

This document clarifies the new requirements under Emergency Planning in *Ontario Regulation 166/11*, as part of the *Retirement Homes Act, 2010*, which took effect on March 16, 2022. The information below supplements the current Compliance Assistance Module on Emergency Planning.

You can find all Compliance Assistance Modules here: <https://www.rhra.ca/en/cams/>

<b>New Requirements</b>	<b>Description</b>	<b>RHRA Requirements</b>
<b>STAFF TRAINING</b>		
Section 14 (2.1) and (2.2)	<p>Exemptions for full training on the Emergency Plan require the person to meet all the following three criteria <b>and</b> be monitored and supervised by the licensee according to the home’s written policies:</p> <ol style="list-style-type: none"> <li>1. The person works in or provides services to the home as part of a contract or agreement with the licensee. The contract may be with the person attending the home or an organization that employs the person.</li> <li>2. The person only provides occasional maintenance, repair services, entertainment, religious, or recreational services to the home.</li> <li>3. The person does not provide direct care to residents.</li> </ol> <p>In addition to the criteria listed above for a person to be exempt, the licensee must also provide the person with the following information:</p> <ul style="list-style-type: none"> <li>• An internal contact person for emergencies, or who at the home to report an emergency to initiate a response,</li> <li>• A list of potential emergencies, risks and hazards that are considered in the overarching plan,</li> <li>• How the person will be made aware if there is an emergency in the home, and</li> <li>• Steps the home will take in case of a fire and/or evacuation of the home.</li> </ul>	<p>RHRA expects the required information to be provided prior to or at the start of the person’s work in the home.</p> <p>RHRA recommends that licensees provide the required information on ‘fact sheets’ specific to each area. These fact sheets will make production and distribution more streamlined than providing entire versions of the policy, planning, or program documents. RHRA also recommends that licensees have copies of these fact sheets available for new persons as applicable.</p> <p>Licensees should consider the best location to have these fact sheets or similar documents readily accessible that makes sense for the home’s operations.</p>

## EMERGENCY PLAN TO INCLUDE EPIDEMICS AND PANDEMICS

Section 25(3)  
para. 1 (v.1)

At a minimum, licensees' emergency plans must include a section for epidemics and pandemics which includes:

1. The licensee's staffing contingency plan, which at a minimum should outline the following:
  - A process for evaluating skills and experience of staff to identify possible alternative roles;
  - Identifying staffing priorities and developing, modifying, and implementing redeployment plans (e.g., changing assignment of work based on skills, experience, availabilities, and training);
  - Changing the scheduling of work or shift assignments and collecting information about availabilities of staff for alternative shifts;
  - Employing extra part-time or temporary staff or contractors to meet current and increased care needs of residents and maintain continuity of operations (such as through standing arrangements with staffing agencies in anticipation of an outbreak);
  - Using volunteers to perform work;
  - Using family caregivers or substitute decision makers, as appropriate, to support their resident's emotional or physical needs;
  - Providing appropriate training or education as needed to staff and volunteers for redeployment and to ensure the care and safety of residents.
2. Information about the licensee's PPE supply chain(s) and how the licensee procures PPE.
3. Information about proper PPE usage, and where unexpired PPE and other resources are readily available and tested to respond to an outbreak.
4. A process to manage staff who may have been exposed to an infectious disease.
5. Information about the requirement to report outbreaks and related information to Public Health and RHRA.
6. The licensee's key Public Health and IPAC contacts.

RHRA expects licensees to complete and implement this section of their emergency plans in line with the standards described.

RHRA also expects licensees to develop and annually update emergency plans in line with evidence-based practices.

	<ol style="list-style-type: none"> <li>7. A process to establish an Outbreak Management Team with the authority and responsibility for instituting changes in practice and any other actions required to manage and control an epidemic or pandemic related outbreak. For small homes with limited staff, this team may be a single individual.</li> <li>8. Instructions to the licensee’s staff that they must follow any guidance, advice, or recommendations from the Chief Medical Officer of Health, local Public Health, and any other provincial direction applicable to the licensee.</li> <li>9. How to take precautions in line with direction of the Chief Medical Officer of Health or local Public Health, such as isolation of residents, cohorting of residents and staff, enhanced IPAC measures, etc., while ensuring resident rights and safety are maintained.</li> <li>10. A communications plan to keep staff, residents, and families informed about the status of any outbreak in the home and to enhance IPAC vigilance, including frequent and ongoing communication during outbreaks.</li> <li>11. Any information obtained through consultation with the local Public Health Unit that will be involved in responding.</li> <li>12. Reference to the licensee’s IPAC program/procedures.</li> </ol>	
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**TEST THE EMERGENCY PLAN INCLUDING ARRANGEMENTS WITH PARTNERS FOR EPIDEMICS AND PANDEMICS ON ANNUAL BASIS**

<p>Section 24 (5)(a) (iii.1)</p>	<p>To satisfy this requirement, licensees may use either actual outbreak incidents or table-top exercises if the incident or exercise has reasonably triggered their full plan relating to epidemics and pandemics.</p> <p>As an example, a licensee could use a previous outbreak incident from the current year, if there is evidence the outbreak resulted in the licensee following appropriate escalation protocols, engaging Public Health, implementing staffing contingency plans, assessing PPE resources, and ensuring their PPE provider could provide supply on short notice as needed. Similarly, a licensee could coordinate an annual table-top exercise and walk through these steps in full, including contacting relevant resources such as those set out in their staffing contingency plan to ensure they would be available to provide coverage if needed.</p>	<p>Licensees should document descriptions of how the annual testing was conducted, 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 should be made.</p> <p>Licensees should keep written evidence of any changes made to improve the emergency plan following the test.</p>
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## TEMPORAY CLOSURES

Section 63

Only report temporary closures of the retirement home if there is some disruption to residents' ability to reside at the home or receive services in the home. It is not intended for licensees to report minor service changes (e.g., dining room closure) where the licensee is still able to provide the service in a different manner.

- A temporary closure of the retirement home.
- A temporary closure of part of the retirement home if the closure affects a resident's accommodation or the care services or other services provided to a resident.
- An unplanned evacuation of residents from the retirement home for a period of greater than six hours.
- A temporary relocation of the retirement home or part of the retirement home to one or more other premises.

To satisfy this requirement, licensees must inform RHRA of changes relating to any of the areas listed under this section as soon as reasonably possible.

In the case of temporary closures or unplanned evacuations of homes, RHRA strongly encourages that licensees report immediately, as RHRA may be able to provide support in collaboration with community partners, or to residents via RHRA's Emergency Fund.