



Regional Municipality of Durham
 Social Services Department
 Long Term Care (LTC) and Services for Seniors

Title: Visitation to Long-Term Care Home during a Pandemic	
Policy #: PAN-09-03	
Original: June 15, 2020	
Revised: July 17/20, July 27/20, Sept 8, 2020, Oct 7, 2020, Oct 30, 2020, Nov 16, 2020, Nov 23, 2020, Feb/2021, Mar/2021, May/2021, June9/ 2021, July 7/21, Jan 4/22	
Peer Group Approval:021	Date:
Also reviewed by:	
Senior Leadership Approval: <i>Laura MacDermaid</i>	Date Effective: January 6, 2022

1. Policy

The Region of Durham Long Term Care homes will provide an organized process to allow for safe and secure visits to our homes. Region of Durham Homes will follow the visitor requirements outlined in Chief Medical Officer of Health's Directive #3.

General Visitors, regardless of vaccination status, will not be permitted in the home or to come for outdoor visits. General visitors will continue to be permitted to enter the home to visit residents receiving end of life care.

There will be a maximum of 2 Essential Visitors per resident per day in the home.

Background

Rules for visitors will vary based on direction from the Ministry of Long-Term Care.

Additionally, the Durham Region Health unit may provide direction and/or restrictions on visitors to the home, when in outbreak and depending on the specific situation.

June 9, 2021 – Directive 3 was further revised to expand upon Absences and Visitors to LTCH.

June 29, 2021 – Directive 3 was further revised to expand upon Absences and Visitors to LTCH.

December 17, 2021 – Minister’s directive was updated to include revisions to the visitor policy.

December 28, 2021 – Minister’s directive was updated to include revisions to the visitor policy.

2. Purpose

To ensure there is a safe and organized process for those who visit residents in the Region of Durham Long Term Care Homes.

To provide meaningful, equitable, flexible, and safe access to visits for all residents to support their emotional wellbeing.

3. Definitions

3.1. General Visitor

A person who is not an essential visitor and is visiting:

- To provide non-essential services, who may or may not be hired by the home or the resident and /or the Substitute Decision Maker (SDM)
- For social reasons that the resident or the substitute decision maker assess as different from direct care, including care related to cognitive stimulation and meaningful connection

3.2. Essential Visitor

Must meet the definition outlined in Directive #3

A person performing essential support services (e.g., inspector, external health service providers, contractors.)

Essential Visitors are divided into:

3.2.1. Support Worker:

A visitor who is performing an essential support service for the resident or the home. E.g., Physicians, footcare. They cannot be staff of the LTC home as defined in the LTCHA. Support workers are regulated and unregulated.

3.2.2. Essential Caregiver

Someone who is designated by the resident and/or their SDM and is visiting to provide direct care to the resident (e.g., supporting feeding, mobility, cognitive stimulation, communication, and assistance in decision-making).

3.2.3. **Other Essential Visitors**

Government Inspectors and those visiting very ill or palliative residents.

3.3. **Non-Visitor**

Long-Term Care home staff, volunteers and placement students are not considered visitors. Access to the home will be determined by the Long-Term Care and Services for Seniors division.

4. **Visiting Procedures for General Visitors**

- 4.1. No general visitors are permitted to visit in any of the following situations:
 - 4.1.1. As per direction set out by the Ministry of Long-Term Care or Durham Public Health.
 - 4.1.2. The entire home has an outbreak.
 - 4.1.3. The resident is self-isolating or symptomatic.
 - 4.1.4. The local public health unit is lockdown.
- 4.2. General visitors (when applicable) will be provided with information on Infection Control Practices.
- 4.3. General Visitors (when applicable) will be directed to the screening area. The home will keep a list of those people who have visited each day, as applicable.
- 4.4. General Visitors (when applicable) will pass the active screening protocol administered by home staff.
 - 4.4.1. General visitors (when applicable) will be required to undergo the current surveillance and testing requirement
- 4.5. General visitors (when applicable) will wear face coverings/masks at all times as outlined.
 - 4.5.1. Indoor visitors will be provided with a surgical/procedure mask to wear in the home.

- 4.6. The Resident will be encouraged to wear a mask provided by the home if tolerated, when in common areas.
- 4.7. Homes will maintain a visitor log which must be kept for 30 days.

5. Visiting Procedures: for Essential Visitors

General Procedures for all Essential Visitors

- 5.1. Essential visitors must be 18 years or over,
- 5.2. Essential visitors will be required to follow the requirements outlined in the immunization policy. (see PAN-09-09 Management of COVID-19 immunization.
- 5.3. Government inspectors (MLTC, MOL) must be actively screened and are not to be admitted to the home if they do not pass the screening.
- 5.4. Visitors coming to see a Palliative/End of Life Resident must be actively screened and are not required to follow the required surveillance and testing requirement in the home.
- 5.5. Any visitor who has previously tested positive may resume visits when cleared by Durham Region Health Department and is asymptomatic.
- 5.6. The home is responsible for providing medical /procedure masks, gloves, gowns, and eye protection (as applicable). If a visitor is unable to wear the required PPE, the visitor should not be permitted to have close physical contact (less than two metres) to the resident if the visitor and/or the resident are not fully vaccinated.
- 5.7. The home should not restrict physical touch (for example, hugging, holding hands) between caregivers who are fully immunized and residents who are fully immunized, provided appropriate IPAC control measures, like masking, eye protection, and hand hygiene are in place.
- 5.8. Essential visits do not need to be scheduled. The length or the frequency of visit will not be scheduled.

General Procedures for Essential Caregivers

- 5.9. All Essential Caregivers must be registered with the home.
- 5.10. The home will follow the COVID response guidance regarding the number of essential caregivers as follows:

- A maximum of 2 essential caregivers per resident per day may visit at a time.
 - If the home is in outbreak or at the direction of the MOLTC or PH, a maximum of 1 essential caregiver per resident per day may visit at a time.
- 5.11. Screening requirements for Essential Caregivers is outlined in the divisional policy PAN-09-06 Screening and Surveillance Testing.
- 5.12. EC will be provided with a medical/procedure mask to wear in the home.
- 5.13. Caregivers need to verbally attest to the home that they have not visited another resident who is self-isolating or symptomatic or gone to LTC home in outbreak in the last 14 days.
- 5.14. The location of Essential Caregiver visits will be determined by the home following MOLTC directives and public health guidance.

General Procedures for Other Essential Visitors (Support Workers, Contractors) and those visiting Palliative Residents)

- 5.15. Screening/surveillance for regulated and unregulated support workers is outlined in the divisional policy PAN -09-06 Screening and Surveillance Testing.
- 5.16. Support Workers and those visiting Resident at end of life required to read and verbally attest to the Visiting Policy or review the IPAC training.
- 5.17. Support Workers, Contractors need to verbally attest to the home that they have not visited another LTC home in outbreak in the last 14 days without proper PPE.

6. Outdoor visits

- 6.1. Outdoor visits will be paused at this time.

7. Non-Compliance with Visitor Guidelines (See appendix A)

- 7.1. Staff will refer any visitor who does not comply with the visit guidelines to a manager/supervisor and follow the process outlined.
- 7.2. The manager/supervisor will ask the general or essential visitor to read the policy, MOLTC guidance document and supporting information.
- 7.3. Assist the visitor to understand the importance of complying with the visiting guidelines

- 7.4. Visitors who do not comply with the screening and/or surveillance requirements will not be permitted into the home.
- 7.5. If a visit has had to be discontinued, ensure a letter is issued to back up this decision.
- 7.6. If a visitor has been temporarily prohibited from visiting, clearly identify the reasons why and identify the requirements that the visitor would have to meet for visits to be resumed.
- 7.7. Screeners must be provided with an updated list of any visitors who have been suspended from the home.

8. Roles and Responsibilities

8.1. **Nursing will:**

- 8.1.1. Ensure that residents who are having meals in their rooms with Essential Caregivers are adequately supervised. Caregivers are not permitted to remove their masks during the visit and therefore, are not permitted to eat or drink during the visit.
- 8.1.2. Follow the outlined process for visitor noncompliance (see appendix A)

8.2. **Infection Prevention and Control Practitioner (IPAC) will:**

- 8.2.1. Ensure the IPAC training is organized and available for all visitors.

8.3. **Surveillance Supervisor/designate will ensure screeners**

- 8.3.1. Have a list of Essential Caregivers
- 8.3.2. Maintain a daily list of General visitors (if applicable).
- 8.3.3. Ensure each visitor answers the questions outlined on the screening form.
- 8.3.4. Ensure that each visitor have access to information on Infection Prevention and Control.
- 8.3.5. Maintain an accurate contact record of visitors as per home process.
- 8.3.6. Ensure that each visitor hand sanitizes before and after each visit.

8.3.7. Ensure that the visitor is provided with a medical/procedure mask for indoor visits.

8.3.8. Have an updated list of any visitors who are not permitted in the home due to noncompliance.

8.4. Environmental Services will:

8.4.1. Ensure there is enough hand sanitizer, disinfectant available in the indoor visiting area. (if applicable)

8.4.2. Provide guidance to other staff on the method of cleaning following visits.

8.4.3. Ensure the designated public indoor washrooms have an enhanced cleaning schedule.

8.5. Director of Care/designate will:

8.5.1. Review issues of noncompliance for visitors and determine outcome as per the process in Appendix A

8.6. Administrator (designate) will:

8.6.1. Ensure that visits are following the outlined rules.

8.6.2. Ensure that staff are following the noncompliance process and non-adherence to the rules will be the basis for discontinuation of visits.

9. References

- [Update to COVID-19 guidance on visiting Long Term Care homes, December 30, 2021.](#)
- [Update to Visitor policy, July 7, 2021](#)
- [Ministers Directive -3 Update May 22, June 3, 2021](#)
- [Ministers Directive – 3 Update, May 4, 2021](#)
- [Ministers Directive – COVID-19 Long Term Care Home Surveillance Testing and Access to Homes – March 15, 2021](#)
- [Ministers Directive – COVID-19 Long Term Care Home Surveillance Testing and Access to Homes – February 16, 2021](#)
- PAN-09-06 Surveillance Testing
- PAN-09-09 Management of COVID -19 Immunization

Visitor Compliance Escalation Process

February 24, 2021

