



Administration Policy & Procedures

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Administration	Corporate	Board Approved Date:	21-02-24
Policy	Human Rights Code	Revision Date:	N/A
Policy No.	20-076	Internally Approved Date:	21-02-12
References	Ontario Human Rights Code, 1990 Policy on Human Rights and Rental Housing, 2010 (OHRC) "Housing is a Human Right" Poster Accommodation Policy Dispute Resolution Policy Eviction Prevention Policy		
Forms	NA		

1. Policy Statement

DRNPHC is committed to providing an environment that is free from discrimination and/or harassment where everyone is treated with respect. All stakeholders share responsibility for eliminating discrimination, and must work together to prevent it. It is DRNPHC's policy to promote and adhere to the Province of Ontario's Human Rights statute, the Human Rights Code, 1990.

2. Purpose

The policy requires all stakeholders to work collectively to promote and create an environment that is free from discrimination and harassment. In the event that discrimination or bias is reported or suspected, all stakeholders are required to identify and act to resolve any concerns in a way that respects the dignity of all participants.

This policy does not restrain any person's right to seek assistance from the Human Rights Legal Support Centre or to file an application with the Human Rights Tribunal of Ontario, even when steps are being taken under DRNPHC's *Human Rights Code Policy*.

3. Scope

The policy applies to all board members, employees, applicants, tenants, volunteers, contractors, and visitors.

4. Definitions

Discrimination

Treating someone unfairly by either imposing a burden on them, or denying them a privilege, benefit or opportunity enjoyed by others, because of their race, citizenship, family status, disability, sex or other code protected grounds.

Harassment

Engaging in a course of comments or actions that are known, or ought reasonably to be known, to be unwelcome. It can involve words or actions that are known or should be known to be offensive, embarrassing, humiliating, demeaning or unwelcome. Harassment under the Ontario *Human Rights Code* is based on the prohibited/protected grounds

Code protected grounds

The Ontario *Human Rights Code* prohibits discrimination or harassment based on these

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personal characteristics. The specific protected grounds include: age, ancestry, citizenship, colour, creed, disability, ethnic origin, family status, gender identity and gender expression (recently added to the *Code*), marital status, place of origin, race, sex (including pregnancy), sexual orientation, receipt of public assistance (in housing) and record of offences (in employment).

Human rights lens

The application of equity and human rights principles to the policies, procedures, and practices of an organization in an on-going effort to ensure that all individuals and groups are, as much as possible, able to access goods, services, and resources equally and are able to participate fully in their community/ies.

5. Procedure

a) Education

All incoming staff, board members and volunteers will be directed to familiarize themselves with, the following materials:

- the *Ontario Human Rights Code, 1990* ("the Code")
- the Ontario Human Rights Commission (OHRC), its website and materials, and the *Policy on Human Rights and Rental Housing*
- the Ontario Human Rights Tribunal (OHRT), its website, and materials
- DRNPHC's policies pertaining to human rights

DRNPHC will provide training and education to staff, board members and volunteers as appropriate.

b) Application of human rights lens

DRNPHC's staff, board members, and volunteers will use their familiarity with, and knowledge of, the *code* to proactively identify potential conflicts between the Code, and the organization's policies, procedures, and practices.

If such a conflict is identified, staff will direct their concerns to the Chief Executive Officer.

c) Communication

DRNPHC shall prominently display materials or resources which inform staff, board members, volunteers, applicants, tenants, and other stakeholders of the organization's commitment to respecting and furthering the human rights of all housing stakeholders. DRNPHC will communicate the process for filing a human-rights related complaint.

d) Filing a complaint

Individuals wishing to file a human right complaint shall do so in accordance with the procedure outlined in the *Dispute Resolution Policy*.

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Administration	Corporate	Board Approved Date:	21-02-24
Policy	Accommodation	Revision Date:	N/A
Policy No.	20-077	Internally Approved Date:	21-02-12
References	References Human Rights Code, 1990 Accessibility for Ontarians with Disabilities Act, 2005 Guidelines on Developing Human Rights Policies and Procedures (OHRC) Human Rights Policy Eviction Prevention Policy Unit Interior Maintenance Policy		
Forms	Consent to Disclosure of Personal Information Accommodation Letter		

1. Policy Statement

DRNPHC acknowledges its responsibility under the *Ontario Human Rights Code* and other legislation to accommodate the needs of applicants and tenants and to actively remove barriers, physical or otherwise, which may prevent those individuals from participating fully in the activities of DRNPHC and from having a successful tenancy.

Accommodation will be provided in accordance with the principles of dignity, individualization, and inclusion. DRNPHC will work co-operatively, and in a spirit of respect, with all partners in the accommodation process.

2. Purpose

The purpose of this policy is to provide guidance on the accommodation processes that all staff may take to support, as much as possible, the full and equitable participation of applicants and tenants who are Code-protected in the activities of DRNPHC and to support successful tenancies.

3. Scope

This policy applies to all staff, contractors, board members, volunteers, tenants, and guests, who all have a role to play in accommodating the needs of other tenants and applicants.

This policy also applies to all of DRNPHC policies and procedures. Where there is a conflict between existing policies, procedures, regulations, and/or legislation, the person identifying the conflict will consult with the Chief Operating Officer, and/or the service manager, and/or other stakeholders as required to identify solutions and opportunities to accommodate the needs of staff, contractors, board members, volunteers, tenants and applicants.

4. Definitions

Applicants

An individual or household who is applying for tenancy at DRNPHC.

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Barriers

A barrier may be a part of the physical or built environment which limits or prevents the accessibility of a space. A barrier may also be a policy, procedure or requirement that excludes individuals or groups from fairly and equally accessing a good, service, or resource.

Code protected grounds

The Ontario *Human Rights Code* prohibits discrimination or harassment based on these personal characteristics. The specific protected grounds include: age, ancestry, citizenship, colour, creed, disability, ethnic origin, family status, gender identity and gender expression (recently added to the *Code*), marital status, place of origin, race, sex (including pregnancy), sexual orientation, receipt of public assistance (in housing) and record of offences (in employment).

Designated staff

The staff person(s) or department who has been designated to complete a particular action or requirement.

Discrimination

Treating someone unfairly by either imposing a burden on them, or denying them a privilege, benefit or opportunity enjoyed by others, because of their race, citizenship, family status, disability, sex or other code protected grounds.

Tenant

A person who has signed a lease and who enjoys all of the rights and responsibilities of tenancy as set out in the Residential Tenancies Act.

Undue Hardship

The point at which an organization reaches “undue hardship” is dependent on the unique circumstances of the accommodations being explored. Sections 11 and 17 of the Code outline the three criteria that must be considered in order to determine whether the necessary accommodation(s) would pose an undue hardship to an organization. Those criteria are:

- the cost
- the presence of outside sources of funding, if any
- health and safety requirements for other tenants and staff, if any

Only when those three criteria are met can an individual or group decline the accommodation of another individual or group.

5. Procedure

a) Communication

All parties within the organization, including applicants, tenants, volunteers, board members, contractors and staff will be made aware of their rights and responsibilities under this policy through on-going, active communication.

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Materials will be developed and distributed to all applicants and incoming and existing tenants, which identify the intent and contents of this policy and the protected grounds upon which accommodation may be sought. A statement about the commitment to following the Code will be noted in the tenant handbook.

b) Receipt of request for accommodation

Written requests for accommodation are preferred. However, where this requirement may prevent an individual from securing an accommodation, assistance will be provided by staff or a referral will be made to a community- based resource.

Once a request has been documented, within five working days of receiving the request, staff will meet with the tenant/applicant to review the requested modifications and to review the roles of both parties in the accommodation process.

When necessary, staff will request supporting documentation for the requested accommodation(s) and any alternative accommodations which would meet the same, or similar, objectives from the individual's medical doctor or other professional(s). Staff will also require the individual to sign a *Consent to Disclosure of Information* form.

c) Documentation

Staff will keep detailed notes regarding their interactions with the individual requesting accommodation, including: the accommodation(s) requested notes on the discussion that staff have with all stakeholders in the request copies of all supporting documentation from experts, as well as research undertaken by staff

d) Investigation of proposed accommodation(s)

- Staff will investigate the requested accommodation(s) to determine the most cost-effective accommodation that also meets the requirements of the individual.
- Staff will secure appropriate expert opinion in addition to contacting the individual's professional supports. Where necessary and appropriate, staff will also conduct independent research.
- The accommodation process is a collaborative and co-operative process between the individual and DRNPHC. As such, it is expected that both parties will be in regular and respectful contact to discuss possible accommodations and to answer outstanding or arising questions.
- Staff will document all interactions with all stakeholders in a clear, concise manner and will file these notes, in addition to any supporting documentation, in the individual's file.

e) Identification of required accommodation

All representatives of DRNPHC have a responsibility to help reduce barriers to participation and to promote inclusion. Therefore, where a DRNPHC representative believes that an accommodation may be of benefit to a tenant or applicant, they will confer with staff to determine the most effective and appropriate method to address the need

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and provide assistance to the individual.

Clear and detailed documentation must be compiled, including how the need for accommodation was discovered, actions of DRNPHC, interactions with the Code-protected individual and any other supporting documentation and discussions with stakeholders. All supporting documentation (e.g. letters, conversation notes) will also be dated and filed.

f) Accommodation(s) without cost

Depending on the nature of the accommodation(s) required, staff may or may not be permitted to exercise individual discretion:

In cases where the accommodation requires only flexibility in DRNPHC's internal policies and procedures, staff will be permitted to exercise their discretion. In cases where the accommodation required is contrary to legislation and/or service manager directives, staff will consult with the Chief Operating Officer or designate.

Staff and the individual will co-operatively and collaboratively identify mutually satisfactory accommodations.

Once an appropriate accommodation has been identified, staff will send a letter to the individual outlining the accommodation that has been agreed to and will also file a copy of that letter in the tenant file.

If staff and the applicant/tenant are unable to co-operatively identify appropriate accommodations, the matter will be referred to the Chief Operating Officer or designate for follow-up.

g) Accommodation(s) with cost

In cases where the required accommodation will cost less than \$500 staff will be permitted to exercise their discretion.

In cases where the required accommodation is anticipated to cost more than \$500 staff are required to consult with, and gain approval from, the Chief Operating Officer.

Staff will research and, if possible, identify and apply for, potential external sources of funding which may reduce the financial burden placed on DRNPHC.

h) Undue hardship

If staff and the individual are unable to identify an accommodation(s) that meets the needs of the individual without affecting the on-going financial viability of DRNPHC Chief Executive or Officer will seek legal counsel if appropriate. The Chief Executive Officer will make the final decision regarding the accommodation request.

DRNPHC may also elect to seek assistance and resources from the service manager or program funder(s) to meet the accommodation requirement(s) of the individual.

End.

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Administration	Corporate	Board Approved Date:	21-02-24
Policy	Accessible Customer Service	Revision Date:	N/A
Policy No.	20-078	Internally Approved Date:	21-02-12
References	Accessibility for Ontarians with Disabilities Act, 2005 Accessibility Standards for Customer Service, Ontario Regulation 429/07 Human Rights Policy Accommodation Policy		
Forms	Consent for Presence of Support Person Contractor Compliance Statement Customer Service Feedback Form Documentation Notice Feedback Notice Notice of Service Disruption Request for Alternative Documentation Format		

1. Policy Statement

DRNPHC is committed to providing its services in ways that are accessible to everyone in keeping with the principles of dignity, equity/equality of outcome, independence and integration.

2. Purpose

The purpose of this policy is to establish guidelines on providing goods and services to people with disabilities that will facilitate accessibility. This policy establishes accessibility standards for customer service in accordance with the *Accessibility for Ontarians with Disabilities Act, 2005* and in keeping with *Accessibility Standards for Customer Service, Ontario Regulation 429/07*.

DRNPHC will make reasonable efforts to ensure policies, practices and procedures and the delivery of goods and services are provided to persons with disabilities. DRNPHC will communicate with people with disabilities in ways that consider their disability and communication needs.

3. Scope

The policy applies to all board members, employees, applicants, tenants, volunteers, contractors, and visitors.

4. Definitions

Assistive devices

Devices used to assist persons with disabilities in carrying out activities or in accessing the services of persons or organizations covered by the customer service standard. Assistive devices include, but are not limited to wheelchairs, scooters, reading machines, recording machines, hearing devices, devices for grasping, a white cane.

Barrier

As defined by the *Accessibility for Ontarians with Disabilities Act, 2005*, barrier means anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including a physical barrier, an architectural barrier, an information or communications barrier, an attitudinal barrier, a technological barrier, a policy, procedure or a practice.

Disability

As defined by the *Accessibility for Ontarians with Disabilities Act, 2005* and the *Ontario Human Rights Code*, disability is any of the following:

- any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical co-ordination, blindness or visual impediment, deafness or hearing impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device, a condition of mental impairment or a developmental disability
- a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language
- a mental disorder
- an injury or disability for which benefits were claimed or received under the insurance plan established under the *Workplace Safety and Insurance Act, 1997*

service animals:

For the purpose of this policy, a service animal is defined as one of the following:

- a guide dog, as defined in Section 1 of the *Blind Persons Rights' Act*
- a service animal for a person with a disability

For the purpose of this policy, an animal is a service animal for a person with a disability if:

- it is readily apparent that the animal is used by the person for the reasons relating to his or her disability
- the person provides a letter from a physician or nurse confirming that the person requires the animal for reasons relating to the disability

Support person

For the purpose of this policy, a support person is defined as another person who accompanies a person with a disability in order to help him or her with communication, mobility, personal care or medical needs or with access to goods or services.

5. Procedure

a) Assistive devices

People with disabilities may choose to use their own personal assistive devices, while accessing goods and services. DRNPHC acknowledges the importance of these devices

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and will allow people with disabilities to use their own personal assistive devices to obtain, use or benefit from the services offered by DRNPHC unless there is a defined risk associated with that use.

A *Documentation Notice* will be clearly displayed throughout the building at all times to alert tenants, applicants, visitors and members of the public including people with disabilities to the availability of DRNPHC's accessible customer service policies, practices and procedures.

Should a person with a disability be unable to access DRNPHC's services through the use of their own personal assistive device, by completing a *Request for Alternative Documentation Format*, DRNPHC will assess service delivery and potential service options to meet the needs of the individual.

DRNPHC staff, third party contractors and others who provide service to tenants/customers will be familiar with the assistive devices and other accessibility supports at DRNPHC that will increase the accessibility of our services to people with disabilities.

b) Service animals

DRNPHC acknowledges the vital relationship and dependency which exists between a person with disabilities and their service animal. DRNPHC is committed to welcoming people with disabilities who are accompanied by a service animal on the parts of the premises that are open to the public and other third parties. This includes tenants, staff, and visitors to our premises.

Public areas of our premises include common areas such as lobby, laundry facilities, recreational facilities, building office, common eating areas, meeting rooms, etc. Service animals are not permitted where food preparation is being undertaken and utility rooms; or as otherwise disallowed by law.

The tenant/customer when accompanied by a service animal will be allowed to enter the premises with the animal and keep the animal with him or her at all times, unless the animal is excluded by law from the premises.

The tenant/customer is responsible for the care, supervision and control of their service animal while on the premises.

c) Support persons

DRNPHC is committed to welcoming people with disabilities who are accompanied by a support person. People with disabilities have the right to have access to their support person while accessing goods and services of DRNPHC.

If confidential information is going to be discussed, the person with the disability should be asked if they prefer their support person to remain present. If the support person is present when confidential information is to be disclosed, a signed consent must be received from the person with the disability. A signed confidentiality agreement (*Consent for Presence of Support Person*) should also be obtained from the support person.

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If DRNPHC charges an admission fee in connection with a support person's presence at an event or function or for a service, DRNPHC shall post a notice, providing information in advance about the amount, if any, that is payable by the support person accompanying a person with a disability.

DRNPHC may request that a person with a disability be accompanied by a support person, in the event that it is considered necessary to protect the health or safety of the person with a disability or the health and safety of others on the premises. This will only occur after consultation with the person with a disability and when it is the only means to allow the person with a disability to access DRNPHC's goods or services. The following criteria shall be used in consulting with the tenant/customer:

- when the risk is greater than the risk associated with other tenants/customers
- when there is a clear and significant risk to the health and safety of the person with a disability or others
- when the risk cannot be eliminated or reduced by other means
- when the assessment of the risk is based on consideration of the nature and severity of the potential harm, the duration of the risk, the likelihood that the potential harm will occur and how imminent the potential risk is;
- when the assessment of risk is based on the person's actual characteristics, not on perceived risk that is based on generalizations, misconceptions or fears about a disability

d) Notice of service disruptions

If there is a temporary disruption in the availability of services and facilities used by tenants/customers with disabilities (e.g., temporary loss of elevator service), DRNPHC will notify the public of the reason for the disruption, the date(s) of disruption, its anticipated duration and a description of alternative facilities or services, if any, that are available.

The *Notice of Service Disruption* may be provided by a variety of methods, depending on the circumstances, and may include postings in conspicuous places at the affected premises (for example, common areas by the elevator, next to the elevator on the main floor), by email, and the DRNPHC website, drnphc@durham-housing.com, as well as by other means that will ensure that the notice reaches those persons potentially affected by the temporary disruption.

If the disruption is anticipated, a reasonable amount of advance notice of the disruption will be provided. If the disruption is unexpected, notice will be provided as soon as possible.

e) Feedback

DRNPHC is committed to providing high quality customer service and wants to continue to enhance and improve the accessibility of our customer service to our tenants, applicants for housing, visitors, members of the community who use our facilities, and other members of the public with disabilities.

A process to receive feedback on the provision of goods and services to tenants/customers with disabilities accessing services at DRNPHC has been established. A *Feedback Notice*

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will be displayed prominently in the building to inform people on how to provide feedback either in person, by telephone, in writing, by email, online or by another method.

A *Customer Service Feedback Form* can be filled out online on the website downloaded in accessible formats from the website, or a copy of the form can be picked up in the building office. The feedback form is available in alternate formats when requested.

Responses to feedback received are not mandatory. If a person who submits feedback requests a response and provides contact information, DRNPHC will follow-up with the individual in the format in which the feedback was received. All feedback will be kept in the strictest confidence and will be used to improve customer service.

f) Training

All individuals who interact and deal with members of the public or other third parties on behalf of DRNPHC whether the person does so as an employee, agent, volunteer or otherwise shall be required to receive training on providing customer service to people with disabilities.

DRNPHC shall ensure that employees and volunteers who deal with the public on behalf of DRNPHC, and those who are involved in DRNPHC policy and program development and/or in directing, monitoring or evaluating policies receive training on accessible customer service.

All third-party contractors who deal with the public or other third parties on behalf of DRNPHC shall ensure that their employees, agents, subcontractors, etc. receive training in accordance with this policy and the *Accessibility Standards for Customer Service, Ontario Regulation 429/07*. Contractors will provide DRNPHC with a *Contractor Compliance Statement* to that affect and, upon request, shall provide the training records to DRNPHC.

DRNPHC employee/volunteer and third-party contractor training will include a review of the purposes of the *Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c11* and the *Accessibility Standards for Customer Service, Ontario Regulation 429/07*, the requirements of this policy, and instruction about the following matters:

- how to interact and communicate with people with various types of disability
- how to interact with people with disabilities who use an assistive device or require the assistance of a guide dog or other service animal or the assistance of a support person
- how to use equipment or devices available on DRNPHC premises or otherwise made available by the housing provider that may help with the delivery of goods or services to a person with a disability
- what to do if a person with a particular type of disability is having difficulty accessing DRNPHC goods or services
- DRNPHC policies, procedures and practices pertaining to the provision of goods and services to persons with disabilities.

Customer service training can take various forms including as part of an orientation or as a



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separate training program. The training can be provided through handouts at an orientation session, in a classroom setting, by video or through other formats.

DRNPHC will provide training to each person as soon as practicable after he or she is assigned the applicable duties. Training will also be provided on an ongoing basis in connection with changes to applicable legislation, and/or organizational policies, procedures and practices governing the provision of goods or services to people with disabilities.

As required, by *Accessibility Standards for Customer Service, Ontario Regulation 429/07*, DRNPHC will log and maintain records which will record the details of the training provided, as well as the name of the person, location, and date the training was completed.

End.

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Administration	Corporate	Board Approved Date:	21-02-24
Policy	Privacy and Confidentiality	Revision Date:	N/A
Policy No.	20-079	Internally Approved Date:	21-02-12
References	Housing Services Act, 2011 Personal Information Protection and Electronic Documents Act, 2000 Occupational Health and Safety Act, 1990 Workplace Violence and Harassment Policy (Human Resources Handbook) Records Management Policy Dispute Resolution Policy		
Forms	Checklist for PIPEDA and HSA Sample Confidentiality Agreement		

1. Policy Statement

In accordance with its obligations under the *Personal Information Protection and Electronic Documents Act* (PIPEDA), the *Housing Services Act* (HSA) Regulation 367/11, and the *Occupational Health and Safety Act* (OHSA), DRNPHC will protect the privacy and confidentiality of the applicants, tenants, employees, board members, volunteers, and other stakeholders by ensuring the appropriate treatment of their personal information.

2. Purpose

The purpose of this policy is to ensure DRNPHC's compliance with the PIPEDA, the HSA and O. Reg. 367/11. Together, these pieces of legislation set out standards for the collection, use, disclosure, and protection of personal information gathered through the administration and operation of non-profit housing.

This policy also sets out the conditions under which personal information may be shared with staff or volunteers in order to protect them from experiencing workplace violence, harassment, or domestic violence in the workplace in accordance with the *Occupational Health and Safety Act*.

3. Scope

This policy applies to the personal information collected by DRNPHC from applicants, rent-geared-to-income and market rent tenants, staff, board members, volunteers, and others.

4. Definitions

Personal information

Refers but not limited to the following types of information:

- an individual's personal address, telephone number, or email address
- any identifying number assigned to an individual which can lead to their identification (e.g. Social Insurance Number)
- information regarding an individual's income and assets
- bank account and credit card information
- information about rent payment history

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- information relating to the race, national or ethnic origin, citizenship status, colour, religion, age, sex, sexual orientation, marital or family status of an individual
- information relating to the education, medical, psychiatric, psychological, criminal or employment history of the individual
- credit and rental history reports
- financial information for the purposes of establishing rent-geared-to-income assistance
- an individual's blood type or fingerprints
- information about an individual's personal or political opinions
- correspondence sent to DRNPHC that is of a private or confidential nature, and any replies from DRNPHC that would reveal contents of the original correspondence
- the individual's name if it appears with other confidential information (e.g. rental arrears reports)
- employee information including résumés, salary and benefits, disciplinary action, bank account information, tenant complaints about the individual, and problems between staff

Personal safety plan

A course of action developed between a staff member and the DRNPHC to help prevent that staff member from domestic violence.

Privacy officer

Refers to the individual responsible for the organization's compliance with all privacy legislation.

DRNPHC

Refers to the organization whose board of directors has approved this policy.

Unauthorized individual

Refers to an individual who is not authorized to view the personal information in question.

Workplace violence

Means the same as the definition in DRNPHC's Workplace Violence and Harassment Policy, as stated in the Personnel Manual, Section B Health & Safety, Workplace Violence page 35 and Workplace Harassment and Anti-Discrimination page 30

Workplace harassment

Means the same as the definition in DRNPHC's Workplace Violence and Harassment Policy, as stated in the Personnel Manual, Section B Health & Safety, Workplace Violence page 35 and Workplace Harassment and Anti-Discrimination page 30

5. Procedure

a) The Privacy Officer

DRNPHC will appoint a member of staff to act as the privacy officer for the organization. DRNPHC's Privacy Officer is the Director, Tenant & Housing Services, available at (905) 436-6610 and drnphc@durham-housing.com.

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The responsibilities of the privacy officer are:

- to review DRNPHC's policies and practices with regard to personal information
- to implement the necessary changes to guarantee that the collection and retrieval of personal information follow DRNPHC's policy
- to inform the tenants and public on how DRNPHC treats personal information
- to respond to complaints, questions, and requests for personal information made under this policy

DRNPHC will, on all forms which pertain to the collection of personal information, identify the name and title of the privacy officer, along with contact information.

b) Collection of information

Personal information will be collected mainly for the following purposes:

- to assess tenancy and determine appropriate unit type and size
- to determine income and assets for rent calculation
- to demonstrate compliance with funding requirements
- to protect the health and safety of the tenant
- to ascertain service levels required in special needs housing
- to conduct reference and employment checks
- to retain relevant information on employees for government reporting purposes
- to assist a member of staff to design and implement a Personal Safety Plan for the workplace

Staff will not seek out personal information about tenants or applicants unless it is relevant to their work. All documents used for collection of personal information will include:

- the purpose(s) of the collection
- the reasons for collection, including the fact that the information may be shared as necessary for the purpose of making decisions or verifying eligibility for assistance under the *Housing Services Act*, 2011, the *Ontario Disability Support Program Act*, 1997, the *Ontario Works Act*, 1997 or the *Day Nurseries Act*, or as authorized by an agreement under section 171 or 172 of the *Housing Services Act*, 2011
- the name, title and contact information of the privacy officer who can answer questions and respond to complaints about the collection, use or disclosure of the information
- a consent form to be signed by the applicant or tenant authorizing the collection, use, verification and disclosure of the information being collected

c) The protection of information

All staff, board members, volunteers, and any other individuals who may have access to applicant, tenant or employee files will be required to sign a confidentiality agreement.

Applicant, tenant and employee files must be safeguarded against unauthorized access.

- Paper copies of applicant/tenant information and employee information must be stored in a locked filing cabinet. Secure storage facilities must be provided for

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archived applicant/tenant/employee and accounting information.

- Databases containing files with personal information, and other confidential electronic files must be password protected against unauthorized access.
- Screen-savers and/or other security measures will be used to protect confidentiality of personal information on computer monitors.

Access to records containing personal information will be granted only if access is required in order to fulfil the designated individual's duties.

When communicating tenant issues to the board, staff will use non-identifying information as much as possible. For example, arrears reports will use codes in place of the actual names of tenants, or summary information will be provided.

All staff have a responsibility to ensure that unauthorized individuals do not have unsupervised access to areas where files are kept and used.

Personal information will be disposed of at the end of the required storage period for tenant records; seven years after the tenant has moved out, and seven years after the end of the fiscal year for financial records.

Paper-based personal information must be shredded prior to disposal. Electronic media must be purged prior to disposal.

d) Release of information

No personal information will be released to third parties without the written consent of the individual (for example: credit references, tenant or personal references). When responding to inquiries for references, staff must limit information provided to the questioner and confirm only the information already provided by the individual making the inquiry.

It is not necessary to have a signed consent to release information to collect a debt, for example to a collection agency, or for a Landlord Tenant Board or Small Claims Court action.

Staff will confirm the identity of the people to whom information is released.

Personal information can be released to the following:

- Funders and auditor: DRNPHC in order to be in compliance with funding program requirements, must release information to funders and auditors. People doing these jobs have their own professional code of ethics and are required to maintain confidentiality. Staff will confirm that the person concerned is seeking access legitimately.
- Access Centre: As part of its responsibilities to the coordinated access system, DRNPHC will provide the access system with information about tenants who have left in arrears. This information will be used by the coordinated access system as part of their screening process for applicants for non-profit housing.
- Researchers: Occasionally, DRNPHC may be asked to assist an approved

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accredited researcher. Authorization to have access to files will depend on their credentials and the nature of their research. The Chief Executive Officer (or designate) must approve all such requests for personal information.

- Credit bureaus: Information on orders or judgements for money owing will be provided to any credit bureau of which DRNPHC is a member.
- Law enforcement: While DRNPHC has a responsibility to protect the right to privacy of applicants and tenants, this responsibility must be balanced with an obligation to protect the broader community. Law enforcement agencies requesting personal information about applicants, tenants, employees, board members or volunteers, for example confirmation that they live or work at DRNPHC, will be required to provide a written request or “warrant” before information will be released.
- Health and safety officials: Personal information will be provided to outside agencies, individuals and institutions when it can be clearly identified as contributing to the applicant or tenant’s benefit, for example, information about an individual’s medical condition to the paramedics or fire department.
- Next of kin or emergency contacts: It may be appropriate to use personal information to contact a community service agency or a designated relative in exceptional circumstances, such as, when using an emergency contact provided by a tenant and held on file, or contacting medical support services when a tenant is unable to function and maintain his/her tenancy.
- In the case of suspected child abuse, information will be provided to the Children’s Aid Society. (This duty to report is required under Section 72 of the Child and Family Services Act.)

Personal information may be released to the police:

- In the context of reporting criminal activity, staff with personal knowledge will report the incident.
- With respect to crimes against persons, witnesses are obligated to report and provide appropriate information to the police so that charges can be laid.
- If there is a substantiated reason to suspect criminal activity, such as drugs or gangs, staff with knowledge of the activity will report it to the police.
- Victims of crimes are responsible for reporting the crime directly to the police. However, if the victim is a child or a person with a disability that renders them incapable of making the decision to report, and an individual has knowledge of this crime, the legal responsibility lies with all citizens and DRNPHC to report the crime to the police.

e) Access to and correction of personal information

The privacy officer will respond to all requests for access to or correction of personal

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information.

An individual who provides satisfactory identification will be informed of the existence, use and disclosure of his or her personal information and will be given access to that information. The privacy of others' personal information must be protected when giving an individual access to their own personal information.

However, if the privacy officer believes that releasing personal information to an individual would prejudice the mental or physical health or security of any person, he or she will not release the information.

Information contained in the file will be reviewed prior to providing access to the file and may be redacted or edited as necessary to protect the privacy and personal information of others.

An individual will be able to challenge the accuracy and completeness of the information and have it amended as appropriate. If the privacy officer is not in agreement with the individual's request for correction, a written counter-statement explaining why the information should not be amended will be provided to the individual and filed with the original information.

f) Procedure for handling complaints

The privacy officer will respond to all complaints about collection, use, disclosure, storage and disposal of personal information within thirty (30) days of the request being made, and advise the complainant as to the action that has been taken.

Each complaint will be assessed to determine whether:

- the collection of personal information is necessary
- the information was collected, used, released or disposed of inappropriately
- DRNPHC's policies and procedures need to be modified
- disciplinary or other action needs to be taken with respect to a breach of a confidentiality agreement

Where necessary, the privacy officer will make the necessary recommendations to the Chief Executive Officer in connection with resolution of the complaint.

g) Prevention of workplace violence

DRNPHC, as part of its Workplace Violence and Workplace Harassment policies, must notify staff, contractors, casual workers, and volunteers if there is the risk of workplace violence from any person (including tenants and co-workers) with a history of violent behavior if:

- they can be expected to encounter that person in the course of their work
- the risk of workplace violence or harassment is likely to expose them to physical injury

Tenant and employee personal information, disclosed in accordance with DRNPHC's Workplace Violence and Workplace Harassment policies, is permissible and will not be considered a breach of confidentiality.

h) Breach of confidentiality

The following constitute breaches of confidentiality:

- Discussion of any confidential information within or outside the organization where it may be heard by individuals who are not authorized to have access to that information.
- The provision of confidential information or records to unauthorized individuals.
- Failing to secure written or electronic personal information which results in the information being visible, or potentially visible, or distributed to unauthorized individuals.
- Deliberately accessing confidential material that is not required by that individual in the performance of their duties.

A breach of confidentiality may be grounds for staff to be disciplined or terminated.

A breach of his or her confidentiality agreement may be grounds for a board member to be removed as a director of the corporation

All others associated with DRNPHC who sign a confidentiality agreement (volunteers, contractors, etc.) will be held to the same standard as staff and board members.

End.

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Administration	Corporate	Board Approved Date:	21-02-24
Policy	Records Management	Revision Date:	N/A
Policy No.	20-081	Internally Approved Date:	21-02-12
References	Personal Information Protection and Electronic Documents Act, 2000 Municipal Freedom of Information and Protection of Privacy Act Housing Services Act, 2011 Ontario Regulation 367/11 [Not-for-Profit Corporation Act, 2010 Security Policy Internal Controls Policy Privacy and Confidentiality Policy		
Forms	Tenant File Structure Corporate File Structure Sample Project Files and Records		

1. Policy Statement

Designated staff will maintain the tenant, corporate, financial and other records of DRNPHC in the manner prescribed in this policy. Documents and records will be kept securely and for the periods prescribed by legislation. All documents and records containing personal, confidential, or sensitive information will be destroyed prior to disposal upon expiration of legislated retention periods.

2. Purpose

The purpose of this policy is to assign responsibility for record management, security, and retention and to standardize the storage of information in order to facilitate easy access to vital information by authorized parties such as staff, the board of directors, auditors, and representatives of the service manager or governments having jurisdiction.

3. Scope

This policy applies to all staff who work with tenant, corporate, financial and other records.

4. Definitions

Designated staff

The staff person(s) or department designated to complete a particular action or requirement.

Personal information

- an individual's personal address, telephone number, or email address
- any identifying number assigned to an individual which can lead to their identification (e.g. Social Insurance Number)
- an individual's income and assets
- bank account and credit card information
- rent payment history
- the race, national or ethnic origin, citizenship status, colour, religion, age, sex, sexual orientation, marital or family status of an individual
- education, medical, psychiatric, psychological, criminal or employment history of the individual

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- credit and rental history reports
- financial information for the purposes of establishing rent-geared-to-income assistance
- an individual's blood type or fingerprints
- information about an individual's personal or political opinions
- correspondence sent to DRNPHC that is of a private or confidential nature, and any replies from DRNPHC that would reveal contents of the original correspondence
- the individual's name if it appears with other confidential information (e.g. rental arrears reports)
- employee information including résumés, salary and benefits, disciplinary action, bank account information, tenant complaints about the individual, and problems between staff

Sensitive information

Any financial, corporate, or legal information related to DRNPHC, its activities, and its interests.

5. Procedure

a) Record and document management

Tenant file structure (paper)

Tenant files will be organized in accordance with the *Tenant File Structure* and will be maintained by designated staff.

Active tenant files will be stored in a locked file room in accordance with DRNPHC's *Security Policy*.

Tenant Site Files (paper)

DRNPHC will retain a file on site for each tenant containing emergency contact information, notice of entry and similar site documentation. When the tenancy ends these files will be returned to the main office for inclusion with the main tenant file.

Corporate filing structure (paper)

Corporate and financial records, operational information, property maintenance information, contracts and other documents will be filed in accordance with *Corporate File Structure* and will be maintained by designated staff.

Active files will be stored in the head office file room or in locked file cabinets in the appropriate department in accordance with DRNPHC's *Security Policy*.

Electronic files and records

Electronic files and records are stored on a main server located at DRNPHC's head office. A series of drives are available for employees to store their data and files; however, staff are directed to use the J drive for this. Various folders are organized on the J drive that represents the key departments, areas of the business, and key initiatives. Staff are required to save their

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electronic documents to these folders and drive.

Designated staff or an external contracted service will create back-up copies of all electronic records and files on a daily basis. Back-up copies are automatically made using 'Datto Service' cloud technology.

Inactive files and documents

Tenant files will be declared inactive five years after the tenant moves out of DRNPHC

Financial records (including RGI Calculations for former RGI tenants) will be declared inactive seven years after the end of the fiscal year to which they relate.

Corporate and other files and documents may be declared inactive if the information contained within the file or document is no longer applicable.

Designated staff will store inactive files in either the Wood Farm Manor File Storage Room or with an external file storage company.

b) Removal of records

Paper and electronic records that contain personal or sensitive information will not be removed from DRNPHC's premises without the written consent of designated staff. These records must be properly secured and may not be left unattended while off the premises of DRNPHC.

Staff permitted to remove records from the premises of DRNPHC will take the following steps to ensure the security of the information and the privacy of individuals and/or DRNPHC.

Electronic files will be password encoded.

Paper files will be stored in a secure location (note: locked vehicles are not considered to be a "secure location").

Files, regardless of type, will not be shared with or distributed to unauthorized individuals, groups, or organizations.

c) Document and file retention

Paper documents and records

All inactive documents and files will be retained for seven years from the date that they were declared inactive.

All inactive documents and files will be stored in either the Wood Farm Manor File Storage Room or with an external file storage company.

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Files and documents will be retained for different periods of time from the date they were declared inactive based on the type of information contained within them. Inactive files will be moved to the storage location on an annual basis by designated staff or sooner if so determined by the designated staff.

Retention period	Type of information/document
indefinite	<ul style="list-style-type: none"> articles of incorporation signed minutes from board of directors and members meetings letters patent registers of current and former directors and officers operating agreement, construction contract, ground lease, contract with a development consultant or architect or any title document relating to the development or construction of the housing project. drawings, plans and technical specifications corporate bylaws
until revised	<ul style="list-style-type: none"> board-approved policies
7 years	<ul style="list-style-type: none"> financial information (<i>seven years after the end of the fiscal year to which it relates e.g., income tax returns, accounts payable/receivable</i>) records of decisions to refuse to offer a unit to an applicant (<i>seven years after applicant receives notice</i>) contracts (<i>seven years after the agreement has been terminated or expires e.g. service contracts, partnership agreements</i>)
7 years	<ul style="list-style-type: none"> minimum retention period for files of former RGI households

Electronic documents and records

Back-up copies of electronic information will be stored indefinitely. Back-ups of electronic information will be stored off site in the cloud by an external contractor and will be updated on a daily basis.

d) Destruction of files and documents

Paper files and documents

Documents and files that contain personal and/or sensitive information and that are no longer required by legislation to be retained by the corporation shall be destroyed on an annual basis.

Designated staff will be responsible for the destruction and disposal of documents and files. All documents will be shredded by an external contractor.

Destroyed paper documents and files will be recycled where appropriate.

e) Electronic files

Designated staff will utilize the necessary measures such as disk encryption to securely delete inactive electronic files on all active computers on an annual basis. Third party software or

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drive scrubbers will be used when the hard drive is being recycled or donated.

f) Electronic devices

All portable electronic devices, which may contain personal or sensitive information and which cannot be reused in a manner that safely removes that information will be irreparably destroyed. This includes CDs, disks, back up disks, and other similar technologies.

Flash drives and other reusable electronic devices will be inspected on an annual basis and the contents deleted using third party software.

Computer hard drives will be destroyed (holes drilled through the device) when central processing units are being disposed of (not recycled or donated) in order to prevent any latent files from being recovered by unauthorized individuals.

g) Record of destruction

A record of what files and/or devices were destroyed, the method of destruction and the date items were destroyed, will be maintained by designated staff and kept on file for easy reference.

next of kin claim property that has been disposed of, DRNPHC will pay the estate the difference between the proceeds of the sale of the property and DRNPHC's out-of-pocket expenses related to the moving, storing, securing, and selling of the property, as well as any arrears of rent.

End.

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Administration	Tenant & Housing Services	Board Approved Date:	21-02-24
Policy	Dispute Resolution	Revision Date:	N/A
Policy No.	20-080	Internally Approved Date:	21-02-12
References	Residential Tenancies Act, 2006 Human Rights Code, 1990 Personal Information Protection and Electronic Documents Act, 2000 Employment Standards Act, 2000 Human Rights Code Policy Accommodation Policy Personnel Policy Workplace Safety and Harassment Policy		
Forms	Incident Report Summary Sample Behavioral Contract Sample Complainant Interview Sample Respondent Interview Sample Witness Interview Template for Investigation Report Tenant Complaint Record Tenant Contact Sheet		

1. Policy Statement

The DRNPHC recognizes that individuals may require assistance to resolve inter-personal conflicts with others. Where possible, staff will work with tenants and staff to assist them to resolve disputes in an informal manner, ensuring that the process supports and recognizes each individual needs. Where informal conflict resolution is not possible or appropriate, a formal investigation and dispute resolution process will be pursued.

2. Purpose

The purpose of this policy is to outline the process DRNPHC will follow to respond to complaints or interpersonal conflicts between tenants, guests and/or visitors, staff, volunteers and members of the board of directors.

3. Scope

This policy applies to all tenants, their visitors and guests, staff, volunteers, and the board of directors. It will be used by staff when an individual(s) brings forward complaints, concerns, or disputes regarding the conduct of others under DRNPHC's control.

When this policy is used to address the alleged conduct of tenants, occupants, visitors and guests, designated staff will also consider the impacts of the *Residential Tenancies Act, 2006*, *Human Rights Code, 1990*, *Employment Standards Act, 2000* and other appropriate legislation and DRNPHC's policies.

When this policy is used to address the alleged conduct of staff, volunteers and board members, designated staff will consider DRNPHC's Personnel Policies, as well as the impacts of the *Occupational Health and Safety Act, 1990*, *Human Rights Code, 1990*, *Employment Standards Act, 2000* and other appropriate or intersecting legislation

Definitions

Bias-related complaint

An unsubstantiated complaint, made by the complainant, found to be rooted in prejudicial

and/or discriminatory beliefs about the Respondent.

Complainant

The individual or group filing the complaint.

Designated senior staff

The staff person(s), more senior in role than the designated staff designated to complete a particular action or requirement.

Designated staff

The staff person(s) or department designated to complete a particular action or requirement.

Guest

A person who has not provided proof of an alternative address and who is staying with a tenant for a limited time. Their income is not included in the calculation of the tenant's rent-geared-to-income subsidy, if applicable.

Respondent

The individual or group about whom the complaint has been filed.

Tenant

A person who has signed a lease and who enjoys all of the rights and responsibilities of tenancy.

DRNPHC

Refers to Durham Region Non-Profit Housing Corporation the organization whose board of directors has approved this policy.

Visitor

A person who visits the tenant, but whose principal address is outside of DRNPHC.

4. Procedure

Step 1

a) Receipt of complaint

DRNPHC will only receive complaints that are written and signed by the complainant (see *Tenant Complaint Record*). Staff may also report incidents using the *Incident Report Summary*. Complainants who wish to submit a verbal complaint will be re-directed to provide a written complaint.

If, however, the complainant identifies that they require support to submit a complaint, DRNPHC staff will accommodate the needs of the complainant, if possible. If they are unable to appropriately accommodate the needs of the complainant, DRNPHC staff will assist the complainant to identify appropriate community-based supports.

Once a written complaint has been received, designated staff will review the complaint.

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Designated staff may contact the complainant to identify themselves as the investigator and to arrange an in-person, virtual or telephone meeting if required.

Designated staff will send a letter or e-mail to the complainant acknowledging the complaint has been received.

Step 2

b) Initial assessment

Designated staff will conduct an initial assessment of the complaint using a variety of tools available, including but not limited to:

- reviewing past complaints of the same nature
- by looking at any multimedia included in the complaint -Video/Audio footage, pictures, social media posts
- physically attending the site to view evidence visible
- interview with the complainant in person, over the telephone or by e-mail and clarifying their written complaint and requesting additional information if necessary.

It will be the practice of DRNPHC to share the nature of the complaint with the respondent. The complainants' name will be withheld to protect the complainant's privacy. Should the complaint be needed in the Landlord and Tenant Board Process, permission from the complainant will be obtained.

Designated staff will, in interviews and other notes, distinguish between their thoughts and opinions and those of the complainant. During the assessment, designated staff will note any adverse effects that the events in question have had on the complainant's or their household's demeanor/affect, quality of life, or on their professional life at DRNPHC.

Once designated staff has conducted their initial assessment, a determination will be made as to whether or not the complaint has merit. The merit of the complaint will be assessed in relation to DRNPHC's *Human Rights Code Policy* and other policies.

If, after a thorough review and in consideration of all the evidence, designated staff consider it appropriate to dismiss the complaint designated staff will notify the complainant in writing, including the reasons for the decision. Should the complainant have further evidence, they are asked to bring it forward in a new complaint.

If designated staff identify that an inappropriate, bias-related complaint was filed, DRNPHC staff may be directed to coordinate, deliver, or distribute educational resources, programs, or services to address any Code-related concerns.

If a complaint is believed to have merit, designated staff will proceed to interview the respondent, if necessary.

Step 3

c) Assessment of respondent

If required, designated staff may contact the respondent for an interview to discuss the complaint received for further information and the respondents' side of the story.

During the interview, designated staff will use neutral questions and will not challenge the respondent's version of the event(s) by using information gathered from the complainant. The respondent will also be invited to provide a written version of the events in question to the designated staff.

If the respondent requires support or assistance to understand the nature or repercussions of the complaint, DRNPHC staff will accommodate the needs of the respondent, if possible. If they are unable to appropriately accommodate the needs of the respondent, DRNPHC staff will assist the respondent to identify appropriate community-based supports.

If the respondent acknowledges that the incident(s) took place, then designated staff will work with the respondent to address their conduct or the conduct of others for whom they are responsible. The details of this interaction with the respondent and all agreed to, or suggested, solutions will be kept in the respondent's tenancy file.

If the respondent acknowledges the events and commits to working with staff and the complainant to resolve the problem (e.g. through mediation or discussion) and it may be possible to resolve the complaint at this point proceed to Step Five. However, if, the nature of the complaint is such that future legal action may be required, it is recommended that designated staff proceed to Step 4.

Step 4

d) Interviewing witnesses

If necessary, designated staff will complete interviews with witnesses. If no witnesses are identified by either the complainant or respondent, staff may approach neighbors or others who may have witnessed the disputed event(s). It is crucial that the privacy rights of both the complainant and respondent are respected during the interviews.

Witnesses - Like the interviews with the complainant and respondent, interviews (see *Sample Witness Interview*) with witnesses must be thoroughly documented, and include the name of the witness and date and time of the interview. Designated staff will use neutral non-leading language in their questioning and avoid conveying bias toward or against either the respondent or complainant's version of events.

Neighbours or others - If neither the complainant nor respondent identify witnesses or if the designated staff has reservations about the information provided by either party, designated staff may contact neighbours or others regarding the alleged events.

When speaking with neighbours who were not identified as witnesses by either the respondent or complainant, designated staff will avoid sharing details of the complaint, which must remain confidential. Interviewees will only be told that an incident has been reported and is being investigated.

Step 5

e) Resolution

Informal Resolution

If possible and appropriate, DRNPHC will encourage tenants to resolve conflicts on their own. If helpful, an attempt to resolve disputes between individuals through informal facilitated discussion will be offered. This type of mediation is only appropriate when there are no safety concerns, racism or identified risk of violence present. Designated staff will ensure that communication between the individuals remains respectful and constructive and that a solution or resolution is identified. If necessary, these discussions will be held in a neutral location, where both parties are comfortable and/or where it may be facilitated by a neutral third party.

If the respondent or complainant is unwilling to meet to discuss the complaint, the designated staff may meet with each party separately to try to resolve the problem.

If either party is unwilling to participate in the informal resolution process in good faith, designated staff will implement a formal resolution process.

If a solution is identified through an informal resolution process, the designated staff will distribute copies of a summary of the mediation meeting and actions the parties agreed to.

Formal resolution

Once designated staff have concluded and reviewed any documentary evidence, an investigation report will be generated (see *Template for Investigation Report*) outlining the following:

- allegations of the complainant
- response from respondent
- main points at issue
- evidence (witness, documents etc.)
- other information
- conclusion with recommendation about action to be taken

When the investigator determines that the complaint is serious enough to constitute grounds to pursue eviction, discipline or intervention, or that mediation by the designated staff will not help resolve the problem, the designated staff will ensure the following:

- the respondent is notified in writing about the findings of the investigation, the evidence collected to support the complaint, DRNPHC's policies which may have been contravened, and the non-profit's intended actions.
- If code-related concerns are suspected, an accommodation meeting request will be sent with the letter.

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- the complainant receives notice that the investigation has been completed and the findings of the investigation. Designated staff will ensure privacy legislation and/or internal privacy policies are respected.
- Any resources available to assist in resolving the problem are included in the letter. This may include referrals to community-based supports/programs, identifying a willingness for staff to work with the respondent who is a tenant and their supports to prevent eviction (if appropriate to the situation), identifying a willingness for senior staff to work with a respondent who is a staff member to prevent termination of employment (if appropriate to the situation) etc.

If necessary, the Chief Executive Officer or designate will report the findings of the investigation to the Board of Directors. This report will outline the general nature of the complaint(s) received, the steps taken toward resolution, and will identify any next steps.

If necessary, DRNPHC's legal counsel will be consulted before a recommendation to begin eviction procedures or disciplinary measures is made.

Step 6

f) Remedies

The decision to take eviction or disciplinary action must be independent of the investigation process and must be made by someone senior to the designated staff involved in the investigation. This may be a senior staff member or a member of the board. This decision will be based on the recommendations of designated staff and in consultation with all appropriate stakeholders.

Step 7

g) Reviewing decisions

Complainants or respondents who have reason to believe an investigation has not been conducted properly and according to these procedures will have the opportunity to have the decision(s) reviewed by designated senior staff who are independent of the investigation process.

Receipt of request for review

DRNPHC will accept only written requests for a review of a decision(s) made under this policy.

If the Complainant or Respondent identifies that they require support to submit a request for a review, DRNPHC staff will endeavor to accommodate their needs. If they are unable to accommodate the needs of the Complainant or Respondent, DRNPHC staff will assist them to identify appropriate community-based supports.

Once a written request for a review has been received, designated senior staff will review the request within three business days. Designated senior staff will then contact the Complainant or Respondent to identify themselves as the individual conducting the review

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and to arrange an in-person or telephone meeting within five days of receipt.

Review process

Designated senior staff will conduct a review of the decision within fourteen (14) business days of having met with the Complainant or Respondent. However, if exceptional circumstances delay the investigation, the designated senior staff will notify the Complainant or Respondent in writing of the cause of the delay and provide an alternate date. The notification of the delay will be kept on file.

Designated senior staff will review the decision(s) in question and may, at their discretion, interview the designated staff, the Respondent or Complainant, and any witnesses.

Within five days of completing their review, designated senior staff will send a letter to the party requesting the review outlining their findings and whether or not they are upholding the decision(s) made by designated staff and the reasons for doing so.

h) Safety of designated staff

If, at any time during the resolution of a complaint, the designated staff believes that their personal safety is at risk, designated senior staff will work with designated staff to identify actions and/or strategies to help ensure designated staff's safety.

End.

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Administration	Tenant & Housing Services	Board Approved Date:	21-02-24
Policy	Guests	Revision Date:	N/A
Policy No.	20-082	Internally Approved Date:	21-02-12
References	Housing Services Act, 2011 O. Reg. 367/11 Section 96 (4) Residential Tenancies Act, 2006 Accommodation Policy Review of Decisions Policy		
Forms			

1. Policy Statement

DRNPHC will permit all tenants to invite overnight guests into their home for periods not greater than 14 days. As much as possible DRNPHC will treat market and rent-geared-to-income tenants similarly and will seek to balance the rights of tenants to host overnight guests with its legislated obligations.

2. Purpose

The purpose of this policy is to:

- ensure both DRNPHC and tenants comply with provincial laws and regulations
- ensure subsidies are based on the true household income, including anyone who has moved into the unit
- ensure all tenants, including those who join the household, are subject to the same rules as other tenants in DRNPHC
- treat market rent tenants and RGI tenants as equitably as possible while complying with provincial regulations

3. Scope

This policy applies to all tenants of DRNPHC.

4. Definitions

Applicant

An individual or household who is applying for tenancy at DRNPHC.

Designated staff

The staff person or department who has been designated to complete a particular action or requirement.

Guest

A person who has not provided proof of an alternative address and who is staying with a tenant for a limited time. Their income is not included in the calculation of the tenant's rent-geared-to-income subsidy, if applicable.

HSA

Housing Services Act, 2011

Occupant

A person who lives in a unit with the permission of DRNPHC and the current tenant, but does not have any right to remain in the unit after the current tenant moves out.

RGI subsidy

The tenant's rent-geared-to-income subsidy.

RTA

The *Residential Tenancies Act, 2006*

Tenant

A person who has signed a lease and who enjoys all of the rights and responsibilities of tenancy.

Visitor

A person who visits the tenant, but whose principal address is outside DRNPHC.

5. Procedure

a) Visitors

Visitors may come to the unit as frequently as the tenant invites them. Very frequent visitors may be asked to provide proof of residence elsewhere. Exceptions for extenuating circumstances such as an extended illness may be granted.

b) Guests

Any tenant may invite guests into their unit for up to two week's stay without the DRNPHC's consent.

If a tenant would like a guest to stay for longer than two weeks, they must submit a written request to DRNPHC, stating the length of time the guest would like to stay and providing the guest's home address.

If granted, designated staff will advise, in writing, the length of the stay permitted.

Designated staff may refuse the request if staff or other tenants have complained about the guest's behaviour and those complaints have been found to be valid.

At the end of the permitted stay, designated staff will confirm with the tenant that the guest has left. The unit may be inspected to confirm this information. Tenants will be given proper notice prior to a unit being inspected. With the tenant's consent, guests who wish to stay beyond the term may apply to become tenants.

If a guest remains in an RGI unit without the consent of DRNPHC, designated staff will notify the tenant that their guest's on-going presence in the unit is jeopardizing their RGI subsidy and an investigation may begin.

At all times, tenants are responsible for the behaviour of their guests.

If the tenant moves out of the unit, the guest must also move. Any guests remaining in the unit after the lease-holding tenant moves out will be identified as trespassing and appropriate action available to DRNPHC and / or through the Landlord and Tenant Board will be taken.

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At no time is DRNPHC to refer to the guest as a tenant.

c) Additions to RGI households

Tenants must report any new persons who will be residing in the unit immediately. Tenants wanting guests to become co-tenants or an occupant must make a written request to designated staff before the guest's term of stay is over.

If the tenancy is RGI, a formal application process must be completed, which requires providing updated proof of income and current status in Canada from all proposed members of the revised household, including current tenants.

The person requesting to be added to the household must be eligible to receive RGI subsidy in order for the entire household to continue to qualify for RGI subsidy.

- If they are not eligible for RGI subsidy, DRNPHC will inform them and the tenant. DRNPHC may allow the newcomer to become a tenant or occupant, but the household will cease to be eligible for its RGI subsidy.
- If they are eligible for RGI subsidy, then DRNPHC may permit them to become a tenant. The household, including the new addition, will be required to sign a new lease.

Designated staff may refuse to allow the new addition to become a tenant on the grounds outlined in O. Regulation 367/11 of the *HSA*, section 50 (1):

- if it would be contrary to the mandate of the housing provider under section 76 of the Act
- based on the new addition's rental history, that they may fail to fulfill their obligations to pay rent for the unit in the amount and at the times the rent is due
- The unit is one in which individuals will reside in a shared living situation and it would be unreasonable for the household to reside in the shared accommodation
- If the person requesting tenancy status is refused and/or ineligible to receive an RGI subsidy, designated staff may initiate proceedings under the *HSA* to revoke the household's RGI subsidy.

Unreported stays

If DRNPHC is notified by a third party that a visitor or guest has been staying in an RGI unit for a period longer than 14 days, designated staff will contact the tenant by telephone or, if necessary, in writing, to confirm the duration of the individual(s)'s stay.

If confirmation is not received and/or the visitor or guest remains in the unit for longer than the permitted stay, designated staff will issue a notice of decision to the household, indicating that their RGI subsidy may be in jeopardy.

Designated staff may request that the tenant provide proof that their visitor / guest resides elsewhere or ask that they complete a sworn affidavit that the visitor / guest does not permanently reside in the unit.

If it is established that the new individual in the unit is a guest who has stayed in the unit longer than permitted by DRNPHC, the occupant must apply to become a tenant (following the steps above). This could result in a retroactive rent charge or a loss in subsidy.

d) Additions to market rent households

Market rent tenants must report any new occupants in their unit immediately of their moving into the unit.

- It is the market rent tenant's decision whether or not to grant tenancy rights to the occupant. If the tenant would like the occupant to become a tenant, then the occupant must complete a tenancy application with DRNPHC.
- Designated staff will screen the applicant prior to revising the tenancy in the unit.
- Designated staff may refuse to grant tenancy if the applicant would not have been accepted had they been a member of the original household.
- Designated staff may allow the applicant to remain as an occupant while the current tenant remains solely responsible for the rent, unit, and the conduct of the occupant and other guests.

End.

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Administration	Tenant & Housing Services	Board Approved Date:	21-02-24
Policy	Tenant Selection	Revision Date:	N/A
Policy No.	20-083	Internally Approved Date:	21-02-12
References	Human Rights Code, 1990 Residential Tenancies Act, 2006 Housing Services Act, 2011 - O. Reg. 298/01 & O. Reg. 367/11 Internal Transfer Policy Review of Decisions Policy Human Rights Code Policy Accommodation Policy Privacy and Confidentiality Policy		
Forms	Code-Compliant Market Rent Application Applicant Reference Form Declaration of Property Household Income and Asset Review Form Notice Letter - Refusal to Offer Proof of Employment Income Proof of Legal Status in Canada RGI Eligibility Checklist		

1. Policy Statement

DRNPHC will select applicants for vacant units in a manner that complies with the Human Rights Code, Housing Services Act and Regional Directives issued by the Region of Durham.

2. Purpose

- to provide direction to designated staff on the use and administration of waiting lists for rent-geared-to-income, special needs, and market rent units.
- to ensure that the selection or refusal of applicants for tenancy and/or rent-geared-to-income subsidy is conducted in adherence with the appropriate service manager guidelines / directives, legislation, and regulations.

3. Scope

This policy applies to all applicable staff when filling all units for DRNPHC.

4. Definitions

Centralized waiting list

The waiting list for non-profit housing that is administered by the service manager.

DASH

Durham Access to Social Housing is unit in the Region of Durham that administers the Centralized Waiting List for RGI. This unit manages the process to apply for and receive RGI housing in the region in accordance with the Housing Services Act.

Designated staff

The staff person(s) or department designated to complete a particular action or requirement

RGI

Rent Geared to Income is a housing subsidy or benefit to make rent affordable for households

Service manager

The municipality, district social services administration board, area services board, or other agency, board, or commission responsible for the oversight and administration of DRNPHC, as named in Schedule 2 of Ontario Regulation 367/11. The Region of Durham is the appointed Service Manager for Durham Region.

Special needs waiting list

The waiting list for housing that has been modified for people with disabilities or has available support services. Under the *Housing Services Act* special needs waiting lists are maintained by the service manager or by housing providers /support agencies designated as Special Needs Administrators.

Special priority

Status granted through an approval process by service managers to applicants or tenants who have experienced domestic violence giving them higher priority on the centralized waiting list for rent-geared-to-income housing.

Targeting plan

Indicates the number of RGI units within a housing project.

Tenant

A person who has signed a lease and who enjoys all of the rights and responsibilities of tenancy.

Overhoused household

An RGI household living in a unit which is larger than the largest unit for which it qualifies under occupancy standards set by the service manager under a local rule.

5. Procedure

- a) Applicants offered units in DRNPHC will be selected from authorized waiting lists.
- b) Staff will provide information to members of the public interesting in applying for the waiting lists for RGI and market rent units. Staff will refer all inquiries for RGI to DASH.
- c) DASH will manage the wait list for RGI for DRNPHC units based on the Housing Services Act and Regional Directives.
- d) DRNPHC will manage the wait list for market rent units. Adding and updating market rent applications until the applicants receive housing or are removed from the wait list.
- e) DRNPHC will also maintain a list of applicants who are required to move based on Regional Directives or have been approved for an internal transfer based on DRNPHC Policies.

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- f) Each time DRNPHC has a vacant unit they will review the targeting plan for the building to determine if the unit will be designated as RGI or if it will be filled by a market rent household. DRNPHC will further determine if the unit will be filled by an existing tenant through an internal transfer or if the unit will be filled by an applicant from the authorized waiting lists.

g) Tenant selection

Rent-Geared-to-Income

When a unit is to be designated as RGI and to be filled with an applicant from DASH, DRNPHC will complete the Communication Form to advise DASH of the vacancy. DASH will post the vacancy and make it available for applicants to view on their website. Applicants can express their interest for units directly with DASH who will provide the name of the top ranked applicant eligible for the unit to DRNPHC. DRNPHC will contact the applicant(s) to make arrangements for the interested household to view the unit.

If the applicant(s) are not interested in the unit, a letter will be sent to the applicant documenting the refusal and the designated staff will complete a *Communication Form* and send to DASH

If the applicant is interested in applying for the vacant unit, designated staff will ask the applicant to complete the DRNPHC's housing application form and the *Eligibility Verification RGI and Modified Housing Form*.

Market rent units

Each time there is a market rent vacancy to be filled from the waiting list, designated staff will contact the market rent applicants with the oldest application who have selected the buildings/unit size to offer the unit.

If an applicant is interested in a unit, designated staff will make arrangements for the interested household to view the unit. The prospective tenant will complete DRNPHC's housing application.

Once the information has been received, designated staff will assess the application to determine the prospective household's eligibility for tenancy.

h) Assessment of eligibility for tenancy

Designated staff will screen applicants for tenancy in accordance with DRNPHC's *Human Rights Code Policy* and *Privacy and Confidentiality Policy*.

Designated staff will:

- Review the application for completed information including income verification, past rental history, household demographics and signed consent. If the application is not completed in full, designated staff will contact the applicant to inform them of missing information
- Contact the tenants' prior landlord(s) for references to determine their rental history and fill in an *Applicant Reference Form* when doing so.

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- Designated staff will conduct a credit check on applicants (Market Rent Applicants Only)
- Assess income amounts to ensure the applicant has enough funds to cover the rent amount (Market Rent Applicants Only)
- Once the information has been assembled, designated staff will make a determination regarding the prospective household's eligibility for tenancy.
- In the event that a poor credit or rental history is received, designated staff will consult with the prospective tenants to determine what role, if any, Code-protected grounds played in their credit or rental history. If Code-protected grounds played a role, designated staff will work with the prospective household in accordance with DRNPHC's *Accommodation Policy*.
- In the event that poor credit or rental history is identified, DRNPHC may request a guarantor as a condition of tenancy.
- If designated staff determines that the household is ineligible for tenancy, they will notify the applicant(s).

i) Assessment of eligibility for RGI subsidy

If the household is deemed to be eligible for RGI subsidy, the size of the household is appropriate for the size of the unit and the household is eligible for tenancy, designated staff will contact the applicants to offer them the unit.

RGI applicants can not be in arrears with another community provider. If it is found that arrears are present, designated staff will follow direction found in the Region of Durham RGI Guide.

If the household is deemed ineligible for RGI subsidy, designated staff will issue a notice of decision to the household and complete the *Communication Form* and send it to DASH.

Offer

If designated staff determines that the household is eligible for tenancy and for an RGI subsidy, they will offer the unit to the applicant.

Selection from special needs waiting list

Applicants for units with support services or physical modifications will be selected from the special needs waiting list maintained by DASH.

Applicants from the special needs waiting list who also require an RGI subsidy will have their eligibility for the unit and subsidy assessed separately.

j) Refusal to offer RGI

Designated staff may refuse to offer a unit to an RGI applicant only if:

- the selection of the applicant household would be contrary to DRNPHC's mandate;

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- designated staff have reasonable grounds to believe, based on the applicant household's rental history, that the applicants may fail to fulfill their obligation to pay their rent in full and on time;
- in the case of special needs housing, the level of service required by the applicant household is significantly greater or significantly less than the level of assistance provided to a household in the unit.
- An eviction from a community housing unit as a result of an illegal act

Designated staff will issue a letter to the applicant household detailing the reasons why they were not offered the unit. Designated staff will keep a copy of the decision, as well as all supporting documentation used in making the decision, for a period of not less than seven (7) years (See *Sample Letter – Notice -Refusal to Offer*).

Designated staff will arrange for a review of the decision to refuse to offer the unit if a request for review is received by DRNPHC within 10 business days of issuing the notice of refusal to the applicant household. See DRNPHC's *Review of Decisions Policy*.

k) Refusal to offer (market rent)

Designated staff may refuse to offer a unit to a market rent applicant based on the following grounds:

- a pattern of late payment of a similar rent; and/or,
- insufficient income and inability/refusal to provide a guarantor and/or,
- arrears or damages reported from a previous landlord

Designated staff will contact the applicant and notify them in writing that they have been refused as tenants. Designated staff will not disclose the grounds upon which they made the decision.

Designated staff will document the decision, details and/or notes of their contact with the applicant, and file it with the application.

End.

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Administration	Tenant & Housing Services	Board Approved Date:	21-02-24
Policy	Eviction Prevention	Revision Date:	N/A
Policy No.	20-084	Internally Approved Date:	21-02-12
References	Ontario Human Rights Code, 1990, Ontario Human Rights Commission, Policy on Human Rights and Rental Housing, Residential Tenancies Act, 2006, Housing Services Act, 2011 Accommodation Policy, Privacy and Confidentiality Policy, Tenant Dispute Resolution Policy		
Forms	Sample Repayment Agreement		

1. Policy Statement

Recognizing its role in providing safe, secure, affordable housing to the community and its responsibilities under the Ontario *Human Rights Code*, the *Residential Tenancies Act* and the *Housing Services Act* DRNPHC will proactively work with its tenants to, where possible, prevent their eviction. DRNPHC also recognizes the roles that tenants must play in preventing eviction and will invite and encourage their participation in the eviction prevention process.

2. Purpose

The purpose of this policy is to provide staff with a formalized and systematic approach that creates opportunities for tenants to work with staff to retain their tenancies. This approach will help to identify strategies which will meet the needs of both the tenant(s), community members and DRNPHC and may identify instances where accommodation is required.

3. Scope

This policy focuses on situations where tenants are at risk of losing their tenancy due to arrears or conduct which is believed to contravene the lease agreement and the *Residential Tenancies Act, 2006*. The service co-ordination approach outlined in the procedures will be implemented in cases where there is no threat to the safety of staff, tenants, or members of the community, or at the discretion of designated staff.

4. Definitions

Accommodation

Means the same as the definition in DRNPHC's *Accommodation Policy* and the Ontario *Human Rights Code*.

Designated staff

The staff person or department who has been designated to complete a particular action or requirement.

Guest

A person who has not provided proof of an alternative address and who is staying with a tenant for a limited time. Their income is not included in the calculation of the tenant's rent-geared-to-income subsidy, if applicable.

LTB

The Landlord and Tenant Board

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Pay Direct

The system whereby rent payments are paid to DRNPHC directly by Ontario Works or the Ontario Disability Support Programs

Notice of Termination

Notice forms issued by landlords under the *Residential Tenancies Act*

Tenant

A person who has signed a lease and who enjoys all of the rights and responsibilities of tenancy.

Occupant

A person who is not a tenant but who lives in the rental unit as their principal residence.

Visitor

A person who visits the tenant, but whose principal address is outside DRNPHC

5. Procedure

a) Tenant responsibilities

Tenants are responsible for meeting their obligations under their signed lease with DRNPHC. These obligations are consistent with some or all of the *Residential Tenancies Act, 2006*, the *Housing Services Act, 2011*, and the *Ontario Human Rights Code, 1990*, and their Regulations.

Tenant responsibilities include, but are not limited to:

- payment of their rent, in full, on or before the first day of the month;
- RGI households to report certain changes in household composition and / or income to ensure accurate and timely calculations of rent and to prevent loss of rental subsidy;
- conducting themselves in a manner which does not interfere with the reasonable enjoyment of the premises or lawful right by other tenants or the landlord. This responsibility includes ensuring that the conduct of their occupants, guests or visitors, as well as their pets, is similarly not disruptive; and,
- keeping the residence clean and in a reasonable state of repair; and,
- reporting all required maintenance and repairs in a timely manner, including any damage caused by the tenant or their occupants, guests or visitors.

b) DRNPHC responsibilities

DRNPHC's responsibilities, as they relate to fulfilling tenant responsibilities and supporting successful tenancies, include:

- providing tenants with clear, complete, timely, and accurate information regarding their subsidy and rent;
- offering a range of payment options, such as cash, cheque, debit, pre-authorized payment, and pay direct;
- providing information at all times about resources available in the community which may support a successful tenancy including, but not limited to, rent assistance programs, legal clinics, food banks, and settlement and translation services; and,
- working with the tenant to identify necessary accommodations under the *Ontario*

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Human Rights Code, 1990, implemented in accordance with the non-profit's Accommodation Policy.

DRNPHC will, in accordance with its *Accommodation Policy*, provide all information in alternative formats, as requested, and will work with the tenant(s) to identify appropriate ways to convey information and requirements in a timely manner.

c) Eviction prevention (arrears)

DRNPHC will ensure that all Notices of Termination and Applications with regard to non-payment of rent are served and filed in a timely manner.

DRNPHC will seek to ensure that an LTB Notice to Terminate for Non-payment of Rent (N4) is served on or before the fifth calendar day of each month to all tenants who did not pay their rent on time.

An information insert, which includes the following details, will accompany the N4:

- repercussions of failing to pay rent or enter into a re-payment plan, including the potential for eviction;
- local resources and supports which may assist the tenant to repay arrears or provide the tenant with money management or legal expertise; and,
- an invitation to speak with staff about re-payment options and/or to clarify questions or concerns.

If an accommodation has been identified, notice will be issued in a format consistent with the accommodation requirements. If the need for accommodation is suspected, designated staff will use their judgment to identify, and implement, an alternate strategy for notifying the tenant. The alternate means of conveying the Notice will be documented in the tenant's file.

If the tenant does not respond to the N4, a 24-hour notice of entry may be served to the unit after the termination date on the N4 notice to determine if the tenant has already vacated. If the tenant still resides in the unit, this will allow a final opportunity to work with the tenant to prevent eviction. If the tenant has vacated, the eviction can proceed in order to obtain a formal order from the Landlord and Tenant Board that will be enforceable for collection, or DRNPHC can determine that the tenant has complied with the N4 (i.e., pay or leave) and take possession of the unit.

If there is no resolution following a unit visit, an application to Terminate (L1) will be filed with the LTB within 25 calendar days of the N4 being served.

Prior to the LTB hearing, DRNPHC will make an effort to contact the tenant in arrears to assess their willingness to repay the arrears or enter into a *repayment agreement* prior to filing an LTB order with the Sheriff's office. At the hearing, designated staff will work with the assigned mediator, where possible, to arrange for a payment plan with the tenant.

If all efforts fail, as soon as the LTB has issued an eviction order, DRNPHC will contact the tenant(s). The goal is to pro-actively engage the tenant(s) to ensure that:

- tenants have a final opportunity to enter into a re-payment agreement or other service coordination response with the DRNPHC in order to retain the tenancy; and,
- to explain the process that will take place and the consequences if the arrears are not repaid shortly or repayment arrangements are not made.

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Where a tenant has failed to accept, co-operate with, and/or comply with arrangements for rent (re-)payment, DRNPHC will enforce the LTB order to evict the tenant. Enforcement of an LTB order must be made within six months of the date of the order.

d) Eviction prevention (behaviour/conduct)

DRNPHC will work with tenants whose tenancy has been jeopardized by their conduct, or the conduct of their occupants, guests or visitors, where the safety of other tenants has not been jeopardized, or at the discretion of designated staff. This may include serving an N5 Notice to Terminate a Tenancy Early or negotiation of a accommodation plan.

Staff will utilize the procedures identified in the *Accommodation Policy*, the *Tenant Dispute Resolution Policy*, and other policies of DRNPHC as appropriate, to resolve the circumstances which have led to the tenancy being placed at risk.

Where the conduct of the tenant(s) and/or their guests or visitors have jeopardized the safety of other tenants, their visitors, guests, staff of DRNPHC, or others on-site, or at the discretion of the staff, DRNPHC may initiate eviction proceedings immediately against the tenant by issuing the appropriate notice of termination (N6 illegal act, N7 Impairment of Safety).

e) Resources and services – service coordination

DRNPHC recognizes that helping tenants to maintain their tenancies may require the support and assistance of staff, community-based partners, and the tenant(s)'s family and peers.

The goal of service coordination will be to identify, with the assistance of the tenant and other identified stakeholders, longer-term solutions which will lead to lasting improvements in conduct. The necessary interventions will range from simple agreements (e.g. arrears re-payment agreements, rent direct, pre-authorized payments etc.) to more complex interventions.

Depending on the availability of community-based supports and the tenant(s)' family and peers, staff of DRNPHC may be required to take a leadership role and coordinate access to, and delivery of, services, with the tenant(s)' co-operation, particularly in the short-term. Staff will look for others to assume a lead role in coordinating services, where possible and appropriate.

Service coordination activities will adhere to the procedures identified in the *Accommodation Policy*, the *Privacy and Confidentiality Policy*, and other policies of DRNPHC, as appropriate.

DRNPHC will maintain a list of resources available in the community that may assist in preventing evictions and preserving tenancies. The list will include, but not be limited to the following:

- providers of community- and hospital-based mental health and addictions supports;
- sources of financial assistance and food banks;
- settlement and translation services;
- transitional housing and support service mandated to provide support and



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- housing to those leaving domestic abuse; and,
- other community-based programs and services which may be of benefit to tenants and their families.

End.

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Administration	Tenant & Housing Services	Board Approved Date:	21-02-24
Policy	Review of Decisions	Revision Date:	N/A
Policy No.	20-085	Internally Approved Date:	21-02-12
References	Housing Services Act, 2011, in accordance with service agreement with service manager Accommodation Policy Human Rights Policy Privacy and Confidentiality Policy		
Forms	Request for Review of Decision Review Decisions Form		

1. Policy Statement

DRNPHC is committed to making decisions in a fair and transparent manner. For decisions made under the *Housing Services Act, 2011* (HAS), its regulations and Regional Directives, there are additional requirements set out for DRNPHC to review these decisions. This policy sets out how these reviews will take place and what decisions are subject to the review process.

RGI applicants and tenants may request a Regional Review of a decision under specific circumstances which include:

- Review ineligibility for RGI
- ineligibility for a modified unit
- the amount of RGI payable
- the size of the unit for which the household may receive RGI, including any requirement to move to a smaller unit
- ineligibility for Special Priority status or Critical priority status on a waiting list
- ineligibility for In-situ priority for RGI

2. Purpose

The purpose of this policy is to give tenants and applicants a clear and transparent process for having decisions of DRNPHC reviewed, in compliance with governing legislation, service manager guidelines/directives and DRNPHC's service agreement with the service manager. It will ensure that all requests by tenants for a review of a staff decision are dealt with in a timely and consistent manner.

3. Scope

This policy applies to all staff, board members, and volunteers of DRNPHC who are responsible for the calculation and administration of RGI subsidies, the management of internal and external waiting lists, and tenant selection, as well as the review committee.

The review committee will not make decisions which are contrary to the law, or clearly against the spirit or the intent of board-approved policies. It will consider special circumstances which may not have been initially considered when the policies were created or the decision was made.

The review committee of the housing provider will use precedent in making its decisions, and will aim to treat all applicants and tenants fairly.

The review committee will also consider the impact of its decisions on the tenant seeking the review, other tenants or applicants, DRNPHC staff, and the well-being of DRNPHC.

4. Definitions

Accommodation

Opportunities to support, as much as possible, the full and equitable participation of applicants and tenants who are Ontario *Human Rights Code*-protected in the activities of DRNPHC, for example, accommodating language, accessibility, and literacy needs of the person requesting the review.

Designated staff

The staff person(s) or department who has been designated to complete a particular action or requirement.

DRNPHC review committee

The body that is responsible for conducting reviews of decisions on behalf of DRNPHC as per the service manager's local rule. It is composed of DRNPHC staff who meet the following criteria:

- Did not participate in the original decision
- Are knowledgeable about the relevant sections of the HSA
- Have not discussed the decision with the original decision maker prior to the review

Overhoused household

An RGI household living in a unit which is larger than the largest unit for which they qualify under the service manager's eligibility rule regarding occupancy standards.

RGI subsidy

A tenant's rent-geared-to-income subsidy.

Service manager (Region of Durham)

The municipality, district social services administration board, area services board, or other agency, board or commission responsible for the oversight and administration of the non-profit, as named in Schedule 2 of Ontario Regulation 367/11.

Regional Review Committee (Panel)

Regional Review Panel consists of Regional staff from the Department of Social Services and representatives from community housing providers and other partners delivering housing or homelessness services.

Timeframes

The DRNPHC Review Committee will meet within 7 days of receiving a Regional Review Request to ensure DRNPHC meets the requirement of sending it to the Regional Review Panel within 10 days.

5. Procedure

- a) DRNPHC will communicate all decisions that are eligible for a review in writing. The letter/e-mail communicating the decision will contain information advising of the right to request a review and how to request one.
- b) Request for reviews are to be received within 10 days of the decision being sent to applicants/tenants.
- c) Review requests are sent directly to DRNPHC by the applicant/tenant.
- d) Designated staff will prepare the review package for the DRNPHC Review Committee which will include:
 - the tenant's written request for a review
 - the *Request for Review* form
 - A summary of original decision that includes documents used in the decision and the dates these were received
 - any documentation used in making the original decision
- e) The DRNPHC Review Committee to conduct the review within 7 business days of the request for review. The original decision maker may be invited to the DRNPHC Review Committee to present the decision history.
- f) The DRNPHC review Committee will decide whether they will uphold the decision or overturn the decision. The Committee will make decision by consensus.
- g) Once a decision has been reached, the committee will complete the *Request for Review Form* for each requested review. The *Request for Review Form* will document the decision(s) made and the reason(s) for the decision(s). The *Review Decisions Form* will be forwarded to designated staff shortly after the meeting takes place.
- h) If the decision is overturned, designated staff will communicate the new decision to the applicant/tenant and take the necessary steps to enact the new decision.
- i) If the decision is upheld, designated staff will prepare the request for review package and send it to the Region Review Committee within 10 business days of receiving the original request for review.
- j) The Region will schedule a hearing for eligible reviews and communicate the hearing date to both the applicant/tenant and DRNPHC.
- k) In advance of the hearing, designated staff will prepare a summary of the decision and detail the reasons it was made. This information will be shared with Regional Review Committee at the scheduled hearing date.



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- l) After the hearing the Regional review Committee can uphold the decision or overturn the decision.
- m) If the decision is overturned, the Regional Review Committee will communicate the new decision to both the applicant/tenant and DRNPHC. Designated staff will take the necessary action to enact the decision and communicate this decision to the applicant/tenant.
- n) If the decision is upheld, designated the Regional Review Committee will communicate this decision to the applicant/tenant and DRNPHC. Designated staff will review the applicant file and take any necessary action to finalize the original decision.
- o) The decisions rendered by the Regional Review Committee are final and cannot be appealed by DRNPHC, the applicant or tenant.

End.

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Administration	Tenant & Housing Services	Board Approved Date:	21-02-24
Policy	Internal Transfers	Revision Date:	N/A
Policy No.	20-086	Internally Approved Date:	21-02-12
References	Housing Services Act, 2011 Ontario Regulation 367/11 section 38 Occupancy Standards Residential Tenancies Act, 2006 Ontario Regulation 516/06 Accommodation Policy Human Rights Code Policy Review of Decision Policy		
Forms	Internal Transfer Agreement Application for Transfer Medical Confirmation for Internal Transfer		

1. Policy Statement

It is the policy of DRNPHC to permit, both rent-geared-to-income (RGI) and market rent tenants to transfer when appropriate units become available. DRNPHC will respond to all transfer requests in a fair, consistent and financially responsible manner.

2. Purpose

The purpose of this policy is to:

- allow DRNPHC's tenants to move from one unit to another;
- give priority to tenants who qualify as special priority, who are overhoused in accordance with the service manager's eligibility rule regarding occupancy standards or who urgently need a different unit on health or related grounds;
- balance the needs of DRNPHC's tenants with the needs of people hoping to move into DRNPHC for the first time; and
- recognize DRNPHC's limited financial and human resources.

3. Scope

This policy applies to all DRNPHC's staff responsible for monitoring and facilitating the movement of tenants within the portfolio and to all tenants.

4. Definitions and clarification

Code-related

A matter related to DRNPHC's obligations under the *Human Rights Code, 1990*. This may include requests for a transfer to a special need modified unit.

Designated staff

The staff person(s) or department who has been designated to complete a particular action or requirement.

Good standing

A household that:

- has not been given an eviction notice;
- does not owe arrears or any other money to DRNPHC (unless financial hardship has made this household a "priority move");

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- has paid its rent on time for the last six months;
- has no history of damage to the unit, disturbing neighbours or harassing staff

HSA

The Housing Services Act, 2011

Overhoused household

An RGI household living in a unit which is larger than the largest unit for which they qualify under the service manager eligibility rule regarding occupancy standards.

Priority

moves

Households that have an urgent need to move due to health concerns or significant change in financial or family circumstances. Examples of urgent needs include:

Tenants with safety concerns needing to escape abuse but who have not lived with or been sponsored by the abuser and so do not qualify for special priority status, including tenants being threatened or harassed. The designated staff will establish the level of documentation required to substantiate the abuse.

Transfer due to Accommodation Request

A household whose request has been deemed code related by DRNPHC

A household member has a medical condition or permanent disability, and their current unit meets one of the following:

- is inaccessible
- substantially aggravates the condition
- prevents or substantially increases the cost of treatment (a completed *Medical Confirmation for Internal Transfer* required)
- Financial hardship due to the loss of a partner, or a significant drop in income, that makes the market rent unaffordable (tenant requests move to unit with lower market rent).

RGI

Rent Geared to Income is a housing subsidy or benefit to make rent affordable for households

Special

priority

Status that is granted to a member of an applicant or tenant household, aged 16 years of age or older, who meets the criteria outlined in section 54 of Ontario Regulation 367/11.

Underhoused

households

Households that have more than two household members per bedroom or who have opposite-sex household members, who are not spouses, sharing bedrooms.

5. Procedure

a) Eligibility for internal transfer

- Any household in good standing may request a transfer after having lived in a unit for at least one year.
- Households that are required to transfer because they are overhoused in accordance with the service manager eligibility rule regarding occupancy standards,

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have been granted special priority designation, or require Code-related accommodation are not required to meet DRNPHC's eligibility criteria. Staff may, at their discretion, waive DRNPHC's eligibility criteria for priority transfers.

- Each transfer may necessitate a redecoration/repair of the originally vacated unit and an additional redecoration/repair of the unit subsequently vacated by the tenant who transferred. Aside from special priority, overhoused or Code-related transfers, the number of transfers can be capped in the event DRNPHC is unable to complete the necessary repairs due to financial or human resource limitations.

b) Request for internal transfer (RGI)

- A household requesting an internal transfer must complete an *Application for Transfer* form and a letter requesting a letter and submit it to the head office.
- A household that is applying for a transfer as a special priority household or as a result of a Code-protected disability must inform the designated staff that they are seeking this status. If applying for special priority status, the designated staff will immediately refer the household to the Region of Durham to determine eligibility. The service manager is responsible for advising both the tenant and the housing provider of whether or not the status has been approved.

c) Request for internal transfer (market)

- A household requesting an internal transfer must put their request in writing indicating the reason for transfer and location preferences.

d) DRNPHC will review tenant transfer requests no less than once per month. Applications for transfer will be assessed based on approved policies and all decision will be communicated in writing to the tenant. If the application is approved the household will be added to the internal waiting list.

e) Ranking on internal waiting list

DRNPHC's internal waiting lists will be comprised of multiple subsidiary lists. Each subsidiary list will be ranked by priority relative to other lists and the households on each list will also be ranked.

f) Internal Waiting Lists (RGI)

DRNPHC's internal waiting lists for RGI households will be ranked as follows. The households waiting on each list will be added to the list and ranked according to the criteria of each list. DRNPHC will at a minimum, include overhoused in accordance with service manager eligibility rule regarding occupancy standards, special priority and Code-designated tenants.

Households with Special Priority designation

- Special priority households will be ranked chronologically by the date they applied for special priority designation. RGI households that are overhoused in accordance with the service manager eligibility rule regarding occupancy standards
- The designated staff will follow the service manager procedure for handling overhoused households.

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Insitu

An existing Market Households that have been approved to receive RGI based on service manager guidelines and need to move to a smaller sized unit to qualify for the subsidy.

Priority Moves

Priority applicants based on safety and medical needs will be offered units in order of their application date for a transfer.

Underhoused households

Underhoused households will be ranked chronologically in the order they applied for a larger unit.

Other households seeking transfer

Applicants on this list will be ranked chronologically.

When notice is given for a unit, the first appropriately sized household on the highest ranked list will be offered the unit. The unit will be offered to each appropriately sized household on a list before being offered to appropriately sized households on the next, lower priority, waiting list.

Internal waiting list - special needs modified units

- Households requesting a transfer to a special need modified unit will be required to provide the following documentation in addition to the *Application for Transfer* form:
 - Medical documentation from an approved healthcare practitioner that outlines the tenant's need for a modified unit
- The household's eligibility for a special need modified unit will be assessed prior to adding the household to the internal waiting list. If the household is eligible for a special need modified unit, the household will be added to the internal waiting list and sent to DASH.
- Households on the special needs modified unit internal waiting list will be ranked chronologically by the date that the non-profit received a completed application form.

g) Internal Transfer List (Market)

DRNPHC's market rent waiting list is ranked in chronological order of approved transfer requests.

h) Completing an internal transfer

Maintaining eligibility for internal transfer

Households must meet the following criteria in order to maintain their eligibility for an internal transfer:

- there are no arrears
- no late payments within the last 6 months
- no substantiated complaints from neighbours or staff; or complaints from neighbours or staff that resulted in a LTB Notice being served to the household

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- no damage (beyond regular wear and tear) to the tenant's unit was found in a unit inspection

Prior to showing the unit to the next household on the internal waiting lists, designated staff will assess whether or not the household continues to meet the criteria for an internal transfer.

Households with special priority designation, who are overhoused in accordance with the service manager eligibility rule regarding occupancy standards, or who are requesting a transfer based on *Code-grounds* are not required to meet these eligibility criteria.

i) Offering a unit

- Designated staff will offer a unit being vacated to households on the internal transfer list in the order they appear on the waiting list.
- Designated staff may exercise discretion in the decision to offer a vacant unit to anyone on the internal transfer list other than special priority, overhoused and other priority transfer requests if the resources are not available to prepare the units that are vacated in a given month without incurring vacancy loss.
- A household will have 24 hours to decide whether to accept the unit.
- If an overhoused household refuses the offer, staff will follow the Region of Durham's directive regarding overhoused households.
- Units may be offered "as is." DRNPHC will ensure the unit meets DRNPHC's maintenance and safety standards and that all electrical and plumbing fixtures are in good working order. However, DRNPHC may choose not to paint the unit, do minor patching, or make decorative changes to the unit.
- Once the internal transfer has been approved, the transferring tenant will be required to sign an N11 and an internal transfer agreement to confirm their responsibilities and the details of the unit they are vacating.

j) Review of decisions

Households can request a review of the following decisions under the HSA:

- size of unit the household is eligible for
- type of unit the household is eligible for

DRNPHC shall follow the process outlined in the *Review of Decision Policy*.

End.

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Administration	Tenant & Housing Services	Board Approved Date:	21-02-24
Policy	Tenant Orientation	Revision Date:	N/A
Policy No.	20-087	Internally Approved Date:	12-02-12
References	Ontario Human Rights Code Residential Tenancies Act, 2006 Housing Services Act, 2011 Accommodation Policy Human Rights Policy Arrears Policy		
Forms	Information for New Tenants		

1. Policy Statement

DRNPHC will provide information to all new tenants to improve their understanding of their rights and responsibilities as tenants and to support successful tenancies.

2. Purpose

The purpose of this policy is to support tenants understanding of information that will improve their tenant experience, including how to:

- Stay safe at the property;
- Make maintenance requests;
- Understand and comply with the rules;
- Understand the requirements to maintain eligibility for RGI (if applicable)
- Feel a part of the community; and
- Build trust in the landlord-tenant relationship

3. Scope

This policy applies to all incoming tenants and to the designated staff who are responsible for tenant orientation and intake.

4. Definitions

Accommodation

Means the same as the definition in DRNPHC's Accommodation Policy and the *Ontario Human Rights Code*.

Designated staff

The staff person(s) or department designated to complete a particular action or requirement.

Overhoused household

An RGI household living in a unit which is larger than the largest unit for which they qualify under occupancy standards set by the service manager.

RGI subsidy

A tenant's rent-geared-to-income subsidy.

Service manager

The municipality, district social services administration board, area services board, or other agency, board, or commission responsible for the oversight and administration of the non-

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profit, as named in Ontario Regulation 369/01.

Tenant

A person who has signed a lease and who enjoys all of the rights and responsibilities of tenancy.

DRNPHC

Refers to the organization whose board of directors has approved this policy.

5. Procedure

a) Orientation participants

All members of the household who will sign the lease should attend the tenant orientation meeting with designated staff.

Based on previous interactions with the household, DRNPHC staff may have identified accommodations that will assist members to attend and participate in the tenant orientation meeting. When scheduling the appointment to conduct the tenant orientation, designated staff will ask the applicants if they require any form of assistance to participate in the meeting.

If accommodations are necessary, designated staff will, with the assistance of the applicants, identify and secure appropriate assistance / support. See DRNPHC's *Accommodation Policy*.

b) The lease signing interview/tenant orientation

Designated staff will meet with all members of the household who are required to sign the lease. This includes, but may not be limited to:

- all adults whose income will be included in the RGI calculation, and
- all children of the household over the age of 16

c) Topics to review – RGI subsidy

Designated staff will thoroughly review the lease and, if applicable, the rights and responsibilities of receiving an RGI subsidy with the household. They shall pay particular attention to explaining the steps required and the household's obligations in the following areas:

Income verification

The household's obligation to complete annual income verification forms and to submit them in a timely manner to DRNPHC and the obligation to report certain changes throughout the year in income or employment. Explain the consequences of not doing so.

Changes in household composition

The household's obligation to report when someone joins the household or a member of the household leaves. Inform the household of the requirement transfer if the household becomes overhoused. Explain the consequences of not reporting changes and/or refusing to transfer.

The Household's Responsibility for Full-Market Rent

The lease will list the full market rent for the unit in addition to the amount of subsidy that the household is currently payable. Explain to the household the importance of meeting their

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subsidy obligations so that the subsidy is not jeopardized.

Arrears

Explain DRNPHC's *Arrears Policy*, including payment options, (pay directs, pre-authorized, etc.) establishing a repayment plan, if offered, and the Landlord and Tenant Board process for recovering arrears.

Additional Charges:

Outline any additional charges that DRNPHC has implemented such as parking, cable television, or charges for additional utilities (water, hydro, gas, oil, etc.) for large or seasonal appliances.

d) Topics to review – all tenants

Other non-profit policies/procedures/practices. Designated staff will review key items with the household, highlighting who to contact and outlining the processes and services offered by DRNPHC.

Key documents for the designated staff to review are:

- Emergency contact form
- Accommodation Policy
- Internal Transfer Policy
- Guest Policy
- Pet Policy
- Parking Policy (including guest parking)
- complaint procedures
- how and when to pay rent
- maintenance request procedures including after-hours procedures
- emergency telephone numbers and procedures
- Human Rights Policy
- How to contact staff

Designated staff will provide a checklist (based on the list above) of all items discussed and ask members of the household to initial this list confirming that the items have been explained to them and that they have been provided with a copy of each policy. Designated staff will provide each household with a copy of key policies in the welcome package.

e) Non-profit and community amenities and services

Designated staff will identify any amenities that the property may have and will provide the household with a brief tour if this was not already done during the initial unit showing. Designated staff will highlight:

- amenities such as laundry rooms, garbage rooms, common or recreation rooms, and recycling protocols, etc;
- any security features or practices that tenants should be aware of;
- the “move in / move out” room and the preferred route for the household to take when moving (if applicable)

If the household is new to the community, designated staff will identify local community-based

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amenities such as grocery stores, transit stops, community or recreation centers, public libraries, food banks, or other community-based resources that the household may require or as may be appropriate for the household.

f) Provision of lease

Designated staff will provide members of the household with a copy of the lease immediately if all signatories are available and documentation/verification is complete or within 21 days of signing it.

Designated staff will also provide the household with a copy of the Landlord and Tenant Board's *Information for New Tenants* brochure if it was not already provided in the welcome package.

End.

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Administration	Tenant & Housing Services	Board Approved Date:	21-02-24
Policy	Deceased Tenant	Revision Date:	N/A
Policy No.	20-088	Internally Approved Date:	21-02-12
References	Residential Tenancies Act, 2006 Application A2: Application about a Sublet or Assignment. Health and Safety Policy Key Control Policy		
Forms	24 Hour Notice of Entry Emergency Contact Update		

1. Policy Statement

DRNPHC will ensure that, should a tenant pass away, that all the requirements set out in *The Residential Tenancies Act* are met while also respecting the sensitivity of the event for staff, family and friends of the deceased.

2. Purpose

The purpose of this policy is to provide direction to staff of DRNPHC in the event that a tenant dies while in possession of a rental unit.

3. Scope

This policy applies to all maintenance and property management staff, as well as to market and rent-geared-to-income tenants and others who may occupy the tenant's rental unit.

4. Definitions

Designated staff

The staff person(s) or department who has been designated to complete a particular action or requirement.

Next of kin

The tenant's family or the executor or administrator of the tenant's estate.

Occupant

A person who is not a tenant but who lives in the rental unit as their principal residence

Tenant

A person who has signed a lease and who enjoys all of the rights and responsibilities of tenancy.

5. Procedure

a. Sole-person tenancies

In the event that DRNPHC is notified that a tenant has died and they are the sole tenant/occupant in the unit, locks are changed immediately.

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Designated staff will contact the next of kin and request verification of death and designation of next of kin. Once received and verified, a key to the unit is provided to the next of kin.

The next of Kin is responsible for the unit for 30 days from date of death. Requests for exceptions will be reviewed by designated staff if they require a longer or shorter time period.

b) Multiple-person tenancies

In the event that DRNPHC is notified that a tenant has passed away, following an appropriate interval, but not exceeding two weeks, designated staff will issue new leases to the remaining tenant(s).

For authorized tenants and occupants remaining in the RGI households, information will be requested to re-assess rent amounts within 2 weeks of discovering a tenant's passing.

In the event that the individuals remaining in the unit are authorized occupants and not tenants of DRNPHC, designated staff will review the relationship between the tenant and the occupant to clarify their right to remain in the unit. If the tenant has a right to remain in the unit, designated staff may invite the occupant(s) to sign a lease for the unit, pending a favorable applicant assessment process.

If the occupant has no right to tenancy or the occupant was not on the lease, DRNPHC will take necessary steps to gain vacant possession of the unit, including:

- Ask the unauthorized occupant to leave the unit
- Apply to the LTB for an order terminating the tenancy and evicting the unauthorized occupant(s)
- If needed, the police will be called support DRNPHC staff in having the unauthorized occupant(s) leave

Under no circumstances will designated staff collect rent from the unauthorized occupants of the rental unit unless a new market rent lease has been signed.

c) Suspicion that a tenant is deceased

If someone indicates that they are concerned about the well-being of a tenant, staff will inform a manager who will attempt to contact the tenant or the emergency contact on file. In the case of emergency or urgency, designated staff will contact the police department for a wellness check. Designated staff will open the unit only under the direction of the police who attend the unit. Staff are not to enter the unit if a person is deceased or suspected to be deceased.

In the event that staff discover that a tenant has died, staff will immediately leave and secure the unit and contact emergency services and DRNPHC senior management.

Designated staff will remain available at the rental unit while emergency services are on-site and will ensure that the unit remains secure at all times.

d) Identifying the tenant

Staff may be asked by police to identify the remains. No DRNPHC staff will be required or

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expected to perform this task, though staff may be permitted to do so if they wish.

e) Termination of tenancy agreement

The tenancy agreement is terminated 30 days after the death of the tenant. If the date that the tenant died cannot be determined, the tenancy will be terminated 30 days after DRNPHC was notified of the death of the tenant.

The tenant's executor or next of kin is responsible for paying a pro-rated amount of rent for the 30-day period after the death of the tenant. This rental charge may be waived at the discretion of designated staff.

f) Next of kin

Notifying executor/next of kin

Designated staff will provide emergency services with the tenant's emergency contact information (see *Emergency Contact Update* form) if this information is available, and will inform emergency services if it is not.

Designated staff will clarify with emergency services who will be responsible to contact the executor, next of kin, or Office of the Public Guardian and Trustee.

Verification of executor/next of kin

Executor /next of kin is known to DRNPHC

If the tenant's next of kin is known, DRNPHC will verify the identity of the individual by checking government issued photo identification. Designated staff will photocopy the identification provided, will place it in the tenant's file and also document the next of kin's contact information.

Executor /next of kin is unknown to DRNPHC

If the next of kin is identified by emergency services or by the Office of the Public Guardian and Trustee, staff will request documentation which supports their status as executor or next of kin. Acceptable supporting documentation includes, but is not limited to:

- a copy of the tenant's will;
- a sworn affidavit from a lawyer;
- documentation from the Office of the Public Guardian and Trustee;
- a copy of a birth certificate demonstrating a parental relationship;
- Funeral Home Proof of Death Certificate that's indicates next of kin

g) Access to unit by next of kin

Once the coroner and emergency services have finished their investigation, the unit must be secured by changing the locks.

Once acceptable identification has been provided, designated staff will permit the tenant's next of kin to have access to the rental unit and to the residential property for the purpose of removing the tenant's property.

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Designated staff will document the name of the next of kin visiting the unit and the date, time, and length of access granted. Access to the unit will be arranged in advance and will take place between 8 a.m. and 8 p.m. from Monday to Friday or at the discretion of designated staff.

h) Disposal of property

Immediate

- Designated staff will provide 24 hours' notice of entry prior to entering the unit. The notice will be delivered to the unit (slipped under or posted on the unit door) and/or as a courtesy to the next of kin, if possible via e-mail.
- After giving 24 hours' notice of entry Designated staff will enter the rental unit within 48 hours or two business days of learning of the tenant's death. They shall remove any unsafe or unhygienic items from the unit in accordance with DRNPHC's *Health and Safety Policy*.
- Designated staff will photograph and document the quantity and nature of items removed from the unit and will place that list in the tenant's file.

At termination of tenancy

- Any property that has not been removed from the rental unit or from elsewhere in the residential complex upon the termination of the lease will be removed by designated staff or as outlined in the RTA.
- Designated staff will photograph and list the quantity and nature of all items that are removed from the unit or elsewhere in the residential complex. The list and photographs will be included in the tenant's file.
- A letter will be sent by DRNPHC to the next of kin with an inventory of the items left in the unit. A copy of this letter shall also be kept in the tenant's file.
- DRNPHC will store all of the tenant's property for a period of six (6) months after the termination of the tenancy unless the next of kin has provided written confirmation to dispose of the belongings.
- During that six-month period, next of kin will be permitted to claim property being stored by DRNPHC.
- After the six-month period has expired, designated staff shall use their discretion to dispose of the property by selling, donating, or discarding it. Designated staff will note what actions are taken with all items.
- Staff will also note the amount of the proceeds from the sale of any property and will apply those proceeds to any outstanding expenses related to the tenancy.



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- As an alternate, DRNPHC can dispose of the tenant's property immediately. Designated staff will use their discretion to dispose of the property by selling, donating, or discarding it. Designated staff will note what actions are taken with all items and the amounts that items are sold for.
- If, six months from the termination of the tenancy, the tenant's next of kin claim property that has been disposed of, DRNPHC will pay the estate the difference between the proceeds of the sale of the property and DRNPHC's out-of-pocket expenses related to the moving, storing, securing, and selling of the property, as well as any arrears of rent.

End.

Administration	Buildings & Capital Assets	Board Approved Date:	21-02-24
Policy	Unit Interior Maintenance	Revision Date:	N/A
Policy No.	20-089	Internally Approved Date:	21-02-12
References	Residential Tenancies Act Occupational Health and Safety Act Ontario Electrical Safety Code Building Code Municipal Property Standards By-Laws Turnover Process Accommodation Policy The units must meet the standards of cleanliness and maintenance set by health and other public authorities.		
Forms	Agreement to Pay for Damages Alteration Request Form Final Move Out Inspection Letter Maintenance Request Form Move-in Inspection Form Move -in Inspection Letter Pre-Move Out Inspection Form Move Out Procedures Notice of Entry Notice to Vacate Painting Agreement Summary of Damages Two Minute Move Out Survey Unit Inspection Form		

1. Policy Statement

It is DRNPHC's policy that it is responsible for providing accommodation that is clean and in a good state of repair. Tenants are expected to maintain their units in good condition and will be held financially responsible for damages beyond reasonable wear and tear.

2. Purpose

The policy outlines what is expected with regard to the maintenance of units of DRNPHC by tenants and staff.

3. Scope

This policy applies to all tenants in DRNPHC and will be implemented by the staff of DRNPHC.

4. Definitions

Designated staff

The staff person(s) or department who has been designated to complete a particular action or requirement.

Emergency repairs

Loss of heat, hydro, or water; roof failure; water penetration through walls or ceilings;

plumbing failures; and/or drain blockage or breakage.

5. Procedure

a) Timeframes

Staff will respond to the need for emergency repairs immediately and to regular maintenance requests within three business days.

b) Maintenance Requests

To report damage, routine repairs or general maintenance, tenants will complete a *Request for Repair (RFR)*:

- on-line at www.durham-housing.com
- via telephone by calling DRNPHC's head office at 905-436-6610 who will take your request information and fill out the form for you
- for select sites, by filling out a form located at your building superintendent's office and can be dropped off at the superintendent's office.

Maintenance requests will be dealt with as quickly as possible, with consideration to budgetary constraints and established priorities. Staff will contact the tenant with details relating to their request within the set service standards for response times and repairs e.g., three business days.

In the event of an emergency (loss of heat, hydro, or water; roof failure; water penetration through walls or ceilings; plumbing failures; and/or drain blockage or breakage) after office hours, the tenants must follow the published emergency procedures by calling their superintendent and if he/she is not available call 905-436-6610 for 24-hour service.

In the event of a fire, tenants must phone 911 immediately.

In the case of emergencies (health and safety is being threatened or property damage will occur), DRNPHC staff may enter a unit without first obtaining permission from the tenant.

c) Privacy and access to units

DRNPHC staff may not enter a unit without the tenant's permission unless:

- there is an emergency
- if the tenant gives consent at the time of entry
- proper notice has been given

After giving a minimum of 24 hours written Notice to Enter, DRNPHC staff can enter the tenant's unit, at any reasonable time, for:

- addressing repairs

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- inspections (e.g. to ensure that the unit complies with health, safety and maintenance standards)

After a tenant has provided their Notice to Vacate for their unit, DRNPHC is permitted to show the unit to prospective tenants at reasonable hours. DRNPHC is not required to provide 24-hour notice of entry to show the unit but will make every effort to provide advance notice to the tenant.

d) Decoration

Units will be painted based on the condition of the unit at turnover. Paint will be supplied to tenants, upon request, starting ten years after initial occupancy.

Painting

DRNPHC reviews the state of the painting in the unit and tenant requests to paint their units each year. The budget for unit painting is based on the amount of money available and the condition of the unit. Requests for paint outside the normal painting cycle will be considered on an individual basis at the discretion of DRNPHC.

Tenants may be provided with DRNPHC standard paint to undertake interior painting and decorating if they have made a request in writing to DRNPHC, provided DRNPHC is satisfied that the tenant has the ability to do the work. Special consideration to have the unit painted will be given to requests made by those tenants who require accommodation.

If tenants are approved to paint in their units, tenants will:

- complete a Painting Agreement to make their request and the agreement will be kept in the unit maintenance file
- be responsible for preparing walls and repairing minor damage to the walls from picture hooks or wall plugs before painting
- will not paint over switch and cover plates or any non-removable hardware such as air vents, fire alarm speakers, heat and smoke detectors, baseboard heaters, controls, fixtures and window frames
- only previously painted surfaces may be painted. Window frames, counter tops, appliances, kitchen cabinets, tile work, bathtubs, sinks, and floors may not be painted or re-surfaced
- painting must be done in a professional manner and with due care
- drop cloths or similar protective coverings must be used
- inspection of the work will be noted following the completion of the work and must meet the standards of DRNPHC
- stucco ceilings, except for touch-ups, are NOT to be painted or washed by tenants
- the use of textured spray, stucco or texture paint anywhere in the unit is not permitted
- the outside surface of entrance doors to units may not be decorated or painted.
- sliding closet doors are not to be painted

Wall Coverings

When the tenant moves out, wall coverings (including wallpaper, cloth, tile, cork, mirrors,

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etc.) must be removed and the unit must be returned to its original condition, subject to the assessment of DRNPHC staff.

Subject to this assessment, the outgoing tenant is responsible for the removal of wall coverings. If removed, the underlying wall surface must be properly prepared for painting and be free from glue residue and other damage.

e) Floors

Tenants are expected to regularly clean and maintain parquet, hardwood, and vinyl/ceramic floors in their units. Tenants are encouraged to protect their floors by using rubber or metal coasters under the legs of heavy furniture and soft tips on the ends of all furniture legs.

If carpet has been installed by DRNPHC, the tenant is expected to vacuum regularly and spot clean as required.

If tenants choose to install carpets, they must be installed without causing permanent damage. Gluing of carpet onto floors or the use of nailing strips is not permitted. Rubber backed area rugs must be installed with additional underlay to protect the floor from damage.

Tenants are responsible for damages to the floors and/or carpets beyond what is determined by DRNPHC to be reasonable wear and tear. Damage may be caused by dragging heavy furniture across floors, spills and stains, cigarette/iron burns, water damage, or soiling by pets.

f) Windows

Tenants are responsible for the cost of replacement of broken windows or torn screens. DRNPHC will arrange for replacement and then recover the cost from the tenant. Where a window has been broken by vandalism or a situation beyond the tenant's control, the tenant may appeal to DRNPHC to cover the cost of the repair.

Where required by by-law, childproof locks may be installed to prevent the windows opening beyond four inches.

g) Furniture and additional appliances

Additional appliances such as dishwashers, washers or dryers, air conditioners, or freezers may not be brought into or installed in the building without DRNPHC's written consent. If Consent is given, the tenant and DRNPHC will sign an agreement in which the tenant agrees to pay an additional charge to cover the installation of the appliance and/or the cost of hydro to operate the appliance. The tenant must also have evidence of appropriate insurance to cover liability.

Tenants will not install waterbeds in their unit without the written permission of the DRNPHC. Should permission be granted to install a waterbed, the tenant agrees to accept responsibility for any damage to the unit or structure caused by the waterbed and provide proof of appropriate insurance coverage.

h) Alterations and additions

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Permanent changes such as removing or adding doors, lighting and other fixtures, walls, plumbing, wiring, etc. are not permitted without prior written consent of DRNPHC.

If alterations are made to a unit without prior consent, those alterations become the property of DRNPHC and cannot be removed nor will the tenant be reimbursed for these items. The tenant agrees to accept all charges relating to DRNPHC restoring the unit back to corporate standards.

There may be legitimate reasons to request for changes to be made to a unit. Requests can be made in writing to DRNPHC by completing a Request for Approval of Alterations including the reasons/requirements for the alteration and the necessary documentation (e.g., doctor's letter). Refer to the *Accommodation Policy* for the formal process for accommodating the request.

If alterations are approved by DRNPHC, DRNPHC will determine who is to complete the work and how the alterations are to be funded. All such work will be completed by a qualified staff or tradesperson(s) and must meet all applicable building codes, municipal by-laws and regulations.

- i) Unit maintenance inspections
Units will be routinely inspected by DRNPHC.

Annually

Where possible, unit inspections will be scheduled when the tenants can be present as they may be able to identify items that need attention.

An annual inspection will be completed on all occupied units by DRNPHC staff and/or contractors. The purpose of this inspection is to assess the overall condition of the unit and identify damage, routine repairs or general maintenance requirements.

Staff will normally work in pairs to carry out the unit inspection. In compliance with the *Occupational Health and Safety Act*, alternate arrangements will be made to protect staff if a risk to their safety has been identified.

A Unit Inspection Form will be completed for each unit noting items and their priority for follow-up. If appropriate, the tenant will receive a written report and a *Unit Inspection Letter* outlining the findings of the inspection.

- j) Unit visits
If during the annual unit inspection, it is apparent that the unit is not being cared for to corporate standards (excessive wear and tear, uncleanliness, unhealthy or hazardous conditions, willful damage) the staff completing the inspection will note this in the report. The tenant will be advised in writing of the results and the required follow-up action. In some cases, a further inspection may be scheduled to reassess the situation. Where appropriate, with the consent of the tenant a referral to support services (in-house or in the community) may be made.

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Tenants whose units continue to fall below corporate standards (clean, free of damage and/or safety impairment) are informed that they are in contravention of their lease agreement and may be subject to eviction (in accordance with the *Residential Tenancies Act*).

Unit visits may also be carried out to assess and respond to complaints or problem situations. If the problem involves a situation that might put staff at risk, the DRNPHC's representative may be accompanied by security personnel or the police.

k) Unit turnover

Where tenants give notice to vacate, they will be notified of the move out procedures and provided with the Move-out Survey. The Pre-Move Out Inspection will take place within one week of receipt of notice to vacate in order to:

- establish if there is any damage or alteration needing removal, and give the tenant an opportunity to fix it before leaving, or pay the cost
- provide preliminary identification of repairs that can be completed before the existing tenant leaves and what must be done when the unit is vacant

Within two business days of this inspection the tenant will be provided with a Pre-Move Out Inspection Form with a list of any required repairs or redecorating to restore the unit to a condition which is acceptable to DRNPHC taking into account reasonable wear and tear resulting from occupancy. The standard for defining reasonable wear and tear will be taken into consideration for accessible units and where a wheelchair has been in use.

A further housekeeping inspection one week prior to move-out will be done to verify condition of the unit with the departing tenant. The departing tenant will receive, within 24 hours of the housekeeping inspection, the Final Move Out Letter with a Summary of Damages report and if necessary an Agreement to Pay for Repairs.

The cost of any repairs, garbage removal or heavy cleaning necessary after move-out will be charged to the tenant.

Where the vacancy does not result from adequate tenant notice (e.g., abandoned units, evictions), only one inspection will be completed on the vacant unit.

On turnover of the keys to the incoming tenant, a move-in inspection will be carried out by DRNPHC in the presence of the new tenant. The purpose of this inspection is to assess the condition of the unit at the time the tenant moves in:

The Mov- In Inspection Form will be signed by both the new tenant and the representative of DRNPHC. The move-in inspection report will be provided to the tenant and a copy put into the tenant and unit files. This form will be referred to when the tenant vacates the unit.

End.

ADMINISTRATIVE POLICIES - BUILDINGS

Administration	Buildings & Capital Assets	Board Approved Date:	21-02-24
Policy	Common Area Maintenance	Revision Date:	N/A
Policy No.	20-090	Internally Approved Date:	21-02-12
References	Residential Tenancies Act Occupational Health and Safety Act Ontario Electrical Safety Authority Building Code Municipal Property Standards By-Laws		
Forms	Maintenance Request Form Notice of Service Disruption		

1. Policy Statement

It is DRNPHC's responsibility to keep common areas fit for use, in a good state of repair and compliant with all laws applicable to the operation of a residential landlord. Tenants also have a role to play in common area maintenance.

2. Purpose

DRNPHC is responsible for maintaining all common areas of the building in order to comply with property maintenance standards and to keep the building clean and enjoyable for tenants.

3. Scope

Staff are to carry out regular inspections and maintenance of common areas. Tenants are encouraged to play their part in keeping common areas clean and to report any deficiencies they may see by filling out a Request for Repair Form.

4. Definitions

Common Areas

This includes hallways, stairways, elevators, lobby, courtyard, playground, underground or above ground parking, laundry room, meeting or community rooms.

Designated Areas

This includes garbage chutes, dumpsters, collection areas or recycling bins

5. Procedure

a) Landlord Responsibilities

DRNPHC will inspect and maintain common areas of the building and/or property including lawn areas, trees and shrubs.

Playgrounds

DRNPHC will maintain playground equipment. Playground equipment must meet the Canadian Standard's Association's *Children's Play spaces and Equipment Standard* (CAN/CSA-Z614-07). Playgrounds will be inspected by staff and assessed by a qualified playground inspector on an annual basis.

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Graffiti

DRNPHC shall keep the property free of graffiti and in accordance with local municipal property standards.

- Staff will monitor graffiti-prone areas as part of their daily building inspection. When graffiti is discovered it will be photographed and reported in an incident report to the property manager. If there is video surveillance, the discovery of the graffiti will be coordinated with activity on security cameras. All the information will be gathered (and reported to police where necessary) by the property manager.
- After confirming that no further investigation of the graffiti is required, Graffiti must be removed by staff. This could include painting over the image, chemical removal, or the use of a power washer. Where possible, graffiti-prone surfaces will be repainted and/or covered with a protective coating. In extreme cases, a contractor will be hired to remove the image.

Staff or landscape contractors will ensure that shrubs or trees in concealed areas are cut back and/or thorny shrubs are planted near graffiti- prone exterior walls.

Laundry room

DRNPHC will provide a laundry room for use by tenants on the property where possible.

- DRNPHC will establish hours of operation of the laundry room and arrange for its periodic cleaning and maintenance.
- DRNPHC or a contractor designate will provide detail on the operations of the laundry machines (laundry cards vs. coin-operated) and where tenants can report problems with machines.

Snow removal

DRNPHC will arrange for snow removal from common walkways, city or town sidewalks, private streets and parking lots. DRNPHC is responsible for salting/sanding of these areas as necessary. Staff and/or the contractor will maintain a log noting how and when snow is removed and the types of slip prevention techniques (salting/sanding) implemented as part of a risk management process.

Tenants with private/shared driveways and walkways in townhouse complexes are responsible for salting/sanding of these areas as necessary as set out in their lease agreements.

Window cleaning

The cleaning of exterior and common area windows is to be arranged on an annual basis according to the maintenance plan.

Tenants will be responsible for cleaning the interior of windows in their units. Special arrangements can be made to accommodate tenants with disabilities who request assistance.

Service disruptions

When services to the building need to be shut down in order to make repairs all tenants

ADMINISTRATIVE POLICIES - BUILDINGS

will be notified of the issue as soon as possible. Staff are responsible for issuing a Notice of Service Disruption to all tenants which will include the reason for the disruption, how long it will last and any alternative services or accommodations available. In apartment buildings the notice will be posted in common areas.

b) Tenant's responsibilities

Tenants are asked to maintain common spaces by picking up litter, and loose garbage and reporting spills or damage to DRNPHC.

Garbage and Recycling

Garbage and recycling will be stored in proper containers and kept in the unit, basement or garage, or in other designated areas. Garbage stored outside must be in containers with animal-proof lids. Garbage chutes may be available in some high-rise buildings.

Tenants may not place or leave in their units, or any common areas of the building, any debris or refuse. Absolutely no garbage is to be left in hallways or on the floor in garbage rooms. Removal of garbage from the unit by DRNPHC staff or contractor will result in the tenant being charged for the cost to remove it.

Garbage from townhouses and grade-level apartments will be placed out for collection in securely tied plastic bags in proper metal or plastic garbage containers the night before pick-up (no earlier than 7:00 p.m.) or early on the morning of pick-up (no later than 7:00 a.m.) The region restricts the weight and number of items for removal.

- Tenants are asked to securely wrap garbage from apartment units in small tied plastic bags before putting it down the garbage chute. Bags must be small enough to ensure that they move freely all the way down the chute.
- All glass, china or pressurized cans (e.g., aerosol cans) must be taken directly to designated areas for their disposal.

Tenants are asked to follow local published guidelines for recycling.

Playground

Tenants are asked to immediately report any issues or hazards discovered on the playground equipment to DRNPHC.

Exterior Spaces Assigned to units

Where the tenant leased space includes an exterior patio, dedicated/shared driveway and/or walkway, the tenant is responsible to maintain this space free of snow/ice, in a clean and tidy manor.

Where appropriate, and with landlord's consent, tenants are encouraged to plant vegetation, including edible plants, in exterior spaces adjacent to units.

Tenants interested in organizing a community garden should contact DRNPHC or their property manager.

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Balconies / Patios / Front Porches

Tenants are not to string laundry from balcony railings, windows, patios or fences.

Balconies are not to be used for storage. At some apartment sites, storage facilities have been made available to tenants for storing bicycles.

Tenants are to keep these spaces clean and take precautions when cleaning this space to not interfere with the enjoyment of neighbours. Tenants are to take steps to prevent dirt, water or debris from entering the patio or balcony space of other tenants.

Private outdoor areas

Propane barbecues

The standard DRNPHC lease prohibits tenants from cooking on their balcony. The use of barbecues fueled by propane, charcoal or electric or other fuel sources are prohibited in this case.

Propane barbecues may be permitted in the yard space of townhouse units, dependent on municipal and regional requirements. In general, if permitted by law, barbecues are required to be kept one meter (3 feet) away from combustibles (such as wood railings or siding) and three meters (10 feet) away from any combustible overhang such as a porch roof, wall or window (open or closed).

Outdoor equipment

The setup or installation of trampolines, hot tubs or swimming pools or other such equipment is not permitted as set out in the lease agreement.

During summer months wading pools can be used but must not exceed municipal bylaw requirements in depth, and must be emptied and put away when not in use. The lawn space must be free and clear of any equipment in order to permit unobstructed access for grounds keeping services.

Fences, gates and partitions

The installation of a fence, gate or partition is not permitted. In exceptional circumstances, tenants may submit a request in writing for permission from DRNPHC to erect a fence, gate or partition. Any such fences, gates or partitions must be consistent with the municipal by-law, and the overall landscaping plan.

Where gates, fences or partitions are permitted, they must not obstruct access to laneways, rear yards, emergency access routes, utility rooms, or basements for any required site servicing requirements, such as grounds keeping or snow removal.

Storage sheds

Storage sheds may only be erected with the written permission of DRNPHC. If approved, the tenant is responsible for installation, maintenance and takedown. Storage sheds will not be permitted if the yard faces a street, another front yard and/or would obstruct the view of other units, and may not encumber access for any site servicing requirements, such as grounds keeping or snow removal.

Signs

No advertising sign or notice can be inscribed, painted on or affixed to any part of the inside or outside of the building without the DRNPHC's permission and as per municipal regulations.

Tenants may place election signs in their own rental yards (where yard space can be identified as being for use by that individual tenant) or in the windows of their own units. The signs must be removed within 48 hours of the election. Election signs are not permitted in common areas.

Changes to the exterior

As per the lease agreement, a tenant must get written permission from DRNPHC for any changes which will affect the outer structure or appearance of a unit, whether outside the building or in an interior common area. This includes the installation of satellite dishes, window boxes, signage or other enclosure.

End.

ADMINISTRATIVE POLICIES - BUILDINGS

Administration	Buildings & Capital Assets	Board Approved Date:	21-02-24
Policy	Common Facilities	Revision Date:	N/A
Policy No.	20-091	Internally Approved Date:	21-02-12
References	Fire Code Human Rights Code Occupational Health and Safety Act Building Code		
Forms	Bicycle Storage Agreement Meeting Room Rental Agreement		

1. Policy statement

It is the DRNPHC's policy to make available meeting rooms and common spaces for use by board members, committees, staff, tenants and outside organizations. This policy also includes the use and maintenance of the laundry room, bike room and storage space, if available. The use of common facilities must comply with DRNPHC's insurance and government regulations.

2. Purpose

Purpose

This policy sets out the rules and procedures for the use of various common facilities within DRNPHC.

3. Scope

Board members, committees, staff, tenants and outside approved organizations who use the common facilities of DRNPHC will be guided by the rules and procedures outlined in this policy.

4. Definitions

Common Facilities

Community room, boardroom, laundry room, bike room, playgrounds, storage space.

Event Organizer

The person named on the rental agreement who is responsible for the use and care of the facility during an event. The event organizer could include tenants, staff or outside organizations who book a meeting space for its use.

Meeting Rooms

Community room and boardroom

DRNPHC Sponsored Event

Events such as committee meetings, board meetings, tenant association meetings, events sponsored by DRNPHC and other activities recognized from time to time by the board.

Outside Organizations

Social agencies and community groups that have applied to DRNPHC for a specific event.

Private Tenant Events

Events scheduled by individual tenants

Staff Sponsored Event

Staff meetings, employee activities related to the fulfillment of employment requirements, training sessions sponsored by DRNPHC and other activities recognized from time to time by management.

5. Procedure

a) Meeting rooms

DRNPHC staff are responsible for scheduling the use of the meeting rooms for all functions, including receiving the rental agreements and collecting rental fees and/or deposits.

Site staff will be responsible for the pre and post rental inspections and receiving and assigning the key to the room.

DRNPHC will not be held responsible for any and all claims for injury, loss of property, liabilities or damages (including negligence) from tenants, guests, event organizers or event attendees arising out of the event being held in the meeting space during the rental period.

b) Room bookings

Bookings for meeting rooms are received on a first-come, first-served basis and will be accepted up to four months in advance. DRNPHC reserves the right to reject any or all requests for room bookings for any reason at any time.

Priority will be given for any event in the following order:

- DRNPHC sponsored events
- staff sponsored events
- private functions for tenants
- outside organizations

Alcohol is not to be served at the event.

Bookings will be made using the *Meeting Room Rental Application*, stating the nature of the event, the number of guests expected, and naming the person responsible for organizing the event (tenant, staff or a representative of the community organization). This information may be hand-delivered or sent by mail, fax or e-mail 7 days prior to the event.

Tenants with unpaid rent will NOT be able to book common space, until such time as they have made arrangements to pay the arrears. At the discretion of the Director, Tenant Housing & Services, those tenants who are in serious breach of their tenancy agreement may not be able to book common space.

Outside organizations must submit a signed rental agreement to DRNPHC's customer

ADMINISTRATIVE POLICIES - BUILDINGS

service staff for approval. The rental fee and/or damage deposit may be waived at the discretion of the CEO or designate.

The amount of the rental fee and damage deposit will be set by the CEO.

At the time of key pick-up, the event organizer is required to have paid the fee and/or damage deposit by certified cheque, bank draft, money order, credit card or Interac. The person named on the rental agreement must agree to be present at all times during the event and assumes liability for cleaning and/or repair costs incurred by DRNPHC as a result of use of the facilities.

c) Decorating

The room may be decorated for the event. Tenants may not use adhesive tape (any variety), staples, tacks or nails on walls, pillars or ceilings. The use of putty adhesive is acceptable. Candles, incense burners and open flames may NOT be used. All decorations must be removed at the end of the event.

There will be no smoking in the building. Smoking is permitted outdoors 5 metres from the entrance, but cigarette butts must be deposited in the receptacles provided.

There may be a stove and refrigerator available for use in the kitchen. No cutlery, cooking utensils, dishes, or cleaning materials are supplied. There will be a broom, mop and bucket available for room clean up.

d) Event organizer responsibilities

The event organizer is responsible for locking up rooms, turning down the heat or turning off the air conditioning and ensuring the room is returned to its original condition after an event.

Fire safety regulations must be followed. Only the posted maximum number of people can occupy the community room in accordance with *Fire Code* regulations.

Tenants and outside organizations are responsible for their guests' behaviour at all times while they remain on the property.

Consideration must be given at all times to the rights of other tenants in the building to the quiet enjoyment of their units. Excessive noise will not be allowed. Staff are authorized to terminate any event where guests become unruly or the noise levels contravene municipal bylaws or where a contravention of the Ontario *Liquor License Act* and its regulations has been discovered.

All events will end at 11:00 p.m. The facilities must be cleaned and the keys returned as pre-arranged by 11:00 a.m. the following morning.

e) Damages

The damage deposit will be held by DRNPHC for 72 hours after the rental period. During that time the DRNPHC will carry out an inspection to evaluate whether extra cleaning or repairs are required. If it is determined that extra cleaning or repairs are

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necessary, an attempt will be made to have the event organizer attend for an inspection. If this is not possible, photos will be taken.

An invoice itemizing costs will be issued to the event organizer once the work has been carried out. The balance from the damage deposit, if any, will be returned. Any costs in excess of the deposit will be the responsibility of the event organizer.

Any amounts unpaid by tenants will be considered outstanding and the tenant's account will be charged accordingly. If this individual does not make good on the repayment, it may be cause for legal proceedings under the Landlord and Tenant Board (for tenants) or Small Claims Court (outside organizations).

Subsequent rental requests from tenants or community organizations that have unpaid accounts or have previously damaged the facilities or failed to clean up properly will be refused.

f) Laundry room

A common laundry room is provided for use by tenants in the building. The laundry room is open during posted hours.

DRNPHC is responsible for regular cleaning and maintenance of the laundry room.

Tenants are responsible for keeping the laundry room clean. They are also responsible for removing debris from washing machines and emptying the lint filters from the dryer after each use.

Signs will be posted in the laundry room explaining how to report machines that are not working or problems with the coin-operated or SmartCard technology.

g) Bicycle room & small storage areas

At some sites, DRNPHC has provided space in the building for tenants to store bicycles, mobility devices or in the case of some apartment buildings is able to provide a small storage space.

Bicycles may be stored in an allocated space, in the bike racks provided in the bicycle room, or within the unit. Bicycles may not be stored in common area hallways.

Small storage spaces must be kept clean and tidy and free from hazardous materials.

Staff of DRNPHC will be responsible for providing access to the storage and/or bicycle room, allocating spaces and record keeping.

Upon receipt of a request for bicycle storage space, spaces will be allocated based on a first come first served basis. Once a *Bicycle Storage Agreement* has been signed, tenants will be provided with one key to access the bicycle room and will be allocated a space. The allocation of spaces will be based on the date the request is made to the office. Once all available spaces have been allocated a waiting list will be established based on the date of the request.

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Storage spaces are allocated based on building configuration for unit storage and are linked to the type of unit and number of available storage spaces. If a unit has an allocated storage space tenants will be advised at the time their lease is signed.

DRNPHC will be responsible for regular inspections, cleaning and maintenance of the bicycle room. A regular inventory of bikes and allocated spaces will be done annually in an effort to identify any abandoned items.

An item will be considered abandoned if a present or former tenant has been notified by DRNPHC and has not claimed it within 30 days. Abandoned items will be disposed of by DRNPHC.

DRNPHC will not be held responsible for any loss of or damages to property arising out of the storage of their personal belongings in the space provided.

Tenants must use the assigned space only to store their bike or personal belongings and spaces may not be sublet under any circumstances.

Tenants must inform DRNPHC if they no longer require a space.

Only bicycles are to be stored in the bicycle room.

The bicycle or storage space is not to be used for storing hazardous materials such as tires, paint cans or oil products.

Tenants using any storage space must ensure the room is locked at all times and must not give anyone unauthorized access to the room.

Tenants will be responsible for keeping the area in a clean and orderly condition.

End.

ADMINISTRATIVE POLICIES - BUILDINGS

Administration	Buildings & Capital Assets	Board Approved Date:	21-02-24
Policy	Security	Revision Date:	N/A
Policy No.	20-092	Internally Approved Date:	20-09-26
References	Privacy and Confidentiality Policy Key Control Policy Common Room Rental Policy Video Surveillance Policy Parking Policy Personnel Policy Workplace Violence and Harassment Policy Dispute Resolution Policy		
Forms	Incident Report Form		

1. Policy statement

DRNPHC is committed to the provision of safe and secure housing communities. Such communities are created through proactive, prevention-oriented activities as well as timely and active response to crime as it is reported.

2. Purpose

It is the purpose of this policy to outline security features DRNPHC has implemented in order to support the safety and security of tenants, their guests, DRNPHC staff, volunteers, and members of the public and to safeguard the property of DRNPHC.

3. Scope

This policy applies to the board of directors, all staff and volunteers of DRNPHC in the performance of their duties, tenants and contractors.

4. Definitions

Designated Staff

The staff person(s) or department who has been designated to complete a particular action or requirement.

Security Personnel

Security patrol officers from a security company who have been hired by the non-profit to provide security duties or protection services.

Sensitive Data

Any financial, corporate, or legal information related to the non-profit, its activities, and its interests, including the personal information collected by the non-profit from applicants, rent-geared-to-income and market rent tenants, staff, board members, volunteers, contractors, community support services, and others.

5. Procedure

a) Safety Audit

Staff will ensure that safety audits are conducted on the properties on an annual basis.

Any new safety-related concerns will be forwarded to a supervisor or manager for further investigation, analysis and appropriate follow-up.

b) Security measures

Video surveillance

DRNPHC has often installed video surveillance in the building/on the property to protect public safety, corporate assets and property, including detecting and deterring criminal activity and vandalism. Refer to the *Video Surveillance Policy* for procedures governing its use and the protection of the personal information collected.

Key control

DRNPHC has implemented a combination of locking systems including keys and fob/access cards to secure the building, individual units, common areas and services rooms. Refer to the Key Control Policy for procedures governing their management and distribution.

Securing the Main Office

DRNPHC office staff will ensure that the following anti-intrusion measures are implemented to prevent unauthorized access to the office and confidential information:

- staff where appropriate, will have access only to the office and to confidential information if it is required in the performance of their duties
- confidential documents are to remain under lock and key and kept in secured filing cabinets when not in use and out of sight when staff are away from their desk, or work space
- confidential documents will be removed from the office only when required (e.g., for Landlord and Tenant Board hearings) and may never be left unattended, including in locked vehicles
- petty cash, business credit cards and passwords, will be locked in DRNPHC's fireproof safe when staff are away from their desk and after office hours. Business credit cards assigned to specific employees are placed in that employees care for safe keeping.
- doors and windows giving access to the office will be locked after normal working hours or when staff temporarily leave the office
- a security alarm will be installed to protect the office from unauthorized entry
- the security alarm will be set when leaving the office at the end of each business day
- the combination for the safe, passwords and the code to the alarm will be issued to full-time employees only if the employee's job responsibility requires such assignment as approved by the CEO. The code to the safe (if programmable) and computer passwords will be changed on a regular basis, particularly when there is a change in staff

ADMINISTRATIVE POLICIES - BUILDINGS

Securing Other Office Spaces

DRNPHC office staff will ensure that the following anti-intrusion measures are implemented to prevent unauthorized access to all offices and confidential information:

- staff where appropriate, will have access only to the office and to confidential information if it is required in the performance of their duties
- confidential documents are to remain under lock and key and kept in secured filing cabinets when not in use and out of sight when staff are away from their desk, or work space
- confidential documents will be removed from the office only when required (e.g., for Landlord and Tenant Board hearings) and may never be left unattended, including in locked vehicles
- doors and windows giving access to the office will be locked after normal working hours or when staff temporarily leave the office

Electronic data and storage devices

The designated staff will ensure the following:

- all computers including offsite back-ups are password protected, loaded with anti-virus software and firewalled as per the *Privacy and Confidentiality Policy*
- if the DRNPHC hosts a website, it must be secured from cyber attacks
- computers/server will be backed up daily
- back-up copies of computer data will be stored off-site and in a secure location
- Corporate files are protected by Active Directory permissions that limit access to information based on staff profile.
- Staff are not to share usernames and passwords that could provide unauthorized access to sensitive information.
- all inactive documents and files will be stored in a secure storage facility at Wood Farm Manor, 1525 Nichol Avenue, Whitby, with limited access until such time as they are ready for disposal according to the *Records Management Policy*
- Physical files and/or documents containing confidential information will be disposed through a secure document disposal contract with an approved vendor.
- when disposing of old computer equipment, after deleting files using third party software from the hard drive to make the device unreadable, will be destroyed.

Maintaining a safe workplace

DRNPHC, as an employer, will take all reasonable precautions to protect its staff and volunteers from experiencing workplace violence, harassment, or domestic violence in the workplace in accordance with the *Occupational Health and Safety Act*. This includes working with staff members on a personal safety plan, if a risk to their safety has been identified.

The staff are encouraged to:

- report any threat or occurrence of risk in the workplace according to the *Workplace Violence and Harassment Policy*
- to keep supervisors and co-workers informed of their whereabouts in and around the building
- work in pairs when necessary (e.g., unit inspections)
- use the cell phone provided by DRNPHC to keep in contact with the office

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Where a risk to a staff member's safety has been identified, the following additional security measures will be considered:

- installing a buzzer system in the office for staff working alone,
- relocating an employee's workspace to a more secure area
- screening phone calls and removing their name from any internal telephone directories
- if necessary, working with police to enforce restraining orders or develop safety plans

Security Services

In the absence of an on-site superintendent or in extenuating circumstances DRNPHC may require security of the building and grounds.

If DRNPHC has hired a security company, the security company will:

- provide twenty-four hour (or other hours as assigned) per day patrolling, with particular emphasis during periods that are not considered normal working hours
- investigate occurrences related to the protection of tenants and their guests and the property of DRNPHC
- call emergency services as appropriate
- will wear approved uniforms and will carry identification to provide clear recognition while on duty
- will ensure common room and laundry room doors and all exterior doors are locked while conducting regular patrol rounds
- Patrol rounds will be conducted on a random basis in order to avoid predictability
- follow directions regarding any other duties as assigned

Reporting

All occurrences reported to the Security Services must be recorded on an *Incident Report Summary* and reported promptly to the property manager or on-call person for review and follow-up and if necessary further investigation according to the *Dispute Resolution Policy*.

Enforcement

Protection services personnel are authorized to enforce at their discretion the *Common Facilities Policy* by terminating a function and asking guests to leave the premises if the event is found to be disturbing their neighbours or to be in contravention of the policy. They are encouraged to call police if they are at all concerned for their own safety or that of tenants and their guests.

Privacy

The security contractors will be required to sign a confidentiality agreement as per the Privacy and Confidentiality Policy and must not disclose any confidential information that is learned through the commission of duties other than to DRNPHC (as appropriate).

End.

ADMINISTRATIVE POLICIES - BUILDINGS

Administration	Buildings & Capital Assets	Board Approved Date:	21-02-24
Policy	Key Control	Revision Date:	N/A
Policy No.	20-093	Internally Approved Date:	21-02-12
References	Residential Tenancies Act Deceased Tenant Policy Common Facilities Policy Security Policy		
Forms	Key Assignment Chart Key Agreement Key Allocation Sheet		

1. Policy Statement

DRNPHC is a partner with tenants in maintaining a safe and secure environment for tenants and staff as well as the security and maintenance of all spaces, including all building systems and individual units. Tenants who have been issued keys/locking devices have a role to play in the security of the building by keeping of keys/locking devices safe and not to transfer them to any other individual. This policy will assist with risk management activities to effectively manage and control distribution of keys/locking devices to units, common areas, maintenance rooms, underground parking, and offices.

2. Purpose

DRNPHC will maintain a locking system for the protection of tenants, staff, building systems and property. This policy establishes a framework by which keys/fobs/electronic cards will be issued, monitored and maintained.

3. Scope

The Director, Buildings & Capital Assets or designate has the authority to administer the procedures for control of keys/access devices. The administration of key control may be delegated to management staff. This policy also applies to all tenants who have been assigned unit keys and entry devices to access other areas.

4. Definitions

Designated staff

The staff person(s) or department who has been designated to complete a particular action or requirement.

Locking system

This includes all locking devices including exterior gate and door locks, interior area locks and keys, combination devices, padlocks and electronic card/fob access devices and all other locking devices. All of the above locking system components are the property of DRNPHC.

Code card

Register of individual number codes imprinted on each key corresponding to each unit number or access door, to be kept in a safe secure location and updated after each lock replacement.

Unauthorized locking devices

These could include security bars, chains or alarms installed without the consent of DRNPHC.

5. Procedure

a) Administration of the locking system

DRNPHC has installed a key or fob or access card system[s] to control access into the building, common areas, maintenance rooms, underground parking and offices.

Each residential unit and corresponding mailbox is keyed differently. For replacement purposes, DRNPHC will keep a duplicate copy of each unit key in a locked box by DRNPHC. The code-card will be stored separately and securely.

An annual inventory of active keys issued to staff and tenants will be conducted. Once a year, designated staff will provide a list of tenants and staff and their assigned keys/swipe cards/fobs to senior staff who will be required to certify the accuracy of the list. Any discrepancy shall be explained for inventory adjustment.

b) Control of locking devices

- Staff

Designated staff of the Buildings & Capital Asset's department shall be responsible for the maintenance of all key controls, including the issuing of keys, key control, record keeping and lock change authorizations.

Staff is responsible for the care, use and return of all keys/locking device that has been issued to them and are not to transfer them to any other individual.

The duplication of keys by anyone other than DRNPHC is prohibited unless authorized by the Director, Building & Capital Assets.

- Tenants

Tenants are responsible for the safekeeping of the keys to their units and building amenities and must be careful not to leave them unattended.

Keys/access devices must not be duplicated.

Tenants must surrender all keys, including access cards/fobs for electronic locks to DRNPHC upon termination of tenancy.

c) Issuing keys

- Residential units

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Prior to move-in each household will be provided with two keys for their unit and one key, swipe card or fob per leaseholder for accessing common or exterior doors. If a tenant requires additional keys/access devices for household members over the age of 12, they must submit a request to DRNPHC. Currently Tenants are permitted to duplicate unit door keys but not other building keys.

Tenants must sign for their keys and are responsible for the return of all keys upon move-out (see *Key Allocation Sheet*). Government issued picture identification such as a driver's license must be presented when receiving the key.

- Maintenance/administration areas

Designated staff will be the only personnel authorized to request keys or lock changes for maintenance rooms, administrative or common areas. Staff must carefully consider all requests for keys so that the protection and security of DRNPHC's facilities and property are maintained.

In no case will the issuance of keys be authorized by the same person to whom the keys are issued.

Building entrance and maintenance room keys may be issued to full-time employees for the duration of their employment only if the employee's job responsibility requires such access as approved by designated staff.

Master keys will be issued to employees having a continuing need for the key(s) only for the performance of their duties as approved by the CEO or designate. These keys are to be used only in cases of emergency.

Before the commencement of their duties, staff members accepting custody of any key will sign a *Key Agreement* acknowledging the responsibility for the care, use and return of the keys.

All keys issued to staff members, including access cards/fobs for electronic locks, are the property of DRNPHC and must be surrendered to the office when there is no longer a continuing need for their use (e.g., project or initiative has ended), upon retirement, change of title, resignation or termination of employment as per the *Key Agreement*, or upon the request of the designated staff.

- Common facilities

Keys/access devices to the community room, board room, storage lockers etc. are not covered under this policy. Keys will be furnished upon request when available; but the issuance, control and recovery of keys/access devices shall be the responsibility of the Building & Capital Asset's department and administered according to the *Common Facilities Policy*.

Keys will not be issued to volunteers except upon approval of the designated staff. Designated staff will be responsible for allowing volunteers access to common spaces.

d) Lock changes

Tenants are not to install personal locking devices without permission of DRNPHC and may not change or re-key locks. DRNPHC must have unobstructed access to the unit for emergency purposes.

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If unauthorized locking devices are discovered, the tenant will be notified of the landlord's intent to remove them or in the case of a lock change replace it and provide the tenant with a key. Any damage or expenses incurred for the removal of unauthorized locks or locking devices will be the responsibility of the tenant.

The door lock and deadbolt will be removed and replaced for all units with each new tenancy and the keys changed in the lock box. Incoming and outgoing tenants will be required to sign the *Key Allocation Sheet* when keys are issued or returned.

If a tenant requests that a lock be changed for any reason other than the lock being defective, the tenant will be charged for this service. Exceptions may be made, at the discretion of staff, for tenants with disabilities who require a keyless locking system or other extenuating circumstances such as safety concerns.

A request for a duplicate key or to report the loss or suspected loss of any key and/or locking device is to be submitted in writing to the office the next business day so that the lock can be changed and/or locking device (swipe card/fob) can be deactivated. The cost of a replacement key or locking devices shall be the actual replacement cost to DRNPHC.

The tenant will be charged the cost for re-keying to change locks for personal reasons. DRNPHC designated staff, at his or her discretion, will investigate each incident of lost keys and may authorize the waiving of lock change fees. Except where a writ of possession has been issued by the sheriff, DRNPHC may not change a lock without providing notice and a new key to the tenant.

If a lock to a unit has been changed without the permission of DRNPHC, DRNPHC will, after having notified the tenant in writing, replace the lock to regain access and provide the tenant with the new key. A request for payment will be made to the tenant for the lock replacement at actual replacement cost. If prompt payment is not forthcoming, the landlord is entitled to file an L8 Application with the Landlord and Tenant Board as per Section 35 of the *Residential Tenancies Act*.

Upon the death of a tenant with no other tenants in the unit, the lock will be changed immediately upon becoming aware of a death to prevent entry into the unit by an unauthorized person. As per the *Deceased Tenant Policy*, a key will be provided to the executor of the estate or next of kin after identity of this person has been established and arrangements for payment of rent to the end of the tenancy, if required, have been made.

e) Mailbox keys (Canada Post)

Community mailboxes are the legal property of Canada Post and not the responsibility of DRNPHC. DRNPHC can replace mailbox locks under limited circumstances only. Tenants will need to work with Canada Post Directly to resolve mailbox issues.

f) Lockouts

If a tenant is locked out of his/her unit DRNPHC will provide a replacement key or services of a locksmith with proof of identity as a leaseholder and agreement to chargeback for service. End.

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Administration	Buildings & Capital Assets	Board Approved Date:	21-02-24
Policy	Video Surveillance	Revision Date:	N/A
Policy No.	20-094	Internally Approved Date:	21-02-12
References	Municipal Freedom of Information and Protection of Privacy Act Freedom of Information and Protection of Privacy Act Personal Information Protection and Electronic Documents Act Housing Services Act, 2011 Contract Clauses		
Forms	Release of Personal Information Record Keeping Log Destruction of Video Surveillance Notification of Video Surveillance		

1. Policy statement

Video security surveillance systems are used by DRNPHC at selected locations within the management jurisdiction of DRNPHC for the purpose of increasing the safety and security of tenants, staff and members of the public, to protect public safety, our corporate assets and property and to detect and deter criminal activity and vandalism.

2. Purpose

It is the policy of DRNPHC to utilize video surveillance as necessary in accordance with this Corporate Policy - Video Surveillance Systems (the "policy"). Video security surveillance systems are a resource used by DRNPHC at selected sites within the management jurisdiction of DRNPHC for the purpose of increasing the safety and security of tenants, staff and members of the public, to protect public safety, our corporate assets and property and to detect and deter criminal activity and vandalism.

DRNPHC is authorized to conduct video surveillance under Section 28(2) of the *Municipal Freedom of Information and Protection of Privacy Act* (MFOIPPA) or Section 38(2) of the *Freedom of Information and Protection of Privacy Act* (FOIPPA), as applicable. DRNPHC recognizes that video surveillance technology has the potential for infringing upon an individual's right to privacy and although video surveillance technology may be required for legitimate operational purposes; its use must be in accordance with the provisions of MFOIPPA or FOIPPA, as applicable, and any other applicable privacy laws.

This policy does not require or guarantee that a camera or recording equipment will be recording or monitored in real time at all times.

3. Scope

This policy applies to all employees of DRNPHC involved in the operation of this video surveillance program. These employees have been trained on this policy and their statutory obligations in performing their duties and functions related to the operation of the video surveillance system and DRNPHC's video surveillance program.

DRNPHC employees may be subject to discipline if they breach this policy or applicable privacy laws.

4. Definitions

Designated staff

The staff person(s) or department who has been designated to complete a particular action or requirement.

Personal information

Information as collected by DRNPHC pursuant to this policy means recorded information about an identifiable individual. If a video surveillance system displays such characteristics of an identifiable individual or the activities in which he or she is engaged, its contents will be considered "personal information."

5. Procedure

a) Collection, use and disclosure

Personal information collected by DRNPHC pursuant to this policy will be recorded and will only be used for the purposes set out herein, or as may otherwise be permitted or required by law. For example, personal information may be disclosed to the police or other law enforcement agencies in Canada to aid an investigation. In the event of a reported or observed incident, the review of recorded information may be used to assist in the investigation of the incident with management approval.

Disclosure of storage devices should be made to authorities only upon the presentation by the authorities of lawful reason for disclosure and a written request. Lawful reasons may include:

- the law enforcement agency approaches DRNPHC with a warrant requiring the disclosure of the footage, as per section 42(1)(e) of FIPPA and section 32(e) of MFIPPA
- the law enforcement agency approaches DRNPHC, without a warrant, and asks that you disclose the footage to aid an investigation from which a proceeding is likely to result, as per section 42(1)(g) of FIPPA and section 32(g) of MFIPPA
- DRNPHC staff observe an illegal activity on our premises and disclose the footage to a law enforcement agency to aid an investigation from which a proceeding is likely to result, as per section 42(1)(g) of FIPPA and section 32(g) of MFIPPA

In all instances where video footage is disclosed to lawful authorities' staff are required to document the name of the individual(s) who took the storage device, under what legal authority, the date and whether the storage device will be returned or destroyed after its

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use by the authorities.

b) Protecting personal information

Personal information collected by DRNPHC is protected to avoid unauthorized access. Access to the storage devices where recorded personal information is retained is only permitted by personnel authorized in accordance with this policy. Systems are password protected.

c) Access

The personal information recorded by video surveillance is subject to freedom of information and privacy laws. Individuals have the right to access the personal information DRNPHC holds relating to them, including on video recordings. Individuals may request access by contacting the Director, Tenant Housing Services at 905-436-6610 or via email at drnphc@durham-housing.com. Requests for access may be denied in certain circumstances as set out in MFIPPA and FOIPPA, including where disclosure would interfere with a law enforcement matter or investigation or unjustifiably invade another person's privacy.

When disclosing recordings to individuals who are in them, information about any other identifiable individuals must not be shown. This could be done through using technology to hide identity on the video.

d) Retention

Personal information will only be retained as long as necessary to fulfill the purposes for which it was collected pursuant to this policy, or as otherwise permitted or required by law.

Personal information that has been viewed for law enforcement and public safety purposes must be retained for a certain period thereafter (the requirement is one year in accordance with Section 5 of Ontario Regulation 823 under MFOIPPA unless a shorter retention period is specified by law).

e) Disposal

Old storage devices/computer equipment will be securely disposed of in a way that the personal information cannot be reconstructed or retrieved. They may include shredding, burning, magnetically erasing or deleting files/personal information using third party software from the hard drive. Several holes will be drilled into the hard drive to make the device unreadable as per the *Security Policy*.

f) Breach

In the event of a collection, use, disclosure or retention in violation of applicable privacy laws, DRNPHC will comply with all recommendations of the Office of the Information and Privacy Commissioner of Ontario in responding to breaches. The Privacy Officer will respond to any inadvertent disclosures of personal information. Any breach of the Acts will be reported to the board of directors.

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g) Training

This policy and any related processes or guidelines must be incorporated into training and orientation programs of DRNPHC. Training programs addressing staff obligations under the relevant legislation shall be conducted as necessary.

DRNPHC staff and service providers are required to review and comply with this policy and applicable privacy laws in performing their obligations related to the video surveillance system.

DRNPHC staff that violates this policy or applicable privacy laws may be subject to discipline.

h) Designated responsibilities

DRNPHC will maintain control of and responsibility for the video surveillance system on its premises at all times.

DRNPHC's COO is responsible for the compliance with applicable privacy laws and this policy.

DRNPHC's Director, Building & Capital Assets is responsible for ensuring the establishment of procedures for video surveillance equipment, in accordance with this policy and any legal requirements.

DRNPHC's Director, Building & Capital Assets is further responsible for the life-cycle management of authorized video security surveillance systems, specifications, equipment standards, installation, maintenance, replacement, disposal and related requirements (e.g. signage), including:

- documenting the reason for implementation of a video surveillance system at the designated area
- maintaining a policy regarding the locations of the reception equipment
- maintaining a list of personnel who are authorized to operate the systems and access any recordings, including the circumstances under which access is permitted. Logs must be kept of any access to such recordings
- maintaining a record of the times when video surveillance will be in effect
- assigning a person responsible for the day-to-day operation of the system in accordance with policies, procedures and direction/guidance that may be issued from time-to-time
- Installation and placement

When using video surveillance equipment, DRNPHC will comply with the following:

- The use of each video surveillance camera should be justified on the basis of verifiable, specific reports of incidents of crime or significant safety concerns or for crime prevention. Video cameras should only be installed in identified public areas where video surveillance is necessary to protect public safety,

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corporate assets and property, including detecting and deterring criminal activity and vandalism.

- Privacy intrusion should be minimized to that which is absolutely necessary to achieve DRNPHC's required, lawful goals.
- Equipment to monitor video surveillance will be installed in a strictly controlled access area. Only personnel authorized under this policy may access to the equipment. Monitors showing personal information captured by the video surveillance equipment will not be located in a way that that enables the public to view it.
- Equipment will be installed in such a way that it only monitors those spaces that have been identified as requiring video surveillance. Video surveillance equipment will never monitor the inside of areas where the public or employees have a higher expectation of privacy such as change rooms and washrooms. Equipment should not be focused on individuals' doors or through windows or through windows of neighbouring buildings.
- Adjustment of the camera position will be restricted, if possible, to ensure only designated areas are being monitored.

i) Audit of surveillance policy and practices

DRNPHC will ensure that the use and security of its video surveillance program and equipment is subject to regular audits, at least once a year, to address compliance with this policy and applicable laws. The audit will also include a review of whether ongoing video surveillance is justified based on the requirements set out in this policy. Any deficiencies or concerns identified by the audit will be addressed immediately.

DRNPHC staff will be made aware that their activities are subject to the audit and that they may be called upon to justify their surveillance.

Any questions or concerns related to the DRNPHC's handling of personal information collected through video surveillance can be directed to:

Director, Tenant & Housing Services
28A Albert Street, Oshawa, ON
905-436-6610

j) Notification

The public must be notified of the existence of video surveillance equipment by clearly written signs prominently displayed at the entrances, exterior walls, and interior of buildings and/or perimeter of the video surveillance areas. Signage must inform individuals of the legal authority for the collection of personal information; the principal purpose(s) for which the personal information is intended to be used and the title, business address and telephone number of the appropriate contact the Director, Tenant & Housing Services, privacy officer, at DRNPHC in order to answer questions about its personal information management practices.

End.

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Administration	Buildings & Capital Assets	Board Approved Date:	21-02-24
Policy	Fire Safety	Revision Date:	N/A
Policy No.	20-095	Internally Approved Date:	20-09-26
References	Fire Protection and Prevention Act Ontario Fire Code		
Forms	Emergency Assistance Survey Fire Drill Notice to Tenants Fire Drill Report Smoke Alarm Maintenance Information for Tenants Emergency Plan		

Policy statement

This policy outlines the strategies implemented by DRNPHC to safeguard staff, tenants and property in case of fire.

Purpose

It is the responsibility of the DRNPHC to develop and implement a Fire Safety Plan and to ensure that all safety systems, equipment and procedures as well as training are in place to protect people and property from fire.

Scope

The staff of DRNPHC will ensure that fire safety systems and equipment are inspected and maintained regularly and procedures are followed in accordance with the *Fire Protection and Prevention Act* and the *Ontario Fire Code*.

Definitions

Designated staff

The staff person(s) or department who has been designated to complete a particular action or requirement.

Fire Protection and Prevention Act

This Act sets forth the powers of fire officials with respect to, among other things, their right to enter premises to fight fires and to inspect for compliance with fire prevention regulations.

Ontario Fire Code

This Act serves as the basis for fire protection and fire prevention activities.

Procedure

Fire safety plan

DRNPHC must have an up-to-date fire safety plan and approved by their local chief fire official. The fire safety plan must be included with the keys to service rooms in a Fire Safety Plan Box at or near the building's main entrance which is accessible to the fire department.

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Unit numbers of those tenants who require assistance will be identified in a separate document attached to the fire safety plan. This information gathered through the *Emergency Assistance Survey* must be updated regularly including as part of an annual review process. Arrangements by emergency responders will be made upon arrival for the identified tenant's safe transport from the building.

Tenants will be advised that they can post decals (can be purchased at pet supply stores) on unit doors to alert emergency personnel to the presence and number of pets in the unit.

If a tenant requires the use of pressurized oxygen in the unit, a hazardous materials/flammable materials sticker must be placed on the unit door and special note of this will be made in the fire safety plan.

Exit routes and emergency procedures will be prominently identified on each floor of the building including a warning that there is no access to the roof.

Fire hatch access to the roof (in a high-rise building) must be locked at all times and a key must be made available to the fire department. On-call staff must have access to this key at all times.

The fire department requires the fire safety plan to be reviewed not less than every 12 months. This will ensure that the fire safety plan incorporates changes to tenants requiring assistance or changes in the use or characteristics of the building.

Staff training

All new staff must receive training on fire prevention, suppression (use of extinguishers and water hoses) and safety at their orientation. All supervisory staff must be supplied with a copy of the Fire Safety Plan and are required to become familiar with its contents.

Fire drills

Fire drills will be performed every 12 (7 storeys and less) or 3 (8 storeys or more) months. Fire drills are not required for row house or townhouse units.

Participation is mandatory for supervisory staff that have duties assigned under the Fire Safety Plan.

Tenant participation is voluntary. Tenants will be given advance notice, see *Fire Drill Notice to Tenants* of the fire drill and encouraged to attend.

The local fire department will be notified by staff before the drill is conducted and after it is completed.

A record of the fire drill see *Sample Fire Drill Form* must be retained and kept on file by the DRNPHC for one year. Results of the fire drill will be used by staff to identify gaps or weaknesses in the plan and make any necessary improvements to the training and education of staff and tenants.

d) Fire safety equipment
Staff

Fire safety equipment will be checked, inspected and/or tested regularly by maintenance staff or contractors according to DRNPHC's maintenance plan and the requirements of the *Ontario Fire Code*.

Records of all tests and corrective measures will be retained in maintenance records for a period of two years. Annual testing of unit smoke detectors will be included as part of the annual unit inspection process. Staff will also conduct an inspection of fire safety equipment every time they enter a unit for any purpose and provide a written report on the condition of the equipment to the property manager.

DRNPHC will install fresh batteries on battery-operated smoke alarms and test their functionality on an annual basis.

Tenants

Tenants will be provided with the *Smoke Alarm Maintenance Information for Tenants*.

Tenants are not to tamper with any component of the fire safety system, including unit door closures, smoke alarms, heat detectors, carbon monoxide detectors, lighting (strobe), pull stations, hose cabinets, extinguishers, and communication system speakers.

Tenants who are found to have tampered with fire safety equipment will be asked to meet with the property manager. The tenant will receive a follow-up letter documenting the seriousness of the infraction and the details of the meeting.

If another incidence of tampering is discovered, the tenant will be served with an N7 Notice of Termination for impairment of safety which could result in an application for eviction filed at the Landlord and Tenant Board.

Preparing tenants

Incoming tenants will be provided with written instructions describing how to respond to a fire or a fire alarm as part of their Tenant Handbook or separate publication. This will include instructions on the requirements of the *Fire Code* to keep hallways and fire routes clear of obstructions (e.g., door mats, bicycles and other household items) and that unit doors must never be propped open.

End.

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Administration	Buildings & Capital Assets	Board Approved Date:	21-02-24
Policy	Emergency Planning	Revision Date:	N/A
Policy No.	20-096	Internally Approved Date:	20-09-26
References	Ontario Fire Code Occupational Health and Safety Act Municipal Emergency Response Plan Continuity Plan Pandemic Plan Fire Safety Policy Risk Management Policy Personnel Policy		
Forms	After Action Review Report Emergency Incident Report Emergency Management Program Table Emergency Response Flowchart Operations		

1. Policy statement

DRNPHC is committed to the safety of its tenants, staff and the protection of its assets and property. DRNPHC will work with the community and the municipality to prevent, prepare for, respond to and recover from emergencies of any kind.

2. Purpose

The purpose of the emergency plan is to define the potential emergencies that might affect DRNPHC's property, operations and its staff, tenants, volunteers and the general public and to prepare for, respond to and recover from such emergencies.

3. Scope

This plan will provide guidance to DRNPHC staff to support their decision-making and actions related to managing and dealing effectively with emergencies.

4. Definitions

Designated staff

The staff person(s) or department who has been designated to complete a particular action or requirement.

Emergency

A situation that poses an immediate risk to health, life, property or environment.

Emergency expenses

Expenses that are necessary to incur immediately because a delay will endanger personal safety or risk property damage. Staff will seek authorization from senior management for any emergency expenses that exceed their authorized expenditure limits set for their role.

Emergency services

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Emergency first responders who are usually the first to attend the scene (police, fire, paramedics).

Under control

An emergency is considered “under control” and is non-life threatening when Emergency Services personnel have completed their functions and determined that immediate danger has passed and communicated this to staff.

Timeframes

This plan will be reviewed on an annual basis taking into consideration changes to the built environment, administration, legislation and lessons learned from past incidents.

Categories of emergency

- Infrastructure
fire, flood, natural disasters, structural, elevator
- Building system
utility outage, heating/cooling systems, fire systems, water/sewer, hazardous materials
- Human emergencies
death/suicide, medical event, threat to health and safety, personal injury, criminal activity

Types of emergency

- Non-critical
maintenance or community safety issues (e.g., building system failure, tenant injury with no liability implications, natural death) that can be resolved by on-call staff within a 2 - 4 hour timeframe
- Urgent
maintenance or community safety issues (building system failure, injury that could have liability implications, expenditure required, media involvement) which needs to be attended to by on-call staff, senior staff or contractor within a 2 hour timeframe
- Critical
maintenance or community safety issues (serious event that will affect one or more tenants, death due to criminal activity, serious personal or workplace injury, major repair decision required, media involvement) which needs immediate response to contain the emergency and is expected to require staff to be onsite for four hours or more

5. Procedure

a) Responding to emergencies

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DRNPHC uses fire alarm monitoring, elevator monitoring and other systems to ensure critical systems operate. These monitoring systems provide options for staff, tenants and the general public to alert DRNPHC of an emergency situation.

DRNPHC has also implemented a 24-hour on-call program to handle all emergencies during and after normal business hours. Tenants are instructed to call the main business office at 905-436-6610 as posted at each site only in an urgent emergency, such as flood, power failure to the whole apartment, elevator breakdown, someone trapped in an elevator, no heat, or when someone's safety is at immediate risk. If the emergency is life-threatening, they are instructed to immediately call 9-1-1.

All staff with identified roles in the *Fire Safety Plan* and/or *Emergency Plan* must be familiar with the emergency plan and procedures. After the required orientation, all staff will receive a copy of the On-Call Manual for their use and reference:

b) On-call

There is a designated staff on call between the hours of 4:30 p.m. and 8:30 a.m. Monday to Friday and from 4:30 p.m. Friday to 8:30 a.m. on Monday. There is an on-call superintendent available for each block of buildings 24/7 365 days per year.

c) Live-in superintendent

The superintendent must be prepared to assume the following responsibilities during an emergency:

- be the initial DRNPHC responder to any and all emergencies
- advise on call staff if additional resources or contractors are required
- provide access to any unit or room at the request of Emergency Services or the on call staff
- perform interim or permanent repairs at the request of the on call staff
- assist in evacuating the building and securing units and/or the building when requested to do so by Emergency Services or the on call staff
- complete an Emergency Incident Report of actions taken in support of a response to an emergency
- complete other duties as assigned by the on call staff

d) On Call Staff

The on-call staff will be DRNPHC's lead emergency response staff and is required to take appropriate action until senior staff arrives on site. This can also be assigned to the site staff if they are present at the site.

The on-call staff must be prepared to assume the following responsibilities during an emergency:

- be one of the initial responders to any and all emergencies
- advise other designated staff if additional resources or contractors are required
- engage needed supports to perform interim or permanent repairs to damaged unit
- provide direction to the site staff to assist in evacuating the building and/or securing units when requested to do so by Emergency Services
- complete an Incident Report of actions taken in support of a response to an emergency

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- complete other duties as assigned

e) Director (or other designated staff)

In the event of a critical emergency, the Director, Buildings & Capital Assets (DBCA) backed up by the Chief Operating Officer, or the Chief Executive Officer if either are unavailable, will attend at the scene, assume responsibility for DRNPHC staff and act as the main decision-maker for DRNPHC.

The DBCA has the following responsibilities during an emergency:

- as DRNPHC's designated staff – he/she will be the primary “decision-maker” for DRNPHC outside of normal working hours
- the DBCA must be available to respond to all calls from the On Call, superintendent within 15 minutes of a call being sent to the on-call cell phone or pager
- the DBCA is responsible for supervising and directing maintenance staff after hours
- the DBCA must attend on site in all cases of Critical or Urgent emergencies where there is potential that emergency expenses will be required and/or their presence will be beneficial to DRNPHC in the speedy resolution to the emergency
- the DBCA has the authority to call outside contractors and approve expenditures in situations where a delay could endanger personal safety or cause further property damage
- all emergency expenditures must be reported to Finance at the earliest opportunity
- contact with the CEO, COO and senior management must be made by the DBCA for all emergencies which:
 - have ongoing effect on tenants and the livability of their unit(s)
 - have or will likely to involve media coverage

The on-call manager or other designated staff must arrive on site prepared to:

- take control of the situation
- direct other DRNPHC staff and/or volunteers
- make calls to community support services, contractors, insurance company, or technical services to assist with the emergency
- assist emergency personnel attending the scene (police, fire) as required to ensure swift resolution of the emergency
- act as the DRNPHC's main contact for any and all tenants that have or are likely to be affected by the ongoing emergency
- act as the main contact for other emergency response staff from Salvation Army, Red Cross and support agencies such as shelters, etc.
- contact the CEO, COO and senior management as per the Emergency Communications protocol
- keep complete and accurate notes of the emergency as it develops
- record and be prepared to report on all decisions (and logic behind those decisions) made on behalf of the corporation
- take photographs of the emergency as it unfolds and the damages incurred to property, staff and/or tenants
- conduct oneself in a professional manner and be a good ambassador for DRNPHC
- keep the welfare of tenants and staff and the best interests of DRNPHC in mind at all times

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f) Emergency contractor call-out

Contractors are only to be called out for work after hours when the designated staff deem that the work required cannot wait until the next business day.

Contractors that are to be used in case of an emergency and after normal working hours must come from the approved vendors list.

If the estimated value of the work exceeds the expenditure authority assigned to the staff position, the next senior staff person must be engaged to make the required call-out decision.

<i>Staff level [include all authority levels]</i>	<i>Expenditure limit</i>
Superintendent	up to \$500
Maintenance worker	up to \$500
Manager or designated staff	over \$500

g) On-call emergency kit

To ensure that on-call staff has all the tools readily available to them during an emergency; an on-call emergency kit has been assembled. The kit includes:

- two-way radios and additional batteries
- flashlights and additional batteries
- emergency jacket/vest – clearly identifying them as staff of DRNPHC
- an up-to-date list of all tenants (unit # only) who require assistance in the event of an evacuation
- an up-to-date list of vacant units
- fire safety plans for each site
- emergency contact list
- incident report forms
- pens, paper
- first aid kit (which is kept on site)

The information in the on-call emergency kit will be updated as required by the DBCA with the assistance of the administrative staff.

h) Emergency communications protocol

The CEO is the spokesperson for DRNPHC. If the CEO is not available, the COO will be the back up media spokesperson.

Emergency Services personnel become the primary decision makers when they arrive on site, as it pertains to securing the emergency and deciding what information is to be conveyed to tenants.

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The on-call staff are central to the operation during an emergency and must act as the link between the onsite staff, Emergency Services and the manager or designated staff.

The manager or designated staff must give the CEO and COO regular updates at all times during an Urgent or Critical Emergency.

On-call staff will not discuss any aspect of the emergency with anyone including tenants. All requests for information will be directed to the manager or designated staff.

The CEO will determine the media strategy to be used and will determine when the designated spokesperson is required for media events.

Once the emergency is deemed to be “under control”, the manager or designated staff will arrange a location to meet with affected tenants or arrange to give an “all clear” announcement.

If the emergency affects the entire building or a large part of the community, the manager or designated staff will prepare a timely, factual statement to the residents in the form of a written notice.

Note: Staff must not sign any statement or affidavit, or issue any statement without the approval of a manager or designated staff.

i) Handling the media

If staff is approached on site by media during an emergency situation, staff should:

- direct the reporter to the manager
- be professional with the media and inform them that the spokesperson of DRNPHC would be more than willing to speak with them. The objective is to keep open lines of communications with the media
- never use the phrases “no comment” or “off the record”
- never provide tenant or building history or make personal comments of any type
- ask for the reporter’s name, telephone number and their media outlet (e.g., CBC), name of publication and the questions/information the reporter is requesting
- immediately and discreetly (outside of the reporter’s hearing) contact the manager provide:
 - up-to-date detailed situation facts and analysis
 - the reporter’s name, telephone number and their media outlet

j) Emergency procedures

The following are general principles for staff to follow when responding to an emergency:

i. Providing and gathering information

When the initial call of an emergency is received, staff should be:

- gathering information on who, what, when, where and why
- only operating on first-hand information
- gathering as much information as possible e.g., police badge number, fire official rep.,

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- date, time, witnesses, residents involved, injuries, public media alerts, etc.
- delivering only factual information to the emergency services as required
- documenting constantly every step taken and to be taken (which will often change)

ii. Incident command and control

The on-call staff who are first to arrive on scene must take control of the emergency site and the situation as it develops and must be aware of the status of the emergency, until the manager or designated staff arrives on site.

The manager or designated staff must provide appropriate direction to all on site staff who are available to participate in the emergency.

iii. Emergency services

Emergency Services personnel will determine what information is to be communicated and will direct the manager or designated staff to convey this information to tenants.

On-call staff must be clearly identifiable as DRNPHC staff, by clearly displaying their employee photo card, and be available at the scene/building entrance to provide access and update Emergency Services on the incident.

All staff will facilitate and assist when asked by Emergency Services personnel.

On-call staff and/or the superintendent must provide back-up support in the form of emergency keys (masters, elevators, service rooms), *Fire Safety Plan*, including building layout, problem location, equipment location, material safety data sheets for any hazardous materials located in the area, tenant information including listing of those who require assistance, vacant units.

iv. Tenants

Announcements by the manager or designated staff to affected tenants will be limited to pre-authorized messages as directed by Emergency Services personnel on site.

Warnings of potentially dangerous conditions or areas to avoid must be clearly marked and cordoned off with signage by designated staff. These areas must be regularly monitored.

v. Safety of tenants and staff

To prevent collateral injuries after the event, designated staff are to take necessary precautions to secure the area and keep people away from the emergency site.

vi. Evacuation

The decision to evacuate any or all parts of the building during an Urgent or Critical Emergency should only be made by Emergency Services personnel. Public safety is the prime consideration in this decision.

The primary evacuation routes are the closet stairs. These emergency exits are clearly marked.

If primary evacuation routes are not accessible, the alternate routes are other stair locations. These should be mapped and included with the emergency plan.

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Before evacuation begins, Emergency Services and on-call staff will ensure that the evacuation routes and emergency exits are wide enough to accommodate the number of people to be evacuated, clear and unobstructed, and will not expose evacuees to additional hazards.

The manager or designated staff will designate staff or volunteers as “evacuation wardens” to assist Emergency Services personnel during an evacuation and account for all tenants and staff. In particular to ensure that all vulnerable tenants require assistance are able to evacuate safely from the building.

The designated and alternate assembly area after an evacuation is described at each property location.

The manager or designated staff will, using a list of all tenants and staff, establish a head-count (taking into consideration that everyone may not be home at the time of the emergency) and report anyone who is unaccounted for to Emergency Services personnel.

If necessary, the manager or designated staff will make transportation arrangements to get evacuees to a temporary shelter location.

vii. Preservation of assets

Designated staff are to take all necessary actions to secure the building and to ensure that there is no additional damage to the DRNPHC property or tenant’s belongings.

viii. Affected tenants

Once the emergency has been secured, it is critical that designated staff quickly address the needs of tenants directly affected by the event.

If required, designated staff will arrange for a safe and secure temporary location for the tenants in the local community. Designated staff can request through Emergency Services personnel a bus which could provide a warm, secure location to gather affected tenants.

If the emergency is prolonged designated staff will supply food and drink to affected tenants, as necessary.

If required, designated staff must find a suitable environment to gather information from tenants on the number of people and pets involved in the household, confirm everyone is accounted for and start to establish their immediate needs e.g., alternate accommodation, medical aid such as prescriptions, pet care etc.

If required, designated staff will bring in other agencies (Salvation Army, Red Cross, Humane Society, SPCA etc.) to meet with affected residents and plan for the next few days.

ix. Temporary accommodation

The Salvation Army Emergency Disaster Services (EDS) or similar agency will be contacted by Emergency Services personnel to provide emergency lodgings in situations where tenants are displaced.

x. Restoration of assets

After the emergency has been secured, it is the designated staff's responsibility to secure the area until insurance adjusters and/or technical experts can assess the damages and the actions required to repair damages or restore equipment. No staff should be allowed inside the emergency site after the emergency has been secured.

If the above activities do not occur until the next business day, a staff person or security person may be required to be posted on site or, if feasible, the site can be boarded up.

Repairs to the building should not commence until the manager or designated staff has advised and met with the insurance adjuster to decide on the necessary repairs. The board of directors will be advised of what actions have been undertaken.

xi. After the emergency

Follow-up and reporting

If required, the manager or designated staff will contact DRNPHC's insurance company, technical consultants and/or contractors.

The manager or designated staff will arrange for any inspections.

The manager with the help of designated staff will begin to take steps to restore essential services as per the *Operations Continuity Plan* such as heat, water, drying of premises, etc.

Designated staff will take steps to ensure ongoing safety measures are in place as a result of the emergency i.e. broken glass, falling debris, installation of barricades/caution tape, traffic control and all equipment deemed unsafe is clearly tagged as such.

In major emergencies, the manager or designated staff is to keep the CEO/COO informed of ongoing progress.

The manager or designated staff will address concerns of affected residents if required, i.e. temporary parking, insurance procedures, temporary shelter.

The manager or designated staff will update staff or volunteers starting a new shift during this time period to ensure they are familiar with the situation, contacts, status of damages and equipment failure.

An *Emergency Incident Report* is to be completed by the designated staff detailing the events and pertinent information in writing, if possible, by the next business day while information is still fresh.

xii. De-brief post event

Within one business day following the resolution of all Urgent and Critical Emergencies, the Manager and designated staff will meet with those involved in the emergency to review the *Incident Reports* and complete the *After Action Review Report* to capture as much detail as possible and examine possible causes and whether the emergency could have been prevented.



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Staff involved in the emergency will complete a more detailed report at the request of the manager or designated staff to support enhancements to the emergency plan or existing policies and procedures.

The manager or designated staff will undertake a review of existing policies and procedures and make adjustment recommendations if necessary.

The manager or designated staff will update the Emergency Plan if necessary.

The manager or designated staff will provide additional training to staff and volunteers and as well as a copy of the revised plan for their reference.

End.

ADMINISTRATIVE POLICIES - BUILDINGS

Administration	Buildings & Capital Assets	Board Approved Date:	21-02-24
Policy	Parking	Revision Date:	N/A
Policy No.	20-097	Internally Approved Date:	21-02-12
References	Provincial Offences Act Highway Traffic Act Police Services Act Municipal code Local parking standards and regulations Tenancy Agreement/Lease		
Forms	Parking Agreement Parking Pass Parking Request & Vehicle Registration		

1. Policy Statement

It is DRNPHC's policy to make parking spaces available for rent or use by tenants, their visitors/guests, and staff/contractors. The use of parking spaces must comply with the local municipality's parking regulations.

2. Purpose

The purpose of this policy is to set out the rules and procedures for the use of parking on the DRNPHC's property.

3. Scope

Staff and those who use the parking facilities of DRNPHC will be guided by the rules and procedures outlined in this policy.

4. Definitions

Abandoned vehicle

A vehicle that has been left unattended, without the consent of DRNPHC, and that by reason of its age, appearance, mechanical condition or lack of current license plates, appears to be abandoned.

Roadworthy vehicle

A vehicle that has current license plates and proof of ownership validated by Ministry of Transportation and provided by the owner and that by reason of its appearance appears to be capable of being driven (i.e. no multiple flat tires, visible damage that would make the vehicle impossible to drive, etc.).

Visitors

Persons who visit a tenant, but whose principal address is outside of DRNPHC.

Guests

Persons who have not provided proof of an alternative address and who are staying with a tenant for a limited time.

5. Procedure

a) Parking administration

Aside from spaces that may be specifically assigned to the unit, parking is available on a first come, first served basis.

DRNPHC reserves the right to re-allocate parking spaces with twenty (20) days written notice to the tenant.

DRNPHC will allow only roadworthy and licensed vehicles registered with a *Parking Agreement* in the name of the tenant or other authorized occupant of the unit to be parked in the designated tenant parking on its property. Exceptions to the requirement to live in the building will be made for a caregiver that requires parking or other compassionate reasons on a case-by-case basis and only if additional parking is available.

If there are more requests for parking than there are spaces available, a chronological waiting list will be maintained, and vacant spots will be allocated according to the date of the request for a parking spot. Only tenants or occupants who have legal possession of a vehicle will be added to the waiting list.

b) Designated accessible parking

There are designated accessible parking spaces for tenants with disabilities. These spaces will be allocated on a first-come, first-served basis. Only vehicles displaying an accessible parking permit may be parked in spots reserved for tenants with disabilities.

If these spaces have already been allocated, tenants with disabilities will have priority in the choice of parking spaces closest to the entrance to the building and will be put at the top of the parking waiting list. An individual assessment will be made of each disabled tenant's needs if a request is made by more than one disabled tenant.

c) Removal of unauthorized or abandoned vehicles

DRNPHC will work closely with local municipal enforcement agencies to enforce this policy and reserves the right to remove from the property:

- abandoned vehicles
- vehicles without valid license plates
- vehicles for which parking fees have not been paid if applicable

Vehicles parked in a fire or access route or vehicles parked in accessible parking spaces without displaying valid Ministry permits will be immediately tagged and towed.

Vehicle owners will be held responsible for any costs incurred by DRNPHC for the vehicle's removal, the costs for impounding and storage of such vehicle and all fines imposed for infractions of the municipal parking regulations.

d) General rules

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The vehicle owner assumes all risk for any vehicle(s) or its contents while parked on the property, including damage or loss by fire, theft, negligence, malicious negligence or damage caused by the malfunction of a garage door.

All vehicles parking on the property must be roadworthy at all times, with valid license plates and insurance.

Recreational vehicles, including boat trailers, campers, etc., will not be kept on the property without DRNPHC's written permission.

All entrances and exit lanes associated with the property must be kept clear at all times and vehicles parked in these areas will be subject to removal according to the municipal parking regulations.

The tenant will park his/her vehicle in such a manner as to allow full access to and from others tenants' allocated parking spaces.

Vehicles must be operated in a careful and safe manner while on DRNPHC property. Vehicle engines are not to be left idling.

There are to be no repairs of any kind (including oil changes) performed on vehicles in any parking area. The parking spot must be kept clean of debris, car parts, tires, oil cans, etc., at all times.

DRNPHC does not have the facilities to accommodate the charging of electric vehicles. Until this is made possible, DRNPHC will be unable to provide power sources for these vehicles.

e) Visitors/guest parking

Subject to availability, parking spaces may be allocated to visitors or long-term guests by written request submitted to the Property Manager.

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Administration	Buildings & Capital Assets	Board Approved Date:	21-02-24
Policy	Pets	Revision Date:	N/A
Policy No.	20-098	Internally Approved Date:	21-02-12
References	Dog Owners' Liability Act Municipal by-law Tenancy Agreement Dispute Resolution Policy		
Forms	Pet Identification Form		

1. Policy Statement

DRNPHC recognizes that pets enrich the lives of tenants. However, the rights of pet owners must be balanced with the reasonable enjoyment of other tenants and the management rights and responsibilities of DRNPHC.

2. Purpose

This policy establishes guidelines and procedures for pet owners which will be applied fairly and consistently to all tenants of DRNPHC

3. Scope

This policy applies to all tenants with pets at DRNPHC and is to be carried out by the staff of DRNPHC.

4. Definitions

Contained pet

Animals that are contained in a cage, tank or other container such as ferret, rabbit, bird, fish, rodents (such as mice, gerbils, hamsters) and reptiles (including snakes) as permitted by municipal bylaw.

Designated staff

The staff person(s) or department who has been designated to complete a particular action or requirement.

Household pet

A cat or a dog

Prohibited animals

Reference the specific local municipal by-laws.

Pit bulls

A pit bull terrier, a Staffordshire bull terrier, an American Staffordshire terrier, an American pit bull terrier, a dog that has an appearance and physical characteristics that are substantially similar to those of dogs referred to.

Service animals

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Animals that have been trained to perform tasks to assist people with disabilities, such as guide dogs for people with visual impairments, hearing animal to signal people with hearing impairments.

5. Procedure

a) Restrictions

Municipal by-laws set out the maximum number of household pets (e.g. cats and dogs) permitted in each unit.

Pets must be registered with DRNPHC using the *Pet Identification Form*. The tenant must provide the following information for each pet:

- Species of Pet
- Description, including size and colour of the pet

DRNPHC will record this information so that it is available to staff and/or contractors entering the unit for authorized activities (inspections, unit showings, etc.).

Contained pets may be kept in reasonable quantities according to municipal bylaws and do not have to be registered with DRNPHC. DRNPHC reserves the right to limit the size of aquariums and will charge back to the tenant any costs related to water damage from aquariums, accidental or otherwise.

Exotic pets, wildlife or livestock are prohibited.

b) Responsibilities

Tenants are required to adhere to all municipal pet regulations including licensing, vaccination and cleaning up after their pets.

Tenants are encouraged to have all household pets six months of age or older, spayed or neutered.

Tenants residing in the building prior to the enactment of this policy will have their animals “grandfathered” into this policy and these pets may live out their lives at DRNPHC. However, the tenant is prohibited from adding additional pets to the household until the number of pets in the unit meets or is lower than the number of pets defined in this policy. Once that occurs, the “grandfather” clause will lapse.

Tenants, who acquire a prohibited pet(s) or exceed the restrictions on the number of pets outlined in this policy after initial occupancy, will have 30 days from the discovery of the animal(s) to relocate them or the tenant could face legal action under *Residential Tenancies Act*.

Pets must be on a leash, in a cage or under physical control of the owner at all times, while in the hallway, elevator, entryways, stairways and any other common areas of the building or site.

In addition to the above requirements, “grandfathered” tenants who own dogs identified as

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or resembling “pit bulls” must abide by the *Dog Owner’s Liability Act* and must muzzle their animal when in common areas and public spaces.

No pets, with the exception of service animals, will be allowed within the laundry room or common rooms of the building or site.

Exterior pet houses are not permitted. All pets will be housed within the tenant’s unit.

Tenants must clean up after their pets in common areas or on lawns and the yard area of the housing unit. These areas will be kept clean of all animal excrement at all times.

Tenants are responsible financially for the repair of any damage to property whether within the tenant’s unit, common and/or exterior areas, or other tenant’s units, caused by their pets. DRNPHC may charge tenants with the cost of repairing damage caused by their pets, including removal of pet excrement that is not picked up by the pet owner.

Tenants must ensure that their pets’ noise, odours or behaviour does not disturb other tenants.

c) Care of pets

Every tenant that has a pet will commit to providing the animal or arranging for the animal to be provided with adequate care as may be required to meet the needs of the pet and as defined in the municipal bylaws.

If an animal is found to be kept in unsanitary conditions (accumulation of fecal matter, odour, or insect infestation) which endanger the health of any person or animal or which disturbs the enjoyment of others, the municipal animal control officer will be informed. If the issue is not resolved to the satisfaction of DRNPHC, legal proceedings through the Landlord and Tenant Board may follow. DRNPHC will deal with each situation on an individual basis.

All pet owners must make arrangements for their pets when they are away, hospitalized or otherwise not able to care for the pet. Tenants may wish to consider friends, relative or caseworkers as alternate caregivers. Tenants are responsible to provide access to the caregiver. If the caregiver has forgotten or misplaced the keys, DRNPHC will not grant entry to the unit to non-leaseholders unless specifically authorized in writing by the tenant.

It is not the responsibility of DRNPHC to care for pets. If it is discovered that animals in a unit are not being cared for, an animal shelter or animal services will be called. If there is a fee of the cost charged by local animal shelter for this service will be billed to the tenant.

All unidentified animals running at large within the complex should be reported to the site Superintendent or Property Manager immediately (if absent, the municipal animal control officer).

If a pet harms (attacking or biting) or intimidates someone, the incident should be reported to the Superintendent or Property Manager immediately (if absent, the municipal animal control officer). Depending on the seriousness of the incident, it could result in legal and/or eviction proceedings against the pet owner.



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End.