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INTRODUCTION Family and friends are the most important source of emotional and practical support for the residents living in long-term care facilities.

The expectations and protocols that guide visitation in our Home have been developed with the aim of supporting residents to receive visitors while mitigating the risk of resident, visitor, and staff exposure to an infection of a communicable disease, or an outbreak of a disease of public health significance, which could lead an epidemic or a pandemic.

RESIDENTS BILL OF RIGHTS

1. Every Resident has the right to their lifestyle and choices respected
2. Every Resident has the right to communicate in confidence, receive visitors, of their choice and consult in private with any person without interference.
3. Every Resident has the right to meet privately with their spouse, or another person in a room that assures privacy.
4. Every Resident has the right to exercise the rights of a citizen
5. Every Resident has the right to ongoing and safe support from their caregivers to support their physical, mental, social and emotional well-being and their quality of life and to assistance in contacting a caregiver or other person to support their needs
6. Every Resident who is dying or who is very ill has the right to have family and friends present 24 hours per day.

LEGISLATION The Visitor Policy under the Fixing Long Term Care Act (FLTCA), 2021 and O. Regulation 246/22

O. Regulation 246/22 s. 267 states that:

- (1) Every licensee of a long term care home shall establish and implement a written visitor policy which at minimum:
 - (a) includes the process for visitor access during non-outbreak situations and during an outbreak of a communicable disease or an outbreak of a disease of public health significance, an epidemic or a pandemic;

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- (b) includes the process of documenting and keeping written record of,
 - i) the designation of a caregiver, and
 - ii) the approval from the parent or legal guardian to permit persons under 16 years of age to be designated as a caregiver, if applicable
- (c) complies with all applicable laws including any applicable directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or a medical officer of health appointed by the *Health Protection and Promotion Act*; and
- (d) ensure that essential visitors continue to have access to the long-term care home during an outbreak of a communicable disease, an outbreak of a disease of public health significance, an epidemic or a pandemic, subject to any applicable law;
- (2) Every licensee of a long-term care home shall maintain visitors logs for a minimum of 30 days which includes, at a minimum,
 - (a) the name and contact information of the visitor;
 - (b) the time and date of the visit;
 - (c) the name of the resident visited
- (3) Every licensee of a long-term care home shall ensure that the current version of the visitor policy is provided to the Residents’ Council and Family Council, if any
- (4) in this section, “essential visitor” means
 - (a) a caregiver,
 - (b) a support worker who visits a home to provide support to the critical operations of the home or to provide essential services to residents
 - (c) a person visiting a very ill resident for compassionate reasons including, but not limited to, hospice services or end-of-life care, or

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- (d) a government inspector with statutory right to enter a long-term care home to carry out their duties

GUIDING PRINCIPLES

The visitation allowances and restrictions at the Home will be guided by the following principles:

Safety: Any approach to visiting must balance the health and safety needs of residents, staff, and visitors, and ensure risks are mitigated;

Emotional Wellbeing: To support the mental and emotional well-being of residents and their families/significant others 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 reasonable restrictions that safeguard the resident.

Flexibility: The physical/infrastructure characteristics of the Home, its workforce or human resources availability, whether the Home is in outbreak and the current status of the Home with respect to PPE and staffing availability;

Equality: Residents have the right right to chose their visitors, including the right by the Resident/SDM to designate caregivers.

DEFINITIONS

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

Essential visitors are the only type of visitors allowed when there is an outbreak in a Home or area of the Home or when a resident has failed screening test, is symptomatic or in isolation.

There are four (4) categories of essential visitors:

- a) Caregiver - designated by the Resident/SDM and is visiting to provide direct care to the resident (e.g., assistance with personal hygiene, feeding, mobility, communication, meaningful connection, cognitive stimulation, assistance with decision making, etc) Examples may include family members, a privately hired caregiver, paid companions.

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- b) A Support Worker - visits a Home to provide support to the critical operations of the Home or to provide essential services to residents. These may include but are not limited to food and supplies delivery, building maintenance and repairs, hairdressing, foot care, laboratory
- c) Palliative Visitor - a person visiting a very ill resident for compassionate reasons including, but not limited to hospice or end-of-life care, and
- d) A Government Inspector with a statutory right to enter a long-term care home to carry out their duties. This may include Public Health Inspector, Fire Inspector, Ministry Inspector

General Visitor - a person who is not an essential visitor and is visiting to provide non-essential services related to either the operations of the Home or a particular resident or a group of residents. General visitors include those persons visiting for social reasons as well as visitors providing non-essential services such as personal care services, entertainment, or individuals touring the home.

POLICY

1. The Home, in consultation with the Residents Council and Family Council, if any, shall review, discuss and implement the Homes Visitor Policy, including any directives, orders and visitation guidelines established or amended from time to time by the Ministry of Health and /Public Health Officials to ensure the safe environment for residents, staff, service providers and visitors during an outbreak of a communicable disease, an outbreak of a disease of public health significance, an epidemic or a pandemic .
2. The normal visitation hours shall be daily from 9:30 am until 8:00 pm. The sign-in book shall be located at the front reception

When the resident has been deemed end-of-life/ palliative care, the family shall be permitted to remain with their loved as long as they choose, even in cases of declared outbreak, an epidemic or a pandemic.
3. Foods or drinks brought in, especially meat or dairy products must be consumed during the visit or otherwise disposed of.

Food/drinks cannot be shared or given to other residents in the Home without prior discussion and approval by the Charge Nurse/Dietitian/POA

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4. Any food items that may be left with the Charge Nurse shall be dated, labeled with the resident’s name, and discarded within 48 hours if not consumed by the resident
5. The Home shall keep staff, residents and families informed and ensure ongoing and more frequent communication in all cases of an outbreak of a communicable disease in the Home, an outbreak of a disease of public health significance, an epidemic or a pandemic.
6. **Essential Caregiver-** designated by the Resident/SDM to provide direct care to the resident (feeding, mobility, personal hygiene, cognitive stimulation, meaningful connection and assistance in decision making.
 - caregivers must be at least 16 years of age
 - the designation must be made in writing to the Home
 - the resident /SDM may change the designation in response to change in the resident’s needs or the availability of caregivers.

Key Note: To be eligible, the Essential Caregiver must complete an application form and meet the Home’s essential caregiver’s criteria, including required educational components as mandated by the Home’s policy and Ministry directives.

Essential Caregivers may include family members who provide meaningful connection, a privately hired caregiver, paid companions and translators

7. ONLY Essential Visitors shall be permitted when:
 - * a resident is self-isolating or symptomatic, or
 - * the Home is in a declared outbreak
 - * when province-wide lockdown is in effect
8. The Home shall comply with all applicable laws including any applicable Minister’s directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or a Medical Officer of Health appointed by the *Health Protection and Promotion Act*.

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The Home shall put all measures in place regarding any new and/or changes to existing directives or orders and shall effectively communicate these changes to the residents, staff and visitors, including the posting of required information/signs at the front entrance and by the elevators on each floor, where applicable.

9. The Home shall strictly enforce the Minister’s Directives and guidance related to visitors vaccination requirements, screening, testing, temperature testing, hand hygiene/sanitizing, physical distancing, and other related infection prevention and control requirements and/or practices as may be applicable, to including proper donning and doffing of PPEs, when needed.
10. The Home shall provide residents, staff and visitors the required education and training, as may be applicable.
Non-compliance with the established policies and guidelines will be the basis for discontinuation of visits and /or re-education and training on Home’s policies and guidelines.
11. The Home shall ensure that each visitor signs in upon arrival to the Home and that required information is fully and correctly completed by each visitor and includes the date of visit, time of visit, name and contact information of visitor, the name of the resident being visited and visitor’s signature.
12. The Home shall ensure that visitors sign-in information is kept on file for a minimum of 30 days.
13. The Home shall develop and post the Visitor Policy on the Public Information Board and make a copy available to the Resident/SDM or a visitor.
14. The Home shall ensure that a copy of visitor policy is provided to the Resident Council and the Family Council, if any for their input and recommendations.
15. If required, the Home shall designate an in-home and an outdoor areas for the resident and family/friend to gather for the general visits which allows for Ministry recommended physical distancing or other recommendations that may need to be in place.
16. All eligible individuals MUST meet current vaccination requirements in order to enter the Home.

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17. When planning the visits, consideration shall be given to the operational needs of the Home as well as the mental and emotional well-being of residents and their loved ones, including the health and safety of all staff, other residents and visitors to the Home.
18. Regular visitation time may be altered, cancelled, deferred or not permitted for the general visitors in the following situations:
 - when a Home or and area in the Home is in an outbreak
 - to visit an isolating resident
 - when the local Public Health unit so directs.
19. If needed, a staff member will escort essential visitor to and from resident room/meeting area, including any assistance and/or education with the use of required PPEs.
20. When required and/or directed by the Ministry/PH, all general visitors and support workers entering the Home must meet the following requirements:
 - a) receive and demonstrate a negative test results from an antigen test taken at the Home on the day of the visit;
 - b) demonstrate proof of negative test results from an antigen test or PCR test taken on the same day or the day prior to the visit
 - c) enter the Home with appropriate PPEs
21. Short Stay/Temporary absence from the Home for family/friends visit shall be allowed as per Ministry/PH recommendations. This includes the overnight stay or taking the residents away from the facility grounds for meals or special outings/gatherings. Refer to Short Stay Absence policy.
22. Visitors bringing in pets must provide the Home with annual proof of vaccination. The Home shall retain a copy on file

RESPONSIBILITY

The Administrator has the overall responsibility to ensure effective implementation of the Home’s policy, Ministry directives, guidelines, including any recommendations by the Residents Council.

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In all situations where Public Health or MOLTC has identified the potential for an outbreak of a communicable disease or an outbreak of public health significance, an epidemic or a pandemic and issues guidance and/or directives, the following procedures shall apply:

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| Administrator | <ol style="list-style-type: none"> 1. Ensure effective communication with the management team, facility staff and Resident/Family Council regarding the Ministry/PH directives/guidelines and Home’s established policies and procedures on all visits to the Home 2. Monitor and oversee implementation of guidance/directives and ensure full compliance by the facility staff and the visitors |
| IPAC Manager
Charge Nurse | <ol style="list-style-type: none"> 1. Meet with the newly admitted resident and their family members and discuss the Home’s infection prevention and control practices, including hand hygiene policy, isolation, declared outbreaks, Ministry/PH directives and the use of PPEs. 2. Ensure effective communication of directives/guidance with nursing staff at all levels regarding the visitation policies, including residents/staff/visitors 3. Ensure staff education and training on infection prevention & control procedures, including ongoing IPAC audits to ensure staff compliance at all levels in the organization. 4. In collaboration with the managers, develop and post infection prevention and control signs and ensure compliance by the staff and visitors. Provide/share information with the residents, families and visitors, outlining safety procedures, as may be applicable. For example, physical distancing, PPEs, etc., as may be applicable. 5. Work closely with the Ministry and Public Health officials and ensure their directives are fully implemented 6. Ensure all staff and visitors comply with the Home’s Visitation Policy at all times. 7. Report any concerns or non-compliance with the established procedures and guidelines to the Administrator immediately. |

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8. Discuss Visitor Policy, with Residents/SDM, screening requirements, the need for PPEs, including non-compliance with the policy, when applicable
9. Ensure that each visitor is screened and tested using the most up to date Guidance/Directives from PHU/MOLTC
10. In collaboration with the management team determine the most appropriate location in the home as well as outdoors areas that can be used for scheduled visits, as may be applicable
11. Ensure effective communication is maintained with all residents and visitors regarding the established guidelines, visitation rules and infection control practices, including the proper use of PPEs that may be required during the scheduled visits.
12. Maintain adequate staffing to meet the care needs of all residents and ensure that staff time spent to accommodate visitations does not have a negative impact on resident care
13. Maintain adequate supplies of PPEs and other supplies and equipment to meet the operational needs. Ensure all records and documentation is in place and readily available for review by the Ministry Inspectors.
14. Restrict visitation rights to any visitor not complying with the established directives, guidelines and Home’s policies until the education and retraining on the Home’s visitation policy and Ministry directives is completed.
15. Coordinate and oversee resident, staff, visitor education and training on the following:
 - * PPEs required, including donning/doffing procedures;
 - * Physical distancing;
 - * Proper hand hygiene;
 - * Number of visitors and age restrictions;
 - * limiting visitors to specific residents
16. As part of the IPAC annual program evaluation, ensure that the Visitor Policy is reviewed for its effectiveness and compliance with the legislated requirements and that any updates are forwarded to Resident /Family Council, if any.

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Recreation Manager/
Assistants/Designate

In-Home Visits/Virtual Visits/Outdoor visits

All residents and visitors Indoor/Outdoor visits

1. Ensure Residents and their families and volunteers are invited to visit the Home and attend daily programs and activities, including large group functions, worship services, special birthday parties, trips and entertainment.
2. In all cases where precautionary measures have to be implemented as per Ministry directives, ensure that general visitors visits to the Home are coordinated in accordance with the Ministry guidelines.
3. Meet with each resident and discuss the visitation rules, including location of visits, when applicable.
4. Discuss the types of visits available, e.g. in-home, outdoor, Skype., Zoom, or telephone chats. Assist with these type of activities as needed
5. Ensure all staff and visitors comply with the Visitation Policy and Home’s policy at all times.
6. Report any concerns or non-compliance with the established rule to the Administrator immediately.
7. If required, provide a designated visiting area.

Visitation Area - clean all items in the visiting area/outdoor that may have been touched by the resident and visitor to include chair arms, seats, table tops/legs with a high level disinfectant wipes (contact time 1 minute) immediately after each general visit.

SET UP

1. Pandemic Visits - Letter of required support form, as applicable
2. Screening Checklist, as applicable
3. Visitation Schedule for general visitors, as applicable
4. Screening Area - Thermometer, hand sanitizer, Kleenex, masks, gloves, goggles, gowns, as applicable

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CROSS REFERENCE

NOVEL CORONAVIRUS (COVID-19) POLICY
TAB 8 Infection Control Manual

MINISTER’S DIRECTIVE

Covid 19 Guidance document for LTC Homes in Ontario

MINISTER’S DIRECTIVE

Approval

CORPORATE COMMITTEE