

COVID-19 Visitor Policy

Policy:

All visitors will be instructed to adhere to the requirements set out in this policy to ensure the health and safety of all residents, staff and visitors, and allow for the continuity of visits that support the mental, physical and spiritual needs of residents for their quality of life while also supporting residents in receiving the care they need and maintaining their emotional well-being.

This policy complies with current ministry requirements per Directive #3 (*December 7, 2020*) and aligns with the Ministry for Seniors and Accessibility (MSAA) *Retirement Home COVID-19 Visiting Policy (December 9, 2020)*. The rules in this policy are in addition to the requirements established in the Retirement Homes Act, 2010 and its regulation (O. Reg 166/11). Any non-adherence to the rules set out in the visitor policy could be the basis for discontinuation of visits for the non-compliant visitor.

Informed by the ongoing COVID-19 situation in the community and the residence, this policy will be reassessed and revised to allow for increased or decreased precautions as circumstances/directives change, including changes under the provincial [COVID-19 Response Framework: Keeping Ontario Safe and Open](#) (Provincial Framework).

Guiding Principles

There is an ongoing need to protect retirement home residents and staff from the risk of COVID-19, particularly as some residents may be more susceptible to severe effects of COVID-19 than the general population.

This visitor policy is guided by the following principles:

- **Safety:** Any approach to visiting in the residence must balance the health and safety needs of residents, staff, and visitors, and ensure risks are mitigated.
- **Emotional Well-being:** Allowing visitors is intended to support the 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, consistent with their preferences and within restrictions that safeguard residents, staff and visitors.
- **Flexibility:** The physical/infrastructure characteristics of the home, its staffing availability, whether the home is in outbreak or in an area of widespread transmission, and the current status of the home with respect to personal protective equipment (PPE) are all variables to take into account when setting home-specific policies.
- **Autonomy:** Residents have the right to choose their visitors. In addition, residents have the right to designate Caregivers. If a resident is unable to do so, substitute decision-maker(s) may designate Caregivers.
- **Visitor Responsibility:** Visitors have a crucial role to play in reducing risk and infection control for the safety of residents and staff by adhering to visitor policy requirements related to screening, IPAC and PPE and any precautions described in this policy.

It is with compassion that Queenston Place recognizes the need for residents' connection with loved ones, and it is through in-person visits that this can be best achieved. We will take all reasonable steps to help facilitate visits within the parameters of ministry directives. We also recognize the concepts of non-maleficence (i.e. not doing harm), proportionality (i.e., to the level of risk), transparency and reciprocity (i.e., providing resources to those who are disadvantaged by the policy). These concepts will inform the residence's decision making with regards to the scheduling and/or refusal of visits as appropriate.

Requirements for Visits

The residence shall adhere to the requirements in any applicable directives issued by the CMOH and directions from the local public health unit (PHU). This may include direction to take additional measures to restrict access and duration of visits during an outbreak or when the PHU deems necessary under the Provincial Framework.

The following baseline requirements shall be met prior to the home being able to accept any visitors **except where noted in this policy:**

1. The residence must **not** be currently in an outbreak.
2. The residence has developed:
 - a) Procedures for visits including but not limited to infection prevention and control (IPAC), scheduling and any setting-specific policies.
 - b) A process for communicating visiting procedures with residents, families and staff, including sharing an **information package** with visitors on IPAC, face covering/masking, physical distancing and other operational procedures such as limiting movement around the residence, if applicable, and ensuring visitors' agreement to comply. Residence materials shall include an approach to dealing with non-adherence to residence policies and procedures, including the discontinuation of visits. **(See Appendix A)**
 - c) Dedicated areas for both indoor and outdoor visits to support physical distancing between residents and visitors.
 - d) Protocols to maintain the highest of IPAC standards prior to, during and after visits.
 - e) A list of visitors available for relevant staff to access.
 - f) Protocols for record keeping of visitations for contact tracing purposes (minimum requirements: name, contact information, date and time of visit, resident visited) **(See Appendix D)**

Factors that will inform decisions about visits in the residence include:

- **Adequate Staffing:** The residence has sufficient staff to implement the protocols related to visitors and to ensure safe visiting as determined by the home's leadership.
- **Access to adequate testing:** The residence has a testing plan in place, based on contingencies and informed by local and provincial health officials, for testing in the event of a suspected outbreak.
- **Access to adequate Personal Protective Equipment (PPE):** The residence has adequate supplies of relevant PPE.
- **Infection Prevention and Control (IPAC) standards:** The residence has appropriate cleaning and disinfection supplies and adhere to IPAC standards, including enhanced cleaning.
- **Physical Distancing:** The residence can facilitate visits in a manner aligned with physical distancing protocols. If the residence restricts visits based on these factors, it is expected that they communicate that decision to residents and provide the reasons for the decision.

*Note that retirement home staff and volunteers (i.e. a person who works in or supplies services to the home, but who is not part of the staff of the home and who does not receive a wage or salary for the services or work that the person provides in the home) as defined in the Retirement Homes Act, 2010 are **not** considered visitors as their access to the residence is determined by the licensee.*

Types of Visitors

All visitors are responsible for adhering to applicable directives including Directive #3, MSAAGuidelines and this visitor policy. Visitors should consider their personal health and susceptibility to the virus in determining whether visiting the residence is appropriate. Outlined below are the three types of visitors.

1. Essential Visitor <i>Essential visitors include a person performing essential support services (e.g., food delivery, inspector, maintenance, or health care services (e.g., phlebotomy) or a person visiting a very ill or palliative resident.</i>		2. General Visitor	3. Personal Care Service Provider
A. Support Worker	B. Caregiver		
<p>A Support Worker is a type of Essential Visitor who is brought into the home when there are gaps in services to perform essential services for the home or for a resident in the home.</p> <p>Examples of Support Workers:</p> <ul style="list-style-type: none"> • Regulated health care professionals under the <i>Regulated Health Professions Act, 1991</i> (e.g., physicians, nurses); • Contract workers hired by the home, external care providers hired by the resident, or LHIN care services, including home care providers (e.g., nursing care, physiotherapy, occupational therapy, social workers, unregulated care providers); • Authorized third parties who accommodate the needs of a resident with a disability; • Maintenance workers; • Private housekeepers; and • Food delivery. <p>Support workers do not include retirement home staff.</p>	<p>A Caregiver is a type of Essential Visitor who is designated by the resident or, if the resident is unable to do so, their substitute decision-maker.</p> <p>Caregivers visit to provide care to the resident (e.g., supporting feeding, mobility, personal hygiene, cognitive stimulation, communication, meaningful connection, relational continuity and assistance in decision-making).</p> <p>A maximum of 2 Caregivers may be designated per resident (designation should be made in writing to home & home should have procedure for documenting Caregiver designations and any subsequent changes)</p> <p>In order to limit infection spread, a resident and/or their SDM should be encouraged to change the designation of their Caregiver in limited circumstances, including in response to:</p> <ul style="list-style-type: none"> • A change in the resident’s care needs that is reflected in the plan of care; and/or • A change in the availability of a designated Caregiver, either temporary (e.g., illness) or permanent. <p>Examples of Caregivers include: family members who provide care, a privately hired caregiver, paid companions and translators.</p> <p>A resident may designate an external care provider as a Caregiver even though that individual would also be considered a Support Worker.</p>	<p>A General Visitor is a person who is not an Essential Visitor and visits:</p> <ul style="list-style-type: none"> • To provide non-essential services (may or may not be hired by the home or the resident and/or their SDM); • For social reasons (e.g., family members or friends); and/or • As a prospective resident taking a <u>tour</u> of the home. 	<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 such as hair dressing and nail care.</p>

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

Access to Residence

As identified throughout this policy, Essential Visitors are the only type of visitors allowed when a resident is self-isolating or symptomatic, the residence is in an outbreak, or the home is located in a public health unit region where there is evidence of increasing/significant community transmission i.e., Orange (Restrict), Red (Control) or Grey (Lockdown) levels in the provincial [COVID-19 Response Framework: Keeping Ontario Safe and Open](#).

Note: Residents who are self-isolating for 14 days under Droplet and Contact Precautions may **only receive Essential Visitors** (e.g., residents may not receive General Visitors or Personal Care Service Providers). However, homes may allow residents who are not self-isolating to receive General Visitors and Personal Care Service Providers, provided the home is **not in an outbreak, or is in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown)** (see additional details in “*Access to Residence*”).

1. The types of visitors and number permitted as outlined in the MSAA guidelines are noted below. However, if the residence is in **outbreak** or is in a **PHU under Orange (Restrict), Red (Control) or Grey (Lockdown)**, the local PHU may also advise **further restrictions on visitors** in part or all the home, depending on the specific situation, or may recommend **additional outbreak management control measures** which may include **restriction of Essential Visitors**. The home shall abide by any restrictions imposed by a PHU.

1. Essential Visitors <i>Visits for Essential Visitors are permitted as follows, subject to direction as outlined in this policy:</i>		2. General Visitors	3. Personal Care Service Providers (PCSPs)
A. Support Workers	B. Caregivers		
<ul style="list-style-type: none"> • Any number of Support Workers brought into the home to support IPAC or Health and Safety reasons are permitted (e.g., deep cleaning or emergency maintenance). • Any number of Support Workers who are care providers (e.g., regulated health care professionals or unregulated care providers) may visit a resident in a home at a time. • A maximum of 1 Support Worker who is a not a care provider* (i.e. <u>not</u> a regulated health care professional or unregulated care provider) per resident may visit at a time where: <ul style="list-style-type: none"> ○ The home IS in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown), the home IS in an outbreak, or the resident IS self-isolating or symptomatic. <p><i>*For example, maintenance should only be allowed for emergency maintenance, food delivery should be limited to delivery or</i></p>	<p>A maximum of 2 Caregivers per resident may visit at a time where:</p> <ul style="list-style-type: none"> • The home is NOT in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown), the home is NOT in an outbreak, and the resident is NOT self-isolating or symptomatic. <p>A maximum of 1 Caregiver per resident may visit at a time* where:</p> <ul style="list-style-type: none"> • The home IS in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown), the home IS in an outbreak, or the resident IS self-isolating or symptomatic. <p><i>*Note of exception: If 2 Caregivers live together, they may visit a resident at the same time when the home is in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown), the home is in an outbreak, or the resident is self-isolating or symptomatic.</i></p> <p><i>[For greater clarity – for homes in Green and Yellow levels: A maximum of two (2) Caregivers per resident may visit at a time.]</i></p>	<p>A maximum of 2 General Visitors per resident at a time may visit that resident provided:</p> <ul style="list-style-type: none"> • The resident is NOT self-isolating or symptomatic; • The home is NOT in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown); and • The residence is NOT in an outbreak. <p>General Visitors are not permitted for visits (indoors or outdoors) at homes in an outbreak or in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown), and may not visit residents that are self-isolating or symptomatic with COVID-19 symptoms. However, the home shall ensure that residents are able to maintain contact with their loved ones (e.g., phone and virtual visits) when in an outbreak, in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown), or when residents are self-isolating or symptomatic with COVID-19 symptoms.</p>	<p>A maximum of 1 PCSP per resident at a time may visit that resident provided:</p> <ul style="list-style-type: none"> • The resident is NOT self-isolating or symptomatic; • The home is NOT in a PHU under Red (Control) or Grey (Lockdown); and • The residence is NOT in an outbreak. <p>PCSPs that support only the retirement home generally (e.g., provide services on-site at <u>one</u> location) may continue to visit homes in a PHU that is in Orange (Restrict) if they follow required public health and IPAC measures for their trade and those of the home.</p> <p>PCSPs are not permitted in homes in outbreak or in a PHU under Red (Control) or Grey (Lockdown) and may not visit residents that are self-isolating or symptomatic with COVID-19 symptoms.</p>

<p><i>drop off, and private housekeepers should be limited to once a week, if possible.</i></p> <p><i>[For greater clarity - for homes in Green and Yellow levels: Any number of support workers may visit a resident in a home.]</i></p>			
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2. Designated indoor and outdoor visiting areas have been established and are identified by signage. *The café has been designated for indoor visits.*
3. When the residence is not in an outbreak, and in accordance with MSAA policies, the number of visitors per resident, per day, will be determined by the residence in review of community and residence circumstances and as per MSAA guidelines (see chart)
4. The residence will ensure a list of visitors is available for relevant staff to access.
5. All visits will be documented for contact tracing purposes, noting at minimum the visitors' name, contact information, date and time of visit, and resident visited. *All visits should be pre-arranged with the front desk. Please make an appointment with the front desk by calling 905-371-2743 (See Appendix D)*
6. General Visitors must only visit the one resident they are intending to visit, and no other resident.
7. General visits should be pre-arranged to allow for appropriate physical distancing and staffing coverage. **(See Appendix C)**
8. Visits should be staggered, allowing sufficient time between visits for cleaning/disinfecting and other IPAC requirements as needed.
9. The residence will support and implement all required public health measures as well as infection prevention and control measures as required
10. All visitors are required to follow public health measures (e.g., active screening, physical distancing, hand hygiene, masking for source control) for the duration of their visit in the residence. Visitors must also follow the residence's infection prevention and control practices including respiratory etiquette and proper use of PPE.
11. The highest of IPAC standards will be maintained prior to, during and after visits.
12. All residents and visitors will be provided with this policy and information package, including education on all required protocols. All visitors must review the contents of the information package prior to their visit. Additional applicable policies and procedures will also be communicated to residents as appropriate.

Screening

1. Active Screening

All visitors must:

- a) Be actively screened on entry for symptoms and exposure to COVID-19 and not be admitted if they do not pass the screening; and
- b) Attest to not be experiencing any [COVID-19 symptoms](#) (See Appendix D)

2. COVID-19 Testing

All home and community care and personal care service providers should:

- a) Follow any testing guidance for retirement home staff as outlined in the [COVID-19 Testing for Retirement Homes](#). The residence is not required to provide the testing.

3. Safety Review – Essential Visitors

Prior to visiting any resident in a home declared in outbreak for the first time after this policy is released, the residence **should provide training to Caregivers, and Support Workers** who are not trained as part of their service provision or through their employment, that addresses how to safely provide direct care, including putting on and taking off required PPE, and hand hygiene. All Caregivers and Support Workers must read resources from [Public Health Ontario](#) to acquire this training and attest to reading this information.

- a) For homes **not** in outbreak, prior to visiting any resident for the **first time after this policy is released**, and at least once **every month** thereafter, the home shall ask **Caregivers** to verbally attest to the home that they have:
 - i. Read/Re-Read the following documents:
 - The home’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](#).

4. Safety Review - General Visitors and Personal Care Service Providers

- a) Prior to visiting any resident for the **first time after this policy is released, and at least once every month thereafter**, the home shall ask General Visitors and Personal Care Service Providers to verbally attest to the home that they have:
 - i. Read/Re-Read the following documents:
 - The home’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](#).

Personal Protective Equipment

Visitors must wear PPE as required in Directive #3:

a) Essential Visitors

- i. Support Workers and Caregivers are responsible for bringing their own PPE to comply with requirements for Essential Visitors as outlined in Directive #3. They are encouraged to work with the home to source the appropriate PPE to comply with these requirements, if needed.
- ii. If Essential Visitors are unable to obtain the appropriate PPE, they may be refused entry.
- iii. Directive #3 notes that Essential Visitors who are:
 - a. Providing direct care to a resident must use a surgical/procedure mask while in the home, including while visiting the resident that does not have, or is not suspected to have COVID-19 in their room; and
 - b. In contact with a resident who is suspected or confirmed with COVID-19 must wear appropriate PPE in accordance with [Directive #5](#) and [Directive #1](#).

b) General Visitors and Personal Care Service Providers

- i. General visitors and personal care service providers are responsible for bringing their own face covering/mask for visits as outlined in Directive #3. If the visitor does not bring their own face covering/mask (and the home is not able to provide a surgical/procedure mask if the visit is indoors), they cannot visit.
- ii. Directive #3 notes that visitors should use a **face covering/mask** if the visit is **outdoors**. If the visit is **indoors**, a **surgical/procedure mask** must be always worn.

Discontinuation of Visits

1. **Non-compliance with the residence's policies could result in the discontinuation of visits for the non-compliant visitor.** *All non-compliance will be directed to the Administrator. This may include additional education up to and including discontinuation of visits to Queenston Place for a period determined by the Administrator.*

Retirement Home Tour Requirements

Virtual tours should be implemented as much as possible.

1. If the residence is in a **PHU under Orange (Restrict) or Red (Control)**, prospective residents may be offered **targeted tours of empty suites at the final stage of the home selection process**. General tours of the home, including common areas, should be *virtual*.
2. All **in-person targeted tours** should be **paused** if a home **goes into outbreak or is in a PHU under Grey (Lockdown)**.
3. For in-person tours of retirement homes:
 - o The tour group should be limited to the prospective resident or couple plus one other individual (e.g., accompanying family member or close friend).
 - o All tour participants are subject to the General Visitor requirements outlined in this document (e.g., active screening, wearing a face covering/mask, IPAC, maintaining social distance).
 - o The tour route **must** be restricted in a manner that **avoids** contact with residents.
 - o Homes should keep the number and duration of tours in the home to a minimum.

Accessibility Considerations

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

Appendix:

Appendix A - Information Package for Visitors

Appendix B - Signage for Visitors

Appendix C Visiting Schedule

Appendix D - Visitor Screening

Appendix F – Caregiver Designation Form

Appendix G – MSAA Visitor Signage

References:

Ministry for Seniors and Accessibility (MSAA) Retirement Home COVID-19 Visiting Policy – December 9, 2020

<https://www.orcaretirement.com/wp-content/uploads/retirement-homes-visiting-policy-2020-12-11-EN-v2-FINAL-ua.pdf>

Ministry of Health (MOH) Directive #3 – December 7, 2020

http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/directives/LTCH_HPPA.pdf

Reopening Retirement Homes - Recommendations for Visitations

<https://drive.google.com/file/d/1M8ltYijmDlfez-8j76x2w3YWt225avfl/view?usp=sharing>

Appendix A – Information Package for Visitors

Note Visitor Requirements Identified Herein:

As part of the residence's policy on visits during COVID-19, all visitors will be provided with the information package, including education on all required protocols. All visitors must review the contents of the information package prior to their visit, and all visitors must agree to comply with the home's policy and procedures.

Any non-adherence to the rules set out in the visitor policy could be the basis for discontinuation of visits for the non-compliant visitor. The Administrator will review all non-compliance which may include further education up to including discontinuation of visits.

The visitor policy and information package will also be shared with residents to communicate the residence's visitor policy and the associated procedures.

Limiting Movement in the Residence

Visitor restrictions are based around the provincial [COVID-19 Response Framework: Keeping Ontario Safe and Open](#) (Provincial Framework). Homes in Public Health Units (PHU) with evidence of increasing/significant community transmission are those under **Orange (Restrict)**, **Red (Control)** or **Grey (Lockdown)**.

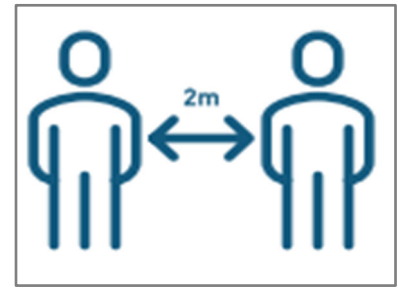
General Visitors must only visit the one resident they are intending to visit, and no other resident. If the visitor wishes to see another resident, they must book another visit.

Residents who are self-isolating for 14 days under Droplet and Contact Precautions may **only receive Essential Visitors** (e.g., residents may not receive General Visitors or Personal Care Service Providers). However, homes may allow residents who are **not self-isolating** to receive General Visitors and Personal Care Service Providers, provided the home is **not in an outbreak**, or is in a **PHU under Orange (Restrict), Red (Control) or Grey (Lockdown)**.

If the residence is in **outbreak** or is in a **PHU under Orange (Restrict), Red (Control) or Grey (Lockdown)**, the local PHU may also advise further restrictions on visitors in part or all the home, depending on the specific situation. Additionally, the local PHU may recommend **additional outbreak management control measures** which may include **restriction of Essential Visitors**.

Physical Distancing

Physical distancing means keeping our distance from one another and limiting activities outside the home. When outside your home, it means **staying at least 2 metres (or 6 feet) away** from other people whenever possible. Physical distancing, when combined with proper hand hygiene and cough etiquette, has been shown to limit the spread of COVID-19.



Physical distancing also means making changes in your everyday routines in order to minimize close contact with others, including:

- Avoiding crowded places and non-essential gatherings
- Avoiding common greetings, such as handshakes or hugging
- Limiting contact with people at higher risk (e.g. older adults and those in poor health)

Queenston Place is required to facilitate visits in a manner aligned with physical distancing protocols per the Chief Medical Officer of Health (CMOH) Directive #3. Dedicated areas for indoor and outdoor visits have been arranged to support physical distancing between residents and visitors.

Physical distancing of 2 metres must be practiced during all non-essential visits on the residence property to reduce the risk of COVID-19 transmission. All visitors must comply with the residence's protocols on physical distancing as per the CMOH Directive #3.

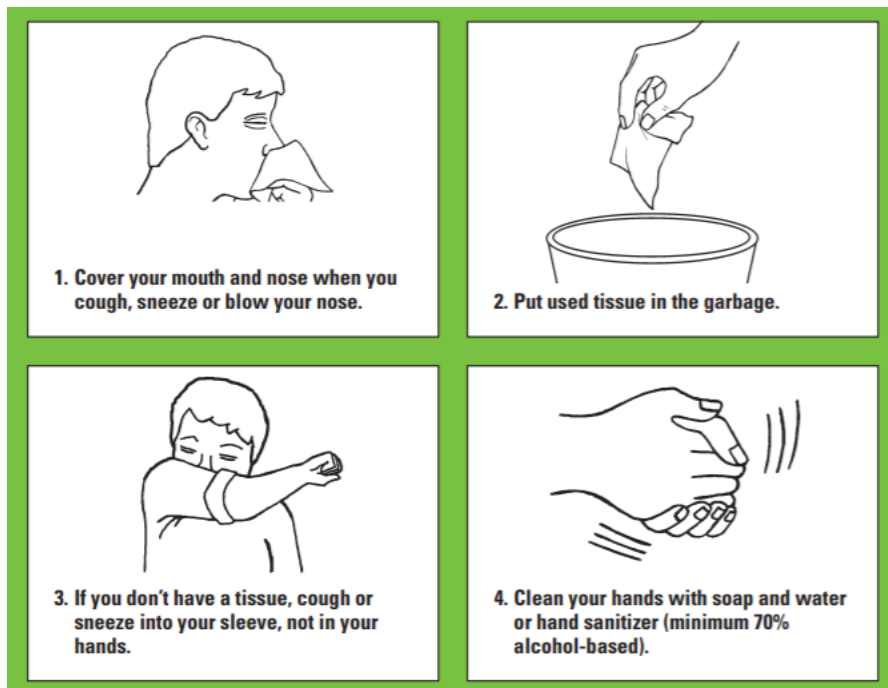


Read more about physical distancing (*Source: Public Health Ontario*)

Respiratory Etiquette

It is important to help reduce the spread of illnesses by using proper respiratory etiquette. This means that instead of covering your mouth with your hands when coughing or sneezing, use your sleeve or a tissue. This reduces the number of germs on your hands, though it is still important to wash your hands after coughing or sneezing.

Respiratory etiquette must be practiced by all visitors during all visits on the residence property to reduce the risk of COVID-19 transmission.



Following these steps is important:

1. Cover your mouth and nose when you cough, sneeze or blow your nose.
2. Put used tissue in the garbage.
3. If you do not have a tissue, cough or sneeze into your sleeve, not in your hand.
4. Clean your hands with soap and water or hand sanitizer.

Read more about respiratory etiquette (*Source: Public Health Ontario*)

Hand Hygiene

Hand hygiene is a general term referring to any action of hand cleaning and is a fundamental component of infection prevention and control. Hand hygiene relates to the removal of visible soil and removal or killing of transient microorganisms from the hands. Hand hygiene may be accomplished using an alcohol-based hand rub or soap and running water.

Touching your eyes, nose or mouth without cleaning your hands or sneezing or coughing into your hands may provide an opportunity for germs to get into your body. **Keeping your hands clean through good hygiene practice is one of the most important steps to avoid getting sick and spreading germs to others.**

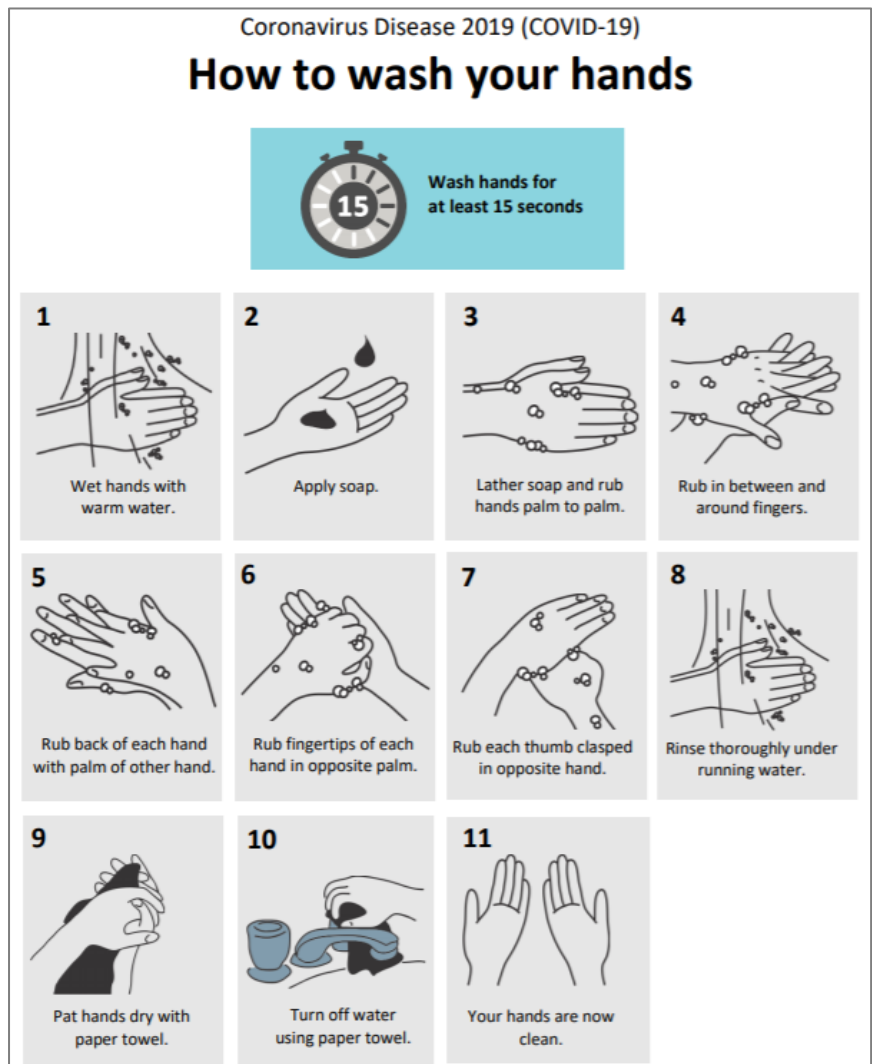
Prior to beginning each visit with a resident, all visitors must perform hand hygiene. Additionally, any time your hands become soiled for any reason during the visit, you must perform hand hygiene. Wash or sanitize your hands at the end of the visit as well.

A. Handwashing

Handwashing with soap and running water, as opposed to using hand sanitizer, must be done when hands are visibly soiled. Hand hygiene with soap and water – done correctly – removes organisms.

Follow these steps for hand washing: (hand wash for at least 15 seconds)

1. Wet hands with warm water.
2. Apply soap.
3. Lather soap and rub between fingers, back of hands, fingertips, under nails.
4. Rinse thoroughly under running water.
5. Dry hands well with paper towel.
6. Turn taps off with paper towel.



B. Hand Sanitizing

Hand sanitizers are very useful when soap and water are not available. When your hands are not visibly dirty, then a 70-90% alcohol-based hand sanitizer/rub should be used. It has been shown to be more effective than washing with soap (even using an antimicrobial soap) and water when hands are *not* visibly soiled.

Hand hygiene with alcohol-based hand sanitizer – correctly applied – kills organisms in seconds.

It is important when using an alcohol-based hand sanitizer to apply sufficient product such that it will remain in contact with the hands for a minimum of 15 seconds before the product becomes dry.

Follow these steps for sanitizing your hands: (rub hands for at least 15 seconds)

1. Apply 1-2 pumps of product to palms of dry hands.
2. Rub hands together, palm to palm, between and around fingers, back of hands, fingertips, under nails.
3. Rub hands until product is dry. Do not use paper towels.
4. Once dry, your hands are clean.



Read more about hand hygiene(Source: Public Health Ontario)

Infection Prevention and Control (IPAC) Practices

Infection Prevention and Control (IPAC) refers to evidence-based practices and procedures that, when applied consistently in health care settings, can prevent or reduce the risk of transmission of microorganisms to residents, staff and visitors.

All visitors must follow the residence's infection and prevention control protocols (IPAC), including proper use of face coverings/masks.

IPAC practices include:

1. Hand hygiene program
2. Screening and surveillance of infections
3. Environmental cleaning procedures that reflect best infection control practices
4. Use of personal protective equipment
5. Outbreak detection and management
6. Additional precautions specified to prevent the spread of infection
7. Ongoing education on infection control

Read more about best practices for infection prevention and control (Source: Public Health Ontario)

Proper Use of Personal Protective Equipment (PPE) Including Face Coverings/ Masks

PPE is clothing or equipment worn for protection against hazards. Examples of PPE include gloves, gowns, facial protection and/or eye protection. Using, applying, and removing PPE correctly is critical to reducing the risk of transmission of COVID-19.

All visitors must comply with the residence's IPAC protocols, including wearing a face covering or mask as required, donning and doffing of PPE and following instructions on use provided by the residence.

Essential Visitors:

- Support Workers and Caregivers are responsible for bringing their own PPE to comply with requirements for Essential Visitors as outlined in Directive #3. They are encouraged to work with the home to source the appropriate PPE to comply with these requirements, if needed.

Essential Visitors who are:

- Providing direct care to a resident must use a surgical/procedure mask while in the home, including while visiting the resident that does not have, or is not suspected to have COVID-19 in their room; and
- In contact with a resident who is suspected or confirmed with COVID-19 must wear appropriate PPE in accordance with Directive #5 and Directive #1.

General Visitors and Personal Care Service Providers:

- General Visitors and Personal Care Service Providers are responsible for bringing their own face covering/mask. If visitors do not bring their own face coverings/masks (and the residence is not able to provide surgical/procedure masks if the visit is indoors), they cannot visit.
- Visitors should use a **face covering/mask** if the visit is **outdoors**.
- If the visit is **indoors**, a **surgical/procedure mask** must be always worn.

Public Health Ontario:

[Recommended Steps: Putting on Personal Protective Equipment \(PPE\)](#)

Videos:

[Putting on Full Personal Protective Equipment](#)

[Taking off Full Personal Protective Equipment](#)

HOW TO WEAR A NON-MEDICAL FABRIC MASK SAFELY

[who.int/epi-win](https://www.who.int/epi-win)

Do's →



Clean your hands before touching the mask



Inspect the mask for damage or if dirty



Adjust the mask to your face without leaving gaps on the sides



Cover your mouth, nose, and chin



Avoid touching the mask



Clean your hands before removing the mask



Remove the mask by the straps behind the ears or head



Pull the mask away from your face



Store the mask in a clean plastic, resealable bag if it is not dirty or wet and you plan to re-use it



Remove the mask by the straps when taking it out of the bag



Wash the mask in soap or detergent, preferably with hot water, at least once a day



Clean your hands after removing the mask

Don'ts →



Do not use a mask that looks damaged



Do not wear a loose mask



Do not wear the mask under the nose



Do not remove the mask where there are people within 1 metre



Do not use a mask that is difficult to breathe through



Do not wear a dirty or wet mask



Do not share your mask with others

A fabric mask can protect others around you. To protect yourself and prevent the spread of COVID-19, remember to keep at least 2 metre distance from others, clean your hands frequently and thoroughly, and avoid touching your face and mask.



World Health Organization

Source: World Health Organization ([Non-Medical Fabric Mask](#)) *Poster modified to 2 metres

HOW TO WEAR A MEDICAL MASK SAFELY

who.int/epi-win

Do's →



Wash your hands before touching the mask



Inspect the mask for tears or holes



Find the top side, where the metal piece or stiff edge is



Ensure the colored-side faces outwards



Place the metal piece or stiff edge over your nose



Cover your mouth, nose, and chin



Adjust the mask to your face without leaving gaps on the sides



Avoid touching the mask



Remove the mask from behind the ears or head



Keep the mask away from you and surfaces while removing it



Discard the mask immediately after use preferably into a closed bin



Wash your hands after discarding the mask

Don'ts →



Do not Use a ripped or damp mask



Do not wear the mask only over mouth or nose



Do not wear a loose mask



Do not touch the front of the mask



Do not remove the mask to talk to someone or do other things that would require touching the mask



Do not leave your used mask within the reach of others



Do not re-use the mask

Remember that masks alone cannot protect you from COVID-19. Maintain at least 2 metre distance from others and wash your hands frequently and thoroughly, even while wearing a mask.

EPI·WIN



Source: World Health Organization ([Medical Mask](#)) *Poster modified to 2 metres

Appendix B – Signage for Visitors

Visits with Your Loved Ones During COVID-19

Expectations for Visits

Staying connected with others and the outdoors is important for everyone's well-being. To ensure the safety of residents and the whole retirement home community, all visitors must adhere to the following restrictions as per Ontario's Chief Medical Officer of Health ([December 7, 2020](#)) (CMOH, Directive #3). The home established visiting procedures to meet the health and safety needs of residents, staff, and visitors. Please refer to the ministry's [Retirement Home COVID-19 Visiting Policy](#) for more information (December 9, 2020).

The following requirements must be met for visits to happen, they include:

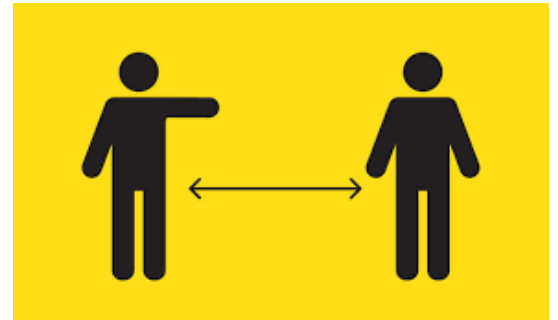
- There will be a limit of two visitors per resident for outdoor visits
- Visits can only be arranged if there is adequate staffing to ensure safe visiting
- Visits can only be arranged if there is adequate testing in the event of a suspected outbreak
- Visits can only be arranged if there is enough staffing support to coordinate and assist residents to/from dedicated visit areas
- Visits can only be arranged if there is enough personal protective equipment (PPE) for staff and residents
- Visits may be scheduled/pre-arranged, and time limited to ensure the health and safety needs of residents, staff and visitors is maintained
- Visitors must leave promptly at the end of the scheduled visit time to prevent overlap of scheduled visitors
- Visits can only be held in dedicated areas identified by the retirement home

- Visitors must pass the screening process every time they visit and must attest that they are not experiencing any COVID-19 symptoms
- Visitors must comply with the retirement home's infection and prevention control protocols (IPAC) which includes:
 - Visitors must always bring and wear a face covering/mask
 - Visitors must wash/sanitize hands before and after each visit
 - Visitors must practice physical distancing (2 metres/6 feet apart)
 - No hugging, kissing, hand holding, or shaking hands; this increases the risk for transmission)
 - General visitors cannot visit more than 1 resident at a time
- Essential Visitors are the only type of visitors allowed when a resident is self-isolating or symptomatic, the residence is in an outbreak, or is in a Public Health Unit (PHU) under Orange (Restrict), Red (Control) or Grey (Lockdown) per the [Provincial Framework](#).

Guidelines for Outdoor Visits

During COVID-19

- Practice physical distancing
- Keep at least 2 metres or 6 feet apart



- Wearing a face covering/mask always is a MUST
- Do not touch your face or others



- Wash or sanitize your hands before and after your visit



Appendix C - Visiting Schedule

Name of Residence:		Date:	
Visiting Hours:	From:	To:	

Time	Resident Name Suite #	Name of Visitor Phone Number Relationship to Resident	Name of Visitor Phone Number Relationship to Resident	Name of Visitor Phone Number Relationship to Resident
9:00 – 9:45 am				
Clean and Disinfect				
10:00-10:45 am				
Clean and Disinfect				
11:00 – 11:45 am				
Clean and Disinfect				
12:00-12:45 pm				
Clean and Disinfect				
1:00 – 1:45 pm				
Clean and Disinfect				
2:00 – 2:45 pm				
Clean and Disinfect				
3:00 – 3:45 pm				
Clean and Disinfect				
4:00 – 4:45 pm				
Clean and Disinfect				
5:00-5:45 pm				
Clean and Disinfect				
6:00 – 6:45 pm				
Clean and Disinfect				

Appendix D – Visitor Screening

COVID-19 ACTIVE SCREENING TOOL – VISITORS

This tool may be used for all visitors: Essential Visitors (Support Worker and Caregiver), General Visitors and Personal Care Service Providers.

Please have the visitor answer the following questions:

1.	Do you have any of the following new or worsening signs or symptoms?*		
	i. Cough (that is new or worsening (e.g. continuous, more than usual if chronic cough) including croup (barking cough, making a whistling noise when breathing) #	Yes	No
	ii. Shortness of breath (dyspnea, out of breath, unable to breathe deeply, wheeze, that is worse than usual if chronically short of breath)#	Yes	No
	iii. Sore throat (painful swallowing or difficulty swallowing)#	Yes	No
	iv. Rhinorrhea (runny nose) #	Yes	No
	v. Nasal congestion (stuffy nose) #	Yes	No
	vi. New olfactory or taste disorder (decrease or loss of smell or taste) #	Yes	No
	vii. Nausea and/or vomiting#	Yes	No
	viii. Diarrhea#	Yes	No
	ix. Abdominal pain that is persistent or ongoing#	Yes	No
	x. Chills	Yes	No
	xi. Headache that is new and persistent, unusual, unexplained, or long-lasting#	Yes	No
	xii. Conjunctivitis (pink eye) #	Yes	No
	xiii. Fatigue, lethargy, or malaise (general feeling of being unwell, lack of energy, extreme tiredness) that is unusual or unexplained#	Yes	No
	xiv. Myalgias (muscle aches and pain) that are unexplained, unusual, or long-lasting#	Yes	No
2.	Have you travelled or had close contact* with anyone who has travelled in the past 14 days?	Yes	No
3.	Do you have a fever?	Yes	No
4.	Have you had close contact* with anyone with respiratory illness or a confirmed or probable case of COVID-19?	Yes - Go to Question 5	No - Skip question 5
5.	Did you wear the required and/or recommended PPE according to the type of duties you were performing (e.g. goggles, gloves, mask and gown or N95 with aerosol generating medical procedures (AGMPs)) when you had close contact with a suspected or confirmed case of COVID-19?	Yes	No
<i>If individual passes screening questions 1 to 5:</i>			
	Take temperature (fever is a temp of 37.8°C or greater)	Yes	No
	The visitor attests to not be experiencing any of the typical and atypical symptoms.	Yes	No

*Not related to other known causes or conditions

+ Refer to the Ministry of Health [COVID-19 Reference Document for Symptoms](#) (September 21, 2020) in adapting your screening tool and keeping it up to date with the latest signs/symptoms.

*A close contact is defined as a person who provided care for the individual, including healthcare workers, family members or other caregivers, or who had other similar close physical contact (e.g. shaking hands, face-to-face contact within 2 metres and greater than 15 minutes, coughed on) or who lived with or otherwise had close prolonged contact (e.g. in a close environment such as a meeting room or hospital waiting room, in an aircraft sitting within two seats) with a probable or confirmed case of COVID-19 while the person was ill.

Screening Passed

- A. If the individual answers **NO to all of the questions from #1-4 above, they do not have a fever, AND** they have **attested** to not be experiencing any COVID-19 symptoms, they have passed screening and can enter the home **OR**
- B. If the individual answers **NO to #1-3 and YES to #4 and #5, they do not have a fever, AND** they have **attested** to not be experiencing any COVID-19 symptoms, they have passed screening and can enter the home.

The following steps should be taken by the home:

- The visitor should be told to self-monitor for symptoms
- Ask the Caregiver/General Visitor/Personal Care Service Provider to verbally attest they have read/re-read and watched/re-watched the required materials as applicable (prior to visiting any resident for the first time after this policy is released, and at least once every month thereafter) – See “SAMPLE COVID-19 SAFETY REVIEW – VISITORS”
- Education on all required protocols will be provided

The following steps must be taken by the Essential Visitor:

- Use hand sanitizer upon entering
- Verbally attest to having read/re-read and watched/re-watched the required materials as applicable (for homes not in outbreak, prior to visiting any resident for the first time after this policy is released, and at least once every month thereafter)
- If providing direct care to a resident, use a surgical/procedure mask while in the home, including while visiting the resident that does not have, or is not suspected to have COVID-19 in their room
- Essential Visitors who are in contact with a resident who is suspect or confirmed with COVID-19, must wear appropriate PPE in accordance with Directive #5 and Directive #1.

The following steps must be taken by the General Visitor/Personal Care Service Provider:

- Use hand sanitizer upon entering
- Verbally attest to having read/re-read and watched/re-watched the required materials as applicable (prior to visiting any resident for the first time after this policy is released, and at least once every month thereafter)
- If visiting a resident, only visit the one resident they are intending to visit and no other resident
- Use a face covering/mask if the visit is outdoors. If the visit is indoors, a surgical/procedure mask is required. Visitors are responsible for bringing their own face covering/mask.

Any non-adherence to these rules could be the basis for discontinuation of visits.

Screening Failed

- A. If the individual answers **YES to any question from #1-3**, or does not **attest** to not having COVID-19 symptoms, they have failed screening and cannot enter the home, **AND/OR**
- B. If the individual answers **YES to #4 and NO to #5** or does not **attest** to not having COVID-19 symptoms, they have failed screening and cannot enter the home.

The following steps should be taken by the **home**:

- If applicable, the visitor should be told to contact their health care provider or Telehealth (1-866-797-0000) to discuss their symptoms and/or exposure and seek testing.

The following steps must be taken by the **visitor**:

- If applicable, the visitor should go home to self-isolate immediately

Please refer to [May 6, 2020 Ministry of Health COVID-19 Screening Tool for Long-Term Care Homes and Retirement Homes.](#)

COVID-19 SAFETY REVIEW – VISITORS

Prior to visiting any resident for the first time after this policy is released, and at least once every month thereafter:

<u>For Caregivers/General Visitors/Personal Care Service Providers:</u>			
<i>The Caregivers/General Visitors/Personal Care Service Provider verbally attests that they have:</i>			
1.	Read/Re-Read the following documents:		
	I. The home’s visitor policy	Yes	No
	II. Public Health Ontario’s document entitled Recommended Steps: Putting on Personal Protective Equipment (PPE)	Yes	No
2.	Watched/Re-watched the following Public Health Ontario videos:		
	I. Putting on Full Personal Protective Equipment	Yes	No
	II. Taking off Full Personal Protective Equipment	Yes	No
	III. How to Hand Wash	Yes	No

Visitor Screening Tracker

Legend: Passed: **P-A** = NO to all questions #1-#4 + no fever + attestation OR **P-B** = NO to #1-3 & YES to #4 & #5 + no fever + attestation
 Failed: **F-A** = YES to any question #1-#3, no attestation AND/OR **F-B** = YES to #4 & NO to #5, no attestation

Date	Screening Time (Time In)	Visitor Name Printed	Contact Information (Phone/Email)	Name of Resident Being Visited	Visitor Type (Essential – i) Support Worker, ii) Designated Caregiver; General Visitor; Personal Care Service Provider)	Visiting Location	Screening result P-A or P-B; F-A and/or F-B	Temp	Time Out
10/8/20	8:45am	Jane Doe	XXX-XXX-XXXX Jane.doe@outlook.com	Tom Doe	Designated Caregiver	Indoor; Private Dining Room	P-A	36.5	9:30am

Appendix F– Caregiver Designation Form

Designation of Caregiver(s) Under COVID-19 Visitor Policy

Essential Visitors include a person performing essential support services (e.g., food delivery, inspector, maintenance, or health care services (e.g., phlebotomy) or a person visiting a very ill or palliative resident.

A **Caregiver** is a type of Essential Visitor who is **designated by the resident** or, if the resident is unable to do so, **their substitute decision-maker**. Caregivers visit to provide care to the resident (e.g., supporting feeding, mobility, personal hygiene, cognitive stimulation, communication, meaningful connection, relational continuity and assistance in decision-making). Examples of caregivers include family members who provide care, a privately hired caregiver, paid companions, and translators.

A resident may designate an external care provider as a Caregiver even though that individual would also be considered a Support Worker.

A **maximum of 2 Caregivers** may be designated per resident **in writing using this form**. Any subsequent changes will also be documented using this form.

Note: In order to limit infection spread, a resident and/or their SDM should be encouraged to change the designation of their Caregiver in limited circumstances, including in response to:

- A change in the resident's care needs that is reflected in the plan of care; and/or
- A change in the availability of a designated Caregiver, either temporary (e.g., illness) or permanent.

Caregiver Responsibilities:

- All visitors are responsible for adhering to applicable directives including Directive #3, Ministry for Seniors and Accessibility guidelines and [Name of Residence]'s visitor policy. Any non-adherence to the rules set out in the visitor policy could be the basis for discontinuation of visits for the non-compliant visitor.
- Visitors should consider their personal health and susceptibility to the virus in determining whether visiting a retirement home is appropriate.
- A maximum of 2 Caregivers per resident may visit at a time where:
 - The home is **NOT** in a **PHU under Orange (Restrict), Red (Control) or Grey (Lockdown)**, the home is **NOT** in an **outbreak**, and the resident is **NOT self-isolating or symptomatic**.
- A maximum of 1 Caregiver per resident may visit at a time where:
 - The home **IS** in a **PHU under Orange (Restrict), Red (Control) or Grey (Lockdown)**, the home **IS** in an **outbreak**, or the resident **IS self-isolating or symptomatic**.

***Note of exception:** If 2 Caregivers live together, they may visit a resident at the same time when the home is in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown), the home is in an outbreak, or the resident is self-isolating or symptomatic.

- Prior to visiting any resident, visitors must follow screening requirements, including active screening, and safety review as applicable (attest to reading/watching applicable materials first time policy released and at least once every month thereafter)
- Caregivers are responsible for bringing their own PPE to comply with requirements for Essential Visitors as outlined in Directive #3. If unable to obtain the appropriate PPE, they may be refused entry.

Resident's Name: _____	
Designated Caregiver #1: _____	Relationship to Resident: _____
Phone #: _____	Email: _____
Designated Caregiver #2: _____	Relationship to Resident: _____
Phone #: _____	Email: _____
Designated By: <input type="checkbox"/> Resident / <input type="checkbox"/> SDM	
Resident's Signature (if applicable): _____	
SDM's Signature (if applicable): _____	
Date Signed: _____	
<u>CHANGE OF DESIGNATED CAREGIVER(S):</u> (if applicable)	
Designated Caregiver #1: _____	Relationship to Resident: _____
Phone #: _____	Email: _____
Designated Caregiver #2: _____	Relationship to Resident: _____
Phone #: _____	Email: _____
Designated By: <input type="checkbox"/> Resident / <input type="checkbox"/> SDM	
Resident's Signature (if applicable): _____	
SDM's Signature (if applicable): _____	
Date Signed/Changes Take Effect: _____	

Appendix G – MSA Visitor Signage

All signs can be downloaded and printed here:


https://www.orcaretirement.com/wp-content/uploads/RetirementHomes-Visitors_Posters-EN-FINAL-july172020-FINAL-ua.pdf

V


Compassionate Care
Visits During COVID-19

This retirement home is currently experiencing an outbreak of COVID-19.

If you are an essential visitor, you may still be allowed to visit the home. You will have to be screened every time you are on the premises and before entry. Essential visitors include those performing essential support services (e.g., food delivery, inspector, maintenance, or health care services, such as mobile X-ray or foot care) or a person visiting a very ill or palliative resident.



For everyone's protection, you must wear a mask or face covering for all outside visits. You must wear a surgical mask for all inside visits. You are required to bring your own face covering or surgical mask. You must wear this equipment at all times.



Please maintain physical distancing, where possible.

Our staff may advise you of additional requirements. You must follow their directions – for the safety of residents, staff, and you.

V

Welcome to our home.

Our retirement home is currently free from COVID-19.

Before you can visit, you must answer a series of screening questions.

Clean your hands. When you arrive, clean your hands using hand sanitizer, rubbing thoroughly over all areas of your hands.

Wear a mask. Bring your own cloth mask or face covering for outdoor visits. You are also required to bring your own surgical mask for indoor visits. **You must wear your mask at all times during the visit.**

Stay in designated areas. To beat COVID-19 we need to follow public health advice. Please help our staff by keeping to designated visiting areas and please note that washrooms will not be available to guests during these visits.

Maintain physical distance. For everyone's safety, please avoid physical contact during your visit and do your best to stay two metres (six feet) apart at all times.


Clean your hands (again). Before you leave, clean your hands thoroughly using hand sanitizer. If you're wearing a surgical mask please dispose of it in the receptacle provided.

Our staff may have additional requests. Your cooperation will help them keep everyone safe. While we know how much your visit means to our residents, our priority will continue to be keeping our home outbreak-free for the safety of our residents and staff. For this reason, if visitors don't follow the above guidance they will not be permitted to return.

Your visits mean the world to our residents. Thank you for helping make everyone's visit successful and safe.



V


Visit ontario.ca/coronavirus 


Welcoming Visitors to Your Home During COVID-19

For visits to resume, your home must first meet ALL of the requirements on this checklist.

- Your home is NOT currently in outbreak
- You have a process for communicating with residents, families and staff about visits and associated procedures
- You have information for every visitor that provides clear directions on safety precautions, including:
 - Physical distancing
 - Respiratory etiquette
 - Hand hygiene
 - Infection prevention and control practices (IPAC)
 - Proper use of personal protective equipment (PPE), and
 - Limiting movement around the home
- You are responsible for ensuring visitors comply, and for establishing an approach to dealing with non-adherence to your home policies and procedures, including the discontinuation of visits.

- Your staff must administer an active screening questionnaire to all visitors and take their temperature. As part of this screening, visitors must attest that they:
 - Do not have symptoms (either typical or atypical) of COVID-19
 - Have not been exposed to COVID-19
- You have prepared a designated, outdoor visiting area that supports physical distancing.
- Visitors visiting residents must wear a face mask or cloth mask if visiting outdoors, or a surgical mask if visiting indoors. They are required to bring their own masks and homes are not required to provide them.
- You have protocols in place to maintain the highest of Infection Prevention and Control standards before, during and after visits.



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V

Welcome to our home.

Our retirement home is currently free from COVID-19.

Before you visit, you must answer a series of screening questions. For the safety of our residents and staff, please follow these directions during your visit today. If at any time a guest fails to follow these rules, we may be forced to discontinue future visits:

Clean your hands. When you arrive, clean your hands using hand sanitizer, rubbing thoroughly over all areas of your hands.

Wear a mask. Bring your own cloth mask or face covering for outdoor visits. You are also required to bring your own surgical mask for indoor visits. **You must wear your mask at all times during the visit.**

Stay in designated areas. To beat COVID-19 we need to follow public health advice. Please help our staff by keeping to designated visiting areas. Please note that washrooms will not be available to guests during these visits.

Maintain physical distance. For everyone's safety, avoid physical contact during your visit and do your best to stay two metres (six feet) apart at all times.

Clean your hands (again). Before you leave, clean your hands thoroughly using a hand sanitizer. If you're wearing a home-provided surgical mask please dispose of it in the receptacle provided.

Clean your hands (again). Before you leave, clean your hands thoroughly using hand sanitizer. If you're wearing a surgical mask please dispose of it in the receptacle provided.

Our staff may have additional requests. Your cooperation will help them keep everyone safe. While we know how much your visit means to our residents, our priority will continue to be keeping our home outbreak-free for the safety of our residents and staff. For this reason, if visitors don't follow the above guidance they will not be permitted to return.

Your visits mean the world to our residents. Thank you for helping make everyone's visit successful and safe.



Visit ontario.ca/coronavirus 

Welcome to our home.

Our retirement home is currently free from COVID-19.

Our staff may have additional requests. Your cooperation will help them keep everyone safe. While we know how much your visit means to our residents, our priority will continue to be keeping our home outbreak-free for the safety of our residents and staff. For this reason, if visitors don't follow the above guidance they will not be permitted to return.

Your visits mean the world to our residents. Thank you for helping make everyone's visit successful and safe.



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