Ministry of Children, Community and Social Services

Visitor’s Guidelines: Re-Opening of Congregate Living Settings

Important note for youth justice service providers. The Ministry’s Youth Justice Division is working with key stakeholders on operational guidance with respect to the safety, security and confidentiality of the youth we serve, their families/approved visitors and employees with a goal of resuming in-person visits and reintegration leaves. In the meantime, contact with family and approved visitors is to continue via telephone calls and virtual visits, where operationally feasible.

A. Introduction

On April 23, 2020, the government released its COVID-19 Action Plan for Vulnerable People. This included guidance on limiting non-essential visitors in congregate living settings to reduce exposure and prevent the spread of COVID-19. The action plan was followed with subsequent guidance regarding the access of essential visitors into a home on May 28, 2020 (Covid-19 Guidance: Congregate Living for Vulnerable Populations) and on non-essential visits in outdoor spaces (MCCSS memorandum issued on June 12, 2020).

The Ministry recognizes the important role that families, friends and other visitors play in providing social, caregiving and emotional supports that contribute to the quality of life of people residing in congregate living settings.

This document is being issued to revise the existing outdoor visitor policy and to support the resumption of personal/indoor visits in MCCSS funded and/or licensed congregate living settings. This document expands the visitation options available to residents, families, friends and other people who play a key role in the lives of those who live in congregate living settings by supplementing the existing policy permitting outdoor visits.

The ministry is proposing gradual, phased resumption of in-home visits guided by the following principles:

- Safety: Any approach to visiting inside a congregate living setting must consider the health and safety needs of residents, staff, and visitors, and ensure risks are mitigated.
- Emotional Well-Being: Accommodating visitors is intended to support the emotional well-being of residents and their families/friends by reducing any potential negative impacts related to social isolation.
Equitable Access: All individuals seeking to visit a resident be given equitable visitation access, consistent with resident preference and within reasonable restrictions that safeguard residents and staff.

Flexibility: Any approach to visiting in congregate living settings must consider COVID-19 spread in their community and the physical/infrastructure characteristics of the home, its staffing availability, and the current status of Personal Protective Equipment (PPE) levels for staff and residents.

Agencies should also encourage visitors to consider their personal health and susceptibility to the virus in determining whether visiting a congregate living setting is appropriate. Where in-person visits are not appropriate or advisable, virtual visiting options should be provided.

As the outbreak evolves in Ontario, direction regarding visits at congregate living settings will be adjusted as necessary, keeping the health, safety and emotional well-being of residents and staff at the forefront.

B. Congregate Living Setting Requirements

The following baseline requirements for congregate living settings must be met prior to the site being able to accept any non-essential visitors:

1. The congregate living site must NOT be currently in outbreak (i.e. at least one active COVID-19 case among a resident or staff member).
   a. In the event that a site experiences an outbreak, all non-essential visits must be discontinued. In accordance with prior operational direction, sites in outbreak must establish compliance with all CMOH directives for congregate living settings in outbreak and follow directions from the local public health unit (PHU).

2. The agency has established:
   a. A process for communicating with residents, families and staff about the resumption of in-home visits and the associated procedures, including but not limited to infection prevention and control (IPAC), scheduling and any home-specific policies.
      i. This process must include sharing an information package with visitors on IPAC, masking and other operational procedures such as limiting movement inside the congregate care setting, if applicable, and restricting visitor use of the washroom (except for hand hygiene purposes) and ensuring visitors’ agreement to comply prior to each visit. Supporting materials must include an approach to dealing with non-adherence to these policies and procedures, including the discontinuation of visits.
   b. Dedicated areas for both indoor and outdoor visits.
   c. A list/log of visitor available for relevant staff to access.
3. Protocols are in place to maintain the highest of IPAC standards prior to, during and after visits, which include that:
   a. The non-essential visitor must wear a non-medical mask (essential visitors must wear a surgical/procedure mask) when visiting inside or outside the home and maintain proper respiratory etiquette and hand washing be followed for visitors and residents before and after visiting;
   b. Education on all required protocols will be provided by the home;
   c. There are designated spaces outdoors and indoors (as applicable);
   d. There is adequate staffing to implement the protocols related to visitations (alongside continuation of ongoing operations within the setting);
   e. Enhanced cleaning and disinfection of the space will occur following recommended IPAC standards;
   f. Where appropriate, the congregate living setting is able to facilitate visits in a manner aligned with physical distancing protocols, including identifying a space(s) where visiting takes place and the areas that are off-limits to visitors (e.g. bathrooms (except for hand hygiene purposes as needed), common areas, etc.); and,
   g. Any non-adherence to these rules could be the basis for discontinuation of visits.

C. Visitor Requirements

1. Prior to each visit, the visitor must:
   a. Pass an active screening questionnaire that screens for signs and symptoms of and potential exposures to COVID-19.
   b. Previous requirements stating that all non-essential (i.e. family, friend) visitors attest that they tested negative for COVID-19 within the previous 2 weeks and subsequently not tested positive are no longer required.
2. Read and agree to the parameters of the visit set out by the agency in compliance with this document and public health direction.
3. Comply with the congregate living setting’s infection, prevention and control (IPAC) protocols, including proper use of non-medical masks.
   a. Visitors should use a non-medical mask AT ALL TIMES during the visit regardless of whether it is conducted indoors or outdoors. Non-essential visitors are responsible for bringing their own non-medical mask for visits.
   b. Any non-adherence to these rules could be the basis for the discontinuation of visits.

Essential Overnight Absences:

An essential overnight absence (e.g. to a family home) is one considered necessary to maintain the health, wellness and safety, or any applicable legal rights, of a resident. Agencies should take careful consideration as to whether an overnight absence is truly vital to maintain the health, wellness and safety of a resident.
This should include whether the support or care to be provided during the absence could be reasonably, safely, and fully assumed by agency staff, or reasonably, safely and fully assumed by an essential visitor to the resident at the residence under the existing visitor policy (instead of through an absence).

Upon return from any overnight absence the resident must:

1. Pass active screening
2. Self-isolate / limit contact with other residents for 14 days
3. Using a face covering, where possible, in common areas like dining rooms, recreation areas etc.
4. Self-monitor for symptoms

D. Timeline

Subject to the requirements above, the gradual reopening of congregate living settings to visitors will be implemented using the following schedule, taking into consideration regional COVID-19 prevalence and local risks.

Phase 1

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Type of Visit</th>
<th>Number of Visitors Allowed (Visitor is defined as any family member, close friend or neighbour)</th>
<th>Scheduling of Visits Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>June 18, 2020</td>
<td>Outdoor Visiting Only</td>
<td>Up to 2 visitors at a time per resident to allow for appropriate physical distancing.</td>
<td>Yes, visits must be scheduled in advance. This will allow for appropriate physical distancing (where possible) and staffing coverage. Visits can be time-limited in order to accommodate more families/visitors; however, visits must not be restricted to less than 30 minutes.</td>
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<td></td>
<td>Agencies will create a dedicated area outside the building where visitors can meet with residents. Staff will accompany residents out of and into the home.</td>
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<tr>
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<td>Type of Visit</td>
<td>Number of Visitors Allowed <em>(Visitor is defined as any family member, close friend or neighbour)</em></td>
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<td>Agencies should establish scheduling practices that:</td>
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<td>(1) Provide meaningful and equitable access to visits for all residents; and, consider the staffing and space capacity available to maintain safety of residents, staff and visitors.</td>
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<td>(2) Consider the staffing and space capacity available to maintain the safety of residents, staff and visitors.</td>
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<td>Agencies may consider the needs of residents in prioritizing visits for example due to relative clinical or emotional decline. A sufficient block of time should be made available by agencies to allow for, at minimum, one visit per week per resident.</td>
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### Phase 2

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<tr>
<th>Effective Date</th>
<th>Type of Visit</th>
<th>Number of Visitors Allowed</th>
<th>Scheduling of Visits Required</th>
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<tbody>
<tr>
<td>July 22, 2020</td>
<td>Outdoor Visiting + Indoor Visiting for non-essential visitors</td>
<td>Up to 2 visitors at a time per resident for outdoor visiting; or 1-2 visitor(s) at a time per resident for indoor visiting to allow for appropriate physical distancing</td>
<td>Yes, visits must be scheduled in advance and visits are for one resident at a time. This will allow for appropriate physical distancing (where possible) and appropriate staffing coverage. Visits can be time-limited to ensure equitable access and allow the agency to accommodate more families/visitors however, visits must not be restricted to less than 30 minutes. Agencies should establish scheduling practices that: (1) Support meaningful and equitable access to visits for all residents; and, (2) Consider the staffing and space capacity available to maintain the safety of</td>
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<td>Non-essential visitors must undergo a screening administered by staff and attest that they are not experiencing any COVID-19 symptoms before being admitted for outdoor and indoor visits. A negative COVID-19 test result is not mandatory. Outdoor visits are preferred wherever possible as a result of the reduced risk of infection due to continuous exterior airflow.</td>
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<td><em>(Visitor is defined as any family member, or friend)</em></td>
<td>residents, staff and visitors. Agencies may consider the needs of residents in prioritizing visits, for example, due to relative clinical or emotional decline. Upon resumption of indoor visiting, agencies should establish a procedure to escort visitors to the space/room where the visit will take place. Indoor visits should not take place in a shared bedroom. A sufficient block of time should be made available by agencies to allow for, at minimum, one visit per week per resident.</td>
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Appendix: Existing Essential Visitors Direction


On May 28, 2020, the Guidance: Congregate Living for Vulnerable Populations was issued and provided further recommendations that congregate living settings develop policies that limit non-essential visitors.

Current Direction Limiting entry:

• Eliminate all non-essential entry to congregate care settings.

  o An essential visitor is generally a person (including a contractor) who performs essential services to support the ongoing operation of a service agency or is a person considered necessary by a service agency to maintain the health, wellness and safety, or any applicable legal rights, of a resident.

  o Who is considered an essential visitor and the way in which the visit is exercised (e.g. in-person, virtual) may change depending on whether there is an active outbreak, the nature of the congregate living setting, the individuals served, as well as advice provided by the local public health unit.

• Agency employers should take careful consideration as to when and whether an in-person visitor is truly vital to maintain the health, wellness and safety of a resident. This should include whether the support or care provided by the visitor can be reasonably, safely, and fully assumed by agency staff.

• For residents under the age of 18, employers should take all measures to ensure ongoing visitation rights are maintained in compliance with requirements under the Child, Youth and Family Services Act, 2017. Consideration should be given to using virtual visits.

• A log of all essential visitors who are given entry, with whom they visit, and/or what areas of the residence they occupy should be maintained.