

Policy & Procedure:	<i>Visitors Protocols</i> Administrative Division Long-Term Care, Maple View Lodge
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Legislative Authority:

	Policy No.:	IPAC-N-10.44
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Past Revisions:	July 2020, Sept. 2020, Nov. 2020, Feb. 2021, Mar. 2021 Nov. 2021, Jan, 2022, Mar. 2022	
Current Revision:	June 2022	

VISITOR PROTOCOLS

POLICY:

The role that families, friends, and visitors play in providing caregiving and emotional supports is important to the quality of life for long term care residents. Visitors are welcome to visit their loved one at any time that is mutually agreed upon and best suits the resident and the visitor during a non-outbreak situation.

During an outbreak of a communicable disease, an outbreak of a disease of public health significance, an epidemic, or a pandemic, visitors are restricted to essential visitors, subject to applicable law.

There are four types of essential visitors as follows:

- **Caregivers:** designated by the resident/substitute decision maker to provide one or more forms of support or assistance to meet resident care needs, including providing direct physical support e.g. activities of daily living, social, spiritual, or emotional support, whether the individual is paid or unpaid. Must be 16 years of age or older. The approval of a parent or legal guardian is required to permit individuals under the age of 16 years to be designated as a caregiver;
- **Support Workers:** persons who visit the Home to provide support to the critical operations of the Home or to provide essential services to residents;
- **Persons visiting very ill residents for compassionate reasons:** to include but not limited to hospice or end of life care; and
- **Government Inspector:** with a statutory right to enter a long-term care community to carry out their duties.

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All other visitors who do not fall into the essential visitor category above are considered general visitors and are not permitted during an outbreak in the Home or an area of the Home or to visit an isolating resident.

- **General Visitors:** is not an essential visitor and provides non-essential services either to the operations of the Home or to a particular resident or groups of residents. These visits are for social reasons as well as providing personal care services, entertainment, or individuals touring the Home. General visitors under the age of 14 must be accompanied by an adult.

Long-term care team members, attending physicians or nurse practitioners, volunteers, and placement students are not considered visitors, as their access is determined by the Home. Children under the age of 1 year are permitted and are not considered visitors.

All visitors are required to wear a medical/surgical mask at all times when indoors. Additional personal protective equipment may be required based on point of care risk assessment, when the Home is in outbreak, or as otherwise determined by public health.

Visits may be ended at any time for any visitor who repeatedly fails to adhere to the Home’s visitor policy requirements. Where the Home has previously ended a visit, or temporarily prohibited a visitor, additional education/training must be provided to the visitor before visitation can be resumed. If a caregiver is temporarily prohibited, the resident/substitute decision maker may designate an alternative individual as the caregiver to help meet resident care needs.

Note: Visitor protocols may change across regional jurisdictions as per the Chief Medical Officer of Health’s direction and will supersede this policy requirement.

PROCEDURE:

Infection Control Lead or designate will:

- 1) Ensure that there is a process for visitors to sign in/out and conduct active screening.
- 2) Ensure that the environment is laid out to adhere to infection prevention and control measures to include but not be limited to flow of team members/visitors and residents to and from areas throughout the Home signage, and furniture placement.

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- 3) Ensure there is an outdoor/indoor space designated to greet and screen visitors prior to the visit.

The outdoor space:

- Provided access to resident spaces on the grounds. 6 feet/2 metres physical distancing between other residents and family members visiting is required.
- Ensure privacy for the resident and family

The indoor space will:

- Have an active screening location and process;
- Be a designated location in the home, preferably a space close to main entrance/resident home area i.e. lounge area, multipurpose room.
- Determine if a resident room is appropriate for an indoor visit. Take into account the activities to be performed during the visits, if the resident is sharing a room, and whether isolation precautions are in place;
- Provide for 2m/6 feet physical distancing between individuals;
- Ensure privacy for the resident and family; and
- Use physical barriers such as furniture spaced to meet physical distancing requirement.

- 4) Communicate with residents and families the process for indoor/outdoor visits, prioritizing emotional and/or clinical decline of residents.
- 5) Ensure there is a process to maintain visitor logs for all visits to the Home for a minimum of 30 days where it can be readily available upon request from public health for contact tracing purposes. The log will contain at minimum;
 - The name and contact information of the visitor
 - Time and date of the visit
 - The purpose of the visit (e.g. the name of the resident visited)
- 6) Provide a copy of the current version of the Visitor Protocols policy to Residents' Council and Family Council (if any).
- 7) Ensure that visitors have access to the Visitor Protocols policy.

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The Resident Services Supervisor or designate will:

- 1) Coordinate the process of scheduling family visits, time for virtual visits, maintenance of protocols, documentation, and auditing.
- 2) Ensure essential visitors who are designated as caregivers are regularly reviewed/updated on the Designated Caregiver-Attestation document. Ensure screeners are aware of this document.
- 3) Communicate designated caregivers to the RN of any changes to be updated in PCC.
- 4) Inform the resident/POA/SDM that the Home must be notified of any changes in who is assigned as the designated caregiver(s).
- 5) Ensure visitors are educated about physical distancing, respiratory etiquette, hand hygiene, IPAC practices, and proper use of PPE.
- 6) Ensure essential designated caregivers have attested (by signing the Designated Caregiver Attestation Form/kiosk declaration) prior to visiting any resident for the first time and at times when there are changes in Infection Prevention and Control (IPAC) practices. . The following guidance documents will be used to support IPAC education and training.
 - The Visitor policy
 - Public Health Ontario’s document entitled Public Health Ontario’s Recommended Steps: Putting on Personal Protective Equipment (PPE)
 - Watched/Re-watched the following Public Health Ontario videos
 - i. Putting on Full Personal Protective Equipment;
 - ii. Taking off Full Personal Protective Equipment; and
 - iii. How to Hand Wash
- 7) Appoint team member(s) to conduct active screening and provide education to all visitors.
- 8) If applicable, ensure the visiting area is cleaned between visits, including cleaning and disinfection of all chairs, rails, and other surfaces.
- 9) Maintain all records related to the family visiting process, including all changes to designated caregiver(s).

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- 10) Cancel and reschedule the visit for any of the following reasons:
- The Home is located in an area identified as having a higher community spread of COVID-19
 - The Home goes into outbreak.
 - Resident is experiencing symptoms or is self-isolating
 - Inclement weather (i.e. heat wave or rain) if visit is outdoors
 - Operational needs require team members to support resident care
 - Other emergencies (i.e. Code Red)
 - As directed by Public Health during an outbreak. Regional framework identifies cancelation of general visitors.

The Nurse or designate will:

- 1) Update the residents' profile section in PCC indicating who the essential care givers are, and inform the IPAC Lead if families call to request a change/addition to essential caregiver status.

All Team Members will:

- 1) Participate in and support visiting of residents as needed.
- 2) Guide any visitor with PPE utilization as needed.
- 3) Seek support from nurse in charge and/or manager(s) to address questions and concerns, including immediate advice to support individual resident and family needs.

The Visitor will:

- 1) Participate in the active screening process, testing (as required), perform hand hygiene, and don required personal protective equipment during non-outbreak and outbreak conditions (where permitted to visit) throughout the visit as directed by the Home.
- 2) For indoor visits, show proof of being fully vaccinated against COVID-19 to enter the Home. Those who do not show proof of vaccination will be offered outdoor space to visit with their loved one where appropriate.
- 3) Follow all infection prevention and control measures in place as directed by the Home.

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- 4) Coordinate with the Resident Services Supervisor or designate and obtain approval prior to bringing any pets to the Home.

NOTE: Any non-compliance with the visitor responsibilities in this policy will result in discontinuation of the visit for the non-compliant visitor.

References:

COVID-19 Guidance Document for LTCH in Ontario, COVID-19, April 8, 2022 available at:
<https://www.ontario.ca/page/covid-19-guidance-document-long-term-care-homes-ontario>

CMOH Directive #3 available at:
https://health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/directives/LTCH_HPP_A.pdf

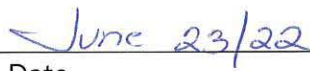
MOH COVID-19 Provincial Testing Guidance Update available at:
http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_testing_guidance.pdf

- Attachments:**
- IPAC-N-10.44(a) Visitor Information Protocols (Website)
 - IPAC-N-10.44(b) Visitor Protocol and Surveillance Guidance Document
 - IPAC-N-10.44(c) Designated Caregiver-Attestation Form
 - IPAC-N-10.44(d) Visitor-contractor Acknowledgement Form
 - IPAC-N-10.44(e) Compassionate Entry for Travelers Canada
(Letter and Authorization Release)
 - IPAC-N-10.44(f) Visitor Education/Testing Tracking Form

Approved By:



 Tracy Jordan, Administrator
 Long-Term Care, Maple View Lodge



 Date