



Greenwood Court General COVID-19 and Visiting Policy

Policy:

Greenwood Court 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.

Although Vaccination against COVID-19 is not required to visit your loved one, Tri-County Mennonite Homes strongly encourages up-to-date vaccination status with all recommended vaccination doses.

Guiding Principles

In addition to the requirements established in the Fixing Long-Term Care Act, 2021, Retirement Homes Act, 2010 and O. Reg 166/11, the Reopening Ontario Act, 2020, and Minister's Directive, 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 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 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. FLTA, 2021, S 3 (6).
- **Visitor Responsibility:** Visitors have a crucial role to play in reducing the 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.
- **COVID-19 Vaccination:** The goal of the provincial COVID-19 vaccination program is to protect Ontarians from COVID-19. Vaccines help reduce the number of new cases and, most importantly, severe outcomes including hospitalizations and death due to COVID-19. All individuals, whether or not they have received a COVID-19 vaccine, must continue to practice the recommended public health measures and comply with all applicable laws for the ongoing prevention and control of COVID-19 infection and transmission.

Co-Located Home – Greenwood Court is a Co-located Home.

In a co-located long-term care and retirement home that is not physically and operationally independent (*i.e. there are separate entrances and no mixing of residents or staff between the retirement home and*



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the LTC home), the policies for the LTC home and the retirement home shall align where possible or follow the more restrictive requirements unless otherwise instructed by the local public health unit (PHU) based on COVID-19 prevention and containment.

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.

Asymptomatic Screening Testing: Staff and visitors (including contractors, volunteers, etc) will no longer be required to have proof of a negative rapid test result or be rapid tested to enter the home. Testing of symptomatic residents will continue, and staff, students, volunteers, general visitors, caregivers and support workers are encouraged to get tested if symptomatic. As with any other respiratory illness, visitors and staff will need to remain absent for 5 days or until symptoms have improved for 24 hours or 48hrs if vomiting/diarrhea; and no fever.

Masking: Masks and PPE are recommended, but not required, in all areas of the home. Caregivers and visitors may now join their loved ones for dining and sharing a meal or beverage in communal areas.

For staff, students, volunteers and support workers – masks are required based on a **point-of-care risk assessment (PCRA)** . **PCRA** must be completed by every health care worker before every patient interaction and task to determine whether there is a risk to the health care worker or other individuals of being exposed to an infectious agent, including COVID-19, and determine the appropriate IPAC measures to be taken. See Appendix D for additional information on **PCRA**.

We will continue to be a **“Mask Friendly”** environment. In alignment with the Residents’ Bill of Rights, we will respect the wishes of a resident or substitute decision maker who request that a staff member wear a mask when providing care. Any visitors or staff who wish to continue wearing a mask will be provided a mask.

Resident Screening: Registered staff will continue to assess each resident once daily at a minimum for signs and symptoms of infection (including COVID-19). Registered staff will continue to initiate additional necessary monitoring of residents as required.

Visitor screening: Individuals who enter the home will continue to self-monitor for signs of infection upon arrival. We ask that all individuals planning to enter the home are diligent about self-monitoring for potential symptoms and stay home if they are feeling unwell.

The front door sign in will continue for all who are entering Greenwood Court.

Visitors During Outbreak: There will no longer be a limit of one visitor at a time per resident during an outbreak, or when a resident is under isolation precautions. Visitors to isolation rooms will continue to be required to wear appropriate PPE while in the resident room. In addition, visitors to isolation rooms will continue to be required to remain within that resident’s room while in the home, to limit the risk of infection transmission. Greenwood Court will follow all Public Health guidelines during an outbreak.



Activities/Physical distancing: Activities/entertainment will no longer have to be adjusted for physical distancing or participant size. Visitors that are attending activities/entertainment with a resident are not required to mask while outside of the resident's room.

COVID-19 Vaccinations: Vaccination against COVID-19 continues to be encouraged and offered to all eligible individuals residing at Greenwood Court. There are no vaccination requirements for visitors and staff entering the home. Greenwood Court continues to follow Public Health recommendations for COVID-19 vaccination and as indicated, will continue to offer booster doses to residents and staff.

Physical Distancing and Cohorting

Currently, there are no COVID-specific requirements or restriction related to physical distancing or cohorting when not in outbreak.

Discontinuation of Visits/Refusal of Entry

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 management/designate.

Appendix A

PUTTING ON PERSONAL PROTECTIVE EQUIPMENT

1	PERFORM HAND HYGIENE	
2	PUT ON GOWN	
3	PUT ON MASK OR N95 RESPIRATOR	
4	PUT ON EYE PROTECTION	
5	PUT ON GLOVES	

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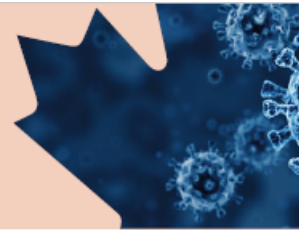
www.publichealthontario.ca

Appendix B

REMOVING PERSONAL PROTECTIVE EQUIPMENT		
1	REMOVE GLOVES	
2	REMOVE GOWN	
3	PERFORM HAND HYGIENE	
4	REMOVE EYE PROTECTION	
5	REMOVE MASK OR N95 RESPIRATOR	
6	PERFORM HAND HYGIENE	

Appendix C

People who are at risk of more severe disease or outcomes from COVID-19



Some people are at higher risk of more severe disease or outcomes from COVID-19 infection than others.

You may be at higher risk if you:

- › are an older adult (increasing risk with each decade, especially over 60 years)
- › are pregnant
- › have Down syndrome
- › haven't received all of your recommended COVID-19 vaccine doses
- › have a chronic medical condition, including:
 - asthma (moderate to severe)
 - dementia
 - diabetes
 - heart disease
 - high blood pressure
 - kidney disease
 - liver disease
 - lung disease
 - stroke
- › are immunocompromised, including if you:
 - have an underlying medical condition, such as cancer
 - take medications that reduce the immune response, such as chemotherapy
 - have had a solid organ or blood stem cell transplant
- › live with obesity (if you have a body mass index [BMI] of 40 or more)

Some settings and activities are associated with higher risk of transmission of COVID-19, such as:

- › settings that are:
 - crowded
 - poorly ventilated
- › activities that:
 - involve singing, shouting or heavy breathing
 - require you to remove your mask around people outside of your immediate household, like eating or drinking in public settings

When the risk of exposure is higher, layer multiple individual public health measures, such as:

- › wearing the best quality and best fitting respirator or mask that's available to you
- › avoiding or limiting the amount of time spent in higher-risk settings
- › improving ventilation in your home or co-living setting by opening windows and doors regularly, even for a few minutes at a time
- › maximizing your physical distance from people outside of your immediate household
- › regularly cleaning your hands

Avoid contact or sharing spaces with people who:

- › are sick or have symptoms of COVID-19
- › have or may have been exposed to COVID-19

If you must be in a shared space, limit the amount of time you're in the space and follow all public health measures to reduce the risk of spread. This includes wearing a well-fitting respirator. If a respirator is unavailable, it's recommended that you wear a well-fitted medical mask. If neither are available, you should properly wear a well-constructed and well-fitting non-medical mask.

Someone other than you should provide care to a person who is in quarantine or isolation. This will reduce your risk of becoming ill.

Ensure those you live with know you're at higher risk of severe disease or outcomes from COVID-19. This way they can take measures to protect themselves from infection and help prevent COVID-19 from entering the household.

Talk with your health care provider to learn how else to best protect yourself from COVID-19.

For more information on COVID-19:

Canada.ca/coronavirus
or contact 1-833-784-4397

Appendix D

What is PCRA?

A point of care risk assessment (PCRA) is the first step in Routine Practices, which should be used with all patients, for all care and patient interactions.

A PCRA assesses the task, the patient, and the environment to identify the most appropriate precautions that needs to be taken for that particular interaction or task.

A PCRA should be completed by every health care worker before every patient interaction and task to determine whether there is a risk to the health care worker or other individuals of being exposed to an infection, including COVID-19. As much as possible, the PCRA should be completed by the health care worker providing the care. If the health care worker (regulated or unregulated) does not have the knowledge, skill and training to perform a PCRA, the PCRA should be performed by a supervising health care worker that does. In some circumstances and settings, this may be achieved by patient room signage indicating the level of precautions needed as determined by the infection prevention and control lead of the setting.

A PCRA by the health care worker should include the frequency and probability of routine or emergent aerosol generating medical procedures (AGMPs) being required.

References

Ministry of Long-Term Care, *COVID-19 guidance document for long-term care homes in Ontario*, Effective June 26, 2023. [MLTC Guidance Document](#)

Ministry of Long-Term Care, COVID-19 response measures FAQs
Effective: June 26, 2023 [COVID-19 Response Measures FAQs](#)

Ministry of Health, *COVID-19 Guidance for Public Health Units; Long-Term Care Homes, Retirement Homes, and Other Congregate Living Settings*, Version 11 – June 26, 2023

[COVID-19 Guidance: Long-Term Care Homes, Retirement Homes, and Other Congregate Living Settings for Public Health Units](#)