

### **Purpose:**

Managing visitor access to the residents is essential to mitigate risks of Covid-19 infection to residents, staff and visitors, all while balancing the residents' quality of life through their mental, spiritual, emotional and physical needs.

Au Chateau's long-term care visitor/ access/ testing policy aligns with the province's COVID-19 response framework, directives and recommendations.

The policy will be revised as required when advised by the Ministry, and in the event the Home's practices need to change to reflect the Ministry's directives and guidance documents.

### **Background:**

The Covid-19 pandemic has had a significant effect on the lives and quality of lives of residents living in long-term care throughout the province. The ministry of Ontario is tasked to ensure that safety precautions are carried out by long-term care homes to protect the most vulnerable population.

From time to time, the Ministry of Ontario in consultation with the Office of the Chief Medical Officer of Health makes additional changes to improve the quality of life for residents as Ontario progresses along the "Roadmap to Reopening the province" and ending this pandemic.

Please be advised that the directives that follow reflect current Ministry guidelines and legal requirements. These will be revised as required when advised by the Ministry, and in the event the Home's practices need to change.

### **Application of the policy:**

This policy applies to all residents currently living at the long-term care home, their family members and families. Any member of the community with the interest of visiting or taking a resident out of the Home, be it on or off the property are also included in this policy.

It is the responsibility of all staff members to enforce procedures of the policy. Registered Nursing staff will oversee and approve outings when applicable.

Au Chateau's long-term care policy aligns with the province's COVID-19 reopening Ontario framework and Ministry Directives.

The Home will follow the COVID-19 Guidance: Guidance document for Long Term care Homes; the COVID-19 Guidance for Long-Term care and retirement Homes for Public Health Units; both from the ministry of Health, for the application of this policy. The guidance document may be updated from time to time and will prevail over this policy if information differs.

### **Types of visitors:**

**Essential Visitor:** a person routinely performing essential support services or a person visiting a very ill or palliative resident. Essential visitors also include "essential caregivers" as defined by MLTC and MSAA/RHRA policies, as appropriate, including students, volunteers, support workers.

Essential Caregivers are designated by a resident or their substitute decision maker who provide direct care to residents, such as helping with feeding, mobility, hygiene, or cognitive stimulation. They can be family members or friends, privately hired caregivers, paid companions and /or translators. The resident may appoint 4 persons to be their caregivers. If the resident had more than 4 caregivers prior to December 14<sup>th</sup>, 2021, they do not have to be removed.

Once a person, has been deemed an essential caregiver by the resident or substitute decision maker, that person cannot be continuously be changed unless there is a definite and prolonged reason that will prevent the caregiver from attending to the resident's needs. The other reason would be a resident's change in status making the care of a certain caregiver non-essential. Changes are approved by the DOC or delegate.

**General Visitor:** all other types of visitors who do not meet the definition of an essential visitor as defined above, including social visitors.

### **Immunization status:**

People who are up to date with their Covid vaccination are people who have received the recommended number of doses and boosters of the Covid vaccine as soon as they are eligible according to their age and health status more than 2 weeks prior to visitation. The brand of vaccination can vary from Health Canada approved and non-approved vaccines.

Partially immunized people are people who have received some vaccinations against covid but have not received the recommended number of doses and boosters of a Covid vaccine when they were eligible. The brand of vaccination can vary from Health Canada approved and non-approved vaccines.

Unimmunized people are people who have not received any doses of the Pfizer, Moderna or Astra-Zeneca vaccine for whatever the reason may be.

Proof of “up to date” vaccination is required to gain access to the facility to care for or visit residents.

### **Policy:**

#### **1. Testing frequency:**

##### **a. Visitors, caregivers, staff, students, support staff and volunteers**

The testing frequency relates to surveillance testing for the purpose of accessing the Home when not experiencing any outbreaks of COVID-19. Additional measures apply in an outbreak situation, including measures as per local public health direction for Long Term Care Homes and the document Minister’s Directive: COVID-19: LONG-TERM CARE HOME SURVEILLANCE TESTING AND ACCESS TO HOMES.

Unvaccinated caregivers, visitors, staff students, support staff and volunteers are not permitted to enter the long term care home. Some exceptions may apply such as a medical exception and emergency situations (a family member visiting during the end of life stages of a family member- but must remain in the room with the resident).

Caregivers, staff, students, support staff and volunteers who are up to date with their vaccination will be permitted in the Long-Term Care Home if they test negative with a rapid antigen test at a minimum of 3 times per week. The test is performed upon entry on site, taken the day of the visit or workday, or on the previous day.

Outdoor visits for caregivers are available in designated areas. Testing for the caregiver/ visitor is no longer required for outdoor visits. Active screening prior to outdoor visit is still a requirement.

Individuals who have provided a positive COVID-19 test result in the past 30 days will be exempt from testing requirements for a total of 90 days unless they have new onset of symptoms or if they have travelled outside of Canada in the previous 14 days prior to entering the Home.

Individuals, who have tested positive for COVID-19, must provide proof of such results. If an individual tests positive for COVID-19 after the 90-day exemption period, they will need to refrain from visiting for a minimum of 10 days.

Active screening and surveillance testing is mandatory for any visitor who enters the home to provide a service or visit a resident. Some exceptions, such as emergency personnel and MOLTC Inspectors, may apply and will be determined by MOLTC or Nursing Administration in consultation with IPAC department.

#### **b. Residents**

Residents can expect to be asked to undergo testing after outings and during surveillance testing only.

According to most recent safety measures for absences, residents will need a PCR on day 5 or perform two RATs 24 hours apart on day 5 & 6. There is no need for quarantine unless a positive result is received or the resident is symptomatic. See section on admission/ re-admission and transfers or medical outings requiring on overnight stay. Active screening is required upon return for any outing.

Residents who are up to date with their covid vaccination and who return from any absence with a known exposure to a positive covid case will need to be quarantined on arrival and have a PCR test done on day 5. Isolation is required until a negative result is confirmed. Active Screening is required upon return.

Residents who are not up to date with their vaccination or are unvaccinated and return from any absence with a known exposure to a positive covid case are required to do active screening and quarantine for 10 days. A PCR test is required on day 5 of the isolation period.

**Note:** Surveillance testing during periods of high risk and/or outbreak may be increased at the Home's discretion or by direction of Public Health Ontario/ Ministry of Ontario. High risk Periods will be determined on a risk assessment based on the vaccination status and activities of the person, the risk to other residents, the community transmissibility and if the Home is in an outbreak/ suspected outbreak status.

**c. Admission / Re-admission/ absences / Transfers:**

1. Any residents on droplet contact precautions must follow the home's policy and the local public health guidelines/recommendations on isolation protocols for COVID-19 management and prevention.
2. Residents who are up to date with their Covid vaccination coming from another health care facility who have submitted a negative covid PCR test within 24 hours prior to admission and without any known exposure to a positive case do not need to self-isolate. Enhanced twice a day symptom screening is required for a minimum of 10 days.
3. Residents who come from another institute who have not been tested prior to admission will have a PCR test done upon arrival. They need to be kept under isolation precautions until the negative result is known. Enhanced twice a day symptom screening is required for a minimum of 10 days
4. Upon a return/ admission or transfer from the community (other than from another facility) a PCR test is required on Day 5. Isolation is required regardless of vaccination status until the negative result.
5. Upon the return of a medical absence that includes any overnight stay at the other facility, the resident regardless of vaccination status will have a PCR done on day 5 after their return. However, isolation is only required if the resident is symptomatic or has encountered a positive covid case. It is of note that the accepting facility may require proof of a negative PCR prior to the medical absence.
6. Upon a return from a compassionate leave that includes any overnight stay away from the Long-Term Care Home, the resident will have a PCR done on the 5<sup>th</sup> day and isolate only if symptomatic or has come into contact with a positive Covid case.
7. If an exposure to a positive COVID-19 case is known, the resident is tested by way of PCR on day 5, isolated upon arrival and remain until the negative result is received. If the test is positive, the resident will remain under isolation for 10 days or as determined by public health
8. In any case, if a laboratory-based PCR test is not available, a risk assessment will be conducted by a registered nursing staff and/or medical professional of the Home to determine if the resident will undergo a full 10 days' quarantine/ self-isolation.
9. Residents, who are within 90 days of a laboratory confirmed COVID-19 infection, do not require further testing or quarantine 90 days from the onset of symptoms or the date of the positive result, which ever is sooner, unless there are new symptoms.

10. General visitors are not allowed to visit a resident that is on self-isolation for COVID-19 precautions unless necessary such as being critically ill or under palliative care. The resident is allowed to have one essential caregiver while under isolation as long as all isolation precautions are followed as directed.
11. When the resident is not under isolation precautions because of Covid, the resident is allowed to have social outings that include overnights away from the facility.
12. Upon return from an overnight social outing, the resident will undergo testing and surveillance according to current admission/ readmission from community criterias.

## **2. Visits at the Home:**

### **Inside:**

Essential caregivers and general visitors who are up to date with their Covid vaccination are allowed to visit a resident in the facility, at a maximum of 4 people at a time on any given time (including caregivers).

Visits may occur outside the resident's room in common areas of the unit, but physical distancing of other residents should be maintained. Physical distancing can be relaxed with the resident having the visit from a vaccinated caregiver to allow close contact and assist in feeding in the dining room. A walk in the common halls or pavillon courtyard of ground level floor and participation group activities are also allowed unless the Home is in an outbreak. In any case, other safety precautions such as wearing a mask and hand hygiene must be maintained.

An essential caregiver who visits a resident who is in isolation must refrain from visiting any other long-term care home for a period of 10 days. They must also refrain from visiting a home affected by an outbreak.

An essential caregiver can provide support to a maximum of two residents at a time even during an outbreak period as long as prior approval is received from the substitute decision maker of all residents involved. Caregivers may also support more than one resident in non-outbreak situation, with the same expectation regarding resident consent. This is the caregiver's responsibility.

Children with up to date vaccines who are over 5 years of age who provide proof of vaccination can access the Home to visit. They must comply with a mask during the visit. Visitors with Children under 12 months will need to remain in the resident's room during the visit. Visitors younger than 14 years of age will require an adult to accompany them.

All children over 1 years of age will require a negative rapid antigen test before being granted access into the facility. Parental consent is required for anyone under the age of 18. If consent is not received, the access to the home will be denied.

Non-compliance with the Home's visiting policy could result in a discontinuation of visits for the non-compliant visitor or caregiver in order to protect residents, staff and other visitors in the home from the risk of COVID-19 and its variants.

The Home has the discretion to end a visit by any visitor or caregiver who repeatedly fails to adhere to the home's visitor policy, provided that the visitor or caregiver has been provided explanation on the applicable requirements, the proper PPE and been given sufficient time to adhere to the requirements

The Home has the discretion to temporarily prohibit a visitor in response to repeated and flagrant non-adherence with the home's visitor policy if all other reasonable efforts to maintain safety have been exhausted, stipulate a reasonable length of prohibition and clearly identify what requirements the visitor should meet before resuming visitation. This will be at the discretion of the Administrator of the Home in consultation with IPAC and DOC.

People who decide not to disclose their vaccination status will be considered unvaccinated for the purpose of accessing the facility.

## **Outside**

The resident may visit outside on the Home's property within designated areas without any limitations on the number of visitors as long as the long-term care is able to accommodate and the spaces are available.

Visitors (caregiver and general) having outdoor visits must be actively screened.

If the visitors (general/essential) are up to date with their vaccinations, physical contact is allowed. However, if the visitors are not up to date or not immunized, physical distance by all parties present is required. Masks are no longer required for outdoor visits.

It is recommended not to bring any food or beverages to the visit if physical distancing will not be maintained by all parties.

### **3. Visits off property (when not suspended)**

These different types of visits are determined by the activity occurring during the visit/absence.

The resident is allowed to leave the property for visits of a medical nature such as a doctor's appointment; compassionate/palliative care nature such as visiting a family member in a hospice; for visits of an essential nature such as having a walk to maintain physical activity, as well as for social purposes regardless of vaccination status.

For social outings (with or without overnight stays), a risk assessment form will be filled out by the RN. This will provide a teaching opportunity and serve as a reminder for the resident and family to abide by all health and safety protocol during the outing. This will allow the RN to screen the resident for a health check, assess the risk and monitor for non-compliance.

All efforts will be made to accommodate and promote isolation precautions upon return of a resident that was approved an outing and has difficulties adhering to isolation precautions if required, based on the Long-Term Care Guidance Document from the Ministry of LTC.

Residents who leave on an outing away from the facility for any reason, will require Rapid Antigen testing and/or PCR testing according to the current guidelines established by the MLTC and/ or Health Ontario.

Residents who refuse testing will be required to undergo isolation precautions according to the current guidelines established by the MLTC, Public Health and/or Health Ontario.

### **4. Social Gatherings / organised events within the facility**

Physical distancing of residents with their caregivers may be relaxed to allow for personal care and a brief hug, regardless of vaccination status

Maintain same resident activity groups as much as possible. Large Social gatherings that have high risk activities are not recommended.

Essential caregivers who are up to date with their vaccinations may participate in social gatherings in designated areas, but must not remove their masks for any reasons.



## 5. Personal Protective Equipment

Upon arrival on the property, the screener at the COVID entrance will provide a surgical mask. The proper usage of a face covering means the nose and chin are completely covered and the mask is not loose.

Eye/ face protection is required of essential caregivers when providing care to a resident with suspected/confirmed COVID-19 and during an outbreak requiring droplet contact precautions. Staff will provide the proper PPE for the visit.

Eye protection requirement is based on a point of care risk assessment that will be performed by the registered nurse. The visitor must adhere to all posted safety precautions.

Visitors who informs the facility that they possess a medical exemption from wearing a mask will be required to wear a face shield instead and abide by other safety measures such as distancing and hand washing. If the visitor refuses the face shield, the visit will be cancelled.

The visitor will be educated on maintaining physical distance at all times.

## 6. Communal Dining

Physical distancing and cohorting of units may be required within the home, especially during periods of outbreak.

Essential caregivers who are up to date with their vaccination may accompany residents for meals. The caregivers must keep their mask on at all times.

Family dining setting (resident and their family members) within a designated space is suspended until further notice because the visitor must keep their masks on at all time.

## **7. Indoor/ Outdoor Activities on Property**

All visitors coming to the Home for planned activities such as concerts, live entertainment must be up to date with their vaccinations. Proof of such is required.

Entertainers who sing will have a plexiglass barrier used in front of the singer, separating the singer from the residents. Residents are placed at a distance of more than 10 feet from the barrier

All entertainers are considered support workers and must be fully vaccinated.

All other entertainers, performers or volunteers are required to wear their masks during their time at the facility, subject to changes according to the COVID-19 Guidance document for Long Term Care in Ontario.

## Outbreak measures

- Refer to the COVID-19 Pandemic Plan

## Resources:

1. Directive#3 for Long Term Care Homes under the Long Term Care Homes Act, 2007
2. COVID-19 Guidance: Long Term Care Homes and Retirement Homes for Public Health Units; Version 2.1- July 23, 2021
3. COVID-19 guidance document for long-term care homes in Ontario, updated August 20,2021
4. COVID-19 Guidance: Considerations for Antigen Point-of Care Testing; Version 6.0 June 3, 2021
5. Minister's Directive: COVID-19 Long Term Care Home Surveillance Testing and Access to Homes; July 16, 2021
6. Long Term Care Visitor, Absences & Social Gatherings Snapshot; July 16<sup>th</sup>,2021
7. <https://youtu.be/vG2uvsNqUmQ>
8. <https://youtu.be/5DGwOJXSxqg>
9. <https://youtu.be/DhtO5kzY5js>
10. Fall 2021 Preparedness Planning and Updates to the LTC Guidance Document memo dated August 20<sup>th</sup> , 2021 from the Ministry of Long-Term Care