassessment</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: The Application Entity shall reassess the support needs of persons with developmental disabilities on the wait list and those in service every five years: If a person with a developmental disability's support needs or personal circumstances change significantly, the Application Entity shall make arrangements for more immediate reassessment.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To ensure provincially-consistent information gathering by application entities but also allow for extenuating circumstances so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review the application entities service standards/policies for assessors to ensure this requirement is incorporated.</p> <p>Review electronic or hard copy Individual Records.</p> <p>Entity ensures:</p> <ul style="list-style-type: none"> Notation in DSCIS Letters or documentation confirming arrangements for more immediate reassessment when the person's support needs or personal circumstances changed significantly. 	<p>Insufficient evidence confirming the Application Entity made arrangements for an immediate reassessment where the person with a developmental disability's support needs or personal circumstances changed significantly.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>47. Qualified Assessor, Assessment, 16 years of age</p> <p>The Application Entity shall establish and maintain the following service standards for assessors to follow in administering the Application Package: Qualified assessors may administer the Application Package with applicants from the age of sixteen who, with the exception of the age requirement, meet the criteria for Ministry-funded adult developmental services and supports in accordance with the Act: Application Entities may not facilitate referrals or service connections for these applicants to Ministry-funded adult developmental services and supports until they are eighteen years of age.</p> <p>Policy Directives for Application Entities: 5.0 Assessor Qualifications and Service Standards for the Assessment of Support Needs</p>	<ul style="list-style-type: none"> To provide direction on when an assessment may be completed and actions that follow the assessment. To ensure provincially-consistent information gathering by application entities so that decisions and planning for ministry-funded adult developmental services and supports are based on accurate information on the needs, priorities and circumstances of persons determined to have developmental disabilities in accordance with the Act. 	<p>Review the application entities service standards/policies for assessors to ensure this requirement is incorporated.</p> <p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Notation in DSCIS Completed ADSS/SIS referral that indicated individual's age of at least 16 years of age. <p>Consider Application Package can be completed for persons aged 16-18.</p> <p>Note: Application Entities may not facilitate referrals for these applicants to Ministry-funded adult developmental services and supports until they are eighteen years of age</p>	<p>There is evidence confirming the Application Entity facilitated referrals for applicants from the age of sixteen who, with the exception of the age requirement, meet the criteria for Ministry-funded adult developmental services and supports to Ministry-funded adult developmental services and supports before they were eighteen years of age.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>48. Emergency Service Response</p> <p>When an individual contacting an Application Entity needs an emergency service response, the Application Entity shall provide information to direct the individual to the most appropriate local emergency service (for example, the police, hospital or local clinic).</p> <p>Policy Directives for Application Entities: 6.0 Individuals in Urgent Need of Support</p>	<ul style="list-style-type: none"> To ensure that the application entity follows consistent processes with persons who are in need of an emergency service response. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> DSO Internal Incident Reports Ministry Occurrence Reports (if applicable per Occurrence Reporting Guidelines) Documentation to confirm individual was directed to emergencies services. <p>Consider DSO P&Ps to include re: local emergency services for various situations (i.e. doctor, ambulance, fire department, etc.)).</p>	<p>Insufficient evidence confirming the Application Entity provided information to direct the individual to the most appropriate local emergency service, when an individual contacted the Application Entity needing an emergency service response.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>49. Urgent Need of Service</p> <p>When a person contacting an Application Entity appears to be in urgent need of interim adult developmental services and support, the Application Entity shall initiate the local process for resolving service issues for adults with a developmental disability (such as the Urgent Response process) that may refer the person to appropriate, available, interim support.</p> <p>Policy Directives for Application Entities: 6.0 Individuals in Urgent Need of Support</p>	<ul style="list-style-type: none"> To ensure that the Application Entity follows consistent processes to help adults with a developmental disability who appear to be in urgent need of interim developmental services and support. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Letter, documentation and/or notation on file re: follow-up with local planning table/ Letter, documentation and/or notation on file re: process for resolving services issues and any outcomes. Meeting Notes/Minutes <p>Note: Local processes refer to whatever is in place and will vary across the province.</p>	<p>Insufficient evidence confirming the Application Entity initiated the local process for resolving service issues for adults with a developmental disability appearing to be in urgent need of interim developmental services and support (such as the Urgent Response process) that may refer the person to appropriate, available, interim support.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>50. Urgent Need of Service/Eligibility Confirmation Process</p> <p>Where a person has not previously completed the confirmation of eligibility process for Ministry-funded adult developmental services and supports, the Application Entity shall follow-up with the person to complete the eligibility confirmation process in accordance with the Act.</p> <p>Policy Directives for Application Entities: 6.0 Individuals in Urgent Need of Support</p>	<ul style="list-style-type: none"> To ensure that the Application Entity follows consistent processes to help adults with a developmental disability who appear to be in urgent need of interim developmental services and support. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Notation in DSCIS Case Notes Letter, documentation and/or notation on file for need for determination of eligibility. <p>Letter of documentation that would start the eligibility confirmation process</p>	<p>Insufficient evidence confirming the Application Entity followed-up with the individual to complete the eligibility confirmation process in accordance with the Act.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>51. Urgent Need of Support/Application Package</p> <p>The Application Entity shall complete and/or update the full Application Package for all eligible persons as soon as possible and no later than twelve (12) months after the date of the initial request for urgent support.</p> <p>Policy Directives for Application Entities: 6.0 Individuals in Urgent Need of Support</p>	<ul style="list-style-type: none"> To ensure that the Application Entity follows consistent processes to help adults with a developmental disability who appear to be in urgent need of interim developmental services and support. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Check date in DSCIS re: Application Package for all eligible individuals Check date on letters, documentation re: Application Package for all eligible individuals <p>No later than twelve (12) months after the date of the initial request for urgent support.</p> <p>Note: Interim prioritization guidelines are in place requiring a single regional prioritization process. However, these will vary across the province. DSOs do not have a role in prioritization. However, they do provide information to the community-based prioritization process.</p>	<p>Insufficient evidence confirming the Application Entity completed and/or updated the full Application Package for all eligible individuals within twelve (12) months after the date of the initial request for urgent support.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>52. Information and Supports, Consideration of Risks</p> <p>Each application entity shall provide information and supports to persons with developmental disabilities regarding activities in their individual support plan, including the consideration of risks so they can make informed decisions.</p> <p>Regulation 299/10, 29(3)</p>	<ul style="list-style-type: none"> The ministry recognizes that applications entities do not work with adults with a developmental disability in developing individual support plans; however, the entity does have a role in providing information and supports to persons with DS regarding activities in their individual support plans. This information includes the consideration of risks used to enable the DS person to make informed decisions. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence could include:</p> <ul style="list-style-type: none"> Documentation of information provided to the individual relating to areas of personal interest and/or elements of their individual support plan (e.g., pamphlets, information sheets, business cards, websites or other social media links) Documentation on referrals for services and supports made on behalf of the individual Notations and/or documentation about inquiries made on behalf of the individual to potential activities of interest Meeting Notes/Minutes 	N/A	N/A

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>53. Privacy and Confidentiality, Persons Applying</p> <p>Each application entity shall review its policies and procedures on privacy and confidentiality and consent to collection, use or disclosure of personal information with persons with a developmental disability who have applied for services and supports or funding from the entity in a language and manner, and with a level of support, that is appropriate to the capacity of the person with a developmental disability and any person acting on their behalf.</p> <p>Regulation 299/10, 32(3)</p>	<ul style="list-style-type: none"> To protect the personal information of persons receiving services. To ensure that the application entity has considered and articulated to DS persons and any person acting on their behalf, in an appropriate manner, how personal information will be collected, used and disclosed. To ensure that individuals who receive services understand the entity's policies and procedures on privacy, confidentiality and consent 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Electronic training document Meeting Notes/minutes Performance appraisals Acknowledgement forms or training attendance logs <p>Consider DSO P&Ps.</p> <p>Consider the information should be in a language and manner, and reflect a level of support, that is appropriate to the capacity of the individual and any person acting on their behalf.</p>	<p>Insufficient evidence confirming that application entity reviewed its policies and procedures on privacy and confidentiality and consent to collection, use or disclosure of personal information with persons with a developmental disability who have applied for services and supports or funding from the entity in a language and manner, and with a level of support, that is appropriate to the capacity of the person with a developmental disability and any person acting on their behalf.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>54. Record Individual</p> <p>Each application entity shall keep a record for each person with a developmental disability who has applied for services and supports or funding.</p> <p>Regulation 299/10, 35(1)(a)</p>	<ul style="list-style-type: none"> To ensure that the application entity maintains a record on each person found eligible, and who has applied for ministry-funded adult developmental services. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Cross referencing a list of total # of applicants applied for service and the total # of records. Record, Notation and reports in DSCIS <p>Consider individuals in services, waitlist, ineligible, etc.)</p>	<p>Insufficient evidence confirming the application entity kept a record for each person with a developmental disability who has applied for services and supports or funding.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>55. Record, Application for Developmental Services and Supports.</p> <p>At a minimum, the record shall include a copy of the person's Application for Developmental Services and Supports.</p> <p>Regulation 299/10, 35(2)(a)</p>	<ul style="list-style-type: none"> To ensure that the application entity maintains a record on each person found eligible, and who has applied for ministry-funded adult developmental services. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include a review of documents:</p> <ul style="list-style-type: none"> Notation in DSCIS Hard copy 	<p>The record did not include a copy of the person's Application for Developmental Services and Supports.</p>	<p>A letter or documentation confirming the completion of corrective action</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>56. Record, Supports Intensity Scale</p> <p>At a minimum, the record shall include a copy of the person's Supports Intensity Scale needs assessment.</p> <p>Regulation 299/10, 35(2)(b)</p>	<ul style="list-style-type: none"> To ensure that the application entity maintains a record on each person found eligible, and who has applied for ministry-funded adult developmental services. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence shall include:</p> <ul style="list-style-type: none"> Supports Intensity Scale needs assessment <p>And may include:</p> <ul style="list-style-type: none"> Notation in DSCIS 	<p>The record did not include a copy of the person's Supports Intensity Scale needs assessment.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
57. Record, Individual Support Plan At a minimum, the record shall include a copy of the person's individual support plan. Regulation 299/10, 35(2)(c)	<ul style="list-style-type: none"> To ensure that the application entity maintains a record on each person found eligible, and who has applied for ministry-funded adult developmental services. 	Review electronic or hard copy Individual Records. Evidence must include: <ul style="list-style-type: none"> Individual Support Plan (ISP) And may include: Notation in DSCIS 	N/A	N/A

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>58. Record Retention</p> <p>The application entity shall retain a person's record for a minimum of seven years after the application entity has assessed the person's needs for services and supports.</p> <p>Regulation 299/10, 35(3)</p>	<ul style="list-style-type: none"> To ensure that application entities keep records of the people who have been assessed, in the event that entities must refer back to the records or information is needed. 	<p>Review electronic or hard copy Individual Records.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Review assessment date of records on letters, documentation, and notation of file. Notation in DSCIS 	<p>The application entity did not retain the person's record for a minimum of seven years after the application entity assessed the person's needs for services and supports.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>59. Record, Minimum of seven years</p> <p>Copies or electronic records/copies of all required documentation shall be retained for people who have been confirmed eligible for adult developmental services and supports for a minimum of seven years after the Application Entity has assessed the person's needs for services and supports (in accordance with the Regulation on Quality Assurance Measures).</p> <p>(Policy Directives for Application Entities: 2.0 Confirmation of Eligibility for Ministry-Funded Adult Developmental Services and Supports)</p>	<ul style="list-style-type: none"> Consistent with, and in support of, the requirement outlined in the Regulation on Quality Assurance Measures, and to outline the procedures used by Application Entities to confirm eligibility for ministry-funded adult developmental services and supports and to ensure the retaining of electronic copies of all documents related to eligibility decision. 	<p>Review electronic or hard copy Individual Records.</p>	<p>The Application Entity did not retain copies of all the required documentation for the person confirmed eligible for adult developmental services and supports for a minimum of seven years.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Individual Records	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>60. Abuse Prevention/Reporting</p> <p>The Application Entity shall also comply with the policies and procedures set out in O. Reg. 299/10 under the Act on abuse prevention and reporting, and with the Ministry process for reporting serious occurrences when a report is received in this regard.</p> <p>Policy Directives for Application Entities: 7.0 Feedback Process</p>	<ul style="list-style-type: none"> To support the requirement in the Regulation on Quality Assurance Measures and act as a reminder that alleged, suspected or witnessed abuse must be reported to the ministry as a serious occurrence. To ensure all Application Entities are reporting serious occurrences in a provincially consistent way. 	<p>Review electronic or hard copy Individual Records.</p> <p>DSO complies with the P&Ps set out in O.Reg. 299/10 on abuse prevention and reporting.</p> <p>DSO complies with the P&Ps set out with the Ministry process for reporting serious occurrences when a report is received in this regard.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Incident Report Ministry Serious Occurrence Reports Case notes 	<p>The Application Entity did not comply with the policies and procedures set out in O. Reg. 299/10 under the Act on abuse prevention and reporting, or with the Ministry process for reporting serious occurrences.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>1. Community Based Adult Developmental Services, General Information</p> <p>When an Application Entity is asked to provide information about adult developmental services and supports in Ontario, the Application Entity shall provide general information on: all relevant community-based services available to persons with developmental disabilities including Ministry of Children, Community and Social Services (ministry) -funded adult developmental services and supports in accordance with the Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008; how to find information on the French Language Services Act, the Accessibility for Ontarians with Disabilities Act, 2005 and its regulations, and the Human Rights Code in Ontario.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that application entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> List of all relevant community services that are made available to individuals and others. Information packages Policies and procedures Meeting Minutes Case notes DSCIS 	<p>(SPECIFY)</p> <p>The application entity did not provide general information on all relevant community-based services available to persons with developmental disabilities when requested.</p> <p>The application entity did not provide general information on how to find information on the French Language Services Act, the Accessibility for Ontarians with Disabilities Act, 2005 and its regulations, and/or the Human Rights Code in Ontario.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>2. Community Based Adult Developmental Services, Information/Application for Services & Supports</p> <p>When an Application Entity is asked to provide information about adult developmental services and supports in Ontario, the Application Entity shall provide general information on: the Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008, including: the process for applying for Ministry-funded adult developmental services and supports.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that application entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Information packages Policies and procedures Meeting Minutes Case notes Notations in DSCIS Website/Brochures/Plain Language Guides 	<p>Insufficient evidence confirming that when asked to provide information about adult developmental services and supports in Ontario, the Application Entity provided general information on the Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008, including, the process for applying for Ministry-funded adult developmental services and supports.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>3. Community Based Adult Developmental Services, Information/Direct Funding or Access Through Service Agencies</p> <p>When an Application Entity is asked to provide information about adult developmental services and supports in Ontario, the Application Entity shall provide general information on: the Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008, including: where applicable, the choice available to eligible applicants to receive direct funding to purchase adult developmental services and supports, or to access adult developmental services and supports through service agencies funded by the Ministry.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that application entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Information packages Policies and procedures Meeting Minutes Case notes Notation in DSCIS Website/Brochures 	<p><i>Insufficient evidence confirming that when asked to provide information about adult developmental services and supports in Ontario, the Application Entity provided general information on the Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008, including, where applicable, the choice available to eligible applicants to receive direct funding to purchase adult developmental services and supports, or to access adult developmental services and supports through service agencies funded by the Ministry.</i></p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>4. Customer Service, Feedback</p> <p>When an Application Entity is asked to provide information about adult developmental services and supports in Ontario, the Application Entity shall provide general information on: how to provide feedback to the Application Entity on its customer service.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that application entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Evidence may include:</p> <ul style="list-style-type: none"> Information packages Policies and procedures Meeting Minutes Case notes Notation in DSCIS Website/Brochure 	<p>The application entity did not provide general information on how to provide feedback to the Application Entity on its customer service.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>5. Application Package, Feedback/Applicants</p> <p>When an Application Entity is asked to provide information about adult developmental services and supports in Ontario, the Application Entity shall provide general information on: how applicants can provide feedback to the Ministry on the Application Package.</p> <p>{{Policy Directives for Application Entities: 1.0 Provisions of Information}}</p>	<ul style="list-style-type: none"> To ensure that application entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Information packages Policies and procedures Meeting Minutes Case notes Notation in DSCIS (future state)Website/Brochures/Plain Language Guides <p>Posters or other publicly displayed signs on providing feedback</p>	<p>Insufficient evidence confirming that when the Application Entity was asked to provide information about adult developmental services and supports in Ontario, the Application Entity provided general information on how applicants could provide feedback to the Ministry on the Application Package.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>6. Feedback, Concerns/Annual Review/Analysis/Evaluation</p> <p>The Application Entity shall conduct an annual review and analysis of feedback received and how concerns raised in the feedback were addressed, and evaluate the effectiveness of its policies and procedures on the feedback process for the Board of Directors.</p> <p>Policy Directives for Application Entities: 7.0 Feedback Process</p>	<ul style="list-style-type: none"> To ensure that Application Entities have a provincially-consistent process in place to receive feedback about the services that they provide. To ensure that application entities annually review and analyze feedback, including how concerns were addressed, in order to evaluate effectiveness of policies and procedures regarding the feedback process for the Board of Directors. 	<p>Review Records and Documentation. Review analysis or summary documentation</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Electronic training document Meeting minutes Acknowledgement forms or training attendance logs 	<p>Insufficient evidence confirming the application entity conducted an annual review and analysis of feedback received and how concerns raised in the feedback were addressed, and evaluated the effectiveness of its policies and procedures on the feedback process for the Board of Directors.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>7. Feedback, Application Package/Survey</p> <p>The Application Entity shall provide applicants and/or representatives of their choice with the confidential Ministry survey about the Application Package: Implementation of this policy directive is based on the use of a Ministry-specified survey tool and a common set of questions.</p> <p>Policy Directives for Application Entities: 7.0 Feedback Process</p>	<ul style="list-style-type: none"> To ensure that Application Entities have a provincially-consistent process in place to receive feedback about the application package.. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Letter or documentation that the DSO provides information on ministry-specified survey tool and Anonymous surveys shall be sent directly from the applicant to the administrator of the Ministry's survey tool (either electronically or in hard copy). Information packages Policies and procedures Meeting Minutes Case notes Notation in DSCIS Website/Brochures 	<p>Insufficient evidence confirming the application entity provided applicants and/or representatives of their choice with the confidential Ministry survey about the Application Package.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>8. Feedback, Application Package, Survey Administrator</p> <p>The Application Entity shall provide applicants and/or representatives of their choice with the confidential Ministry survey about the Application Package: Anonymous surveys shall be sent directly from the applicant to the administrator of the Ministry's survey tool (either electronically or in hard copy).</p> <p>Policy Directives for Application Entities: 7.0 Feedback Process</p>	<ul style="list-style-type: none"> To ensure that Application Entities have a provincially-consistent process in place to receive feedback about the application package. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Letter or documentation that the DSO provides information on ministry-specified survey tool and Anonymous surveys shall be sent directly from the applicant to the administrator of the Ministry's survey tool (either electronically or in hard copy). Information packages Policies and procedures Meeting Minutes Case notes Notation in DSCIS Website/Brochures 	<p>Insufficient evidence confirming the anonymous surveys were sent directly from the applicant to the administrator of the Ministry's survey tool (either electronically or in hard copy).</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>9. Community Based Services & Providers, Response to Questions</p> <p>When an Application Entity is asked to provide information about adult developmental services and supports in Ontario, the Application Entity shall provide general information on: how the Application Entity will respond to email, mail, in-person, and telephone questions about relevant community-based services and service providers for persons with developmental disabilities.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Letter or documentation Information packages Policies and procedures Meeting Minutes Case notes Website/Brochures/Plan Language Guide <p>Respond to email, mail, in- person, and telephone questions about relevant community- based services and service providers for persons with developmental disabilities.</p>	<p>Insufficient evidence confirming that when an Application Entity was asked to provide information about adult developmental services and supports in Ontario, the Application Entity provided general information on how the Application Entity would respond to email, mail, in-person, and telephone questions about relevant community-based services and service providers for persons with developmental disabilities.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>10. Application Entities Locations & Contact Information</p> <p>When an Application Entity is asked to provide information about adult developmental services and supports in Ontario, the Application Entity shall provide general information on: location of Application Entities within the region and locations of other Application Entities across the province, including contact information and hours of operation for each location.</p> <p>{{Policy Directives for Application Entities: 1.0 Provisions of Information}}</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Letter or documentation Information packages Policies and procedures Meeting Minutes Case notes Website/Brochures/Plan Language guide Posters or other public signs <p>Consider all location within the region and locations across the province, including contact information and hours of operation for each location.</p>	<p>Insufficient evidence confirming that when then Application Entity was asked to provide information about adult developmental services and supports in Ontario, the Application Entity provided general information on location(s) of Application Entities within the region, and locations of other Application Entities across the province, including contact information and hours of operation for each location.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>11. 211 Ontario Database</p> <p>The Application Entity shall use the 211 Ontario data base as a primary source of information about relevant community-based services and service providers for persons with developmental disabilities, wherever available.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> 211 Database Letter or documentation Information packages Policies and procedures Meeting Minutes 	<p>Insufficient evidence confirming the Application Entity used the 211 Ontario data base as a primary source of information about relevant community-based services and service providers for persons with developmental disabilities, wherever available.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>12. Information Requests, Person</p> <p>The Application Entity shall receive and respond to information requested by any member of the public, and share standard information on Ministry-funded adult developmental services and supports and other relevant community-based services and service providers for persons with developmental disabilities in any of the following ways, as appropriate: in person.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Notation in DSCIS Letter or documentation Information packages Policies and procedures Meeting Minutes Case notes Website/Brochures Plain language guides Posters or public sign 	<p>Insufficient evidence confirming the application entity received and responded to information requested by any member of the public, and shared standard information on Ministry-funded adult developmental services and supports and other relevant community-based services and service providers for persons with developmental disabilities in any of the following ways, as appropriate, in person.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>13. Information Requests, Telephone</p> <p>The Application Entity shall receive and respond to information requested by any member of the public, and share standard information on Ministry-funded adult developmental services and supports and other relevant community-based services and service providers for persons with developmental disabilities in any of the following ways, as appropriate: via telephone.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Letter or documentation Information packages Policies and procedures Meeting Minutes Case notes Notation in DSCIS Website/Brochures Plain language guides Posters or public sign 	<p>Insufficient evidence confirming the Application Entity received and responded to information requested by any member of the public, and shared standard information on Ministry-funded adult developmental services and supports and other relevant community-based services and service providers for persons with developmental disabilities in any of the following ways, as appropriate, via telephone.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>14. Information Requests, Email</p> <p>The Application Entity shall receive and respond to information requested by any member of the public, and share standard information on Ministry-funded adult developmental services and supports and other relevant community-based services and service providers for persons with developmental disabilities in any of the following ways, as appropriate: by email.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Notation in DSCIS Letter or documentation Information packages Policies and procedures Meeting Minutes Case notes Website/Brochures/Plain language guides Posters or public sign 	<p>Insufficient evidence confirming the Application Entity received and responded to information requested by any member of the public, and shared standard information on Ministry-funded adult developmental services and supports and other relevant community-based services and service providers for persons with developmental disabilities in any of the following ways, as appropriate, by email.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>15. Information Requests, Mail</p> <p>The Application Entity shall receive and respond to information requested by any member of the public, and share standard information on Ministry-funded adult developmental services and supports and other relevant community-based services and service providers for persons with developmental disabilities in any of the following ways, as appropriate: by mail.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • Notation in DSCIS • Letter or documentation • Information packages • Policies and procedures • Meeting Minutes • Case notes • Website/Brochures/ Plain language guides • Posters or public sign 	<p>Insufficient evidence confirming the Application Entity received and responded to information requested by any member of the public, and shared standard information on Ministry-funded adult developmental services and supports and other relevant community-based services and service providers for persons with developmental disabilities in any of the following ways, as appropriate, by mail.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>16. Information Request, Website and/or web-related</p> <p>The Application Entity shall receive and respond to information requested by any member of the public, and share standard information on Ministry-funded adult developmental services and supports and other relevant community-based services and service providers for persons with developmental disabilities in any of the following ways, as appropriate: website and/or web-related resources.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • Notation in DSCIS • Letter or documentation • Information packages • Policies and procedures • Meeting Minutes • Case notes • Website/Brochures/ Plain language guides • Posters or public sign 	<p>The application entity did not share standard information on ministry-funded adult developmental services and supports and other relevant community-based services and service providers on the website.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>17. Standard Business Hours</p> <p>The Application Entity shall: establish standard business hours of operation during which staff will respond directly to in-person, telephone, and on-line (e-mail) enquiries.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Letter or documentation Information packages Policies and procedures Website/Brochures/ Plain language guides Posters or public sign 	<p>The Application Entity did not establish standard business hours of operation during which staff would respond directly to in-person, telephone, and on-line (e-mail) enquiries.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>18. Application Package Interviews/Outside Standard Business Hours</p> <p>The Application Entity shall: establish hours outside of standard business hours of operation both during the week and on weekends, for eligible applicants to participate in scheduled Application Package interviews.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • Notation in DSCIS • Letter or documentation • Information packages • Policies and procedures • Meeting Minutes • Case notes • Website/Brochures / Plain language guides • Posters or public sign <p>Application entities shall provide flexibility with respect to hours of operation to enable eligible applicants to participate in scheduled Application Package Interviews.</p>	<p>The Application Entity did not establish hours outside of standard business hours of operation both during the week and on weekends, for eligible applicants to participate in scheduled Application Package interviews.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>19. Current Information/Resources, Community Participation</p> <p>The Application Entity shall: maintain accurate, current information on community resources to encourage and support more participation by persons with developmental disabilities in community life.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. To ensure that application entities have a provincially-consistent process in place to ensure that the information they about resources in their local communities is current and accurate and accessible to persons with developmental disabilities. This process is an important part of providing quality customer service, and supports continuous improvement in service delivery. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Letter or documentation Information packages Policies and procedures Meeting Minutes Case notes Website/Brochures <p>Consider a list of accurate and current information on community resources (for community life).</p>	<p>The Application Entity did not maintain accurate, current information on community resources to encourage and support more participation by persons with developmental disabilities in community life.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>20. Information Requests, Confidential Protocols</p> <p>The Application Entity shall: develop and implement protocols for responding to information requests made in-person, by telephone, email, mail, through the Application Entity website, or by other means, in a secure and confidential manner and as set out in a Ministry-approved service plan.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<p>To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner.</p>	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • Protocols for responding to information requests • Service Plan (ministry-approved) • Notation in DSCIS • Letter or documentation • Information packages • Policies and procedures • Meeting Minutes • Case notes • Website/Brochures <p>Protocols should include: information requests made in- person, by telephone, email, mail, through the Application Entity website, or by other means.</p>	<p>The Application Entity did not develop and implement protocols for responding to information requests made in-person, by telephone, email, mail, through the Application Entity website, or by other means, in a secure and confidential manner and as set out in a Ministry-approved service plan.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>21. Standard Information, Protocols for Provision</p> <p>The Application Entity shall: develop and implement protocols for the provision of standard information, as set out in a Ministry-approved service plan that includes requirements to: provide standard information in plain language, in hard copy (where applicable), by email or through the website, and by voicemail.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Protocols for responding to information requests Information packages Policies and procedures Meeting Minutes Website/Brochures Plain language guides Posters or public sign <p>Consider that the information is in plain language.</p>	<p>The Application Entity did not develop and implement protocols for the provision of standard information, as set out in a Ministry-approved service plan that included providing standard information in plain language, in hard copy (where applicable), by email or through the website, and by voicemail.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>22. Standard Information, Protocols for Review & Update</p> <p>The Application Entity shall: develop and implement protocols for the provision of standard information, as set out in a Ministry-approved service plan, that includes requirements to: review and update of standard information annually, and where information comes from an outside source (not directly from the Application Entity), put protocols in place to update information on a regular basis.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Documentation to confirm review and update of standard information annually, Protocols in place to update information on a regular basis. Information packages Policies and procedures Meeting Minutes Case notes Plain language guides Posters or public sign <p>Consider the dates of last updates.</p>	<p>The Application Entity did not develop and implement protocols for the provision of standard information, as set out in a Ministry-approved service plan, to review and update of standard information annually, and where information comes from an outside source (not directly from the Application Entity), put protocols in place to update information on a regular basis.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>23. Standard Information, Protocols for Revision Dates</p> <p>Application Entity shall: develop and implement protocols for the provision of standard information, as set out in a Ministry-approved service plan that includes requirements to: include clearly visible, effective and revision dates on all forms, protocols, and in published website content.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<p>To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner.</p>	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Documentation to include clearly visible, effective and revision dates on all forms, protocols, and in published website content. Website Plain language guides Posters or public sign 	<p>Application Entity did not develop and implement protocols for the provision of standard information, as set out in a Ministry-approved service plan to include clearly visible, effective and revision dates on all forms, protocols, and in published website content.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>24. Compliance/FLSA & Regulations</p> <p>The Application Entity shall: comply with all applicable legislation, which may include: the French Language Services Act, and its regulations.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Service Contract/Agreement Letter or documentation Information packages Policies and procedures Meeting Minutes Website/Brochures/ Plain language guides Posters or public sign <p>Materials and service made available in French.</p>	<p>The Application Entity did not comply with all applicable legislation, including, the French Language Services Act, and its regulations.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>25. Compliance/AODA & Regulations</p> <p>The Application Entity shall: comply with all applicable legislation, which may include: accessibility requirements in accordance with the Accessibility for Ontarians with Disabilities Act, 2005, and its regulations.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> DSCIS Service Contract/Agreement Letter or documentation Information packages Policies and procedures Meeting Minutes Website/Brochures/ Plain language guides Posters or public sign <p>Note: DSCIS does not provide evidence of compliance with AODA in other areas but that the system itself complies with AODA.</p>	<p>The Application Entity did not comply with all applicable legislation, including, accessibility requirements in accordance with the Accessibility for Ontarians with Disabilities Act, 2005, and its regulations.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>26. Compliance/Human Rights Code of Ontario</p> <p>The Application Entity shall: comply with all applicable legislation, which may include: the Human Rights Code in Ontario.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> DSCIS Service Contract/Agreement Letter or documentation Information packages Policies and procedures Meeting Minutes Website/Brochures/ Plain language guides Posters or public sign 	<p>The Application Entity did not comply with all applicable legislation, including, the Human Rights Code in Ontario.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>27. Compliance/MCSSA/Policy Directives</p> <p>The Application Entity shall: comply with all applicable legislation, which may include: the Ministry of Community and Social Services Act.</p> <p>Policy Directives for Application Entities: 1.0 Provisions of Information</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review Records and Documentation.</p> <p>Evidenced by:</p> <ul style="list-style-type: none"> DSCIS Service Contract/Agreement Notation in DSCIS Letter or documentation Information packages Policies and procedures Meeting Minutes Case notes Website/Brochures <p>Note: DSCIS does not provide evidence of compliance with AODA in other areas but that the system itself complies with MCSS Act.</p>	<p>The Application Entity did not comply with all applicable legislation, including, the Ministry of Community and Social Services Act.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>28. IN-PERSON information provision protocols/Assign knowledgeable staff</p> <p>The Application Entity shall include the following specific requirements for IN-PERSON information provision in its protocols: The Application Entity shall assign responsibility to knowledgeable staff to greet people, respond to in-person requests for information about adult developmental services and supports, and to refer people to additional sources of information and community-based resources as needed.</p> <p>(Policy Directives for Application Entities: 1.0 Provisions of Information)</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner 	<p>Review information protocols for in-person information provision to ensure specific requirements are included.</p>	<p>The IN-PERSON protocols did not include assigning responsibility to knowledgeable staff to greet people and respond to in-person requests for information about adult developmental services and supports, and to refer people to additional sources of information and community-based resources as needed.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>29. IN-PERSON information provision protocols/Application, prioritization, service connection, funding processes</p> <p>The Application Entity shall include the following specific requirements for IN-PERSON information provision in its protocols: provide information specific to the needs of each of the following groups, in a consistent manner to eligible applicants for adult developmental services and supports in accordance with the Act, and/or representatives of their choice, on the application, prioritization, service connection and funding processes, and relevant community-based services available in the community.</p> <p>(Policy Directives for Application Entities: 1.0 Provisions of Information)</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner 	<p>Review information protocols for in-person information provision to ensure specific requirements are included.</p> <p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • Notation in DSCIS • Letter or documentation • Information packages • Policies and procedures • Meeting Minutes • Case notes • Website/Brochures/ Plain language guides 	<p>The IN-PERSON protocols did not include providing information in a consistent manner to applicants and/or representatives on the application, prioritization, service connection, funding processes and/or community based services.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>30. IN-PERSON information provision protocols/Role of the Application Entity</p> <p>The Application Entity shall include the following specific requirements for IN-PERSON information provision in its protocols: provide information specific to the needs of each of the following groups, in a consistent manner to potential applicants, and/or representatives of their choice, on the role of the Application Entity, eligibility, the application process, and relevant community-based services available in the community.</p> <p>(Policy Directives for Application Entities: 1.0 Provisions of Information)</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner 	<p>Review information protocols for in-person information provision to ensure specific requirements are included.</p> <p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • Notation in DSCIS • Letter or documentation • Information packages • Policies and procedures • Meeting Minutes • Case notes • Website/Brochures/ Plain language guides 	<p>The IN-PERSON protocols did not include providing information in a consistent manner to potential applicants and/or representatives on the role of the Application Entity, eligibility, the application process or community based services available in the community.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>31. IN-PERSON information provision protocols/Outreach</p> <p>The Application Entity shall include the following specific requirements for IN-PERSON information provision in its protocols: The Application Entity shall provide outreach to the above information on an as needed basis, which may include information sessions held in-person, video-conferencing.</p> <p>(Policy Directives for Application Entities: 1.0 Provisions of Information)</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner 	<p>Review information protocols for in-person information provision to ensure specific requirements are included.</p> <p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • Notation in DSCIS • Letter or documentation • Information packages • Policies and procedures • Meeting Minutes • Case notes • Website/Brochures/ Plain language guides • Posters or public sign 	<p>The IN-PERSON protocols did not include providing outreach for information provisions as needed, including information sessions in person, video-conferencing.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>32. TELEPHONE information provisions/Local, toll-free number, TTY number</p> <p>The Application Entity shall include the following specific requirements for TELEPHONE information provision in its protocols: The Application Entity shall provide both a local and toll-free number, and a TTY number, that the public can use to request information.</p> <p>(Policy Directives for Application Entities: 1.0 Provisions of Information)</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner 	<p>Review information protocols for telephone information provision to ensure specific requirements are included.</p> <p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Information packages Website/Brochures/ Plain language guides Posters or public sign 	<p>The TELEPHONE protocols did not include providing both a local and toll-free number, and a TTY number for the public.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>33. TELEPHONE information provisions/Knowledgeable staff</p> <p>The Application Entity shall include the following specific requirements for TELEPHONE information provision in its protocols: The Application Entity shall have knowledgeable staff to answer the telephone to respond to requests for information about adult developmental services and supports, and to refer people to additional sources of information and community-based resources as needed.</p> <p>(Policy Directives for Application Entities: 1.0 Provisions of Information)</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner 	<p>Review information protocols for telephone information provision to ensure this specific requirement is included.</p>	<p>The TELEPHONE protocols did not include having knowledgeable staff responding to request for information by telephone to respond to requests for information about adult developmental services and supports, and to refer people to additional sources of information and community-based resources as needed.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>34. TELEPHONE information provisions/Alternate number</p> <p>The Application Entity shall include the following specific requirements for TELEPHONE information provision in its protocols: During business hours, when the telephone cannot be immediately answered, the Application Entity shall provide an alternate number for immediate assistance.</p> <p>(Policy Directives for Application Entities: 1.0 Provisions of Information)</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner 	<p>Review information protocols for telephone information provision to ensure this specific requirement is included.</p> <p>Contact DSO during business hours to confirm whether an alternate number for immediate assistance is provided.</p>	<p>The TELEPHONE protocols did not include providing an alternate number for immediate assistance during business hours, when the telephone cannot be immediately answered.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>35. TELEPHONE information provisions/Voice mail message</p> <p>The Application Entity shall include the following specific requirements for TELEPHONE information provision in its protocols: During business hours, when the telephone cannot be immediately answered, the Application Entity shall activate a standard pre-recorded voicemail message that provides the name of the Application Entity, hours of operation for that day, and if relevant, any walk-in hours.</p> <p>(Policy Directives for Application Entities: 1.0 Provisions of Information)</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner 	<p>Review information protocols for telephone information provision to ensure this specific requirement is included.</p> <p>Contact DSO during business hours to confirm standard pre-recorded voicemail message.</p>	<p>The TELEPHONE protocols did not include activating a standard pre-recorded voicemail during business hours when the telephone cannot be immediately answered.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>36. TELEPHONE information provisions/ Outside of business hours</p> <p>The Application Entity shall include the following specific requirements for TELEPHONE information provision in its protocols: Outside of business hours or during extended staff absences, the Application Entity shall activate a standard pre-recorded voicemail message that explains the basic functions of the Application Entity and provides telephone numbers for emergency services.</p> <p>(Policy Directives for Application Entities: 1.0 Provisions of Information)</p>	<p>To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner</p>	<p>Review information protocols for telephone information provision to ensure this specific requirement is included.</p> <p>Contact DSO outside of business hours to confirm</p>	<p>The TELEPHONE protocols did not include activating a standard pre-recorded voicemail message that explains the basic functions of the Application Entity and provides telephone emergency services for outside of business hours or during extended staff absences.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>37. EMAIL information provisions/Standard auto-reply</p> <p>The Application Entity shall include the following specific requirements for EMAIL information provision in its protocols: The Application Entity shall where resources do not allow for an immediate response to emails, create a standard auto-reply email that will tell the sender that his/her email has been received and that a response is being prepared.</p> <p>(Policy Directives for Application Entities: 1.0 Provisions of Information)</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner. 	<p>Review information protocols for email information provision to ensure this specific requirement is included.</p> <p>Send an email to confirm standard auto-reply email</p>	<p>The EMAIL protocols did not include creating a standard auto-reply email that tells the sender that his/her email has been received and that a response is being prepared.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>38. WEBSITE information provisions</p> <p>The Application Entity shall include the following specific requirements for WEBSITE information provision in its protocols: The Application Entity shall have its own website (i.e. URL) that will have the same branding as other Application Entities including common core information and language; clearly visible and complete contact information for all office locations within the region; hours of operation for directly responding to inquiries via telephone, on-line (e-mail) and in person; a link to the ministry's website, other Application Entities in the province websites and links to other relevant resources; protocols for service, accessibility and French language services; and protocols for responding to adults in urgent need of interim developmental support response (See Policy Directive 6 – Adults in Urgent Need of an Interim Developmental Support Response).</p> <p>(Policy Directives for Application Entities: 1.0 Provisions of Information)</p>	<ul style="list-style-type: none"> To ensure that Application Entities provide appropriate information and quality customer service to adults with a developmental disability, those who support them, and the general public in a provincially-consistent manner 	<p>Review information protocols for website information provision to ensure this specific requirement is included.</p> <p>Review DSOs website:</p> <p>Confirm:</p> <ul style="list-style-type: none"> The website has the same branding as other Application Entities Complete contact information for all office locations Hours of operation for responding to inquiries via telephone, on-line (email) and in person Link to ministry's website Other DSOs information Protocols for service French language services Responding to adults in urgent needs 	<p>The WEBSITE protocols did not include having the same branding as other Application Entities including common core information and language; clearly visible and complete contact information for all office locations within the region; hours of operation for directly responding to inquiries via telephone, on-line (e-mail) and in person; a link to the ministry's website, other Application Entities in the province websites and links to other relevant resources; protocols for service, accessibility and French language services; and protocols for responding to adults in urgent need of interim developmental support response.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>39. Abuse, Annual P & P Review</p> <p>Each application entity shall conduct a mandatory review of its policies and procedures on the prevention, identification and reporting of abuse annually and update the policies and procedures as determined by the review.</p> <p>Regulation 299/10, 30(2)(c)</p>	<ul style="list-style-type: none"> To ensure policies are reviewed annually to assess their effectiveness and updated as needed. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Revised drafts of the policies and procedures Meeting minutes noting discussion of the policies and procedures, the review, and revisions Performance appraisals 	<p>The application entity did not conduct a mandatory review of its policies and procedures on the prevention, identification and reporting of abuse annually and update the policies and procedures as determined by the review.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>40. Abuse, Police Reporting</p> <p>Where an application entity suspects any alleged, suspected or witnessed incidents of abuse of a person with a developmental disability may constitute a criminal offence, the application entity shall immediately report to the police the alleged, suspected or witnessed incident of abuse.</p> <p>Regulation 299/10, 30(4)(a)</p>	<ul style="list-style-type: none"> To ensure that each person is supported in a safe and respectful environment where abuse will not be tolerated. To ensure that all incidents of abuse and any suspicions of abuse that might constitute a criminal offence are reported immediately to the police so that any appropriate action may be taken. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> DSO Internal Incident Reports Ministry Occurrence Reports (if applicable per Occurrence Reporting Guidelines) Case records 	<p>Where the application entity suspected any alleged, suspected or witnessed incidents of abuse of a person with a developmental disability may constitute a criminal offence, the application entity did not immediately report to the police the alleged, suspected or witnessed incident of abuse.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>41. Abuse, Internal Investigation</p> <p>Where an application entity suspects any alleged, suspected or witnessed incidents of abuse of a person with a developmental disability may constitute a criminal offence, the application entity shall not initiate an internal investigation before the police have completed their investigation.</p> <p>Regulation 299/10, 30(4)(b)</p>	<ul style="list-style-type: none"> To ensure that the DSO refrains from interfering with any police investigation relating to any alleged, suspected or witnessed incidents of abuse of a person with a developmental disability that may constitute a criminal offence. To ensure that DSOs have considered and articulated procedures to respond to the disclosure of abuse, or suspected or witnessed abuse, including timing for any internal investigations. The procedure to be followed to deal with all abuse allegations. 	<p>Evidence that with any alleged, suspected or witnessed incidents of abuse of a person with a developmental disability that may constitute a criminal offence, the application entity did not initiate an internal investigation before the police completed their investigation.</p> <p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> DSO Internal Incident Reports Ministry Occurrence Reports (if applicable per Occurrence Reporting Guidelines) Case records Documentation of an internal investigation, conducted after a police investigation has been completed 	<p>Documentation indicates the application entity conducted an internal investigation before the police completed their investigation.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>42. Abuse, Zero Tolerance</p> <p>An application entity shall complete a review of its policies and procedures to promote zero tolerance of abuse of persons with developmental disabilities at least once a year.</p> <p>Regulation 299/10, 30(5)(a)</p>	<ul style="list-style-type: none"> To ensure that each person is supported in a safe and respectful environment where abuse will not be tolerated. To ensure policies are reviewed at least annually to assess their effectiveness and updated as needed. 	<p>Evidence that a review of policies and procedures to promote zero tolerance of abuse of persons with developmental disabilities has been completed at least once a year.</p> <p>Look for evidence of “zero tolerance for abuse” in all documentation.</p> <p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Annual review of P&Ps Meeting minutes Revision dates Revised P&Ps <p>P&Ps should promote a zero tolerance towards abuse.</p>	<p>Insufficient evidence confirming the mandatory annual review of the abuse policy to promote zero tolerance.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>43. Abuse, Changes</p> <p>An application entity shall assess whether changes to its policies and procedures may be necessary to prevent occurrences of abuse.</p> <p>Regulation 299/10, 30(5)(b)</p>	<ul style="list-style-type: none"> To ensure that each person is supported in a safe and respectful environment where abuse will not be tolerated. To ensure policies are reviewed as necessary to prevent future occurrences of abuse. 	<p>Evidence that assessment has been completed to determine whether changes to policies and procedures may be necessary to prevent occurrences of abuse.</p> <p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Assessments of abuse P&Ps Reports on abuse DSO Internal Incident Reports Ministry Occurrence Reports (if applicable per Occurrence Reporting Guidelines) Meeting minutes 	<p>Insufficient evidence confirming the agency assessed whether changes to their abuse policies were necessary to prevent abuse.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
44. Abuse, Implementation An application entity shall, promptly implement the changes that are determined to be necessary as a result of the review. Regulation 299/10, 30(5)(c)	<ul style="list-style-type: none"> To ensure that each person is supported in a safe and respectful environment where abuse will not be tolerated. To ensure that DSOs promptly implement changes as a result of their review to procedures to respond to the disclosure of abuse, or suspected or witnessed abuse. 	Evidence that necessary changes were promptly implemented as a result of the review. Review Records and Documentation. Evidence may include: <ul style="list-style-type: none"> Revision dates on P&Ps Revised P&Ps Revised staff training Meeting minutes 	Insufficient evidence confirming the agency implemented the necessary changes as determined from the review.	A letter and/or documentation confirming completion of corrective action.

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>45. Abuse, Written Record</p> <p>An application entity shall prepare a written record of its review of its policies and procedures to promote zero tolerance of abuse and of any changes to the policies and procedures that are determined to be necessary as a result of the evaluation.</p> <p>Regulation 299/10, 30(6)</p>	<ul style="list-style-type: none"> To ensure that each person is supported in a safe and respectful environment where abuse will not be tolerated. To ensure that DSOs have written evidence to reflect their review of policies and procedures, including documentation of any changes that resulted from the evaluation. To ensure policies are reviewed annually to assess their effectiveness and updated as needed. 	<p>Written record of review of policies and procedures to promote zero tolerance of abuse and of any changes to the policies and procedures that are determined to be necessary as a result of the review.</p> <p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Revision dates on P&Ps Revised P&Ps Revised staff training Meeting minutes <p>P&Ps must promote a zero tolerance towards abuse.</p>	<p>No evidence of a written record of the annual abuse policy review to promote zero tolerance.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>46. Abuse Notification, Consent</p> <p>The policies and procedures on notification shall require the application entity to obtain the consent of the person with a developmental disability before notifying others, if the person is capable of providing consent.</p> <p>Regulation 299/10, 31(2)</p>	<ul style="list-style-type: none"> To ensure DSOs recognize the importance of, and reflect in their policies and procedures, the requirement to respect personal autonomy by obtaining consent from persons with a developmental disability who are capable of providing consent before notifying others about abuse allegations or incidents. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> DSO Internal Incident Reports Ministry Occurrence Reports (if applicable per Occurrence Reporting Guidelines) Case records Meeting minutes 	<p>Insufficient evidence confirming the alleged victim's consent was obtained prior to notifying others.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>47. Abuse Prevention/ Reporting</p> <p>The Application Entity shall also comply with the policies and procedures set out in O. Reg. 299/10 under the Act on abuse prevention and reporting, and with the Ministry process for reporting serious occurrences when a report is received in this regard.</p> <p>Policy Directives for Application Entities: 7.0 Feedback Process</p>	<ul style="list-style-type: none"> To support the requirement in the Regulation on Quality Assurance Measures and act as a reminder that alleged, suspected or witnessed abuse must be reported to the ministry as a serious occurrence. To ensure that Application Entities have a provincially-consistent process in place to report serious occurrences 	<p>Review records and documentation to determine compliance with:</p> <ol style="list-style-type: none"> 1. P&P re: QAM 2. MCSS process for occurrence reporting. 3. A copy of the Serious Occurrence Report <p>This could include: internal incident reports and MCSS occurrence reports.</p>	<p>Insufficient evidence confirming the Application Entity complied with the policies and procedures set out in O. Reg. 299/10 under the Act on abuse prevention and reporting, and with the Ministry process for reporting serious occurrences when a report is received in this regard.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>48. Emergency Preparedness Plan, Inside</p> <p>Each application entity shall have an emergency preparedness plan to address: emergencies that may occur inside premises owned or operated by the application entity where persons with developmental disabilities are receiving services and supports from the application entity, examples of which include power outages, fire, flood, storm damage, pandemic and medical emergency.</p> <p>Regulation 299/10, 33(1)2</p>	<ul style="list-style-type: none"> To ensure that the application entity has considered different kinds of emergency situations, situations that are out of the ordinary, and articulated an appropriate means to respond. To ensure that application entity takes steps to promote and maintain a safe environment. To highlight that application entities must ensure that their premises meet all provincial fire and health and safety requirements. 	<p>Evidence of an emergency preparedness plan that addresses the following emergency situations; emergencies that may occur inside premises owned or operated by the application entity where persons with developmental disabilities are receiving services and supports from the agency, examples of which include power outages, fire, flood, storm damage, pandemic and medical emergency.</p> <p>Review Records and Documentation.</p> <p>Evidence could include:</p> <ul style="list-style-type: none"> Documented emergency preparedness plan. <p>Examples of which include power outages, fire, flood, storm damage, pandemic and medical emergency.</p>	<p>The application entity does not have an emergency preparedness plan to address; emergencies that may occur inside premises owned or operated by the application entity where persons with developmental disabilities are receiving services and supports from the application entity, examples of which include power outages, fire, flood, storm damage, pandemic and medical emergency.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

The following items are to be assessed prior to making a recommendation to a Director under the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008*.

Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>49. Continuity of Operation Plan</p> <p>Each application entity shall have a continuity of operation plan that ensures safety around entity owned or entity operated premises during a service disruption.</p> <p>Regulation 299/10, 33(1)(4)</p> <p>Note: We are not looking for any specific requirements in the plan but rather that there is a plan in place in event of service disruption (example: labour disruption, relocation due to fire etc.)</p>	<ul style="list-style-type: none"> To ensure that the application entity has considered different kinds of emergency situations, situations that are out of the ordinary, and articulated an appropriate means to respond. To ensure that application entity takes steps to promote and maintain a safe environment. To highlight that, application entities, must ensure that their premises meet all provincial fire and health and safety requirements. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Documented continuity of operations plan. <p>Plan should ensure safety around the operated premises during a service disruption.</p>	<p>There is no continuity of operation plan that ensures safety around entity owned or entity operated premises during a service disruption.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>50. Approved Fire Safety Plan, Document</p> <p>Upon the request of a Director, an application entity shall produce to the Director its approved fire safety plan where required under Ontario Regulation 213/07 (Fire Code) made under the Fire Protection and Prevention Act, 1997.</p> <p>Regulation 299/10, 33(2)</p>	<ul style="list-style-type: none"> To ensure that the application entity has considered different kinds of emergency situations, situations that are out of the ordinary, and articulated an appropriate means to respond. To ensure that application entity takes steps to promote and maintain a safe environment. To highlight that, application entities, must ensure that their premises meet all provincial fire and health and safety requirements. 	<p>Evidence of an approved fire safety plan <u>where required</u> under Ontario Regulation 213/07 (Fire Code) made under the Fire Protection and Prevention Act, 1997.</p> <p>Approval indicates sign off by local Chief Fire Official.</p>	<p>Insufficient evidence of an approved fire safety plan <u>where required</u> under Ontario Regulation 213/07 (Fire Code) made under the Fire Protection and Prevention Act, 1997.</p>	<p>Response and/or demonstrated action will be required with 24 hours of receipt of Letter of Non Compliance describing corrective measures and timelines to rectify the issue.</p>

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Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>51. Equipment Maintenance</p> <p>An application entity shall have policies and procedures regarding the maintenance of equipment on premises owned or operated by the entity and shall maintain the equipment as recommended by the manufacturer.</p> <p>Regulation 299/10, 33(3)</p>	<p>To ensure that application entities take all reasonable care to promote and maintain a safe environment.</p> <p>To ensure that equipment is maintained in good working order, as recommended by the manufacturer.</p> <p>To ensure entities are following their policies and procedures related to equipment maintenance.</p> <p>To ensure equipment is functioning efficiently and safely.</p>	<p>Inspection Certificates/Service Invoices/Billing Statement confirming regular maintenance of fire extinguishers, sprinkler and alarm systems, mechanical lifts and elevators</p> <p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> • Documentation for maintenance of equipment. • Maintenance logs/schedules. • Protocols recommended by the manufacturer. • Checklists 	<p>Insufficient evidence confirming equipment was maintained as per manufacturer's recommendations.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
52. Ministry Specified Information Technology The Application Entity shall: use ministry - mandated information technology for the collection, use and maintenance of information about people applying for ministry - funded developmental services and supports. (Policy Directives for Application Entities: 8.0 Ministry Reporting and Data Collection)	<ul style="list-style-type: none"> To ensure efficient and transparent communication between the ministry and the application entity and to ensure the collection, use and reporting of accurate, consistent, and timely data to inform community planning, ministry forecasting, performance measurement, and program and policy development. 	Review Records and Documentation. Evidence may include : <ul style="list-style-type: none"> Use of DSCIS re: creating Eligibility Cases, downloading documentation, referrals to Urgent Response, etc. Policies and Procedures Documented training Meeting minutes 	Insufficient evidence confirming the application entity used the ministry-mandated information technology for the collection, use and maintenance of information about people applying for ministry-funded developmental services and supports.	A letter and/or documentation confirming completion of corrective action.

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Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>53. Ministry Specified Information Technology/Established Procedures & Directives</p> <p>The Application Entity shall: follow procedures established for the ministry - mandated information technology and in the policy directive for Qualifications and Service Standards for Needs Assessment, to maintain the accuracy, consistency and timeliness of the information collected.</p> <p>Policy Directives for Application Entities: 8.0 (Ministry Reporting and Data Collection)</p>	<ul style="list-style-type: none"> To ensure efficient and transparent communication between the ministry and the application entity and to ensure the collection, use and reporting of accurate, consistent, and timely data to inform community planning, ministry forecasting, performance measurement, and program and policy development. 	<p>Review Records and Documentation.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> Use of DSCIS re: creating Eligibility Cases, downloading documentation, referrals to Urgent Response, etc. Policies and Procedures Protocols Documented training Meeting minutes 	<p>Insufficient evidence confirming the Application Entity followed procedures established for the ministry-mandated information technology and in the policy directive for Qualifications and Service Standards for Needs Assessment.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>

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Records and Documentation	Intent	Indicator	Observed Non-Compliance	Required for Compliance
<p>54. Summary Statistics/ Reports</p> <p>The Application Entity shall: when requested by the ministry, collect and report specific additional information that is not captured in ministry - mandated information technology.</p> <p>Policy Directives for Application Entities: 8.0 (Ministry Reporting and Data Collection)</p>	<ul style="list-style-type: none"> To ensure efficient and transparent communication between the ministry and the application entity and to ensure the collection, use and reporting of accurate, consistent, and timely data to inform community planning, ministry forecasting, performance measurement, and program and policy development. 	<p>Review Records and Documentation.</p> <p>DSO demonstrates data entry in required fields to meet quarterly reporting requirements.</p> <p>Evidence may include:</p> <ul style="list-style-type: none"> DSCIS Quarterly Reports Documentation of reports 	<p>Insufficient evidence confirming the application entity collected and reported specific additional information not captured in ministry-mandated information technology upon request.</p>	<p>A letter and/or documentation confirming completion of corrective action.</p>