



### ADDENDUM 1 COVID-19 VISITOR POLICY

**It is Retirement Life Communities (RLC) goal to provide for the safety and well-being of all residents and staff at our retirement homes.**

On December 9, 2020 the Ministry for Seniors and Accessibility and Retirement Homes Regulatory Authority released an updated Retirement Home COVID-19 Visitor Policy. The Ministry has aligned the escalation of precautions for homes with the provincial COVID-19 Response Framework. Components of the Policy will be dependent on whether our local Public Health Unit (PHU) is in Green (Prevent), Yellow (Protect), Orange (Restrict), Red (Control) or Grey (Lockdown). These measures will be used instead of Alert and High Alert statuses. Additional changes have been made in four key areas which include:

- Access to homes for different types of Support Workers
- Access to Personal Care Service Providers
- Social Activities
- Tours

The changes to this policy are effective December 11, 2020 and align with the recent changes to Directive #3.

**Guiding Principles:** There is an ongoing need to protect retirement home residents and staff from the risk of COVID-19, particularly as some retirement home residents may be more susceptible to more severe effects of COVID-19 than the general population.

Guidance for retirement home visits continues to be in place to protect the health and safety of residents, staff, and visitors while supporting residents in receiving the care they need and maintaining their emotional well-being.

These rules are in addition to the requirements established in the Retirement Homes Act 2010 and its regulation (O.Reg 166/11).

- **Visitor Responsibility:** Visitors have a crucial role to play in reducing risk, and infection control for the safety of residents and staff by adhering to visitor policy requirements related to screening and Infection Prevention and Control (IPAC).

All visitors will be instructed to adhere to the requirements set out in this policy to ensure the safety of all residents, staff and visitors, and allow for the continuity of visits that support the mental, physical and spiritual needs of residents for their quality of life.

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### Requirements for Visits

- **Spouses & Immediate Family Members:** In cases of spouses or immediate family members living in separate homes of a co-located home, the visiting member must follow the policy of the home they are visiting based on whether the visitor is a General Visitor or a designated Caregiver. Whenever possible, it is recommended that the visitor be designated as a caregiver to facilitate spousal and immediate family visits.
- **Record Keeping Protocols:** Minimum requirements have been introduced for keeping records of visitations for contract tracing purposes. These include name, contact information, date and time of visit and the resident visited.
- **Physical Distancing:** When visits are restricted based on physical distancing the home will communicate that decision to residents and provide the reasons for the decision.

### Types of Visitors

- **Not Considered Visitors:** Retirement home staff and volunteers are not considered visitors as per the Retirement Homes Act, 2010.

### Managing Visitors

This section has been updated to align with the COVID-19 Response Framework: Keeping Ontario Safe and Open.

**\*\*General visitors are not permitted when a home is located in a Public Health Unit region where there is evidence of increasing/significant community transmission i.e.) Orange (Restrict), Red (Control) or Grey (Lockdown) levels. Essential visitors are the only type of visitors allowed in these levels\*\***

- The home must NOT currently be in an outbreak
- Information will be provided communicating visiting procedures with residents, families and staff. The package will include an information package on IPAC (Infection Prevention and Control), face covering/masking, physical distancing and other operational procedures such as limiting movement around the home, if applicable and the home will include an approach for dealing with non-adherence to home policies and procedures, including the discontinuation of visits.
- Dedicated areas for both indoor and outdoor visits to support physical distancing between residents and visitors.
- IPAC standards will be followed prior to, during and after visits.

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- A list of visitors will be available for relevant staff to access
- Record keeping of visitations for contact tracing purposes containing name, contact information, date and time of visit and the resident visited.

**Factors that will inform decisions about visits in retirement homes include:**

- **Adequate staffing:** The home has sufficient staff to implement the protocols related to visitors and to ensure safe visiting as determined by the home’s management.
- **Access to adequate testing:** the home has a testing plan in place, based on contingencies and informed by local and provincial health official, for testing in the event of a suspected outbreak. Public Health Guidelines are to be followed.
- **Access to adequate PPE:** the home has adequate supplies of relevant PPE
- **IPAC standards:** the home has appropriate cleaning and disinfection supplies and adheres to IPAC standards including enhanced cleaning.
- **Physical Distancing:** The home can facilitate visits in a manner aligned with physical distancing protocols.

**Limiting Work Locations**

In addition to contracts and volunteers, wherever possible, employers should also work with students to limit the number of work locations.

**Triggering an Outbreak Assessment**

In addition to the previous requirements outlined in Directive #3, in the event an outbreak of COVID-19 is declared, all staff in the entire home and all residents in the home must be offered testing. Any exception to this must be approved by the Chief Medical Officer of Health.

**Required Steps in an Outbreak**

An additional step has been added when an outbreak is declared.

When the Local Public Health Unit declares an outbreak in the home, local Public Health activates and chairs the Outbreak Management Team (OMT). All other previous steps are also required to be followed.

**Guiding Principles**

- **Visitor Responsibility:** Visitors have a crucial role to play in reducing risk and infection control for the safety of residents and staff by adhering to visitor policy requirements related to screening, Infection Prevention and Control (IPAC).

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All visitors will be instructed to adhere to the requirements set out in this policy to ensure the safety of all residents, staff and visitors, and allow for the continuity of visits that support the mental, physical and spiritual needs of residents for their quality of life.

### Requirements for Visits

- **Spouses & Immediate Family Members:** In cases of spouses or immediate family members living in separate homes of a co-located home, the visiting member must follow the policy of the home they are visiting based on whether the visitor is a General Visitor or a designated Caregiver. Whenever possible, it is recommended that the visitor be designated as a caregiver to facilitate spousal and immediate family visits.
- **Record Keeping Protocols:** Minimum requirements have been introduced for keeping records of visitations for contract tracing purposes. These include name, contact information, date and time of visit and the resident visited.
- **Physical Distancing:** When visits are restricted based on physical distancing the home will communicate that decision to residents and provide the reasons for the decision.

### Types of Visitors

- **Not Considered Visitors:** Retirement staff and volunteers are not considered visitors as per the Retirement Homes Act, 2010.
- **Contract Workers:** The definition of contract workers has been expanded to include external care providers hired by the resident. The example of contract workers has been expanded to include unregulated care providers.
- **Support Workers:** Authorized third parties who accommodate the needs of a resident with a disability has been added as a type of support worker.
- **Caregiver:** A resident may designate an external care provider as a Caregiver even though that individual would also be considered a Support Worker.
- **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 such as hair dressing and nail care.

**Access to the Home:** Essential Visitors are the only type of visitors allowed when a resident is self-isolating or symptomatic with COVID-19 symptoms, the home is in an outbreak, or is in a Public Health Unit area included under Orange (Restrict), Red (Control) or Grey (Lockdown).

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**Frequency and Duration:** The frequency and duration of visits for essential visitors, while the home is in outbreak have been removed.

**Local Public Health Unit Restrictions:** When the Home is in outbreak or is in a Public Health Unit under Orange (Restrict), Red (Control) or Grey (Lockdown), the local PHU may advise further restrictions on visits in part or all of the home, depending on the specific situation The Home must abide by any restrictions imposed by their Public Health Unit.

### Essential Visitors

A person performing essential support services (e.g. Food delivery, inspector, maintenance, or health care services i.e.) phlebotomy or a person visiting a very ill or palliative resident.

If the home is in outbreak Caregivers and Support Workers will be trained on how to safely provide direct care, including putting on and taking off required PPE, and hand hygiene or be directed to appropriate resources from Public Health Ontario to acquire this training.

For homes not in outbreak, prior to visiting any resident for the first time at least once every month homes should ask Caregivers to verbally attest to the home that they have:

- Read/re-read the following documents:
  - The home’s visitor policy
  - Public Health Ontario’s document entitled: Recommended Steps: Putting on Personal Protective Equipment (PPE)
  - Watched/Re-watched the following Public Health Ontario videos:
    - Putting on Full Personal Protective Equipment
    - Taking off Full Personal Protective Equipment
    - How to Hand Wash

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

**Support Worker:** A support worker is a type of Essential Visitor who is brought into the home when there are gaps in services to perform essential services for the home or for a resident in the home i.e.)

- Regulated health care professionals under the Regulated Health Professions Act, 1991 i.e.) physicians and nurses

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- Contract workers hired by the home, external care providers hired by the resident, or LHIN care services, including home care providers i.e.) nursing care, physiotherapy, occupational therapy, social workers, unregulated care providers.
- Authorized third parties who accommodate the needs of a resident with a disability
- Maintenance workers
- Private housekeepers
- Food Delivery

Support Workers do not include Retirement Home Staff.

Any number of Support Workers brought into the home to support IPAC, or Health and Safety reasons are permitted i.e.) deep cleaning or emergency maintenance.

Any number of Support Workers who are care providers i.e.) regulated health care providers may visit a resident in a home at a time.

A maximum of 1 Support Worker who is not a care provider per resident may visit at a time where:

- The home is in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown), the home is in an outbreak, or the resident is self-isolating or symptomatic.

**Caregivers:**

- **A maximum of 2 Caregivers per resident may visit at a time where:**
  - The home is not in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown), the home is in an outbreak, or the resident is self-isolating or symptomatic
- **A maximum of 1 Caregiver per resident may visit at a time where:**
  - The home is in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown), the home is in an outbreak, or the resident is self-isolating or symptomatic.

**Caregivers Living Together:** If 2 Caregivers live together, they may visit a resident at the same time when the home is in a PHU under Orange (Restrict), Red (Control), or Grey (Lockdown), the PHU may recommend additional outbreak management control measures which may include restriction of Essential Visitors.

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A 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.

Caregivers visit to provide care to the resident i.e.) supporting feeding, mobility, personal hygiene, cognitive stimulation, communication, meaningful connection, relational continuity and assistance in decision making.

A maximum of 2 Caregivers may be designated per resident. The designation should be made in writing to the home. The home will document Caregiver designations and any subsequent changes.

In order to limit the spread of infection, a resident and/or their substitute decision-maker should be encouraged to change the designation of their Caregiver in limited circumstances, including in response to

- A change in the resident care needs that is reflected in the plan of care, and/or
- A change in the availability of a designed Caregiver, either temporary i.e.) illness or permanent.

Examples of Caregivers include family members who provide care, a privately hired caregiver, paid companions, and translators. A resident may designate an external care provider as a Caregiver even though that individual would also be considered a Support Worker.

**General Visitors**

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

- to provide non-essential services (may or may not be hired by the home or the resident and/or their substitute decision-maker)
- for social reason (e.g. Family members or friends) and/or
- a prospective resident taking a tour of the home

**Facilitating General Visitors:** General visitors are not permitted for visits (indoors or outdoors) at homes in an outbreak or in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown) and may not visit residents that are self-isolating or symptomatic with COVID-19 symptoms. However, the home shall ensure that residents are able to maintain contact with their loved ones i.e.) phone and virtual visits) when in an outbreak, in a PHU under Orange (Restrict), Red (Control or Grey (Lockdown), or when residents are self-isolating or symptomatic with COVID-19 symptoms.

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**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 care. A maximum of 1 Personal Care Service Provider may visit a resident at a time provided:

- the resident is not self-isolating or symptomatic
- The home is not in a PHU under Red (Control) or Grey (Lockdown) and
- The home is not in an outbreak

General visitors and Personal Care Service Providers prior to visiting any resident for the first time at least once every month homes should ask Caregivers to verbally attest to the home that they have:

- Read/re-read the following documents:
  - The home’s visitor policy
  - Public Health Ontario’s document entitled: Recommended Steps: Putting on Personal Protective Equipment (PPE)
  - Watched/Re-watched the following Public Health Ontario videos:
    - Putting on Full Personal Protective Equipment
    - Taking off Full Personal Protective Equipment
    - How to Hand Wash

**Single Site Personal Care Service Providers:** Personal Care Service Providers that support only one retirement home generally i.e.) provide services on-site at one location, may continue to visit home in a PHU that is Orange (Restrict) if they follow required Public Health and IPAC measures for their trade and those of the home. Personal Care Service Providers are not permitted in homes in outbreak, or in PHUs under Red (Control) or Grey (Lockdown) and may not visit residents that are self-isolating or symptomatic with COVID-19 symptoms.

**Requirements for Absences**

**Short Term Absences:** Retirement home residents are permitted to leave the home for an absence that does not include an overnight stay i.e.) absences with friends or family, shopping, medical appointments, filling prescriptions, taking walks etc. with the exception of single-night emergency room visits, provided the following:

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- The home is not in an outbreak or in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown) at the same time the absence is to commence.
- When the home allows absences but enters into an outbreak there should be a hold on starting new absences until the home is no longer in outbreak.
- The local PHU has not directed the home to cease all short absences
- Upon return to the home, residents are actively screened and monitored for symptoms but are not required to be tested or self-isolate.
- Residents must always wear a mask when outside of the home (if tolerated) and be reminded about the importance of public health measures including physical distancing.

**Overnight Absences:** A resident may leave for an absence that includes at least one overnight stay if the home meets the following requirements:

- The Retirement home is not in an outbreak
  - If the home allows absences but enters into an outbreak, there should be a hold on starting new overnight absences until the home is no longer in outbreak.
  - Homes must establish compliance with all Ministry of Health Directives for homes in outbreak and follow direction from the local PHU.
  - The home is not in a PHU under Orange (Restrict), Red (Control) or Grey (Lockdown)
  - Residents must always wear a mask when outside of the home (if tolerated) and be reminded about the importance of public health measures including physical distancing.
  - Education on the required protocols for short-term absences, such as IPAC and PPE, will be provided to the resident by the home prior to their absence.
  - Upon return to the home, residents must self-isolate for 14 days under Droplet and Contact Precautions but are not required to be tested upon re-entry to the home.
  - Residents who are self-isolating for 14-days following an overnight stay may not receive general visitors, leave the home for short-term absences or for overnight stays.

**Admissions and Transfers**

All new admissions and transfers into retirement homes need to be tested for COVID-19 in accordance with the COVID-19: Provincial Testing Requirements Update:

A negative result does not rule out the potential for incubating illness and all new residents who have not been previously cleared of COVID-19 must remain in isolation under Droplet and Contact Precautions for a 14-day period following arrival.

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- The individual being transferred must complete 14-days self-isolation under Droplet and Contact Precautions in their own room
- Individuals who have previously had lab-confirmed COVID-19 and have been cleared by the local public health unit within the last 90 days prior to admission/transfer do not need to be re-tested and are exempt from self-isolation

**\*\*The requirement to test residents at the end of their 14 days of self-isolation has been removed\*\***

**Please Note:** when the Retirement home is in an area of the Province that is in a Green (Protect) zone an admission/transfer to a retirement home from a hospital may occur without the required 14-day self isolation period provided that neither the hospital nor the home are experiencing a COVID-19 outbreak and both the hospital and the home are located in areas that are in the Green (Prevent) zone. The transfer may occur if the resident has had a negative COVID-19 test within 24 hours of transfer. In the event the test result is not available within the 24-hour period, the transfer can occur, but the individual must remain in isolation in the home until a negative test is received. If the test result is positive, the individual must continue their self-isolation and the home must contact their local Public Health Unit.

### Universal Masking

All staff and visitors must comply with universal masking and must wear a surgical/procedure mask for the entire duration of their shift/visit. This is required regardless of whether the home is in outbreak or not.

- **Staff:** When staff are not in contact with residents or in resident areas during their breaks, staff may remove their surgical/procedure mask but must remain two metres away from other staff to prevent staff to staff transmission of COVID-19.
  - For outdoor visits, visitors can wear a face covering and should remain two metres away from the individual they are visiting and staff
- **Residents:** Residents should wear masks in common indoor areas in the home as tolerated.

### Requirements for Social Activities

**Social and Group Activities:** Residents may congregate for social and group activities for physical and mental stimulation if the home is not in outbreak and Infection Prevention and Control measures are in place. **The requirement that social activities halt for Alert and High Alert status has been removed.**

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- Prioritize mental and physical well-being of residents by offering stimulating interpersonal or shared activities
- Tailor activities to the home setting (physical structure) and reflect the range of abilities of residents
- Establish cohorts (bubbles or groups) for activities, if appropriate
- Offer residents in isolation individualized activities and stimulation

### Requirements for Retirement Home Tours

- **Virtual Tours:** Virtual tours should be implemented as much as possible.
- **Targeted Tours:** For homes in a PHU under Orange (Restrict) or Red (Control), prospective residents may be offered targeted tours of empty suites at the final stage of the home selection process. General tours of the home, including common areas, should be virtual.
- **Restriction on Tours:** All in-person targeted tours should be paused if a home goes into outbreak or is in a PHU under Grey (Lockdown)

### References

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

Ontario Retirement Communities. COVID-19: Changes to Directive #3. December 8, 2020.

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