Ontario Enhancing COVID-19 Protections for Long-Term Care Residents, Families and Staff
Q&As
March 19, 2020

QUESTIONS AND ANSWERS:

1. What emergency measures are in place to help long-term care homes ensure staffing needs are being met at this time?

The Ministry of Long-Term Care and the Ministry of Health are working closely with our partners in both the long-term care sector and other health care sectors to ensure the continued safety and well-being of residents, families and staff. We have taken proactive measures, and we continue to look at all possible courses of action to limit the spread of COVID-19.

Our government has instructed long-term care homes to actively screen staff, students, volunteers, visitors, residents moving into a long-term care home and residents returning to a long-term care home.

Additionally, in order to ensure a safe and secure environment for residents, our government has recently advised long-term care homes to only allow essential visitors until further notice.

Ontario has also established a Command Table to serve as a single point of oversight providing executive leadership and strategic direction to guide the ongoing response to COVID-19. Planning around health human resources continues to be a consideration for the Command Table. As this situation evolves, the Command Table will continue to work directly with the long-term care homes and will closely monitor how resources are being impacted. Finally, as of March 9, 2020, when long-term care homes submit samples for standard respiratory testing, they will now also be tested for COVID-19 automatically to ensure the province identifies potentially unknown cases.

We are actively working with our partners at all levels in the health care system to implement enhanced measures to ensure that we are prepared to protect the health of all Ontarians.
2. How should homes handle residents who test positive for COVID-19?

If a resident tests positive for COVID-19 and they do not require acute health care, the long-term care home should instruct the resident to wear a procedure mask (if tolerated) and place them in a single room to wait for further assessment. In addition, the home should check the Public Health website for the most current instructions.


These instructions may include:

- Restricting the resident to their room
- Using infection control measures if the resident must leave their room such as providing a mask, ensuring hand hygiene, etc.
- Restricting the resident to their unit if the whole unit is in outbreak
- Cancelling non-urgent medical appointments

3. What are the current visitor restrictions to long-term care homes?

In order to ensure a safe and secure environment for residents, our government has recently advised long-term care homes to only allow essential visitors until further notice.

Essential visitors are people visiting residents who are very ill or require end-of-life care. No other visitors will be permitted to enter and are asked to keep in touch with loved ones by phone or other technologies, as available.

In the case of residents who are very ill or require end-of-life care, visitors that pass screening will be allowed to enter and will be instructed by staff on the appropriate use of personal protective equipment to ensure safe visitation.

4. For how long will these restrictions be in place?

At this time, homes can expect the restrictions to be in place until further notice. The Ministry of Health is monitoring the situation closely and will re-evaluate in the coming weeks and will ensure consistency with other public health measures in effect.
Until instructed otherwise, homes should continue to restrict non-essential visits and to actively screen essential visitors, staff, students, volunteers, resident admissions, resident re-admissions and returning residents.

5. **How will people know that long-term care homes are restricting visitors?**

Long-term care homes should ensure that there is signage printed and posted at all entrances of their building. Homes should also ensure that no one can enter the premises without being screened by staff. Homes should also be advising residents of this new policy so that they may advise their loved ones.

The Family Councils of Ontario and the Ontario Association of Residents’ Councils has also communicated the visitor restrictions via their communication channels.

6. **How do you define “very ill or end-of-life”?**

It is up to the discretion of the physicians and clinical staff to determine whether or not a resident is very ill or near end-of-life. In general, these residents often have a serious life limiting or end-stage disease/illness, are in an advanced state of decline in their medical condition or capability and are approaching a period of time that is closer to/near death.

7. **What about activities outside the home? Is there guidance on whether or not residents should partake in these kinds of activities?**

As long-term care residents are potentially more vulnerable to diseases like COVID-19, we would advise limiting activities to those that could be scheduled within the home.

8. **What about activities in the home, like Adult Day Programs, or other community events?**

At this time, those entering for these programs would not be considered “essential visitors” and will be temporarily suspended while the visitor restriction is in place.
9. Are external (or non-medical) service providers classified as visitors? For example, massage therapists, hair dressers, exercise instructors, entertainers, or guest speakers.

In cases where external visitors are entering the home to provide a service to residents, the long-term care home must decide if the service is essential to the resident(s) or to the operation of the home. If so, they should follow the outlined active screening procedure. If not, they should not visit the home until visitor restrictions are lifted.

10. How strictly must homes adhere to the active screening guidelines provided by the Ministry of Health?

Active screening guidelines provided by the Ministry of Health are a minimum requirement. Failing to screen visitors is NOT an option, and those who fail the screening test will not be admitted.

While all homes are expected to follow the guidelines, they may choose to employ additional screening measures, such as temperature checks, if they wish.

11. What kind of resources do long-term care homes have to support residents' emotional/mental health during increased isolation?

Long-term care homes are required to ensure a plan of care is developed for each resident with respect to all their needs including psychological well-being. Long-term care homes are also required to have a robust Infection Prevention and Control program and Emergency plans that would address special circumstances and caring for residents in these cases. During times of increased isolation, long-term care homes are still required to ensure there is a plan of care for each resident.

12. What kind of phone or electronic options are in place for residents to communicate with their families given these restrictions?

While equipment use and availability is individual to each home, we encourage all homes to make communication between residents and their
loved ones available.

Some homes currently use electronic options for communication. Please check regularly with the long-term care home on electronic communication options.

In addition, homes are required to have procedures developed and implemented for cleaning and disinfecting supplies and devices, including personal assistive service devices and assistive aids in accordance with manufacturer’s specifications.

13. Many of our residents are unable to use a device on their own. How should homes facilitate electronic or phone discussion with residents?

Long-term care homes assist residents with their activities of daily living, including the use of a phone for calling loved ones or using assistive devices for communication.

14. How do we ensure any electronic devices remain sanitary for use in a long-term care home?

Homes are required to have procedures developed and implemented for cleaning and disinfecting supplies and devices, including personal assistive service devices and assistive aids in accordance with manufacturer’s specifications.

Any electronic communications technology used by the home should be cleanable and compatible with the health care setting’s cleaning and disinfection products.

For more details, please see section 1.2.2.3 Electronic Equipment on page 25 of this document:

15. Are there specific guidelines related to cleaning and disinfecting procedures that long-term care homes should follow to decrease the transmission of COVID-19?

Homes should be aware that proper cleaning and disinfection is critical to prevent environmental transmission of COVID-19. Long-term care homes can access the ministry’s outbreak guide “Control of Respiratory Infection Outbreaks in Long-Term Care Homes, 2018” for further information.

Additional information can be found in Public Health Ontario’s guide “Best Practices for Environmental Cleaning for Prevention and Control of Infections in All Health Care Settings”.

16. What additional steps are being taken to safeguard long-term care homes against COVID-19?

Employees, agency staff, contract staff, vendors, volunteers, essential visitors, residents moving into a long-term care home and residents returning to a long-term care home will also be proactively checked for symptoms and asked about recent travel history and contacts.

Recommended screening questions include:

- Do you have any of the following symptoms: fever/feverish, new or existing cough and difficulty breathing?
- Have you traveled internationally within the last 14 days (outside Canada)?
- Have you had close contact with a confirmed or probable COVID-19 case?
- Have you had close contact with a person with acute respiratory illness who has been outside Canada in the last 14 days?

If the individual answers YES to any of the screening questions, they have failed the screening and cannot enter the building and will be asked to contact their local public health unit or Telehealth Ontario for further instructions.
As of March 9, 2020, when long-term care homes submit samples for standard respiratory testing, they will also be tested for COVID-19 automatically to ensure the province identifies potentially unknown cases.

17. **In addition to screening practices, what other preventative measures are long-term care homes using to keep residents, staff and visitors safe?**

In addition to screening, long-term care homes should follow the guidance for [respiratory outbreak](https://example.com) and [COVID-19](https://example.com) prevention from the Ministry of Health. This includes prevention activities such as:

a. Posting signage advising long-term care homes to only allow essential visitors until further notice. Essential visitors are people visiting residents who are very ill or require end-of-life care.

b. Ensuring resident and visitor signage on hand hygiene and cough etiquette is posted and that there is availability and accessibility of hand hygiene throughout the facility.

c. Keeping staff and residents informed on COVID-19.

d. Reminding staff to be [monitoring themselves for illness](https://example.com) and to stay at home when they are sick.

e. Developing policies for managing staff who may have been exposed to a case of COVID-19 and developing staff coverage plans.

f. Monitoring residents for new respiratory symptoms or fever. Samples for standard respiratory testing will also be tested for COVID-19.

h. Ensuring signage is clear and that personal protective equipment (gowns, gloves, masks and eye protection) for health care workers are available and accessible for care of patients with acute respiratory illness.

i. Reporting any suspected COVID-19 illness in residents or staff to the local public health unit.

18. **How do you screen long-term care home residents for COVID-19?**

The government is instructing long-term care homes to screen all residents moving into a long-term care home and residents returning to a long-term care home. Anyone who fails any part of the screening process will not be re-admitted.
Long-term care homes must consult with public health and the resident’s primary care provider if residents exhibit symptoms of, have had exposure to or if there has been confirmation of transmission of COVID-19, in order to determine any additional public health or clinical actions.

As of March 9, 2020, when homes submit specimens for standard respiratory testing, these specimens will also be tested for COVID-19 automatically. There is no change to the usual practices for submitting respiratory outbreak specimens.

19. If there are additional costs incurred from screening, will the home be reimbursed?

The Ontario government recently announced additional funding to support frontline workers, purchase more protective gear and resources to clean more frequently. For the long-term care sector, specifically, funding will provide immediate relief to fund the extraordinary costs related to the rapid response required to prevent and contain the spread of COVID-19. This will support long-term care homes in preventing new infections, containing the spread of any existing infections, and responding to staffing challenges.

As this situation evolves, the Command Table will continue to work directly with the long-term care homes and will closely monitor how resources are being impacted.

20. What are the specifics of Ontario's new enhanced response structure to COVID-19?

Ontario has implemented an enhanced response structure that formally brings together a wide range of partners to review, strengthen and implement provincial and regional plans and ensure their responsiveness to the specifics of COVID-19.

The new response structure comprises a number of tables with specific mandates:
A new **Command Table** to serve as a single point of oversight providing executive leadership and strategic direction to guide the ongoing response to this new virus.

**Collaboration Tables**, where stakeholders from the health care sector and long-term care sector have the opportunity to provide valuable advice.

**Five regional planning and implementation tables**, led by Ontario Health with support from local public health units, are responsible for reviewing regional plans to proactively ensure local readiness and implement provincial strategies in areas such as assessment, testing and care, supplies and equipment, surveillance and communications.

The **Ministry of Health's Emergency Operations Centre**, also known as MEOC, continues to provide situational awareness and perform an overall coordination function among the components of the response structure.

**A Scientific Table**, led by Public Health Ontario, supports the provincial and regional components of the response structure with the provision of evidence, and scientific and technical advice to inform planning and response.

**An Ethics Table**, led by the University of Toronto Joint Centre for Bioethics, assists in providing ethical guidance and representation at both provincial and regional tables to support decision-making throughout the response.

**Sector or Issues Specific Tables**, which would have a specific focus like supporting the coordination of repatriated Canadians or local case and contact management as well as sector-specific coordination such as paramedic services, Indigenous health partners and others as needed.
21. **What resources are available for the public to learn about the latest coronavirus information?**

For credible information on how to protect yourself, what to do if you’re sick after you travel and how to recognize possible symptoms check out ontario.ca/coronavirus.ca.

The dedicated webpage is updated twice a day (at 10:30 a.m. and 5:30 p.m. ET) and has information available in multiple languages.

The Family Councils of Ontario and the Ontario Association of Residents’ Councils are also actively supporting communication related to the latest information. This can be accessed on their designated COVID-19 webpage.

22. **What resources are available for the health sector to learn about the latest coronavirus information?**

If you are a health care professional, learn how to protect yourself and your patients by reading our guidance documents and learning about:

a. screening  
b. laboratory testing  
c. treatment recommendations  
d. occupational health & safety and infection prevention & control measures

The Public Health Ontario website also provides regularly updated statistics on cases in Ontario and other COVID-19 resource material. Public Health Ontario also has guidelines on how to self-isolate and self-monitor.

23. **What can a long-term care home do if there is a staff member who recently travelled outside of Canada?**

Health care workers who have travelled outside of Canada are to self-isolate for 14 days after returning from their travels, before going back to work. Public Health Ontario also has guidelines on how to self-isolate and self-monitor.
24. Will the ministry provide direction on staff working in multiple facilities?

Additional questions about the containment strategies and next steps should be directed to the local health unit.

25. Who should homes contact to discuss their PPE needs?

Homes can contact the EOCLogistics.MOH@ontario.ca email address and they will do their best to help support these requests.

26. Where can long-term care homes or health care providers direct questions or concerns?

A hotline is in place to assist health care providers with their questions and concerns as well as a one-window email address for the Ministry of Health’s Emergency Operations Centre. Health system partners should contact the Health System Emergency Management Branch at 1-866-212-2272 or eocoperations.moh@ontario.ca.

27. Where can family members or other concerned members of the public direct questions?

These calls can be directed to the existing Long-Term Care Action Line at 1-866-434-0144.