

POLICY

Policy Title:	Community Living disABILITY Services – Residential Care	Date Approved:	June 16, 2026
Branch:	Disability Policy	Applicable to:	Community Living disABILITY Services
Division:	Policy, Programs and Legislation	Next Review Date:	
Responsible Authority:	Department of Families	Date Reviewed:	
Policy Owner:	Executive Director, Disability Policy	Date Revised:	

1.0 Policy Statement

Residential care is intended for individuals supported by Community Living disABILITY Services whose assessed needs include care, supervision and accommodation, and for whom this level of support is necessary to ensure their health, safety, and well-being.

2.0 Background

[The Adults Living with an Intellectual Disability Act](#) authorizes the Minister to provide support services to adults living with an intellectual disability and establishes the legislative framework for planning and delivering those services based on assessed needs.

Residential care is one type of support service that may be provided to adults living with an intellectual disability under this authority. The legislative framework for residential care facilities in Manitoba is set out in [The Social Services Administration Act](#), which establishes requirements for the operation, licensing, and oversight of residential care facilities.

The [Residential Care Facilities Licensing Regulation](#), made pursuant to [The Social Services Administration Act](#), applies the residential care framework to adults living with an intellectual disability and defines residential care as the provision of care, supervision and accommodation.

The Regulation establishes standards for licensed and approved residential care facilities, including requirements for staffing, personal services, safety, supervision, and record keeping.

3.0 Purpose

This policy establishes standards and procedures to support practice within Community Living disABILITY Services when determining whether residential care is required, based on an individual's assessed need for care, supervision and accommodation.

4.0 Definitions

"Adult Living with an Intellectual Disability (ALIDA)" – an adult living with an intellectual disability who needs assistance to meet their basic needs with regards to personal care or management of their property, as defined by [The Adults Living with an Intellectual Disability Act](#).

“Accommodation” – a living environment that is required where an individual’s assessed care and supervision needs cannot be delivered safely and appropriately except within a residential care facility.

“Care” – the ongoing provision of direct assistance with activities of daily living, which may include hygiene, nutrition, medication administration, and health maintenance, necessary to maintain an individual’s health, safety, and well-being.

“Community Living disABILITY Services (CLDS)” – the Government of Manitoba program that provides support services to adults living with an intellectual disability as defined by ALIDA.

“Home Share” – a residential care facility in which an individual resides in a shared home with a contracted care provider who delivers care and supervision. The home is owned, rented, or leased by the care provider.

“Individual” – an adult living with an intellectual disability who is eligible for and receives services through CLDS.

“Individualized Support Plan” – a plan developed for a person residing in a residential care facility that outlines how and when the level of on-site supervision may be individualized to promote independence, based on the individual’s needs, abilities, and preferences, while maintaining health and safety. An [Individualized Support Plan](#) is subject to approval and ongoing review in accordance with the [CLDS – Individualized Support in Residential Care Facilities](#) policy.

“Residential Care” – the provision of care, supervision and accommodation together to meet an individual’s assessed needs within a residential care facility.

“Residential Care Facility” – premises approved by Residential Care Licensing in which residential care is provided to one or more individuals through a shift-staffed home or a home share arrangement.

“Residential Care Licensing (RCL)” – the unit within the Department of Families that is granted the authority under [The Social Services Administration Act](#) to license or approve facilities that provide residential services to adults living with an intellectual disability as defined under [The Adults Living with an Intellectual Disability Act](#).

“Shift-Staffed Home” – a residential care facility in which care and supervision are provided to individuals through a scheduled rotation of staff.

“Supervision” – the ongoing presence of support to monitor safety, respond to emergencies, and manage behavioural or health-related risks in order to maintain the health, safety, and well-being of the individual or others.

“Supports Intensity Scale (SIS)” – a standardized, valid, and reliable assessment tool used by CLDS to identify an individual’s support needs by measuring the type, frequency, and intensity of supports required for participation in community life.

5.0 Policy

Residential care is a form of support within CLDS intended for individuals whose assessed needs require care, supervision and accommodation to be provided together in a residential care facility, whether through a home share or shift-staffed home arrangement.

Decisions regarding residential care are based on an assessment of an individual's needs for care, supervision and accommodation. All three elements must be present and required and are assessed together in determining whether residential care is appropriate. The absence of any one element indicates residential care is not required.

Where an individual's assessed needs do not require care, supervision and accommodation, residential care is not appropriate. In these circumstances, other service arrangements that meet the individual's assessed needs will be considered.

Residential care decisions must occur within the context of person-centred planning, with the individual actively involved in the process. Potential need for residential care is identified through the [individual plan](#), which documents the individual's goals and support needs. Where residential care is determined to be required and is provided, its implementation must be reflected in the individual's [support plan](#), which sets out how those supports are delivered day-to-day.

6.0 Core Supporting Standards and Procedures

6.1 Standards

Residential care may only be considered where an individual cannot be safely supported in their current living arrangement due to changes in their level of need and/or the capacity of their existing supports to meet those needs. This includes situations where supports previously sufficient are no longer able to ensure the individual's health, safety or well-being.

Residential care applies to situations in which an individual is unable to live independently, with or without support, and requires ongoing care and supervision that cannot be safely provided in other living arrangements. This may include individuals whose needs involve a high degree of complexity or risk, such as significant medical needs, behavioural challenges, or safety risks.

The requirement for supervision must reflect an ongoing and necessary need that cannot be met through intermittent or less intensive supports. Supervision should not be based solely on perceived risk where the individual is not consistently receiving or requiring that level of support.

Decisions regarding residential care placement must be supported by documented assessment and professional judgment, and must consider the individual's needs for care, supervision and accommodation in a holistic manner. This includes consideration of the individual's strengths, risks, and support requirements, as well as the ability of available supports to meet those needs safely and consistently over time. Assessments and decisions regarding the potential use of residential care occur through individual planning and support planning processes.

Care and supervision can be provided safely and appropriately in other living arrangements, including family homes and situations where individuals are self managing their supports. The need for care and supervision alone does not require placement in a residential care facility.

Accommodation is only required where an individual's assessed care and supervision needs cannot be delivered safely and appropriately without the supports being delivered within a residential care facility. In these circumstances, accommodation becomes necessary to support the delivery of care and supervision in a manner that meets safety and oversight requirements.

Decisions regarding residential care placement must be made pursuant to ALIDA, supported by assessment and professional judgment, and actively involve the individual or their substitute decision-maker, if applicable, in accordance with individual and support planning processes.

A determination an individual has residential care needs does not, on its own, result in placement in a residential care facility. Individuals, or their substitute decision-maker where applicable, may decline residential care, even where assessed needs otherwise support it.

6.2 Procedures

Consideration of residential care occurs where circumstances indicate conditions for residential care are met. This arises through existing assessment and planning processes and is informed by changes in an individual's needs, risks, or support arrangements over time.

CLDS relies on the Supports Intensity Scale, together with professional judgment and information available through individual planning and support planning processes. These provide the basis for understanding the individual's support needs, risks, strengths, and the capacity of current living arrangements and supports to meet those needs safely and consistently.

In all cases, the assessment must confirm whether the individual requires care, supervision and accommodation. If any one of these elements is not required, residential care is not appropriate.

Where a determination has been made regarding residential care, the decision is recorded in accordance with departmental case management standards. Documentation will clearly reflect the rationale for determining whether residential care is required or whether the individual's needs can be met through other service arrangements.

Residential care is an ongoing support expected to be used. Where an individual is not meaningfully accessing or is frequently absent from the residential care facility, the suitability of this model for the individual must be reviewed and alternative arrangements must be explored.

Where residential care is established, the need for ongoing supervision is presumed to be met. However, the level of supervision required should be reviewed over time to identify opportunities to increase independence through an approved [Individualized Support Plan](#), in accordance with the [CLDS – Individualized Support in Residential Care Facilities](#) policy.

7.0 Policy Documents

[CLDS – Individual Planning Policy](#)

[CLDS – Individualized Support in Residential Care Facilities](#)

[CLDS – Support Plan Policy](#)

[CLDS – Supports Intensity Scale](#)

8.0 Resource Documents

[CLDS – A Guide to Completing My Support Plan](#)

[CLDS – Individual Planning Template](#)

[CLDS – Individualized Support Plan](#)

[CLDS – My Support Plan Template](#)