

# **STRATHMERE LODGE**

## **Emergency Management Program**

# **FIRE PLAN**

### **CODE RED**

**Original Date:** Jan. 2018

**Reviewed/Revised Date:** August 2018, Aug. 2019, Aug. 2020, Aug. 2021, May 2022, Feb. 2025, Aug. 2026

# FIRE SAFETY PLAN

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## **INTRODUCTION**

The Ontario Fire Code, Section 2.8, requires the establishment and implementation of a Fire Safety Plan for every building containing a Group A or B occupancy and to every building required by the Ontario Building Code to have a fire alarm system.

The Fire Protection and Prevention Act, 1997, Part VII, Section 28, states that in the case of an offence for contravention of the fire code, a corporation is liable to a fine of not more than \$100,000 and an individual person, a director or officer of a corporation is liable to a fine of not more than \$50,000 or imprisonment for a term of not more than one year or both.

This plan is required to be acceptable to the Chief Fire Official.

The implementation of a Fire Safety Plan helps to assure effective utilization of life safety features in a building to protect people from fire. The required Fire Safety Plan should be designed to suit the resources of each individual building or complex of buildings.

The Fire Safety Plan is also used to provide training to the building's supervisory staff who must have received instructions in the fire safety procedures as described in the plan before they are given any responsibility for fire safety. Supervisory staff shall be available on notification of a fire emergency to fulfill their obligation as described in the fire safety plan, although it is not necessary that supervisory staff be in the building on a continual basis.

## **INFORMATION FOR BUILDING OWNERS, PROPERTY MANAGERS AND OTHER PERSONS CONTROLLING PROPERTIES**

The Fire Code, Ontario Regulation 213/07 as amended is a provincial regulation made under Section 18a of the Fire Marshal's Act. This Code requires the owner to be responsible for carrying out the provisions of the Code, and defines "owner" as "any person, firm or corporation controlling the property under consideration". Consequently, the owner may be any one of or a combination of parties, including building management, maintenance staff, and tenant groups.

It is advisable that you obtain your own copy of the Fire Code and the Fire Protection and Prevention Act (FPPA). These may be purchased from the Government of Ontario Book Store/Service Ontario Publications at 777 Bay Street, Toronto, Ontario M7A 2J3, toll-free phone: 1-800-668-9938.

## Section 1 BUILDING PROFILE

### Building Information

Common Name of Building: Strathmere Lodge

Address: 599 Albert St. Strathroy Ontario

Municipality: Middlesex County

Postal Code: N7G 3J3

Number of Stories: 2

Number of Units: 160

Building Area: 120,000 square feet

Type of Building: Combustible or (Noncombustible)

Indicate which of the following activities take place in your building:

☐ Public Assembly

☒ Institutional (Hospital, Nursing/Group Home)

☐ Residential

☐ Mercantile/Retail

☐ Office (includes medical offices)

☐ Industrial

Indicate which of the above is the major part of your building is. Long Term Care

Describe in your own words the business operations taking place in your building:

Health Care (Long Term Care)

### Building Facilities

Do you have a parking garage?

Yes ☐ No ☒

Do you have an elevator?

Yes ☒ No ☐

Is there a firefighter elevator?

Yes ☒ No ☐

Do you have smoke control devices?

Yes ☒ No ☐

Do you have pressurized stairwells?

Yes ☐ No ☒

Is there interior roof access?

Yes ☒ No ☐

Where: from building and stairwells

Do all stairwells exit to the exterior? Yes ☒ No ☐ If no, explain

Laundry/Housekeeping/Dietary Chemicals

\*See MSDS Binder at Hickory Woods Communication Centre

### Building Access

☒ Lock Box

☒ Entry Code

☒ Alarm Company

Location: Front of building

### Onsite Building Information / Must be indicated on your building diagram

☒ Fire Safety Plan Revised Date: June 2025

Location: Hickory Woods Communication Center

Alternate: Park View Place Communication Center

☒ WHMIS Information

Location: Hickory Woods Communication Center

☐ Other

Location:

### Occupants

Residents/Tenants/Public: Residents

Total Number: 160

Daytime approx. Number: 160

Evenings approx. Number: 160

## Section 1 BUILDING PROFILE (continued) Staffing Levels

Supervisory:

Total Number: 15

Morning Shift: 15

Afternoon Shift: 5

Evening Shift: 2

Worker/Support Staff:

Total Number:

Morning Shift: 45

Afternoon Shift: 23

Evening Shift: 8

| <b>Keyholders</b>                                                                |                               | (Enter               |
|----------------------------------------------------------------------------------|-------------------------------|----------------------|
| keyholder information in the order of priority for contacting)/Person's Position |                               |                      |
| <b>1.</b>                                                                        |                               |                      |
| Name: Brent Kerwin                                                               | Phone: Res: (905)325-0102     | Cell: (519) 719-9987 |
| Position: Administrator                                                          | Bus: (519) 245-2520 Ext: 6222 |                      |
| Address: 115 Stevenson Ave London Ontario                                        | Fax: (519) 245-5711           |                      |
|                                                                                  |                               |                      |
| <b>2.</b>                                                                        |                               |                      |
| Name: Jeff Turnbull                                                              | Phone: Cell: (519) 317-2913   |                      |
| Position: Environmental Services Manager                                         | Bus: (519) 245-2520 Ext: 6244 |                      |
| Address: 33389 Charlton Rd; Ailsa Craig, ON                                      | Fax: (519) 245-5711           |                      |
|                                                                                  |                               |                      |

## Section 2 EMERGENCY LISTINGS / 24 HOURS A DAY

| <b>Ownership</b>                 |                      |                     |            |
|----------------------------------|----------------------|---------------------|------------|
| Building Owner: Middlesex County | Phone: Res: ( )      | Cell: ( )           |            |
|                                  |                      |                     |            |
| Bus: (519) 434-7321              |                      |                     |            |
| Address: 399 Ridout Street North |                      |                     |            |
| City: London                     | Postal Code: N6A 2P1 | Fax: (519) 434-0638 | Pager: ( ) |
| Email:                           |                      |                     |            |
| Email                            |                      |                     |            |

### Section 3 ALARMS & EVACUATION SYSTEMS

**Alarm Systems** (If no fire alarm is present in the building, leave this blank and go to the Fire Protection Devices section below) If fire alarm present, it must be indicated on building diagram.

X Main Fire Alarm Control Panel Location: Communication room # C006B (Basement)

X Remote Annunciator Location(s): Front Entrance, HW/SM/BC/PP/AG communication centers

**Type of Alarm (check the appropriate box below)**

☐ Single Stage    X Two Stage    X Interconnected Smoke Alarms    X Monitored

X Security/Intrusion    X Partial System    X Sprinkler System used as Fire Alarm

**Fire Protection Devices** (Check any that are present in your building)

☐ Smoke Alarms (Battery or hardwire in units)    X Emergency Lighting (Battery powered)

X Smoke Detectors (Alarm System)    X Carbon Monoxide Detectors

X Heat Detectors    X Fire Extinguishers

X Evacuation Communications System (PA)    ☐ Firefighters Voice Communication (Phones)

X Kitchen Hood Suppression System    ☐ Other

**Evacuation Information / Must be indicated on your building diagram**

X Areas of Refuge Exterior Location: Front (Visitors) parking lot

X Meeting Place Location: Great room (Rose Room)  
(Location tenants assemble after leaving building during evacuation)

X Re-entry Procedures: All clear by the Control Officer/Fire Department Official

### FIRE PROTECTION

**Water Supply**

Is there a fire hydrant within 90 meters of your building's front door? Yes X No ☐

**Sprinkler System**

Do you have a sprinkler system in your building? Yes X No ☐

If yes, does it cover your whole building? Yes X No ☐

|                                                                                                                                                                                                                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Sprinkler System (cont'd)</b>                                                                                                                                                                                                                                                                 |
| If you have a sprinkler system in your building, the following devices <b><u>must be indicated</u></b> on the diagram of your building: Fire Department Connection (Siamese), Sprinkler Control Room, Fire Pump(s), Main Control Valve, Isolation Control Valve(s), and Post Indicator Valve(s). |
| Is your sprinkler connected to the Fire Alarm? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                               |
|                                                                                                                                                                                                                                                                                                  |

|                                                                                                                                                                  |             |                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------|
| <b>Fixed Extinguishing System</b>                                                                                                                                |             |                        |
| Do you have a fixed extinguishing system in your building? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (If no, go to Utility Provisions) |             |                        |
| <u>Area Protected</u>                                                                                                                                            | <u>Type</u> | <u>Specify Details</u> |
| <input checked="" type="checkbox"/> Kitchen                                                                                                                      | NFPA 13A    | Kitchen Exhaust Hood   |
| <input type="checkbox"/> Spray Booth                                                                                                                             |             |                        |
| <input type="checkbox"/> Other                                                                                                                                   |             |                        |
| Extinguishing System connected to Fire Alarm System? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                         |             |                        |

# UTILITY PROVISIONS

|                                                                       |                                                              |                                         |
|-----------------------------------------------------------------------|--------------------------------------------------------------|-----------------------------------------|
| <b>Electrical, Utility &amp; Fuel Supplies (check all that apply)</b> |                                                              |                                         |
| <input checked="" type="checkbox"/> Water Main Shut off               | <input checked="" type="checkbox"/> Main Electrical Shut off |                                         |
| <input checked="" type="checkbox"/> Natural Gas Shut off              | <input checked="" type="checkbox"/> Fuel Oil/Diesel Shut off |                                         |
| <input checked="" type="checkbox"/> Emergency Generator               | Location: Front (West) of building                           |                                         |
| <b>Refuse</b>                                                         |                                                              |                                         |
|                                                                       |                                                              | <u>Sprinkler Coverage</u>               |
| <input checked="" type="checkbox"/> Garbage Room                      | Location: Basement                                           | <input checked="" type="checkbox"/> Yes |
| <input checked="" type="checkbox"/> Garbage Chute                     | Location: Basement                                           | <input checked="" type="checkbox"/> Yes |
| <input checked="" type="checkbox"/> Garbage Compactor                 | Location: Basement                                           | <input checked="" type="checkbox"/> Yes |
| <input checked="" type="checkbox"/> Garbage Exterior Storage          | Location: Back area by service entrance                      |                                         |

## EXITS

| Location of Exits / All exits including principal entrance for Fire Department response must be indicated on your building diagram |                                                  |
|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|
| Basement;                                                                                                                          |                                                  |
| 1.                                                                                                                                 | Rear at loading dock                             |
| 2.                                                                                                                                 | Rear from center stair adjacent to loading dock  |
| 3.                                                                                                                                 | Rear from staff dining room                      |
| 4.                                                                                                                                 | Front (west of front entrance) via outside stair |
| Ground Floor (level 1);                                                                                                            |                                                  |
| 1.                                                                                                                                 | Front entrance                                   |
| 2.                                                                                                                                 | End of Hickory Woods-Left corridor               |
| 3.                                                                                                                                 | End of Hickory Woods-Right corridor              |
| 4.                                                                                                                                 | Hickory Woods Dining Room                        |
| 5.                                                                                                                                 | End of Sydenham Meadows-Left corridor            |
| 6.                                                                                                                                 | End of Sydenham Meadows-right corridor           |
| 7.                                                                                                                                 | Sydenham Meadows Dining Room                     |
| 8.                                                                                                                                 | End of Bear Creek Left-corridor                  |
| 9.                                                                                                                                 | End of Bear Creek right-corridor                 |
| 10.                                                                                                                                | Bear Creek Dining Room                           |
| 11.                                                                                                                                | Community Garden (Adjacent to Chapel)            |
| Second Floor (level 2);                                                                                                            |                                                  |
| 1.                                                                                                                                 | End of Parkview Place to Stair-Left corridor     |
| 2.                                                                                                                                 | End of Parkview Place to Stair-Right corridor    |
| 3.                                                                                                                                 | End of Arbour Glenn to Stair-Left corridor       |
| 4.                                                                                                                                 | End of Arbour Glenn to Stair-Right corridor      |
| 5.                                                                                                                                 | Center stair from service corridor               |

## **Section 4 POSTED EMERGENCY PROCEDURES TO OCCUPANTS**

The actions to be taken by occupants in emergency situations will be posted on each floor and will read as follows

### **IF YOU DISCOVER FIRE**

- REMOVE RESIDENTS IN IMMEDIATE DANGER
- CLOSE DOORS BEHIND YOU
- SOUND THE FIRE ALARM
- CALL 911
- EVACUATE RESIDENTS FROM THE FIRE ZONE
- DO NOT USE ELEVATOR

### **IF YOU HEAR THE FIRE ALARM**

- DETERMINE AREA OF FIRE
- REMOVE RESIDENTS IN IMMEDIATE DANGER
- CALL 911
- EVACUATE RESIDENTS FROM FIRE ZONE
- DO NOT USE ELEVATORS

### **IF YOU ENCOUNTER HEAVY SMOKE**

- IT MAY BE SAFER TO STAY IN YOUR AREA
- CLOSE DOOR AND PLACE WET TOWEL AT BASE OF DOOR
- CROUCH LOW TO THE FLOOR IF SMOKE ENTERS THE ROOM
- IF TRAPPED CALL 911 AND WAIT TO BE RESCUED
- REMAIN CALM – DO NOT PANIC OR JUMP
- IF YOU ENCOUNTER SMOKE IN STAIRWAY USE AN ALTERNATE EXIT OR RETURN TO YOUR AREA AND CALL 911
- DO NOT USE ELEVATOR

A sticker or sign as shown above is affixed firmly to the wall at all fire alarm pull stations.

This building is equipped with a two stage fire alarm system.

In the event of an emergency, the fire alarm system is to be activated to alert all occupants, and the approved fire plan will take effect at that time.

The Fire Department is to be notified by telephoning 911, giving the correct address:  
**599 Albert Street, Strathroy Ontario**

## **Section 5 OWNER'S RESPONSIBILITIES & INSTRUCTIONS TO SUPERVISORY STAFF**

### **Fire Alarm Procedure;**

The fire alarm can be activated by either:

- 1) Heat and Smoke Detectors located in service areas, resident rooms, corridors and air ducts in the ceiling, through smoke or excessive heat.
- 2) Pull Stations located at every exit door.

**In response alarm bells will ring intermittently in all areas of the Home at a rate of 20 strokes a minute.**

**NOTE:** *Alarm bells ringing continuously at 120 strokes a minute signifies direction for a full evacuation of the Home, a procedure activated by the Emergency Control Officer. (see Evacuation)*

### **Definition of Fire Zone**

Annunciator Panels are located at the Front Entrance and at each Communication Centre.

When an alarm is activated the panel will display the area of the Home where the alarm has originated and considered the fire zone.

### **Notifying Staff**

On hearing the alarm, the charge nurse shall determine the fire zone from the annunciator panel and page three times:

**"ATTENTION STAFF. CODE RED ALERT. (name of zone)**

### **Calling the Fire Department**

The Charge Nurse shall:

- dial **911** and **ask for Fire**
- confirm our address as **599 Albert St. Strathroy**
- wait for call to be transferred to the Strathroy-Caradoc Police Dispatch
- advise police operator of our location - **Strathmere Lodge, 599 Albert St.**
- advise alarm status:

Fire alarm in (name location), and staff now investigating  
or, fire in progress or, false alarm

## **Section 5      OWNER'S RESPONSIBILITIES & INSTRUCTIONS TO SUPERVISORY STAFF (continued)**

### **Remote Alarm Transmission (backup to 911 service)**

- Alarms originating at the Lodge are sent directly to the Edwards offsite answering service. Edwards will respond by notifying the Strathroy – Caradoc Fire Dispatch non emergency 519-245-1300/emergency 911.
- Edwards will also call the Lodge to confirm the status of an alarm.
- Should it be necessary to call Edwards their number is 1 800 268 6870  
System# 31-3995

### **Handling False Alarms**

- Every alarm shall be treated as a fire alert until confirmed that no fire situation exists.
- Notification of a false alarm shall be given by the Charge Nurse to the Strathroy – Caradoc Fire Department Dispatch by calling at 245-1300
- The Charge Nurse shall notify staff and residents by paging twice:  
**“ATTENTION STAFF. CODE RED. ALL CLEAR”**

### **Administrator or Delegate**

- In the event of a fire after normal working hours, the Administrator or delegate shall be contacted by the Charge Nurse and briefed on the situation.
- Advise the Charge Nurse as required.
- If situation requires additional staff, initiate fan out system.
- In consultation with Strathroy – Caradoc Fire Department determine the need for full evacuation of the Home.
- Direct communications with the media.

## **Section 5      OWNER'S RESPONSIBILITIES & INSTRUCTIONS TO SUPERVISORY STAFF (continued)**

### **Emergency Control Officer (Charge Nurse or senior management on premises)**

- Determine location of fire zone from Annunciator Panel
- Call **911- 599 Albert St. Strathroy Ont.**
- Equip three member Fire Response Team with reflector jackets and flashlights
- Dispatch Fire Response Team to fire zone
- Establish Command Centre at Hickory Woods Communication Center  
(alternate site: Parkview Place Communication Centre)
- Advise Strathroy – Caradoc Fire Dispatch of alarm status, 519-245-1300/911
- Dispatch staff member to front door to meet and direct Fire Department to the scene.
- Determine from fire response team if area evacuation is underway.
- Direct staff to assist as required
- After hours, contact and brief Administrator or delegate
- Continue in charge of situation until relieved by or as directed by senior Fire Department official

## **Section 5      OWNER'S RESPONSIBILITIES & INSTRUCTIONS TO SUPERVISORY STAFF (continued)**

### **Fire Response Team**

#### **COMPOSITION**

- Charge Nurse shall designate a minimum of three staff reporting to the Hickory Woods Communication Centre.

#### **PURPOSE**

- Provide initial response at the fire scene, likely the first 10 - 15 minutes
- To assess and take charge at the scene
- To safeguard lives and property
- To stay in communication with Emergency Control Officer
- To request assistance as needed
- To brief Fire Department on their arrival

#### **DUTIES**

- Proceed to the fire zone as indicated on Annunciator Panel
- Carry fire extinguishers to the scene
- Investigate the fire scene
- Assess need for further assistance
- One team member or other available staff to report back to Emergency Control Officer without delay
- Remaining team members shall
  - assist in removing residents to safety (area evacuation)
  - fight fire if safe to do so
  - contain fire by closing all doors and windows

## **Section 5      OWNER'S RESPONSIBILITIES & INSTRUCTIONS TO SUPERVISORY STAFF (continued)**

### **Emergency Staff Pool**

#### **PURPOSE:**

To assist the Fire Response Team if required, and in evacuation, accounting for residents, controlling access to building and fire zone or any other task deemed necessary in an emergency.

#### **COMPOSITION:**

All staff except:

- Those involved at the scene.
- One staff in each resident home area (7-3 and 3-11).
- One staff on each floor plus one on Bear Creek (11-7).
- One staff in kitchen and front office (when open).

#### **ASSEMBLY AREA:**

Command Post (Hickory Woods Communication Centre or alternate site)

#### **DUTIES:**

When alarm sounds, report to Hickory Woods Communication Centre and assist as directed.

### **TRAINING OF SUPERVISORY STAFF**

All Department Heads and Registered Nurses shall be supplied with a copy of the Fire safety Plan and are required to become familiar with its contents.  
All training must be recorded and logged.

The above staff shall be shown:

- How to reset the fire alarm system (an activated system must not be reset until authorized by a fire Department official).
- The location of the sprinkler controls.
- The location of keys to access all locked areas and the location of extra fire extinguishers that may be needed in an emergency.
- How to use the stair slider boards for evacuating residents.

In addition these staff shall be aware of their responsibility to:

- Ensure that doors to stairs are kept closed at all times.
- Ensure that stairs, landings, hallways, passageways and exits, inside and out, are kept clear of obstructions at all times.
- In the event of any shutdown of fire protection equipment, notify Strathroy-Caradoc Fire Dispatch 519-245-1300 and post a watch person to patrol the hallways once every hour.

**Section 5      OWNER'S RESPONSIBILITIES & INSTRUCTIONS TO  
SUPERVISORY STAFF (continued)****SOUNDING THE ALARM****Fire Alarm System**

The fire alarm can be activated by either:

- 1) Heat and Smoke Detectors located in service areas, resident rooms, corridors and air ducts in the ceiling, through smoke or excessive heat.
- 2) Pull Stations located at every exit door.

**In response alarm bells will ring intermittently in all areas of the Home at a rate of 20 strokes a minute.**

**NOTE:** *Alarm bells ringing continuously at 120 strokes a minute signifies direction for a full evacuation of the Home, a procedure activated by the Emergency Control Officer. (see Evacuation)*

**Definition of Fire Zone**

Annunciator Panels are located at the Front Entrance and at each Communication Centre.

When an alarm is activated the panel will display the area of the Home where the alarm has originated and considered the fire zone.

**Notifying Staff**

On hearing the alarm, the charge nurse shall determine the fire zone from the annunciator panel and page three times:

**"ATTENTION STAFF. CODE RED ALERT. (name of zone)"**

**Calling the Fire Department**

The Charge Nurse shall:

- Dial **911** and **ask for Fire**
  - Confirm our address as **599 Albert St. Strathroy**
  - Wait for call to be transferred to the Strathroy/Caradoc Police Dispatch
  - Advise police operator of our location - **Strathmere Lodge, 599 Albert St.**
- advise alarm status:
- fire alarm in (name location), and staff now investigating
- or, fire in progress
- or, false alarm

**Section 5      OWNER'S RESPONSIBILITIES & INSTRUCTIONS TO  
SUPERVISORY STAFF (continued)****Remote Alarm Transmission (backup to 911 service)**

- Alarms originating at the Lodge are sent directly to the Edwards offsite answering service. Edwards will respond by notifying the Strathroy – Caradoc Fire Dispatch 519-245-1300.
- Edwards will also call the Lodge to confirm the status of an alarm.
- Should it be necessary to call Chubb Edwards their number is 1 800 387-0771

System# 925763

**Handling False Alarms**

- Every alarm shall be treated as a fire alert until confirmed that no fire situation exists.
- Notification of a false alarm shall be given by the Charge Nurse to the Strathroy – Caradoc Fire Department dispatch by calling at 245-1300
- The Charge Nurse shall notify staff and residents by paging 3 times:

**“ATTENTION STAFF. CODE RED. ALL CLEAR”**

**STAFF ROLES****In the Fire Zone**

- Remove residents from immediate danger.
- Confine fire by closing door to room.
- Sound alarm at pull station.
- Fight fire with portable fire extinguisher (do not endanger yourself or others).
- If fire cannot be extinguished, leave the area and close the door
- Evacuate all residents from area outside or beyond fire separation doors.
- Shut all doors and flag with evacuation marker.
- Shut off any oxygen equipment in area.
- Turn on all lights.
- Instruct visitors to remain with resident.
- Staff in the area are to assist in evacuation.

**If a fire cannot be located:** reassure residents and instruct them to return to and remain in their rooms with their doors closed.

**Section 5      OWNER'S RESPONSIBILITIES & INSTRUCTIONS TO  
SUPERVISORY STAFF (continued)****All Other Areas****On hearing the alarm:**

- Remain calm and reassure residents
- Do not use phone, intercom or page
- Keep fire separation doors closed

All staff to go to Command Centre (Hickory Woods communication centre, Alternate Parkview Place communication).

- Restrict resident movements until fire alert is over
- Advise visitors to remain with resident
- Be ready for a possible evacuation
- Follow instructions for staff deployment for your area

**All Clear**

- When the alarm situation is resolved, the Charge Nurse will announce the 'all clear', by paging 3 times:

**"ATTENTION STAFF. CODE RED. ALL CLEAR"**

- Re-assure residents and resume normal duties

**FIRE HAZARDS****SMOKING**

- Smoking is prohibited anywhere in the building.

**FLAMMABLE LIQUIDS**

- All flammable liquids shall be stored in an approved metal cabinet.
- Do not place near heat source, e.g. motors, lights.
- Fuel for the tractor and small engine use shall be stored in approved containers inside out building (drive shed).

**OXYGEN**

- Resident rooms where oxygen is in use shall have warning notices posted outside the room advising of its use and prohibiting smoking.
- Oxygen cylinders shall be capped and secured at all times.
- Oxygen cylinders not in use will be securely stored in the Therapy rooms of each Resident Home Area.

**Section 5      OWNER'S RESPONSIBILITIES & INSTRUCTIONS TO  
SUPERVISORY STAFF (continued)****ELECTRICAL APPLIANCES**

- All electrical equipment brought in to the Home by residents is to be checked by maintenance and an appropriate approval sticker applied
- If the number of electrical appliances in a room exceeds the number of outlets available, an approved CSA/ULC power bar shall be used.
- No equipment shall be used where there are visible signs of damage to cords or plugs. Such equipment must be removed immediately.

**ELECTRICAL APPLIANCES**

- All electrical equipment brought in to the Home by residents is to be checked by maintenance.
- If the number of electrical appliances in a room exceeds the number of outlets available, a power bar shall be used.
- No equipment shall be used where there are visible signs of damage to cords or plugs. Such equipment must be removed immediately.

**Section 5      OWNER'S RESPONSIBILITIES & INSTRUCTIONS TO  
SUPERVISORY STAFF (continued)****HALLWAYS**

- If it is necessary for equipment and wheelchairs to be in hallways, they shall be placed on one side only.

**STAIRS**

- Stairs and landings shall be kept clear at all times

**FIRE EXITS**

- Fire exits shall be kept clear at all times.
- Snow shovels shall be left at each exit during the winter season.
- Steps and walkways at fire exits shall be kept clear of snow and ice.

**SAFE OPERATION OF EQUIPMENT**

- Laundry and kitchen equipment shall be operated in strict adherence to operating procedures.

**GARBAGE AND LAUNDRY CHUTES**

- Flammable liquids or aerosol cans are not to be placed in the garbage chute.
- Cartons, coat hangers or bundles of papers are not to be forced into the garbage chute as it may become blocked.
- Laundry bags are not to be forced into the laundry chute.

**REPORTING HAZARDS**

- Fire safety hazards that cannot be immediately corrected shall be reported to the appropriate Department Head or Charge Nurse.
- Reporting and elimination of fire hazards is the responsibility of all staff.
- A walk-through of the entire facility shall be conducted weekly by maintenance to identify any hazards.

**Section 5 OWNER'S RESPONSIBILITIES & INSTRUCTIONS TO SUPERVISORY STAFF (continued)**

## FIRE PLAN EDUCATION FOR SUPERVISORY STAFF

[illegible]

## Section 6 FIRE DRILLS

### **PURPOSE:**

Fire drills are conducted to enable staff to learn and maintain skills required to effectively react to a real fire situation and to provide an orderly evacuation of residents.

**FREQUENCY:** Fire drills shall be conducted monthly, on all shifts.

### **STAFF RESPONSE:**

**The Fire Response Team** and staff working in the affected area shall respond to the simulated fire scene. Fire extinguishers shall be taken to the simulated fire scene and placed by the door of the affected room.

**The Emergency Staff Pool** will assemble at the Hickory Woods Communication Centre (alternate -Parkview Place Communication Centre) and await instructions.

**FIRE SAFETY OFFICER:** Prepares for and initiates the drill as follows:

- Prepare all staff involved in the drill.
- Set up the room/area for the fire simulation.
- Notify Strathroy-Caradoc Fire Department/Dispatch 519-245-1300 if alarm is to be activated.
- Instruct Charge Nurse to make announcement.
- Activate alarm.
- Observe staff response.
- On completion of drill:
- Reset alarm
- Instruct Charge Nurse to make announcement.
- Hold a brief meeting with staff involved at the scene.
- Notify Strathroy-Caradoc Fire Department/Dispatch 519-245-1300 that the drill is complete.
- Confirm and note time that GE Security call was received by the Fire Department.
- Complete report of fire drill for Administrator to sign.
- Post signed fire drill report on Health and Safety Board.

**Section 6 FIRE DRILLS (continued)****CHARGE NURSE**

- When alarm bells are activated, determine alarm location from enunciator panel and announce over the PA:

**ATTENTION STAFF. CODE RED (name location) Three Times**

- Dispatch Fire Response Team to alarm location.
- Call Fire Department Dispatch at **519-245-1300** and advise that a fire drill is underway.
- Take attendance of Emergency Staff Pool. Issue instructions appropriate to the drill.
- When advised by the Fire Safety Officer that the drill is complete, announce over the PA:

**ATTENTION STAFF, CODE RED ALL CLEAR, THE FIRE DRILL IS COMPLETE. (Three Times)**

Note: Ensure Fire Dispatch has been notified when fire drill complete.

**SILENT DRILL (between the hours of 8 p.m. and 6 a.m.)**

Drills will be conducted in the silent mode without activating the alarm bells.

- The Charge Nurse will prepare all staff involved.
- The Fire Safety Officer will notify the Charge Nurse the location of the Fire Drill.
- The Charge Nurse will commence the drill through an announcement over the PA system:

**ATTENTION STAFF AND RESIDENTS. WE ARE ABOUT TO CONDUCT A FIRE DRILL. THIS IS A PRACTICE FOR CODE RED.****ATTENTION STAFF. CODE RED. (name of location) Three Times**

- The Charge Nurse will dispatch Fire Response Team to alarm location.
- The Charge Nurse will take attendance of Emergency Staff Pool and issue instructions appropriate to the drill.
- When the fire drill is complete, the Charge Nurse will announce over the PA:

**ATTENTION STAFF. CODE RED ALL CLEAR. THE FIRE DRILL IS COMPLETE. Three Times**

- The Charge nurse will complete a fire drill report for the Fire Safety Officer

**Section 6 FIRE DRILLS (continued)**

**FIRE DRILL REPORT  
DAYS FIRE DRILL**

**DATE:**

**SHIFT:**

**TIME:**

**EMERGENCY CONTROL OFFICER**

**ROOM/AREA OF ALARM:**

**ATTENDANCE:**

See Attached

**NOTES:**

**Fire separation doors closed as intended.**

**FIRE SAFETY OFFICER:**

**REVIEWED BY:**

\_\_\_\_\_  
Signature

**Section 6 FIRE DRILLS (continued)****FIRE ALARM ATTENDANCE RECORD**

DATE: \_\_\_\_\_ SHIFT: \_\_\_\_\_

**PLEASE PRINT YOUR NAME**

Emergency Control Officer \_\_\_\_\_

First Responder: \_\_\_\_\_

Second Responder: \_\_\_\_\_

Third Responder: \_\_\_\_\_

Front Door: \_\_\_\_\_

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

5) \_\_\_\_\_

6) \_\_\_\_\_

7) \_\_\_\_\_

8) \_\_\_\_\_

9) \_\_\_\_\_

10) \_\_\_\_\_

11) \_\_\_\_\_

12) \_\_\_\_\_

13) \_\_\_\_\_

14) \_\_\_\_\_

15) \_\_\_\_\_

16) \_\_\_\_\_ 34) \_\_\_\_\_

17) \_\_\_\_\_ 35) \_\_\_\_\_

18) \_\_\_\_\_ 36) \_\_\_\_\_

19) \_\_\_\_\_ 37) \_\_\_\_\_

20) \_\_\_\_\_ 38) \_\_\_\_\_

21) \_\_\_\_\_ 39) \_\_\_\_\_

22) \_\_\_\_\_ 40) \_\_\_\_\_

23) \_\_\_\_\_ 41) \_\_\_\_\_

24) \_\_\_\_\_ 42) \_\_\_\_\_

25) \_\_\_\_\_ 43) \_\_\_\_\_

26) \_\_\_\_\_ 44) \_\_\_\_\_

27) \_\_\_\_\_ 45) \_\_\_\_\_

28) \_\_\_\_\_ 46) \_\_\_\_\_

29) \_\_\_\_\_ 47) \_\_\_\_\_

30) \_\_\_\_\_ 48) \_\_\_\_\_

31) \_\_\_\_\_ 49) \_\_\_\_\_

32) \_\_\_\_\_ 50) \_\_\_\_\_

33) \_\_\_\_\_ 51) \_\_\_\_\_

## Section 7 ALTERNATIVE MEASURES FOR OCCUPANT FIRE SAFETY

### Fire Alarm Systems

The purpose of a fire alarm system is to alert all occupants of the building that an emergency of fire exists, so that such occupants of the building may put into practice the measures required by the Fire Safety Plan.

All fire alarm systems shall be maintained in full operating condition at all times.

The first stage (20 strokes per minute) of the system sounds an alarm signalling a fire alert. The alarm is activated by a manual pull station, smoke detector or sprinkler head.

The second stage (120 strokes per minute) of the system sounds an alarm signalling a total evacuation of the building. This stage is activated by the insertion of a key into any pull station. Keys are kept at the Hickory Woods nursing station.

### Exits

A means of egress that leads to an open space.

### Fire Department Access

Fire Department access allows fire fighters and equipment to gain access to the building. Vehicles parked in a fire route, snow and other forms of obstruction to access routes, fire hydrants and fire department connections are not permitted by the Fire Code. Maintaining Fire Department access is an ongoing matter. Access to the building is provided by the key box situated just outside the front entrance.

### Portable Extinguishers

Portable extinguishers are intended as a first aid measure to cope with fires of a limited size. They are located in wall cabinets or on wall mounted brackets throughout the Home.

Extinguishers are labelled **A - B - C** denoting all three classes of fire they are designed to extinguish.

#### CLASS A

*Ordinary Combustibles* such as wood, cloth, paper, rubber and many plastics.

#### CLASS B

*Flammable Liquids* such as gasoline, oil, grease, tar, oil-based paint, lacquer and flammable gas.

#### CLASS C

*Electrical Equipment* such as wiring, fuse boxes, circuit breakers, machinery and appliances.

Wet Chemical extinguishers are found in the kitchen and in each servery

**Section 7 ALTERNATIVE MEASURES FOR OCCUPANT FIRE SAFETY (continued)**

In the event of a shutdown of fire protection equipment and systems or part thereof, the Fire Department, staff and residents will be notified by the Fire Safety Officer as to alternate provisions to be taken in case of an emergency. The Strathroy-Caradoc Fire Department shall be advised of the alternative measures in place. (519-245-1300 Dispatch).

After regular business hours, the Charge Nurse shall notify the Fire Safety Officer or designate of any system failure.

**Fire Alarm Shutdown**

1. The Fire Department/Dispatch shall be notified by calling 245-1300 immediately.
2. A whistle is kept at each nursing station for sounding the alarm in the event the fire alarm system is inoperative.
3. The Fire Safety Officer or Charge Nurse shall notify staff and residents by paging that the fire alarm is out of service and that a whistle will sound if there is an alarm situation.
4. Staff shall be instructed to be especially vigilant for signs of fire.
5. The Fire Safety Officer or Charge Nurse will ensure that an hourly check shall be made of kitchen, laundry and basement areas by assigned staff.
6. When the system is returned to normal functioning, the Fire Safety Officer shall notify the Fire Department/Dispatch, staff and residents.

**Sprinkler Shutdown (including interruption of water supply)**

1. The Fire Department/Dispatch shall be notified by calling 245-1300 immediately
2. They shall be informed of the extent and expected duration of the shutdown.
3. The Fire Safety Officer or Charge Nurse shall notify staff and residents of the shutdown by paging, and of the expected duration.
4. The Fire Department/Dispatch shall be notified immediately upon reactivation of the system.

## Section 7 ALTERNATIVE MEASURES FOR OCCUPANT FIRE SAFETY (continued)

### FIRE WATCH LOG REPORT

|                                                       |             |             |
|-------------------------------------------------------|-------------|-------------|
| _____ System Out of Service                           | Date: _____ | Time: _____ |
| System Out of Service-Notification to Fire Department | Date: _____ | Time: _____ |

|                                                        |             |             |
|--------------------------------------------------------|-------------|-------------|
| _____ System Back in Service                           | Date: _____ | Time: _____ |
| System Back in Service-Notification to Fire Department | Date: _____ | Time: _____ |

PERSONS ASSIGNED TO FIRE WATCH DUTIES SHALL FOLLOW THE REQUIRMENTS LISTED ON THE FIRE WATCH DUTIES SHEET AND SHALL PATROL ALL UNPROTECTED AREAS OF THE BUILDING EVERY HOUR TO CHECK FOR SIGNS OF FIRE OR SMOKE CONDITIONS. ALL PATROLS ARE TO BE RECORDED ON THIS LOG REPORT IMMEDIATELY FOLLOWING EACH ROUND. RECORDS OF FIRE WATCH SHALL BE KEPT FOR 2 YEARS AFTER THEY ARE MADE, AND SHALL BE MADE AVAILABLE UPON REQUEST TO THE CHIEF FIRE OFFICIAL. Start a new Fire Watch Log Report Sheet for each new day of fire watch.

Fire Watch Duties Conducted By: \_\_\_\_\_  
(PRINT NAME & POSITION)

| Rounds | Start Time | Finished | Signature | Comments |
|--------|------------|----------|-----------|----------|
| 1      |            |          |           |          |
| 2      |            |          |           |          |
| 3      |            |          |           |          |
| 4      |            |          |           |          |
| 5      |            |          |           |          |
| 6      |            |          |           |          |
| 7      |            |          |           |          |
| 8      |            |          |           |          |
| 9      |            |          |           |          |
| 10     |            |          |           |          |
| 11     |            |          |           |          |
| 12     |            |          |           |          |
| 13     |            |          |           |          |
| 14     |            |          |           |          |
| 15     |            |          |           |          |
| 16     |            |          |           |          |
| 17     |            |          |           |          |
| 18     |            |          |           |          |
| 19     |            |          |           |          |
| 20     |            |          |           |          |
| 21     |            |          |           |          |
| 22     |            |          |           |          |
| 23     |            |          |           |          |
| 24     |            |          |           |          |

## Section 8 MAINTENANCE PROCEDURES

### DEFINITIONS FOR KEY WORDS ARE AS FOLLOWS:

**CHECK** Means a visual observation to ensure that devices or systems are in place, and no obvious damage or obstructions to proper operation exist.

**INSPECT** Means a physical examination to determine that the devices or systems will apparently perform in accordance with its intended function.

**TEST** Means operation of the devices or systems to ensure that it will perform in accordance with its intended operating functions. It is generally required to have a certified system technician perform tests.

Records of all test and corrective measures are to be retained for a period of two years after they are made.

Note:

**All Maintenance records can be viewed in the preventative maintenance binder located in the maintenance shop.**

### PORTABLE FIRE EXTINGUISHERS

(reference should be made to NFPA 10-1990 for exact details)

| <u>Reference No.</u> | <u>Action</u>                                                              | <u>Inspection Frequency</u>     |
|----------------------|----------------------------------------------------------------------------|---------------------------------|
| 6.2.7.2.             | Inspect all portable extinguishers                                         | Monthly (Maintenance)           |
| 6.2.7.1.(1)          | Subject to maintenance                                                     | Annually (Contractor)           |
| 6.2.7.1.(1)          | Hydrostatically test carbon dioxide and water extinguishers                | Every five years (Contractor)   |
| 6.2.7.1.(1)          | Empty stored pressure type extinguishers and subject to maintenance        | Every six years (Contractor)    |
| 6.2.7.1.(1)          | Hydrostatically test dry chemical and vaporizing liquid type extinguishers | Every twelve years (Contractor) |

### FIRE ALARM SYSTEMS

(Reference should be made to CAN/ULC-S536 for exact details)

| <u>Reference No.</u> | <u>Action</u>                                                                                                       | <u>Inspection Frequency</u> |
|----------------------|---------------------------------------------------------------------------------------------------------------------|-----------------------------|
| 6.3.2.2.             | Check fire alarm AC power lamp and trouble light                                                                    | Daily (Maintenance)         |
| 6.3.2.2.             | Check trouble conditions                                                                                            | Daily (Maintenance)         |
| 6.3.2.3.             | Check central alarm and control facility                                                                            | Daily (Maintenance)         |
| 6.3.2.2.             | Check all fire alarm components including standby power batteries                                                   | Monthly (Maintenance)       |
| 6.3.2.2.             | Test fire alarm system by persons acceptable to the authority having jurisdiction for service of Fire Alarm Systems | Annually (Contractor)       |
| 6.3.2.4.             | Test voice communication systems that are integrated with a Fire Alarm System                                       | Annually (Contractor) N/A   |
| 6.3.2.5.(1)          | Test voice communication systems that are not integrated with a Fire Alarm System                                   | Monthly (Control Officer)   |
|                      | Test Carbon Monoxide Alarms Systems (3)                                                                             | Monthly (Maintenance)       |

**Section 8 MAINTENANCE PROCEDURES (continued)**

**SPRINKLER SYSTEMS**  
**(Reference should be made to NFPA 13)**

| <b><u>Reference No.</u></b> | <b><u>Action</u></b>                                                                               | <b><u>Inspection Frequency</u></b> |
|-----------------------------|----------------------------------------------------------------------------------------------------|------------------------------------|
| 6.5.4.5.(1)                 | Check that unsupervised sprinkler system control valves are open                                   | Weekly (Maintenance)               |
| 6.5.3.2.                    | Check that air pressure on dry pipe systems is being maintained                                    | Weekly (Maintenance)               |
| 6.5.5.2.(1)                 | Test sprinkler alarms using alarm test connection                                                  | Annually (Contractor)              |
| 6.5.5.7.(2)                 | Test sprinkler supervisory transmitters and waterflow devices                                      | Every 2 months (Contractor)        |
| 6.5.5.7.(3)                 | Test gate valve supervisory switches and other sprinkler and protection system supervisory devices | Every 6 months (Contractor)        |
| 6.5.3.1.                    | Check exposed sprinkler system pipe hangers                                                        | Annually (Contractor)              |
| 6.5.3.4.                    | Check all sprinkler heads are free of damage, corrosion, grease, dust, paint                       | Annually (Contractor)              |
| 6.5.4.3.                    | Inspect dry pipe valve priming levels                                                              | Every 3 months (Contractor)        |
| 6.5.4.4.(2)                 | Remove plugs or caps on fire department connections and inspect for wear, rust or obstructions     | Annually (Contractor)              |
| 6.5.5.3.                    | Test waterflow on wet sprinkler systems using the most hydraulically remote test connection        | Annually (Contractor)              |
| 6.5.5.4.(1)                 | Trip-test dry pipe valves to ensure proper operation of system                                     | Annually (Contractor)              |
| 6.5.5.5.                    | Test flow of water supply using main drain valve                                                   | Annually (Contractor)              |
| 6.5.4.2.                    | Inspect dry pipe systems for obstructions and flush as necessary                                   | Every 15 years (Contractor)        |
| 6.5.3.3.                    | Check dry pipe valve rooms or enclosures during freezing weather                                   | As required                        |
| 6.5.4.1.                    | Inspect auxiliary drains to prevent freezing                                                       | As required                        |

**EMERGENCY LIGHTING**

| <b><u>Reference No.</u></b> | <b><u>Action</u></b>                                       | <b><u>Inspection Frequency</u></b> |
|-----------------------------|------------------------------------------------------------|------------------------------------|
| 2.7.3.3.(2)                 | Inspect batteries for connections and corrosion            | Monthly (Maintenance)              |
| 2.7.3.3.(3)                 | Test function on failure of power                          | Monthly (Maintenance)              |
| 2.7.3.3.(3)                 | Test for duration equal to design criteria                 | Annually (Contractor)              |
| 2.7.3.3.(4)                 | Test charging system                                       | Annually (Contractor)              |
| 2.7.3.3.(4)                 | Full annual inspection of the system by a qualified person | Annually (Contractor)              |

**Section 8 MAINTENANCE PROCEDURES (continued)****EMERGENCY POWER SYSTEMS****(Reference should also be made to CSA C282 - 1977 for exact details)**

| <b><u>Reference No.</u></b> | <b><u>Action</u></b>                                                        | <b><u>Inspection Frequency</u></b> |
|-----------------------------|-----------------------------------------------------------------------------|------------------------------------|
| 6.7.1.1.(1)                 | Check all components of the system                                          | Monthly (Maintenance)              |
| 6.7.1.1.(1)                 | Test                                                                        | Annually (Contractor)              |
| 6.7.1.3.                    | Maintain written records of check, inspect and test                         | Maintenance                        |
| 6.7.1.2.                    | Check instructions for switching and starting are provided                  | Monthly (Maintenance)              |
| 6.7.1.4.                    | Check fuel sufficient for 2 hours of operation                              | Monthly (Maintenance)              |
| 6.7.1.5.                    | Drain and refill fuel, unless achieved by replenishment during normal tests | Annually (Contractor)              |

**MEANS OF EGRESS**

| <b><u>Reference No.</u></b> | <b><u>Action</u></b>                                                   | <b><u>Inspection Frequency</u></b> |
|-----------------------------|------------------------------------------------------------------------|------------------------------------|
| 2.2.3.4.(2)                 | Inspect all doors in fire separations                                  | Monthly (Maintenance)              |
| 2.2.3.4.(1)                 | Check all doors in fire separations to ensure they are closed          | As required (Maintenance)          |
| 2.7.3.1.                    | Maintain exit signs to ensure they are clear & legible                 | As required (Maintenance)          |
| 2.7.3.2.(2)                 | Maintain exit lights to ensure they are illuminated and in good repair | As required (Maintenance)          |
| 2.7.1.7.(1)                 | Maintain corridors are free of obstructions                            | As required (Maintenance)          |

**FIRE DEPARTMENT ACCESS****(Reference also made to property site plan conditions under Section 41 & 51 of the Planning Act)**

| <b><u>Reference No.</u></b> | <b><u>Action</u></b>                                                                                                                                                                                                                   | <b><u>Inspection Frequency</u></b> |
|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| 2.5.1.2.(1)                 | Fire access routes and access panels or windows provided to facilitate access for fire fighting operations shall not be obstructed by vehicles, gates, fences, building material, vegetation, signs or any other form of obstructions. | Daily (Maintenance)                |
| 2.5.1.2.(2)                 | Fire department sprinkler and standpipe connections shall be clearly identified and maintained free of obstructions for use at all times.                                                                                              | Daily (Maintenance)                |
| 2.5.1.3.                    | Ensure streets, yards and private roadways provided for fire department access are kept clear.                                                                                                                                         | Daily (Maintenance)                |
| 2.5.1.4.                    | Approved signs shall be displayed to indicate fire access routes.                                                                                                                                                                      | Daily (Maintenance)                |

**Section 8 MAINTENANCE PROCEDURES (continued)****WATER SUPPLIES FOR FIRE PROTECTION****(Reference also made to NFPA 25)**

| <b><u>Reference No.</u></b> | <b><u>Action</u></b>                                                                                                                   | <b><u>Inspection Frequency</u></b> |
|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| 6.6.1.1.                    | Private and public water supplies for fire protection installations shall be maintained to provide required flow under fire conditions | Annually (Contractor)              |
| 6.6.1.2. (1)                | Control valves shall be checked to ensure they are in the open position                                                                | Weekly (Maintenance)               |
| 6.6.1.2. (2)                | Valves that are locked open or electrically supervised shall be inspected                                                              | Monthly (Maintenance)              |
| 6.6.1.2. (3)                | After repair or maintenance work, valves shall be inspected to ensure they are in the open position                                    | As Required (Maintenance)          |
| 6.6.1.3.                    | Water supply maintained free from ice accumulation                                                                                     | As Required (Maintenance)          |

**HYDRANTS****(Reference also made to NFPA 25)**

| <b><u>Reference No.</u></b> | <b><u>Action</u></b>                                                                                                                      | <b><u>Inspection Frequency</u></b> |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| 6.6.4.1.                    | Hydrants shall be maintained in operating condition                                                                                       | As Required (Contractor)           |
| 6.6.4.2.                    | Maintain hydrants free of snow & ice accumulations                                                                                        | As Required (Maintenance)          |
| 6.6.4.3.                    | Maintain hydrants free from obstructions and available for use                                                                            | As Required (Maintenance)          |
| 6.6.5.2. (1)                | Port caps are wrench tight                                                                                                                | Annually (Contractor)              |
| 6.6.5.2. (2)                | Port caps are removed and connections inspected for wear, rust or obstructions, and repairs made as necessary                             | Annually (Contractor)              |
| 6.6.5.2. (3)                | If caps are missing, the hydrant shall be flushed to ensure no contamination, before new caps are installed                               | As Required (Contractor)           |
| 6.6.5.3.                    | Inspect the hydrant barrel for water accumulation when the main valve is closed                                                           | Annually (Contractor)              |
| 6.6.5.4.                    | Where water is found in Article 6.6.5.3, the drain valve shall be inspected for operation                                                 | Annually (Contractor)              |
| 6.6.5.5.                    | If the hydrant barrel is found to contain water because of poor drainage, approved corrective measures shall be taken to prevent freezing | Annually (Contractor)              |
| 6.6.5.7.                    | Check water flow with the hydrant fully opened and one port open                                                                          | Annually (Contractor)              |
| 6.6.5.8.                    | A record of hydrant flow shall be kept                                                                                                    | Owner/Contractor                   |
| 6.3.2.6.(5)                 | Test pull station function                                                                                                                | Annually Contractor                |

**CARBON MONOXIDE ALARMS**  
**(Reference manufacturer's instructions)**  
**(Reference also made to CSA – 6.19 or UL2034)**

| <b><u>Reference No.</u></b> | <b><u>Action</u></b>                                                                         | <b><u>Inspection Frequency</u></b>     |
|-----------------------------|----------------------------------------------------------------------------------------------|----------------------------------------|
| 6.3.4.4.                    | Maintain carbon monoxide alarms as recommended by the manufacturer. (WRITTEN RECORD REQUIRED | Annually                               |
| 6.3.4.8.                    | Test alarm function monthly as recommended by the manufacturer.                              | Monthly (Occupant)<br>Annually (Owner) |
| 6.3.4.7.(3)                 | Replace carbon monoxide alarms on the frequency prescribed by the manufacturer.              | As required (Owner)                    |
| 6.3.4.8.(5)                 | Test carbon monoxide alarms using the test button or other manufacturer recommended method.  | Annually                               |
| 6.3.4.8.(3)                 | Test carbon monoxide alarm after replacing the battery.                                      | As required                            |
| 2.16.2.1.(2)(a)             | Check CO alarm is installed in area of the service room or appliance is installed.           | As required (Owner)                    |
| 2.16.2.1.(2)(b)             | Check CO alarm is installed adjacent to each sleeping area.                                  | As required (Owner)                    |
|                             |                                                                                              |                                        |

**Section 9 FIRE EXTINGUISHMENT – CONTROL OR CONFINEMENT**

1. In the event that a small fire cannot be extinguished with the use of a portable fire extinguisher, or the smoke presents a hazard to the operation, then the door to the area should be closed to confine and contain the fire.

Leave the fire area, ensure that the Fire Department has been notified, and await for the Fire department to arrive.

Make sure that the events unfold in the following sequence.

- 1.1 Activate then fire alarm system.
- 1.2 Call 911, even if auto-signaling provisions to an alarm company are in place.
- 1.3 Evacuate residents from immediate Fire Zone area.
2. In the event that a small fire is determined to be extinguishable, make sure that events unfold in the following sequence.
  - 2.1 Activate the fire alarm
  - 2.2 Call 911, even if auto signaling provisions to an alarm company are in place.
  - 2.3 Attempt to extinguish the fire while keeping yourself between the fire and the nearest exit.
  - 2.4 Evacuate residents from immediate Fire Zone area.
  - 2.5 Close door behind you.

**SUGGESTED OPERATION OF PORTABLE FIRE EXTINGUISHERS**

Remember the (PASS) acronym

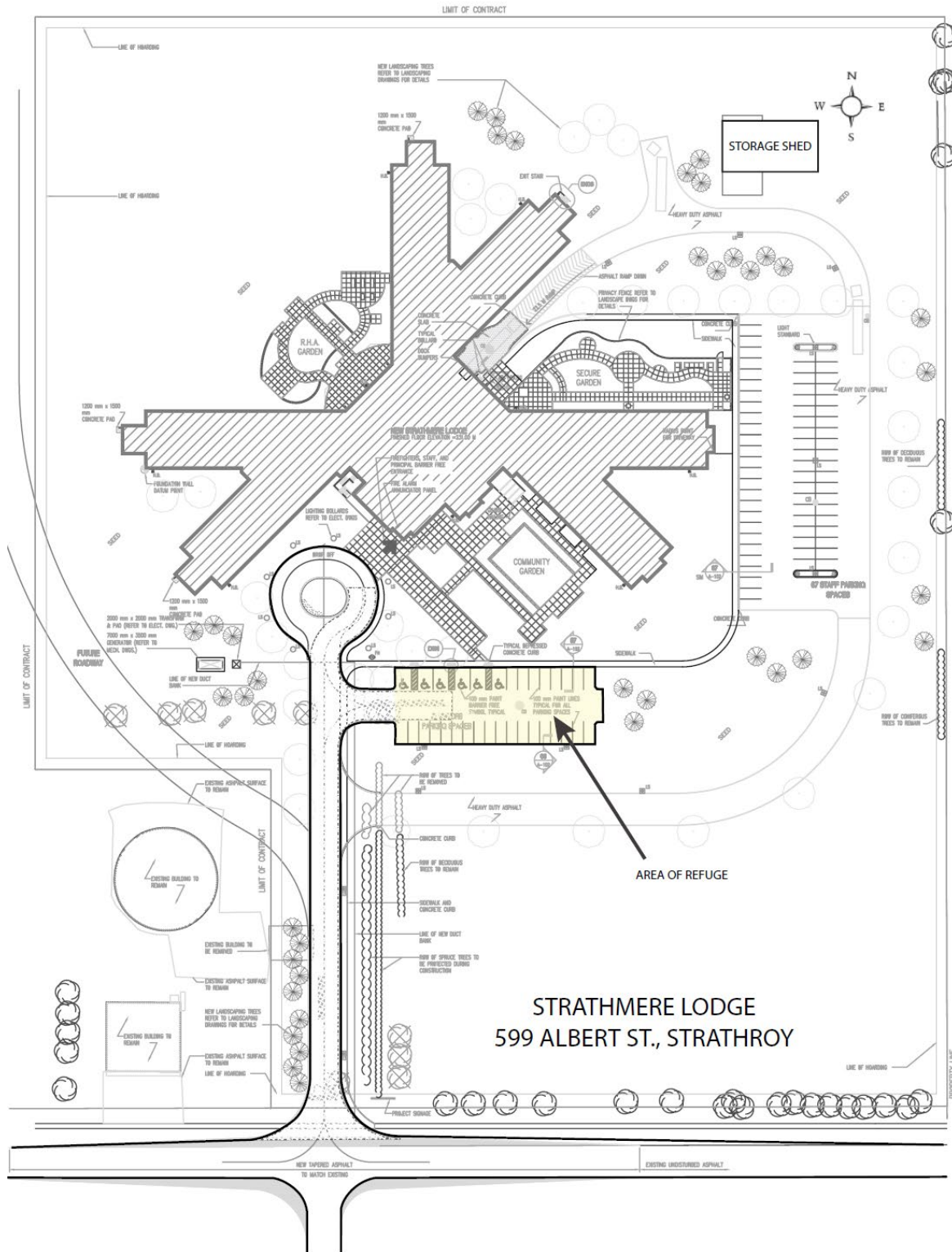
- P** – Pull the safety pin
- A** – Aim the nozzle
- S** – Squeeze the trigger handle
- S** – Sweep from side to side (watch for fire restarting)

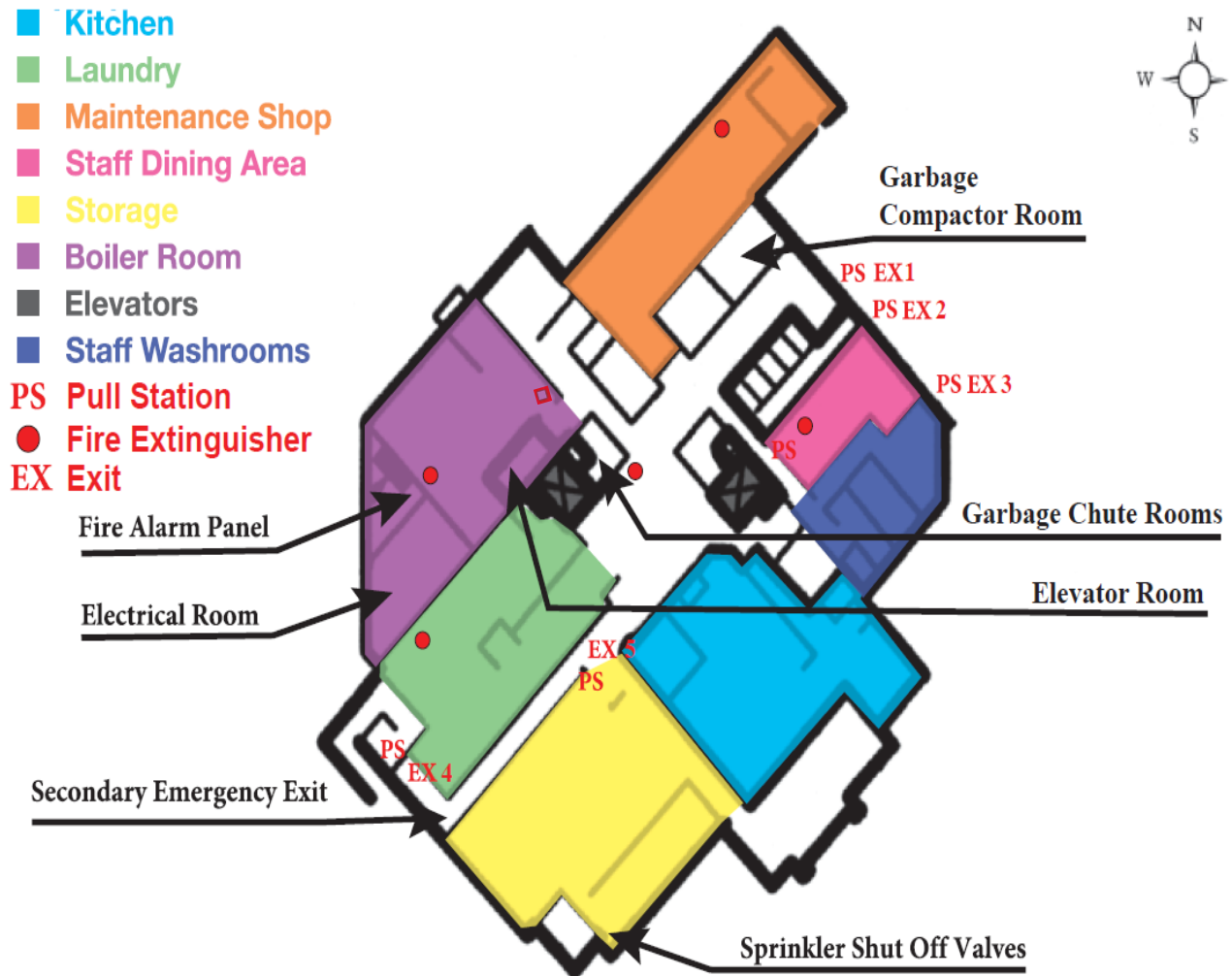
Ensure extinguishers are properly recharged after use and that a temporary replacement is provided.

Keep extinguishers in a visible area without obstructions around them.

## Section 10 SCHEMATIC DIAGRAMS

### Building Diagrams

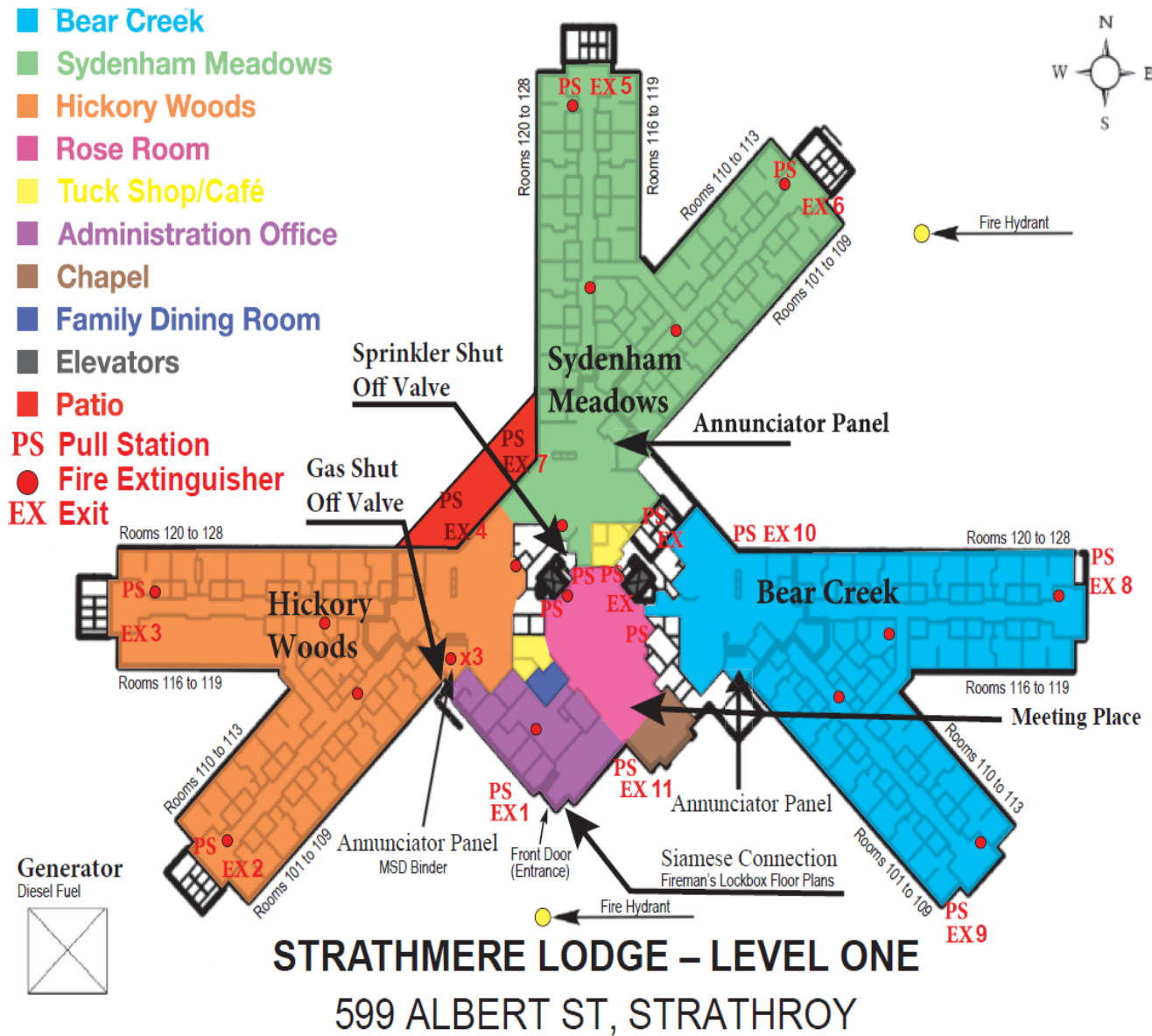


**Section 10 SCHEMATIC DIAGRAMS (continued)****Building Diagrams**

**STRATHMERE LODGE – BASEMENT**  
599 ALBERT ST, STRATHROY

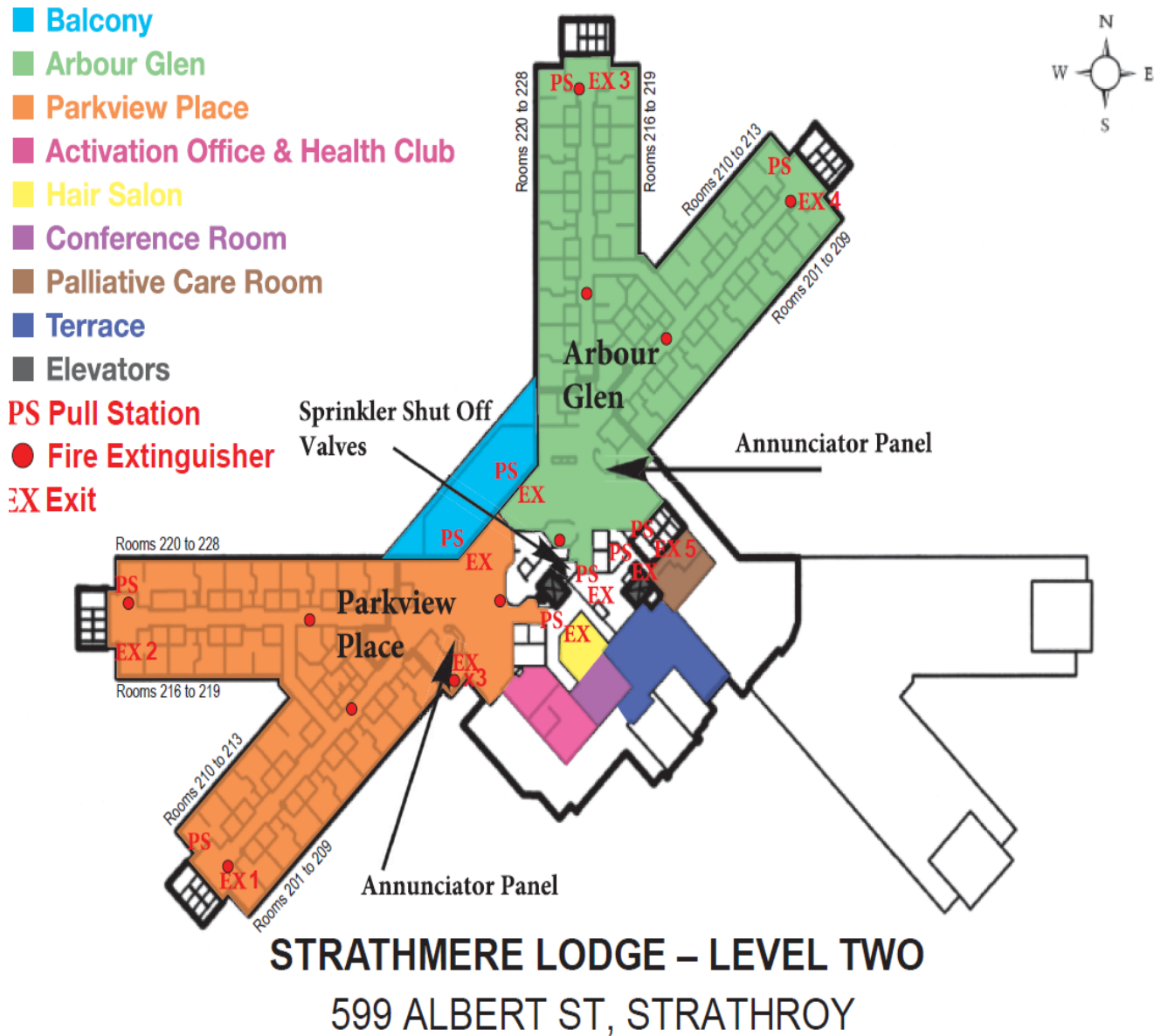
## Section 10 SCHEMATIC DIAGRAMS (continued)

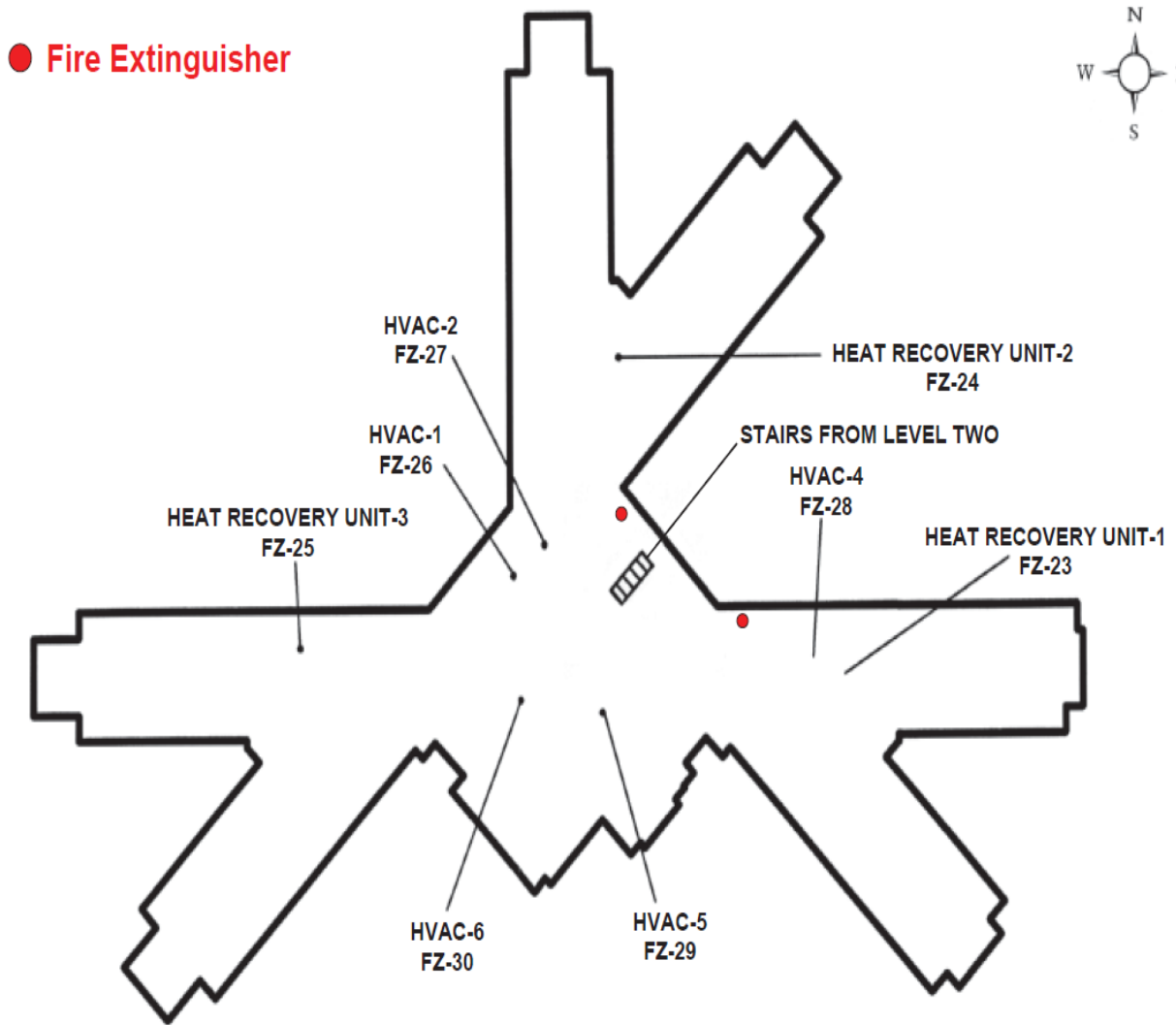
### Building Diagrams



## Section 10 SCHEMATIC DIAGRAMS (continued)

### Building Diagrams

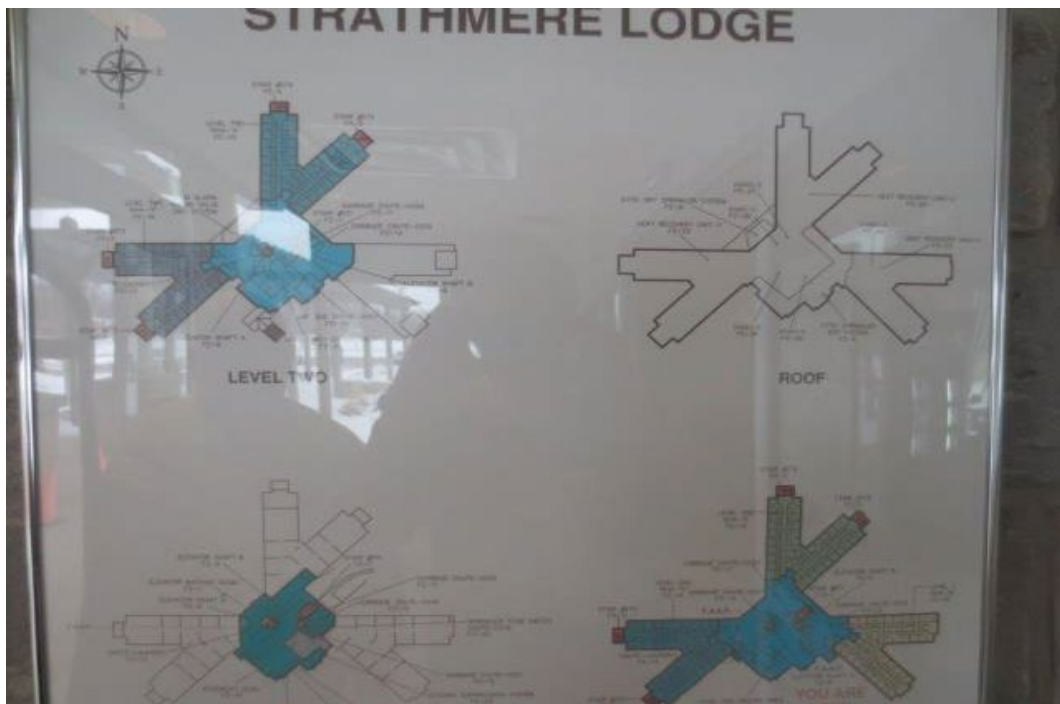


**Section 10 SCHEMATIC DIAGRAMS (continued)****Building Diagrams**

**STRATHMERE LODGE – ROOF**  
599 ALBERT ST, STRATHROY

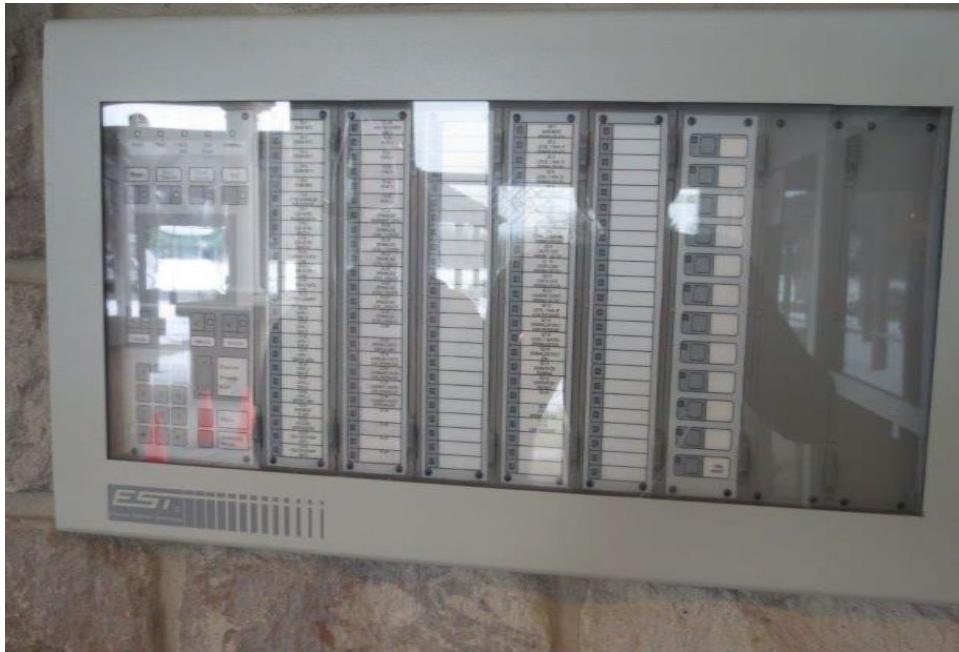
**Locations of Emergency Devices**

**The key Lockbox for Fire Department access is located outside at the front entrance on the left wall.**



**The Strathmere Lodge floorplan directory is located inside the front entrance on the left wall.**

### **Locations of Emergency Devices**



**The Annunciator Panel is located inside the front entrance on the left wall.**



### **Gas Valve Shut Off**

**The Gas shut off valve is located on the outside wall on the corner of Hickory Woods and the Front office.**

### **Location of Emergency Devices**



### **Siamese Connection**

**The Siamese Connection is located outside right of Front Entrance.**



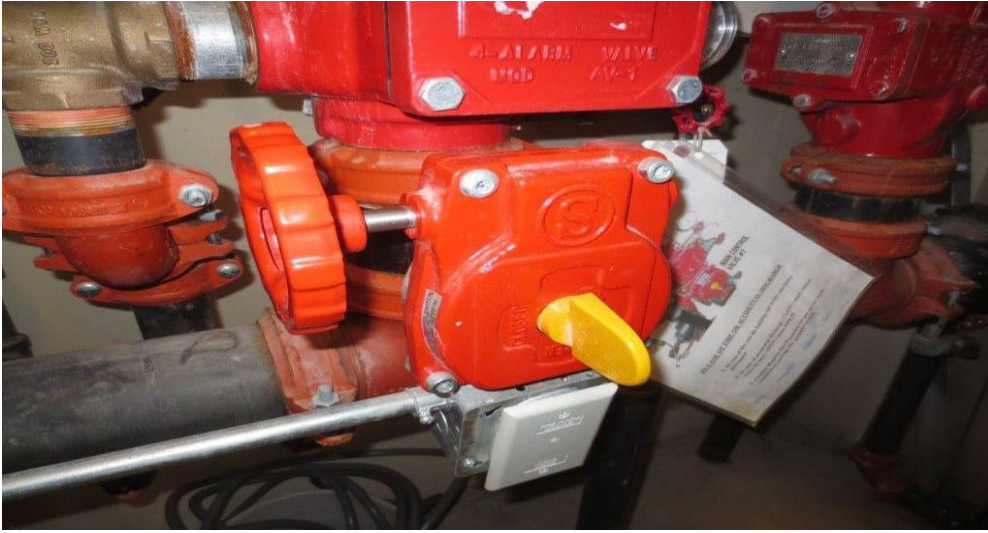
**The Main Fire Alarm Panel is located in the Communication room (C006B) behind the Mechanical room.**

**Location of Emergency Devices**

**Sprinkler Shut Off Valves are located in the basement. To access the Sprinkler Shut Off Valves, go into the basement storage room (C003), turn left at the cage and through the door (C024).**



**Second floor Sprinkler Shut Off Valves are located on the Second floor, access door(C216) is located next to the Arbour Glenn entrance.**

**Location of Emergency Devices**

**To shut off the Sprinkler System turn the red wheel clockwise moving the yellow indicator from 90 degrees to 180 degrees.**

