

TITLE:	Visitors (COVID-19) (ON) Grey County	POLICY #:	IX-N-10.44
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CURRENT REVISION:	May 2022		

POLICY:

To ensure a safe environment for unvaccinated general visitors that follows provincially mandated protocols regarding physical distancing, this policy and procedure provides guidance for how visiting can be scheduled and facilitated across the organization’s care communities in accordance with Directive #3 issued by the Chief Medical Officer of Health. The role that families, friends, and visitors play in providing caregiving and emotional supports is important to the quality of life for long term care residents.

Long term care team members, volunteers, and placement students are not considered visitors, as their access is determined by the care community.

Attending physicians or nurse practitioners who meet the definition of long term care staff under the *Long Term Care Act, 2007* are subject to the team member COVID-19 testing guidelines (reference IX-N-10.42 Team Member Surveillance Testing COVID-19 (ON)).

Note: Visitor protocols may change across regional jurisdictions as per the Chief Medical Officer of Health’s direction and will supersede this policy requirement.

PROCEDURE:

The Executive Director or designate will:

- 1) Establish designated outdoor/indoor area(s) for visits to occur, while respecting the requirement of physical distancing.
- 2) Establish the flow of team, resident, and family movement to and from visiting area(s), ensuring minimal traffic through the location/resident home areas.
- 3) Ensure there is an outdoor/indoor space designated to greet and screen visitors prior to the visit.

The outdoor space will:

- Provide for 6 feet/2 metres physical distancing between individuals;
- Ensure privacy for the resident and family; and
- Utilize physical barrier(s) such as planter boxes, half wall, table, etc. to support facilitation of physical distancing requirements.

The indoor space will:

- Have an active screening location and process;
- Be a designated location in the care community, preferably a space close to main entrance/resident home area i.e. lounge area, multipurpose room, empty resident room. Location for designated for indoor visits to be clearly identified with signage;

- Determine if a resident room is appropriate for an indoor visit. Take into account the activities to be performed during the visits, if the resident is sharing a room, and whether isolation precautions are in place;
 - Provide for 2m/6 feet physical distancing between individuals;
 - Ensure privacy for the resident and family; and
 - Use physical barriers such as furniture spaced to meet physical distancing requirement.
- 4) Communicate with residents and families the process for indoor/outdoor visits, prioritizing emotional and/or clinical decline of residents.
 - 5) When consideration for in-room visiting, ED will consult with Clinical Specialist and IPAC Lead to conduct a risk assessment.

The Resident & Family Services Manger or designate will:

- 1) Be accountable for the process of scheduling family visits, maintenance of protocols, documentation, and auditing.
- 2) Document essential visitors who are designated as caregivers in the resident profile section of electronic health record and on the Designated Caregiver & Attestation Form.
- 3) Communicate designated caregivers and the care needs provided to the interprofessional team.
- 4) Inform the resident/SDM that the care community must be notified of any changes in who is assigned as the designated caregiver(s).
- 5) Ensure visitors are educated about physical distancing, respiratory etiquette, hand hygiene, IPAC practices, and proper use of PPE.
- 6) Ensure general visitors and designated caregivers have attested (by signing the Designated Visitor Attestation Form) prior to visiting any resident for the first time, during outbreaks and at minimum every 6 months thereafter that they have read and reread the following documents:
 - The Visitor policy
 - Public Health Ontario's document entitled Public Health Ontario's Recommended Steps: Putting on Personal Protective Equipment (PPE)
 - Watched/Re-watched the following Public Health Ontario videos:
 - i. Putting on Full Personal Protective Equipment;
 - ii. Taking off Full Personal Protective Equipment; and
 - iii. How to Hand Wash
- 7) Appoint team member(s) to conduct active screening and provide education to all visitors.
- 8) Ensure the visiting area is cleaned between visits, including cleaning and disinfection of all chairs, rails, and other surfaces.

- 9) Ensure the visit is documented in the resident's electronic health record.
- 10) Maintain all records related to the family visiting process, including all changes to designated caregiver(s).
- 11) Cancel and reschedule visits for any of the following reasons:
 - The care community is located in an area identified as having a higher community spread of COVID-19
 - The care community goes into outbreak
 - Resident is experiencing symptoms or is self-isolating
 - Inclement weather (i.e. heat wave or rain) for outdoor visits
 - Operational needs require team members to support resident care
 - Other emergencies (i.e. Code Red)
 - As directed by Public Health during an outbreak

The Nurse or designate will:

- 1) Update the resident's plan of care (profile section) with the care needs provided by the designated caregiver.

All Team Members will:

- 1) Participate in and support visiting of residents as needed.
- 2) Guide any visitor with PPE utilization as needed.
- 3) Seek support from nurse in charge and/or manager(s) to address questions and concerns, including immediate advice to support individual resident and family needs.

The Visitor will:

- 1) Contact the care community during scheduled times to arrange a date and time to visit.
- 2) Participate in the active screening process, perform hand hygiene, and don required PPE during the visit as directed by the care community.
- 3) Show proof of being fully vaccinated (2 doses) of COVID-19 vaccine to enter the care community. Those who do not show proof of vaccination or an approved medical exemption will not be permitted entry.
- 4) Unvaccinated general visitors may visit at a pre-booked indoor visiting station.
*Consideration for in-room visiting will be made upon request and will be determined by utilizing a risk assessment.
- 5) Participate in the COVID-19 testing/screening process:
 - **In non-outbreak conditions**, undergo mandatory screening for COVID-19 using a rapid antigen as per COVID-19 Guidance: Considerations for Rapid Antigen Point-of-Care Screening, at the frequencies as prescribed by the current directives.
 - **In outbreak conditions**, essential caregivers are required to provide proof of a negative COVID-19 test result at determined frequencies established by the care community/public health. Proof of the COVID-19 test will be provided during the visitor sign-in process by either showing a printout or on a mobile device showing

the individual's name. Consent will be obtained from the individual prior to showing test result and documented on the visitor sign-in sheet.

- When retesting is required for Repeated False Positives COVID-19 test results.

Note: An individual who has previously had laboratory-confirmed COVID-19 AND was cleared should generally not be re-tested before 90 days unless there are clinical indications that are determined by their physician or advised by public health. Previously positive individuals should provide proof of clearance from Public Health prior to resuming the visits.

- 6) Coordinate with the RFSM/designate and obtain approval prior to bringing any pets to the care community.
- 7) Ensure that gifts, foods, or beverages brought are only consumed by the resident that they are visiting.
- 8) Practice physical distancing with other residents whom they are not visiting and team members.
- 9) Adhere to PPE requirements.
- 10) Refrain from visiting any other resident and any other indoor spaces other than the designate washroom within the care community.

NOTE: Any non-compliance with the visitor responsibilities in this policy will result in discontinuation of the visit for the non-compliant visitor.

References:

COVID-19 Guidance Document for LTCH in Ontario, COVID-19, 2022 available at:

<https://www.ontario.ca/page/covid-19-guidance-document-long-term-care-homes-ontario>

CMOH Directive #3 available at:

https://health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/directives/LTCH_HPP_A.pdf

MOH COVID-19 Provincial Testing Guidance Update available at:

http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_testing_guidance.pdf

Attachments: IX-N-10.44(a) Visitor Information & Protocols (Website) (ON)
IX-N-10.44(b) Visitor Protocol & Surveillance Guidance Document (ON)
IX-N-10.44(c) Care Community Checklist - SAMPLE
IX-N-10.44(d) Visitor Acknowledgement Form (ON)
IX-N-10.44(f) LTC Visits Grey County
IX-N-10.44(g) Guidelines for Residents' Outings
IX-N-10.44(h) Designated Caregiver & Attestation Form (ON) SAMPLE
IX-N-10.44(i) Compassionate Entry for Travelers Into Canada (ON)