

Infectio	n Prevention & Control Manual	Policy No.	IC 12.5
Visitor Policy LTC Homes		Effective:	July 16, 2020
		Revised:	July 5 2022
Divisions:	10, 30	Approved By:	Leslie Morrow

Policy

Crown Ridge Health Care Services has a responsibility to ensure residents receive visitors safely. This visitor policy respects the Residents Bill of Rights and ensures essential visitors, including caregivers, continue to have access to residents in long-term care homes during infectious disease outbreaks and pandemics/epidemics.

All visitors must comply with the requirements set out in this policy.

This policy complies with the current ministry requirements per COVID-19 Guidance Document for LTCHs in Ontario, COVID-19 Guidance: Long Term Care Homes and Retirement Homes for Public Health Units, Fixing Long Term Care Act, 2021 and applicable legislation and regulations. The Chief Medical Officer of Health (CMOH) guidance will prevail, and homes will take all reasonable steps to follow them. Additionally, if anything conflicts with application of provincial requirements, the home will follow those requirements.

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 provided to the Residents Council and Family Council(if any).

Essential Caregivers, General Visitors and Support Workers are not required to be vaccinated to enter the home- see the homes COVID vaccination policy however are required to comply with screening, IPAC requirements and testing to help minimize risk to our residents, staff and all those who enter our home (see the homes Antigen Testing Policy).

Frequency of Testing for Essential Caregivers and General Visitors is determined based on whether the individual meets the "Staying up to date" COVID vaccination definition.

Access to the home by Essential Visitors, including caregivers, will not be prohibited or unreasonably restricted during an outbreak.

Guiding Principles

In addition to the requirements established in the Fixing Long-Term Care Act, 2021, COVID-19 Guidance Document for LTCHs, COVID-19 Guidance: Long Term Care Homes and Retirement Homes for Public Health Units, this policy is 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.



- Emotional Well-being: Welcoming visitors is intended to support the 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 workforce/human resources availability, whether the home is in 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 take into account when administering homespecific policies.
- **Equality:** Residents have the right to choose their visitors. Residents also have the right to designate their caregivers. If a resident is unable do so, substitute decision-maker(s) may designate caregivers.
- Visitor Responsibility: Visitors have a crucial role to play in reducing risk of infection for the safety of residents and staff by adhering to visitor policy requirements related to screening, IPAC and PPE and any precautions described in this policy.
- COVID-19 Vaccination: The goal of the provincial COVID-19 vaccination program is to protect Ontarioans from COVID-19. Vaccines help reduce the number of new cases and, most importantly, severe outcomes including hospitalizations and death due to COVID-19. Our home highly encourages all inidividuals to obtain vaccination and a booster per public health recommendations. All individuals, whether or not they have receive a COVID-19 vaccine, must continue to practice the recommended public health masures, and comply with all applicable laws for the ongoing prevention and control of COVID-19 infection and transmission. Visitors will not be denied entry to the home based on their COVID-19 vaccination status.

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 where possible or follow the more restrictive requirements,



unless otherwise instructed by the local public health unit (PHU) based on COVID-19 prevention and containment.

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 home will adhere to the requirements in any applicable directives issued by the CMOH and directions from the local PHU. This may include direction to take additional measures to restrict access and duration of visits during an outbreak or when the PHU deems necessary.

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

- 1. Procedures for visits including but not limited to IPAC, scheduling and any setting-specific policies.
- 2. Communication of clear visiting procedures with residents, families, visitors and staff, students, volunteers including sharing an information package on IPAC, masking, physical distancing and other health and safety procedures such as limiting movement around the home, if applicable, and ensuring visitors' agreement to comply. Home materials will include an expectation that visitors comply with visiting policies.
- 3. 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 MLTC by electronically and/or phone.
- 4. 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.

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- 5. Protocols for record keeping of visitations for contact tracing purposes (to be kept for at least 30 days) with the minimum requirements of: name, contact information, date and time of visit, purpose of visit ie/resident visited.
- 6. Protocols to maintain best practices for IPAC measures prior to, during and after visits.
- 7. A list of visitors available for relevant staff to access, including Essential Visitors, to support contact tracing.
- 8. If the home enters a COVID-19 outbreak:
 - a) all non-essential visitations will be discontinued, unless the resident resides in an area unaffected by the outbreak. The home will establish compliance with all Chief Medical Officer of Health (CMOH) directives for homes in outbreak and follow directions from the local public health unit (PHU).
 - b) Essential visits will still be allowed for homes in outbreak and any visitors must qualify under those rules.
 - c) The home will consult with the local PHU as to whether temporary cessation of visits is warranted if there is a steady increase in local community cases of COVID.

Factors that will 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.
- 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 adhere to IPAC standards, including enhanced cleaning.
- **Physical Distancing:** The home can facilitate visits in a manner aligned with physical distancing protocols.



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

Types of Visitors

There are 3 categories of visitors: Essential Visitors, General Visitors, and Personal Care Service Providers. Long term care home staff, students and volunteers as defined in the Fixing Long Term Care Act, 2021 are <u>not</u> considered visitors. (infants under the age of 1 are not considered visitors and are excluded from testing and vaccination requirements).

Essential Visitors

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 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.

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:

- Regulated health care professionals under the *Regulated Health Professions Act*, 1991 (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 a disability;
- Health and safety workers, including IPAC specialists;
- Maintenance workers;
- Private housekeepers;
- Inspectors; and
- Food delivery.



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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 the individual being desginated as an Essential Caregiver.

Residents can designate a maximum of four caregivers

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).

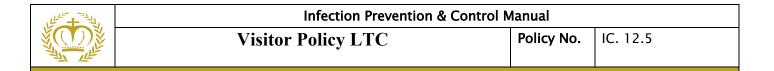
Essential Caregivers must be designated per resident (designation should be made in writing to home & home should have procedure for documenting Essential Caregiver designations and any subsequent changes)

Residents or an SDM are able to designate the Essential Caregiver and the necessity of an Essential Caregiver is determined by the resident or SDM.

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); and/or



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).

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.

Access to Home

- 1. All caregivers, visitors and support workers must agree to abide by the health and safety practices contained in Directive #3 as a condition of entry into the home.
- 2. All caregivers, visitors and support workers will be actively screened for symptoms and exposure history for COVID-19 before they are allowed to enter the home. Screening is not required for outdoor visits.
- 3. All caregivers, visitors and support workers entering the home, are required to complete Antigen POC testing prior to full entry to the home in accordance with the designated frequency. The frequency of Antigen POC testing will be completed as per the home's policy for antigen testing and in compliance with provincial Directives. A negative result is required prior to full entry to the home.
- 4. The home will facilitate visits for residents and will not unreasonably deny visitors based on frequency of visits.
- 5. Essential Caregivers, provided that they pass the screening requirements (surveillance and POC Antigen testing (as applicable), will not be denied access to residents.
- 6. All caregivers, visitors and support workers will follow the current Directive 3 and public health measures for the duration of their visit.
- 7. Essential Visitors are permitted to visit a resident who:
 - is in isolation on Droplet and Contact Precautions;
 - Resides in an outbreak area of the home.



General Visitors are not permitted to visit if a resident is in isolation on droplet and contact precautions, are not permitted if the home is in outbreak unless the resident is in an area unaffected by the outbreak and when the PHU so directs.

- 9. As noted above, residents who are self-isolating under Droplet and Contact Precautions may only receive Essential Visitors (e.g., residents may not receive General Visitors or Personal Care Service Providers). 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.
- 10. Up to 4 visitors (including caregivers) may visit at a time for indoor visits. There are no limits on the number of visitors permitted for outdoor visits other than to ensure 2 metres between groups of visitors. The number of caregivers and visitors may be further restricted however by the local Public Health depending on the specific situation. The home and visitors must abide by any restrictions imposed by a Public Health.

1. Essential Visitors

Support Workers and Essential Caregivers

A. Support Workers

Must pass surveillance screening.

Support Workers are permitted into the home, while maintaining the principles of minimizing the number of workers per resident per day and maintaining physical distancing within the home as much as possible.

Support workers require, regardless of vaccination status, proof of negative test upon entry, taken the day of the visit or on a previous day.

B. Essential Caregivers

Must pass surveillance screening

Essential caregivers are required to complete POC antigen testing as per the required Ministry set frequency and require a negative test prior to entry.

May have physical contact including for non-care related reasons. Able to join activities as long as space capacity permits.



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A caregiver may not visit any other resident or home for 14 days after visiting another resident who is self-isolating or symptomatic or a home or area of a home in an outbreak.

Must properly wear masks for the duration of the visit (masking for residents is required if tolerated).

Essential caregiver visits may coincide with general visitor visits.

Essential visitors visiting more than one time in the day will only be required to test once during that day and may return later in the day without requiring further testing.

Essential visitors are required to follow CMOH guidance when visiting, including physical distancing and wearing a mask.

Essential visitors who are in contact with a resident who is suspect or confirmed with COVID-19 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).

2. General Visitors

May visit a resident indoors or outdoors.

Must pass surveillance screening prior to indoor visits.

Children under one year old do not need to test.

General Visitors are required to antigen test with a negative result prior to full entry into the home or provide proof of a negative test taken that day or previous day.

Outdoor visits are permitted. There is no testing requirement or limits on outdoor visits except that groups of visitors must be at least 2 metres apart.

All general visitors must wear masks for the duration of the visit (masking for residents is required if tolerated). Children under two are not required to wear a mask.

Will be reminded to follow applicable public health measures while visiting.

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A general visitor may not visit any other resident or home for 10 days after visiting another resident who is self-isolating or symptomatic or a home or area of a home in an outbreak.

General Visitors may not visit a resident who is self-isolation and on Droplet and Contact Precautions, in a home in outbreak unless resident is in an area not affected by the outbreak, or as directed by the local PHU.

As identified throughout this policy, should the home go into an outbreak or the resident be self-isolating or symptomatic, both indoor and outdoor visits will be discontinued, except for essential visits and for general visits if the residents resides in an area of the home not affected by the outbreak.

The home will ensure equitable access to visits for all residents.

• [If co-located with LTC, the retirement home will follow the policies of the Ministry of Long-Term Care.]

3. Personal Care Service Providers

Personal Care Service Providers who are visiting or work on site as contractors are permitted to provide services in alignment with the Provincial requirements. However, if Personal Care service providers are employed by the home, these staff can continue to provide personal care services to residents.

Surveillance screening and testing requirements are the same as staff.

When providing services, Personal Care Service Providers must:

- Follow required public health and IPAC measures for Personal Care Service Providers and those of the home, including wearing a medical mask for the duration of their visit to the home, practicing hand hygiene and conducting environmental cleaning after each appointment.
- Require residents to wear a medical mask (if tolerated) during their services.
- Document all residents served and maintain the list for at least 30 days to support contact tracing.

The hairdresser must be comply with the homes COVID vaccination policy.

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- 11. Unnecessary entry into the home by visitors will be minimized.
- 12. All residents, families and visitors, support workers will be provided with the opportunity to read this visitor policy and the homes information package, including education on all required protocols (including visitor complaints process). All Essential Caregivers must review this policy, the contents of the information package prior to their first visit, then at least every 30 days and comply with the policy. 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 and Family Council, if any.
- 13. The home will have a reasonable approach that is as flexible as possible to support health and safety during visits (ie/ ensuring sufficient physical distancing can be maintained, suggesting outdoor spaces for visits).
- 14. Best practices for IPAC measures with be maintained prior to, during and after visits.

15. General visits:

- may be booked in advance, but is not required.
- will continue to complete screening and testing protocols as per the Directive for visits.
- the home may limit the number of visitors in the home however each visit can be at least 60 minutes in length and the frequency can be up to 2 visits per week (more if the home is able to accommodate)
- the home may limit visits to during specified hours

The visitor must meet only the resident who has invited them.

Tours

- 1. In Person and Virtual tours are permitted.
- 2. Prospective residents may be offered in-person, targeted tours of empty rooms. These tours must adhere to public health measures and the following precautions.

All tour participants are subject to the General Visitor screening, testing and PPE requirements outlined in the visitor policy.

The tour route must be restricted in a manner that avoids 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 charge nurse or management and the incident documented, when will the visitor/caregiver/support worker be allowed back and under what parameters.

Home Care and Personal Care Service Providers

Home Care Service Providers (services provided such as nursing care, physiotherapy, occupational therapy, social workers, etc.) are considered essential and can continue to provide care services to residents.

Personal Care Service Providers (PCSPs) who provide care services to residents (e.g., hair dressing) are permitted to resume operations if doing so is consistent with the resumption of personal care services elsewhere in the province. This will be coordinated by the home.

Home Care and Personal Care Service Providers must follow the same active screening, IPAC, PPE, masking and testing requirements and COVID vaccination policy (as applicable) that apply to long term care home staff as outlined in COVID-19 guidance.

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 Administrator or General Manager, Director of Infection Control (Sandra Honey -613-392-1289 ext 154, Corporate Operations Officer (Leslie Morrow 613-392-1289- ext 130), the Ministry of LTC Action Line - 1-866-434-0144.

Accessibility Considerations

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