 Crown Ridge Health Care Services Inc.	Administration Manual		Policy No.	ADM 2.18
			Effective:	July 16, 2020
			Revised:	March 2024
	Divisions:	20, 40	Approved By:	Leslie Morrow

Policy

Crown Ridge Health Care Services has a responsibility to ensure residents are able to receive visitors and that visits are safe. This visitor policy will be in compliance with the Retirement Homes Act, respects the Residents Bill of Rights and ensures essential visitors, including caregivers, continue to have access to residents in our retirement homes including during communicable and infectious disease/illness outbreaks and pandemics/epidemics.

All visitors must comply with the requirements set out in this policy and the homes policies and procedures including health and safety, emergency procedures, workplace violence and harassment.

Aggressive, disruptive, violent and/or harassing behaviour will not be tolerated in our home. The homes policies and procedures will be implemented should this occur, which may include contacting police.

The home will have a reasonable approach that is as flexible as possible to support health and safety during visits and will ensure equitable access to visits for all residents.

Best practices for IPAC and health and safety measures will be maintained prior to, during and after visits.


This policy will continue to be reviewed and revised based on provincial requirements and the home will ensure that the current version of the Visitor Policy is posted in the home and available to residents and provided to the Residents Council, if one.

Protection of retirement home residents and staff from risk of infection is paramount and guided by the following principles:

Safety: Any approach to visiting, absences, and activities must balance the health and safety needs of residents, staff, and visitors, and ensure risks of infection are mitigated.

- **Mental Health and Emotional Well-being:** Welcoming visitors, absences, and activities is intended to support the overall physical, mental and emotional well-being of residents by reducing any potential negative impacts related to social isolation.
- **Equitable Access:** All residents must be given equitable access to receive visitors and participate in activities consistent with their preferences and within restrictions that safeguard residents, staff and visitors.
- **Flexibility:** The physical characteristics/infrastructure of the home, its staffing availability, whether the home is in an outbreak, and the current status of the home with respect to infection prevention and control (IPAC) including personal protective equipment (PPE) are all variables to consider when administering home-specific policies for visiting, absences, and activities.
- **Autonomy:** Residents have the right to choose their visitors. Residents also have the right to designate their caregivers. If a resident is unable to do so, substitute decision-maker(s) may designate caregivers.
- **Visitor Responsibility:** Visitors play a role in reducing risk of infection by adhering to the IPAC requirements and recommendations described in this policy or the visitor policy of the home (as applicable).

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• **Vaccination:** Homes are highly encouraged to continue to promote vaccinations and boosters to all eligible residents, staff, and visitors. Staying up-to-date with vaccines helps to reduce the number of new cases and, most importantly, severe outcomes including hospitalizations and death.

Co-Located Home (If applicable)

In a co-located long-term care and retirement home that is not physically and operationally independent (*i.e. there are separate entrances and no mixing of residents or staff between the retirement home and the LTC home*), the policies for the long-term care home and the retirement home shall align as appropriate, unless otherwise instructed by the local public health unit (PHU).


In cases of spouses or immediate family members living in separate ‘homes’ of a co-located home (e.g., one spouse lives in a retirement home, while the other lives in a long-term care home that is on the same property), the visiting member must follow the requirements of the home they are visiting, based on whether the visitor is a General Visitor or a designated Essential Caregiver (see section Types of Visitors). Wherever possible, it is recommended that spouses or immediate family members be designated as an Essential Caregiver to facilitate visits with partners and immediate family.

Requirements for Visits

The following baseline requirements will be met to continue to accept any visitors:

1. The home will have procedures for visits including but not limited to IPAC, health and safety of staff and residents and any setting-specific policies.
2. Communication of clear visiting procedures with residents, families, visitors and staff, students, volunteers including sharing an information package with the Ministry of Seniors and Accessibility COVID-19 Guidance Document for Retirement Homes in Ontario, Infection Prevention And Control (IPAC) and other health and safety procedures including masking, and ensuring visitors’ agreement to comply. Home materials will include an expectation that visitors comply with visiting policies.
3. Visitors will receive information about required IPAC practices that are appropriate to the level of risk that visitors present to themselves and to others in the home. The home will provide education to visitors which includes but is not limited to visitor policies, physical distancing, respiratory etiquette, hand hygiene, applicable IPAC practices and proper use of PPE.
4. A process for any person to make complaints to the home about the administration of visiting policies and a timely process for resolution. The information package for visitors will include information about how to escalate concerns about the home to the RHRA electronically and/or phone.
5. The home policies/procedures include an expectation that visitors comply with the visiting policy, with a process to notify residents and visitors that failure to comply with the visiting policy may result in discontinuation of visit(s) when risk of harm from continual non-compliance is considered too high, including a way to assess refusal of entry on a case-by-case basis.
6. Protocols to maintain best practices for IPAC measures prior to, during and after visits.

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7. Any changes to the homes visitor policy and/or visiting procedures/requirements will be posted and communicated.

Factors that will/may inform decisions about visits in the home include:

- **Adequate Staffing:** The home has sufficient staff to implement the policies related to visitors and to ensure safe visiting as determined by the home’s leadership.
- **Access to adequate testing:** The home has a testing policy and plan in place, based on contingencies and informed by local and provincial health officials, for testing in the event of a suspected outbreak (if required)
- **Access to adequate Personal Protective Equipment (PPE):** The home has adequate supplies of relevant PPE required to support visits.
- **Infection Prevention and Control (IPAC) standards:** The home has appropriate cleaning and disinfection supplies and adheres to IPAC standards, including enhanced cleaning. An IPAC situation in the home that requires a change in the visitor policy/procedure/requirements ie/outbreak or other event with potential to affect visiting in the home.
- **Physical Distancing:** The home can facilitate visits in a manner aligned with physical distancing protocols, if distancing protocols are required.

If the home restricts visits based on any of the above factors, the decision will be communicated to residents/SDM, including the reasons for the decision.

Types of Visitors

There are 3 categories of visitors: Essential Visitors, General Visitors, and Personal Care Service Providers. Retirement home staff, students and volunteers as defined in the Retirement Homes Act, 2010 are not considered visitors.

<p>Essential Visitors <i>Essential Visitors are persons performing essential support services (e.g., food delivery, inspectors, maintenance or health care services (e.g., phlebotomy) or a person visiting</i></p>	<p>Support Workers A Support Worker is a type of Essential Visitor who is brought into the home to perform essential services for the home or for a resident in the home, including the following individuals:</p> <ul style="list-style-type: none"> • Regulated health care professionals under the <i>Regulated Health Professions Act, 1991</i> (e.g., physicians, nurses); • Unregulated health care workers (e.g., PSWs, personal/support aides, nursing/personal care attendants), including external care providers and Home and Community Care Support Service Providers (formerly LHIN providers); • Authorized third parties who accommodate the needs of a resident with adisability; • Health and safety workers, including IPAC specialists; • Maintenance workers; • Private housekeepers; • Inspectors; and Food delivery
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a very ill or palliative resident).

In addition to a person visiting a very ill or palliative resident, there are two categories of Essential Visitors: Support Workers and Essential Caregivers.

B. Essential Caregivers

An Essential Caregiver is an individual designated by a resident or the residents' substitute decision maker with authority to give that designation, who provides one or more forms of support or assistance, including direct physical support or provides social, spiritual or emotional support whether paid or unpaid.

This can be family members, friends, or a person of importance to a resident.

If an individual is under the age of 16 years of age, approval from a parent or legal guardian is required prior to the individual being designated as an Essential Caregiver.

Essential caregivers visit to **provide care to a resident (e.g., supporting feeding, mobility, personal hygiene, cognitive stimulation, communication, meaningful connection, relational continuity and assistance in decision-making).**

Essential Caregivers must be designated per resident and by the resident or if unable to do so, by the resident's substitute decision maker.

Essential Caregivers will be identified in the resident's plan of care.

Designated Essential Caregivers and any subsequent changes will be documented through the Essential Caregiver Consideration Form.

Residents/SDMs will be encouraged to change the designation of their Essential Caregiver in limited circumstances, as noted in the above chart, in order to limit the spread of infection.

2. General Visitors –

A General Visitor is a person who is not an Essential Visitor and visits:

- For social reasons (e.g., family members and friends of residents);
- As a prospective resident taking a tour of the home.
- To provide non-essential services (may or may not be hired by the home or the resident and/or their SDM);

3. Personal Care Service Providers


A Personal Care Service Provider is a person who is not an Essential Visitor and **visits to provide non-essential personal services to residents.**

Personal Care Services include services such as hair salons and barbershops, manicure and pedicure salons, aesthetician services, and spas that are not being provided for medical or essential reasons (e.g., foot care to support mobility or reduce infections).

When providing services, Personal Care Service Providers must:

- Follow required public health and IPAC measures for Personal Care Service Providers, retirement homes and the specific home, including, practicing hand hygiene and conducting environmental cleaning after each appointment.
- Follow the masking requirements

The hairdresser is encouraged to be vaccinated against COVID 19, Influenza and the publicly funded vaccination program.

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Access to the Home -General Visitation

1. Retirement Homes are currently following the requirements outlined in the MSSA COVID-19 Guidance for Retirement Homes in Ontario (MSAA Guidance)

- Masks are required for staff, students, volunteers, and Essential Visitors who are health care workers, including Home and community Care support Services (HCCSS) workers, based on a point of care risk assessment (ie/ for determining if masking is needed before every resident interaction based on risk to the worker).
- Staff may consider wearing masks while providing 1:1 care within 2 meters of an individual for 15 minutes or longer.
- Masks are recommended but not required for visitors who are not health care workers (ie. Families, friends, caregivers who are not health care workers).

2. Visitors may access the Retirement Home through the designated visitor entrance(s) as per the posted designated hours. The visitor entrance doors are locked at designated hours for security reasons after hours Crown Ridge Retirement Residence and The Riverine) and on weekends (The Riverine) and access gained by pressing the doorbell/button and awaiting a response from staff.

**Please note that staff may not be able to respond immediately to after-hours requests to access the home as they are engaged in resident care. We kindly ask for your patience and understanding. **


- 3. Unnecessary entry into the home by visitors will be minimized.
- 4. All individuals must passively screen for symptoms and exposure history for COVID-19/illness before entering the home. Screening is not required for outdoor visits. All individuals entering the home must be able to pass the passive screening questions in order to enter the home.

The following are exempt from passing screening per below: First responders – must be permitted entry without screening in emergency situations.

Visitors for imminently palliative residents – must be screened prior to entry per requirements. If they fail screening, they must be permitted entry, but the home will ensure that they wear a medical (surgical/procedural) mask and maintain physical distance from other residents and staff.

- 5. General visitors should avoid entering the home for 10 days after COVID-19 symptom onset, if possible. If the visit is essential to the resident’s mental/physical wellbeing, the visitor may come into the home wearing a mask at all times.
- 6. Visitors must also perform hand hygiene. Proper hand hygiene signage will be posted, as well as required IPAC signage/information.
- 7. Medical masks will be available for all those who enter our homes as well as information on proper application. Additional PPE will be accessible appropriate to their purpose of visitation and level of risk in accordance with evidence based practices as well as other required IPAC signage (ie/ cough etiquette).

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8. Visitors are encouraged to be vaccinated against COVID, Influenza, RSV and as per the provincially and publicly funded vaccination program.
9. All residents, families and visitors, support workers are requested to read this visitor policy and the homes information package and will be offered education on all required protocols (including visitor complaints process) in accordance with legislated requirements. Additional applicable policies and procedures will also be communicated as needed. This policy and information package will also be posted for staff, student and volunteer review and communicated accordingly. A copy of the most current version of the Visitor Policy will be provided to the Resident’s Council, if one.
10. All caregivers, visitors and support workers must comply with this visitor policy and abide by the health and safety practices contained in IPAC Guidance for Retirement Homes related to communicable and infectious diseases/illness as a condition of entry into the home and for the duration of their visit. Support Workers are permitted into the home, while maintaining the principles of minimizing the number of workers per resident per day.
11. Essential Caregivers, provided that they pass the screening requirements will not be denied access to residents.
12. **There is no limit on the number of individuals (including caregivers) who may visit at a time for indoor visits.** There are no limits on the number of visitors, however, the number of caregivers and visitors may be further restricted by the local Public Health depending on the specific situation. The home and visitors must abide by any restrictions imposed by Public Health.
13. Pets must be on a leash and be up to date with their vaccinations. Proof of vaccination may be requested.
14. **Any Changes required to the Visitor policy, procedures, requirements will be posted and communicated.**

Access to Home- During Outbreaks

OUTBREAKS- Respiratory, Enteric, Non-COVID:


- Visitors are permitted during other outbreaks unless directed otherwise by Public Health.
- Any changes to general visiting policy/procedures/requirements will be communicated including mandatory wearing of masks.
- Visitors are required to comply with PPE requirements and posted signage for visits with a resident who is isolated and/or additional precautions.

****COVID-19 OUTBREAK****

Only Essential Visitors are permitted to visit a resident who:

- is in isolation and on droplet and contact precautions for suspected or confirmed COVID-19
- Resides in an outbreak area of the home that has a suspected or confirmed COVID-19 outbreak.
- Essential visitors who are in contact with a resident who is suspected or confirmed with COVID-19 or other communicable/infectious disease/illness must wear appropriate PPE in accordance with guidance document requirements. This includes contact and droplet precautions (gloves, face shield or goggles, gown, and surgical/procedure mask).

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General Visitors are not permitted to visit if a resident is symptomatic, self-isolating or on droplet and contact precautions for COVID-19 illness, are not permitted if the home is in COVID-19 outbreak unless the resident is in an area unaffected by the outbreak and when the PHU so directs.

The home may permit other residents who are not self-isolating to receive General Visitors and Personal Care Service Providers, provided it is in alignment with provincial requirements, and they are not living in the outbreak area of a home.

Other:

Tours

1. Individuals who wish to tour the home are considered General Visitors and must comply with the general visitor requirements as set out in this policy and as set by Public Health.
2. To assist in minimizing any health and safety risk to residents and staff of the home and risk to the prospective resident touring the home, homes are encouraged to target tours to empty rooms and avoid contact with residents as much as possible.
3. All in-person tours should be paused if a home goes into outbreak.

Discontinuation of Visits

Non-compliance with the residence’s policies could result in the discontinuation of visits for the non-compliant visitor/caregiver/support worker. The home will provide more education; the visitor/caregiver/support worker will be asked to leave by the supervisor or management and the incident documented, when will the visitor/caregiver/support worker be allowed back and under what parameters.

Filing a Complaint or Concern in regards to Visitor Policy

Any person wishing to file a concern or a complaint in regard to the home’s visitation policy may contact the home’s General Manager, Director of Corporate Clinical Services (Sandra Honey -613-392-1289 ext 154, Corporate Operations Officer (Leslie Morrow 613-392-1289- ext 130), the RHRA -1-855-ASK-RHRA (1-855-275-7472) or email info@rhra.ca.

Accessibility Considerations

The home is required to meet all applicable laws such as the Accessibility for Ontarians with Disabilities Act, 2005.