

COVID-19 Visitor Policy

Policy:

All communities have a responsibility to ensure residents receive visitors safely to help protect against the risk of COVID-19. This policy balances mitigating measures to protect the health and safety of residents, team members and visitors, with the physical, mental, emotional, and spiritual needs of residents for their quality of life and in consideration of the mental health and emotional well-being of residents and their loved ones. All visitors must comply with the requirements set out in this policy.

Where noted in this policy, “**up to date**”, as it relates to COVID-19 vaccination, means a person has received all recommended COVID-19 vaccine doses, including any booster dose(s) when eligible. Refer to Ministry of Health’s [Staying Up to Date with COVID-19 Vaccines: Recommended Doses](#).

Guiding Principles

In addition to the requirements established in the Retirement Homes Act, 2010 and O. Reg 166/11, the Reopening Ontario Act, 2020, and Directive #3, this policy is guided by the following principles:

- **Safety:** Any approach to visiting, absences, and activities must balance the health and safety needs of residents, team members, and visitors, and ensure risks of infection are mitigated.
- **Mental Health and Emotional Well-being:** Allowing visitors, absences, and activities are intended to support the overall physical, mental and emotional wellbeing of residents by reducing any potential negative impacts related to social isolation.
- **Equitable Access:** All residents must be given equitable access to receive visitors and participate in activities consistent with their preferences and within restrictions that safeguard residents, team members and visitors.
- **Flexibility:** The physical characteristics /infrastructure of the community, its staffing availability, whether the community is in outbreak or in an area of widespread community transmission, and the current status of the community with respect to infection prevention and control (IPAC) including personal protective equipment (PPE) are all variables to take into account when administering community-specific policies for visiting, absences, and activities.
- **Autonomy:** Residents have the right to choose their visitors. Residents also have the right to designate their caregivers. If a resident is unable do so, substitute decision-maker(s) may designate caregivers.
- **Visitor Responsibility:** Visitors have a crucial role to play in reducing risk of infection for the safety of residents and team members by adhering to visitor policy requirements related to screening, IPAC and PPE and any precautions described in this policy.
- **COVID-19 Vaccination:** The goal of the provincial COVID-19 vaccination program is to protect Ontarians from COVID-19. Homes are highly encouraged to continue to promote vaccinations and boosters to all eligible residents, staff, and visitors. Staying [up-to-date](#) with COVID-19 vaccines help reduce the number of new cases and, most importantly, severe outcomes including hospitalizations and death due to COVID-19. All individuals, whether or not they have received a COVID-19 vaccine, must continue to practice the recommended public health measures and comply with all applicable laws for the ongoing prevention and control of COVID-19 infection and transmission. Visitors should not be denied entry to retirement homes based on their COVID-19 vaccination status.

Requirements for Home Visits

1. The community adhere to any directions from their local PHU. This may include direction to take additional measures to restrict access and duration of visits during an outbreak, or when the PHU

- deems it necessary. The community must facilitate visits for residents and must not unreasonably deny visitors based on the frequency of visits and their vaccination status.
2. The following minimum requirements will be maintained to continue to accept any visitors:
 - i. Procedures for visits including but not limited to IPAC, scheduling and any setting-specific policies.
 - ii. Communication of clear visiting procedures with residents, families, visitors and team member, including sharing an **information package** with visitors with:
 - a. The [Ministry for Seniors and Accessibility COVID-19 Guidance Document for Retirement Homes in Ontario](#) (June 24, 2022).
 - b. Details on any visitor or visiting restrictions (e.g., number of visitors permitted based on any capacity considerations);
 - c. Details regarding IPAC, masking, and physical distancing (2 metres separation),
 - d. Requirements regarding proof of identification and full COVID-19 vaccination, as per Delmanor's policy;
 - e. Information about how to escalate concerns about the community to the RHRA via the RHRA email and/or phone number; and
 - f. Other health and safety procedures such as limiting movement around the community, if applicable, and ensuring visitors' agreement to comply with visiting procedures.
 - iii. A process for complaints about the administration of visiting policies and a timely process for resolving complaints.
 - iv. Requirements for visitor compliance with visiting policies and a process to notify residents and visitors that failure to comply with the visiting policy may result in the discontinuation of visit(s) when risk of harm from continual non-compliance is considered too high, including a way to assess refusal of entry on a case-by-case basis.
 - v. A process for recording all visits, including the name, contact information, date and time of visit, and resident visited for each visitor, to be kept for at least 30 days.
 - vi. Dedicated areas for both indoor and outdoor visits to support physical distancing (2 metres separation) between residents and visitors.
 - vii. Protocols to maintain best practices for IPAC measures prior to, during and after visits.
 3. The community will ensure the following are put in place to facilitate safe visits:
 - **Adequate Staffing:** The community has sufficient team members to implement the policies related to visitors and to ensure safe visiting as determined by the community's leadership.
 - **Access to adequate testing:** The community has a testing policy and plan in place to support antigen point-of-care (POCT) screening of all visitors, regardless of vaccination status.
 - **Access to adequate PPE:** The community has adequate supplies of PPE required to support visits.
 - **IPAC standards:** The community has appropriate cleaning and disinfection supplies and adhere to IPAC standards, including enhanced cleaning.
 - **Physical distancing:** The community can facilitate visits in a manner aligned with physical distancing protocols (2 metres separation).
 4. If the community restricts visits based on any of the above factors, the decision will be communicated to residents, including the reasons for the decision.

Types of Visitors

There are 3 categories of visitors: Essential Visitors, General Visitors, and Personal Care Service Providers. Community team members, students and volunteers as defined in the *Retirement Homes Act, 2010* are not considered visitors.

<p>1. Essential Visitors <i>Essential Visitors are persons performing essential support services (e.g., food delivery, inspectors, maintenance, or health care services (e.g., phlebotomy) or a person visiting a very ill or palliative resident).</i></p> <p><i>There are two categories of Essential Visitors: Support Workers and Essential Caregivers.</i></p> <p>External Care Providers (ECPs): ECPs are employees, staff or contractors of Home and Community Care Support Services (HCCSS) (formerly LHINs) and provide services to residents. They are considered Essential Visitors to retirement community and must comply with the requirements under CMOH’s Directive #3 and RHRA’s Policy to Implement Directive #3.</p>	<p>A. Support Workers A Support Worker is brought into the community to perform essential services for the community or for a resident in the community, including:</p> <ol style="list-style-type: none"> Regulated health care professionals under the <i>Regulated Health Professions Act, 1991</i> (e.g., physicians, nurses); Unregulated health care workers (e.g., PSWs, personal/support aides, nursing/personal care attendants), including external care providers and Home and Community Care Support Service Providers (formerly LHIN providers); Authorized third parties who accommodate the needs of a resident with a disability; Health and safety workers, including IPAC specialists; Maintenance workers; Private housekeepers; Inspectors; and Food delivery.
<p>2. General Visitors</p>	<p>B. Essential Caregivers Essential Caregivers provide care to a resident including supporting feeding, mobility, personal hygiene, cognitive stimulation, communication, meaningful connection, relational continuity and assistance in decision-making. Essential Caregivers may be family members, a privately hired caregiver, paid companions and translators even if the person would also be considered a Support Worker.</p> <p>Essential Caregivers must be designated by the resident, or if the resident is unable to do so, their substitute decision-maker. The designation should be made in writing to the community, and the community should have a procedure for documenting Essential Caregiver designations. The necessity of an Essential Caregiver is determined by the resident or the SDM.</p> <p>Essential Caregivers will not be denied access to residents, provided that they pass the active screening, testing and PPE requirements (e.g., vaccination status should not impact access).</p> <p>In order to limit the spread of infection, a resident and/or their SDM will only be encouraged to change the designation of their Essential Caregiver in limited circumstances, including in response to:</p> <ol style="list-style-type: none"> A change in the resident’s care needs that is reflected in the plan of care; A change in the availability of a designated Essential Caregiver; and/or Due to the vaccination status of the designated Essential Caregiver
<p>3. Personal Care Service Providers</p>	<p>A General Visitor is a person who is not an Essential Visitor and visits:</p> <ol style="list-style-type: none"> For social reasons (e.g., family members and friends of resident); To provide non-essential services (may or may not be hired by the community or the resident and/or their SDM); and/or As a prospective resident taking a tour of the community. <p>A Personal Care Service Provider is a person who is not an Essential Visitor and visits to provide non-essential personal services to residents. Personal Care Services include those outlined under the Health Protection and Promotion Act, such as hair salons and barbershops, manicure and pedicure salons, and aesthetician services, that are not being provided for medical or essential reasons.</p>

1. Designated Essential Caregivers will be documented through **Essential Caregiver Designations Form. (See Appendix E)**. Residents/SDMs will be encouraged to change the designation of their Essential Caregiver in limited circumstances, as noted in the above chart, in order to limit the spread of infection.

Access to the Community

1. The local PHU may require restrictions on visitors in part or all of the community, depending on the specific situation. The community and visitors must abide by any restrictions imposed by the PHU, which override any requirements or permissions in the [Ministry for Seniors and Accessibility COVID-19 Guidance Document for Retirement Homes in Ontario](#) (June 24, 2022).
2. Residents who are not isolating may receive Essential Visitors, General Visitors, and Personal Care Service Providers if they are not living in the outbreak area of a community.
3. Residents who are isolating under Contact and Droplet Precautions may only receive Essential Visitors.
4. When a resident is isolating, the residence must provide supports for their physical and mental well-being to mitigate any potential negative effects of isolation. This includes individualized mental and physical stimulation that meet the abilities of the individual.
5. All visitors to the community should follow public health measures (e.g., active screening, wearing a medical mask while indoors, IPAC and maintaining physical distancing) for the duration of their visit in the residence. If an area in a home is in outbreak, eye protection is required when providing direct care to residents.
6. Unnecessary entry into the community by visitors should be minimized (e.g., the community will encourage food or package delivery to the foyer for resident pick up or employee delivery).
7. The community must facilitate visits for residents and will not unreasonably deny visitors based on *frequency of visits and their vaccination status*.
8. Essential Caregivers, provided that they pass the screening and PPE requirements, must not be denied access to residents.
9. All visitors may be actively screened to be permitted entry, including for outdoor visits.
10. To support physical distancing between residents and visitors, indoor and outdoor visiting areas have been designated and are identified.
11. Best practices for IPAC measures will be maintained prior to, during and after visits.
12. Visits should be booked in advance.
13. All visits to the community must be recorded, including the name, contact information, date and time of visit, and resident visited for each visitor, and kept for at least 30 days.
14. All residents, families, visitors and team members may be provided with this policy and information package. All visitors should review the contents of the information package prior to their visit. Additional applicable policies and procedures will also be communicated as needed.
15. The number of visitors permitted, subject to PHU advice per #1 above, is outlined below

<p>1. Essential Visitors (Support Workers & Essential Caregivers)</p>	<p>Essential Visitors are permitted regardless of vaccination status if they pass active screening.</p> <p>Essential Visitors may visit a resident who is isolating, but must follow public health measures (e.g., hand hygiene and masking) for the duration of visit.</p>
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<p>2. General Visitors</p>	<p>General Visitors are permitted regardless of vaccination status if they pass active screening.</p> <p>General Visitors are permitted unless a resident is isolating and on Droplet and Contact Precautions, or the community is advised by the local PHU to stop general visits (e.g., during an outbreak).</p> <p>To further limit risk to residents, General Visitors who have symptoms of COVID19, have tested positive for it or who are close contacts of someone with COVID19, are required to follow MOH’s Public Health Management of Cases and Contacts of COVID-19 in Ontario and COVID-19 Screening Tool for Long-Term Care Home and Retirement Homes.</p> <p>The number of General Visitors should be based on the capacity of the location where the visitor will take place and should allow sufficient space for physical distancing.</p> <p>For all visits, sufficient space must be available to allow for physical distancing. In addition, contact visits are allowed for all General Visitors regardless of vaccination status.</p> <p>For all visits with General Visitors, the following measures should be in place:</p> <ul style="list-style-type: none"> • The community should ensure equitable visitor access for those residents who are not isolating. • Visits should be booked in advance. • General Visitors must wear a medical mask while indoors and outdoors (and are responsible for bringing their own mask) maintain physical distancing and perform hand hygiene for the entire duration of their visit. • Residents should be strongly encouraged to wear a mask for the duration of the visit while indoors and must wear a mask while in common areas. <p>Opening windows should be considered for indoor and in-suite visits to allow for air circulation</p>
<p>3. Personal Care Service Providers</p>	<p>Personal Care Service Providers who are visiting or work in the residence are permitted to provide services in alignment with provincial requirements if they pass active screening and demonstrate a negative antigen POCT, which is prior to entering the residence.</p> <p>When providing services, Personal Care Service Providers must:</p> <ul style="list-style-type: none"> • Follow required public health and IPAC measures for Personal Care Service Providers and those of the community; • Wear a medical mask for the duration of their time to the community; • Only provide services to residents who are wearing a medical mask, except for where this is not tolerated by residents, or in the case of dental procedures; • Practice hand hygiene and conduct environmental cleaning after each appointment; and • Document all residents served and maintain this list for at least 30 days to support outbreak management. <p>The number of Personal Care Service Providers should be based on the capacity of the location where the service will take place and should allow for sufficient space for physical distancing between providers.</p>

Screening Visitors for COVID-19

1. Active Screening

The community should have an established process for active screening that is communicated to anyone entering the building.

- a) Anyone entering the community (including visitors) must be actively screened to be permitted entry, including for outdoor visits (see June 27, 2022 [MOH Screening Tool](#) for minimum active screening requirements and exemptions).
 - b) Any visitor who fails active screening must not be allowed to enter the community (as applicable), must be advised to follow current case and contact recommendations, and will be encouraged to be tested.
 - c) Visitors who do not pass screening will not be permitted access, unless:
 - a. It cannot be assured that resident care can be maintained if the visitor's entry were refused, assessed on a case-by-case basis by the community.
 - b. Exemptions to active screening apply to: First responders and visitors for imminently palliative residents, who are not required to pass screening but must remain masked and maintain physical distance from other residents and team members.
 - d) Visitor entry and screening results will be documented and retained for at least 30 days to support contact tracing.
2. **Safety Review - General Visitors and Personal Care Service Providers**
- a) Prior to visiting any resident for the first time, and at least once every month thereafter, the community may ask **fully vaccinated** General Visitors and Personal Care Service Providers to verbally attest that they have:
 - i. Read/Re-Read the following documents:
 - The community's visitor policy; and
 - Public Health Ontario's document entitled [Recommended Steps: Putting on Personal Protective Equipment \(PPE\)](#).
 - ii. Watched/Re-watched the following Public Health Ontario videos:
 - [Putting on Full Personal Protective Equipment](#);
 - [Taking off Full Personal Protective Equipment](#); and
 - [How to Hand Wash](#).
 - b) Safety review screening will be documented and retained for at least 30 days .
3. **Safety Review - Essential Visitors**
- a) If the community is **declared in outbreak**, prior to visiting any resident for the first time, the community may provide training to Essential Caregivers, and Support Workers who are not trained as part of their service provision or through their employment. Training must address how to safely provide direct care, including putting on (donning) and taking off (doffing) required PPE, and hand hygiene. If the community does not provide the training, Essential Caregivers and Support Workers must be directed to appropriate resources from [Public Health Ontario](#) to acquire this training.
 - b) For communities **not in outbreak**, prior to visiting any resident for the first time, and at least once every month thereafter, the community will ask Essential Caregivers and Support Workers to verbally attest that they have:
 - i. Read/Re-Read the following documents:
 - The community's visitor policy; and
 - Public Health Ontario's document entitled [Recommended Steps: Putting on Personal Protective Equipment \(PPE\)](#).
 - ii. Watched/Re-watched the following Public Health Ontario videos:
 - [Putting on Full Personal Protective Equipment](#);
 - [Taking off Full Personal Protective Equipment](#); and

- [How to Hand Wash.](#)
- c) Safety review screening will be documented and retained for at least 30 days.

Personal Protective Equipment

Visitors must wear PPE as required in Directive #3, which requires the community to follow Directive #5:

1. Essential Visitors

- a) Support Workers are responsible for bringing their own PPE to comply with requirements for Essential Visitors as outlined in Directive #3.
- b) The community may provide access to PPE for Essential Caregivers if they are unable to acquire PPE independently, including to medical (surgical/procedure) masks, eye protection (e.g., face shields or goggles) and any additional PPE when providing care to residents who are isolating on Droplet and Contact Precautions.
- c) The community will intervene and reinforce appropriate uses of PPE if improper practices are alleged or observed. Essential Visitors must follow team member reminders and coaching on proper use of PPE.
- d) Per Directive #3, Essential Visitors must wear a medical mask for the entire duration of their shift/visit, both indoors and outdoors, and eye protection when providing care to residents with suspect/confirmed COVID-19 and in the provision of direct care within 2 metres of residents in an outbreak area, regardless of their COVID-19 vaccination status.

2. General Visitors and Personal Care Service Providers

- a) General Visitors and Personal Care Service Providers must wear at minimum either a medical mask for indoor and outdoor visits.
- b) General Visitors and Personal Care Service Providers must attest to having read the documents and watched the videos on PPE, as noted above.
- c) The community will intervene and reinforce appropriate uses of PPE if improper practices are alleged or observed. General Visitors must follow team member reminders and coaching on proper use of PPE.

Social Gatherings and Organized Events

Per the [Ministry for Seniors and Accessibility COVID-19 Guidance Document for Retirement Homes in Ontario](#) (June 24, 2022), all social gatherings and organized events must include the following measures:

- Participants of social gatherings and organized events in the community are subject to the physical distancing (2 metres) and masking requirements.
- Classes and social activities should be limited to ventilated rooms (e.g., with open windows and HEPA air purifiers).
- The number of participants should be based on the capacity of the location where the activities will take place and should allow sufficient space for physical distancing between participants.

Communal Dining

Per the [Ministry for Seniors and Accessibility COVID-19 Guidance Document for Retirement Homes in Ontario](#) (June 24, 2022), participants of communal dining are subject to:

- Physical distancing and masking requirements
- Frequent hand hygiene is recommended for all visitors.

Community Tour Requirements

Prospective residents/visitors may be offered in-person, targeted tours of suites at any time. These tours must adhere to the following precautions:

- All tour participants are subject to the General Visitor screening and PPE requirements outlined in the [Ministry for Seniors and Accessibility COVID-19 Guidance Document for Retirement Homes in Ontario](#) (June 24, 2022) (e.g., active screening, wearing a medical mask, IPAC, maintaining physical distancing).
- All in-person tours should be paused if the community goes into outbreak, unless permitted by the local PHU.

Discontinuation of Visits/Refusal of Entry

1. The community should have requirements in place for visitor compliance with visiting policies and a process to notify residents and visitors that failure to comply with their visiting policies may result:
 - Discontinuation of visit(s) when risk of harm from continual non-compliance is considered too high. This must include a way to assess refusal of entry on a case-by-case basis

Complaints Process

1. If a visitor has a complaint about the administration of the community's visiting policies, they will be directed to share their complaint by phone or email with the General Manager. Concerns may be escalated to the RHRA via the RHRA email or phone number. This process is documented in the Information Package for Visitors.

Accessibility Considerations

The community is required to meet all applicable laws such as the Accessibility for Ontarians with Disabilities Act, 2005

References:

[COVID-19 Screening Tool for Long-Term Care Homes and Retirement Homes](#). (June 27, 2022)

Ministry for Seniors and Accessibility COVID-19 Guidance Document for Retirement Homes in Ontario (June 24, 2022)

MOH's COVID-19 Guidance: LTCH/RH for PHUs. (June 27, 2022)

