



Emergency Planning Compliance Assistance Module



RHRA

Retirement
Homes
Regulatory
Authority

This Compliance Assistance Module is designed to assist operators in understanding the requirements of select portions of the Act and Regulation. It is not, and does not replace, the home-specific training that is required by the Act and Regulation. *Retirement Homes Act, 2010 and Ontario Regulation 166/11.*

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The RHRA has created Compliance Assistance Modules (CAM) to provide licensees with clarity on our expectations related to compliance with the *Retirement Homes Act, 2010* (the Act) and Ontario *Regulation 166/11*.

Please note: Information, directions, and recommendations included in the CAMs are for general assistance only, and should be read in conjunction with the *Act* and Regulation. The CAM covers only select aspects of the *Act* and Regulation, and in the event of any conflict between the CAM and the *Act* and/or Regulation, the *Act* and/or Regulation prevails.

The CAM may be changed at any time without notice.

Licensees should consult the Act and Regulation for current legislation and compliance requirements.

The CAMs do not constitute legal advice and users should consult their own legal counsel for the purposes of interpreting the Act and Regulation.

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Introduction

Welcome to the RHRA *Compliance Assistance Module on Emergency Planning*.

This program has three main purposes:

- To provide you with basic information regarding Ontario's legal, regulatory, and inspection framework for the operation of retirement homes
- To provide guidance regarding emergency planning
- To present some familiar, day-to-day scenarios to test your understanding of emergency planning requirements

Applying what you learn in this program will help you comply with legislated requirements concerning emergency planning.

Emergency Planning

In a retirement home, emergencies that pose a risk of harm to residents can happen in many forms. A fire, violent outburst, chemical spill, flooding, medical emergency, loss of an essential service or a missing resident – these are a few emergencies that could befall a retirement home on any given day.

At any given time, is your retirement home prepared and ready to safely manage an emergency event?

Do all staff members know their role and responsibilities? Do they know what to do during an emergency evacuation? Or after an evacuation has happened?

Does your retirement home have a documented, accessible emergency plan that provides answers to all of these questions?

In Ontario, every retirement home must.

In the event of an emergency, resident safety is a top priority. Having a plan that responds to emergencies is required by law.

Under the [Retirement Homes Act, 2010 \(the Act\)](#) and [Ontario Regulation 166/11 \(the Regulation\)](#), every home must ensure there is an emergency plan in place and that the emergency plan meets all legislative requirements.

The Retirement Homes Regulatory Authority (RHRA) and the Act and the Regulation require all licensed retirement homes to be prepared to respond to emergencies effectively, with resident safety a priority. To meet this objective, the RHRA has identified critical compliance requirements. To support homes in achieving compliance essential to resident safety during emergencies, the RHRA offers this Emergency Planning Compliance Assistance Module, or CAM, which will help build understanding of:

- Retirement home obligations related to the preparation and maintenance of an emergency plan
- What needs to be in an emergency plan
- How and why a plan needs to be customized for each home
- Related training, testing and record-keeping requirements
- Helpful resources available for further learning in this area

About this CAM

This Compliance Assistance Module is intended to assist operators in complying with specific emergency plan provisions of the Act and the Regulation for which lack of compliance gives rise to the greatest risk of resident harm.

This module provides explanations, definitions, and examples of practices and procedures essential to emergency plan compliance. Key elements of emergency planning are presented, including how retirement homes should:

- Create its emergency plan
- Collaborate with community partners and partner facilities
- Train staff and volunteers, and
- Test the emergency plan

Three emergency plan-related scenarios are also presented as an opportunity to apply information learned.

Please review all the information within this module.

Following this module, you may complete a short assessment to verify your understanding of emergency plan compliance requirements.

Emergency Plan – What & Why

Emergency Plan – What does it mean?

Let's first consider what an emergency plan is.

Simply put, an emergency plan provides clear direction on how staff and volunteers, as applicable, should respond in the event of an emergency either in the home or in the community.

It is important to note that a retirement home's emergency plan is not the same as a Fire Safety Plan. While a Fire Safety Plan may compose *part* of the home's emergency plan, having an approved Fire Safety Plan does not mean that the home's emergency plan is complete.

Please refer to Fire Safety Planning Guidelines for Residential Care Facilities in the [Resources](#) section for information on Fire Safety Plans.

An emergency plan requires a separate written document and related processes that maximize the preparedness and response of staff and volunteers, as applicable, in various emergency situations.

Emergency situations that must be addressed within every home's emergency plan are: evacuations, violent outbursts, a missing resident, loss of an essential service or medical emergencies. Fires, community disasters, chemical spills and bomb threats must also be addressed as applicable.

An emergency "in the community" is an incident or event within the surrounding area that might affect the home. Examples of community disasters include flooding or other weather events, train derailments or fuel leaks.

Ontario legislative requirements use "emergency plan" to refer to both a written plan and to certain requirements the home must meet with respect to the plan, such as making arrangements with community agencies and partners and testing the plan.

In other words, it's not enough to have just a written emergency plan.

To be compliant, preparation of the plan must involve consulting with community partners that will be involved in responding to an emergency. And, regular review and testing are required to verify the plan and its elements are relevant and up-to-date.

To achieve compliance, a home must properly create its emergency plan as well as collaborate, train and test in relation to its emergency plan.

The Importance

The *Retirement Homes Act, 2010* and Ontario Regulation 166/11 set out the legal requirements that homes must meet.

In addition to being a legal requirement for all homes, the importance of a compliant emergency plan from a practical and resident-safety perspective cannot be over-emphasized.

A compliant emergency plan means that staff members are prepared for emergency situations. They know what to do when an emergency happens.

It means that the risk to residents is reduced in emergency situations. Resident and staff safety is protected. **Every** day.

Emergency Plan Compliance

Key Elements

Emergency plan compliance encompasses how a home:

- Creates the home's emergency plan
- Collaborates with community agencies and partner facilities, and
- Trains staff and volunteers

Compliance also involves how the home tests and updates the plan.

CREATE

In this section, you will learn about what is involved with creating a retirement home emergency plan in Ontario.

In Writing / Digital

A home's emergency plan must be in writing and must set out the protocols and procedures required to address fires, evacuations, medical emergencies, violent outbursts, a missing resident and loss of an essential service as well as strategies to address any hazards and risks that exist within the home and its local community.

All retirement homes, regardless of their population size, are required to have a written emergency plan that explains how the home will respond to emergencies efficiently, with resident safety a priority. The Regulation states that homes with more than 10 residents are required to have emergency plans dealing specifically with fires, community disasters, violent outbursts, bombs, medical emergencies, chemical spills, situations involving a missing resident, and loss of one or more essential services.

An emergency plan may be digital. It must be created in a readable, useable format that can be readily produced.

Customized

An emergency plan must be customized to reflect the home's circumstances and must make sense in that context. A generic or template document is not compliant.

For example, the emergency plan should reflect the home's location, its facility structure and layout, its staff job titles, staffing level, established lines of authority and its communications system. Examples of potential areas to consider when creating an emergency plan include:

- Does the home have an elevator?
- Where are the stairwells and emergency exits located in the home?
- Does the home have a working intercom or annunciator system?
- How will those things factor into an emergency? What is the location of the home's designated emergency evacuation meeting place? Where are its emergency supplies stored?

Any special circumstances within the home or in the surrounding vicinity or community should also be specified and addressed in the plan.

Special Circumstances

Special circumstances that should be addressed in a home's emergency plan include any hazards or risks within the home, in the surrounding vicinity or community.

For example, a home located in a floodplain could experience a flood. Or, a home near a fuel storage facility could experience an emergency if there is a chemical spill or a fuel leak.

An emergency plan must reflect the specific circumstances of the home and must detail emergency response strategies needed to address any existing hazards or risks.

Knowledge Check

When preparing its strategies to address hazards and risks, where should a retirement home focus its efforts?

- A) On any and all hazards and risks in Ontario
- B) On obvious hazards and risks that are relevant to the home or the community
- C) Only on existing hazards and risks in the home

Feedback

Correct answer is B.

The emergency plan must identify hazards and risks within the home or the community that could cause an emergency.

Homes may also wish to consider how frequently such hazards and risks arise, how severe their impact can be and which hazards and risks pose the greatest threat to the home.

The Government of Ontario provides online information resources to help with hazard identification and risk assessment. To view these resources, view the [Resources](#) section.

Other resources may exist through your industry association.

Emergency Response Requirement

As mentioned, a retirement home's written emergency plan must set out protocols and procedures that describe how the home will respond to emergencies, including the evacuation plan.

When creating the emergency plan, whoever is developing the plan must collaborate with community partners to arrange for and confirm their involvement. Consultation requirements will be examined later in this module.

Procedures and Protocols

Protocols outlined in the emergency plan should refer to the specific building layout and features and make sense in the event of minimum staffing. If the plan does not specifically match the circumstances of the home, it will not be effective at the time of an emergency.

For homes with more than 10 residents, the emergency plan must explain:

- What triggers activation of the emergency plan
- Specific staff roles and responsibilities
- The lines of authority to be followed in the case of an emergency, and
- The communications plan

Homes of all sizes must include in their emergency plan:

- An evacuation plan, and
- The inventory and location of available resources, supplies and equipment required for the emergency response, such as flashlights, batteries, reflective safety vests and resident identification labels

Emergency Evacuation Plan

A home's emergency plan must include a thoroughly prepared evacuation plan that specifies:

- Steps to be taken to evacuate the home of its residents, staff and others in the home, and
- A system to locate the whereabouts of all residents in the event of an evacuation

The evacuation plan should consider:

- Who oversees the evacuation
- Who assists residents needing help to leave the building
- The designated meeting place where people will regroup immediately after the evacuation
- Who takes attendance at the regroup meeting place
- What to do if someone is missing, and
- The possibility of resident relocation and transportation in case the home becomes uninhabitable for some length of time

If the situation requires relocation, when planning for adequate accommodations homes may consider identifying multiple locations depending on the care needs of individual residents as well as assessing the amount of time the location can house the residents. It may also involve assessing the ability for a resident's family to manage the care needs. Also, consider whether the evacuation plan takes seasonal needs and possible weather conditions into account.

While not required under the Act, it is recommended that the RHRA is informed of any evacuations.

Posting Requirement

Compliance also requires that fire and evacuation procedures be posted in a conspicuous and easily accessible location in the home. In this manner, the home must post schematics or written instructions to explain:

- The measures to be taken in case of fire, and
- The procedures to be followed in the case of an evacuation

This information must always be easily accessible.

Posting emergency procedures under the Fire Code meets these requirements as long as an explanation of the procedures to follow in an evacuation is included.

Knowledge Check

A retirement home's written emergency plan should set out how the home would respond to medical emergencies, fire, community disasters, violent outbursts, bomb threats, chemical spills, a missing resident and loss of an essential service or services.

True / False

Feedback

True, in that homes with more than 10 residents must address all emergency situations shown on screen in their emergency plan. The RHRA recommends that to be fully prepared, all retirement homes, regardless of the number of residents, prepare protocols and procedures to address all of these emergency situations.

COLLABORATE

In this section, you will learn about how the retirement home needs to collaborate with community agencies and partner facilities as part of its emergency planning process.

Community Partnership Requirement

Emergency plan compliance requires that the home consults with relevant community agencies and partners who will be involved in responding to an emergency during the development of the emergency plan to make necessary arrangements and that at least an annual review is conducted to ensure all arrangements remain current.

Consult

When preparing its emergency plan, the home must consult with relevant community agencies, partner facilities and other resources that may be involved in their emergency response plans.

Consultation ensures that the home's planned responses align with the capabilities and / or the response of agencies and partners that would need to assist the home during an emergency event. For example, consultation with the local police department for their input on how to respond to missing residents, aggressive persons or intruders would help a home understand how the police department's resources and response times might impact its emergency planning.

It is important to note that if there is any inconsistency between a provision in the Fire Code, under the *Fire Protection and Prevention Act, 1997* and a provision in a home's emergency plan, the Fire Code will override the emergency plan to the extent of the inconsistency. This reinforces the value of consulting with community agencies, such as the local fire department.

Also important are annual consultations with relevant partner facilities, some examples of which are shown onscreen, which are necessary to plan arrangements for temporary accommodations for residents should the need arise.

Examples of potential partner facilities:

- Other retirement homes
- Long-term care facilities
- Hotels/motels
- Community centres
- Religious centres/facilities
- Local hospitals and clinics
- Municipal heating/cooling stations

Identify

Consultation also enables the home to identify what community agencies and partners will be involved in an emergency response. Community agencies and partners, such as those shown below in the list of examples, include any contract service providers that would be contacted to provide emergency supplies or services for the wellbeing of residents.

Services to be maintained in the event of an emergency include accommodations, temperature control (to avoid extreme temperatures), access to medication, food and medical equipment and transportation to an alternate facility if required.

The emergency plan must identify and document which community agencies and partner facilities will be involved in the emergency response, their contact information and the

arrangements made, including what services and supplies each of the agencies will provide. Arrangements will be dependent on the location and resources of the home.

Within an emergency plan, evidence of arrangements made with and agreed to by community agencies and partners can be in the form of an email communication or other written documentation. Verbal arrangements would not be considered compliant.

Examples of Community Agencies and Partners:

- Local Fire Department
- Local Police and Ambulance
- Public Utility Service Providers
- Ontario Health Teams (OHTs)
- Local Health Integration Network (LHIN)
- Local Hospitals and Clinics
- Community Services Associations
- Canadian Mental Health Association
- Canadian Red Cross
- Salvation Army
- Local Community Centres
- Local Senior Service Organizations
- Pharmacy
- Food Suppliers
- Generator
- Elevator Service Provider
- Plumber
- Utility Providers
- Alternate Accommodation
- Transportation Providers

Review & Update

Any time the home becomes aware of changes to the information relating to agencies and partners, the written emergency plan should be updated. At a minimum, the home must review the emergency plan annually. Update contact information for agencies and partners, as well as the home's arrangements with them, as required, and at least annually.

Furthermore, the review process should ensure that partnerships continue to be relevant and appropriate considering the home's staffing levels and any changes in the home or community. Examples of changes that may impact partnership arrangements may be:

- An increase in the number of residents who will require assistance in an emergency
- If the home has switched to a different utility provider
- Lessons learned from emergency situations or testing during the year

Knowledge Check

A home's emergency plan requires consultation with relevant community agencies and partner facilities as well as descriptions of the arrangements and up-to-date contact information.

True / False

Feedback

This statement is **true**.

To be compliant, the home's emergency plan requires that consultations be done and community partnerships be made as described in this section and the statement onscreen.

TRAIN

In this section, you will learn about emergency plan-related training that is required for the retirement home’s staff and volunteers.

Training Requirement

Staff who know what to do in the event of an emergency are vital to reducing risk to residents and increasing the effectiveness of outside responders. The more staff understand the expectations and their roles, the better prepared they will be.

Staff must be trained on the emergency plan and its elements. All volunteers should at a minimum be given an overview of the emergency plan and understand the role and responsibilities of volunteers in the emergency scenarios that the plan is required to address.

Staff

Staff working in the home must have received training on:

- Fire prevention and safety
- The emergency evacuation plan
- The emergency plan, and
- Infection prevention and control

Training should occur during orientation and at least annually within each calendar year. Training records must be kept in a readable and usable format that is easily accessible.

It is important to note that this Compliance Assistance Module, also called CAM, is designed to build understanding of emergency planning compliance. Completion of this CAM does not fulfill the emergency plan-related staff training compliance requirement.

Volunteers

Volunteers must be trained in how to ‘apply the emergency plan’. They should receive an overview of the plan and understand the role and responsibilities of volunteers in the emergency scenarios that the plan is required to address.

TEST

In this section, you will learn about how the retirement home must test its emergency plan.

Testing Requirements

Compliance requires thorough and regular review and testing of the emergency plan.

Emergency Plan & Scenarios

On an annual basis, at minimum, the home must test the emergency plan, including testing of the responses and arrangements made with the community agencies, partner facilities and resources involved in four emergency scenarios: loss of essential services, a missing resident, violent outbursts and medical emergencies.

Testing may be a mock drill, review of a real-life incident or a 'tabletop' exercise. The tabletop exercise should be comprised of a specific scenario where the involved staff work through their roles and responsibilities in the given scenario. It does not need to involve performance of actual duties or a functional simulation exercise.

The testing process must involve communication with community agencies and partner facilities that would be involved in responding to the four scenarios to confirm the arrangements made for each emergency response. This provides an opportunity to confirm the arrangements and ensure that the documented contact information remain relevant and current. Homes should not contact 911 as part of their testing of the emergency plan.

The home should document descriptions of how the annual testing was done, who was involved and present during the testing, and the date or dates of the testing process and activity. If issues or gaps are identified during the test, necessary changes to the plan can be made. Keep written evidence of any changes made to improve the emergency plan following the test.

It is important to note that this testing requirement is not the same as the monthly fire drills conducted by supervisory staff that the home must carry out under the Fire Code. These monthly fire drills will not meet the requirement that testing for all four emergency scenarios be completed.

Emergency Supplies & Equipment

Emergency supplies and equipment that may be required for the emergency response must be regularly tested to ensure they are in working order. Supplies that are 'supposed to be there' or 'should have been working' are of no use in the event of a real emergency.

Conduct frequent checks to ensure that supplies and equipment are in the proper location and functional. For example, ensure flashlight batteries are charged, that there is fuel for the home's generator and that food, water and medical supplies have not expired.

Written records of these regular tests and checks should be kept.

Planned Evacuation

At least once every two years, the home must conduct a planned evacuation of the home.

The planned evacuation must be a full evacuation of all residents from the building. This may be different from what is required under the Fire Code because full evacuations during emergency situations may be required for an emergency other than fire. For residents who would be at risk during this planned evacuation, proxies (stand-ins) may be used.

The planned evacuation will confirm that all involved know how to efficiently and safely evacuate the building and what should happen upon arrival at the designated regroup meeting place.

Written records of the planned evacuation should be kept. The home should describe how and when the planned evacuation was carried out, the rationale for using stand-ins (if applicable) and the outcomes and lessons learned. The home should also document any changes made to improve the emergency plan following the planned evacuation event.

Evacuation: What Does and Does Not Comply

Unplanned full evacuations for an actual emergency or full evacuations for a fire drill would meet this planned evacuation compliance requirement.

However, fire drills in which people remain in the building do not meet this requirement. The monthly fire drills that must be completed by supervisory staff, according to the Fire Code, does not meet this requirement.

Summary

This concludes the overview of emergency planning compliance requirements. This CAM is not a substitute for understanding the obligations under the Act and Regulation. Review all legislative requirements under the Act and the Regulation to fully understand all obligations. And, revisit this Emergency Planning Compliance Assistance Module at any time to build further understanding of the compliance requirements.

Scenario Analysis: Lessons Can Be Learned

Valuable lessons can be learned and best practices developed by analyzing day-to-day scenarios. In this section, you will review three scenarios to assess and identify compliance issues. Read through each scenario and select the best response.

Create & Collaborate

MNO Corporation Inc. has recently purchased an existing retirement home called ABC Retirement Living. MNO's license application has been approved by the RHRA. They intend to continue to operate under the name ABC Retirement Living.

MNO will be reducing the number of staff in the home and using different job titles. MNO will be able to use the exact same emergency plan as the previous licensee.

Is this last statement true or false?

Feedback

The statement is **false**.

MNO may be able to use parts of the existing emergency plan but will need to amend it to reflect the changes in staffing levels and lines of authority.

In addition, MNO should collaborate with community agencies and partner facilities to ensure the plan aligns with those agencies involved in responding to an emergency, that agreements remain in effect, that contact information is up-to-date and that the arrangements with partner facilities continue to meet the needs of the home in the event of an emergency.

Train

The retirement home has been operating for three years. Most staff at the home were trained on fire prevention when they were hired and what to do in the event of an evacuation. Upon inspection, the inspector determined there was non-compliance relating to staff training. To be compliant, the home should have:

- a) Trained staff on an annual basis
- b) Trained staff on the entire emergency plan
- c) Ensured staff were trained during orientation when starting work in the home
- d) All of the above

Feedback

The correct answer is **D - all of the above**.

Test

A resident became irate in the dining room. The resident was being physically aggressive towards staff and residents resulting in two residents being injured. The staff at the home called emergency responders and followed the emergency plan to assist in dealing with the residents and the situation at hand.

The incident was documented, and management debriefed with the involved staff, analyzed the response and amended the emergency plan to reflect changes they put in place as a result. The home cannot use this as evidence of compliance for testing that part of the emergency plan.

Is the last statement true or false?

Feedback

The statement is **false**.

A retirement home can use an actual event or a table top exercise as evidence of testing the emergency plan. The testing needs to be done with the inclusion of community agencies and partner facilities involved in responding to the emergency, as set out in the plan, and completed within 12 months of the last testing date.

Conclusion

You have now completed the information and scenario analysis sections of this Emergency Planning Compliance Assistance Module.

To maximize your home's emergency preparedness and response and, in turn, the safety of your home's residents, always be mindful of the compliance requirements and your responsibilities.

Revisit this module as often as needed to refine your understanding of emergency planning obligations under the Retirement Homes Act, 2010, and the critical compliance requirements.

To verify your understanding of information presented in this Emergency Planning Compliance Assessment Module, please complete this module's Assessment that begins on the next page.

Assessment

1. When posted in a conspicuous and easily accessible location in the home, which of the following comply with the requirements for posting emergency plan-related information?
 - A) Written instructions or schematic explanation of the measures to be taken in case of fire
 - B) Written instructions or schematic explanation of the procedures to be followed in the case of an evacuation
 - C) Printed Fire Code
 - D) Both A and B

Feedback: The correct answer is **D**. Please review the section titled [Posting Requirement](#) to review these requirements.

2. A home is required to ensure arrangements with partners and partner contact information remain current and relevant. To this end, a home must review arrangements with partners at least annually and update the emergency plan, as needed.
 - True / False

Feedback: The correct answer is **True**. Please review the section titled [Community Partnership Requirement](#) to review these requirements.

3. How often is a home required to review and update the emergency plan?
 - A) Semi-annually
 - B) At least annually
 - C) Every 2 years
 - D) After an emergency event

Feedback: The correct answer is **B**. Please review the sections titled [Community Partnership Requirement](#) and [Testing Requirements](#) to review the **Review, Update and Testing** requirements.

4. Which of the following areas must staff working in the home receive training on during orientation and on an annual basis?
 - A) Fire prevention and safety
 - B) The emergency evacuation plan
 - C) The emergency plan
 - D) All of the above

Feedback: The correct answer is **D**. Please review the section titled [Training Requirements](#) to review the [Staff Training](#) requirements.

5. This Emergency Planning Compliance Assistance Module does not fulfill the compliance requirement for staff training on the home's emergency plan.

True / False

Feedback: The correct answer is **True**. Please review the section titled [Training Requirements](#) to review the [Staff Training](#) requirements.

6. How often is the planned evacuation required?

- A) Semi-annually
- B) Annually
- C) At least once every 2 years
- D) After an emergency event

Feedback: The correct answer is **C**. Please review the section titled [Testing Requirements](#) to review the [Planned Evacuation](#) requirements.

Still Have Questions?

Well done! You have successfully completed the RHRA Compliance Assistance Module on Emergency Planning. Of course, your learning will continue as you become more familiar with your home’s emergency planning process, share experiences among staff members, and work through new situations.

If you would like additional information regarding the *Retirement Homes Act, 2010* and Regulations, inspections, educational resources, emergency planning, or other related topics, please reach out to the RHRA in one of these ways:

RHRA website: www.RHRA.ca

Email: info@RHRA.ca

Telephone: 1-855-275-RHRA (7472)

You can also use this Compliance Assistance Module as a reference tool.

We hope this helps you understand and improve compliance with the Act. Please let us know if you found this learning program helpful by completing a short survey.

We value your feedback! Please complete [the survey](#).

Glossary

Community Agencies / Partner Facilities / Resource Providers

Community agencies and partner facilities and resources include organizations and/or service providers that might be contacted to provide emergency supplies, assistance, or services for the wellbeing of residents. Examples include:

- Local Fire Department
- Local Police and Ambulance
- Public Utility Service Providers
- Ontario Health Teams (OHT)
- Local Health Integration Network (LHIN)
- Local Hospitals and Clinics
- Community Services Associations
- Canadian Mental Health Association
- Canadian Red Cross
- Salvation Army
- Local Community Centres
- Local Senior Service Organizations
- Pharmacy
- Food Suppliers
- Generator
- Elevator Service Provider
- Plumber
- Utility Providers
- Alternate Accommodation
- Transportation Providers

Examples of partner facilities might include:

- Other retirement homes
- Long-term care facilities
- Hotels/motels
- Community centres
- Religious centres/facilities
- Local hospitals and clinics
- Municipal heating/cooling stations

Examples of resource providers:

- The home's pharmacy provider (if applicable)
- External care providers
- Temporary workers, such as fill-in nurses/personal support workers
- Emergency Management Ontario's public warning service

Emergency or Incident ‘in the Community’

An incident or event within the area of the home that might affect the home. For example, a retirement home near a railway used to transport oil, or a fuel storage facility should consider how staff will respond if there is a derailment or a fuel leak. A home located in a floodplain should include a response to a flood in its emergency plan.

Hazards and Risks

Examples of hazards and risks might include:

- Technological hazards (i.e. train derailments, power plant emergencies) that could occur in the vicinity of the retirement home
- Natural hazards such as extreme temperatures or an epidemic/pandemic
- Damage to the home as a result of a natural disaster, or a flood or fire in the home
- Fire hazards such as electrical equipment or residents who smoke in the home
- Loss of essential services (i.e. loss of power following a severe ice storm, or loss of water supply due to municipal water contamination)

Resources

Red Cross Canada / Canadian Emergency Assistance	www.redcross.ca
Emergency Management	www.emergencymanagementontario.ca
Hazard Identification and Risk Assessment (HIRA) Workbook	https://www.emergencymanagementontario.ca/english/emcommunity/ProvincialPrograms/HIRA/Guidelines/main.html
Ministry of Long-Term Care	www.health.gov.on.ca
Emergency Preparedness	www.ontario.ca
Ontario Regulation 166/11	www.ontario.ca/laws/regulation/110166#BK33
Retirement Homes Act, 2010	https://www.rhra.ca/wp-content/uploads/2018/10/RHRA_Plain_Language_Guide_final-2.pdf
Office of the Fire Marshal	https://www.mcscs.jus.gov.on.ca/english/FireMarshal/OFM_main.html
Fire Safety Planning Guidelines for Residential Care Facilities	https://www.mcscs.jus.gov.on.ca/english/FireMarshal/Legislation/TechnicalGuidelinesandReports/Residential_care_guideline.html



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