



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	
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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, May17/2021, May 21,2021	
Peer Group Approval:	Date:
Also reviewed by:	
Senior Leadership Approval: <i>Mike MacDonald</i>	Date Effective: May 21, 2021

1. Policy

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

Background

Effective November 3, 2020 Homes will follow the "The COVID-19 Response Framework: Keeping Ontario Safe and Open" which categorizes public health regions into five levels: Green-Prevent, Yellow-Protect, Orange-Restrict, Red-Control, and Grey - Lockdown being a measure of last and urgent resort. Rules for visitors will vary based on the level of the local public health unit region in which the home is located. Additionally, the Durham public health unit may provide direction and/or restrictions on visitors to the home, when in outbreak and depending on the specific situation.

On March 18, outdoor visits on the grounds of the LTC with registered essential caregivers can resume. Please see section 6 for more details. The Administrator/designate can make exceptions to this on a case by case basis in consultation with the management team.

On May 5, 2021 – Directive 3 outlined expanded resident absences off the property (see PAN-09-05 Resident Absences).

On May 22, 2021, the Chief Medical Officer of Health and the Ministry of Long-term Care have updated requirements and policies to permit families and friends (i.e., “general visitors”) to visit long-term care home residents outdoors. Each resident may have up to two general visitors at time. Two Essential caregivers may also be present during these visits.

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 outdoors:

- 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, or a person visiting a very ill or palliative resident.)

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 General Visitors are only allowed for outdoor visits

4.2 Homes will ensure there is space allocated for outdoor general visits.

4.3 There will be a process in each home for booking general visits.

4.4 No general visitors are permitted to visit indoors and may not use any of the home facilities during the visit.

4.5 A maximum of 2 general visitors per resident may visit outdoors at a time, subject to direction from the local public health unit, provided:

4.5.1 The home is not in an outbreak.

4.5.2 The resident is not self-isolating or symptomatic.

4.6 General visitors will be provided with information on Infection Prevention and Control practices.

4.7 General Visitors will go to the screening area. The home will keep a list of those people who have visited each day.

4.8 General Visitors will pass the active screening protocol administered by home staff.

4.9 General visitors will not be required undergo current surveillance and testing requirements in the home.

4.10 General visitors will wear face coverings/masks which covers their nose, mouth, and chin at all times.

4.11 General visitors must maintain two meters physical distance from residents, regardless of immunization status.

4.12 General Visitors or palliative visitors younger than 14 years of age should be accompanied by an adult and follow all applicable infection prevention and control (IPAC) precautions.

4.13 Visitors will be asked to arrive no more than 5 minutes before the designated visit time.

- 4.14 The Resident will be encouraged to wear a mask provided by the home if tolerated, when in common areas.
- 4.15 There will be no pet visits.
- 4.16 Homes will maintain a visitor log which must be kept for 30 days
- 4.17 Children under the age of 2 do not count toward the total number of general visitors and are not required to wear mask/face coverings.

5. Visiting Procedures: for Essential Visitors

General Procedures for all Essential Visitors

- 5.1 Essential visitors must be 18 years or over,
- 5.2 Registered essential caregivers must undergo screening and surveillance testing in accordance with divisional policy PAN-09-6 Screening and Surveillance Testing and receive negative results before they have contact with the residents/staff in the home.,
- 5.3 Essential Visitors will be given a visitor badge which identifies them as an approved visitor.
- 5.4 Government inspectors (MOLTC, MOL) must be actively screened and are not to be admitted to the home if they do not pass the screening. Inspectors will be expected to keep an official record of all COVID-19 test results and are not subject to the surveillance requirements.
- 5.5 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.
- 5.6 Any visitor who has previously tested positive may resume visits when cleared by Durham Health Department and is asymptomatic.
- 5.7 The home is responsible for providing surgical /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.
- 5.8 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.

- 5.9 Essential visits do not need to be scheduled. The length or the frequency of visit will not be scheduled.

General Procedures for Essential Caregivers

- 5.10 **All Essential Caregivers must be registered with the home.**
- 5.11 The home will follow the COVID response guidance regarding the number of essential caregivers as follows:
- Not in outbreak & Durham public health unit is in Green - Prevent or Yellow - a maximum of 2 essential caregivers per resident may visit at a time.
 - If Durham public health unit is in Orange – Restrict or Red – Control or Grey – Lockdown (stay at home order) or the home is in outbreak, a maximum of 1 essential caregiver per resident may visit at a time.
- 5.12 **When the home is in outbreak, only 1 essential caregiver is permitted at a time.**
- 5.13 Prior to visiting any resident for the first time after the policy approval date is and at least once every month thereafter, Essential Caregivers will be asked to verbally attest to reading this policy
- 5.14 Screening requirements for Essential Caregivers is outlined in the divisional policy PAN-09-06 Screening and Surveillance Testing.
- 5.15 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.
- 5.16 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

- 5.17 Screening/surveillance for regulated and unregulated support workers is outline in the divisional policy PAN -09-06 Screening and Surveillance Testing.
- 5.18 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.
- 5.19 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. Non-Compliance with Visitor Guidelines (See appendix A)

- 6.1 Staff will refer any visitor who does not comply with the visit guidelines to a manager/supervisor and follow the process outlined.
- 6.2 The manager/supervisor will ask the general or essential visitor to read the policy, MOLTC guidance document and supporting information.
- 6.3 Assist the visitor to understand the importance of complying with the visiting guidelines
- 6.4 Visitors who do not comply with the screening and/or surveillance requirements will not be permitted into the home.
- 6.5 If a visit has had to be discontinued, ensure a letter is issued to back up this decision.
- 6.6 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.
- 6.7 Screeners must be provided with an updated list of any visitors who have been suspended from the home.

7. Roles and Responsibilities

7.1 Nursing will:

- 7.1.1 Ensure that the resident is ready for the visit, dressed appropriately.
- 7.1.2 Ensure that residents who are having meals in their rooms with Essential Caregivers are adequately supervised.
- 7.1.3. Follow the outlined process for visitor noncompliance (see appendix A)

7.2 Reception/Recreation/designate

- 7.2.1 Oversee the organization of the general outdoor visits to the home This includes the scheduling, monitoring of visits as well as evaluating the process.
- 7.2.2 Ensure any items brought to the resident are taken to be sanitized as per the home process.

7.3 Infection Control Practitioner will:

- 7.3.1 Ensure the IPAC training is organized and available for the Essential Caregivers.

7.4 Screeners/designate will:

- 7.4.1 Have a list of Essential Caregivers

7.4.2 Ensure each visitor answers the questions outlined on the screening form and has their temperature taken before and after each visit.

7.4.3 Ensure that only Essential Caregivers who are following the outlined surveillance process are permitted in the building.

7.4.4 Ensure that each visitor is given information on Infection Prevention and Control.

7.4.5 Ensure Essential Caregivers complete the education and is given the policy and information sheet and completes a sign off

7.4.6 Maintain an accurate contact record of general outdoor and essential visitors as per home process.

7.4.7 Ensure that each visitor hand sanitizes before and after each visit.

7.4.8 Ensure that the visitor is provided with a surgical/procedure mask for indoor visits.

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

7.5 Environmental Services will:

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

7.5.2 Ensure that any items brought to the resident are sanitized.

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

7.5.4 Ensure the designated indoor washroom has an enhanced cleaning schedule.

7.6 Director of Care/designate will:

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

7.7 Administrator (designate) will:

7.7.1 Ensure that visits are following the outlined rules.

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

7. References

- [Ministers Directive – 3 Update May 21, 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
- Directive#3 for Long-Term Care Homes under the Long-term Care Homes Act, 2007 issued Dec 7, 2020,
- COVID-19 Response Framework: Keeping Ontario Safety and Open, Nov 3
- Ministry of Long-Term Care, update to visits at Long-Term Care homes, Nov 16
- Ministry of Long-Term Care, Update to Visits at Long Term Care Homes, Sept 2
- Ministry of Long-Term Care, Update to Visits at Long Term Care Homes, July 15, 2020
- Ministry of Long-Term Care, Resuming Visits to Long Term Care, June 11,2020

Visitor Compliance Escalation Process

February 24, 2021

