



To: General Purposes Committee **Date:** February 7, 2002
From: Terry Crowe **File:** 0100-20-GHOM1-01
Manager, Policy Planning
Re: **RICHMOND GROUP HOME TASK FORCE FINAL REPORT AND
RECOMMENDATIONS – STAFF REFERRAL**

Staff Recommendation

That:

1. The October 31, 2001 Richmond Group Home Task Force Final Report and Recommendations be approved.
2. Staff be directed to finalize the proposed Protocol Agreement with the Richmond Health Services.
3. A two year monitoring period be established to allow the City, Richmond Health Services and community to determine the feasibility and applicability of the Task Force recommendations in the management of group home proposals.

Terry Crowe
Manager, Policy Planning

Att. 6

FOR ORIGINATING DIVISION USE ONLY
CONCURRENCE OF GENERAL MANAGER

Staff Report

Origin

On November 19, 2001, the General Purposes Committee received the Group Home Task Force report, entitled "Final Report and Recommendations" (**Attachment 1**) for information, and referred it to staff for review and to report to the General Purposes Committee, on the following:

- (a) *respond to the question about whether public hearings, with or without a rezoning, could be held for all drug and alcohol group home applications;*
- (b) *consider the holding of a formal neighbourhood meeting in the Oaks and Odlin Road/No. 4 Road areas, and to request the Group Home Task Force to explain their findings to the residents attending this meeting;*
- (c) *report on the process to be followed upon receipt of a residential group home facility application by the City, based on the recommendations proposed by the Group Home Task Force, and specifically, the action which would be undertaken by the City and by other governing bodies; also, to provide timeliness as to when the recommendations of the Group Home Task Force would be implemented;*
- (d) *in addition to undertaking the analysis on the process to be followed, report on the proposed protocol agreement between Richmond Health Services and the City;*
- (e) *examine the location issue from a 'needs' point of a view, as different types of group homes may have different needs;*
- (f) *provide an analysis of the difference between a 'hearing in public' and a formal public hearing;*
- (g) *report on the feasibility of allowing facility care operators to rent buildings for proposed group homes with an option to purchase after six months, as currently permitted under the Community Care Facilities Act, and*
- (h) *report on the feasibility of separating those group home facilities with predominately adult clients by establishing different criteria in connection with the location of these facilities in relation to neighbourhood amenities.*

The purpose of this report is to respond to Council's referral questions.

Findings of Fact

- A) Task Force Final Report Final Report and Recommendations
Staff have reviewed the Task Force Final Report and find that all recommendations can be supported and implemented in partnership with the Richmond Health Services. The Task Force report improves public education, consultation and input into the management of new group home proposals.

B) Public Hearing With or Without Rezoning

Public hearings are mandated to the local government by the Local Government Act, and are only to be used when the local government considers and/or adopts an official community plan bylaw or a zoning bylaw. If there is no bylaw to be considered, then a public hearing may not be used.

Alternatively, Council on non-bylaw matters can hold a public information meeting.

Drug and Alcohol Recovery House Regulations Removed

On December 10, 2001, the Ministry of Health Services announced that supportive recovery residences, which provide room and board and lay counselling to people dealing with drug and alcohol additions, will no longer be required to comply with the Community Care Facility Act starting December 12, 2001. The Ministry announcement added that concerns about room-and-board businesses will continue to be dealt with at a municipal level through zoning and community plans.

Medical health officers will also retain the authority to inspect a facility to determine if it provides a level of care that requires licensing under the Community Care Facility Act. **Attachment 2** presents outlines the conditions to determine whether a group home is licensed or not.

Under the Drug and Alcohol Recovery Home Regulation section, there is a statement that Richmond Health Services and Turning Point Group Home will entertain discussions on whether the recovery home will continue to be licensed. Though on the surface, this may be an accurate statement, it leaves the impression that Turning Point may have the option of determining to be licensed or not. The discussion will center on whether or not Turning Point provides services such that they need to be licensable and not whether Turning Point has a choice in the matter.

About what the future holds for numbers of drug and alcohol facilities, Richmond Health Services has no idea how many will be licensed, but that they are not aware of any pending applications.

C) Formal Neighbourhood Meeting in the Oaks and Odlin Road/No. 4 Road Areas

As part of the process for the preparation of the "Group Task Force Report and Recommendations", a public consultation meeting was held September 27, 2001 at the East Richmond Community Hall. Approximately, 160 local residents attended the meeting, with the majority supporting the establishment of a zoning bylaw for drug and alcohol group homes.

Therefore, staff believes that another public information meeting in the area is not warranted.

For Council's information, the residents who attended the other public consultation meetings (e.g. September 5th – Hamilton; September 11th – City Hall; September 20th - West Richmond; and September 29th – South Arm) indicated support for not pursuing a zoning bylaw for any group home facilities (7 to 10 persons in care).

- D) Residential Group Home Facility Application Process (based on the Group Home Task Force Report Recommendations)

Attachment 3 presents the typical process for reviewing a 7 to 10 persons in care group home application.

- E) Draft Protocol Agreement

Attachment 4 presents the proposed Protocol Agreement between the City and Richmond Health Services.

- F) Locational Issue Re. Different Types of Group Homes

Reviewing the various municipal group home management approaches utilized in Greater Vancouver, it has become evident that each municipality has set similar locational requirements for all group homes within their jurisdictions, whether the group homes are for the mentally challenged, children, continuing care or drug and alcohol. These municipalities have decided to institute these locational requirements to ensure that all group home applications are considered similarly, and no discriminatory conditions are imposed.

Burnaby, Port Coquitlam, New Westminister, Vancouver and Surrey have locational guidelines, as follows:

- New Westminister - on a case by case basis (i.e. zoning).
- Burnaby - minimum 200m from existing group home.
- Port Coquitlam - 300m from an existing group home.
- Vancouver - minimum 200m between other group homes
- Surrey - along arterial roads and a minimum 600m from schools, parks, childcare facilities and other group houses.

The Task Force Final Report and recommendations propose that new 7 to 10 persons in care group homes be located a minimum 200m from other Residential Care Home or Residential Care Facility.

Council may wish to add:

- A 200-m requirement from schools and parks, and/or
- Limit future group homes to be located along a major arterial route.

- G) Feasibility of Renting Buildings for Proposed Group Homes (with an option to purchase)

The Community Care Facility Act does not refer to group home operators renting buildings for a period of six months with an option to purchase.

- H) Feasibility of Separating Group Home Facilities with Adult Clients

The Richmond Health Services would not support any initiative to separate group home facilities with predominately adult clients by establishing different criteria in connection

with the location of these facilities in relation to neighbourhood amenities. They believe that this requirement would be discriminatory and not warranted.

I) Options to Manage Group Home Proposals

Attachment 5 presents three options to manage group home proposals, and acknowledges how each management step would occur.

The attachment shows how, with approval of the Task Force Recommendations, all licensed group homes are managed in Richmond.

Unlicensed group homes are permitted in all residential homes in the City. The unlicensed homes usually house six or less persons in care, and will require a building permit if new construction or renovations are required.

J) Current Policy Framework and Regulations for Group Homes

Attachment 6 provides an overview of the current policy framework and regulations for group homes in Richmond.

Staff Recommendation

Staff recommend that:

1. Council approve the recommendations as presented by the Group Home Task Force.
2. Staff be directed to finalize the proposed Protocol Agreement with the Richmond Health Services.
3. A two-year monitoring period be established to allow the City, Richmond Health Services and community to determine the feasibility and applicability of the Task Force recommendations in the management of group home proposals.

As well, by that time, the Province's Community Charter is expected to be enacted, and staff will have had sufficient time to fully review and understand the legislative implications and options available to the City of Richmond. After that period, staff will report to Council on findings of the two year monitoring period and any necessary improvements.

Richmond Health Services staff support the recommendations presented in this report.

Financial Impact

Not applicable.

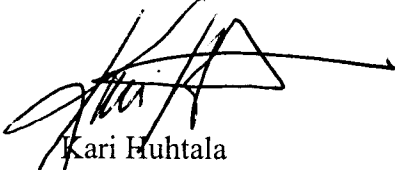
Conclusion

The Group Home Task Force Final Report and Recommendations present a "made in Richmond" approach to address resident issues and concerns on group home proposals. The recommendations are consistent with the City's vision and history, and supportive of community

February 7, 2002

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consultation, a clear definition of stakeholder roles, and harmony within the City's multicultural community.



Kari Huhtala
Senior Planner

KEH:cas



City of Richmond

6911 No. 3 Road, Richmond, BC V6Y 2C1
Telephone (604) 276-4000
www.city.richmond.bc.ca

October 31, 2001
File: 0100-20-GHOM1-01

Mayor Brodie and Members of Council
City of Richmond
6911 No. 3 Road
Richmond, BC V6Y 2C1

Dear Mayor Brodie and Members of Council:

Re: Group Home Task Force Final Report and Recommendations

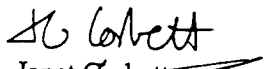
We are very pleased to submit our Final Report and Recommendations for your consideration.

We would like to thank you for the confidence you placed in us to review the group home issue and for providing us with the necessary time and funding to complete our work.

This was not an easy process for our Task Force. In many ways Task Force membership reflected the opposing views about group homes in our community. However, during this process, we developed a sense of trust and appreciation for the opinions each of us held and we are proud of the consensus and agreement we reached. We are encouraged to know that issues of this type can be addressed when there is a willingness to listen to all sides, to share perspectives, and to work cooperatively towards resolution.


Yours truly,

Members of the Group Home Task Force


Janet Corbett

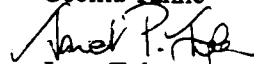
Alexander Kostjuk

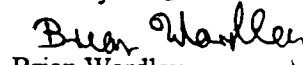

Kelly Lam


Everett Mackenzie


Brenda Reynolds


Cecilia Tanne


Janet Tyler


Brian Wardley

John Wong


112 Yisong Yu



October 31, 2001

Final Report and Recommendations

City of Richmond Group Home Task Force

A. Purpose

The Group Home Task Force, a 10-member working group, was formed by a Council resolution on March 12, 2001 and held its first meeting on May 8, 2001.

This report presents the Task Force's recommended policy for new licensed group homes with 7-10 persons in care.

B. Summary

The Group Home Task Force recommends a comprehensive policy, unique to Richmond, and designed to address issues and concerns raised by all citizens. Recommendations for the policy are consistent with the City's vision and history, and supportive of community consultation, clear definition of stakeholder roles, and harmony within the City's multicultural community.

Task Force recommendations include:

- *Adding the term "Residential Care Facility" to the Zoning Bylaw and ensuring that a location criterion for Residential Care Facilities is applied;*
- *Implementing a neighbourhood information and notification process, and consolidating the process with a Protocol Agreement between the City of Richmond and Richmond Health Services. The process includes the City soliciting comments from neighbours within a five-house radius of a proposed Residential Care Facility, and conveying those comments to Richmond Health Services for review with the Residential Care Facility operating team. The process also includes Richmond Health Services issuing a 1-year interim permit to operate a Residential Care Facility and the City conducting*

a second neighbourhood notification and consultation process prior to the expiry of the interim permit;

- *Designating a City staff person to manage the process of establishing Residential Care Facilities;*
- *Establishing an Advisory Committee to oversee the implementation of recommendations, and to monitor ongoing issues, as required;*
- *Providing ongoing information about Residential Care Facilities to Richmond residents through a revised "Group Homes in Richmond" publication;*
- *Establishing a Cultural Relations Committee to promote harmony within the City's multicultural community.*

C. Process Followed by the Task Force

The Group Home Task Force retained the services of two consultant teams, one to provide overall support, and one to act as media liaison.

The Task Force met 26 times during the six month process. Highlights of the process followed by the Task Force include:

- *Regular formal meetings, open to the public, where information was gathered and presentations were provided by group home operators and residents, representatives of Richmond Health Services, social planners, a member of the recovery community and neighbours of the Turning Point Recovery Home;*
- *Development of the "Group Homes in Richmond" publication to help inform the community about different aspects of group homes;*

Group Home Task Force:

Janet Corbett
 Alexander Kostjuk
 Kelly Lam
 Everett Mackenzie
 Brenda Reynolds
 Cecilia Tanne
 Janet Tyler
 Brian Wardley
 John Wong
 Yisong Yu

- Public consultation meetings where an overview of information learned was presented and members of the public were invited to provide input;
- A series of informal Task Force workshops to develop the Final Report and Recommendations;
- Presentation of the Final Report and Recommendations to Council.

D. Background to the Recommendations

D.1. Support for the City Vision and History

The Group Home Task Force recommendations are consistent with:

- The City of Richmond vision identified in the Official Community Plan (page 3), that “the City of Richmond be the most appealing, liveable and well-managed community in Canada”;
- The City of Richmond tradition of inclusiveness and history of support for those with special needs.

D.2. Guiding Principles

The Group Home Task Force recommendations are consistent with the following guiding principles:

- Communication and consultation with the community on issues of concern to citizens is an important requirement of a “well-managed” City;
- A “well-managed” City is one where the responsibilities of the stakeholders, including the City, the community or neighbourhoods, and others who may be involved (in this case Richmond Health Services) are clearly defined;
- Although Richmond’s multicultural makeup is one of its strengths, ongoing efforts must be made by the City to ensure harmony within the community.

E. Recommendations

E.1. Zoning Bylaw

The Group Home Task Force recommends:

That the term “Residential Care Facility” be added to the Zoning Bylaw and defined as a licensed group home for 7-10 persons in care.

That Residential Care Facilities be allowed as permitted uses in all zones where residential uses are permitted, and that they be required to be located a minimum of 200 meters, lot to lot, from another Residential Care Home or Residential Care Facility.

E.2. City Process

The Group Home Task Force recommends:

That the following process be implemented by the City upon notification by Richmond Health Services that an application for a Residential Care Facility has been received:

City reviews proposed building for fire and health requirements, and location criterion as identified in the Zoning Bylaw.

City notifies neighbours within a five-house radius of the proposed Residential Care Facility, in writing, that an application for a Residential Care Facility has been received, and invites neighbour comments. Notification to also include:

- Invitation to an informal neighbourhood meeting, hosted by City staff and to include representatives from Richmond Health Services and appropriate Residential Care Facility operators. The purpose of the neighbourhood meeting is to provide information to area residents and to address possible concerns;
- Name and contact information for a designated member of the Residential Care Facility operating team;
- Fact Sheet about the Residential Care Facility with information about number of residents, type of facility and expected resident turnover, number of staff, level of supervision, hours of operation, referral process, funding, expected building alterations, parking provisions, and information related to any other expected physical changes or provisions to the property;
- An updated copy of the publication “Group Homes in Richmond”.

City conveys neighbour comments to Richmond Health Services for information and review with Residential Care Facility operating team.

Richmond Health Services may issue a 1-year interim permit to operate a Residential Care Facility.

Six weeks prior to expiry of the 1-year interim permit, City contacts neighbours within a five-house radius of the Residential Care Facility, in writing, for additional comments and feedback related to the operation of the Residential Care Facility. City may also wish to host an additional (optional) neighbourhood meeting to address any issues and concerns.

City conveys neighbour comments to Richmond Health Services for information and review with Residential Care Facility operating team.

Richmond Health Services may issue a full Community Care Facilities License to operate a Residential Care Facility.

In the event that issues and concerns emerge during the interim period and beyond, City may wish to establish a working group, with membership to include a City staff member, a representative of Richmond Health Services, and an area resident(s) to address issues of concern.

E.3. Protocol Agreement

The Group Home Task Force recommends:
That a Protocol Agreement between the City of Richmond and Richmond Health Services be prepared to formalize the process for establishing a Residential Care Facility as identified above.

That the specific responsibilities of the City of Richmond and Richmond Health Services, and the relationship between them, be defined.

E.4. Designated City Staff Person

The Group Home Task Force recommends:
That a City of Richmond staff person be designated to manage the process of establishing Residential Care Facilities and to serve as a point of contact for Residential Care Facility operators, Richmond Health Services, and members of the public.

E.5. Advisory Committee

The Group Home Task Force recommends:

That a Residential Care Facilities Advisory Committee be established to (1) oversee the implementation of the recommendations in this report, and (2) advise on issues related to Residential Care Facilities in Richmond, as required. Recommended membership on the Committee to include one representative of City Council, the designated City staff person, one operator of a Residential Care Facility, one representative of Richmond Health Services, and selected representatives of the Group Home Task Force.

E.6. Ongoing Information

The Group Home Task Force recommends:

That the "Group Homes in Richmond" publication (September 2001) be revised and made available to Richmond citizens as an information document.

E.7. Cultural Relations

The Group Home Task Force recommends:

That a Cultural Relations Advisory Committee be established to assist with ongoing efforts to promote understanding and harmony among the citizens of Richmond.

F. Acknowledgements

The Group Home Task Force would like to thank the following:

- City of Richmond Mayor and Council for the opportunity to participate in this process and for providing the necessary time and funding to complete the work;
- Richmond citizens for attending meetings and for their suggestions and submissions;
- Invited speakers at Task Force meetings for providing information and perspective;
- City of Richmond staff members for providing expertise and support;
- Richmond Health Services for providing information and feedback;
- Don Cameron Associates for providing administrative support, facilitation, writing and translation services;
- Chinese Informedia Consulting Group Inc. for providing media liaison services.

Acute Treatment
The Richmond Hospital

Community Care
Long Term Care
Home Care
Minor Residence
Richmond Lions Manor

Mental Health
Child and Youth Services
Adult/Older Adult Services

Population Health
Environmental Health
Health Promotion and
Prevention

The Richmond Hospital Site
7000 Westminster Highway
Richmond, BC V6X 1A2
Telephone (604) 278-9711
Facsimile (604) 244-5191



**Richmond
Health Services**

Part of the Vancouver/Richmond Health Board

October 31st, 2001

City Council
City of Richmond
6911 No. 3 Road
Richmond, B.C.
V6Y 2C1

Dear Council Members:

Re: **Richmond Group Home Task Force Recommendations**

We have reviewed the last draft of the report from the Group Home Task Force with respect to policies for licensed homes with 7-10 persons in care. We understand that this report has received the full support of the Task Force and we commend them on reaching consensus on this important community issue.

We will be pleased to work with the City on the development of a protocol which addresses the concerns and recommendations expressed in the Task Force's final report. This is with the understanding that our participation on any proposed policy or issue will be guided by the requirements of the Community Care Facilities Act and Regulations .

We would like to acknowledge the Task Force members for their many hours of service, research and deliberation on this matter. We are supportive of the basic principles behind the work done to date, and look forward to working with the Residential Care Facility Advisory Committee.

Sincerely,

Ron Climenhaga,
Chief Operating Officer

/bs



December 14, 2001

367831

Medical Health Officers
Chief Licensing Officers

Dear Sir/Madam:

Re: Deregulation of Supportive Recovery Homes

I am writing to inform you of changes to the licensure of Supportive Recovery Homes under the *Community Care Facility Act*. An Order-in-Council has recently been passed to exempt supportive recovery homes from licensing under the *Community Care Facility Act*. A copy of this Order is enclosed.

The regulation of supportive recovery homes was designed primarily to address longstanding concerns regarding their operation within the lower mainland. However, this approach has been ineffective in resolving many of these issues. Most operators of Supportive Recovery Homes have been unable to meet the standards set by the *Community Care Facility Act* and the Adult Care regulations. Moreover, the process has led to adversarial outcomes, and it is not clear the process has been of benefit to residents of these homes.

Addictions Services, which is now under government's Health portfolio, will be undertaking a comprehensive review of all their residential services with the province. It is anticipated that this review will involve the lower mainland issues and that new models for supporting persons recovering from addictions will be developed.

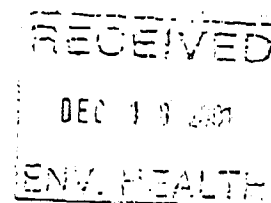
While Supportive Recovery Homes will no longer be regulated under the *Community Care Facility Act* and the Adult Care Regulations, facilities that provide detoxification and intensive residential treatment will continue to be licensed and monitored.

Residents in these facilities are very vulnerable and dependent upon the operator/staff of the facility. They require professional and/or medical monitoring as well as professional counseling. To assist you in the process of determining whether a drug and alcohol facility requires licensure, guidelines have been enclosed with this letter.

Yours sincerely,

Clyde Macdonald
Director
Community Care Facilities Branch
Enclosure

- Order-In-Council No. 1069, dated December 12, 2001
- Guidelines for Community Care Facilities Licensing Staff



Ministry of
Health Services

Community Care Facilities Branch
Health Protection Division
Regional Programs Policy and
Strategic Initiatives

1520 Blanshard Street, 2nd Floor
Victoria BC V8W 3C8

Telephone: (250) 952-1446
Facsimile: (250) 952-1486
www.healthservices.gov.bc.ca/ccf

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GUIDELINES

For determining whether a Supportive Recovery or an Addictions facility is in need of licensing

Supportive Recovery Services

In the course of their recovery from an addiction some persons require safe, structured living arrangements that are free of alcohol and illicit drugs. This form of living arrangement may be needed at several stages of recovery: after detoxification and while awaiting intensive treatment; after intensive treatment and while reintegrating into the community; at times of crises where there is a high risk of relapse. Supportive recovery provides, most importantly, a safe living environment. The program may also require residents to become involved in home maintenance, organized group discussions, lecture, information sessions, and linkage to treatment services elsewhere, as well as with establishing the elements of independent living, such as a home and a job¹.

Guidelines:

As with all other residential facilities, the issuing of a community care facility licence to an addictions services facility is to be determined on a case by case basis.

A community care facility licence is not required when the service to be provided is supportive in nature only.

A residential service that is supportive involves offering assistance and advice to persons during their residence. However, while advice or assistance may be offered, the client is not obligated to take that advice or direction. Some organizations may provide meals, access to off site therapy groups, and assistance with transportation. Within these residential settings, if the individuals control, direct and manage their own life, and are free to move out of the supportive recovery home at any time, then a community care facility licence is not required.

A Community Care Facility Licence is required when the intent of the service to be provided involves providing care and supervision to residents. Where methadone is being dispensed or administered by the facility or detoxification is offered, residents are in need of care and supervision. Both medical and non-medical supervision may be needed. For example, in these settings persons in care are also likely to need assistance with improved nutrition and with hygiene. These facilities are taking on the responsibility of significant responsibility or guardianship of the person.

¹ Directory of Addiction Services in British Columbia, 2001. Province of British Columbia and Kaiser Foundation.

Community Care Facility Act

Definition of "care" in the CCF Act

"community care facility" means any facility that

- (a) provides care, supervision, social or educational training or physical or mental rehabilitative therapy, with or without charge, to 3 or more persons not related by blood or marriage to an operator of the facility

OIC Amendment #1069 Dated: December 12, 2001

1. *The following section is added:*

Facility Exempted from the Act

- 2.1 (1) Supportive recovery residences constitute a class of facility designated not to be a community care facility for the purposes of the Act and this Regulation.
- (2) For the purposes of subsection (1), a "supportive recovery" residence is a residence that
 - (a) provides a safe and drug-free environment for persons recovering from drug or alcohol addictions, and
 - (b) does not provide most or all of the services described in section 6.10(2).

2. *Section 6.10 (2) is repealed and replaced with the following:*

- 6.10 (2) For the purposes of subsection (1) "care and supervision" includes
- (a) regular assistance with activities of daily living such as eating, mobility, dressing, grooming, bathing or other personal hygiene,
 - (b) administering and monitoring the taking of medication,
 - (c) central storing or distribution of medication,
 - (d) maintenance or management of resident cash resources or property, and
 - (e) monitoring of food intake or therapeutic diets

**Protocol Agreement
between
The City of Richmond
And
Richmond Health Services**

The City of Richmond and Richmond Health Services wish to establish a mutually agreeable arrangement to rationalize the process of reviewing, licensing and establishing a Residential Care Facility (licensed group home for 7-10 persons in care). At this time, the parties wish to define the specific responsibilities for the City and Richmond Health Services.

The City and Richmond Health Services have a common objective, which may be summarized as the well being of the community and those individuals in care.

The City and Richmond Health Services have a profound effect on each others' daily work. It is in the best interests of both the City and Richmond Health Services to combine their efforts whenever appropriate and to resolve amicably any issues of mutual concern involving the licensing of group homes.

The City has jurisdiction for land use, location, and fire and building code requirements. Richmond Health Services, under the auspices of the Vancouver Coastal Health Board, operates as the coordinator of applications for group homes, and administers the Community Care Facility Act in respect to Community Care Licensing. On behalf of the province, in consultation with municipal departments and sponsoring agencies, it issues approval of licenses to applicants or rejects them, as appropriate.

The City and Richmond Health Services agree to participate in the following guiding principles and process to review, consult and consider the establishment of licensed group homes in Richmond:

GUIDING PRINCIPLES

- ❑ Communication and consultation with the community on issues of concern to citizens is an important requirement of a "well-managed" City.
- ❑ A "well-managed" City is one where the responsibilities of the stakeholders, including the City, the community or neighbourhoods, and others who may be involved (including Richmond Health Services) are clearly defined.
- ❑ Richmond's multicultural makeup is one of its strengths, and therefore ongoing efforts must be made by the City and Richmond Health Services to ensure harmony with the total community.

PROCESS

The following process will be implemented upon notification to the City by Richmond Health Services that an application for a Residential Care Facility has been received.

1. City Review

The City reviews proposed building for fire, building code and locational requirements.

2. City's First Notification

The City notifies neighbours within a five-house radius of the proposed Residential Care Facility, in writing, that an application for a Residential Care Facility has been received, and invites neighbour comments.

Notification to also include:

- Invitation to an informal neighbourhood meeting, hosted by City staff and to include representatives from Richmond Health Services and proposed Residential Care Facility operator. The purpose of the neighbourhood meeting is to provide information to area residents and to address possible concerns;
- Name and contact information of a designated member of the Residential Care Facility operator;
- Fact Sheet about the Residential Care Facility with information about number of residents, type of facility and expected resident turnover, number of staff, level of supervision, hours of operation, referral process, funding, expected building alterations, parking provisions, and information related to any other expected physical changes or provisions to the property; and
- "Group Homes in Richmond" publication.

3. City/Neighbourhood Comments & Referral to Health Services

City conveys neighbour comments to Richmond Health Services for information and review with the Residential Care Facility operating team.

4. Issuance of One Year Interim Permit

If Richmond Health Services is going to issue a permit, it will only issue a one year interim permit to operate a Residential Care Facility.

5. City's Second Notification

Six weeks prior to expiry of the one year interim permit, the City will contact (in writing) neighbours within a five-house radius of the Residential Care Facility for additional comments and feedback related to the operation of the Residential Care facility.

The City may host a neighbourhood meeting to address any issues and concerns that arise from the comments from the neighbourhood.

6. Issuance of Full Community Care Facilities License

Richmond Health Services may issue a full Community Care Facilities License to operate the Residential Care Facility, after considering the input from step 5 (City Second Notification).

7. Dispute Resolution

In the event that issues and concerns emerge during the interim period and beyond, the City may establish a working group, with membership to include a City staff member, a representative of Richmond Health Services, and an area resident(s) to address issues of concern.

8. Transition

The parties recognize that implementation of this agreement will require time. It is presumed that both parties will act with all due diligence and expedition. Each will apprise the other of causes for delay and anticipated completion dates. Notwithstanding any technical difficulties, the parties will in all matters be guided by the spirit and intention of this agreement.

9. Cancellation Clause

Either party may cancel this agreement with six months advance notice in writing.

This Agreement was signed on the day of , 2002.

Malcolm Brodie
Mayor
City of Richmond

Dr. Jeff Coleman
Chief Operating Officer
Richmond Health Services

Richmond McKenna
City Clerk
City of Richmond

Kelvin Higo
Chief Public Health Inspector
Richmond Health Services

Optional Group Home Management Options

Management Steps	Current Policy	Rezoning Bylaw	Group Home Task Force Report
<i>Application</i>	No	Yes	Yes
<i>Building Code</i>	Yes	Yes	Yes
<i>Zoning Review</i>	No	Yes	No
<i>Public Notification</i>	No	Yes	Yes
<i>Public Education</i>	No	No	Yes
<i>Public Meeting</i>	No	No	Yes
<i>Public Hearing</i>	No	Yes	No
<i>Public Comment</i>	No	Yes	Yes
<i>Council Role</i>	No	Yes	No
<i>Conflict Resolution</i>	No	No	Yes
<i>Interim Health License</i>	No	No	Yes
<i>Final Health License</i>	Yes	Yes	Yes
<i>Health Monitoring</i>	Yes	Yes	Yes

Current Policy Framework and Regulations for Group Homes

Note: For group homes with 7-10 persons in care only (area shaded in the table below) the City has the ability to manage the location of these homes through a variety of means, including the Official Community Plan and zoning bylaws. For group homes with 1-6 persons in care, the Community Care Facility Act enables the Regional Health Authority to issue a license for any location, as long as it meets City fire and health standards. Facilities with 11+ persons in care, because of their larger size and scale, are subject to a rezoning process when locating in residential areas.

Number of Persons in Care	Provincial License Requirement	Existing City Regulations & Jurisdiction	Building Code Compliance
1 - 6	Residential Care Home License	<ul style="list-style-type: none"> • Considered special needs housing and permitted in all districts zoned for residential use 	See below
7 - 10	Residential Care Facility License	<ul style="list-style-type: none"> • Permitted in all districts zoned for residential use • City Group Home Policy provides guidelines on location and operation • City can regulate through its Official Community Plan, zoning, building bylaw requirements • City does not require a rezoning or public hearing process 	<ul style="list-style-type: none"> • City fire and health requirements for single family homes. Group homes also need: <ul style="list-style-type: none"> • Sprinkler system • Emergency lighting • Fire separation at garage
11+	Institutional Facility License	<ul style="list-style-type: none"> • City requires a rezoning and public hearing process 	<ul style="list-style-type: none"> • Assembly Occupancy Standards of National Building Code apply

TYPICAL PROCESS FOR REVIEWING GROUP HOME PROPOSAL

(7 to 10 Persons in Care)

(As per Group Home Final Report and Recommendations)

The process for reviewing a group home proposal for 7 to 10 persons in care would involve the following steps:

1. **Group Home Application**
 - Application is made to Richmond Health Services, who notify the City that an application for a Residential Care Facility has been received.
2. **City Review**
 - The City reviews the proposed building for fire, building code and locational requirements.
3. **First City Notification**
 - The City notifies neighbours within a five-house radius of the proposed Residential Care Facility, in writing, that an application for a Residential Care Facility has been received, and invites neighbour comments. Notification also includes:
 - Invitation to an informal neighbourhood meeting, hosted by City staff and to include representatives from Richmond Health Services and proposed Residential Care operator. The purpose of the neighbourhood meeting is to provide information to area residents and to address possible concerns;
 - Name and contact information of a designated member of the Residential Care Facility operator;
 - Fact Sheet about the Residential Care Facility with information about number of residents, type of facility and expected resident turnover, number of staff, level of supervision, hours of operation, referral process, funding, expected building alterations, parking provisions, and information related to any other expected physical changes or provisions to the property; and
 - "Group Homes in Richmond" publication.
4. **City/Neighbourhood Comments & Referral to Health Services**
 - City conveys neighbour comments to Richmond Health Services for information and review with Residential Care Facility operator.
5. **Issuance of One Year Interim Permit**
 - If Richmond Health Services is going to issue a permit, it will issue a "One Year Interim Permit" to operate a Residential Care Facility.
6. **Second City Notification**
 - Six weeks prior to expiry of the one year interim permit, the City will contact neighbours within a five-house radius of the Residential Care

Facility, in writing, for additional comments and feedback related to the operation of the Residential Care Facility.

- The City may host a neighbourhood meeting to address any issues and concerns that arise from the comments from the neighbourhood.

7. Issuance of Full Community Care Facilities License

- Richmond Health Services may issue a full Community Care Facilities License to operate a Residential Care Facility, after considering the input from Step 5 (Second City Notification).

Note: The issuance of the license is not contingent on meeting the area concerns if they are not related to any conditions in the regulations. However, Richmond Health Services would work with the operator to resolve the concerns expressed by the residents

8. Dispute Resolution

- In the event that issues and concerns emerge during the interim period and beyond, City may establish a working group, with membership to include a City staff member, a representative of Richmond Health Services, and an area resident(s) to address issues of concern.

**Protocol Agreement
between
The City of Richmond
And
Richmond Health Services**

The City of Richmond and Richmond Health Services wish to establish a mutually agreeable arrangement to rationalize the process of reviewing, licensing and establishing a Residential Care Facility (licensed group home for 7-10 persons in care). At this time, the parties wish to define the specific responsibilities for the City and Richmond Health Services.

The City and Richmond Health Services have a common objective, which may be summarized as the well being of the community and those individuals in care.

The City and Richmond Health Services have a profound effect on each others' daily work. It is in the best interests of both the City and Richmond Health Services to combine their efforts whenever appropriate and to resolve amicably any issues of mutual concern involving the licensing of group homes.

The City has jurisdiction for land use, location, and fire and building code requirements. Richmond Health Services, under the auspices of the Vancouver Coastal Health Board, operates as the coordinator of applications for group homes, and administers the Community Care Facility Act in respect to Community Care Licensing. On behalf of the province, in consultation with municipal departments and sponsoring agencies, it issues approval of licenses to applicants or rejects them, as appropriate.

The City and Richmond Health Services agree to participate in the following guiding principles and process to review, consult and consider the establishment of licensed group homes in Richmond:

GUIDING PRINCIPLES

- Communication and consultation with the community on issues of concern to citizens is an important requirement of a "well-managed" City.
- A "well-managed" City is one where the responsibilities of the stakeholders, including the City, the community or neighbourhoods, and others who may be involved (including Richmond Health Services) are clearly defined.
- Richmond's multicultural makeup is one of its strengths, and therefore ongoing efforts must be made by the City and Richmond Health Services to ensure harmony with the total community.

PROCESS

The following process will be implemented upon notification to the City by Richmond Health Services that an application for a Residential Care Facility has been received.

1. City Review

The City reviews proposed building for fire, building code and locational requirements.

2. City's First Notification

The City notifies neighbours within a five-house radius of the proposed Residential Care Facility, in writing, that an application for a Residential Care Facility has been received, and invites neighbour comments.

Notification to also include:

- Invitation to an informal neighbourhood meeting, hosted by City staff and to include representatives from Richmond Health Services and proposed Residential Care Facility operator. The purpose of the neighbourhood meeting is to provide information to area residents and to address possible concerns;
- Name and contact information of a designated member of the Residential Care Facility operator;
- Fact Sheet about the Residential Care Facility with information about number of residents, type of facility and expected resident turnover, number of staff, level of supervision, hours of operation, referral process, funding, expected building alterations, parking provisions, and information related to any other expected physical changes or provisions to the property; and
- "Group Homes in Richmond" publication.

3. City/Neighbourhood Comments & Referral to Health Services

City conveys neighbour comments to Richmond Health Services for information and review with the Residential Care Facility operating team.

4. Issuance of One Year Interim Permit

If Richmond Health Services is going to issue a permit, it will only issue a one year interim permit to operate a Residential Care Facility.

5. City's Second Notification

Six weeks to nine weeks prior to expiry of the one year interim permit, the City will contact (in writing) neighbours within a five-house radius of the Residential Care Facility for additional comments and feedback related to the operation of the Residential Care facility.

The City may host a neighbourhood meeting to address any issues and concerns that arise from the comments from the neighbourhood.

6. Issuance of Full Community Care Facilities License

Richmond Health Services may issue a full Community Care Facilities License to operate the Residential Care Facility, after considering the input from step 5 (City Second Notification).

7. Dispute Resolution

In the event that issues and concerns emerge during the interim period and beyond, the City may establish a working group, with membership to include a City staff member, a representative of Richmond Health Services, and an area resident(s) to address issues of concern.

8. Transition

The parties recognize that implementation of this agreement will require time. It is presumed that both parties will act with all due diligence and expedition. Each will apprise the other of causes for delay and anticipated completion dates. Notwithstanding any technical difficulties, the parties will in all matters be guided by the spirit and intention of this agreement.

9. Cancellation Clause

Either party may cancel this agreement with six months advance notice in writing.

This Agreement was signed on the day of , 2002.

Malcolm Brodie
Mayor
City of Richmond

Dr. Jeff Coleman
Chief Operating Officer
Richmond Health Services

Richmond McKenna
City Clerk
City of Richmond

Kelvin Higo
Chief Public Health Inspector
Richmond Health Services

Optional Group Home Management Options

Management Steps	Current Policy	Rezoning Bylaw	Group Home Task Force Report
<i>Application</i>	No	Yes	Yes
<i>Building Code</i>	Yes	Yes	Yes
<i>Zoning Review</i>	No	Yes	No
<i>Public Notification</i>	No	Yes	Yes
<i>Public Education</i>	No	No	Yes
<i>Public Meeting</i>	No	No	Yes
<i>Public Hearing</i>	No	Yes	No
<i>Public Comment</i>	No	Yes	Yes
<i>Council Role</i>	No	Yes	No
<i>Conflict Resolution</i>	No	No	Yes
<i>Interim Health License</i>	No	No	Yes
<i>Final Health License</i>	Yes	Yes	Yes
<i>Health Monitoring</i>	Yes	Yes	Yes