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**Policy Title: COVID-19 VISITING POLICY**

**Area:** Infection Control

**Issued By:** Tracey Comeau, CEO

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**Approved by: Board of Directors**



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CEO

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Director of Care

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## **INTRODUCTION**

The Minister of Long-Term Care issued the Minister's Directive: COVID-19 Response Measures for Long-Term Care Homes under the *Fixing Long-Term Care Act, 2021*, effective April 27, 2022 ("the Minister's Directive"). The Minister's Directive requires that licensees comply with provisions contained within this guidance document, as set out in the Minister's Directive.

The Minister's Directive along with the COVID-19 Guidance Document for Long Term Care Homes provides guidance and direction for Long-term care home surveillance testing and access to homes, and establishes requirements for visitation to long-term care homes (LTCH).

## **POLICY**

### **1.0 Purpose**

This COVID-19 Visiting Policy is in place to support the implementation of the requirements of the Minister's Directive: COVID-19 Response Measures for Long-Term Care Homes under the *Fixing Long-Term Care Act, 2021* and the COVID-19 Guidance Document for Long Term Care Homes, to safely receive visitors while protecting residents, staff and visitors from the risk of COVID-19.

This policy is effective October 14, 2022. All previous versions of the visiting policy are revoked and replaced with this version. This policy complies with all applicable laws, including the *Fixing Long Term Care Act, 2021* and [O. Reg. 246/22](#).

This policy is intended to supplement the Minister's Directive and COVID-19 Guidance Document for Long Term Care Homes. In the event that anything in this policy conflicts

between either of these documents and any applicable legislation, directive, or order, the legislation, directive or order prevail, and must be followed.

Copernicus Lodge may implement practices and procedures that exceed the minimum requirements set out by the Ministry, based on the risk or situation of the home, residents, staff and caregivers. In these situations, Copernicus Lodge will consult with its local public health unit, Residents' Council and Family Council prior to implementation.

As the COVID-19 Pandemic evolves, direction on LTC home visits will be adjusted as necessary, keeping the safety and well-being of residents and staff at the forefront.

## 2.0 Guiding Principles

There is an ongoing need to protect LTC home residents and staff from the risk of COVID-19, particularly as LTC home residents are more susceptible to infection from COVID-19 than the general population due to their age and medical condition.

Rules for LTC home visits continue 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 *Fixing Long Term Care Act, 2021* and its Regulations (Refer to Ontario Regulation 246/22, s. 267)

This visiting policy is guided by the following principles:

- **Safety** – Any approach to visiting must balance the health and safety needs of residents, staff, and visitors, and ensure risks are mitigated.
- **Emotional Well-Being** – Welcoming visitors is intended to support the 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, consistent with their preferences and within reasonable restrictions that safeguard residents.
- **Flexibility** – The physical and infrastructure characteristics of the home, its workforce or human resources availability, whether the home is in an outbreak and the current status of the home with respect to personal protective equipment (PPE) are all variables to consider when setting home-specific policies.
- **Equality** – Residents have the right to choose their visitors. In addition, residents and/or their substitute decision-makers, as applicable, have the authority to designate caregivers.



Visitors should consider their personal health and susceptibility to the virus in determining whether visiting a LTC home is appropriate.

**Visiting Hours:**

- **8:00 am – 9:30pm**
- Visitors are permitted 24/7 for those residents at End of Life
- Visitors must enter the home through the Marion Street entrance and not the front entrance of the home
- If emergency access to the home is required after 11:00 pm, please go to the main entrance and speak with security.

**3.0 LTC Home Responsibilities**

Copernicus Lodge is responsible for supporting residents in receiving visitors while mitigating the risk of exposure to COVID-19. Further, the visiting practices of Copernicus lodge must be compliant with Minister’s Directive: COVID-19 Response Measures for Long-Term Care Homes under the *Fixing Long-Term Care Act, 2021* and the COVID-19 Guidance Document for Long Term Care Homes and align with the guidance in this policy.

**Visitor Logs:**

In accordance with O. Reg 246/22, s.267 (2), Copernicus Lodge must maintain a visitor log of all visits to the home.

The visitor log will include, at a minimum:

- the name and contact information of the visitor
- time and date of the visit; and
- the name of the resident visited

These visitor logs are kept for a period of at least 30 days and are readily available to the local public health unit for contact tracing purposes upon request.

**Access to CL Visitor Policy:**

Copernicus Lodge’s Visitor policy is posted on our website at: [www.copernicuslodge.com](http://www.copernicuslodge.com)

Hard copies are also available upon request. The home also ensures that this policy is part of our package for new admission, and has been communicated and accessible to the Residents Council and Family Councils.

## 4.0 Types of Visitors

4.1 **Not Considered Visitors** - LTC home staff (as defined under the Act), volunteers and placement students are not considered visitors as their access to the home is determined by the licensee. Infants under the age of one (1) are also not considered visitors and are excluded from testing requirements.

4.2 **Essential Visitors** – there are no limits on the total number of essential visitors allowed to come into a home at any given time, under this guidance.

Essential visitors are the only type of visitors allowed when there is an outbreak in the home or area of the home or when a resident has failed screening, is symptomatic or in isolation.

Essential visitors must complete the required document to be designated as an Essential Visitor and also complete the necessary Infection Prevention and Control training with the IPAC Lead or designate. Please reach out to the Director of Care, Assistant Director of Care or Social Worker to arrange this training.

As per O. Reg. 246/22 under the *Fixing Long-Term Care Act, 2021*, there are four (4) types of essential visitors:

**“Essential Visitor”** means:

- i. a caregiver, as defined under section 4 of O. Reg. 246/22
- ii. a support worker who visits a home to provide support to the critical operations of the home or to provide essential services to residents
- iii. a person visiting a very ill resident for compassionate reasons including, but not limited to, hospice services or end-of-life care
- iv. a government inspector with a statutory right to enter a long-term care home to carry out their duties

## 4.3 Caregivers

**“caregiver”** means an individual who,

(a) is a family member or friend of a resident or a person of importance to a resident,

(b) is able to comply with all applicable laws including any applicable directives, orders, guidance, advice or recommendations issued by the Chief

Medical Officer of Health or a medical officer of health appointed under the *Health Protection and Promotion Act*,

(c) provides one or more forms of support or assistance to meet the needs of the resident, including providing direct physical support such as activities of daily living or providing social, spiritual or emotional support, whether on a paid or unpaid basis,

(d) is designated by the resident or the resident's substitute decision-maker with authority to give that designation, if any, and

(e) in the case of an individual under 16 years of age, has approval from a parent or legal guardian to be designated as a caregiver.

#### **Caregiver Visitation Rules:**

- Copernicus Lodge does not require scheduling or restrict the length or frequency of visits by caregivers.
- All visitors and caregivers are expected to comply with Copernicus Lodges' visiting hours

#### **Outbreak Scenarios:**

- I. In the case where a resident resides in an area of the home in outbreak, or if the resident is symptomatic or isolating under additionally precautions, only one (1) caregiver may visit at a time.
- II. A caregiver should not visit our home or any other home for 10 days after visiting:
  - An individual with a confirmed case of COVID-19
  - An individual experiencing COVID-19 symptoms
- III. Recognizing there are caregivers who want to volunteer to support more than one resident, in the event of an outbreak, caregivers may support up to two residents who are COVID-19 positive, provided the home obtains consent from all involved residents (or their substitute decision-makers). Caregivers may also support more than one resident in non-outbreak situations, with the same expectation regarding resident consent.

#### **4.4 General Visitors**

A general visitor is a person who is **not** an essential visitor and is visiting to provide:

- a) nonessential services related to either the operations of the home or a particular resident or group of residents.

- b) General visitors include those persons visiting for social reasons as well as;
- c) visitors providing non-essential services such as personal care services, entertainment, or individuals touring the home.

Copernicus Lodge endeavors to prioritize the mental and emotional well-being of residents and strive to be as accommodating as possible when scheduling visits with general visitors.

## **5.0 Access to Copernicus Lodge**

### ***a) Indoor Visits:***

- All general visitors, including children under the age of five, can enter the long-term care home so long as they PASS the active screening requirements outlined in Section 6 or this policy.
- General visitors, with the exception of the children under the age of five, will need to follow the vaccination policy of the home.
- Currently, Copernicus Lodge has a mandatory vaccination policy which requires anyone entering the home to provide proof of (2) two doses of a Health Canada approved vaccination.
- There is currently no limit to the number of visitors a resident may have at one time; however, visitors should be aware of space limitations in resident rooms. Visitors are asked to limit numbers of visitors so that physical distancing can be maintained

### ***b) Outdoor Visits:***

- There are no limits on the number of visitors permitted for outdoor visits; however, we request that any groups over 4 notify the Home at least 24 – 48 hours in advance of the visit so that it can be determined if there is an appropriate space to safely accommodate the group. Without advance notice and permission granted, groups larger than 4 may be denied visiting outdoors.
- Outdoor visits must be booked in advance using the Acquity scheduling software. Visitors can access this through our website or by contacting the activation office.



- Copernicus Lodge **does not** restrict individuals from outdoor visits based on vaccination status. Physical distancing (a minimum of two metres or six feet) must be maintained between groups.

c) **Virtual Visits:**

Copernicus Lodge is pleased to offer virtual visits via:

- Telephone
- Zoom, Facebook or Teams meeting
- Window visits

## 6.0 Restrictions During Outbreak or When a Resident is Isolating:

6.1 **Essential Visitors** – are the only type of visitors allowed when a resident is isolating or resides in a home or area of the home in an outbreak

6.2. **General Visitors** – are **not** permitted:

- When the home or area of the home is in outbreak
- To visit an isolating resident
- When the local Public Health Unit so directs

6.3 **Direction From the Local Public Health Unit** – in the case where a local public health unit directs a home in respect of the number of visitors allowed, Copernicus Lodge must follow the direction of the local public health unit.

## 7.0 COVID-19 SCREENING REQUIREMENTS:

**Active screening** means there is some form of attestation/confirmation of screening. This is completed in-person on arrival to the home at the security desk.

**Passive screening** means that those entering the setting review screening questions themselves, and there is no verification of screening (for example, signage at entrances as a visual reminder not to enter if symptomatic). Currently only staff members are permitted to complete passive screening.

Copernicus Lodge ensures that COVID-19 screening requirements as set out in the Ministry Guidance document are followed. All individuals entering the home are **actively screened** for symptoms and exposure history for COVID-19, before they are allowed to enter the home, including for outdoor visits. Copernicus Lodge follows the Ministry of Health's COVID-19 Screening Tool for Long-Term Care Homes and Retirement Homes, as a minimum requirement

and acknowledges exemptions regarding active screening below. All visitors will be provided and are required to wear a visitor badge when visiting the home.

**Exception:**

- First responders must be permitted entry **without** screening in emergency situations.
- Any resident returning to the home following an absence who fails active screening must be permitted entry but must be placed on isolation and **additional precautions** and tested for COVID-19 as per the Management of Cases and Contacts of COVID-19 in Ontario

For clarity, all visitors and caregivers must be actively screened once per day at the beginning of their visit, using the Ministry approved screening questions

**Passive Screening for Staff Members:**

Staff, students and volunteers are required to self-monitor for symptoms of COVID-19 (passive screening).

Staff should refer to the posted screening questions at the entrance to the LTC home and monitor their health at home for COVID-19 symptoms. Anyone who is feeling ill or would otherwise fail screening are not permitted to enter the home.

**Failure of Active Screening:**

- Any person who fails active screening (such as, having symptoms of COVID-19 or having had contact with someone who has COVID-19) will **not** be allowed to enter the home.
- These individuals are advised to immediately self-isolate (if applicable).
- There are three exceptions where staff or visitors who fail screening may be permitted entry to the home:
  - staff and essential visitors who are up to date on their COVID-19 vaccinations as per the [Guidance for Employers Managing Workers with Symptoms within 48 Hours of COVID-19 or Influenza Immunization](#) document
  - visitors for palliative end-of-life residents must be screened prior to entry. If the individual fails screening, they will be permitted entry, however, they must ensure that they wear a medical (surgical or procedural) mask and maintain physical distance from other residents and staff
  - Staff who are on Test to Work must follow the protocols and requirements for Test to Work per the Ministry of Health's [Management of Cases and Contacts of COVID-19 in Ontario](#).

## 8.0 COVID-19 Asymptomatic Testing Requirements

All staff, caregivers, students and visitors are subject to testing requirements. The routine testing of asymptomatic staff, students, volunteers, caregivers, support workers, and visitors who have not been exposed to COVID-19 is different from COVID-19 testing of individuals who are symptomatic, have had high-risk exposure, or are in an outbreak setting as directed by the local public health unit.

Copernicus Lodge shall ensure that no staff member, caregiver, student placement, volunteer, support worker, or general visitor enters the home unless the requirements contained in this section have been met.

Individuals who receive a positive test result for COVID-19 as part of asymptomatic screen testing must follow further testing and isolation requirements as outlined in the Ministry of Health's COVID-19 Guidance: Long-Term Care Homes and Retirement Homes for Public Health Units or as directed by the local public health unit.

### **Testing Requirement:**

Prior to visiting any resident in the home, Copernicus Lodge will require a rapid antigen test (RAT) to be completed on site. Caregivers, support workers, and visitors may proceed into the Home **only after the rapid antigen test (RAT) has been processed for the full 15-minute time period and the result is negative.**

## 8.1 Weekly Asymptomatic Testing Requirements

Ministry recommendations are noted below. Copernicus Lodge maintains the right to implement stricter testing policies for all staff, students, volunteers, visitors and caregivers entering the home.

### ***COPERNICUS LODGE CURRENT TESTING POLICY:***

Copernicus Lodge currently requires all staff, students, volunteers, visitors and caregivers to complete rapid antigen testing every other (every 2 days) when entering the home.

Ministry recommendations:

F: Copern/Policies and Procedures/Infection Control

Subject to the exceptions listed below, all staff, caregivers, student placements, and volunteers working in or visiting Copernicus Lodge must be tested for COVID-19 according to one of the following:

- an antigen test at least two times per week, on separate days, if they are **up-to-date** with all recommended COVID-19 vaccine doses (*refer to Appendix A*)
- an antigen test at least three times per week, on separate days, if they are **NOT** up-to-date with recommended COVID-19 vaccine doses
- one PCR (polymerase chain reaction) and one antigen test per week, at a minimum, on separate days

Where a staff member, student, or volunteer takes an antigen test at Copernicus Lodge, the test must be taken as soon as possible after beginning a shift, and the individual may enter the home with appropriate PPE and following IPAC practices while waiting for the test results. Staff, student placements, and volunteers should not provide direct care to residents until a negative test result is received.

For the purpose of meeting the asymptomatic screen testing requirements, “up-to-date” with COVID-19 vaccines means having completed the primary series and received a COVID-19 vaccine within the last 6 months.

## **8.2 General Visitors And Support Workers**

All general visitors and support workers entering a long-term care home must meet one of the following prior to entry:

- Receive and demonstrate a negative test result from an antigen test taken at the long-term care home on that day; or
- Demonstrate proof of a negative test result from an antigen test or PCR test taken on the same day or the day prior to the visit.

Where a support worker who is a member of a regulated health profession takes an antigen test onsite, the test must be taken upon entry and **only after the rapid antigen test (RAT) has been processed for the full 15 minute time period and the result is negative**, will the individual be permitted access to the home.

## **8.2 Exceptions to Testing Requirements**

### **a) Consecutive days**

If a staff, caregiver, student placement or volunteer only enters a long-term care home on two consecutive days within a seven day period and demonstrates a negative test

result from an antigen test or from a PCR test taken on the first day, they may enter on the second consecutive day without requiring a negative test.

**b) Occasional entry**

No individual is required to attend the home for the sole purposes of meeting the testing requirements (for example, if they enter a home fewer than the number of times required to be tested per week).

**c) Repeat false positives**

If an individual receives three “false positive” antigen tests (takes an antigen test and the test result is positive for COVID-19 and subsequently receives a negative confirmatory PCR test result), within a 30 day period, starting from the day the first preliminary positive antigen test was taken, the individual does not need to follow the above testing requirements. Instead, the individual must demonstrate proof of a negative PCR that was taken in the last seven days prior to entry.

**d) Previous COVID-19**

If an individual has had a prior confirmed COVID-19 infection:

- No **RAT** testing is required for **30 days** from the date of their confirmed COVID-19 Infection. Asymptomatic screening must resume after the 30<sup>th</sup> day.
- No PCR testing is to be completed for 90 days from the date of their confirmed COVID-19 Infection. Asymptomatic screening must resume after the 30<sup>th</sup> day.

**e) Palliative and emergency situations**

Asymptomatic screen testing for support workers, caregivers and general visitors is not required in an emergency situation or in situations where these individuals are visiting or attending to residents receiving end of life care.

**f) Inspectors**

The testing requirements of this Guidance Document do not apply to inspectors with a statutory right of entry. Rather, inspectors from the Ministry of Long-Term Care and the

Ministry of Labour, Training and Skills Development have separate and specific testing protocols that have been established within their ministries.

**g) Proof of negative test**

Where an individual is being granted entry based on an antigen test or a PCR test not onsite at the long-term care home, as outlined in the sections above, they must provide

proof of the negative test result in order to gain entry to the home or take a new antigen test. The home shall ensure that a log is maintained documenting that such proof has been demonstrated.

## **9.0 Managing Safe Visits**

- 9.1 Food and Drink provided by Copernicus Lodge to residents is for **resident** consumption only.
- 9.2 No food or drink is to be consumed in resident rooms or in lounges or dining rooms by any visitor at any time.
  - I. Visitors are required to exit Copernicus Lodge if they will be consuming food.
  - II. Occasional sips of a drink are permitted only when 6 feet away from residents, staff and other visitors and the mask must be immediately put back on.
  - III. Caregivers/visitors are not permitted in non-resident areas. This includes, but is not limited to, nursing stations, staff rooms, conference rooms, storage rooms, utility rooms, kitchen serveries and home service areas such as basement laundry and receiving.
- 9.3 Caregivers/visitors may use the accessible washroom on the ground floor in the long-term care home when visiting a resident. Resident washrooms are not for use by anyone except the resident to maintain infection control standards.
- 9.4 If infection control precaution signage is posted outside a resident's room, all visitors must check with the nursing staff for further direction prior to entering the room.
- 9.5 Regular cleaning of hands reduces the spread of infection. Please clean your hands frequently when visiting, Cover coughs or sneezes with tissue or crook of your arm. Please refrain from touching your face.
- 9.6 The consumption of alcohol is strictly prohibited by visitors.
- 9.7 Possession and use of street drugs and or weapons is strictly prohibited.
- 9.8 Unacceptable behaviour on the part of a visitor such as loud disruptive behaviour, verbal abuse, physical abuse, violence, interference with the care of a resident, and infringement of the guidelines for visitors will not be tolerated, and may result in visiting restrictions, visiting prohibition or legal action.

- 9.9 Caregivers/visitors are required to respect Copernicus Lodge policies, procedures, communication and legislative guidelines.
- 9.10 Caregivers/visitors are encouraged to refrain from wearing scented products.
- 9.11 During winter months, visitors are asked to take care to ensure they have removed excess snow from clothing and footwear resulting in puddles could become a hazard to our Health and Safety.
- 9.12 Do not bring in medications and leave them in the resident's room, always give the medication to the nurse.
- 9.13 The privacy of all residents, staff and ,other visitors must always be respected.
- 9.14 Staff are only able to provide updates on a resident's specific condition to the individual documented as the Power of Attorney for Care.
- 9.15 Caregivers/visitors must refrain from providing personal care to residents for which knowledge, education and certification may be required, including but not limited to, toileting, use of a lifting device, feeding.
- 9.16 Caregivers/visitors will be requested to leave a resident's room when care is being provided to the resident.
- 9.17 Caregivers / visitors are not permitted to stay overnight in a residents room unless the resident is End of Life
- 9.18 Please follow staff instructions in the event of an emergency.
- 9.19 Caregivers/visitors are expected to respect the rights of all residents and families, including not monopolizing common spaces on Resident Home Areas.
- 9.20 Caregivers/visitors, including family, must not take pictures, voice or video recordings of any visitor, staff or other residents without express consent of the individuals involved and permission from Copernicus Lodge leadership. Photos of individual residents in the privacy of their own room are permitted with their consent.
- 9.21 All caregivers/visitors are prohibited from posting unauthorized photos or video/audio recordings of residents, staff or other visitors of Copernicus Lodge on any social media platform without the express written consent of those in the photo/recording and the CEO of Copernicus Lodge.
- 9.22 Only Copernicus Lodge communications, foundation and activation staff are permitted to photograph or videotape resident group events and activities, in order to maintain the privacy of all staff, residents and visitors at Copernicus Lodge
  - i. Any caregiver/visitor found to be photographing/video recording in the home in a manner that is in violation with this policy, will be asked to delete the photo/recording immediately
  - ii. Refusal to follow these privacy requirements may result in termination of the visit or temporary suspension of visiting privileges.

### **9.01 Supervising Visits**

- a. Copernicus Lodge has the discretion to supervise any visit in order to manage health and safety (for example, monitoring the flow of visitors to ensure sufficient physical distancing can be maintained, monitoring to ensure PPE practices being followed, supporting residents during the visit).
- b. Visit supervision will be implemented in a manner that respects the resident's right to communicate in confidence, receive visitors of their choice and consult in private with any person without interference as per the Residents Bill of Rights (*Fixing Long Term Care Act, 2021, s. 3 (1)*).

### **10.0 Non-Adherence By Visitors**

Non-compliance with the home's policies, including harassment, bullying, and intimidation of Copernicus Lodge staff and physicians, may result in a discontinuation of visits for the non-compliant visitor.

#### **10.1 Responding to Non-Adherence by Visitors**

- a. Visitors will be supported to ensure they are able to safely visit with residents by ensuring all visitors review and sign off on this visitor policy and the IPAC Guidelines for visitors in the home.
- b. We Recognize visits are critical to supporting a resident's care needs and emotional well-being. Consideration of the impact of discontinuing visits on the resident's clinical and emotional well-being is essential, however, our priority must be the safety and protection of residents, staff and visitors to the home.
- c. Responses to non-adherence by visitors will reflect and be proportionate to the severity of the non-adherence
- d. Visitors who have had to have a visit suspended due to non-adherence to this policy will be required to complete education/training specific to the area of concern prior to visiting the home again. and will include education/training for the visitor

#### **10.2 Ending a Visit**

- a. Copernicus Lodge has the discretion to end a visit by any visitor who repeatedly fails to adhere to the home's visitor policy, provided:
  - i. The home has explained the applicable requirement(s) to the visitor;

- ii. The visitor has the resources to adhere to the requirement(s) (e.g., there is sufficient space to physically distance, the home has supplied the PPE and demonstrated how to correctly put on PPE, etc.); and
  - iii. The visitor has been given sufficient time to adhere to the requirement(s).
- b. Visits that have had to be terminated will be documented, along with the reason the visit was terminated and the visitor involved. These records will be maintained by the Manager of Programs and Services.

### **10.3 Temporarily Prohibiting a Visitor**

- a. Copernicus Lodge has the discretion to temporarily prohibit a visitor in response to repeated and flagrant non-adherence with the home's visitor policy. In exercising this discretion, consideration will be given to whether the non-adherence:
- i. can be resolved successfully by explaining and demonstrating how the visitor can adhere to the requirements
  - ii. is with requirements that align with the guidance identified in this policy
  - iii. negatively impact the health and safety of residents, staff, and other visitors in the home
  - iv. is demonstrated continuously by the visitor over multiple visits
  - v. is by a visitor whose previous visits have been ended by the home
  - vi. Any decision to temporarily prohibit a visitor will:
    - Be made only after all other reasonable efforts to maintain safety during visits have been exhausted;
    - Stipulate a reasonable length of the prohibition, to be determined by Copernicus Lodge upon review of the circumstances;
    - Clearly identify what requirements the visitor should meet before visits may be resumed (e.g. reviewing the home's visitor policy, reviewing the home's Code of Conduct, reviewing specific Public Health Ontario resources, etc.); and,
    - Be documented by the home.

### **11.0 Personal Protective Equipment (PPE)**

All visitors must wear required PPEs at all times while on-site at Copernicus Lodge. Copernicus Lodge has a universal masking policy, which requires all persons to wear a surgical/procedure mask for the entire duration of their shift or visit, while indoors and outdoors, regardless of their immunization status.

While masks continue to be required for long-term care staff, as well as for visitors and others entering long-term care homes, masks while recommended are no longer required when visitors or caregivers are **alone** with a resident in their room. Please note however that masks must be worn once a visitor/caregiver leaves the residents room and in all communal areas of the home. Additionally, if a resident is in a shared accommodation, masks must be worn at all times if the other occupant of the room is in the room.

Caregivers and general visitors may accompany a resident for meals or social gatherings. When caregivers or visitors are joining a resident in a communal dining setting or social gathering, they are required to **remain masked for the duration of the meal**. Additional precautions may be required prior to entering a resident room, based on isolation requirements. Staff, caregivers, students, volunteers, and general visitors must follow all precautions as identified by signage outside a resident's room. This may include wearing protective eyewear, gown, gloves and/or N95 masks. The Home will provide the appropriate PPE for each circumstance.

All staff, caregivers, students, volunteers and general visitors will:

- receive a new surgical/procedure mask at the entrance screening station, both for indoor and outdoor visits.
- **must** change into a new surgical mask before proceeding to the surveillance testing area or resident floors or the outdoor garden visiting area.
- wear appropriate PPE for the circumstance of their visit and will participate in the required education as per this policy.

All other PPEs (gloves, gowns, and eye protection (i.e, face shield)) will be provided on the resident floor based on isolation precautions in place.

## **12.0 Infection Prevention and Control Education For Visitors:**

Copernicus Lodge provides education and training to all visitors about physical distancing, respiratory etiquette, hand hygiene, IPAC practices, and proper use of PPE.

Caregivers that are going to be assisting residents with feeding are required to complete education on Safe Feeding practices prior to the first instance of feeding the resident. This training will be provided by the Dietitian at Copernicus Lodge. This training is required on an annual basis to maintain awareness of new practices and evidence-based safe practices. Training can be arranged by contacting the Registered Dietitian or Manager of Dietary Services

Below are examples of relevant training materials including instructional videos and guidance from the following Public Health Ontario resources to support IPAC and PPE education and training:

1. Public Health Ontario resources: <https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus/long-term-care-resources>
2. guidance document: recommended steps: putting on personal protective equipment <https://www.publichealthontario.ca/-/media/documents/ncov/ipac/ppe-recommended-steps>)
3. video: putting on full personal protective equipment  
<https://www.publichealthontario.ca/en/Videos/I/2021/IPAC-FullPPE-On>
4. video: taking off full personal protective equipment  
<https://www.publichealthontario.ca/en/Videos/I/2021/IPAC-FullPPE-Off>
5. videos: how to hand wash and how to hand rub  
<https://www.publichealthontario.ca/en/Videos/I/2021/IPAC-Handwash>  
<https://www.publichealthontario.ca/en/Videos/I/2020/IPAC-Handrub>

### Hand Hygiene:

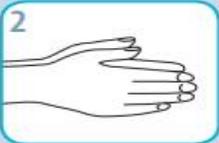
Proper Hand Hygiene is the single most effective method of limiting the transmission of infections.

## How to handrub

**Rub hands for 15 seconds**



**1**  
Apply 1 to 2 pumps of product to palms of dry hands.



**2**  
Rub hands together, palm to palm.



**3**  
Rub in between and around fingers.



**4**  
Rub back of each hand with palm of other hand.

**Rub hands for 15 seconds**



**5**  
Rub fingertips of each hand in opposite palm.



**6**  
Rub each thumb clasped in opposite hand.



**7**  
Rub hands until product is dry. Do not use paper towels.



**8**  
Once dry, your hands are safe.



**JUST CLEAN YOUR HANDS**

For more information, please contact [handhygiene@oahpp.ca](mailto:handhygiene@oahpp.ca) or visit [publichealthontario.ca/JCYH](http://publichealthontario.ca/JCYH)



**Ontario**

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- Use soap and water should be used when hands are visibly soiled
- Alcohol based hand rub should be used if no visible dirt is present on the hands
- Remember to wash/rub for 15 seconds
- Alcohol based hand rub is available throughout the home

Ref: *How to Handwash* - Public Health Ontario. [https://www.publichealthontario.ca/-/media/documents/j/2009/jcyh-handwash.pdf?la=en&sc\\_lang=en&hash=5A5A17D05B5A2297014EFCC50356EBD7](https://www.publichealthontario.ca/-/media/documents/j/2009/jcyh-handwash.pdf?la=en&sc_lang=en&hash=5A5A17D05B5A2297014EFCC50356EBD7).

**Respiratory Etiquette:**



**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

Ref: *Cover Your Cough* - Public Health Ontario. <https://www.publichealthontario.ca/-/media/documents/C/2013/clinical-office-cough-signage.pdf>.

**Putting on PPE's (Donning PPEs)**

**Recommended Steps:**  
**Putting On Personal Protective Equipment (PPE)**

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**1. Perform Hand Hygiene**



**2. Put on Gown**

- Tie neck and waist ties securely



**5. Put on Gloves**

- Put on gloves, taking care not to tear or puncture glove
- If a gown is worn, the glove fits over the gown's cuff



**3. Put on Mask/N95 Respirator**

- Place mask over nose and under chin
- Secure ties, loops or straps
- Mould metal piece to your nose bridge
- For respirators, perform a seal-check



**4. Put on Protective Eyewear**

- Put on eye protection and adjust to fit
- Face shield should fit over brow



For more information, please contact Public Health Ontario's Infection Prevention and Control Department at [ipac@oahpp.ca](mailto:ipac@oahpp.ca) or visit [www.publichealthontario.ca](http://www.publichealthontario.ca).



Ref: *PPE Recommended Steps* / Public Health Ontario. <https://www.publichealthontario.ca/-/media/documents/ncov/ipac/ppe-recommended-steps>.

## Removing PPE's (Doffing PPEs)

### Recommended Steps: Taking Off Personal Protective Equipment (PPE)

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#### 1. Remove Gloves

- Remove gloves using a glove-to-glove / skin-to-skin technique
- Grasp outside edge near the wrist and peel away, rolling the glove inside-out
- Reach under the second glove and peel away
- Discard immediately into waste receptacle

#### 2. Remove Gown

- Remove gown in a manner that prevents contamination of clothing or skin
- Starting with waist ties, then neck ties, pull the gown forward from the neck ties and roll it so that the contaminated outside of the gown is to the inside. Roll off the arms into a bundle, then discarded immediately in a manner that minimizes air disturbance.

#### 3. Perform Hand Hygiene



#### 4. Remove Eye Protection

- Arms of goggles and headband of face shields are considered to be 'clean' and may be touched with the hands
- The front of goggles/face shield is considered to be contaminated
- Remove eye protection by handling ear loops, sides or back only
- Discard into waste receptacle or into appropriate container to be sent for reprocessing
- Personally-owned eyewear may be cleaned by the individual after each use

#### 5. Remove Mask/ N95 Respirator

- Ties/ear loops/straps are considered 'clean' and may be touched with hands
- The front of the mask/respirator is considered to be contaminated
- Untie bottom tie then top tie, or grasp straps or ear loops
- Pull forward off the head, bending forward to allow mask/respirator to fall away from the face
- Discard immediately into waste receptacle

#### 6. Perform Hand Hygiene



This is an excerpt from Routine Practices and Additional Precautions In All Health Care Settings (Appendix L) and was reformatted for ease of use.



Ref: *PPE Recommended Steps* / Public Health Ontario. <https://www.publichealthontario.ca/-/media/documents/ncov/ipac/ppe-recommended-steps>.

**Physical Distancing:**

**COVID-19**  
spreads  
when we  
have close  
contact

**Physical  
Distance**



**Keep a physical  
distance as much  
as possible,  
especially indoors.**

 **TORONTO**

[toronto.ca/COVID19](https://toronto.ca/COVID19)

Ref: City of Toronto: <https://www.toronto.ca/wp-content/uploads/2022/04/9512-COVID19-PhysicalDistancingApr224.pdf>

### **13.0 Additional Requirements**

- Supplies and equipment within the home are not available for use by visitors without the express permission of the home.
- Caregivers/visitors are asked to be respectful of the goods and property of others.
- Smoking is prohibited in the home and within nine meters surrounding any entrance/exit and visitors must maintain 6 feet distancing from residents, staff and other visitors while smoking.
- Due to the requirement to wear a mask at all times in the home and in our enclosed courtyard and garden visiting area, no visitors are permitted to smoke in these areas.
- Pets are permitted; however, each pet must be registered with the home including providing proof of annual vaccinations PRIOR to visiting. Any person wishing to register their pet must contact the Manager of Programs and Services. Additionally, any person bringing in a pet may only visit with their loved one in the resident's room and not in common areas of the home as there may be other residents, staff or visitors with allergies or fear of animals.

### **14.0 Accessibility Considerations**

Copernicus Lodge adheres to all applicable laws including the *Accessibility for Ontarians Disability Act, 2005*.

- c. The essential caregiver will wear a medical mask covering their mouth and nose at all times, along with all necessary Personal Protective Equipment (PPE) as communicated to them by unit staff, including gowns, eye protection and gloves where indicated for additional precautions.
- d. Essential caregivers are asked to leave all personal belongings outside the home to minimize fomite transmission.
- e. Pets are permitted for outdoor visits only.
- f. Essential caregivers will enter and exit the home through the entrance off Marion St. in order to complete active screening.
- g. The Home reserves the right to ask an Essential Caregiver to leave the home and not support further visits with a resident if they are not able to follow the required Infection Prevention and Control guidelines.

**LEGISLATIVE REQUIREMENTS:**

**FLTCHA, 2021, Ontario Regulation 246/22, s. 267**

Visitor policy

**267.** (1) Every licensee of a long-term care home shall establish and implement a written visitor policy which at a minimum,

- (a) includes the process for visitor access during non-outbreak situations and during an outbreak of a communicable disease or an outbreak of a disease of public health significance, an epidemic or a pandemic;
- (b) includes the process for documenting and keeping a written record of,
  - (i) the designation of a caregiver; and
  - (ii) the approval from a parent or legal guardian to permit persons under 16 years of age to be designated as a caregiver, if applicable;
- (c) complies with all applicable laws including any applicable directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or a medical officer of health appointed under the *Health Protection and Promotion Act*; and
- (d) ensures that essential visitors continue to have access to the long-term care home during an outbreak of a communicable disease, an outbreak of a disease of public health significance, an epidemic or a pandemic, subject to any applicable laws.

(2) Every licensee of a long-term care home shall maintain visitor logs for a minimum of 30 days which include, at a minimum,

- (a) the name and contact information of the visitor;
- (b) the time and date of the visit; and
- (c) the name of the resident visited.

(3) Every licensee of a long-term care home shall ensure that the current version of the visitor policy is provided to the Residents' Council and Family Council, if any.

(4) In this section,

“essential visitor” means,

- (a) a caregiver,
- (b) a support worker who visits a home to provide support to the critical operations of the home or to provide essential services to residents,
- (c) a person visiting a very ill resident for compassionate reasons including, but not limited to, hospice services or end-of-life care, or

- (d) a government inspector with a statutory right to enter a long-term care home to carry out their duties.

**Appendix A: Up-to-Date Vaccination**

**Table 1: COVID-19 immunization series and recommended intervals for individuals 6 months of age and older**

Age	Recommended Intervals <sup>1</sup>	Minimum Intervals <sup>2</sup>
6 months to under 5 years (Moderna)	<p><b>Primary Series</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> dose</li> <li>• 2<sup>nd</sup> dose, 8 weeks after 1<sup>st</sup> dose</li> </ul> <p><b>Booster Doses</b> - not eligible</p>	<p><b>Primary Series</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> dose</li> <li>• 2<sup>nd</sup> dose, 28 days after 1<sup>st</sup> dose</li> </ul> <p><b>Booster Doses</b> - not eligible</p>
5 to 11 years (or 6-11 years, Moderna)	<p><b>Primary Series</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> dose</li> <li>• 2<sup>nd</sup> dose, 8 weeks after 1<sup>st</sup> dose</li> </ul> <p><b>Booster Doses</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> booster dose (Pfizer-BioNTech only), 6 months after 2<sup>nd</sup> dose</li> <li>• 2<sup>nd</sup> booster dose – not eligible</li> </ul>	<p><b>Primary Series</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> dose</li> <li>• 2<sup>nd</sup> dose, 19 days (Pfizer-BioNTech) or 21 days (Moderna) after 1<sup>st</sup> dose</li> </ul> <p><b>Booster Doses</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> booster dose (Pfizer-BioNTech only), 3 months after 2<sup>nd</sup> dose</li> <li>• 2<sup>nd</sup> booster dose – not eligible</li> </ul>

Age	Recommended Intervals <sup>1</sup>	Minimum Intervals <sup>2</sup>
12 to 17 years	<p><b>Primary Series</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> dose</li> <li>• 2<sup>nd</sup> dose, 8 weeks after 1<sup>st</sup> dose</li> </ul> <p><b>Booster Doses</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> booster dose, 6 months after 2<sup>nd</sup> dose</li> <li>• 2<sup>nd</sup> booster dose – not eligible</li> </ul>	<p><b>Primary Series</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> dose</li> <li>• 2<sup>nd</sup> dose, 19 days (Pfizer-BioNTech) or 21 days (Moderna) after 1<sup>st</sup> dose</li> </ul> <p><b>Booster Doses</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> booster dose 3 months after 2<sup>nd</sup> dose</li> <li>• 2<sup>nd</sup> booster dose – not eligible</li> </ul>
18+	<p><b>Primary Series</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> dose</li> <li>• 2<sup>nd</sup> dose, 8 weeks after 1<sup>st</sup> dose</li> </ul> <p><b>Booster Doses</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> booster dose, 5 months after 2<sup>nd</sup> dose</li> <li>• 2<sup>nd</sup> booster dose, 5 months after first booster</li> </ul>	<p><b>Primary Series</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> dose</li> <li>• 2<sup>nd</sup> dose, 19 days (Pfizer-BioNTech) or 21 days (Moderna) after 1<sup>st</sup> dose</li> </ul> <p><b>Booster Doses</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> booster dose, 3 months after 2<sup>nd</sup> dose</li> <li>• 2<sup>nd</sup> booster dose, 3 months after first booster</li> </ul>

Age	Recommended Intervals <sup>1</sup>	Minimum Intervals <sup>2</sup>
Moderately or severely immuno-compromised individuals $\geq 6$ months of age <sup>3</sup>	<p><b>Primary Series</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> dose</li> <li>• 2<sup>nd</sup> dose, 8 weeks after 1<sup>st</sup> dose</li> <li>• 3<sup>rd</sup> dose, 8 weeks after 2<sup>nd</sup> dose</li> </ul> <p><b>Booster Doses</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> booster dose               <ul style="list-style-type: none"> <li>○ (if under 5) not eligible</li> <li>○ (if 5-17) 6 months</li> <li>○ (if 18+) 5 months after 3<sup>rd</sup> dose</li> </ul> </li> <li>• 2<sup>nd</sup> booster dose               <ul style="list-style-type: none"> <li>○ (if under 11) not eligible</li> <li>○ (if 12-17) 6 months after first booster</li> <li>○ (if 18 and over) 5 months after first booster</li> </ul> </li> </ul>	<p><b>Primary Series</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> dose</li> <li>• 2<sup>nd</sup> dose, 19 days (Pfizer-BioNTech) or 21 days (Moderna for 6 years and over) or 28 days (Moderna for 6 months to 5 years) after 1<sup>st</sup> dose</li> <li>• 3<sup>rd</sup> dose, 28 days after 2<sup>nd</sup> dose</li> </ul> <p><b>Booster Doses</b></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> booster dose               <ul style="list-style-type: none"> <li>○ (if under 5) not eligible</li> <li>○ (if 5 and over) 3 months after 3<sup>rd</sup> dose</li> </ul> </li> <li>• 2<sup>nd</sup> booster dose               <ul style="list-style-type: none"> <li>○ (if under 11) not eligible</li> <li>○ (if 12 and over) 3 months after first booster</li> </ul> </li> </ul>

Ref: *Coronavirus - Ministry Programs - Health Care Professionals - Moh - Ontario.*  
[https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/.](https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/)