



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	
Peer Group Approval:	Date:
Also reviewed by:	
Senior Leadership Approval: <i>Laura MacDermaid</i>	Date Effective: Nov 23, 2020

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. The home will maintain a list of visitors. The home has a role to ensure that the guidelines for visitors are adhered to.

Effective November 2, 2020 outdoor visits will be discontinued. The Administrator can make exceptions to this on a case by case basis in consultation with the management team.

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.

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

Essential Visitors are divided into:

3.2.1 Essential Support Worker:

A visitor who is performing an essential support service for the resident or the home. E.g. Physicians, footcare. They can not be staff of the LTC home as defined in the LTCHA.

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 Caregivers

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 If the Home is in suspected outbreak, all general visits will be temporarily cancelled.
- 4.2 Indoor general visits will be scheduled in advance as per the homes process.
- 4.3 A maximum of 2 general visitors per resident may visit at a time, subject to direction from the local public health unit, provided:
 - 4.3.1 The resident is not self-isolating or symptomatic; and,
 - 4.3.2 The home is not in an outbreak; and,
 - 4.4.3 The local public health unit is in the Green-Prevent or Yellow-Protect level
- 4.4 No general visitors are permitted to visit in any of the following situations:
 - 4.3.1 The home has an outbreak.
 - 4.3.2 The resident is self-isolating or symptomatic.
 - 4.3.3 The local public health unit is in the Orange-Restrict, Red-Control or Grey Lockdown level.
- 4.5 Prior to visiting any resident for the first time after this policy is released and at least once every month thereafter, general visitors will be asked to verbally attest to reading this policy.
- 4.6 General visitors will be provided with information on Infection prevention and control and other operational procedures regarding visiting.
- 4.7 General Visitors will be directed to a visitor check-in/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.
 - 4.8.1 Indoor General Visitor screening includes answering questions, temperature check and providing proof to the home that they have tested negative for COVID-19 within the previous two weeks and no subsequently tested positive. Screening will also include attesting to not visiting a LTC home which is in outbreak or a resident who is self-isolating/symptomatic within the last 14 days
- 4.9 General visitors will wear face coverings/masks at all times as outlined.

- 4.9.1 Indoor visitors will be provided with a surgical/procedure mask to wear in the home.
- 4.10 General Visitors younger than 14 years of age should be accompanied by an adult and follow all applicable infection prevention and control (IPAC) precautions.
- 4.11 Visits will take place in designated areas (set up unique to each home and physical distancing barriers and location will be determined. In determining the location of the visits, the home should consider staffing capacity and space availability.
- 4.12 Visitors will be asked to arrive no more than 5 minutes before the designated visit time.
- 4.13 Although the home is not required to supervise the visit, monitoring may be needed order to ensure the safety and wellbeing of residents.
- 4.14 Visitors will be directed to a visitor check-in/screening area. The home will keep a list of those people who have visited each day.
- 4.15 The visitor will be brought to the resident visiting area.
- 4.16 The Resident will not need to wear a mask
- 4.17 There will be no pet visits.
- 4.18 Based on the operational need, the home may have to limit the visit to the designated time organized by Recreation/Therapy/ Designate.
- 4.19 Ensure that if they need to cancel the visit, they contact Recreation/Therapy/designate as early as possible.

5. Visiting Procedures: for Essential Visitors

General Procedures for all Essential Visitors

- 5.1 Essential visitors must be 18 years or over.
- 5.2 Visitors will be directed to a Visitor check-in/screening area. The home will keep a list of Essential visitors who came to the home each day.
- 5.3 Essential Visitors will be given a visitor badge which identifies them as an approved visitor.
- 5.4 If a support worker requires immediate access to the home in an emergency situation, the home does not need to ask for a verbal attestation of COVID-19 test result.

- 5.5 Government inspectors must be actively screened including temperature checks and are not to be admitted to the home if they do not pass the screening. Government inspectors do not need to attest to a COVID-19 test result in the last 14 days.
- 5.6 Essential visitors coming to see a Palliative/End of Life Resident must be actively screened including temperature checks and are not required to attest to a negative COVID-19 test result.
- 5.7 Any visitor who has previously tested positive may resume visits when cleared by Durham Health Department. 14 days provided and asymptomatic.
- 5.8 Visits for essential visitors are subject to the COVID response framework and direction from Durham Public Health Unit
- 5.9 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.

General Procedures for Essential Caregivers

- 5.10 When the home is not in outbreak, the number of essential caregivers will follow the COVID response guidance
 - 5.10.1 If Durham public health unit is in Green - Prevent or Yellow - Protect and the home is not in an outbreak, a maximum of 2 essential caregivers per resident may visit at a time.
 - 5.10.2 If Durham public health unit is in Orange – Restrict or Red – Control or Grey – Lockdown or the home is in outbreak, a maximum of 1 essential caregiver per resident may visit at a time.
- 5.11 When the home is in outbreak, only 1 essential caregiver is permitted at a time.
- 5.12 Screening requirements for Essential Caregivers are as follows
 - 5.12.1 If Durham public health unit is in Green-Prevent or Yellow – Protect, screening consists of answering questions, having a temperature check and providing proof of a negative COVID-19 test within 14 days with no subsequent positive tests.
 - 5.12.2 If Durham Public Health unit is in Orange – Restrict, Red – Control or Grey-Lockdown screening consists of answering questions, having a temperature check and providing proof of a negative COVID-19 test within 7 days with no subsequent positive tests.

- 5.10 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 without proper PPE.
- 5.11 Prior to visiting any resident for the first time after this policy is released, and at least once every month thereafter, essential caregivers must verbally attest that they have read the home visitor policy
- 5.12 Prior to visiting any resident for the first time and at least every month thereafter, the home will be providing training to essential caregivers that addresses how to safely provide direct care, including “donning and doffing PPE and proper hand sanitization procedures.
- 5.13 Essential Caregiver visits do not need to be scheduled. The length or the frequency of visit will not be scheduled.
- 5.14 It is up to the discretion of the home to decide where Essential Caregiver visits will take place as long as proper social distancing can be maintained.
- 5.15 Although the home is not required to supervise the visit, monitoring may be needed order to ensure the safety and wellbeing of residents.

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

- 5.16 Screening for direct care support workers is as follows:
 - 5.16.1 If Durham public health unit is in Green-Prevent or Yellow – Protect, screening consists of answering questions, having a temperature check and providing proof of a negative COVID-19 test within 14 days with no subsequent positive tests.
 - 5.16.2 If Durham Public Health unit is in Orange – Restrict, Red – Control or Grey-Lockdown screening consists of answering questions, having a temperature check and providing proof of a negative COVID-19 test within 7 days with no subsequent positive tests.
- 5.17 Screening for support workers not providing direct care to residents consists of answering questions, having a temperature check and providing attestation of a negative COVID-19 test within 14 days with no subsequent positive tests.
- 5.18 Support Workers and those visiting Palliative care residents are not required to read and verbally attest to the Visiting Policy or review the IPAC training.

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 Discuss with the visitor that noncompliance may result in discontinuation of visits.
- 6.5 Ensure that the visitor has had enough time to adhere to the guidelines.
- 6.6 If a visit has had to be discontinued, ensure a letter is issued to back up this decision.
- 6.7 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 in order for visits to be resumed.
- 6.8 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 any requests for general visits are forwarded to Recreation/therapy (designate).
- 7.1.2 Ensure that the resident is ready for the visit, dressed appropriately.
- 7.1.3 Ensure that residents who are having meals in their rooms with Essential Caregivers are adequately supervised.
- 7.1.4 Follow the outlined process for visitor noncompliance (see appendix A)

7.2 Recreation and Therapy Team (designate) will:

- 7.2.1 Oversee the organization of the general indoor visits to the home. This includes the scheduling, monitoring of visits as well as evaluating the process.
- 7.2.2 Ensure the visiting areas are cleaned thoroughly following visits.
- 7.2.3 Ensure the resident is returned to the home area following a visit if the visit is off the RHA.
- 7.2.4 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 Has the schedule of general visitors for each day.

7.4.2 Has a list of Essential Caregivers

7.4.3 Understand the differences in screening requirements for each type of visitor.

7.4.4 Ensure each visitor answers the questions outlined on the screening form.

7.4.5 Ensures that each visitor has provided proof of a negative result for a COVID test completed according to the zone colour from the "COVID-19 Response Framework: Keeping Ontario Safe and Open" which categorizes public health regions into five levels.

7.4.6 Ensures that each indoor visitor is given information on Infection Prevention and Control.

7.4.7 Ensure Essential Caregiver complete the education and is given the policy and information sheet and completes a sign off

7.4.8 Maintains an accurate contact record of visitors as per home process.

7.4.9 Ensures that each visitor hand sanitizes before and after each visit.

7.4.10 Ensures that the visitor is wearing their own mask/face covering for an outside visit.

7.4.11 Ensures that the visitor is provided with a surgical/procedure mask for indoor visits.

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

7.5 Environmental Services will:

7.5.1 Work with Interprofessional team to develop the designated visiting areas and ensure there is proper distancing markings.

7.5.2 Ensure there is enough hand sanitizer, disinfectant available in the /indoor visiting area.

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

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

7.5.5 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

- Directive#3 for Long-Term Care Homes under the Long-term Care Homes Act, 2007 issued August 28, 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
- Ministry of Long-Term Care, Update to Visits at Long Term Care Homes, July 15, 2020

Visitor Compliance Escalation Process - Appendix A

October 29, 2020

