

## PRE-OCCUPANCY MEETING CHECKLIST

The purpose of the Pre-Occupancy Meeting is to provide information about the Assisted Living program and site-specific details to the future tenant.

### Applicant has been informed to bring:

<input type="checkbox"/>	Most recent income tax information (Notice of Assessment)	<input type="checkbox"/>	Completed Medical Orders for Scope of Treatment (MOST) Form
<input type="checkbox"/>	Void cheque for automatic payment of rent	<input type="checkbox"/>	Copy of Power of Attorney (POA) or Representation Agreement
<input type="checkbox"/>	Damage deposit	<input type="checkbox"/>	Current list of medications (including flare-up plan for COPD clients, if available)

### The Assisted Living Fraser Health (FH) Professional should come to the meeting with:

<input type="checkbox"/>	A copy of the client's RAI assessment	<input type="checkbox"/>	Current Financial
<input type="checkbox"/>	Blank AL Service Plan or Tablet		

### The Meeting

**AL Rate:**

	Checklist	Notes for Discussion
<input type="checkbox"/>	<b>ILBC/BC Housing</b>	<ul style="list-style-type: none"> <li>ILBC partnership described</li> <li><b>ILBC Form</b> completed</li> <li>Rate setting in AL: responsibility of Fraser Health not AL Provider; must file income tax to be eligible for subsidized rate – maximum rate if taxes not filed</li> <li>Details of what is covered in AL rate, additional costs (e.g. cable, parking, storage fees, air conditioner)</li> <li>Hydro surcharge explained</li> </ul>
<input type="checkbox"/>	<b>Office of the Assisted Living Registrar</b>	<ul style="list-style-type: none"> <li>Regulatory model explained – registered vs licensed</li> <li>Role of OALR</li> <li>OALR Complaint Brochure given to tenant and complaint process explained</li> </ul>
<input type="checkbox"/>	<b>CPR in AL</b>	<ul style="list-style-type: none"> <li>if staff not trained in CPR, 911 will be called</li> <li>MOST</li> </ul>
<input type="checkbox"/>	<b>Support Plan/Care Plan</b>	<ul style="list-style-type: none"> <li><b>AL Service Plan</b> in GoldCare or Home Support Plan in Paris completed</li> <li>Health Improvement Plan completed</li> <li>AL Service Authorization in Paris completed</li> </ul>
<input type="checkbox"/>	<b>AL Handbook</b>	<ul style="list-style-type: none"> <li>As client's care needs change, AL FH Professional will work with client and family to obtain necessary equipment. Notify of possible additional costs and responsibilities (e.g. hospital bed)</li> <li>Exit criteria covered, focusing on when a client's care needs would necessitate a move to a higher level of care</li> <li>Charging process when move to Long-Term Care is required – MOH policy that client may only be charged for one service at a time</li> <li>Temporary Absence Policy</li> <li>If client is renting, provide SAFER cancellation form and send fax</li> </ul>
<input type="checkbox"/>	<b>AL FH Professional</b>	<ul style="list-style-type: none"> <li>If applicable, informed of unfunded spouse Policy- handout given to couple and family</li> <li>Reminder to cancel home support/ Day Program for Older Adults – notify HH CHN</li> <li>Back at the office: Copy of AL Service Plan / Care Plan with Funding Allocation Level to Provider</li> <li>Send Paris notification to Access, Care and Transitions Team (ACT) re: move-in date</li> </ul>
<input type="checkbox"/>	<b>AL Provider</b>	<ul style="list-style-type: none"> <li>Insurance requirement for AL suite</li> <li>FH Brochure given as part of move-in package</li> <li>Applicant informed that move may happen in two weeks after pre-occupancy meeting</li> <li><b>Tenancy Agreement</b> signed</li> </ul>