



**Canadian
Accreditation
Council**

**Conseil
d'accréditation
canadien**

PERSON SERVED FILE CHECKLIST

2023 Edition of Standards
417 Treatment Centre Program
Created Jul 19/2023

Person Served Information			
	Name	Program	Date of Intake
1			
2			
3			
4			
5			

Please note, the tools have been designed to provide a guide for the review team in finding documentation, with information being indicated in the most likely place that it will be found and duplication being minimized. In the standards it is noted that many items should be demonstrated as 'Onsite Observations', which has been left to the organization to determine the best place to provide the information. In the tools, often information is kept within the files and is included in those checklists, but if it is not demonstrated there, it will be requested to be seen where it is kept by the organization.

For organizations using this tool to prepare for your Onsite Survey, please use this in conjunction with the Standards and Indicators to ensure that you have demonstrated all information that has been requested appropriately.

For the review team using this tool, please ensure that you are requesting all information prior to marking a non-compliant as the information may be presented in another location.

Key for Reviewers:

C	NC	N/A
Compliant – the evidence was found and it met the standard's criteria.	Non-Compliant - the evidence was not found, or found but does not adequately meet the standard's criteria.	Non Applicable – the program in question is not required to provide evidence for a given standard as the standard has no bearing on operations.

Patterns of Practice	
Historical Practice	Practice with evidence to show an established pattern of consistent practice since the last review date.
Established Practice	Practice with evidence to show a pattern of consistent practice for at least 6 months.
Current Practice	Practice with evidence to show a pattern of consistent practice for less than 6 months.
Demonstrated Practice	Practice with inconsistent evidence to support full implementation of practice. Able to demonstrate practice but not able to provide evidence to show consistent practice.
Incongruent Practice	Practice observed or recorded is not aligned with policies.
No Practice	Practice not observed or recorded in the delivery of service.

Standards	Person Served 1	Person Served 2	Person Served 3	Person Served 4	Person Served 5
SERVICE DELIVERY					
417.2 Intake and Admission					
417.2.4 Initial Meeting					
Documentation of an initial meeting between person served and staff involved with intake within 10 days of the person served entering the program					
417.2.5 Admission Agreement					
Consent for services on file					
417.3 Consent for Services					
417.3.1 Information of Services					
Evidence of the provision of an information handbook					
417.3.2 Service Coordination					
Evidence of coordination of services					
417.3.3 Program Expectations					
Review – documentation acknowledging understanding or a declaration from staff that person served has been informed and refused to provide acknowledgment.					
417.3.4 Authorization Required					
Review – signed consent(s) for service and others as appropriate					



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417 Treatment Centre Program

Standards	Person Served 1	Person Served 2	Person Served 3	Person Served 4	Person Served 5
417.3.5 Informed Consent for Services					
Evidence that appropriate consent has been sought					
417.3.6 Refusal to Provide Authorization or Consent					
Documented evidence of any refusal of consent or authorization					
417.3.7 Release of Information					
Evidence of the implementation of appropriate release of information procedures.					
417.4 File Management					
417.4.1 Person Served Files					
Evidence that appropriate files are maintained					
417.4.2 Group Activity Record					
Evidence that appropriate files are maintained					
417.4.3 Individual File – Contents					
Contents of the file will include: 1. Biographical and other descriptive information necessary for the provision of services, such as:					

Standards	Person Served 1	Person Served 2	Person Served 3	Person Served 4	Person Served 5
a. Full name of the person served	1a. _____	1a. _____	1a. _____	1a. _____	1a. _____
b. Contact information for a family representative or emergency contact	1b. _____	1b. _____	1b. _____	1b. _____	1b. _____
c. Special needs	1c. _____	1c. _____	1c. _____	1c. _____	1c. _____
2. Record of service	2. _____	2. _____	2. _____	2. _____	2. _____
3. Progress notes, observations, and case notes	3. _____	3. _____	3. _____	3. _____	3. _____
4. Other documents as required	4. _____	4. _____	4. _____	4. _____	4. _____
417.5 Person Served Planning					
417.5.1 Measurement Tool					
Evidence of use of the tool(s) in the collection of outcome data					
417.5.2 Service Delivery Planning Measurements					
Evidence of implementation of Service Delivery Planning assessment and measurements					
417.5.3 Person Served Planning for Groups – Components					

Standards	Person Served 1	Person Served 2	Person Served 3	Person Served 4	Person Served 5
Evidence of the implementation of appropriate group Service Delivery Planning assessment and measurements					
417.5.4 Individual Care Plan Components					
Evidence of an integrated and complete care plan for each person served: - statement that identifies the reason for involvement - goals to be achieved - tasks/activities/strategies required to meet the identified goals - measure of success used to determine the progress made towards goal achievement - timeline for review indication of re-informing of rights					
417.5.5 Areas to Address – Service Delivery Planning					
Individual care plans identify: - Issues to be addressed - Individual strengths and assets that can be developed or supported - Services to be provided and by whom - Strategies to influence behaviour and/or restrictive procedure plan (if required) - Connections to the community - Progress made towards goal attainment Future plans					
417.5.6 Involvement with Service Delivery Planning					
Evidence of implementation of developed individual person served plans					

Standards	Person Served 1	Person Served 2	Person Served 3	Person Served 4	Person Served 5
417.5.7 Timelines for Review of Care Plans					
Evidence of review of care plans within appropriate timelines.					
45 days – Initial (or program specific as per standard) Timelines for review thereafter.					
Rationale on plans that over 3 months in duration. Proof of supervisor and/or service team's approval for extended timelines.					
417.5.10 Pre-to-Post System					
Monitoring the goals of the persons served with a pre-to-post system and, where feasible, follow-up measurements					
417.6 Transition from Services					
417.6.1 Transition Plan					
Evidence of a transition plan in place prior to the termination of services					
417.6.2 Supports During Transition					
Evidence of support in place for persons served during a transition from the current program					
417.6.3 Unplanned or Unanticipated Exit from the Program					
Evidence of procedures to deal with unplanned or unanticipated discharge					

 Standards Canadian Council Accreditation / Conseil d'accréditation	Person Served 1	Person Served 2	Person Served 3	Person Served 4	Person Served 5	PERSON SERVED FILE CHECKLIST 417 Treatment Centre Program
417.6.4 Follow-Up Involvement						
Evidence of procedures for the involvement the program with persons served or their family after the termination of services						
PERSON SERVED						
417.7 Support						
417.7.1 Orientation to Program Supports						
Evidence of supports provided to the persons served						
417.7.2 Parental/Family/Guardian Access to Person Served						
Evidence of granting appropriate access to person served						

Standards	Person Served 1	Person Served 2	Person Served 3	Person Served 4	Person Served 5
417.8 Rights and Individual Choice					
417.8.1 Informed of Rights					
Evidence of persons served and their legal representatives being provided with a written copy of their rights					
417.8.2 Re-Informed of Rights					
Demonstration of regular re-informing of persons served's rights via					
1. Documented review of rights as part of family conferencing or regular Service Delivery Planning meetings	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____
2. Documented review following relevant, significant or critical incidents					
417.8.4 Conflict Resolution and Grievance Procedures – Person Served					
Evidence that issues raised by persons served or their legal representatives are investigated, responded to, and that outcomes are documented					
417.8.6 Staff Responsibility – Advocacy					
Evidence that staff advocate on behalf of persons served					

Standards	Person Served 1	Person Served 2	Person Served 3	Person Served 4	Person Served 5
417.8.8 Self-Determination					
Evidence of recognition and support persons served's decision-making authority and capacity					
417.8.9 Support of Daily Decisions					
Evidence that persons served are involved and supported in the day-to-day decision-making process, where possible					
417.8.10 Interests/Hobbies					
Evidence of support for persons served pursuing personal interests and hobbies					
417.8.15 Cultural Connection					
Documented evidence of the provision of connections to a Cultural Resource Person					
417.8.16 Person Served Involvement with the Community					
Evidence of support for persons served's involvement in the community					
417.8.17 Managed Risk Plan					
Evidence of accommodating persons served's personal life choices, where possible					

Standards	Person Served 1	Person Served 2	Person Served 3	Person Served 4	Person Served 5
417.9 Financial Management – Person Served					
417.9.1 Fees Schedule					
Evidence of a written schedule of fees for programs that charge fees directly to the person served or legal representative					
417.9.2 Restitution by Person Served					
Evidence that restitution is implemented according to policy and procedures					
417.9.3 Financial System for Person Served					
Evidence of a financial system in place for personal funds held on behalf of persons served					
SAFETY					
417.15 Management of Risk					
417.15.5 Self–Harm Response					
Review of incident reports					
417.15.6 Suicide Response					
Review of incident reports					

Standards	Person Served 1	Person Served 2	Person Served 3	Person Served 4	Person Served 5
417.16 Facility Safety Requirements					
417.16.7 Monitoring Equipment					
Review file for documentation or consent for recorded monitoring (stored for more than 72 hours)					
417.19 Restrictive Procedures and Interventions					
417.19.1 Restrictive Procedures					
Evidence of appropriate use and documentation of restrictive procedures					
417.19.2 Restrictive Procedures Plan					
Evidence of a documented restrictive procedures plan					
417.19.3 Isolation and Seclusion					
Evidence of appropriate use and documentation of isolation and seclusion					
417.19.4 Least Restraint					
Evidence that appropriate least restraint are documented and used (if restraints are used in the program)					

Standards	Person Served 1	Person Served 2	Person Served 3	Person Served 4	Person Served 5
417.19.5 Use of Restraint					
Evidence that restraints are documented and used appropriately (if restraints are used in the program)					
417.20 Reportable Incidents					
417.20.2 Documentation Required - Reportable Incidents					
Review of Incident Reports – reports are complete: 1. Required information 2. Follow-up identified (debriefing, informed of rights, referrals, etc.) 3. Reviewed by Supervisor 4. Reported within Timelines					
HEALTH					
417.21 Health Services					
417.21.1 Medication Examination					
Documentation of medical examination within 10 working days of admission (if not examined within the last year) and at least annually after					
417.21.2 Dental Examination					

Documentation of					
1. Efforts made to support persons served in being examined by a dentist if arrangements have not been made within 2 months of admission	1. _____	1. _____	1. _____	1. _____	1. _____
2. Support provided to persons served for making appointments at least once every 2 years	2. _____	2. _____	2. _____	2. _____	2. _____
417.21.3 Optical Examination					
Documentation that for persons served:					
1. Efforts made to support persons serve d's optical examination within 2 months of admission (if not examined within the last year),	1. _____	1. _____	1. _____	1. _____	1. _____
2. Have access to optician/ophthalmologist services on an as-needed basis,	2. _____	2. _____	2. _____	2. _____	2. _____
And are supported for the arrangement of examinations at least once every year after	3. _____	3. _____	3. _____	3. _____	3. _____
417.23 Medication and Health Equipment					
417.23.5 Health or Adaptive Equipment					
Review for consent and prior training (if required)					
Person Served 1	Person Served 2	Person Served 3	Person Served 4	Person Served 5	

K 2 r C 6 r 6 r t S t a r C a I C S					
	A. INDIGENOUS OR CULTURALLY SPECIFIC PROGRAMS				
A - 1 . 4 N 6 a					

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Y E V i c e n c e c f c a n e p l a n n i n g c n t n a c k i n g c f					
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a c c e s s t o r y					
	B. ADDICTION PROGRAMS				
	No File review				
	C. SPECIALIZED NEEDS PROGRAMS				
	No File review				
D - 1 . 8 S e r v i c e					
	D. INTENSIVE TREATMENT PROGRAMS				

T e a r F e v i e w C a r e P l a n r i n g L S e r v i c e t e a r i					
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I c a n a d i a n a c c r e d i t a t i o n c o u n c i l o f a c c r e d i t a t i o n					
E. MENTAL HEALTH PROGRAMS					
No File review					