

ITEM 5
MANAGER'S REPORT NO. 38
COUNCIL MEETING 89/05/23

RE: ZONING AND APPROVAL PROCESS FOR GROUP AND REST HOMES IN BURNABY
MUNICIPAL MANAGER'S RECOMMENDATION:

1. THAT the recommendations of the Director Planning & Building Inspection be adopted.

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TO: MUNICIPAL MANAGER 1989 APRIL 12
FROM: DIRECTOR PLANNING & BUILDING INSPECTION Our File: 17.918

SUBJECT: ZONING AND APPROVAL PROCESS FOR GROUP AND REST HOMES IN BURNABY

PURPOSE: The purpose of this report is to review Burnaby's major group/rest home issues and policy options and, from the information obtained, recommend appropriate policy responses.

RECOMMENDATIONS:

1. THAT Council authorize staff to prepare a set of guidelines to be used by operators of group/rest homes in notifying neighbours about new group/rest home developments in Burnaby.
2. THAT Council request the GVRD to coordinate a Regional review of the issues identified in Sections 4.4 and 4.5 of this report, as well as the issue of a "Regional fair share" policy on group homes as discussed in Section 4.3.3 of the report.
3. THAT Council authorize the Municipal Solicitor to prepare the following Zoning Bylaw text amendments for approval by Council:

- a) Replacement of the definition of "GROUP HOME" with the following:

"RESIDENTIAL CARE FACILITY: CHILD AND YOUTH' means a facility which provides 24 hour care, food, lodging, supervision, and other support to three or more persons under 19 years of age who have mental handicaps, physical disabilities, psychiatric disabilities, alcohol and drug problems, or other social or health problems, and may have been placed in the facility under authority of pertinent Provincial legislation."

b) Replacement of the definition of "REST HOME" with the following:

"RESIDENTIAL CARE FACILITY: ADULT' means a facility which provides 24 hour care, food, lodging, supervision, and other support to three or more persons aged 19 years and over with mental handicaps, physical disabilities, psychiatric disabilities, alcohol or drug problems, or other social or health problems."

c) Replacement of the terms "group home" and "rest home" with the terms "residential care facility: child and youth" and "residential care facility: adult", respectively in the R4, R5 and R6 District schedules.

d) Amendments to the R1, R2 and R3 District schedules to permit establishment of residential care facilities: child and youth and residential care facilities: adult, as proposed in Section 5.3.2 of this report.

e) Provision to allow a maximum of 6 residents plus staff in residential districts permitting residential care facilities for children, youths, and adults.

f) Inclusion of a requirement that residential care facilities be located a minimum radial distance of 200 metres from other residential care facilities.

g) Deletion of group and rest homes from the list of uses permitted in the RM1, RM2 and RM3 Multi-Family Residential District schedules.

4. THAT copies of this report be sent to individuals who attended the consultation meeting on 1988 October 06 (Appendix 2, attached), the Community Living Board, the Superintendent of School District No. 41, the City of North Vancouver, the City of West Vancouver, the District of North Vancouver, and the GVRD.

SUMMARY

This report examines a range of issues concerning Burnaby's group/rest home regulations and Provincial deinstitutionalization policies. The issues addressed pertain to:

- public education and approval procedures
- adequacy of community support services
- zoning provisions for group/rest homes (including definitions, location, concentration and scale)
- funding
- "other" issues (e.g. facility staffing standards, public relations, and appropriateness of placements)

A number of options for addressing the issues are examined and recommendations for action are provided.

The recommendations seek Council authorization for the following:

- preparation of guidelines to be used by group/rest home operators in notifying neighbours about new group/rest home developments

- requesting the GVRD to coordinate a review of a range of deinstitutionalization issues which are of inter-municipal concern
- text amendments to the Zoning Bylaw pertaining to group/rest home regulations.

The proposed recommendations represent a starting point, not the "final word", in dealing with group/rest home and deinstitutionalization issues. Nonetheless, implementation of the proposed recommendations and ongoing monitoring of Burnaby's group/rest home situation should enable the Municipality to continue to respond to the needs of the deinstitutionalized population in a balanced, sensitive, and humane way.

R E P O R T

1.0 BACKGROUND

1.1 On 1988 February 08, Municipal Council requested staff to prepare a report concerning procedures being followed to establish group/rest homes in Burnaby. The request was prompted by concerns over potential implications that the phasing down of the large scale Provincial Institutions for the mentally ill (Riverview) and mentally handicapped (Woodlands and Glendale) could have for the community. Specifically, Council asked staff to report back on the following:

- adequacy of Burnaby's community support services for dealing with the deinstitutionalized population.
- public education procedures to ensure acceptance of group/rest home residents in the community.
- the appropriateness of existing zoning requirements for group/rest homes.

1.2 Following this request, on 1988 February 15, Council received a report from the Medical Health Officer entitled "Replacement of Riverview Hospital". The report outlined the Province's plans for closure of Riverview and large institutions for the mentally handicapped. While indicating support for the philosophy of deinstitutionalization, the report identified several issues that should be addressed before further deinstitutionalization occurs (e.g. securing funds for therapeutic, recreational, and work programs in the community; determination of appropriate types and locations of facilities for special needs groups).

1.3 On 1988 June 13, Council received another report from the Medical Health Officer entitled "Psychiatric Health Care in Burnaby." The report provided an overview of psychiatric health care services and issues in the Municipality. It also identified three major gaps in Burnaby's psychiatric health care delivery system: a) lack of acute in-patient beds, b) insufficient resources at Burnaby Hospital for dealing with psychiatric patients in acute crisis situations, and c) lack of psychiatric services for children and adolescents.

1.4 On 1988 June 27, Council considered a report from the Director Planning & Building Inspection entitled "Letter from City of North Vancouver Re: Group Homes." The report addressed a request from the City of North Vancouver that Burnaby Council support two recommendations regarding group homes:

- a) THAT the Provincial Government be urged to amend the Community Care Facility Act, Section 5 (a) (iii) and Section 7 (see Appendix 1, attached) to reduce the number of residents from ten plus staff to six plus staff.

- b) THAT the Ministers of Health, Social Services and Housing, Attorney General be urged to provide funds to operators of group homes so that six-bed facilities are financially viable in all areas of the Province.

Staff concluded that the underlying premises and general thrust of the North Vancouver recommendations appeared reasonable, but recommended that Council defer a decision on them until the present group/rest home review had been completed. Council concurred with staff's recommendation.

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1.5 On 1988 October 06, the Planning & Building Inspection and Health Departments hosted a meeting with group/rest home operators and government representatives regarding Burnaby's group/rest home policies. A total of twenty-eight people attended (see Appendix 2, attached). The purpose of the meeting was threefold: a) to confirm our records regarding existing and planned group and rest homes in Burnaby, b) to review and clarify Burnaby's key group/rest home issues, and c) to determine some preliminary policy responses the Municipality may choose to consider in addressing the identified group/rest home issues. A breadth of useful information was obtained through this process and consensus was reached on several preferred strategies for addressing the group/rest home issues. Staff have relied heavily on information obtained at the meeting, and from subsequent material provided by meeting participants, in formulating the recommendations contained in this report.

1.6 At the Provincial level, the Ministry of Health is working on a revised plan regarding services for the mentally ill. The revised plan will replace the Draft Plan to Replace Riverview Hospital, prepared in 1987. It is expected to be presented to the Provincial Cabinet in the near future.

1.7 Also at the Provincial level, plans are underway for "Project '89," which will see the deinstitutionalization of roughly one hundred residents from Woodlands into the Lower Mainland. Ministry of Social Services and Housing staff expect 2 or 3 new group/rest homes will be developed in Burnaby to accommodate 8-10 "Project '89" residents.

1.8 This report responds to the questions regarding group/rest homes and deinstitutionalization raised by Municipal Council at its meeting of 1988 February 08 (i.e. adequacy of community support services, public education procedures, and zoning policies). It also addresses the issues raised by the City of North Vancouver (i.e. funding and proposed amendments to the Community Care Facility Act), as well as other issues identified during the course of our research. From an analysis of the information obtained, the report recommends amendments to existing policies and procedures regarding group/rest home establishment in Burnaby.

2.0 DEFINITIONS

Before proceeding, some of the terms used in this report should be defined. These terms are:

Psychiatrically Disabled - individuals with significant behavioral or psychiatric disorders.

Mentally Handicapped - individuals with subnormal intellectual ability present from birth or early infancy, manifested by abnormal development and associated with difficulties in learning, development and social adaptations.

Family - in the Burnaby Zoning Bylaw, "family" is defined as "... one or more persons related by blood, marriage, or adoption, or a group of not more than three unrelated non-transient persons, living together as a single non-profit group in a dwelling unit and using common cooking facilities, but excluding boarders.

Group Home - the Zoning Bylaw definition of group homes is as follows: "... a residential care home which provides care, food, and lodging and an opportunity for the social, emotional, physical, and intellectual growth of children under the age of nineteen years living apart from their parents or guardians under the continuing guidance and supervision of group home parents or other qualified persons and which shall comply with all applicable provincial and municipal regulations."

Rest Home - The Zoning Bylaw defines rest home as "... a boarding home or other institution where food or lodging, together with care or attention are furnished, with or without charge, for two or more persons who, on account of age, infirmity, physical or mental defect or other disability, require attention or care, excepting a home maintained by a person to whom the inmates are related by blood or marriage."

Service providers and members of the public commonly refer to community based residential care facilities (ie. group and rest homes) as group homes. To be consistent with Zoning Bylaw terminology, and to prevent possible confusion between youth and adult homes, this report uses the term group/rest homes to refer to both youth and adult facilities.

3.0 CONSULTATION PROCESS

As noted, staff met with about twenty group home operators and government representatives to obtain their views concerning Burnaby's group/rest home issues and policy options. We invited written comments from meeting participants and others who were unable to attend the meeting. We also sought the views of various Municipal departments and the School District, through the inter-departmental Social Planning Staff Liaison Group. Finally, we contacted other Lower Mainland Municipalities to learn about their group home policies and their responses to Provincial deinstitutionalization policies.

Staff consider this extensive consultation to have been essential, given the complexity and inherent emotional overtones of the group/rest home and deinstitutionalization issues. Through the consultation, we obtained valuable information and suggestions which assisted in preparation of this report.

4.0 SUMMARY OF ISSUES

The major group/rest home issues facing Burnaby, as identified by Council and through the above noted consultation process, are reviewed below. A discussion of options for addressing these issues is presented in Section 5 of this report.

4.1 Public Education and Approval Procedures

A summary of procedures for obtaining a Community Care Facility license for a group/rest home in Burnaby is contained in Appendix 3. As the summary reveals, the Municipality does not require group/rest home operators to notify neighbours about the establishment of group/rest homes. Of their own accord, however, most operators choose to provide such notification.

The chief public education questions involve whether neighbours of prospective group/rest homes should be notified before a group/rest home is approved or established, whether they should be notified after the fact or, indeed, whether they should be notified at all.

4.2 Adequacy of Community Support Services

Continued development of group/rest homes will place additional burdens on Burnaby's recreation, health, education, and other community support services. As previously noted, the Medical Health Officer has provided preliminary reports to Council on this issue. Other municipalities in the Region have also addressed the issue - most notably Vancouver, whose Council voiced concern that the City's already overburdened mental health services could not cope with an additional influx of patients from Riverview. Local human service providers indicate that they, like their Vancouver counterparts, would probably require additional resources if the deinstitutionalized population continues to grow. Local School District staff have also indicated that they would appreciate receiving early notification of group home developments. This early notification would assist the District in planning any additional or special services that may be required by the school age group home residents.

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The GVRD's Social Issues Subcommittee, composed of social planners from Lower Mainland municipalities, including Burnaby, is coordinating a review of inter-municipal concerns regarding deinstitutionalization. The initial focus will be on the impacts of deinstitutionalization on community services. Staff believe that the GVRD subcommittee would also be an appropriate body to examine other deinstitutionalization concerns identified later in this report.

4.3 Zoning

This issue can be divided into the following components:

4.3.1 Definitions and Terminology - As previously indicated, Burnaby's Zoning Bylaw distinguishes between group homes (facilities for people aged below 19 years) and rest homes (for people aged 19 and over). These terms are confusing for people not familiar with the Zoning Bylaw (e.g. most people think of rest homes as care facilities for seniors, rather than community based residential facilities for adults with special needs). Also, the terms are potentially distasteful to facility residents and service providers (e.g. a 20 year old disabled person would not likely wish to be considered as a resident of a rest home). Given these concerns, all those consulted for our research agreed that the Zoning Bylaw terms and definitions should be amended.

4.3.2 Location - At present, group and rest homes are permitted in single family dwellings in R4 and R5 Residential Districts, providing they meet the following minimum site area requirements:

R4	800m ² (8611.41 sq. ft.)
R5	670m ² (7212.06 sq. ft.)

They are also permitted in R6, RM1, RM2, and RM3 Districts, based on the provisions of the R5 District Schedule; however, none have been established in these districts to date.

At present, Burnaby has 13 group homes and 30 rest homes, accommodating 306 residents with various needs.

The majority of Burnaby's group/rest homes are located in R4 and R5 districts. As seen in the following table, however, roughly one quarter have been established in other districts:

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ZONE	FACILITY TYPE	NUMBER OF FACILITIES
C4	Rest Home	1
P5	Rest Home	2
R1	Rest Home	1
R2	Rest Home	3
R3	Group Home	3
R4	Group Home	3
	Rest Home	4
R5	Group Home	7
	Rest Home	17
CD	Rest Home	2

Two problems are apparent with Burnaby's zoning provisions for group/rest homes. First, the number of potential group/rest home sites is limited. As a result, group/rest home operators have had to select sites in relatively close proximity to other group/rest homes. Concentrations of group/rest homes have thus been emerging in certain areas of the Municipality (e.g. the South Slope; see Appendices 4 and 5, attached). The concentration issue will be discussed separately below.

The second problem with Burnaby's group/rest home zoning provisions concerns equity. People living in R4 and R5 Districts have questioned staff about the basis for restricting group/rest homes to their areas. They have argued that other residential districts, in particular those having large lots, may be equally or better suited for group/rest home developments.

4.3.3

Concentration - As noted above, relative concentrations of group/rest homes have been emerging in some R4 and R5 areas. Under existing policies, no mechanism exists for preventing these concentrations. In fact, our Zoning Bylaw may be seen to facilitate concentration by restricting group/rest homes to particular residential zones. The concern about concentration will grow more acute as the number of group/rest homes in Burnaby increases. Public opposition to the homes could develop in some areas which, in turn, could counter efforts to establish new group/rest homes and to integrate facility residents into the community.

A related concern involves the question of the regional distribution of group/rest homes. Because of its proximity to Vancouver and its relatively broad array of services (health, social, recreational, etc.), Burnaby is seen as a desirable location for group/rest home development.

While staff and others contacted for this review believe that Burnaby should continue to accommodate group/rest home development, we contend other Municipalities in the GVRD should also accommodate a fair share of the Region's group/rest homes. This would help to satisfy objectives of "normalizing" group/rest home residents, while ensuring that other municipalities are also contributing to the community support service requirements of the deinstitutionalized population. Given this reasoning, staff believe that a "Regional Fair Share" policy for group/rest homes should be developed.

The primary goal of the fair share policy should be to ensure that the deinstitutionalized population are accommodated in a balanced, equitable manner throughout the region. The initial step in preparing the policy would involve conducting an inventory of group/rest home developments throughout the region. After the inventory is conducted, it would then be necessary to determine what constitutes a "fair share" of group/rest homes for Lower Mainland Municipalities.

4.3.4 Scale - Two questions are apparent concerning the scale of group/rest homes. First, are our present limits appropriate? Burnaby's Zoning Bylaw permits rest homes in residential districts to have a maximum of five residents, whereas for group homes, it does not specify a maximum number. A decision needs to be made on whether we should maintain these provisions, allow more residents in group/rest homes, or further restrict the numbers. The challenge will be to specify a scale that is realistic from the perspective of the group/rest home operators, while minimizing the potential impacts of group/rest home development on the community.

The second question concerns whether we have authority to enforce these or other limits, in light of Provincial legislation? Council will recall that in 1988 May, the City of North Vancouver requested that Burnaby support a recommendation that the Province amend Sections 5 (a) (iii) and 7 of the Community Care Facility Act. Sections 5 (a) (iii) and 7 of the CCF Act authorizes the CCF Licensing Board to issue licenses to group homes and other residential care facilities with up to 10 residents without regard to Municipal zoning regulations. The City of North Vancouver recommended that the Act be amended, authorizing the Licensing Board to licence facilities for 6 or fewer residents. Under the proposed amendment, the Licensing Board would need Municipal approval in order to license a facility for over 6 residents.

Two developments have occurred since the City of North Vancouver proposed this amendment. First, at the fall meeting of the Union of B.C. Municipalities, a resolution was passed to request the Province to amend the CCF Act, as proposed by North Vancouver. Staff understand that the Province will be making the proposed amendment in the near future. Second, a recent Court of Appeal decision was rendered which upheld the City of Prince George's authority to limit the number of residents in a group/rest home to five, through the City's Zoning Bylaw, even though the facility had been licensed to accommodate eight residents.

An interpretation of the Prince George decision and its implications for Burnaby, provided by the Municipal Solicitor, is contained in Appendix 6.

4.4 Funding

This issue was also raised by the City of North Vancouver. The City's position was that if the Province amended Sections 5 (a) (iii) and 7 of the CCF Act as proposed above, Provincial ministries should provide sufficient per diem funding to enable 6 bed facilities to operate on a financially viable basis. At present, per diems vary widely amongst Provincial funding bodies and client groups.

A resolution supporting the city's position was passed at the 1988 UBCOM convention and referred to the Province.

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4.5 Other Issues

In addition to the above, a number of other issues were identified during the course of our research. Most of these issues, which are presented below, were raised at the consultation meeting of 1988 October 06.

- 4.5.1 **Staffing Standards** - Need was expressed for establishing staffing standards for group/rest homes, relating to such matters as staff-client ratios, staff training and qualifications, performance standards, and evaluation procedures.
- 4.5.2 **Building and Construction Standards** - The requirements of CMHC, the Provincial Licensing Board, and others regarding group/rest home developments may, in some cases, be hard to satisfy given existing funding guidelines. At the Group Home Consultation meeting, an opinion was expressed that rather than increasing funding, it may be more appropriate to reduce standards, provided that care to residents would not suffer (e.g. all bedrooms and bathrooms in a group home may not need to be accessible if only one resident is physically disabled). The majority of people at the meeting did not support this position.
- 4.5.3 **Sprinkler Systems** - For safety reasons, the City of Vancouver requires that sprinkler systems be installed in new group/rest home developments. No such requirement exists in Burnaby. Group/rest home operators consulted for the study would support a sprinkler requirement, provided sufficient additional funds were provided for the installation. Compliance with a sprinkler requirement could be established as a condition of OCF licensing approval.
- 4.5.4 **Medical and Emergency Services** - Concern was expressed about the limited knowledge that many medical professionals, hospital emergency room staff, and other emergency/crisis response workers have regarding the special requirements of serving the deinstitutionalized population. A suggestion was made that improved training opportunities could help to address this concern.
- 4.5.5 **Multi-Need Clients** - For clients with multiple needs, difficulties are often experienced within and between Provincial ministries in sorting out areas of responsibility. As a result, the client is at risk of "falling through the cracks" and not receiving the optimal level of service. Establishment of guidelines regarding the responsibilities of the involved ministries could help to address this concern.
- 4.5.6 **Resource and Service Inequities** - The concern is that facility residents recently coming out of institutions often receive greater attention and resources than those who have been in the community for longer periods.
- 4.5.7 **Small Scale Community Facilities for Seniors** - It was suggested that small scale facilities for seniors should be developed, similar to group/rest homes for the younger special needs population and the resources being developed for residents coming out of Woodlands. These would be staffed facilities which accommodate a maximum of 4 - 5 residents. They would provide an alternative to the current model of larger Long Term Care facilities for seniors.

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4.5.8 Mini Institutions - Some residents moving from Riverview to the community will need to be accommodated in small scale institutions (ie. 20-30 residents), rather than group/rest home settings. It will be necessary to determine appropriate locations for such institutions throughout the region.

4.5.9 Public Relations - Public awareness and acceptance of group/rest homes are essential for the successful integration of these homes into the community. A suggestion was made that a positive, proactive public relations campaign could help to address this issue.

4.5.10 Appropriateness of Placements - While integration of most group/rest home residents into the community should proceed smoothly, problems could potentially occur with some residents (e.g. violence or other inappropriate behavior). It is essential that this issue be addressed, as a few unfortunate incidents could result in a strong public outcry and hinder efforts to introduce additional group/rest homes in Burnaby.

4.5.11 Transportation - Appropriate, reliable transportation services are essential for group/rest home residents. Several problems exist for the deinstitutionalized population in using both public and Custom Transit services in Burnaby (e.g. need for pre-booking, restriction on recreational outings, limited service area boundaries). A suggestion was made that a committee, with representation from various Provincial Ministries, service providers, and disabled groups should be formed to develop a recommended strategy for addressing these transportation concerns.

5.0 DISCUSSION OF OPTIONS

5.1 Public Education and Approval Procedures

The Municipality has two basic options regarding public education and approval procedures for group/rest homes: 1) continuing our present "hands off" policy, or 2) requiring or suggesting that operators notify neighbours about prospective group/rest home developments.

Staff and those consulted for our review agreed that as part of a "good neighbour" policy, group/rest home operators should notify neighbours as soon as reasonably possible after purchasing a property and obtaining licensing approval for the facility. Staff would oppose the option of making such notification mandatory, however - in particular, notifying neighbours before a property purchase. Our rationale is twofold. First, group/rest home residents have the same right to live in the community as other citizens and should thus not have to justify their presence to the neighbourhood. Second, early notification of neighbours could provide time for community opposition to mount against the homes - potentially based on faulty information. Even if a facility was ultimately approved, the initial opposition could result in long term bitterness and resentment between inhabitants of the group/rest home and neighbourhood residents.

Based on the foregoing, staff intend to develop suggested public education guidelines to be used on a voluntary basis by operators of new group homes. These guidelines will identify recommended procedures for notification of neighbours about new group/rest homes (e.g. holding open houses) and offer suggestions for maintaining an ongoing good relationship with neighbourhood residents.

5.2 Adequacy of Community Support Services

As noted, the deinstitutionalized population requires a range of community support services to meet its needs. While the Medical Health Officer has provided preliminary information on this issue through reports to Council, additional research is necessary to determine specific service impacts and requirements. Parks and Recreation staff, for example, have questioned the expectations that will be placed on their services, facilities, and staff by a growing deinstitutionalized population. Two options are available for acquiring the required additional information. The Municipality can either go through an extensive research and evaluation process on its own or it can work with the GVRD in conducting a Regional review of the issue.

Staff recommend that the Municipality pursue the latter course, working with the GVRD. As the issue of service impacts is being experienced and/or examined by municipalities from throughout the Region, it would seem logical to address it in a concerted, coordinated, inter-municipal manner. Regional municipalities would still need to assist in identifying service impacts in their community. The prospects of securing the required additional resources to address these impacts, however, would be improved if each municipality acted in concert. As indicated previously, the GVRD's Social Issues Subcommittee will soon be coordinating a Regional review of service impacts and requirements. Burnaby's Social Planner is on the Subcommittee and will be consulting local service providers for the review.

To address the concerns of the School District, staff will, on an ongoing basis, notify the District as soon as reasonably possible after the property for a new group/rest home development has been acquired and the OCF Licence application has been approved. This notification should assist the District in planning for any additional or special services that may be required by school age group home residents.

5.3 Zoning

5.3.1

Definitions and Terminology - As indicated, the Zoning Bylaw terminology and definitions for group and rest homes need to be amended. Staff recommend that a distinction be made between facilities for youths (less than 19 years) and facilities for adults (19 years and older). To replace the existing Zoning Bylaw terms, "group home" and "rest home," we propose the terms "residential care facility: child and youth" and "residential care facility: adult" be adopted. Further, we propose the following definitions be included in the By-law:

"RESIDENTIAL CARE FACILITY: CHILD AND YOUTH' means a facility which provides 24 hour care, food, lodging, supervision, and other support to three or more persons under 19 years of age who have mental handicaps, physical disabilities, psychiatric disabilities, alcohol or drug problems, or other social or health problems and may have been placed in the facility under authority of pertinent Provincial legislation."

"RESIDENTIAL CARE FACILITY: ADULT' means a facility which provides 24 hour care, food, lodging, supervision, and other support to three or more persons aged 19 and over with mental handicaps, physical disabilities, psychiatric disabilities, alcohol or drug problems, or other social or health problems."

Discretion and flexibility will be required in interpreting the amended definitions (e.g. a facility may have both youth and adult residents). While acknowledging this need for flexibility, staff believe the proposed amendments will reduce the potential confusion surrounding the existing terms and definitions in the Zoning Bylaw. We also believe the amendments will remove the stigma that the term "rest home" may cause for the younger adults residing in these facilities.

5.3.2 Location - Three locational options are available for group/rest homes: 1) further restrict the areas where the facilities can be established, 2) maintain the present zoning provisions, or 3) increase the number of areas permitting group/rest homes. Because the potential areas for group/rest home development are already limited, further restricting these areas would have the effect of closing the door on future group/rest home development in Burnaby. If our present zoning provisions were maintained, clusters of group/rest homes could emerge, adding to the previously mentioned concerns regarding concentration of facilities.

Based on the foregoing, staff recommend that group/rest homes be permitted in R1, R2, and R3 Districts, in addition to the one and two family districts which currently permit the homes. Staff believe the R1, R2, and R3 areas are capable of accommodating group/rest home development, as these areas generally have larger lots than the other residential districts. Also, research and experience have revealed that if well planned, group/rest homes have minimal impacts on residential communities - in fact, group/rest home residents often come to be regarded as excellent neighbours.

To ensure that the homes are situated on appropriately sized lots, that facility residents have access to sufficient open space, and that impacts on adjacent properties are kept to a minimum, we recommend that the following minimum site area criteria be applied:

<u>District</u>	<u>Min. Site Area</u>
R1	890 m ² (9580.19 sq. ft.)
R2, R3, and R4	800 m ² (8611.41 sq. ft.)
R5 and R6	670 m ² (7212.06 sq. ft.)

As noted, group/rest homes are currently permitted in RM1, RM2, and RM3 multi-family districts, based on the guidelines of the R6 and R5 districts. Staff recommend that group and rest homes be removed from the list of uses permitted in RM1, RM2, and RM3 Multi-Family Residential District schedules. Our rationale is fourfold. First, we believe group/rest homes could be more successfully integrated into one and two family districts than into multi-family districts (in part because group/rest homes look like other houses in the one and two family districts and thus do not "stand out" in the neighbourhood). Second, we believe that one and two family districts provide a more suitable environment for group/rest home residents (i.e. they are generally quieter and have a more stable population than multi-family districts). Third, land values in multi-family areas are generally higher than values in one and two family districts. Therefore, even if they wanted to, group/rest home operators would likely be prevented from establishing facilities in multi-family districts for financial reasons. Fourth, by limiting group/rest homes to one and two family districts, the Municipality would be assured that the homes will not stand in the way of needed

No group/rest homes have been developed in multi-family districts to date. Also, no facility operators contacted for this review have plans to develop group/rest homes on multi-family sites. Therefore, the proposed zoning amendment should not pose hardships on facility operators or their residents.

5.3.3 Concentration - The Municipality has two basic options regarding concentrations of group/rest homes: do nothing or establish some type of separation criteria.

Staff believe concerns regarding concentration would be reduced if group/rest homes were permitted in more residential zones, as recommended above. We are confident that facility operators would voluntarily choose to disburse their facilities if they had the option. Nonetheless, staff believe there would be merit in introducing separation criteria.

A survey of policies regarding group/rest homes in selected Lower Mainland municipalities revealed Vancouver to be to only local municipality to have separation criteria (see Appendix 7). The City does not permit group/rest homes ("special needs residential facilities") from locating within 200 metres of other group/rest homes. By way of comparison, in Ontario, Brampton has a separation distance of 305 metres, and Hamilton Wentworth has a separation of 180 metres. The City of Ottawa has chosen a more complex method. Its criteria vary according to residential district and follow a rectangular rather than radial pattern (e.g. 300 m X 130 m).

Staff recommend that the Zoning Bylaw be amended to include a criterion of a 200 metre radial separation between group/rest homes in Burnaby. We consider a 200 metre separation to be a reasonable distance, providing certainty and protecting neighbourhoods from concentrations of facilities, yet not imposing undue difficulties on prospective group/rest home operators. In fact, we believe that group/rest home operators will voluntarily seek to locate their facilities much further than 200 metres from existing facilities if a sufficient quantity of appropriately zoned sites is available (as should occur when group/rest homes become permitted uses in R1, R2 and R3 districts).

5.3.4 Scale - The Municipality has three basic options with respect to the scale of group/rest homes: 1) reduce the number of residents permitted in a home, 2) leave the number intact, or 3) increase the number.

Staff believe that the present Zoning Bylaw limit for adult facilities of 5 residents plus staff should be increased to 6 residents plus staff. Our reasoning is as follows:

- 1) The increase from 5 to 6 residents per facility would be consistent with the changes expected to be made to Sections 5(a)(iii) and 7 of The Community Care Facility Act (see Section 4.3.4 of this report). Therefore, irrespective of the previously noted Prince George Court decision, Burnaby's Bylaw could not be superceded by Provincial licensing authorities.
- 2) A 6 resident facility is similar in scale to a relatively large family in a one and two family district. It should thus facilitate development of a human, non-institutional living environment for facility residents. It should also ensure that undue impacts are not experienced by the community.

Given this reasoning, staff recommend that group homes for children and youths also be restricted to 5 residents. The age of facility residents, in itself, should not have a bearing on community impacts of group/rest homes. Staff therefore see no justification in permitting child and youth facilities to have an unlimited number of residents, while limiting adult facilities to 5 residents.

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5.4 Funding

The Municipality has three options regarding group/rest home funding concerns: 1) do nothing, 2) recommend changes to Provincial funding policies, or 3) request the GVRD's Social Issues Subcommittee to address the issue. Groups and individuals contacted for this review acknowledged that disparities exist in per diem funding for various client groups (e.g. residents who have lived for a long time in the community generally receive smaller per diems than those who have been recently transferred from an institution). Our contacts indicated, however, that because of the diverse characteristics and needs of group/rest home residents, it would not be practical to provide the same per diem funding for all residents.

Based on the above, staff conclude that common funding guidelines should be developed by various Provincial ministries (i.e. Health, Social Services and Housing and, possibly, Attorney General). The rationale behind these guidelines should be twofold: 1) to ensure provision of adequate, sufficient, and quality care for all segments of the deinstitutionalized population, and 2) to provide necessary funds for augmenting community resources to meet the needs of the deinstitutionalized population.

The funding issue affects municipalities throughout the region and province, not only Burnaby. Therefore, rather than recommending that the Province take action, staff recommend that Council request the GVRD's Social Issues Subcommittee to address the funding issue. As noted previously, requests for changes to Provincial policies will have more force if they are supported by a number of Regional municipalities.

5.5 Other issues

As indicated, the Social Issues Subcommittee of the GVRD is coordinating a review of inter-municipal deinstitutionalization concerns. The subcommittee's initial focus will be on the impacts of deinstitutionalization on community services. Staff believe, however, that the Subcommittee would be an appropriate body for addressing the funding issue, described above, and the other issues referred to in Section 4.5 of this report. We therefore recommend that Council request the Subcommittee, through the GVRD, to address these additional issues in its deliberations. To summarize, the issues are as follows:

- Staffing standards
- Building and construction standards
- Sprinkler systems
- Medical and emergency services
- Multi-need clients
- Resource and Service inequities
- Small scale community facilities for seniors
- Mini institutions

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- Public relations
- Appropriateness of placements
- Transportation

6.0 CONCLUSION

As this report has revealed, several controversial issues exist concerning deinstitutionalization and group/rest homes in Burnaby. Staff have attempted to identify the key issues and options in this report. From an analysis of the options, we have proposed a set of recommendations for addressing Burnaby's group/rest home and deinstitutionalization issues.

What we have presented in this report does not represent the "final word" on group/rest homes or deinstitutionalization. Staff will need to continue to monitor impacts of group/rest home developments on residential neighbourhoods and local human services, as well as future changes in Provincial deinstitutionalization policies. We will also need to increase efforts to raise public awareness and acceptance of the deinstitutionalized population.

To implement the recommendations of this report and to perform the necessary future monitoring and public education activities, staff will need to work with group/rest home operators, special needs groups, our counterparts in other municipalities throughout the region, and Provincial authorities. Through this cooperative effort, staff believe that the ground will be laid for the improved integration of the deinstitutionalized population into our residential communities. We further believe the cooperative approach will help to ensure that in the future, the Municipality will be able to continue to respond to the needs of the deinstitutionalized population in a balanced, sensitive, and humane way.

Staff will report to Council regarding implementation of the recommended group/rest home strategies as deemed appropriate.


A.L. Parr
DIRECTOR PLANNING &
BUILDING INSPECTION

JF/jp

Attachments

- cc: Director Administrative & Community Services
Director Recreation & Cultural Services
Medical Health Officer
Municipal Solicitor

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APPENDIX

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1979

COMMUNITY CARE FACILITY

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unless he is the holder of a valid and subsisting licence or interim permit issued under this Act.

1973-16-3; 1974-17-4, 11.

Powers of board

5. Subject to this Act and the regulations the board may
(a) issue to an applicant a licence to operate a community care facility where³³
it is of the opinion that

- (i) the applicant, if a person other than a corporation, has the training, experience and other qualifications required under the regulations, and the personality, ability and temperament necessary to operate a community care facility in a manner that will maintain the spirit, dignity and individuality of the person being cared for; or
- (ii) the applicant, if a corporation,
 - (A) has a director permanently resident in the Province;
 - (B) has appointed as manager of the community care facility a person who meets the requirements under subparagraph (i); and
 - (C) has delegated to that manager full authority to operate the community care facility in accordance with the requirements of this Act and the regulations;
- (iii) the building or structure to be used by the community care facility, where it is a dwelling house used as a private family home in which not more than 10 physically active persons are to be cared for who can either be safely removed from the dwelling by the staff or make their way from the house unaided in the event of fire.
 - * (A) complies with this Act and the regulations;
 - (B) complies with all Provincial and municipal enactments relating to fire and health that are applicable to a dwelling house in use as a private family home; and
 - (C) has, where overnight sleeping accommodation is provided, a satisfactory method of fire detection and 2 means of egress to the ground level from each floor on which a sleeping room is located; and
- (iv) the building or structure to be used by the community care facility, where it is not a dwelling house under subparagraph (iii), complies with this Act and the regulations and all applicable Provincial and municipal enactments relating to fire and health;
- (b) issue to an applicant one or more interim permits to operate a community care facility for a period not exceeding a total of one year where it is of the opinion that the applicant has complied with all of the requirements of paragraph (a) that may significantly affect health or safety and is in the process of complying with the other requirements of paragraph (a);
- (c) specify on a licence or interim permit the type of service that the person may provide in the community care facility;
- (d) where a person who has been issued a licence or interim permit under this section is, in its opinion, operating a community care facility in con-

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COMMUNITY CARE FACILITY

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travention of this Act or the regulations, or any other Act or regulation, at any time and on terms and conditions it considers appropriate,

- (i) cancel or suspend his licence or interim permit; and
 - (ii) in the case of a suspension of licence, issue to him one or more interim permits in lieu of a licence for a period not exceeding in total one year;
- (e) issue a certificate to a person attesting that he has the training, experience and other qualifications required by the regulations to act as a preschool supervisor or otherwise to do any of the things specified in the certificate;
- (f) establish Local Community Care Facilities Licensing Boards having jurisdiction in an area of the Province as the board prescribes. A local board established under this paragraph shall be comprised of
- (i) one member appointed by the Minister of Health;
 - (ii) one member appointed by the Minister of Human Resources; and
 - (iii) one member appointed by the Minister of Education;
- (g) delegate by resolution, some or all of the powers granted to it under this Act, except the power to establish a local board under paragraph (f), to a municipality, union board or local board; and
- (h) delegate by resolution the power to issue interim permits and to amend licences under this section to a medical health officer appointed under the *Health Act*.

1974-17-5,11; 1975-13-3; 1978-28-4; B.C. Reg. 91/79; (amended 1981-11-18, to be proclaimed, amendment not included); 1982-76-5.

Display and expiry of licence

6. (1) A person who has been issued a licence or an interim permit under this Act shall, except in the case of a dwelling house under section 5 (a) (iii), display the licence or interim permit in a conspicuous place in the community care facility.
- (2) Where a person who has been issued a licence or interim permit under this Act ceases to operate the community care facility in respect of which it is issued, the licence or interim permit expires and the person shall surrender the licence or interim permit to the board.

1974-17-5,11.

Certain laws not to apply to dwelling house licensed under this Act

7. Notwithstanding section 5 (a) (iii) (B), an enactment of the Province or of a municipality that would become applicable to a dwelling house only by reason of its being used by a community care facility to accommodate not more than 10 physically active persons, does not apply to a dwelling house used by a community care facility that has been issued a licence or interim permit under this Act.

1974-17-5,11; 1975-13-4.

Arbitration in case of conflicting regulations

8. (1) Where the building or structure, for which an application for a licence as a community care facility is made under this Act, does not comply with the applicable municipal enactments referred to in section 5 (a) (iii) or (iv), but is otherwise in compliance with that section, and where the municipality, on application for a variation of the enactment or for an exemption from it, refuses the application, the applicant for a licence may notify the minister and the municipality in writing that he requires the matter to be determined by arbitration.

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APPENDIX 2

LIST OF MEETING PARTICIPANTS

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Tricia Antonluk - L'Arche Greater Vancouver
Charmaine Atkinson - Act 2 Society
Pat Benn - Burnaby Mental Health
Alina Bichler - Rehab & Counselling Services
Bill Britton - MSSH
Alan Campbell - BC Housing Management Commission
Cst. Don Campbell - RCMP
Pat Christlansen - Bby Parks & Rec Dept.
Edy Cockle - MSSH
Michelle Del Motte - Browndale Care Society
Cam Dore - Bby Assn of Mentally Handicapped
Debby Fawcett - Bby Planning & Bldg Insp Dept.
John Foster - Bby Planning & Bldg Insp Dept.
Richard Galan - Vancouver Resource Society
Dr. Sally Hemming - Bby Health Dept.
Ken Johnson - Bby Health Dept.
Joan Lynum - MSSH
Mary MacDonald - Elizabeth Fry Soc.
Susan McKechan - Elizabeth Fry Soc.
Dave McDougall - BC Housing Mgt Commission
Jim McLaughlan - Children's Foundation
Sally Martin - Services to the Handicapped, Min of Health
Debra Pierce - MSSH
Greg Ritchey - Bby Health Dept.
Eileen Ryan - Bby Health Dept.
Sharon Shelb - Willingdon Church
Brian Soon - MSSH
John Talbot - Bby Health Dept.



THE CORPORATION
OF THE DISTRICT OF
BURNABY

6161 Deer Lake Avenue, Burnaby, B.C. V5G 4A3
Health Department Environmental Health

APPENDIX 3

ITEM
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SUMMARY OF COMMUNITY CARE LICENSING PROCESS
FOR SPECIALIZED RESIDENTIAL CARE FACILITIES

1. Applicant contacts Community Care Licensing, Burnaby Health Department.
2. Applicant referred to Planning Department to determine if proposed use is permitted under zoning.
3. Applicant required to obtain approval from an appropriate sponsoring agency or Ministry of government (i.e. Ministry of Social Services and Housing, Mental Health, Services to the Handicapped, etc.):
 - that the proposed beds are needed for that particular program.
 - that the applicant is suitable to run the proposed program.
 - that the sponsoring agency/Ministry will monitor the ongoing programs of the proposed facility.
4. Community Care Licensing procedure is reviewed with applicant, and appropriate licensing forms are provided to applicant for completion (see attached for required documentation).
5. A preliminary Committee Inspection (Burnaby Health, Building and Fire Prevention Departments) is conducted to determine suitability of facility, if an existing structure.
6. If renovations are required, applicant applies for building permit. Plans are reviewed for conformance to Community Care Facility Act and Regulations.
7. Upon receipt of Community Care Facilities Licence Application:
 - (a) Formal request for zoning approval is sent to Planning from Health.
 - (b) Request for social assessment of proposed person-in-charge is forwarded to Ministry under whose jurisdiction clients will come.
 - (c) Proposed person-in-charge is interviewed by Community Care Licensing staff; Regulations and pertinent policies, procedures, etc. are reviewed with applicant/person-in-charge.
8. Final Committee Inspection (Health, Building, Fire) is conducted upon completion of renovations.

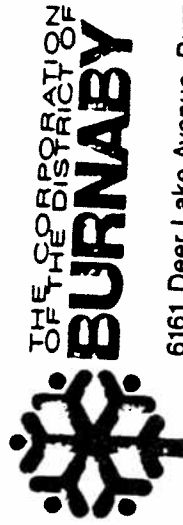
...2

9. Interim Community Care Facilities Permit issued.
10. During period of Interim Permit facility is monitored by Community Care Licensing and sponsoring Ministry staff. Operator corrects outstanding deficiencies. (Facility can be on Interim Permit for a maximum period of one year.)
11. Full Community Care Facilities Licence issued, subject to facility being in full compliance with Community Care Facility Act and Regulations, and applicable Municipal requirements.

GWR:ro

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APPENDIX 3 (CONT'D)

6161 Deer Lake Avenue, Burnaby, B.C. V5G 4A3
Health Department Environmental Health

Fax Machine (604) 660-7050
Telephone (604) 294-7390

COMMUNITY CARE FACILITIES LICENCE APPLICATION

REQUIRED DOCUMENTATION

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1. Application for Licence.
2. Summary of the Proposal.
3. 2 copies of the site plan (to scale).
4. 2 copies of the floor plans (to scale).
5. Statement of proposed monthly revenue and expenditures (budget).
6. Staffing plan.
7. Copy of the purchase, lease, or rental agreement, if applicable.
8. Copy of the Constitution and Bylaws, as registered with the Registrar of Companies, if licensee is a Society.
9. For proposed Manager/Person-In-Charge, provide:
 - a) Application for Assessment of Qualifications (Adult) or, Qualification and Reference Form (Child),
 - b) A Doctor's certificate.
 - c) Latest T.B. test results.
 - d) References: at least two (2) former employers and one (1) character reference.

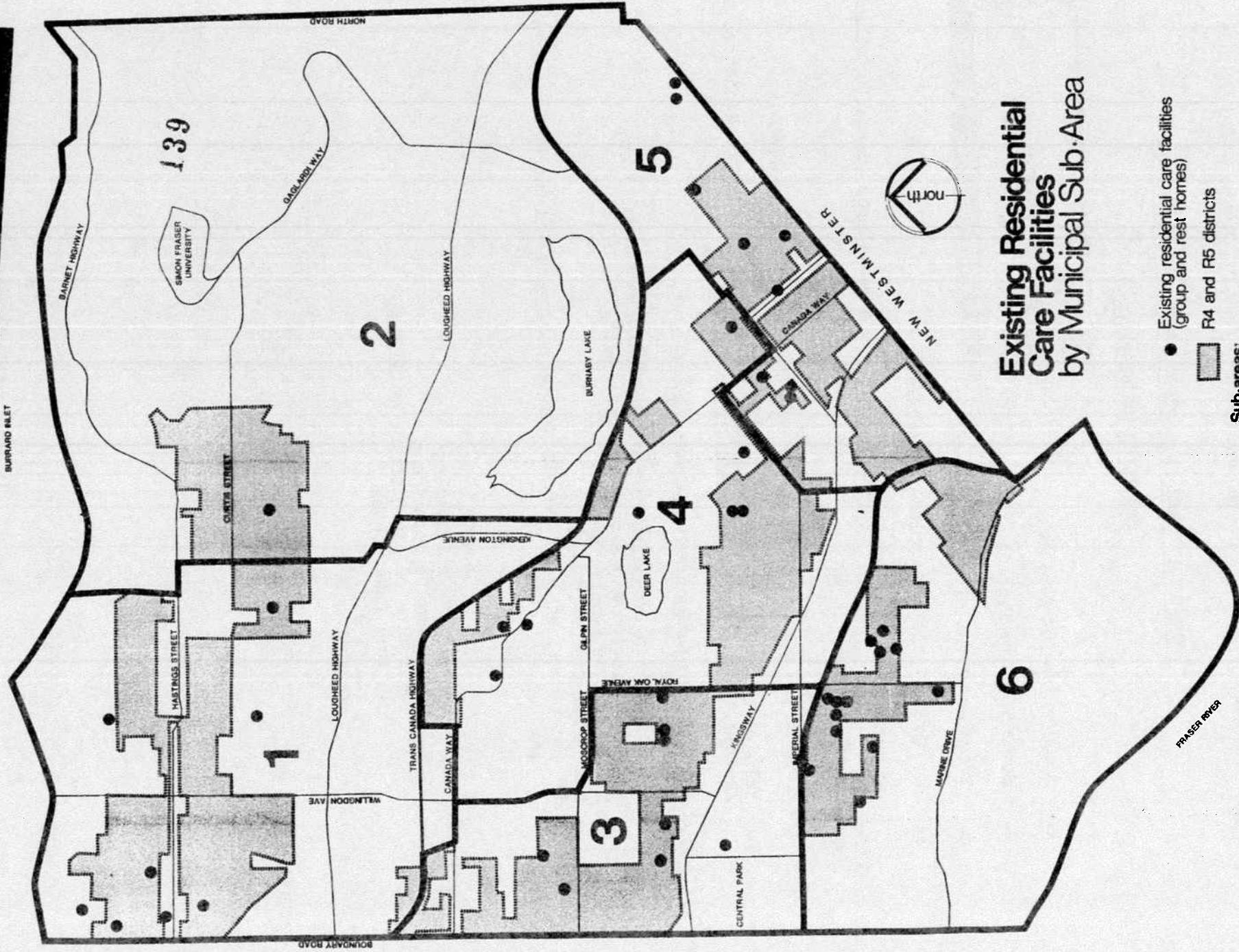
Forward to: Community Care Licensing
Burnaby Health Department
Corporation of the District of Burnaby
6161 Deer Lake Avenue
Burnaby, B.C.
V5G 4A3

GWR:ro

1988 April 26

APPENDIX 4

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Existing Residential Care Facilities by Municipal Sub-Area

● Existing residential care facilities (group and rest homes)

▨ R4 and R5 districts

Sub-areas:

- 1 Northwest
- 2 Northeast
- 3 West Central
- 4 Central
- 5 Southeast
- 6 South

APPENDIX 5

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GROUP AND REST HOME DISTRIBUTION

Mun. Sub-Area	Planning Study Area	No. of Facilities	No. of Clients
1	1	4	43
	5	1	3
	6	1	14
2	12	1	6
3	28	5	34
	31	3	13
4	30	4	38
	32	2	10
	35	2	9
	36	2	11
5	18	2	8
	19	3	32
	34	2	18
6	24	4	21
	25	7	46
TOTAL			306
		43	

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File:
17.9.18

THE CORPORATION OF THE DISTRICT OF BURBARY

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INTER OFFICE MEMORANDUM

TO: DIRECTOR PLANNING & BUILDING INSPECTION
ATTENTION: J. FOSTER

FROM: MUNICIPAL SOLICITOR

RE: COMMUNITY CARE FACILITY ACT
MCGOWAN V. CITY OF PRINCE GEORGE

DATE: NOV. 4/88


=====

1. The Court of Appeal decision in the Prince George case clarifies the effect of section 7 with respect to group homes that seek to establish in R1, R2 or R3 zoning districts in Burnaby. In those districts the definition of "family" would limit the number of patients/inmates permitted to three unrelated persons. Section 7 does not "override" that definition. In the result no group home would be permitted.

2. A rest home in an R4, R5 or R6 zone is limited to 5 patients by the requirements contained in the description of the permitted use. The interpretation placed on section 7 of the CCF Act by the judgement in the Prince George case is "... enactments other than the Community Care Facility Act will only apply if they are of general application. They will not apply if they 'would become applicable to a dwelling house only by reason of its being used as a community care facility to accommodate not more than 10 physically active persons'."

Thus, Burnaby's limit of 5 patients to a rest home could be ignored by an applicant who holds a provincial licence.

Please let me know if this does not address your concerns as to the effect of the judgement.


Patricia W. Flieger
Municipal Solicitor

APPENDIX 7

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GROUP HOME REGULATIONS:

GVRD MUNICIPALITIES

Municipality	Zoning	Maximum # of Residents	Separation Criteria	Public Education
Vancouver	Conditional use in all zones except industrial	5 without development permit; no max with dev. permit	200 m. radius	Notification of neighbours within 2 block radius
North Van District	Any single family residential zone	6 residents plus 2 staff	none	none; social planner encourages agency to notify neighbours
North Van City	Any s/f residential zone	6 residents plus 2 staff	none	Voluntary through N.S. Health Dept.
West Van	Any s/f residential zone	6 residents plus 2 staff	none	Voluntary through N.S. Health Dept.
Coquitlam	Any s/f residential zone	5 unrelated persons plus staff	none	Would like to have neighbours informed, but no policy
New West	Institutional zone only	no maximum	none	Through rezoning process only
Richmond	Any residential zone	5 unrelated persons plus staff; if OCF license, up to 10 residents	none	Voluntary on the part of the agency
Surrey	Any zone	10 residents	none	Encourage agency to notify neighbours; request if concurrent rezoning
Delta	Any residential zone (as family of up to four)	4 residents	none	Encourage agency to notify

