

Title: COVID-19 Apotex Visitation

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Approved By: COVID-19 Outbreak Management Taskforce

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1.0 Policy

The expectations and protocols that guide visitation in the Apotex have been developed with the aim of supporting residents to receive visitors while mitigating the risk of resident, visitor, and staff exposure to COVID-19. This policy is compliant with Directive #3 for Long-Term Care Homes and the Minister's Directive, COVID-19: Long-Term Care Home Surveillance Testing and Access to Homes. . Visitation allowances and restrictions at Baycrest are 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 Well-Being** – Allowing visitors is intended to support the emotional well-being of residents 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 residents.
- **Flexibility** – The physical/infrastructure characteristics of the home, its staffing availability, whether the home is in an outbreak and the current status of the home with respect to personal protective equipment (PPE) are all variables to take into account when setting home-specific policies.

Policies and procedures will evolve as new directives emerge and with consideration to factors such as the home's outbreak status and the COVID-19 situation in the community.

2.0 Definitions

Essential visitors are defined as including 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. There are three categories of essential visitors: i) caregiver; ii) essential visitors who are visiting a resident who is very ill or dying; and, iii) support workers (contracted services personnel).

Caregiver: is a type of visitor who is designated by the resident and/or their substitute decision-maker (SDM) 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 must be at least 18 years of age. Examples of caregivers include family members, a privately hired caregiver, paid companions and translators.

Essential visitor for a resident who is very ill or dying: is any individual visiting a resident who the medical team has determined to be very ill (i.e., requires imminent transfer to acute hospital care) or dying (i.e., in the last hours or days of life, who is expected to have less than two weeks to live).

Support worker (contracted services personnel): is a type of essential visitor who is visiting to perform essential support services for the home or for a resident at the home. For example, contracted speech language pathologists or maintenance workers, provided they are not staff of the LTC home as defined in the LTCHA.

General visitor: is a person who is not an essential visitor and is visiting a resident, when permitted:

- To provide non-essential services, who 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.

Support person: is a person who is required to help a visitor with a disability perform daily tasks. A visitor may need the help of a support person if they are not able to do certain things by themselves. For example, a support person might help with communication, mobility or personal care.

3.0 Background and Scope

This policy applies to the Apotex while COVID-19 measures are in place and replaces the organization's Visitor Policy applicable when pandemic-related restrictions are not required.

Long-term care home staff, physicians, volunteers and students are not considered visitors and their access to the home is not covered by this policy. Government inspectors are essential visitors under Directive #3; they must attest to a negative test upon entering the home.

4.0 Procedure

4.1 Identifying Visitors

Essential Visitors (visiting a resident who is very ill or dying)

Family members are contacted by a member of the care team if a resident becomes very ill and potentially requires transfer to an acute hospital setting, or is determined to be in their last hours or days of life (life expectancy is less than 14 days).

Caregivers

A resident and/or their SDM may designate up to two caregivers noting that caregivers must be at least 18 years of age. The process for designating and/or changing caregivers is included in Appendix A.

Support Person

General visitors who need a support person must inform Baycrest at the time of booking their visit. Caregivers who require a support person should identify this need during the caregiver intake process. A support person for a designated caregiver does not need to be designated.

Support Worker

Members of the clinical team will make the necessary arrangements for support workers and will inform them of their testing and visitation requirements.

General Visitors

When permitted, general visitors must schedule their visit by calling 416-785-2500, ext. 2020 or by emailing eVisit@baycrest.org. General visitors younger than 14 years of age must be accompanied by an adult and must follow all applicable public health measures in place (e.g., active screening, physical distancing, hand hygiene, and continuous masking). The adult accompanying the general visitor under the age of 14 counts as a second general visitor. Toddlers and babies who cannot participate in active screening protocols and/or comply with masking requirements are not appropriate visitors.

4.2 Visitor Requirements

Regardless of their classification, all visitors (including support persons and support workers) must pass active screening on entry for symptoms and exposures for COVID-19, including temperature checks, and attest to not be experiencing any of the typical and atypical symptoms. Visitors will not be permitted on the campus if they do not pass screening.

All visitors to the home are required to follow public health measures (e.g., active screening, physical distancing, hand hygiene, masking for source control) for the duration of their visit in the home.

Visitors must visit only the resident they are scheduled to see, or, as a caregiver, the resident they have been registered to care for.

The visitor testing requirements in **Table 1** are based on the Minister's Directive, regarding Surveillance Testing and Access to Homes and Ontario's COVID-19 Response Framework: Keeping Ontario Safe and Open, which categorizes public health units into five levels: Green-Prevent, Yellow-Protect, Orange-Restrict, Red-Control and Lockdown. An essential visitor visiting a resident who is very ill or dying does not require a COVID-19 test.

Table 1. Visitor Testing Requirements

	Green-Prevent	Yellow-Protect	Orange-Restrict	Red-Control	Grey-Lockdown
General Visitors	<ul style="list-style-type: none"> A negative Antigen Test on the day of, or day prior to, the visit 		<ul style="list-style-type: none"> Not applicable General visitors not permitted 		
Caregivers	<ul style="list-style-type: none"> One PCR Test and one Antigen Test on separate days within a seven-day period Caregivers who visit the home only once within a seven-day require a PCR test only and are exempt from requiring an Antigen Test within the seven-day time period 				
Support Workers	<ul style="list-style-type: none"> A negative Antigen Test on the day of, or day prior to, the visit* 				

**Unless the support worker requires immediate access in an emergency or palliative situation*

As outlined in **Table 2**, access and visit requirements differ by visitor type.

Table 2. Visitor Access and Additional Requirements

	Essential Visitor			General Visitor (When Permitted)	
	Resident is Very Ill or Dying	Caregivers	Support Worker	Indoor	Outdoor
Visits are scheduled	No	No	No	Yes	Yes
Visits are restricted to certain days of the week, hours of the day	No	No	No	Yes	Yes
Permitted if there is a COVID-19 outbreak	Yes	Yes	Yes	No	No
Permitted if a resident is self-isolating or symptomatic	Yes	Yes	Yes	No	No
Permitted to visit a resident who is COVID-19 positive	Yes	No	Yes	No	No
Can visit with more than one resident on the same day	No	No	Yes	Yes	Yes
Must be designated	No	Yes	No	No	No
Visitor must attest that they have not visited another: <ul style="list-style-type: none"> ▪ Resident who is self-isolating or symptomatic; and/or, ▪ Long-term care home in an outbreak in past 14 days 	No	Yes	No	Yes	Yes
Reviewed this visitor policy within the past 30 days	No	Yes	No	No	No
Completed PPE, IPAC, and hand hygiene training	No	Yes [‡]	No	Yes	Yes

[‡] IPAC and PPE education and training for caregivers is achieved through routine review of this policy (including the videos listed in section 5.0 below) and completion of Learning Management System (LMS) training prior to their first visit and at least annually thereafter.

4.3 Visitor Access and Managing Onsite Volumes

Essential visitors are the only type of visitors allowed when a resident is self-isolating or symptomatic, or the home is in an outbreak, noting that:

- In order to safely welcome visitors, the Apotex must have the ability to support and implement all required public health measures as well as IPAC practices.
- Visitors must wear PPE as directed.
- If the Apotex becomes unable to provide appropriate PPE, visits will be suspended (note: if an essential visitor procures required PPE from their employer, they will be permitted to enter).
- The local public health unit may provide direction and/or restrictions on visitors to the home, depending on the specific situation.

With consideration to the physical characteristics of the Apotex, and in efforts to maintain the safety of our residents, visitors, and staff, there are limits on the number of visitors permitted onsite per resident at a time. **Table 3** outlines the Apotex visitor maximums.

Table 3. Visitor maximums

Essential Visitors			Non-Essential Visitors (When Permitted)
Resident is Very Ill or Dying	Caregivers	Support Workers	General Visitors
<ul style="list-style-type: none"> ▪ Maximum of 2 essential visitors in a 24 hour period[‡] ▪ Essential visitors can visit concurrently 	<ul style="list-style-type: none"> ▪ Maximum of 2 caregivers designated per resident ▪ Maximum of 1 caregiver per resident may visit at a time 	<ul style="list-style-type: none"> ▪ Any number of support workers may visit the home 	<ul style="list-style-type: none"> ▪ Maximum of 2 scheduled visitors during a visit time block ▪ General visitors can visit concurrently
<p>Across all visitor types, a maximum of 2 visitors can be in the resident's room concurrently in order to ensure physical distancing requirements.</p> <ul style="list-style-type: none"> ▪ The resident and/or SDM must develop a caregiver schedule to ensure caregivers are available according to the preferences of the resident and/or SDM and to ensure that only one caregiver is onsite at a time. ▪ A support person does not count towards the maximum number of visitors permitted on the campus; however, unit staff will ask additional visitors to step outside if there are more than two visitors present in the room. 			

[‡]**Note:** *Spiritual care providers can provide end of life support even if the maximum of 2 essential visitors has been reached for the day. When the spiritual care provider arrives, and if there are already two visitors present, one visitor will be asked to leave the room and unit staff will support the visitor to find an appropriate waiting space.*

4.4 Non-Adherence by Visitors

As is required under Directive #3 (see link below), visitor non-compliance with the policies and procedures described in this document could result in ending a visit early or temporarily discontinuing visits for the non-compliant visitor. Recognizing that visits are critical to residents' health and emotional well-being, every effort will be made to support visitors to participate in successful visits.

Intentional rounding, facilitated by Unit Leadership, the Client Relations and Experience Office, and/or the After Hours Supervisor (AHS) will occur, provided staff availability. The aim of this additional presence is to reinforce visiting protocols and to support visitors to have a meaningful and safe visit while also respecting the privacy of residents. All general visitors are provided with a safety brochure outlining expected IPAC practices upon their arrival at screening.

If situations arise despite the supports outlined above:

- Staff are encouraged to reinforce visit expectations given their key role as safety ambassadors.
- If non-compliance continues after reminders have been provided, point of care staff will notify the Unit Manager or AHS of the situation.
- The Unit Manager or AHS will follow-up with the visitor and resident as appropriate. Note: if this discussion occurs after-hours, the AHS will relay details to the Manager.
- Appropriate to the situation, the Unit Manager will communicate to the visitor the risk of visit termination or suspension and inform the Apotex Director of Care or the Apotex Executive Director.
- As a final step, the Apotex Director of Care or Executive Director will have a follow-up discussion with the resident and/or visitor and, if proportionate to the severity of the non-adherence, inform the resident and/or visitor that visits have been suspended. The Director will consult with the Client Relations and Experience Office as well as Risk, and Security as appropriate.
- Throughout the process, relevant point of care staff will be informed of actions.

Any decision to temporarily prohibit a visitor will:

- 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 visits may be resumed.

Where the home has temporarily prohibited a caregiver, the resident and/or their substitute decision-maker will have the opportunity to designate an alternate individual as a caregiver.

4.5 Request for Visitor Exemption from Quarantine

Exceptions for visitors will only be contemplated for residents who meet the criteria for essential visitors. Specific circumstances may include:

1. A visitor who is in isolation due to a potential exposure to COVID-19 who has received an exemption from 14 days of quarantine by Public Health (Baycrest IPAC must be consulted). The visitor must:
 - Be accompanied by staff to the unit.
 - Wear mask and eye protection.
 - Maintain a minimum of 6' (2m) of physical distance from the resident. If 6' (2m) cannot be maintained, the visitor must wear a gown and gloves.

- Limit visit length to 30 minutes or 1 hour (this will be decided by operational leadership).
1. A visitor who is in isolation due to recent international travel, requiring 14 days of isolation with completion of the following process as laid out by the Government of Canada when permitting [compassionate entry for travelers and limited release from quarantine](#).
 - Completion of the [Site Visit Authorization Form](#).
 - Submission of the completed Site Authorization Form to the Apotex in advance of arrival on site.
 - A signed [Letter of Required Support Form](#).
 - Physician notification of the respective Long Term Care Manager or delegate.
 - Prior to approval for the visit, consultation with Infection Prevention and Control is required to review the visitor's request once Social Worker or Long Term Care Manager are informed.

5.0 References

[COVID-19 Directive #3 for Long-Term Care Homes under the *Long-Term Care Homes Act, 2007*](#)

[Minister's Directive: COVID-19: Long-Term Care Home Surveillance Testing and Access to Homes, Effective March 15, 2021](#)

[Ministry of Long-Term Care, COVID-19 Visiting Policy, November 23, 2020](#)

Public Health Ontario Resources for Caregivers

- [COVID-19 Resources for Families and Visitors](#)
- Guidance document entitled [Recommended Steps for Putting on and Taking of 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](#)

Public Health Ontario Resources for General Visitors

- Guidance document entitled [Recommended Steps for Putting on and Taking of 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](#)

Appendix A: Designating Caregivers

Caregiver designations should be made in writing by emailing [the social worker on the resident's floor](#); alternatively, letters in a sealed envelope addressed to 'Baycrest Caregiver Program' may be left with screeners at the Apotex entrance. Requests for designation as a caregiver should include:

- Resident Name:
- Resident Floor:
- Caregiver (s) Name:
- Caregiver (s) Phone Number:
- Caregiver (s) Address:
- Caregiver (s) E-mail:

A resident and/or their SDM may change the designation of their caregiver; however, in an effort to limit infection spread, this should be done in limited circumstances such as a change in the:

- Resident's care needs that are reflected in the plan of care, or
- Availability of a designated caregiver, either temporary (e.g., illness) or permanent. If a caregiver is going to be temporarily unavailable for 14 days or longer, a change in designation may be facilitated.

Requests to change a caregiver can be made in writing by emailing the social worker. Alternatively, letters in a sealed envelope addressed to 'Baycrest Caregiver Program' may be left with screeners at the Apotex entrance. Requests for changes to caregiver designation should include:

- Resident Name:
- Resident Floor:
- Caregiver (s) Name:
- Caregiver (s) Phone Number:
- Caregiver (s) Address:
- Caregiver (s) E-mail

Requests for changes to caregiver status will be processed within five business days and the Apotex team will communicate with the replacement caregiver once processing is complete. A replacement caregiver is subject to the same training, testing, and attestation requirements as described in Section 4.2 of this policy and the replacement caregiver will not be permitted onsite until these requirements are met.