



STATEMENT OF POLICY AND PROCEDURE			
Manual:	Administration	Issued:	2023-04-03
Subject:	COVID-19 Visitor Policy	Effective:	2023-04-03
Issue to:	All departments	Replaces:	Nov 7,2022
Issued by:	General Manager	Dated:	2023-04-03
Approved by:	General Manager	Dated:	2023-04-03
Reviewed by JHSC		Dated:	

# COVID-19 Visitor Policy

## Policy:

Riverview Heights is responsible for ensuring 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 their physical, mental, emotional, and spiritual needs 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.

On June 10, 2022, the Chief Medical Officer of Health (CMOH) released a memorandum to the Retirement Homes Regulatory Authority (RHRA) directing retirement homes to implement the policies, procedures and preventative measures in the Ministry of Health's COVID-19 Guidance: Long-Term Care Homes and Retirement Homes for Public Health Units to reduce the risk of COVID-19 among Residents. While the title of this document has been amended to Ministry of Health's COVID-19 Guidance: Long-Term Care Homes, Retirement Homes, and Other Congregate Living Settings for Public Health Units (MOH's COVID-19 Guidance: LTCH/RH/CLS for PHUs), it continues to be enforceable based on the CMOH memorandum to RHRA. As stated in the memorandum, it constitutes guidance, advice, or recommendations given to retirement homes by the CMOH, which the licensee of a retirement home shall ensure are followed in the retirement home in accordance with clause 27(5) (O. a) of O. Reg. 166/11 under the Retirement Homes Act, 2010.

Where noted in this policy, “**up to date**” concerning COVID-19 vaccination means a person has received all recommended COVID-19 vaccine doses, including any booster dose(s) when eligible.

Refer to Ministry of Health's [Staying Up to Date with COVID-19 Vaccines: Recommended Doses](#).

## Guiding Principles

This policy is in addition to the requirements established in the Retirement Homes Act, 2010 (RHA) and its regulation (O. Reg 166/11) and [MOH's COVID-19 Guidance: LTCH/RH and CLS for PHUs](#). The following principles guide it:

- **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 house is in an outbreak, and the status of the home concerning 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 cannot do so, substitute decision-maker(s) may designate caregivers.
- **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. Homes are highly encouraged to continue to promote vaccinations and boosters to all eligible Residents, staff, and visitors. Staying [up-to-date](#) with COVID-19 vaccines helps 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 to prevent and control COVID-19 infection and transmission. Visitors will not be denied entry to retirement homes based on their COVID-19 vaccination status.

## Requirements for Home Visits

1. Local PHUs may require restrictions on visitors in part or all of the home, depending on the specific situation. The home and visitors must abide by any restrictions a PHU imposes, which override any requirements or permissions in this guidance if there is a conflict.
2. The following minimum requirements will be maintained:
  - i. Procedures for visits, including, but not limited to, IPAC and any setting-specific policies.
  - ii. Communication of clear visiting procedures with Residents, families, visitors and staff, including sharing this **information package** with visitors:
    - a. The [Ministry for Seniors and Accessibility COVID-19 Guidance Document for Retirement Homes in Ontario](#) (March 2023), the CMOH memo to RHRA and the MOHs COVID-19 Guidance: LTCHs/RHs/CLS for PHUs.
    - b. Details on any visitor or visiting restrictions.
    - c. Details regarding IPAC and masking.
    - d. Information about how to escalate concerns about the residence to the RHRA via the RHRA email and/or phone number; and
    - e. Other health and safety procedures, such as limiting movement around the residence, if applicable, and ensuring visitors' agreement to comply with visiting procedures.
  - iii. A process for complaints about the administration of visiting policies and a timely process for resolving complaints.
  - iv. Requirements for visitor compliance with visiting policies and a process to notify Residents and visitors that failure to comply with the visiting policy may result in the discontinuation of visit(s) when the 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 to maintain best practices for IPAC measures prior to, during and after visits.
3. The residence will ensure the following are put in place to facilitate safe visits:
  - **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 PPE:** The residence has adequate supplies of PPE required to support visits.
  - **IPAC standards:** The residence has appropriate cleaning and disinfection supplies and adheres to IPAC standards, including enhanced cleaning.
4. If the residence restricts visits based on these factors, the decision will be communicated to Residents, including the reasons for the decision.

## **Masking** (Per the [Ministry for Seniors and Accessibility COVID-19 Guidance for RHs](#))

### **Indoors**

- The residence must ensure that visitors wear a medical mask for the duration of their shift or visit indoors. Masks are required in hallways, all common areas, and in group settings.
- Though it is strongly encouraged for visitors to wear a mask in a Resident's room, visitors may remove their masks if they are visiting in a Resident's room if they wish.
- With the exception of high-risk exposure, an outbreak or any advice and direction from a PHU, there is no requirement for Residents to wear masks inside the residence. However, the Residents are encouraged to wear a medical mask or non-medical mask when receiving direct care from staff, when in common areas with other Residents (except of mealtimes), and when receiving a visitor, as tolerated.

### **Outdoors**

- Masks are not required outdoors for visitors. However, it is still encouraged when and if in close proximity to others.

### **Exemptions**

Exceptions to the masking requirements include:

- Children who are younger than two years of age.
- Any individual (staff, student, volunteer, visitor, or Resident) who is being accommodated in accordance with the Accessibility for Ontarians with Disabilities Act, 2005 or the Ontario Human Rights Code; or
- If entertainment provided by a live performer (that is, a visitor) requires the removal of their mask to perform their talent.
- The residence must have policies for individuals (staff, students, volunteers, visitors, or Residents) who:
  - Have a medical condition that inhibits their ability to wear a mask; or
  - Are unable to put on or remove their mask without assistance from another person.

## **Types of Visitors**

There are three 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 of 2010*, are not considered visitors.

## **Access to Residence**

Local PHUs may require restrictions on visitors in part or all of the home, depending on the specific situation. The home and visitors must abide by any restrictions imposed by a PHU, which override any requirements or permissions in this guidance if there is a conflict.

When a Resident is isolating the Resident will be permitted one Essential visitor daily, the essential visitor will book with the reception desk and will be provided education as per the Safety Review. The Essential visitor may visit for any duration of time however should not exit and re-enter in the same day unless necessary to meet the needs of the Resident. Essential visitors may be required to RAPID ANTIGEN TEST prior to entry and may be required to actively screen.

When a Resident is isolating and not permitted General Visitors, the home must provide support for their physical and mental well-being to mitigate any potential negative effects of isolation. This includes individualized mental and physical stimulation that meets the abilities of the individual. Homes should use sector best practices wherever possible.

## 1. Essential Visitors

*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). Essential Visitors are permitted regardless of vaccination status and are the only type of visitor permitted while a Resident is isolating under Droplet and Contact Precautions.*

External Care Providers (ECPs): ECPs are employees, staff or contractors of Home and Community Care Support Services (HCCSS) (formerly LHINs) and provide services to External Care Providers (ECPs): ECPs are employees, staff or contractors of Home and Community Care Support Services (HCCSS) (formerly LHINs) and provide services to Residents. They are considered **Essential Visitors** to retirement homes and must comply with applicable requirements under the [MOH's COVID-19 Guidance: LTCH/RH/CLS for PHUs](#).

## 2. General Visitors are persons who are not an Essential Visitor and visit:

- a. For social reasons (e.g., family members and friends of Resident);
- b. To provide non-essential services (may or may not be hired by the home or the Resident and/or their SDM); and/or
- c. As a prospective Resident taking a tour of the home.

## 3. Personal Care Service Providers are persons who are not an Essential Visitor and visit to provide non-essential personal services to Residents. Personal Care Services include those outlined under the Health Protection and Promotion Act, such as hair salons and barbershops, manicure and pedicure salons, and aesthetician services, that are not being provided for medical or essential reasons.

When providing services, Personal Care Service Providers must:

- Follow required public health and IPAC measures for retirement homes;
- Follow the masking requirements; and
- Practice hand hygiene and conduct environmental cleaning after each appointment.

## Screening Visitors for COVID-19

### 1. Active Screening

Though not required, the residence could continue to have an established process for conducting active screening for COVID-19 symptoms and exposures for visitors (including General Visitors, Personal Care Service Providers, and Essential Visitors) entering the residence and ensure this is clearly communicated and well-understood. The Ministry of Health's COVID-19 Screening Tool for Long-Term Care Homes and Retirement Homes remains available to help facilitate the residence's screening process.

*In the event the home is declared in an outbreak or on the direction of Public Health, active screening may resume.*

*The screening will occur indoors at the front entrance (Reception) during reception hours between 9 am and 5 pm. Outside of these business hours, visitors will use the front entrance phone (located between the entrance doors) and call nursing to be screened and granted entry.*

*Exemptions to active screening apply to First responders, visitors for imminently palliative Residents, and individuals with post-vaccination symptoms, those who are not required to pass screening but must remain masked and maintain physical distance from other Residents and staff for the duration of the visit.*

Essential Visitors and General Visitors are not permitted access if they do not pass screening and should be advised to follow the current case and contact recommendations. Visitors who do not pass screening will be

instructed to contact RCVTAC at 1-844-727-6404 for further advice/direction. In the event an Essential visitor is denied entry due to failure of screening, the Director of Care or designate will review the needs of the Resident individually and assist in facilitating needs (e.g. with home and community care services or via fee for service from Care services department or dietary department).

In addition, as outlined in the Ministry of Health's Management of Cases and Contacts of COVID-19 in Ontario (August 2022), if a visitor has COVID-19 symptoms or a positive COVID-19 PCR, RAPID MOLECULAR OR RAPID ANTIGEN TEST, they need to self-isolate for a total of 10 days after the date of specimen collection or symptom onset (whichever is earlier/applicable). They should continue to wear a well-fitted mask in all public settings and avoid non-essential activities where mask removal is necessary (e.g., dining out, playing a wind instrument, high contact sports where masks cannot be safely worn), and not visit anyone who is immunocompromised or at higher risk of illness (e.g., seniors), and avoid non-essential visits to highest risk settings such retirement homes.

## **Infection Prevention and Control (IPAC) Practices**

Infection Prevention and Control (IPAC) refers to evidence-based practices and procedures that, when applied consistently in health care settings, can prevent or reduce the risk of transmission of microorganisms to Residents, staff and visitors.

**All visitors must follow the residence's infection and prevention control protocols (IPAC), including proper use of masks.**

### **IPAC practices include:**

1. Hand hygiene program
2. Screening and surveillance of infections
3. Environmental cleaning procedures that reflect best infection control practices
4. Use of personal protective equipment
5. Outbreak detection and management
6. Additional precautions specified to prevent the spread of infection
7. Ongoing education on infection control
8. Vaccination program

## **2. Safety Review - General Visitors and Personal Care Service Providers**

### **Training**

Using, applying, and removing PPE correctly is critical to reducing the risk of transmission of COVID-19.

Prior to visiting any Resident in a home declared in outbreak for the first time, the residence should provide training to Essential Caregivers and Support Workers who are not trained as part of their service provision or through their employment. Training must address how to safely provide direct care, including putting on (donning) and taking off (doffing) required PPE, and hand hygiene.

### **Read:**

- The home's visitor policy; and
- [Public Health Ontario's document entitled Recommended Steps: Putting on Personal Protective Equipment \(PPE\)](#)

#### Watch:

- [Putting on Full Personal Protective Equipment;](#)
- [Taking off Full Personal Protective Equipment;](#) and
- [How to Hand Wash.](#)
- [Taking off Mask and Eye Protection](#)

### 3. Safety Review - Essential Visitors

- a) Prior to visiting any Resident in the residence that is declared in outbreak for the first time, the residence should provide training to Essential Visitors who are not trained as part of their service provider or through their employment. Training must address how to safely provide direct care, including putting on (donning) and taking off (doffing) required PPE and hand hygiene. If the residence does not provide the training, Essential Visitors must be directed to appropriate resources from [Public Health Ontario](#) to acquire this training.

#### Respiratory Etiquette

It is important to help reduce the spread of illnesses by using proper respiratory etiquette. This means that instead of covering your mouth with your hands when coughing or sneezing, use your sleeve or a tissue. This reduces the number of germs on your hands, though it is still important to wash your hands after coughing or sneezing.

**Respiratory etiquette should be practiced by all visitors during all visits on the residence property to reduce the risk of COVID-19 transmission.**

#### Hand Hygiene

Hand hygiene is a general term referring to any action of hand cleaning and is a fundamental component of infection prevention and control. Touching your eyes, nose or mouth without cleaning your hands or sneezing or coughing into your hands may provide an opportunity for germs to get into your body. Keeping your hands clean through good hygiene practice is one of the most important steps to avoid getting sick and spreading germs to others.

- **Handwashing** with soap and running water, as opposed to using hand sanitizer, must be done when hands are visibly soiled. Hand hygiene with soap and water – done correctly – removes organisms.
- **Hand sanitizers** with 70-90% alcohol may be used when your hands are not visibly dirty. Hand hygiene with alcohol-based hand sanitizer – correctly applied – kills organisms in seconds.

**It is recommended that all visitors perform hand hygiene prior to beginning each visit with a Resident and if at any time their hands become soiled during the visit. Wash or sanitize your hands at the end of the visit as well.**

#### Social Gatherings and Organized Events

- Social gatherings and organized events include activity or exercise classes, performances, religious services, movie nights, and other recreational and social activities (e.g., bingo, games) and are to be permitted at all times unless advised by the local public health unit.
- The residence is no longer required to keep attendance records for social gatherings, organized events, communal dining, and other recreational activities.
- Participants of social gatherings and organized events in the residence are subject to following masking protocols set out in this policy.

- Residents who are in isolation or experiencing signs and symptoms of COVID-19 must not engage in social gatherings or organized events until they no longer are experiencing symptoms and have been cleared from isolation.
- The residence will offer Residents in isolation individualized activities and social stimulation.

### **Requirements for Social Gatherings, Dining and Recreational Services When a Home is in Outbreak**

Note: The local PHU will direct testing and public health management of all those impacted (staff, Residents, and visitors) using a risk-based approach. It is important to consider both the risk to Residents and the potential harm of Resident isolation and testing when implementing public health measures.

- Group activities and communal dining should be conducted such that the outbreak unit is cohorted separately from unexposed Residents and units. At the discretion of the PHU/OMT, group activities and communal dining for cohorts (exposed and separated from unexposed) may resume.
- At the discretion of the PHU/OMT, communal dining and group activities may be paused completely in the case of a facility-wide outbreak where transmission is uncontrolled, the rate of increase in cases or severity of illness is significant or unexpected, and the benefits of closure of communal activities are deemed to be greater than the harms caused to Resident wellbeing. This decision should be revisited as the outbreak progresses.

**Note:** PHU has discretion to pause communal dining and activities in a home-wide outbreak, based on severity and risk of transmission

For questions regarding the MSAA COVID-19 Guidance, please contact the government at [RHinquiries@ontario.ca](mailto:RHinquiries@ontario.ca).

### **Communal Dining**

- Unless otherwise advised by the local PHU, communal dining is permitted at all times with the following public health measures in place:
  - Participants in communal dining are subject to masking requirements.
  - Visitors may accompany a Resident for meals to assist them with eating.
  - Frequent hand hygiene is recommended for staff, Residents, and visitors.

The residence must ensure that Residents experiencing signs and symptoms of COVID-19 do not participate in communal dining until the Resident is no longer symptomatic and has been cleared from isolation. This must not interfere with providing the Resident a meal during the scheduled mealtime.

### **Retirement Home Tour Requirements**

Prospective Residents/visitors may be offered in-person unless they have been advised otherwise by their local PHU.

- All tour participants are subject to the General Visitor screening and PPE requirements outlined in the [Ministry for Seniors and Accessibility COVID-19 Guidance Document for Retirement Homes in Ontario](#) (Oct, 2022) (e.g., active screening, wearing a medical mask, IPAC, maintaining physical distancing).
- Tours may continue during an outbreak. However, outbreak areas in the home should be avoided.

### **Discontinuation of Visits/Refusal of Entry**

Non-compliance with the residences' policies could result in discontinuing visits for the non-compliant visitor. If a Resident or visitor is found to be non-compliant in following the visitation policies and/or any infection control measures in place, education will be provided.



If education does not correct compliance with regulations/policies this will result in the discontinuation of the visit and the visitor will be told to leave by management and the incident will be documented and the visitor will not be allowed back until a meeting is held with the Resident and/or visitor and an agreement of terms is decided on regarding how all policies and procedures regarding visitation will be met. The right to allow Resident/visitors to be allowed further visitation is under the discretion of the General Manager.

### **Complaints Process**

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 General Manager, Deborah Gleason at [dgleason@riverviewheights.ca](mailto:dgleason@riverviewheights.ca). Concerns may be escalated to the RHRA via the RHRA email ([info@rhra.ca](mailto:info@rhra.ca)) or phone number (1-855-275-7472).

### **Accessibility Considerations**

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

### **Appendix:**

Appendix A - Signage – Cover your cough

Appendix B – Signage – Hand Hygiene

Appendix C – Signage – How to wear a Medical Mask safely

Appendix D – Signage - Visits with Your Loved Ones During COVID-19

Appendix E – Signage – Guidelines for outdoor visits

Appendix F – Visitor Screening

Appendix G – Essential Caregiver Designation Form

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

### **References:**

[COVID-19 Screening Tool for Long-Term Care Homes and Retirement Homes](#). (August 31, 2022)

Ministry for Seniors and Accessibility COVID-19 Guidance Document for Retirement Homes in Ontario (March 29, 2023)

MOH's COVID-19 Guidance: LTCH/RH/CLS for PHUs (Jan 18, 2023)

All signs can be downloaded and printed here:

[https://www.orcaretirement.com/wp-content/uploads/RetirementHomes-Visitors\\_Posters-EN-FINAL-july172020-FINAL-ua.pdf](https://www.orcaretirement.com/wp-content/uploads/RetirementHomes-Visitors_Posters-EN-FINAL-july172020-FINAL-ua.pdf)



# COVER YOUR COUGH

Stop the spread of **germs** that can make you and others sick!

Public Health  
Ontario

Santé  
publique  
Ontario



Cover your mouth and nose with a tissue when you cough or sneeze.  
Put your used tissue in the waste basket.



If you don't have a tissue, cough or sneeze into your upper sleeve or elbow, not your hands.



You may be asked to put on a facemask to protect others.



Wash hands often with soap and warm water for 15 seconds.

If soap and water are not available, use an alcohol-based hand rub.



For more information contact Public Health Ontario's Infection Prevention and Control Department at [ipac@oahpp.ca](mailto:ipac@oahpp.ca) or visit [www.publichealthontario.ca/en/health-topics/infection-prevention-control/clinical-office-practice](http://www.publichealthontario.ca/en/health-topics/infection-prevention-control/clinical-office-practice).


This is an excerpt from Infection Prevention and Control for Clinical Office Practice.

Ontario



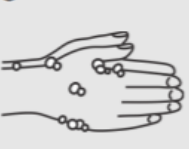








# Hand Hygiene

Follow these steps:

## How to wash your hands



**Wash hands for at least 15 seconds**

<b>1</b>  Wet hands with warm water.	<b>2</b>  Apply soap.	<b>3</b>  Lather soap and rub hands palm to palm.	<b>4</b>  Rub in between and around fingers.
<b>5</b>  Rub back of each hand with palm of other hand.	<b>6</b>  Rub fingertips of each hand in opposite palm.	<b>7</b>  Rub each thumb clasped in opposite hand.	<b>8</b>  Wash wrists.
<b>9</b>  Pat hands dry with paper towel.	<b>10</b>  Turn off water using paper towel.	<b>11</b>  Your hands are now clean.	

Video: [How to Hand Wash](#)

Read more about hand hygiene [here](#)  
 (Source: Public Health Ontario)

## How to use hand sanitizer



**Rub hands for at least 15 seconds**

<b>1</b>  Apply 1 to 2 pumps of product to palms of dry hands.	<b>2</b>  Rub hands together, palm to palm.	<b>3</b>  Rub in between and around fingers.	<b>4</b>  Rub back of each hand with palm of other hand.
<b>5</b>  Rub fingertips of each hand in opposite palm.	<b>6</b>  Rub each thumb clasped in opposite hand.	<b>7</b>  Rub hands until product is dry. Do not use paper towels.	<b>8</b>  Once dry, your hands are clean.

# HOW TO WEAR A MEDICAL MASK SAFELY

[who.int/epi-win](https://www.who.int/epi-win)

## Do's →



Wash your hands before touching the mask



Inspect the mask for tears or holes



Find the top side, where the metal piece or stiff edge is



Ensure the colored-side faces outwards



Place the metal piece or stiff edge over your nose



Cover your mouth, nose, and chin



Adjust the mask to your face without leaving gaps on the sides



Avoid touching the mask



Remove the mask from behind the ears or head



Keep the mask away from you and surfaces while removing it



Discard the mask immediately after use preferably into a closed bin



Wash your hands after discarding the mask

## Don'ts →



Do not Use a ripped or damp mask



Do not wear the mask only over mouth or nose



Do not wear a loose mask



Do not touch the front of the mask



Do not remove the mask to talk to someone or do other things that would require touching the mask



Do not leave your used mask within the reach of others



Do not re-use the mask

Remember that masks alone cannot protect you from COVID-19. Maintain at least 2 metre distance from others and wash your hands frequently and thoroughly, even while wearing a mask.

EPI·win



Source: World Health Organization ([Medical Mask](#)) \*Poster modified to 2 metres

# Visits with Your Loved Ones

## During COVID-19

### Expectations for Visits

Staying connected with others and the outdoors is important for everyone's well-being. To ensure the safety of Residents and the whole retirement home community, all visitors must adhere to restrictions as per Ontario's Chief Medical Officer of Health MOH's COVID-19 Guidance: LTCH/RH/CLS for PHUs (October 3, 2022) and the Ministry for Seniors and Accessibility COVID-19 Guidance Document for Retirement Homes in Ontario.

The residence has established visiting procedures to meet the health and safety needs of Residents, staff, and visitors. Please refer to the RHRA and other guidance measures for more information on the latest policies related to visiting procedures.

The following requirements must be met for visits to happen, as applicable:

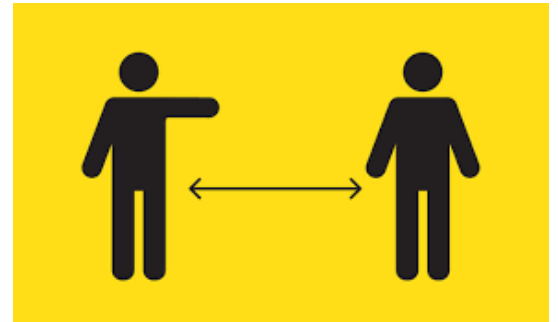
- Visitors must pass the screening process every time they visit and will not be permitted entry unless an exception applies per the residence's policy.
- Visitors must comply with the retirement home's infection and prevention control protocols (IPAC) which includes:
  - Visitors are recommended to wash/sanitize hands before and after each visit.
  - Visitors must practice physical distancing (2 metres/6 feet apart) as applicable.
  - Visitors must wear PPE required by the policy.

Residents who are not isolating may receive Essential Visitors, General Visitors, and Personal Care Service Providers, if they are not living in the outbreak area of a home. Residents who are isolating under Contact and Droplet Precautions may only receive Essential Visitors.

# Guidelines for Outdoor Visits

## During COVID-19

- Practice physical distancing. Keep at least 2 metres or 6 feet apart



- Don't touch your face or others
- Wash or sanitize your hands before and after your visit



## COVID-19 PASSIVE SCREENING TOOL – VISITORS/STAFF

1.	<p>In the last 10 days, have you experienced any of these symptoms? Choose any/all that are new, worsening, and unrelated to other known causes or conditions that you already have.</p> <p>Select “No” if all of these apply:</p> <ol style="list-style-type: none"> <li>1. Since your symptoms began, you tested negative for COVID-19 on one PCR or rapid molecular test, or have two negative rapid antigen tests taken 24-48 hours apart; and</li> <li>2. You do not have a fever; and</li> <li>3. Your symptoms have improved for 24 hours (48 hours if you have nausea, vomiting, and/or diarrhea).</li> </ol>		
	<b>Do you have one or more of the following symptoms?</b>	Yes	No
	<b>Fever and/or chills</b> - <i>Temperature of 37.8° Celsius/100° Fahrenheit or higher</i>		
	<b>Cough or barking cough (croup)</b> - <i>Not related to asthma, post-infectious reactive airways, COPD, or other known causes or conditions, you already have</i>		
	<b>Shortness of breath</b> - <i>Not related to asthma or other known causes or conditions you already have</i>		
	<b>Decrease or loss of smell or taste</b> - <i>Not related to seasonal allergies, neurological disorders, or other known causes or conditions, you already have</i>		
	<b>Muscle aches/joint pain</b> - <i>Unusual, long-lasting (not related to a sudden injury, fibromyalgia, or other known causes or conditions you already have)</i> <b>If you received a COVID-19 and/or flu vaccination in the last 48 hours and are experiencing mild muscle aches/joint pain that only began after vaccination, select “No.”</b>		
	<b>Fatigue</b> - <i>Unusual tiredness, lack of energy (not related to depression, insomnia, thyroid dysfunction, or other known causes or conditions you already have)</i> <b>If you received a COVID-19 and/or flu vaccination in the last 48 hours and are experiencing mild fatigue that only began after vaccination select “No.”</b>		
	<b>Sore throat</b> - <i>Painful or difficulty swallowing (not related to post-nasal drip, acid reflux, or other known causes or conditions you already have)</i>		
	<b>Runny or stuffy/congested nose</b> - <i>Not related to seasonal allergies, being outside in cold weather, or other known causes or conditions you already have</i>		
	<b>Headache</b> - <i>New, unusual, long-lasting (not related to tension-type headaches, chronic migraines, or other known causes or conditions you already have)</i> <b>If you received a COVID-19 and/or flu vaccination in the last 48 hours and are experiencing a headache that only began after vaccination, select “No.”</b>		
	<b>Nausea, vomiting and/or diarrhea</b> - <i>Not related to irritable bowel syndrome, anxiety, menstrual cramps, or other known causes or conditions you already have</i>		
4.	In the last 10 days (regardless of whether you are currently self-isolating or not), have you been identified as a “close contact” with someone (regardless of whether you live with them or not) who has tested positive for COVID-19 or have symptoms consistent with COVID-19?	Yes	No
5.	In the last 10 days (regardless of whether you are currently self-isolating or not), have you tested positive, including on a rapid antigen test or a home-based self-testing kit? <b>If you have since tested negative on a lab-based PCR test, select “No.”</b>	Yes	No
6.	Have you been told (by ANY healthcare provider, federal border agent, or government authority) that you should currently be quarantining, isolating, staying at home, or not attending a high-risk setting (e.g. LTC or RH) <b>Please note that there are federal requirements ( <a href="https://travel.gc.ca/travel-covid">https://travel.gc.ca/travel-covid</a> ) for individuals who travelled outside of Canada, even if exempt from quarantine.</b>	Yes	No

**Screening Passed (P):**

A. The volunteer may enter the home if they answer NO to #1-4.

**Screening Failed (F):**

A. If the volunteer answered **YES to questions 1 or 2:** they must not enter the home. They should stay home(self-isolate) until they do not have a fever and their symptoms have improved for at least 24 hours (48 hours for nausea, vomiting, and/or diarrhea). If COVID-19 testing is available, they should get tested, and seek treatment, if eligible. If they test positive for COVID-19, they should not enter the home for at least 10 days after developing symptoms (or date of specimen collection, whichever is earlier/applicable) AND provided that they have no fever and other symptoms have been improving for at least 24 hours (or 48 hours if vomiting/diarrhea). General visitors are recommended to postpone non-essential visits to the home for 10 days after developing symptoms, regardless of the results of their COVID-19 test results, to reduce the risk of introduction of any respiratory pathogens into the highest risk settings.

**COVID-19 SAFETY REVIEW – VISITORS**

**A. Residence not in an outbreak:**

<b>Visitors: Prior to visiting any Resident for the first time, and at least once every month</b>			
1.	Read/Re-Read the following documents:		
	I. The home’s visitor policy	Yes	No
	II. Public Health Ontario’s document entitled <a href="#">Recommended Steps: Putting on Personal Protective Equipment (PPE)</a>	Yes	No
2.	Watched/Re-watched the following Public Health Ontario videos:		
	I. <a href="#">Putting on Full Personal Protective Equipment</a>	Yes	No
	II. <a href="#">Taking off Full Personal Protective Equipment</a>	Yes	No
	III. <a href="#">How to Hand Wash</a>	Yes	No

**B. Residence declared in an outbreak:**

<b>Prior to visiting any Resident for the first time, the Essential Caregiver/Support Worker verbally attests that they have:</b>		
Received training* on the proper use of PPE (i.e., how to safely provide direct care, including putting on (donning) and taking off (doffing) required PPE, and hand hygiene)	Yes	No
Print name		
Date		

\*Training provided by the residence, or individually directed to Public Health Ontario resources



## **Designation of Essential Caregiver(s) Under COVID-19 Visitor Policy**

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).

There are two categories of Essential Visitors: Support Workers and Essential Caregivers.

Essential Caregivers provide care to a Resident, including supporting feeding, mobility, personal hygiene, cognitive stimulation, communication, meaningful connection, relational continuity and assistance in decision-making. Essential Caregivers may be family members, a privately hired caregiver, paid companions, and translators even if the person would also be considered a Support Worker.

Essential Caregivers must be designated by the Resident or, if the Resident is unable to do so, the Resident's substitute decision-maker. The designation should be made in writing to the home. The necessity of an Essential Caregiver is determined by the Resident or the substitute decision maker. Homes should have a procedure for documenting Essential Caregiver designations.

Essential Caregivers may be designated by the Resident **in writing using this form**.

Note: In order to limit the spread of infection, a Resident and/or their SDM may be encouraged to change the designation of their Essential Caregiver in limited circumstances, including in response to:

- A change in the Resident's care needs that is reflected in the plan of care;
- A change in the availability of a designated Essential Caregiver; and/or
- Due to the vaccination status of the designated Essential Caregiver.

### **Caregiver Responsibilities:**

- All visitors must comply with the residence's visiting policy and procedures. Failure to comply with the visiting policy may result in the discontinuation of visit(s) when risk of harm from continual non-compliance is considered too high.
- Prior to visiting any Resident, visitors must follow screening requirements, including active screening, and safety review as applicable.
- If improper PPE practices are alleged or observed, the Essential Visitor must follow staff reminders and coaching on proper use of PPE.

**Resident's Name:** \_\_\_\_\_ **Suite #:** \_\_\_\_\_

**Essential Caregiver:** \_\_\_\_\_ **Relationship to Resident:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Essential Caregiver:** \_\_\_\_\_ **Relationship to Resident:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Essential Caregiver:** \_\_\_\_\_ **Relationship to Resident:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Designated By:**  Resident /  SDM  
**Resident's Signature** (if applicable): \_\_\_\_\_  
**SDM's Signature** (if applicable): \_\_\_\_\_

**Date Signed:** \_\_\_\_\_

**CHANGE OF DESIGNATED CAREGIVER(S): (if applicable)**

**Essential Caregiver:** \_\_\_\_\_ **Relationship to Resident:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Essential Caregiver:** \_\_\_\_\_ **Relationship to Resident:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Essential Caregiver:** \_\_\_\_\_ **Relationship to Resident:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Designated By:**  Resident /  SDM  
**Resident's Signature** (if applicable): \_\_\_\_\_  
**SDM's Signature** (if applicable): \_\_\_\_\_

**Date Signed/Changes Take Effect:** \_\_\_\_\_

## COVID-19 WAIVER OF LIABILITY, DECLARATION, & INDEMNITY AGREEMENT

You are choosing to visit, perform contracted services at, or return to your residence at a senior living and retirement community. You acknowledge and agree that YOU DO SO AT YOUR OWN RISK, including the increased risk of contracting or transmitting the COVID-19 virus, or a variant thereof. You understand and acknowledge that COVID-19 may be present. *Riverview Heights Retirement Residence* is taking prudent steps to implement and enforce appropriate protocols to keep Residents and visitors safe, but we cannot assure you that you will not contract or transmit the COVID-19 virus.

By executing this Agreement, you agree that you will conform to any and all directives, recommendations, and protocols implemented by *Riverview Heights Retirement Residence*, for the entire duration of your attendance, whether you are a visitor, contractor, or a Resident. Visitors and contractors agree that you will not enter *Riverview Heights Retirement Residence* under any circumstances if you feel unwell, have a fever, exhibit a cough, are experiencing any other symptoms associated with COVID-19, or have any reason to believe you have been exposed to same. Residents agree that you will notify *Riverview Heights Retirement Residence* staff prior to your return if you are experiencing any symptoms of COVID-19, if you have not adhered to COVID-19 safety protocols established by local Government and health authorities in the place you are returning from, and you will adhere to any self-isolation or testing/tracing protocols implemented by *Riverview Heights Retirement Residence* staff.

Visitors and contractors further agree that, throughout the duration of your attendance at *Riverview Heights Retirement Residence*, you will:

- Participate in active screening (including a Safety Review as applicable);
- Practice hand hygiene;
- Wear a mask at all times, as applicable;
- Practice physical distancing;
- Refrain from any close contact with others;
- Remain in designated visiting areas, as applicable;
- Inform staff immediately upon experiencing any symptoms related to COVID-19.

In consideration of being allowed to enter, or return to *Riverview Heights Retirement Residence* (subject to the guidelines or requirements of the *Ontario Ministry of Health and the Ministry for Seniors and Accessibility*), you ACKNOWLEDGE and AGREE that *Riverview Heights Retirement Residence* WILL NOT BE LIABLE TO YOU IN ANY WAY if you contract or transmit COVID-19 as a result of your visit or stay at *Riverview Heights Retirement Residence*, including any subsequent physical or psychological symptoms that you may experience. Further, if you, your child, another visitor, a Resident, or anyone on behalf of same, make(s) a claim against *Riverview Heights Retirement Residence* as a result of your contraction or your transmission of COVID-19, YOU WILL INDEMNIFY, SAVE AND HOLD *Riverview Heights Retirement Residence* HARMLESS from any liability, damage, cost, litigation expense, loss, or fees which *Riverview Heights Retirement Residence* may incur as a result of such claim.

**By completing and submitting this Agreement, you confirm that you have read, understand, and that you are aware that you are waiving legal rights against *Riverview Heights Retirement Residence*, INCLUDING THE RIGHT TO SUE:**

Name / Signature of Visitor or Contractor (circle which one): \_\_\_\_\_ / \_\_\_\_\_  
Name / Signature of Resident(s): \_\_\_\_\_ / \_\_\_\_\_  
Name of Visiting Child/Children (if applicable): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date: \_\_\_\_\_

**AGREEMENT IN FULL FORCE AND EFFECT FOR ENTIRE DURATION OF ATTENDANCE AT *Riverview Heights Retirement Residence***