
Making Every Day Matter

Nithview Community Long-term Care and Retirement Visiting Policy Effective October 15, 2021

The goal of this policy is to communicate the requirements as set out in the *Ministers Directive for COVID-19: Long Term Care Home Surveillance Testing and Access to Homes*. The intention of this policy is to minimize the potential risks associated with the ongoing COVID19 pandemic in Ontario in all long-term care homes (LTCHs) and retirement homes (RHs) while balancing mitigating measures with the need to protect the physical, mental, emotional, and spiritual needs of residents for their quality of life.

In the Policy, LTCH refers to Long Term Care, Retirement Home and Tower Apartment Residents as they are co-located, as long as we are required to follow Directive #3.

Visiting. (see appendix A for Visiting Guideline Snapshot)

Essential visitors are persons performing essential support services. Essential visitors include, but are not limited to the following:

A support worker is a type of essential visitor who is visiting to perform essential support services for the home or for a resident at the home.

A caregiver is a type of essential visitor who is at least 18 years of age and is designated by the resident or their substitute decision-maker and is visiting to provide direct care to the resident.

Essential Visitor (Care Giver) Designation:

- There is no limit to the number of persons who can be designated as a caregiver for a resident
- **The designation for a care giver must be submitted in writing to:
Retirement: Stacey Zehr and Long Term Care: Candi McGraw**
- The decision to designate someone as a caregiver is entirely remit of the resident or the Substitute Decision Maker.

A General Visitor: A General Visitor is a person who is not an Essential Visitor and visits:

- 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 substitute decision-maker); and/or
- As a prospective resident taking a tour of the home.

All visitors will be screened and will sign in at the main entrance of Nithview Community. Nithview will be continuing to ask screening questions that are in addition to the ones provided on the Provincial screening tools.

All visitors must indicate their intention to visit (indoor and Outdoor). Visits will be tracked using the online Visiting tool. This registration will also provide the link to the Visitor Education package. Prior to visiting any resident for the first time, and once every month thereafter, all Essential Visitors (caregivers) and General Visitors, must attest to having reviewed the visitor education that is available on the Tri County Mennonite Homes Website; <http://tcmhomes.com/>.

If a visitor arrives who has not completed the process of online registration, a tablet will be available, and the front door staff will assist the visitor to complete the process.

This attestation will be part of the screening. Although Education still must be reviewed Monthly, Essential **visitors no longer need to submit Essential Visitor agreement or proof of completion of Education monthly.**

General Visitors younger than 14 years of age must be accompanied by an adult (age 18 or older) and must complete the screening and testing requirements. They do not need to complete the Education.

All visitors must wear a medical mask while visiting indoor or outdoor, which will be provided, and follow all Public Health guidelines (i.e. distancing, groups size, mask etiquette, and hygiene)

Visits to take place **Monday to Sunday**. Visiting hours are from 9:00am to 7:00pm. There is no limit to frequency or length of visit within the visiting hours.

** All residents are allowed at a minimum, two general visitors and two caregivers at a time. **

Testing

Visitors will need to provide proof of vaccination. This proof must be in the form of Ministry receipt of the 2nd dose received. (*Fully immunized definition is an individual has received the total required number of doses of a COVID-19 vaccine approved by Health Canada (e.g., both doses of a two-dose vaccine series, or one dose of a single-dose vaccine series; or an individual received their final dose of the COVID-19 vaccine at least 14 days ago).*)

Visitors who do not show proof of vaccination will be required to complete the full Rapid Antigen Testing. If you receive a positive result, the visit will not take place, you will be asked to leave the premises immediately, and will be instructed to follow up with your local public health unit

Fully Vaccinated Visitors

Fully vaccinated visitors will be required to participate in **randomized Rapid Antigen** testing. Randomized testing will take place on a weekly basis and will not be on one static day of each week. The visitor will be told upon arrival whether they require a randomized antigen test.

Partially or unvaccinated Visitors

Visitors who are not Fully Vaccinated must complete rapid antigen testing on arrival. Visitors entering the facility are required to have a “Day of” Rapid Antigen test, unless they were tested the previous day (i.e, a Rapid Antigen Test is valid for two days). Proof of previous day’s test must be presented upon entrance, or you will be required to take another Rapid Antigen Test

General visitors who are coming to the home for an outdoor visit only are not subject to surveillance testing, but do need to complete the symptom screening at the front door prior to visit.

All individuals entering the home ages 2 and up must follow the testing requirements as stated in the Nithview Visitors Policy. Parental consent is required for minors (individuals under 18 years of age) that undergo testing. If consent is not given and/or testing is refused, the individual is not permitted to enter the home.

For detailed information on requirements, refer to the [Minister of Long-Term Care’s Directive COVID-19: Long-term care home surveillance testing and access to homes.](#)

Non-Adherence to these guidelines will result in your visits being discontinued

Staff Testing Requirements:

Until October 31st

- all unvaccinated or partially vaccinated team members are to follow the process of one PCR and one Rapid same testing requirements as visitors.
- Fully vaccinated team members will follow randomized rapid testing.

Absences. (see Absence Guideline Snapshot)

There are four types of absences. The definitions/conditions for resident absences are as follows:

- **Medical absences** are absences to seek medical and/or health care and include:
 - Outpatient medical visits and a single visit (less than or equal to 24 hours in duration) to the Emergency Department
 - All other medical visits (e.g., admissions/transfers to other health care facilities, multi-night stays in the Emergency Department)
- **Compassionate/palliative absences** are absences that include but are not limited to absences for the purposes of visiting a dying loved one.
- **Short term (day) absences** are absences that are less than or equal to 24 hours in duration. Testing or self-isolation of residents is not required on return. There are two types of short term (day) absences:
 - Essential absences include absences for reasons of groceries, pharmacies, and outdoor physical activity
 - Social absences include absences for all reasons not listed under medical, compassionate/palliative, and/or essential absences that do not include an overnight stay.
- **Temporary absences** include absences involving two or more days and one or more nights for non-medical reasons.

All residents, regardless of immunization status, may go on short term (essential and social) and temporary absences unless the resident:

- is in isolation on droplet and contact precautions
- resides in an area of the home that is in an outbreak
- is otherwise directed by the local public health unit

Residents do not need to seek approval to go on short-term absences however, prior approval is required from the home for a temporary absence. Request for approval does not need to be in writing.

For all absences, residents must be:

- provided with a medical mask when they are leaving the home
- reminded to practice public health measures such as physical distancing and hand hygiene when outside of the home
- actively screened upon their return to the home

As per Directive #3, residents will not be restricted or denied absences for medical or palliative or compassionate reasons at any time. This includes when a resident is in isolation or when a home is in an outbreak. In these situations, the home will consult with the Local Public Health Unit.

For **fully immunized residents** testing and self-isolation is not required following an absence. For **partially immunized or unimmunized residents**, a negative lab-based PCR test is required upon return to the home. The resident must be placed in isolation on Droplet and Contact Precautions while their test result is pending, and if their test result is negative, isolation on Droplet and Contact Precautions can be discontinued.

Universal Masking.

All staff and visitors must always comply with universal masking and must wear a medical mask for the entire duration of their shift or visit (indoor or outdoor). The following requirements apply regardless of whether the LTCH is in an outbreak or not.

Staff are required to comply with universal masking at all times, even when they are not delivering direct patient care, including in administrative areas. During their breaks, to prevent staff-to-staff transmission of COVID-19, staff must remain two meters away from others at all times and be physically distanced before removing their medical mask for eating and drinking. Masks must not be removed when staff are in contact with residents and/or in designated resident areas.

Visitors must wear a medical mask at all times during indoor and outdoor visits.

Residents must be encouraged and assisted to wear a medical mask or non-medical mask, as tolerated, when receiving direct care from staff, when in common areas with other residents (with the exception of meal times), and when receiving a visitor. Any additional directions provided by the province, the local public health unit, and/or municipal bylaws will be followed.

Exceptions to the masking requirements are as follows:

- Children who are younger than 2 years of age;
- Any individual (staff, visitor, or resident) who is being accommodated in accordance with the Accessibility for Ontarians with Disabilities Act, 2005; and/or
- Any individual (staff, visitor, or resident) who is being reasonably accommodated in accordance with the Human Rights Code.

Eye protection.

Appropriate eye protection requirements (for example, face shields or eye goggles) are part of an individual's PPE to protect themselves against other people's potentially infectious respiratory droplets. As per Directive #3, eye protection is required for all staff and all essential visitors (including caregivers) when they are:

- providing care to residents who are self-isolating due to suspected/confirmed COVID-19 case
- providing direct care to residents within two meters in an outbreak area
- In all other circumstances (for example, when providing care in non-outbreak settings and/or to residents in self-isolation), the use of eye protection based on the point-of-care risk assessment when within two meters of a resident(s).

Active Screening of All Persons.

(including Staff, Visitors, and Residents Returning to the Home).

All individuals must be **actively screened** for symptoms and exposure history for COVID-19 before they are allowed to enter the LTCH and Retirement Home. For clarity, staff and visitors must be actively screened **once per day at the beginning of their shift or visit.**

**First responders are permitted entry without screening in emergency situations.

Residents returning to the LTCH following an absence who fail active screening must be permitted entry but isolated on Droplet and Contact Precautions and tested for COVID-19 as per the COVID-19: Provincial Testing Requirements Update.

Any staff or visitor who fails active screening (i.e., having symptoms of COVID-19 and/or having had contact with someone who has COVID-19) must not be allowed to enter the LTCH, advised to go home immediately to self-isolate, and encouraged to be tested. Visitors will be encouraged to follow up with testing at a testing centre.

Any staff showing symptoms will require a negative PCR test in the community, prior to returning to work.

There are two exceptions where individuals who fail screening may be permitted entry to the home:

- Staff with post-vaccination related symptoms may be exempt from exclusion from work where expressly permitted under and in accordance with the Managing Health Care Workers with Symptoms within 48 Hours of Receiving COVID-19 Vaccine guidance.
- Visitors for imminently palliative residents must be screened prior to entry. If they fail screening, they will be permitted entry, and we will ensure that they wear a medical (surgical/procedural) mask, eye protection, gown and maintain physical distance from other residents and staff.

Physical Distancing.

Physical distancing (a minimum of 2 meters or 6 feet) must be practiced at all times by every individual in the LTCH to reduce the transmission of COVID19.

The following are exceptions to physical distancing:

- for the purposes of providing direct care to the resident;
- for a fully immunized resident to have physical contact with their fully immunized essential caregiver(s) (e.g., holding hands, hugs); or
- for the purposes of a compassionate/palliative visit

References

Minister's Directive: *COVID-19: Long-term Care Home Surveillance Testing and Access to Homes*, Effective: October 15, 2021

Ministry of Health, *COVID-19 Directive #3 for Long-Term Care Homes under the Long Term Care Homes Act, 2007 Issued under Section 77.7 of the Health Protection and Promotion Act (HPPA), R.S.O. 1990, c. H.7.*, July 14, 2021. Effective: July 16, 2021. [COVID-19 Directive #3 for Long-Term Care Homes under the Long-Term Care Homes Act, 2007 \(gov.on.ca\)](#)

Ministry of Long-Term Care, *COVID-19 guidance document for long-term care homes in Ontario*, Effective August 20, 2021. [MLTC Guidance Document](#)

Ministry of Long-Term Care, *Directive #3, COVID-19 Guidance Document for LTCHs, and Rapid Testing Merged FAQs*, Effective: August 20, 2021. [MLTC Pandemic Response FAQs](#)

Ministry of Long-Term Care, *Long-Term Care Visitor, Absences & Social Gatherings Snapshot*, Effective July 16th, 2021. [LTC Visitor Absences Social Gatherings Snapshot July 13 FINAL.pdf \(ltchomes.net\)](#)

Ministry of Seniors and Accessibility (MSAA) and the Retirement Homes Regulatory Authority (RHRA), *Retirement Homes Policy to Implement Directive #3*, July 14, 2021, Effective July 16th, 2021.

Appendix A – Visiting Guideline Snapshot

REQUIREMENTS		FULLY IMMUNIZED	PARTIAL/ UNIMMUNIZED	OUTBREAK / RESIDENT IN
VISITORS <i>*Masks required at all times</i> <i>No sector specific limitations on number of caregivers and visitors.</i>	ESSENTIAL – CAREGIVER	May have physical contact, including for non-care related reasons with fully immunized resident. May support in dining room, join in activity <i>Surveillance testing as per Directive #3</i>	Physical distancing 2m required when not providing direct care, however brief physical contact (hugs) are permitted Unable to join in dining room/ activities Participate in surveillance testing for indoor visits	May support in resident's room / isolation room (1 per visit) <i>Must wear eye protection when providing direct care</i>
	NON-ESSENTIAL GENERAL VISITOR	Close contact with fully immunized resident allowed. No eye protection required <i>Surveillance testing as per Directive #3</i>	Physical distancing 2m required however brief physical contact (hugs) are permitted Participate in surveillance testing for indoor visits	Not permitted unless resident in area unaffected by outbreak
	Personal care services (e.g. haircutting) may resume			

Appendix B – Absence Guideline Snapshot

Absences	Requirements
<p>Short term (day) absence Essential outing and Social outing</p>	<ul style="list-style-type: none"> -Permitted unless the resident is self-isolating -Residents must follow public health measures during the absence -Active screening on return -Testing or self-isolation not required upon return
<p>Temporary (overnight) absence</p>	<ul style="list-style-type: none"> - Permitted unless the resident is self-isolating - Residents must follow public health measures during the absence - Active screening on return - Fully immunized residents do not require testing or self-isolation upon return. - Partially immunized or unimmunized residents require a negative lab-based polymerase chain reaction (PCR) test upon return to the home. The individual must be placed in isolation on Droplet and Contact Precautions if their test result is pending. If their test result is negative, isolation on Droplet and Contact Precautions can be discontinued.