Welcoming visitors to your home during COVID-19.

Homes must have a visitor policy in place that is compliant with the Chief Medical Officer of Health's Directive #3 and guided by the ministry's COVID-19 Visiting Policy.

At minimum, your visitor policy must:

✓ Follow the guiding principles
✓ Identify essential visitors
✓ Identify general visitors
✓ Define your approach for accessing the home in case of outbreak
✓ Define your approach for accessing the home when not in outbreak
✓ Provide education/training for visitors
✓ Formalize screening measures
✓ Address personal protective equipment (PPE)
✓ Outline protocols for managing safe visits
✓ Spell out consequences for non-adherence by visitors

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✔ Follow the guiding principles

- Be informed by the ongoing COVID-19 situation in your community and home and be flexible to reassess as circumstances change.
- Be based on principles such as safety, emotional well-being and flexibility, and address concepts such as compassion, equity, non-maleficence, proportionality (i.e., to the level of risk), transparency and reciprocity (i.e., providing resources to those who are disadvantaged by the policy).

✔ Identify essential visitors

- Specify that essential visitors be defined as including people performing essential support services (e.g., food delivery, inspector, maintenance, or health care services) or people visiting very ill or palliative residents.
- For clarity, in addition to the above Directive #3 requirement, your visitor policy should also specify that essential visitors include support workers and caregivers as defined in this policy. However, an essential visitor does not need to be a support worker or caregiver, as long as they meet the definition under Directive #3.
- A support worker is a type of essential visitor who is visiting to perform essential support services for the home or for a resident at the home.
- A caregiver is a type of essential visitor who is designated by the resident and/or their substitute decision-maker and is visiting to provide direct care to the resident (e.g. supporting feeding, mobility, personal hygiene, cognitive stimulation, communication, meaningful connection, relational continuity and assistance in decision-making).

Caregivers

- Caregivers must be at least 18 years of age.
- The decision to designate an individual as a caregiver is entirely up to the resident and/or their substitute decision-maker and not the home. A maximum of two caregivers may be designated per resident at a time. The designation should be made in writing to the home, and homes should have a procedure for documenting caregiver designations.
- A resident and/or their substitute decision-maker may change a designation in response to a change in the resident's care needs that is reflected in the care plan, and/or or a change in the availability of a designated caregiver, either temporary (e.g. illness) or permanent.

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- **Identify general visitors**
  - A general visitor is a person who is not an essential visitor and is visiting:
    - to provide non-essential services. This person may or may not be hired by the home or the resident and/or their substitute decision maker, and/or
    - for social reasons (e.g. family members or friends) that the resident or their substitute decision-maker assess as different from direct care, including care related to cognitive stimulation, meaningful connection, and relational continuity.

- **Define your approach for accessing the home in case of outbreak**
  - Essential visitors are the only type of visitors allowed when a resident is self-isolating or symptomatic, or a home is in an outbreak, subject to direction from the local public health unit.
  - Only one caregiver per resident may visit at a time when a resident is self-isolating or symptomatic, or a home is in an outbreak, subject to direction from the local public health unit.
  - General visitors are not permitted when a resident is self-isolating or symptomatic, or a home is in an outbreak.

- **Define your approach for accessing the home when not in outbreak**
  - Include criteria for defining the number and types of visitors allowed per resident when the home is not in an outbreak.
  - Two caregivers per resident may visit at a time when the home is not in outbreak and the resident is not self-isolating or symptomatic.

- **Provide education/training for visitors**
  - Include education about physical distancing, respiratory etiquette, hand hygiene, infection prevention and control practices and proper use of PPE.

- **Formalize screening measures**
  - Include screening protocols, specifically that visitors must be actively screened on entry for symptoms and exposures to COVID-19, including temperature checks, and will not be admitted if they do not pass the screening.
  - Include visitor attestation to not be experiencing any of the typical and atypical symptoms.
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• Homes should ask all support workers, all caregivers and any general visitor who is visiting indoors, to verbally attest to the home that they have tested negative for COVID-19 within the previous two weeks and not subsequently tested positive.

• Homes should ask caregivers and general visitors to verbally attest to the home that, in the last 14 days, they have not visited another resident who is self-isolating or symptomatic; and/or home in an outbreak.

• Prior to visiting any resident for the first time after this policy is released, and at least once every month thereafter, your home should ask caregivers and general visitors to verbally attest that they have read/re-read your visitor policy.

• Prior to visiting any resident for the first time after this policy is released, the home should provide training to caregivers that addresses how to safely provide direct care, including putting on and taking off required PPE, and hand hygiene.

• Your visitor policy should include guidance from the following Public Health Ontario resources to support IPAC and PPE education and training for:

  **Caregivers**
  • Guidance document entitled Recommended Steps: Putting on Personal Protective Equipment (PPE).
  • Video entitled Putting on Full Personal Protective Equipment.
  • Video entitled Taking off Full Personal Protective Equipment.
  • Video entitled How to Hand Wash.

  **General visitors**
  • Guidance document entitled Recommended Steps: Putting on Personal Protective Equipment (PPE).
  • Video entitled Putting on One-Piece Facial Protection.
  • Video entitled Taking off One-Piece Facial Protection.
  • Video entitled How to Hand Wash.

- **Address personal protective equipment (PPE)**

  • Comply with the home’s IPAC protocols, including donning and doffing of PPE.
  • Clearly state that if the home is not able to provide surgical/procedure masks, no visitors should be permitted inside the home. Essential visitors who are provided with appropriate PPE by their employer may enter the home.
  • Visitors should wear a face covering if the visit is outdoors. If the visit is indoors, a surgical/procedure mask must be worn at all times.

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- Essential visitors 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 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.

☑️ Outline protocols for managing safe visits

- Include allowances and limitations regarding indoor and outdoor visiting options.
- Include a process for communicating with residents and families about policies and procedures.
- Stipulate that general visits should be pre-arranged and that visitors must only visit the resident they are intending to visit, and no other resident.
- Homes are responsible for maintaining a list of visitors and keeping it available for staff to access.
- Homes may not require scheduling, or restrict the length or frequency, of visits by caregivers.
- For general visitors, the scheduling of visits will continue to be up to individual homes' discretion, as long as residents are assured at least one visit with a maximum of two general visitors per week, lasting a minimum of 30 minutes.

☑️ Spell out consequences for non-adherence by visitors

- State that non-compliance with the home's policies could result in a discontinuation of visits for the non-compliant visitor.
- The home's visitor policy should include procedures for responding to non-adherence by visitors in the home, in alignment with Directive #3 and this policy, that:
  - Provide strategies for supporting visitors in understanding and adhering to the home’s visitor policy.
  - Recognize visits are critical to supporting a resident’s care needs and emotional well-being.
  - Consider the impact of discontinuing visits on the resident’s clinical and emotional well-being.
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- Reflect and are proportionate to the severity of the non-adherence.
- Where the home has previously ended a visit by or temporarily prohibited a visitor, specify any education/training the visitor may need to complete before visiting the home again.
- Protect residents, staff and visitors in the home from the risk of COVID-19.
- Homes have the discretion to end a visit by any visitor who is repeatedly failing to adhere to the home’s visitor policy, provided:
  - The home has explained the applicable requirement to the visitor;
  - The visitor has the resources to adhere to the requirement (e.g. there is sufficient space to physically distance, the home has supplied the PPE and demonstrated how to correctly put on PPE, etc.); and
  - The visitor has been given sufficient time to adhere to the requirement.
- Homes should document where they have ended a visit due to non-adherence.
- Homes have the discretion to temporarily prohibit a visitor in response to repeated and flagrant non-adherence with home’s visitor policy. In exercising this discretion, homes should consider whether the non-adherence:
  - Can be resolved successfully by explaining and demonstrating how the visitor can adhere to the requirements.
  - Is with requirements that align with instruction in Directive #3 and guidance in this policy.
  - Negatively impacts the health and safety of residents, staff and other visitors in the home.
  - Is demonstrated continuously by the visitor over multiple visits.
  - Is by a visitor whose previous visits have been ended by the home.
- Any decision to temporarily prohibit a visitor should:
  - Be made only after all other reasonable efforts to maintain safety during visits have been exhausted;
  - Stipulate a reasonable length of the prohibition;
  - Clearly identify what requirements the visitor should meet before resuming visits (e.g. reviewing the home's visitor policy, reviewing specific Public Health Ontario resources, etc.); and,
  - Be documented by the home.