

Subject: Covid-19 Visitor Policy	
Section: Covid-19 Policy Manual	
Issued By: Health and Wellness Manager	Approval Date: June 16, 2020
Approved By: Retirement Manager	Effective Date: September 29, 2021

COVID-19 Visitor Policy

Intent

Trinity Village Studios has a responsibility to ensure residents receive visitors safely to help protect against the risk of COVID-19. This policy balances mitigating measures to protect the health and safety of residents, staff and visitors, with the physical, mental, emotional, and spiritual needs of residents for their quality of life and in consideration of the mental health and emotional well-being of residents and their loved ones. All visitors must comply with the requirements set out in this policy.

This policy complies with current ministry requirements per [Directive #3](#) (July 14, 2021), the [Reopening Ontario Act](#), applicable legislation and regulations, and is guided by the policies of the Ministry for Seniors and Accessibility (MSAA) and the Retirement Homes Regulatory Authority (RHRA), including the [Retirement Homes Policy to Implement Directive #3](#) (July 14, 2021).

If anything in the policy conflicts with guidance, recommendations or advice from the Chief Medical Officer of Health (CMOH), the CMOH guidance prevails, and the residence will take all reasonable steps to follow them. Additionally, any orders made by medical officers of health under section 22 of the Health Protection and Promotion Act (HPPA) and/or advice, instructions and recommendations of a medical officer of health under the Reopening Ontario Act supersedes this policy and procedures. If anything conflicts with applicable provincial requirements, the residence will follow those requirements. This policy will continue to be reassessed and revised based on provincial requirements.

For the purposes of this policy, an individual is considered “**fully immunized**” when they have received the total number of required doses of a vaccine approved by Health Canada and it has been at least 14 days since they received their final dose.

Guidelines

In addition to the requirements established in the Retirement Homes Act, 2010 and O. Reg 166/11, the Reopening Ontario Act, 2020, and Directive #3, this policy is guided by the following principles:

- **Safety:** Any approach to visiting, absences, and activities must balance the health and safety needs of residents, staff, and visitors, and ensure risks of infection are mitigated.
- **Mental Health and Emotional Well-being:** Allowing visitors, absences, and activities is intended to support the overall physical, mental and emotional wellbeing of residents by reducing any potential negative impacts related to social isolation.
- **Equitable Access:** All residents must be given equitable access to receive visitors and participate in activities consistent with their preferences and within restrictions that safeguard residents, staff and visitors.
- **Flexibility:** The physical characteristics /infrastructure of the home, its staffing availability, whether the home is in outbreak or in an area of widespread community transmission, and the current status of the home with respect to infection prevention and control (IPAC) including personal protective

equipment (PPE) are all variables to take into account when administering home-specific policies for visiting, absences, and activities.

- **Autonomy:** Residents have the right to choose their visitors. Residents also have the right to designate their caregivers. If a resident is unable to do so, substitute decision-maker(s) may designate caregivers.
- **Visitor Responsibility:** Visitors have a crucial role to play in reducing risk of infection for the safety of residents and staff by adhering to visitor policy requirements related to screening, IPAC and PPE and any precautions described in this policy.
- **Immunization:** Allowances for absences and activities reflect both the high rates of COVID-19 immunization as well as the protective effect that immunizations have had on the number of COVID-19 cases and outbreaks in retirement homes. This update reflects the evidence available so far across Canada and abroad and is subject to change as the knowledge of COVID-19 vaccines evolves.

Requirements for Visits

1. The residence will adhere to the requirements in any applicable directives issued by the Chief Medical Officer of Health (CMOH) and directions from the local Public Health Unit (PHU). This may include direction to take additional measures to restrict access and duration of visits during an outbreak or when the PHU deems necessary.
2. The following baseline requirements will be maintained to continue to accept any visitors:
 - i. Procedures for visits including but not limited to IPAC, scheduling and any setting-specific policies.
 - ii. Communication of clear visiting procedures with residents, families, visitors and staff, including sharing an **information package** with visitors on IPAC, masking, physical distancing and other health and safety procedures such as limiting movement around the residence, if applicable, and ensuring visitors' agreement to comply. Residence materials will include an expectation that visitors comply with visiting policies (**See Appendix A**)
 - iii. A process for any person to make complaints to the residence about the administration of visiting policies and a timely process for resolution. The information package for visitors will include the Retirement Home Policy to Implement Directive #3 (digital link, copy upon request) and information about how to escalate concerns about the residence to the RHRA by email and/or phone.
 - iv. The residence policies/procedures include an expectation that visitors comply with the visiting policy, with a process to notify residents and visitors that failure to comply with the visiting policy may result in discontinuation of visit(s) when risk of harm from continual non-compliance is considered too high, including a way to assess refusal of entry on a case-by-case basis.
 - v. Protocols for record keeping of visitations for contact tracing purposes (to be kept for at least 30 days in accordance with Directive #3) with the minimum requirements of: name, contact information, date and time of visit, resident visited (**See Appendix D**)
 - vi. Dedicated areas for both indoor and outdoor visits to support physical distancing (2 metres separation) between residents and visitors.
 - vii. Protocols to maintain best practices for IPAC measures prior to, during and after visits.
3. Factors that will inform decisions about visits in the residence include:
 - **Adequate Staffing:** The residence has sufficient staff to implement the policies related to visitors and to ensure safe visiting as determined by the home's leadership.

- **Access to adequate testing:** The residence has a testing policy and 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 has adequate supplies of relevant PPE required to support visits.
 - **Infection Prevention and Control (IPAC) standards:** The residence has appropriate cleaning and disinfection supplies and adhere to IPAC standards, including enhanced cleaning.
 - **Physical Distancing:** The residence can facilitate visits in a manner aligned with physical distancing protocols (2 metres separation).
4. If the residence restricts visits based on any of the above factors, the decision will be communicated to residents, including the reasons for the decision.

Types of Visitors

There are 3 categories of visitors: Essential Visitors, General Visitors, and Personal Care Service Providers. *Retirement home staff, students and volunteers as defined in the Retirement Homes Act, 2010 are **not** considered visitors.*

<p>1. Essential Visitors <i>Essential Visitors are persons performing essential support services (e.g., food delivery, inspectors, maintenance, or health care services (e.g., phlebotomy) or a person visiting a very ill or palliative resident).</i></p>	<p>A. Support Workers A Support Worker is a type of Essential Visitor who is brought into the home to perform essential services for the home or for a resident in the home, including the following individuals:</p> <ul style="list-style-type: none"> • Regulated health care professionals under the <i>Regulated Health Professions Act, 1991</i> (e.g., physicians, nurses); • Unregulated health care workers (e.g., PSWs, personal/support aides, nursing/personal care attendants), including external care providers and Home and Community Care Support Service Providers (formerly LHIN providers); • Authorized third parties who accommodate the needs of a resident with a disability; • Health and safety workers, including IPAC specialists; • Maintenance workers; • Private housekeepers; • Inspectors; and • Food delivery.
<p><i>There are two categories of Essential Visitors: Support Workers and Essential Caregivers.</i></p>	<p>B. Essential Caregivers An Essential Caregiver is a type of Essential Visitor who is designated by the resident or, if the resident is unable to do so, their substitute decision-maker.</p> <p>Essential caregivers visit to provide care to a resident (e.g., supporting feeding, mobility, personal hygiene, cognitive stimulation, communication, meaningful connection, relational continuity and assistance in decision-making).</p> <p>Essential Caregivers may be designated per resident (designation should be made in writing to home & home should have procedure for documenting Essential Caregiver designations and any subsequent changes). Residents or an SDM are able to designate the Essential Caregiver and the necessity of an Essential Caregiver is determined by the resident or SDM.</p> <p>Essential Caregivers; provided that they pass the screening requirements, cannot not be denied access to residents (e.g., immunization status should not impact access).</p> <p>In order to limit the spread of infection spread, a resident and/or their SDM should be encouraged to change the designation of their Essential Caregiver in limited circumstances, including in response to:</p> <ul style="list-style-type: none"> • A change in the resident’s care needs that is reflected in the plan of care; and/or • A change in the availability of a designated Essential Caregiver, either temporary (e.g., illness) or permanent.

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	Examples of Essential Caregivers include: family members who provide care, a privately hired caregiver, paid companions and translators. A resident may designate an external care provider as an Essential Caregiver even though that individual would also be considered a Support Worker.
2. General Visitors	A General Visitor is a person who is not an Essential Visitor and visits: <ul style="list-style-type: none"> • For social reasons (e.g., family members and friends of resident); • To provide non-essential services (may or may not be hired by the home or the resident and/or their SDM); and/or • As a prospective resident taking a tour of the home.
3. Personal Care Service Providers	A Personal Care Service Provider is a person who is not an Essential Visitor and visits to provide non-essential personal services to residents. Personal Care Services include those outlined under the Reopening Ontario Act, 2020 regulations O. Reg. 82/20, O. Reg. 263/20 and O. Reg. 364/20, such as hair salons and barbershops, manicure and pedicure salons, aesthetician services, and spas that are not being provided for medical or essential reasons (e.g., foot care to support mobility or reduce infections).

1. Designated Essential Caregivers and any subsequent changes will be documented through contacting the Retirement Manager or designate, completing the Essential Caregiver Designation Form, and signing the Covid-19 waiver of Liability, Declaration and Indemnity Agreement. Any changes to the agreement must be approved by the Retirement manager or designate. **(See Appendixes E and F).**
2. Residents/SDMs will be encouraged to change the designation of their Essential Caregiver in limited circumstances, as noted in the above chart, in order to limit the spread of infection.

Access to Residence

1. All visitors must agree to abide by the health and safety practices contained in Directive #3 as a condition of entry into the residence.
2. The residence will facilitate visits for residents and will not unreasonably deny visitors based on frequency of visits.
3. Visitors will not be refused based on their COVID-19 immunization status.
4. All visitors will be actively screened for symptoms and exposure history for COVID-19 before they are allowed to enter the residence and for outdoor visits (See “*Screening Visitors for COVID-19*” below and **Appendix D**).
5. Essential Caregivers, provided that they pass the screening requirements, will not be denied access to residents.
6. Visitors must follow public health measures (e.g., active screening, physical distancing (2 metres separation), hand hygiene, masking for source control) for the duration of their visit in the residence.
7. Residents who are self-isolating under Droplet and Contact Precautions may only receive Essential Visitors (e.g., residents may not receive General Visitors or Personal Care Service Providers). The residence may permit other residents who are not self-isolating to receive General Visitors and Personal Care Service Providers, provided it is in alignment with provincial requirements and they are not living in the outbreak area of a home.
8. The number of visitors permitted as outlined in the Retirement Homes Policy to Implement Directive #3 is noted below, however local PHU may advise further restrictions on visitors in part or all of the residence, depending on the specific situation. The residence and visitors must abide by any restrictions imposed by a PHU. At this time the Waterloo Region Public Health has no specific mandates in place for Retirement Homes and Trinity Village Studios Retirement Manager or designate will continue to monitor and update our policies as applicable.

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1. Essential Visitors (Support Workers & Essential Caregivers)	<p>Any number of Essential Visitors is permitted provided that they pass the screening requirement, are able to maintain social distance and adhere to all current policies and procedures of the residence.</p>
2. General Visitors	<p>General Visitors are permitted unless a resident is self-isolating and on Droplet and Contact Precautions, or the home is advised by the local PHU to stop general visits (e.g., during an outbreak). General Visitors must pass screening requirements and be reminded to follow applicable public health measures while visiting the home.</p> <p>Outdoor visits will be encouraged as much as possible, however depending on residents' needs, indoor visits, in-suite visits, and/or social absences may be supported.</p> <p>General Visitors may be permitted regardless of immunization status, and the residence will not unreasonably deny visits as long as the following policies are followed:</p> <ul style="list-style-type: none"> • General Visitors may visit a resident in an indoor or outdoor designated area, including in-suite. • General Visitors and residents must maintain physical distancing (2 metres separation) for the duration of the visit. This is with the exception of brief physical contact when hugging. • General Visitors must wear masks for the duration of the visit, unless exempt under the Directive #3 masking requirements (masking for residents is recommended). <ul style="list-style-type: none"> ○ When indoors, General Visitors must wear a medical mask. ○ When outdoors, General Visitors must wear a medical or non-medical mask. • The number of individuals in a group must not exceed provincial limits for indoor and outdoor gatherings, as applicable. Group limits for indoor and outdoor visits do not include children 2 years or under. <ul style="list-style-type: none"> ○ Indoors: 25 ○ Outdoors: 100 • The residence will consider the size of the designated space to allow physical distancing between residents and visitors, and visitors from different households. <p>For all visits with General Visitors, the following measures should be in place:</p> <ul style="list-style-type: none"> • The residence should ensure equitable access for each resident. • Visits should be booked in advance. • Opening windows should be considered for indoor and in-suite visits to allow for air circulation.
3. Personal Care Service Providers	<p>Personal Care Service Providers who are visiting or work on site as contractors are permitted to provide services in alignment with provincial requirements for their services.</p> <p>Personal Care Service Providers employed by the home may continue providing personal care services to residents.</p> <p>When providing services, Personal Care Service Providers must:</p> <ul style="list-style-type: none"> • Follow required public health and IPAC measures for Personal Care Service Providers and those of the home, including wearing a medical mask for the duration of their time to the home, eye protection when providing a service within 2 metres of an unmasked resident, practicing hand hygiene and conducting environmental cleaning after each appointment. • Recommend residents to wear a medical mask during their services, if services do not require the removal of masks. • Document all residents served and maintain the list for at least 30 days to support contact tracing.

Clarification from MSAA: *The number of visitors attending to a **palliative resident** should be decided on a case-by-case basis; homes should be communicating with families to come to a safe and supportive decision together.*

9. Unnecessary entry into the residence by visitors will be minimized (e.g., the residence will encourage food or package delivery to the foyer for resident pick up or staff delivery).
10. All residents, families, visitors and staff will be provided with this policy and information package, including education on all required protocols (including visitor complaints process). All visitors must review the contents of the information package prior to their visit and comply with the policy. Additional applicable policies and procedures will also be communicated as needed.
11. To support physical distancing between residents and visitors, designated indoor and outdoor visiting areas have been established. Indoors visits can take place in-suite for those suites that can allow for proper physical distancing. For those residents who require more space for visits areas have been designated on the Community Level and can be arranged by contacting The Retirement Program Manager. Outdoor visits will take place on the patio behind Trinity Village Studios.
12. Best practices for infection and prevention control (IPAC) measures will be maintained prior to, during and after visits. **All visitors must follow Trinity Village Studios IPAC protocols, including proper use of masks.** IPAC practices include:
 - I. Hand hygiene program
 - II. Screening and surveillance of infections
 - III. Environmental cleaning procedures that reflect best infection control practices
 - IV. Use of personal protective equipment
 - V. Outbreak detection and management
 - VI. Additional precautions specified to prevent the spread of infection
 - VII. Ongoing education on infection control
13. General visits will be booked in advance by filling out the Studios General Visitor Form which can be found on our website: <https://www.trinityvillage.com/The-Studios-General-Visitor.htm>. Booking visits in advance allows time to clean, disinfect and ensure adequate staffing to complete active screening of all visitors.
14. All visits to the residence, including by Essential Visitors, will be documented, including at minimum: the visitors' name, contact information, date and time of visit, and purpose of visit (e.g. name of resident visited). These records will be kept for a minimum of 30 days and will be readily available to the local PHU for contact tracing. **(See Appendix D)**
15. Fully immunized Essential Caregivers may join a fully immunized resident during a mealtime. *See COVID-19 Policy – Communal dining for more information.*

Screening Visitors for COVID-19

1. Asymptomatic Testing

16. Trinity Village Studios may follow any asymptomatic testing guidance issued by the RHRA. Asymptomatic testing of contacts for homes in outbreak will continue to be managed by local public health. *See COVID-19 Vaccination Program Policy for more information.* The following testing guidelines will need to be completed by visitors entering Trinity Village Studios:
 - Fully Vaccinated Individuals: COVID-19 testing not required
 - Partially or Unvaccinated Individuals: COVID-19 testing required every 2 weeks

2. Active Screening

- a) All visitors will be actively screened for symptoms and exposure history for COVID-19 at the beginning of their visit before being allowed to enter the residence per Directive #3. This includes indoor and outdoor visitors, regardless of immunization status **(See Appendix D)**. Screening will take place at the

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main entrance of Trinity Village Studios. Visitors should arrive five (5) minutes prior to scheduled visit to allow for adequate time to complete active screening.

- b) Visitors who do not pass screening will not be permitted access, unless:
 - a. It cannot be assured that resident care can be maintained if the visitor's entry were refused, assessed on a case-by-case basis by the Retirement Manager or designate.
 - b. Exceptions to passing screening are:
 1. First responders – must be permitted entry without screening in emergency situations
 2. Visitors for imminently palliative residents – must be screened prior to entry, but if they fail screening, they must be permitted entry but the residence will ensure that they wear a medical (surgical/procedural) mask and maintain physical distance from other residents and staff.
 3. Fully immunized essential visitors as per the [COVID-19 Screening Tool for Long-Term Care Homes and Retirement Homes](#).
- c) Visitor entry and their screening results will be documented and retained for at least 30 days to support contact tracing. **(See Appendix D).**

3. Safety Review - Essential Visitors

- a) If the residence is **declared in outbreak**, prior to visiting any resident for the first time, the residence may provide training to Essential Caregivers, and Support Workers who are not trained as part of their service provision or through their employment. Training will address how to safely provide direct care, including putting on (donning) and taking off (doffing) required PPE, and hand hygiene. Alternatively, if the residence does not provide the training, Essential Caregivers and Support Workers will be directed to appropriate resources from [Public Health Ontario](#) to acquire this training.
- b) For homes **not in outbreak**, prior to visiting any resident for the first time, and at least once every month thereafter, the residence will ask Essential Caregivers and Support Workers to verbally attest that they have:
 - i. Read/Re-Read the following documents:
 - The residence's visitor policy; and
 - Public Health Ontario's document entitled [Recommended Steps: Putting on Personal Protective Equipment \(PPE\)](#).
 - ii. Watched/Re-watched the following Public Health Ontario videos:
 - [Putting on Full Personal Protective Equipment](#);
 - [Taking off Full Personal Protective Equipment](#); and
 - [How to Hand Wash](#).
- c) Safety review screening will be documented and retained for at least 30 days **(See Appendix D).**

4. Safety Review - General Visitors and Personal Care Service Providers

- a) Prior to visiting any resident for the first time, and at least once every month thereafter, the residence may ask General Visitors and Personal Care Service Providers to verbally attest that they have:
 - i. Read/Re-Read the following documents:
 - Trinity Village Studios visitor policy; and
 - Public Health Ontario's document entitled [Recommended Steps: Putting on Personal Protective Equipment \(PPE\)](#).
 - ii. Watched/Re-watched the following Public Health Ontario videos:
 - [Putting on Full Personal Protective Equipment](#);

- [Taking off Full Personal Protective Equipment](#); and
 - [How to Hand Wash](#).
- b) Safety review screening may be documented and retained for at least 30 days **(See Appendix D)**.

Personal Protective Equipment

Visitors must wear PPE as required in Directive #3, which requires the residence to follow Directive #5 for Hospitals and Long-Term Care Homes:

1. Essential Visitors

- a) Support Workers are responsible for bringing their own PPE to comply with requirements for Essential Visitors as outlined in Directive #3. The residence may provide access to PPE to Essential Caregivers if they are unable to acquire PPE independently. This may include providing access to medical masks (surgical/procedure), face shields or eye goggles and any additional PPE required to maintain Contact and Droplet Precautions when providing care to residents who are isolating on Droplet and Contact Precautions.
- b) Per Directive #3, Essential Visitors:
 - i. Must use a medical mask while in the residence, including while visiting a resident who does not have, or is not suspected to have COVID-19 in their room (the resident should also wear a mask, if tolerated).
 - ii. Must wear appropriate eye protection (e.g., goggles or face shield) when providing care to residents with suspected/confirmed COVID-19 and in the provision of direct care within 2 metres of residents in an outbreak area. In all other circumstances, the use of eye protection is based on the point-of-care risk assessment when within 2 metres of a resident(s).
 - iii. Who are health care workers providing direct care or in contact with a resident who is suspected or confirmed with COVID-19 must wear appropriate PPE in accordance with Directive #5.
- c) Trinity Village Studios may reinforce appropriate use of PPE for Essential Visitors as outlined in Directive #5.
- d) Essential Visitors must attest to having received training on proper use of PPE, as noted above.
- e) Trinity Village Studios will intervene and reinforce appropriate uses of PPE if improper practices are alleged or observed. Essential Visitors must follow staff reminders and coaching on proper use of PPE.

2. General Visitors and Personal Care Service Providers

- a) General Visitors and Personal Care Service Providers must wear either a medical mask for indoor visits or a non-medical mask for outdoor visits and are responsible for bringing their own mask.
- b) General Visitors and Personal Care Service Providers must attest to having read the documents and watched the videos on PPE, as noted above.
- c) Trinity Village Studios will intervene and reinforce appropriate uses of PPE if improper practices are alleged or observed. General Visitors must follow staff reminders and coaching on proper use of PPE.

Retirement Home Tour Requirements

1. Virtual tours will be implemented as much as possible.
2. Prospective residents may be offered in-person, targeted tours of empty suites. These tours must adhere to public health measures and the following precautions:
 - The tour group must not exceed provincial limits for indoor social gatherings.

- All tour participants are subject to the General Visitor screening and PPE requirements outlined in the Retirement Homes Policy to Implement Directive #3 (e.g., active screening, wearing a face covering/mask, IPAC, maintaining social distance).
 - The tour route must be restricted in a manner that avoids contact with residents.
3. All in-person tours will be paused if a home goes into outbreak.

Discontinuation of Visits/Refusal of Entry

1. All visitors to the residence are expected to comply with the visiting policy. Failure to comply with the residence's visiting policy may result in the discontinuation of visit(s) when risk of harm from continual non-compliance is considered too high. Refusal of entry will be assessed on a case-by-case basis by the Retirement Manager or Designate.
2. The Visitor and resident will be notified in writing and more education provided; then escalated if continual non-compliance. If continual non-compliance occurs the visitor will be asked to leave, incident documented and future visits discontinued. Visitor will have to complete all required Public Health education as per this document and will have to show the Manager that they are fully aware of what is required of them before they will be allowed to schedule further visits. If non-compliance occurs again after further education the visits will be discontinued indefinitely.

Complaints Process

1. If a visitor has a complaint about the administration of the residence's visiting policies, they will be directed to share their complaint by phone or email with the Retirement Manager or COO. Concerns may be escalated to the RHRA via email or phone. This process is documented in the Information Package for Visitors.

Accessibility Considerations

The residence is required to meet all applicable laws such as the Accessibility for Ontarians with Disabilities Act, 2005.

Revision History:

Original Date: June 6, 2020

Revision Date(s): Sept 2020, Oct 2020, Dec 2020, May 2021, July 2021, September 29, 2021

Appendixes and Related Documents:

Appendix A - Information Package for Visitors

Appendix B - Signage for Visitors

Appendix C - Visiting Schedule

Appendix D - Visitor Screening

Appendix E – COVID-19 Waiver of Liability, Declaration, & Indemnity Agreement Template

Appendix F – Essential Caregiver Designation Form

Appendix G – MSAA Visitor Signage

TVS Policy – Covid-19 Communal Dining

TVS Policy – Covid-19 Vaccination Program

References:

Ministry of Health (MOH) Directive #3 – July 14, 2021

https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/directives/LTCH_HPPA.pdf

Retirement Homes Policy to Implement Directive #3 – July 14, 2021

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<https://www.rhra.ca/wp-content/uploads/2021/07/RH-Policy-to-Implement-Directive-3-Step-3-FINAL.pdf>

Retirement Homes Regulatory Authority (RHRA) Scenario Matrix: Retirement Home COVID-19 Visiting Policy – August 11, 2021

<https://www.rhra.ca/wp-content/uploads/2021/08/Visitor-Matrix-Compared-Draft-Updated-Effective-July-16-Edited-August-11.pdf>