

Lord Dufferin Centre

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COVID 19 Novel Corona Virus – Visitor Policy

Policy:

Beginning June 18th, 2020, Lord Dufferin Retirement Residence will begin a careful, phased approach to the gradual resumption of Resident visits during the COVID-19 pandemic. All visitors will be instructed to adhere to the requirements set out in this policy to ensure the 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. This policy is guided by current ministry requirements per Directive #3 (*June 10, 2020*) and the Ministry for Seniors and Accessibility (MSAA) *Reopening Retirement Homes (June 10, 2020)*. Any non-adherence to the rules set out in the visitor policy could be the basis for discontinuation of visits.

Informed by the ongoing COVID-19 situation in the community and the Residence, Lord Dufferin Centre Retirement Residence is taking a gradual, phased approach to the resumption of visits. As the pandemic situation continues to change, the Residence’s visitor policy will be reassessed and revised to allow for increased or decreased restrictions as necessary, as circumstances change in the community, within the Residence and with new directives.

Guiding Principles

Safety: Any approach to visiting in the Residence must consider balance and meet 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 well-being of Residents and their families/friends, through 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.

Flexibility: Any approach to visiting in the Residence must consider COVID-19 spread in the community and the physical/infrastructure characteristics of the Retirement Home, its staffing availability, and the current status of the Home with respect to Personal Protective Equipment (PPE) levels for staff and Residents.

This policy is based on the principles of safety, emotional well-being, equitable access and flexibility. It is with compassion that we recognize 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. Per ministry guidelines, the Residence will follow the requirements for the minimum visit frequency and seek to accommodate more visits where

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possible. Where it is not possible or advisable for visits to occur in person, the Residence will continue to provide virtual visiting options.

Lord Dufferin Retirement Residence also recognizes 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.

Prior to Accepting Visitors

As per Ministry of Health (MOH) Directive #3 and MSAAGuidelines, the following baseline requirements must be met prior to accepting visitors:

1. The Residence must **not** be in a COVID-19 outbreak. Visits will not occur in instances where a symptomatic staff or Resident is awaiting COVID-19 test results, until those tests results are known.
 - In the event the Residence has begun accepting visitors and enters into an outbreak, all *non-essential* visitations will be discontinued, and the Residence will establish compliance with all Chief Medical Office of Health (CMOH) directives for Residences in outbreak and follow directions from the local public health unit (PHU).

2. The Residence has developed procedures for the resumption of visits and associated procedures, and a process for communicating these procedures with Residents, families and staff, including but not limited to infection prevention and control (IPAC), scheduling and any setting-specific policies.
 - This process must include 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 must include an approach to dealing with non-adherence to Residence policies and procedures, including the discontinuation of visits. **(See Appendix A)**
 - Dedicated areas for both indoor and outdoor visits to support physical distancing between residents and visitors.
 - Protocols to maintain the highest of IPAC standards prior to, during and after visits.
 - A list will be available for relevant/appropriate staff members to access.

3. Additional factors that will inform decisions about visitations in the Residence include:
 - **Adequate Staffing:** The home must currently not have staffing shortages that would affect resident or staff safety and not be under a contingency staffing plan. There must be sufficient staff to implement the protocols related to visitors. Additionally, staffing levels must be sufficient to ensure safe visiting as determined by the home’s leadership.

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- **Access to adequate testing:** The Residence must have 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 must have adequate supplies of relevant PPE.
- **Infection Prevention and Control (IPAC) standards:** The Residence must have appropriate cleaning and disinfection supplies and adhere to IPAC standards, including enhanced cleaning.
- **Physical Distancing:** Where appropriate, the Residence must be able to facilitate visits in a manner aligned with physical distancing protocols

Procedures:

Indoor/Outdoor Visits

These requirements are necessary for both indoor and outdoor visits, regardless of a Home’s previous outdoor visitation policy prior to the implementation of the MSAA guidelines and update to Directive #3.

1. As of June 18th 2020, the Residence began a care phased approach to the gradual resumption of visits, beginning with outdoor visits and indoor visits in *common areas* of the building if appropriate physical distancing could be maintained. *In-suite* visits will only be allowed for those Residents who are critically ill or palliative. Management will review this policy and revise as appropriate based on circumstances in the community and within the Residence.
2. Designated indoor and outdoor visiting spaces have been established and will be identified by appropriate signs. Outdoor visitation areas are identified by white circles or alternatively the gazebo may be used. The indoor visitation location will be the main dining room, in between meal times.
3. For outdoor visits, the visitor may bring an outdoor/lawn chair. Staff will clean and disinfect the visiting area after each visit. In the event of inclement weather for an outdoor visit, the visit may be rescheduled or moved indoors.

As identified throughout this policy, should the Residence go into an outbreak or the Resident be self-isolating or symptomatic, both indoors and outdoors visits will be discontinued, except for essential visits (see section Screening Protocols & Essential Visitors)

Visit Parameters (Number/Types of Visitors Allowed)

1. Provided the Residence is not in outbreak and all other requirements are met under Directive #3 and the MSAA Reopening Retirement Homes, the Residence will continue to carry out a staggered

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approach to the number of visits during the COVID-19 pandemic. The number of visitors per Resident, per day, will be determined by the Residence in review of community and Residence circumstances. More details are provided in the section “Scheduling of Visits”.

2. With current CMOH guidance on physical distancing being accommodated, the Residence has begun allowing **1 family visitor at a time** for a Resident. Additionally, **at a minimum**, the Residence is allowing a sufficient block of time **for at least 1 meaningful weekly visit per Resident**. This policy will be reviewed and revised when appropriate.

3. If the Residence is in outbreak or the Resident is self-isolating or symptomatic, **non-essential visitors are not allowed**, and only **essential visitors** are allowed. An **essential visitor** is defined as 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.

4. **Visitors must only visit the one Resident they are intending to visit, and no other Resident. If a visitor wishes to visit more than one Resident, a separate visit must be scheduled unless visiting a couple.**

Screening Protocols & Non-Essential Visitor Requirements

For visits occurring in designated indoor and outdoor areas:

1. Prior to each visit, the visitor, must: **(See Appendix D)**
 - a. **Pass active screening**, every time they are on the premises of or enter the home. Per Directive #3, this includes symptom screening, temperature check and also **attesting** that they are not experiencing any of the typical and atypical symptoms of COVID-19. Visitors will not be allowed to visit if they do not pass the screening.
 - **Active Screening and Visitor Protocols will be conducted at the front entrance. We request that all visitors arrive 10-15 minutes prior to the scheduled visit to allow for screening protocol which includes: complete screening and attestation, review of visitation protocol, and set up meeting spot as applicable.**

2. Visitors **do not need to attest** (verbally or written) to Residence staff to a negative COVID-19 test to visit a resident in designated indoor or outdoor area. (Visitors **do not** require a COVID-19 test.) The visitor must comply with the Home’s infection prevention control protocols (IPAC), including proper use of face covering/masks and physical distancing as outline in Directive #3. Appendix D.

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- a. Visitors should use a face covering/mask at all times 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/masks. If the visitor does not bring their own face covering/mask, and the Home is not able to provide a surgical/procedure mask, the family visitor will not be permitted inside the Home.
 - b. Education on all required protocols will be provided by the Home (See Education for Visitor).
 - c. Any non-adherence to these rules could be the basis for discontinuation of visits.
3. The visitor must only visit the designated indoor or outdoor area they are intending to visit, and meet only the resident who has invited them. If the visitor wishes to visit more than one resident, a separate visit must be scheduled, unless visiting a couple.

Screening Protocols & Essential Visitor Requirements

As per CMOH Directive #3, essential visitors are defined as persons 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. Because the visit is “essential”, these visitors are not subject to the same requirements as non-essential visitors.

1. As noted above, essential visits are the only type of visits allowed when a resident is self-isolating or symptomatic, or the home is in an outbreak. These essential visits are permitted to enter a home in outbreak, provided they pass active screening every time they are on the premises of or enter the home. They should not be allowed to visit if they do not pass the screening.
2. Essential visitors are required to follow CMOH guidance when visiting, including physical distancing and the use of a face covering/mask at all times if the visit is outdoors, in a manner aligned with Directive #3. If the visit is indoors, including while visiting the resident that does not have COVID-19 in their room, a surgical/procedure mask is required.
3. 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. This includes contact and droplet precautions (gloves, face shield or goggles, gown, and surgical/procedure mask).
4. Essential visitors must only visit the designated indoor or outdoor area they are intending to visit.

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Scheduling of Visits

1. All visits must be pre-arranged to allow for appropriate physical distancing and staffing coverage. The Residence will ensure a list of visitors is available for relevant/appropriate staff members to access. **(See Appendix C)**
 - Visits can be booked over the phone through the Service Worker **no less** than 48 hours in advance.
2. Visits will begin with one visitor at a time. As indicated above, the visitor must only visit the one Resident they are intending to visit, and no other Resident.
3. Visits will be time-limited to allow the Residence to accommodate all Residents. Visits will be restricted to 30 minutes per visit and only available Wed-Sun, 9:30-11:30am, 1:30-4:30pm
4. The highest of IPAC standards will be maintained prior to, during and after visits. Visits will be staggered, allowing sufficient time between visits for cleaning/disinfecting and other IPAC requirements as needed.
5. The needs and preferences of Residents will be considered in prioritizing visits.
6. As noted above, family (non-essential) visits are not permitted when a Resident is self-isolating or symptomatic, or when the Home is in an outbreak.

Additional Protocols

1. 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.
2. All visitors must practice physical distancing, respiratory etiquette, hand hygiene, and follow the Residence’s infection prevention and control practices (IPAC) and proper use of PPE.
3. Staff will monitor visits to ensure PPE and physical distancing protocols are followed. If not, the visitor will be asked to leave the premises per the Home’s policy on discontinuation of visits.
4. Visitors must identify any items brought for the Resident to staff so they may be disinfected by staff, before they are given to the Resident.

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Discontinuation of Visits

1. **Non-compliance with the Residence’s policies could result in the discontinuation of visits for the non-compliant visitor.** If the visitor does not follow protocols as outlined and agreed upon, they will be asked to leave the premises and an incident reported will be completed. Follow up with Management will be conducted to determine when the visitor will be allowed back and under what parameters.

Retirement Home Tour Requirements

Virtual tours of the Residence will be considered prior to or as an alternative to in-person tours. If required, in-person tours of the Residence’s facilities to prospective residents may take place if the residence is not in outbreak. The tour group should be limited to the prospective resident or couple plus one other individual (e.g., accompanying family member or close friend).

For tours of the residence:

1. All tour participants are subject to **procedures #1 and #2** in the section **Screening Protocols & Non- Essential Visitor Requirements** above (e.g., active screening, wearing a face covering/mask, IPAC).
2. To reduce exposure to residents, the Residence will make reasonable efforts to ensure that the tour route is restricted in a manner that minimizes potential contact with residents as much as possible. [Residences are also encouraged to schedule tours during periods of low activity in order to allow for appropriate physical distancing and staffing coverage. See Appendix E chart]

Home Care and Personal Care Service Providers

Home Care Service Providers (services provided by Local Health Integration Networks such as nursing care, physiotherapy, occupational therapy, social workers, etc.) are considered **essential** and can continue to provide care services to residents.

Personal Care Service Providers (PCSPs) who provide care services to residents (e.g., hair dressing) are permitted to resume operations if doing so is consistent with the resumption of personal care services elsewhere in the province (phased reopening of services in Ontario).

Home Care and Personal Care Service Providers must follow the **same active screening, IPAC, PPE, masking and testing requirements that apply to Retirement Home staff** as outlined in CMOH Directive #3.

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- Appendix A - Information Package for Visitors
- Appendix B - Sample Signage for Visitors
- Appendix C - Sample Visiting Schedule
- Appendix D - Visitor Screening
- Appendix E - MSAA Reopening Retirement Homes Chart (July 10, 2020)

References:

Ministry for Seniors and Accessibility ([MSAA\) Reopening Retirement Homes - July 10,2020](https://www.orcaretirement.com/wp-content/uploads/MSAA-Retirement-Home-Reopening-Guidelines-July-10-FINAL-FINAL-ua.pdf)
<https://www.orcaretirement.com/wp-content/uploads/MSAA-Retirement-Home-Reopening-Guidelines-July-10-FINAL-FINAL-ua.pdf>

[Ministry of Health \(MOH\) Directive #3 - June 11, 2020](https://orcaretirement.us2.list-manage.com/track/click?u=0f7b468f27a8cf1a453f09536&id=8d9d920f89&e=0fbcef2f46)
<https://orcaretirement.us2.list-manage.com/track/click?u=0f7b468f27a8cf1a453f09536&id=8d9d920f89&e=0fbcef2f46>

ORCA Reopening Retirement Homes – Visitor Recommendations
<https://www.orcaretirement.com/wp-content/uploads/Reopening-Retirement-Homes-Recommendations-for-Visitations-ef-061120.pdf>

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