

Bob Rumball Home for the Deaf ~ Policy and Procedure Manual

Manual: Infection Prevention and Control (IPAC)	Approved by: Administrator	Category: IPAC Program
Policy Name: Visitor Policy		Policy #: INF-II-115

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POLICY

This policy under the Infection Prevention and Control (IPAC) Program, is intended to provide pertinent information to visitors who visit at Bob Rumball Home for the Deaf (BRHD).

As the COVID-19 pandemic situation evolves in Ontario, this policy will continue to be adjusted as necessary, keeping the safety and emotional well-being of residents and staff at the forefront.

Visitors must abide by this policy, including but not limited to the health and safety measures/practices contained in this policy as a condition of entry into the home and/or visiting outdoors, as applicable.

BRHD will ensure that the residents are not unreasonably restricted from having visitors in accordance with the Resident's Bill of Rights.

GOAL

- To protect the BRHD residents' rights to an optimal Quality of Life by promoting the residents' right to receive visitors of their choiceⁱ, to live in a safe environmentⁱⁱ, including living in a home where staff and visitors help to prevent the spread of COVID-19, and to have family and friends present when dying or very ill.ⁱⁱⁱ

OBJECTIVES

- To allow residents and their loved ones to reunite in person, as permitted, in a safe manner.
- To prevent and /or limit the pandemic infection/virus from infecting any resident, staff and visitor; and
- To support the emotional well-being and quality of life of residents by reducing any potential negative impacts related to social isolation.

PRINCIPLES^{iv}

This policy is based on 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 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, 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.

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- **Equality** – Residents have the right to choose their visitors. In addition, residents and or their substitute decision-makers (SDMs), as applicable, have the authority to designate caregivers.

Overview of Policy Contents

This policy sets out the parameters, requirements, and procedures with respect to visitors, including but not limited to:^v

- Relevant **definitions**
- Types of visitors:
 - **Essential Visitors**, (*Caregivers, Support Workers, Compassionate/End-of-Life Visitors, Emergency responders and Government Inspectors*); and
 - **General Visitors**
- **Public health measures and IPAC practices**, including:
 - vaccination
 - hand hygiene
 - physical distancing
 - respiratory etiquette
 - masking, and the appropriate use of Personal Protective Equipment (PPE)
- **Screening & Visitor logs**
- **Asymptomatic / Symptomatic Screen Testing**
- Visitor **access to the Home** indoors and outdoors; communal dining; group activities, including **restrictions** with respect to visitors in the event of an outbreak, or when a resident is isolating; and resident admissions, transfer and absences.
- **Education / training** for all visitors, including the use of PPE
- Access to and distribution of this policy; and
- Non-compliance by visitors to BRHD's visitor policy
- Documentation and Reporting; and
- Other related policies

DEFINITIONS (*listed alphabetically*)

Additional Precautions (AP):

Precautions (*i.e., Contact Precautions, Droplet Precautions and Airborne Precautions*) that are necessary to be used **in addition to** Routine Practices for certain pathogens or clinical presentations. These precautions are based on the **method of transmission**, e.g., contact, droplet, and airborne.^{vi} (*Refer also to BRHD's Policy INF-II-118 Routine Practices and Additional Precautions*)

Cohorting means a group of people banded together or treated as a group.^{vii} (*Refer also to BRHD's Policy INF-II-120 Cohorting of Residents and Staff*)

COVID-19 Outbreak in a LTCH

Suspect COVID-19 Outbreak:

- one positive PCR **or** rapid molecular test in a resident, who lives at BRHD, who has reasonably acquired their infection in the setting.^{viii}

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Confirmed COVID-19 Outbreak:

- Two or more **residents** with a common epidemiological link (e.g., same unit, Care Centre, etc.) both with a positive molecular or rapid antigen test, within a **7-day period**, where both cases have reasonably acquired their infection in the Home.^{ix}

Notes:

- BRHD reports all **confirmed and suspected cases** of COVID-19 to the Simcoe Muskoka District Health Unit (SMDHU) and the Outbreak Management Team (OMT).^x
- BRHD reports all **confirmed outbreaks** to the Ministry of Long-term Care (MLTC) through the Critical Incident System (CIS) and report.^{xi}
- Only SMDHU can declare an outbreak and declare when it is over.

SMDHU will determine whether cases have an epidemiological link as part of their investigation, informing the decision whether to declare an outbreak.^{xii}

Epidemiological link is defined as: reasonable evidence of transmission between residents/staff/other visitors AND there is a risk of transmission of COVID-19 to residents within the home.

Close Contact: is an individual who has a high-risk exposure to a confirmed positive COVID-19 case, an individual with COVID-19 symptoms, or an individual with a positive rapid antigen test result.^{xiii}

Direct care services: "... are any services provided to a vulnerable individual that involves hands-on-care, or requires the service provider to be within 2 metres of the vulnerable individual for at least 15 cumulative minutes."^{xiv}

PCR Test: "polymerase chain reaction testing" (PCR), is a type of test that tells us if someone currently has COVID-19.^{xv}

Rapid Antigen Test (RAT): Rapid antigen tests are easy-to-use tests that detect certain proteins in the virus to confirm the presence of COVID-19. Results from these tests can be available in as little as 15 minutes.^{xvi}

Routine Practices (RP): Refers to the system of IPAC practices, recommended by Public Health Agency of Canada (PHAC), to be used with all residents during all care, to prevent and control transmission of microorganisms (spread of infection) in the Home.^{xvii} (Refer also to BRHD's Policy INF-II-118 Routine Practices and Additional Precautions)

COVID-19 Vaccine Guidance: Please refer to the current COVID-19 Vaccine Guidance document for guidance, as per the endnote reference.^{xviii} Recommendations are dependent on the individual's immunization history and immune status. Changes in the current document are summarized in box.

Summary of Changes

- Addition of [Immunization History](#) section (page 4)
- Update to [Table 1](#) (page 5-7)
- Update to recommendations for [moderately to severely immunocompromised individuals](#) to receive one additional dose (page 9)
- Update to [Out of Province Vaccines Section](#) (page 21)
- Update to [Appendix A](#) to include Pfizer XBB products (page 24-25)
- Addition of [Appendix B](#) to outline vaccine scenarios for individuals 6 months – 4 years completing an mRNA vaccine series with the XBB formulation (page 26-27)

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Visitor: A visitor may be deemed an “**essential visitor**” (which includes several visitor subtypes), or a “**general visitor**”, as explained in detail in the Types of Visitors below.

Note: The following are **NOT considered visitors**:^{xix}

- Infants under the age of one year
- BRHD staff, volunteers, and student placements, as their access to the home is determined by the licensee.

Information for All Visitors

- All visitors must **self-screen** for symptoms and or exposure to communicable infections, including symptoms of or exposure to COVID-19 or Influenza, prior to entry.
Note: Refer also to the “Screening and Visitor Logs” section of this policy for more information.
- Visitors must **sign-in on the visitor log**. (Sample in Appendix A)
- Visitors must **follow the required IPAC practices** as directed, when on the BRHD site, both inside and outside.
 - As of March 4/24, masks are recommended, but not required, in all areas of the Home.^{xx} Please refer to the “Masking” section below for details, including exceptions and special circumstances.
- In **non-outbreak** situations and when the resident is **not in isolation**, subject to direction from SMDHU:
 - There are no limits on the total number of visitors (including caregivers) per resident, based on space outside, in the resident’s room, in the Home, and with respect for other residents in the Home.
 - Visitors are not required to undergo **asymptomatic screen testing** for COVID-19 unless otherwise directed by SMDHU.^{xxi}
- Visitors are strongly encouraged to stay up to date with their vaccinations, including but not limited to COVID-19, and Influenza. Visitors are not required to be vaccinated at this time.
Note: Refer to the “COVID-19 Vaccination” section below for additional details.
- For “**COVID-19 Safety Measures: What You Can Expect in Your Long-Term Care Home**”, refer to Appendix F, which includes:
 - All residents are invited to ...
 - *What measures are in place to make my long-term care home safe?*^{xxii}
 - *What if my home is in outbreak?*
 - *What happens if I test positive for COVID-19?* and
 - *What if come into contact with someone with COVID-19?*^{xxiii}

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TYPES OF VISITORS

ESSENTIAL VISITORS

“Essential Visitor” means:^{xxiv}

- (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 LTCH to carry out their duties. This excludes infants under the age of one year.^{xxv xxvi}
- **Essential visitors** are the **only** type of visitors allowed when there is an endemic, pandemic, or an outbreak (*of a communicable disease or public health significance*), area of the Home or when a resident has failed screening, is symptomatic or in isolation, subject to applicable laws.^{xxvii}
 - All essential visitors will **be apprised of the COVID-19 status of the Home, area or individual**, by signage in the Home, and/or where they will be performing their essential duties. **They must take the appropriate IPAC precautions, and wear the appropriate PPE as directed.**

(a) Caregiver

“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.^{xxviii}
- Each caregiver must complete the “**Designated Caregiver Registration Form**” prior to starting as a caregiver. (*Refer to Appendix H*)
BRHD uses the *Designated Caregiver Registration Form* to facilitate processing and **maintaining a current record** of the caregivers at BRHD.
Note: An approval from a parent or legal guardian to permit persons under 16 years of age to be designated as a caregiver, is required under the regulation of the FLTCA.^{xxix}

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- After the form is completed, forward copies to Social Services Manager, Administrative Coordinator, or their designate. The Social Service Manager/designate will coordinate the required follow-through action, including but not limited to:
 - Ensuring completion of the caregiver registration form, as appropriate, including approval from a parent or legal guardian to permit persons under 16 years of age to be designated as a caregiver, if applicable ^{xxx}
 - Checking with the resident/authorized SDM re the designation of the caregiver, where appropriate, and documenting the new caregiver's name and contact information in the Resident's plan of care;
 - Updating the Caregiver list for the screener;
 - Ensuring the caregiver receives the required orientation / training, including access to and review of the current Visitor Policy.
 - Maintain the completed registration form as per BRHD's records management practices.
 - Caregiver(s) may visit their loved one in the Home when there is an outbreak in the Home, or an outbreak in the area of the home where the resident resides, or when the resident has failed screening, is symptomatic or in isolation. ^{xxxi} During an outbreak, BRHD will continue to be subject to SMDHU and MLTC's direction.
 - A caregiver **should not visit any other home for 10 days after visiting:**
 - An individual with a confirmed ^{xxxii} case of COVID-19
 - An individual experiencing COVID-19 symptoms. ^{xxxii}
 - Caregivers who visit a resident residing in an **outbreak** area, or when the resident is **symptomatic, or self-isolating**, will be required to **wear full PPE at all times**, (no eating/drinking with the resident). Under these circumstances, the caregiver(s) should confine their indoor visit to the resident's room, and not co-mingle with other residents or staff.
 - 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 (unrelated)** residents who are COVID-19 positive, provided **BRHD obtains consent from all involved residents** (or their SDMs). Caregivers may also support more than one resident in non-outbreak situations, with the same expectation regarding resident consent. ^{xxxiii}
 - For "**COVID-19 safety measures**" when taking a resident out of the home, and when returning the resident, including instructions if the resident or caregiver are in close contact with an individual with COVID-19, please refer to Appendices F and G.
- (b) **Support Worker** - is a type of "essential visitor" who visits a home to provide support to the critical **operations of the Home**, or to provide essential services to a resident. ^{xxxiv} Essential services include, but are not limited to:
- services provided by regulated health professionals, **emergency services** (e.g., 911 responder - Police, Fire fighter, Ambulance), social work, moving services, legal services, post-mortem services, maintenance and repair services (e.g., contractor), food and nutrition services, water and drink delivery services, mail, delivery and courier services, assistive devices program vendors, and election/voting services.

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(c) **Compassionate /End-of-Life Visitor** - is a type of "essential visitor," who is visiting a **very ill** resident for compassionate reasons, including but not limited to, hospice services or **end-of-life** care.^{xxxv}

(d) **Government Inspectors** - have a statutory right of entry. They **cannot be prohibited from entering the home**.^{xxxvi}

GENERAL VISITORS

- A general visitor is a person who is not an essential visitor and is visiting to provide non-essential services related to either the operations of BRHD, or a particular resident, or group of residents.
 - General visitors include those persons visiting for social reasons as well as visitors providing non-essential services such as personal care services, entertainment, for individuals touring the home.^{xxxvii}
- General visitors **younger than 14 years of age must be accompanied by an adult** and must follow all applicable public health measures that are in place at the home and outlined in this policy.
- General visitors **should postpone non-essential visits** to residents(s) who are symptomatic and/or self-isolating, when BRHD is in outbreak, and as SMDHU directs.^{xxxviii} If only a portion of the Home is in outbreak, residents unaffected by that outbreak may still have visitors.^{xxxix}

HEALTH MEASURES AND IPAC PRACTICES

- **SARS-CoV-2, the virus which causes COVID-19**, primarily spreads from one person to another when an infected person breathes, talks, coughs or sneezes and releases respiratory emissions of different sized virus-laden particles into the air. There is not one specific measure that will prevent SARS-CoV-2 transmission. However, the use of multiple layers of prevention provides the best protection, especially when people cannot avoid closed spaces, crowded places, and close contact.^{xl}
- **Prevention is better than cure**, so taking measures to protect ourselves and our loved ones from becoming infected with COVID-19 / SARS-CoV-2 or any of its variants of concern (VOC) is the best approach.
- All visitors need to **practice strong IPAC measures** and be vigilant with respect to BRHD and SMDHU public health measures as applicable, including, but not limited to: self-screening for communicable infectious diseases, including COVID-19, frequent hand hygiene (*Appendix B*), staying up to date with vaccinations including COVID-19 and Influenza, respiratory etiquette, appropriate use of personal protective equipment (PPE) when required (*Appendices C and D*), and physical distancing when directed.
- Prior to the visitation, all visitors should **consider their personal health and susceptibility** to the infections, e.g., COVID-19, influenza, etc., that may be present in the Home, when determining whether visiting BRHD is appropriate.

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- In the case where SMDHU directs or orders BRHD to follow any IPAC practices, additional precautions and/or outbreak activities (pre, during and post a declared outbreak), all persons, including but not limited to BRHD staff **and visitors must follow the direction of SMDHU**, which may include advising general visitors to postpone all non-essential visits.^{xii}
- **No one protective technique is 100% effective. Staying up to date with vaccinations, ventilation, avoiding ill people, and wearing PPE and physically distancing when appropriate,** are all important and effective to prevent you from getting an infection. Remember that it is critical to isolate yourself from others when you are infected to prevent you from spreading the virus to others.^{xiii}
- **Cohorting:** During an **infectious outbreak** (e.g., COVID-19 or Influenza) in the Home, residents are cohorted for all non-essential activities including communal dining, activities, organized events and social gatherings. Different cohorts (e.g., infectious and non-infectious) are not to be mixed, and residents from different cohorts should not visit one another. *For additional information on cohorting please refer to BRHD's policy INF-II-120.*

COVID-19 Vaccination

- Vaccinations and therapeutics (e.g., antiviral medication) substantially reduce the risk of hospitalization and severe outcomes, e.g., from COVID-19 and influenza, for all persons, particularly for the BRHD residents, who live in a high-risk congregate setting.
- BRHD does not mandate visitors to be vaccinated, including for both indoor and outdoor visits, at this time. The **risk of severe COVID-19 outcomes to residents has significantly** decreased with the high immunity and general prevalence reduction of COVID-19 in the community, the high vaccine uptake among residents, and the availability of safe and effective antivirals.
- Although visitors are not required to be vaccinated against COVID-19 at this time, it is **strongly recommended that all visitors consider their own health and protection against infections, and stay up to date with their COVID-19 and other vaccinations**, including influenza.^{xiii}
- BRHD retains the right to set their own vaccination policy, which may change, based on the advice of SMDHU, or as directed by government (federal, provincial, or local).
 - **Essential visitors** in particular should stay up to date with their vaccinations since they are allowed to visit in the Home **when the resident** is symptomatic, self-isolating, or is residing in an outbreak area.
- All visitors, whether they are up to date with vaccinations or not, must continue to practice the recommended Public Health (PH) measures and comply with all applicable laws for the ongoing prevention and control of infection and transmission.
- For additional details about COVID-19 vaccines, please refer to the current version of MOH's "**COVID-19 Vaccine Guidance**."^{xiv}

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- BRHD will continue to work with SMDHU to facilitate easy access to COVID-19 immunization and boosters, particularly for residents, caregivers, and staff.
- As a reminder, all persons can book COVID-19 immunization and booster appointments on the **provincial COVID-19 vaccination portal**,^{xlv} by calling the **Provincial Vaccine Contact Centre at 1-833-943-3900**, or through **select pharmacies**, and **primary care settings**.

Hand Hygiene

- Hand hygiene is the core element of BRHD's IPAC program. Good hand hygiene is the single most important way to prevent infections. Keeping hands clean is one of the best ways to remove germs, avoid getting sick and prevent the spread of germs (e.g., respiratory, and diarrheal infections) from one person to the next.^{xlvi}
- **Appendix C** of this policy directs the visitor on how **to handrub and how to wash your hands**, including references to short videos. (*Refer also to BRHD's Hand Hygiene Policy # INF-II-27*)
- **Practicing hand hygiene**, includes, but not limited to:
 - Before contact with the resident or their environment
 - After resident environment contact, e.g., leaving the resident's room.
 - Before eating/drinking
 - After using the toilet.
- BRHD staff conduct regular hand hygiene audits, which includes auditing staff and visitors, to ensure correct hand hygiene is conducted. Retraining of visitors on hand hygiene is available upon request and as needed.
- When visitors are visiting with their loved ones during a meal time or social activities, please encourage the resident to practice good hand hygiene prior to and after eating their meal, and participating in social activities.

Physical Distancing

- Physical distancing means maintaining a distance of 2 metres or 6 feet, at minimum.
- During non-outbreak situations and when the resident is not isolating, no specific COVID-19 physical distancing is required.^{xlvii}
- BRHD has private rooms, 2 separate bedrooms that share a washroom, and a shared bedroom with one other resident with a wall partition between those 2 residents. In the event a resident requires isolation, BRHD's bedrooms can easily accommodate sufficient physical distancing between 2 residents.^{xlviii}
- In the event of a community infectious endemic or pandemic, to avoid contact with others who may have a communicable infectious disease, individuals are encouraged to avoid situations where the infection can easily spread, such as:
 - Crowded places with many people nearby
 - Close-contact settings

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- Confined and enclosed spaces with poor ventilation.

Respiratory Etiquette

- Respiratory etiquette means personal practices that help prevent the spread of bacteria and viruses that cause acute respiratory infections (ARI), e.g., covering the mouth when coughing or sneezing and care when disposing of tissues.^{xlix}
- BRHD encourages all persons to practice respiratory etiquette.

Masking

- Masks are the first defense against the transmission of respiratory viruses.
- For **staff, students, volunteers and support workers**:
 - Masks are required based on a point of care risk assessment (PCRA), prior to every resident interaction and task to determine whether there is a risk to the health care worker (HCW) or other individuals of being exposed to an infectious agent, including COVID-19, and determine the appropriate IPAC measures to be taken.
 - If the resident is on isolation, the IPAC Practitioner/designate, will determine and post additional precautions signage on the resident's door to indicate the level of precautions needed.ⁱ
 - Staff may consider wearing a mask during prolonged direct resident care, defined as one-on-one care within two metres of an individual for 15 min. or longer.
 - BRHD has "mask friendly" policies, and will accommodate:
 - staff who prefer to continue to wear a mask beyond minimum requirements; and
 - a resident/SDM's request for a staff member to wear a mask while providing care.ⁱⁱ
- As of March 4/24, masks are recommended, but not required, in all areas of the Home,ⁱⁱⁱ unless otherwise directed by additional precautions signage on the resident's door, or area of the Home.
- Unless otherwise directed, there are no COVID-19 specific requirements or restriction related to communal dining or group activities. IPAC practices should continue to be followed in communal spaces to promote safety and well-being.ⁱⁱⁱⁱ

Exceptions to the masking requirements are:^{liv}

- Children who are younger than two years of age
- Any individual (staff, student, volunteers, support worker, caregiver, visitor or resident) who is being accommodated in accordance with the Accessibility for Ontarians with Disabilities Act, 2005,^{lv} or the Ontario Human Rights Code.^{lvi}
- **Note:** *Any masking exemption request to be accommodated in accordance with the Accessibility for Ontarians with Disabilities Act, or the Human Rights Code, will be assessed by BRHD staff on an individual basis, and when determined applicable, an accommodation plan will be established.*
- *During an infectious outbreak in the Home, all persons must follow the direction of the Simcoe Muskoka District Health Unit (SMDHU) regarding wearing PPE.*

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- If the home is in an outbreak situation, or if the resident is isolating, all permitted visitors (e.g., *essential visitors*) must use the appropriate mask and other PPE as directed by the Infection Prevention and Control (IPAC) Practitioner and/or SMDHU.

Appropriate Use of Personal Protective Equipment

- BRHD will follow and the applicable provisions in the *Fixing Long-Term Care Act, 2021*,^{lvii} including **its Regulation** (O. Reg. 246/22),^{lviii} the IPAC Standard for LTCHs,^{lix} and other best practice guidelines related to the appropriate use of PPE.
- Visitors will be directed by BRHD signage and staff, to **wear the appropriate PPE** when and where needed.
- Visitors are provided information on “donning” (*putting on*) and “doffing” (*taking off*) PPE through this Visitor Policy (**Appendix C – Putting on PPE**; and **Appendix D – Taking Off PPE**). Staff will provide additional IPAC information and/or training, upon request, and as needed, including but not limited to: during an outbreak, while visiting a resident in isolation and on additional precautions, and when additional PPE is used in the Home during an outbreak, pandemic or endemic.
- **Assistance** to all individuals with putting on and or taking off PPE will be provided as needed and/or requested.
- Where needed, “**Additional Precautions**” signage (e.g., *contact, droplet and/or airborne*) will be used to identify the appropriate PPE to wear. (Refer also to BRHD Policy # INF-II-118.)
- Regardless of their COVID-19 vaccination status, appropriate eye protection (e.g., goggles or face shield) is required for all staff and essential visitors when providing care to residents with suspect/confirmed COVID-19; and in the provision of direct care within 2 metres of residents in an outbreak area. In all other circumstances, the use of eye protection and other PPE by staff is based on the point-of-care risk assessment when within 2 metres of a resident.^{lx}

Note:

BRHD is responsible for supplying medical masks, gloves, gowns, and eye protection to visitors, as required. BRHD may provide goggles or face shields for eye protection. Face shields protect both the individual’s eyes and mask. BRHD maintains a sufficient inventory of PPE in the event of an outbreak.

SCREENING & VISITOR LOGS

- There are two types of screening, active and passive screening.
 - “**Active screening** means there is some form of attestation or confirmation of screening. This can be achieved through pre-arrival submission of online screening [if available] or in person.
 - **Passive screening** means that those entering the setting [BRHD] review screening questions themselves, and there is no verification or reporting of screening results.”^{lxi}
- The purpose of screening is to provide another protective layer to identify those who may be infectious, to reduce the potential entry and spread of COVID-19 [or other infections] within BRHD.

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^{lxii} Please report any signs or symptoms of COVID-19 or other infections that develop while in the Home, to the IPAC Practitioner, or a registered nursing staff member on a Care Centre. ^{lxiii}

Note: *Essential visitors are not restricted from visiting during an outbreak or when a resident is isolating, but must wear the appropriate PPE and follow the directions of the SMDHU.*

- If you are **feeling unwell**, or believe you will fail the screening for communicable infections, please do not visit the Home. ^{lxiv}
- All visitors, when entering the Home, must conduct passive screening at this time, and complete the **visitor log**, which includes:
 - their name and contact info,
 - the time and date of the visit,
 - the purpose of their visit/resident's name they are visiting, ^{lxv} and
 - indicate whether they passed the screening questions, as per the posted "**Screening Tool**" - **Appendix E**.

Note: *If a visitor fails the screening questions, please follow the directions as outlined in detail in Appendix E (screening tool). If a visitor requires additional PPE, or needs a review of the IPAC practices that apply to them, please request assistance from staff PRIOR to entry.*
- **COVID-19 signs and symptoms** are posted at the entrance and throughout the Home for self-monitoring. The COVID-19 symptoms are also listed in the COVID-19 Screening Tool - **Appendix E**, question #1.
- All visitors should also **continue to self-monitor for other respiratory or infectious diseases**, and practice IPAC practices, to prevent the spread of illness in the Home. Please report any signs/symptoms of infection that are developed in the Home, and follow signage posted in the Home. ^{lxvi}
- BRHD will keep the visitor logs / records for a period of at least 30 days and be readily available for SMDHU for contact tracing purposes upon request. ^{lxvii}

ASYMPTOMATIC / SYMPTOMATIC SCREEN TESTING

- "Currently, there are no **asymptomatic** screen-testing requirements." ^{lxviii}
- "Testing of **symptomatic** residents will continue; and staff students, volunteers, general visitors, caregivers and support workers are encouraged to get tested if symptomatic." ^{lxix}

Note: *BRHD retains the right to implement asymptomatic screen-testing policy, if deemed necessary and upon the direction of SMDHU. If BRHD implements asymptomatic testing, the criteria will be identified in a policy. Asymptomatic testing will not apply to outdoor visitors, those visiting residents who are receiving end-of-life care, or to inspectors with a statutory right of entry. ^{lxx}*

- Testing type and frequency during an outbreak is dependent on SMDHU direction.

Notes:

- A Handout (**INF-II-116. c.**) "What to do if you have COVID-19 symptoms, or have a positive RAT" is available for visitors upon request.

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- BRHD will continue to conduct COVID-19 testing of residents, staff, students, and volunteers who are symptomatic, have had high risk exposure, or are in an outbreak setting as directed by SMDHU.^{lxxi}

VISITOR ACCESS TO HOME

- During **non-outbreak times**, BRHD does not limit the number of visitors that a resident may visit with at a time, for indoor or outdoor visits, subject to space and respect for a roommate's privacy.
- The COVID-19 screening tool will be posted in the Front Entrance area. **All visitors are required to conduct passive screening and sign the visitor log.** Visitors must follow the direction on the COVID-19 screening tool if they fail the screening.
- **Indoor visitors** are encouraged to use the washroom near the front lobby, rather than in the resident's washroom.

Communal Dining (in non-outbreak times)

- Communal dining is an important part of BRHD's social environment.
- Visitors are allowed to bring a beverage/snack for your loved one to enjoy.
- Visitors may assist their loved one with their meal at the resident's regular dining table, barring any IPAC restrictions.
- IPAC practices, such as hand hygiene, should continue to be followed in communal dining settings.^{lxxii}
- Visitor meals have resumed. Caregivers and general visitors may join a resident in sharing a meal or eating and drinking in a communal space without a mask.

Notes:

- *The activity table may be booked in each dining room for lunch and/or supper. The table will accommodate the resident and up to 4 guests.*
- *If you wish to purchase a meal from BRHD to join your loved one with a meal, please purchase the meal ticket(s) from the front receptionist.*

Group Activities (in non-outbreak situations)

- BRHD will continue to provide opportunities for residents to gather for group activities.
- Visitors and caregivers may join residents for group activities. Masking is recommended, but not required, unless otherwise directed. IPAC practices should continue to be followed in communal spaces to promote safety and well-being."^{lxxiii}
- BRHD has resumed pet visitations in the Home. Before the pet is allowed in the Home, please ensure that proof of the pet's rabies vaccination is provided to either the Social Services Manager and Volunteer Coordinator, or the IPAC Practitioner.

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1. “What happens in an outbreak?”

In the event of a COVID-19 outbreak, BRHD will follow the direction of SMDHU, including cohorting practices, as outlined in the “COVID-19 Guidance: Long-Term Care Homes, Retirement Homes, and other Congregate Living Settings for Public Health Units.”^{lxxiv}

Group activities and communal dining will be conducted such that the outbreak unit is cohorted separately from unexposed persons. Group activities and communal dining for cohorts (exposed separated from unexposed) may resume.

BRHD will wherever possible, continue group activities for exposed cohorts to support resident mental health and well-being.”^{lxxv}

2. “What happens when a resident is isolating or fails screening?”

Residents in isolation, or who fail screening (such as, during daily monitoring) are **not to join in group organized events, activities, dining or social gatherings**. However, BRHD will attempt to have these residents join in virtually where possible, to provide these residents with an alternative to in-person social interaction.”^{lxxvi}

Resident Admissions and Transfers

- BRHD will follow the MOH’s COVID-19 guidance for new admissions to the Home and transfers, as outlined in the “*Algorithm for Admissions and Transfers for Long-Term Care Homes and Retirement Homes*”^{lxxvii} (Appendix I of this policy)

Resident Absences:

- All residents are invited to leave BRHD for all types of absences, including social day and overnight absences, and not have to be actively screened, tested or isolated upon return to the Home, unless the resident is symptomatic.
 - Any resident who is symptomatic is permitted entry but will be isolated on Additional Precautions and tested for COVID-19, as per the “*Infectious Disease Protocol Appendix 1: Case Definitions and Ministry of Long-Term Care Disease Specific Information Disease: Diseases caused by a novel coronavirus*”,^{lxxviii} and the “*COVID-19 Guidance: Long-Term Care Homes, Retirement Homes, and other Congregate Living Settings for Public Health Units.*”^{lxxix}

EDUCATION / TRAINING FOR ALL VISITORS (includes use of PPE)

- IPAC training is provided to all people who regularly attend BRHD, including but not limited to **essential and general** visitors relevant to the individual’s responsibilities, their direct care to the resident, and based on that person’s assessed needs.
- Visitors will have access to and/or be given a copy of this policy upon request, which includes, but is not limited to, the following IPAC practices:
 - Appendix **B**: How to Handrub and How to Wash your Hands - Poster (PHO)^{lxxx}; including videos entitled How to Hand Wash^{lxxxi} and Handrub^{lxxxii}
 - Appendix **C**: Putting on PPE^{lxxxiii} (PHO), including a video: Putting on Full Personal Protective Equipment^{lxxxiv}
 - Appendix **D**: Taking Off PPE^{lxxxv} (PHO), including a video: Taking off Full Personal Protective Equipment^{lxxxvi}
 - Appendix **J**: Visitors Code of Conduct (ADM-II-23)

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- Each visitor wishing to be a **caregiver** must complete the required **Designated Caregiver Registration Form** confirming that they have read the home's visitor policy and has received the training as outlined.
- Prior to visiting any resident for the first time, caregivers must review the training materials that address how to safely provide the appropriate direct care, including how and when to perform hand hygiene, and how to put on and take off required PPE.
- BRHD will provide training and/or retraining to all visitors as needed, or upon request. To make arrangements for training/re-training, as needed or desired, please contact the Social Services Manager, at jpilon@bobrumball.org, or by phone at (705) 719-6700, Ext 308.
- Visitors are reminded to respect and follow the **IPAC directions measures** that have been put in place. Ask for assistance if you do not understand them and/or require further **training**. Respect and cooperation when interacting with all individuals is appreciated.
- Additional **Public Health Ontario resources** related to COVID-19 and LTC Homes may be found at: [COVID-19 Long-Term Care Resources | Public Health Ontario](#).^{lxxxvii}

VISITOR POLICY ACCESS AND DISTRIBUTION

- Changes in this policy will be communicated to visitors, Residents' Council, and Family Council if any,^{lxxxviii} by: providing current copies of the policy by e-mail, by providing hard copies of the policy left at the screening desk and/or discussed during Resident, Family, and staff meetings, as applicable.
- In addition, this policy is posted in the Home,^{lxxxix} and on BRHD's website.^{xc} For accessing the website, go to [Home \(B.R.H.D.\) - Bob Rumball Organizations](#), then click on "BRHD Website information section".^{xc1}

DOCUMENTATION AND REPORTING

- BRHD has a process for documenting and keeping a written record of:
 - The designation of a caregiver; and
 - The approval from a parent or legal guardian to permit persons 16 years of age to be designated as a caregiver, if applicable.^{xcii}
- All records relating to visits between visitors and their loved ones will be documented, e.g., on visitor logs, as required. During a pandemic, and as requested, the completed visitor logs will be forwarded to the IPAC Practitioner/designate.
 - The visitor logs, at a minimum, will contain the following information:
 - The name and contact information of the visitor
 - The time and date of the visit; and
 - as applicable, the name of the resident visited.^{xciii}
 - All visitor logs are maintained by BRHD for minimum of **30 days** and be readily available to SMDHU for contact tracing purposes upon request.^{xciv}

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- Required statistical information will be documented, collected and provided to the required authorities, as directed.
- BRHD will ensure that the current version of the Visitor Policy is provided to the Residents' Council (RC) and Family Council (FC), if any.^{xcv}
- BRHD reviews this policy regularly to ensure it is supported by the most current clinical advice, and will seek independent legal advice, as needed.

NON-COMPLIANCE BY VISITORS TO BRHD'S VISITOR POLICY^{xcvi}

- BRHD is serious about protecting the residents, staff and visitors in the home from the risk of COVID-19.
- Visitors will be supported in understanding and adhering to the BRHD visitor policy.
- BRHD recognizes visits are critical to supporting a resident's care needs and emotional well-being.
- BRHD may end a visit after repeated non-adherence with the home's policy, if BRHD has:
 - explained the applicable requirements to the visitor (e.g., through this policy and/or in person);
 - the visitor was given sufficient resources to adhere to the requirement, e.g., there is sufficient space to physically distance, the home has supplied the PPE and demonstrated how to correctly put on PPE; and,
 - the visitor has been given sufficient time to adhere to the requirement(s).
- BRHD will reflect and be proportionate to the severity of the non-adherence.
- BRHD will consider the impact of discontinuing visits on the resident's clinical and emotional well-being.
- BRHD may temporarily prohibit a visit in response to repeated and flagrant non-adherence, after all other reasonable efforts to maintain safety during visits have been exhausted.
- In exercising this discretion, BRHD will take into consideration whether the non-adherence:
 - Can be resolved successfully by explaining and demonstrating how the visitor can adhere to the requirements.
 - Meets compliance with the required documents that BRHD is to follow, including but not limited to the requirements of a Directive, COVID-19 Guidance document, legislation/regulation, etc., and whether that requirement is in Visiting Policy:
 - Negatively impacts the health and safety of residents, staff and other visitors in the home.
 - Is demonstrated continuously by the visitor over multiple visits.
 - Is by a visitor whose previous visits have been ended by the Home.

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- 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 the length of the prohibition; and,
 - Clearly identify what requirements the visitor must meet prior to resuming visits (e.g., reviewing the home's visitor policy, reviewing specific Public Health Ontario resources, etc.); and,
 - Be documented by BRHD staff, including any action taken to end the visit or temporarily prohibiting the visitor from returning.
 - Please follow the Visitor Code of Conduct (Appendix

Notes:

- *If BRHD has temporarily prohibited a caregiver, the resident/SDM may wish to designate an alternate individual as caregiver to help meet the resident's care needs.*
- *BRHD will discuss the procedures for addressing non-adherence by visitors with the resident and family members.*
- *During the pandemic with high transmission of COVID-19 in the community and when the home is in outbreak, meetings with RC are conducted separately for each care centre.*

Other Related Policies/Plans

- ADM-II-23 ~ Visitors Code of Conduct
- INF-II-115. a. ~ Resident Absences, Admissions, Transfer/Readmission during COVID-19
- INF-II-116. c. ~ Handout – What to do if you have COVID-19 symptoms, or have a positive RAT
- INF-II-117 ~ Mask – Resident Use
- INF-II-118 ~ Routine Practices and Additional Precautions
- INF-II-120 ~ Cohorting of Residents and Staff
- INF-II-127 ~ Hand Hygiene Program

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List of Appendices

Appendix A: **BRHD Visitor Log**

Appendix B: **How to Handrub and How to Wash your Hands - Poster PHO** ^{xcvii}

Note: Videos entitled How to Hand Wash and Handrub are available at the following sites:

- Handwash: <https://www.publichealthontario.ca/en/videos/ipac-handwash>
- Handrub: <https://www.publichealthontario.ca/en/videos/ipac-handrub>

Appendix C: **Putting on PPE** ^{xcviii} – PHO

Note:

- Video available titled “Putting on Full Personal Protective Equipment” found at: <https://www.publichealthontario.ca/en/videos/ipac-fullppe-on>

Appendix D: **Taking Off PPE** ^{xcix} – PHO

Note:

- Video entitled “Taking off Full Personal Protective Equipment” found at: <https://www.publichealthontario.ca/en/videos/ipac-fullppe-off>

Appendix E: **COVID-19 Screening Tool** ^c (2 pages)

Appendix F: **COVID-19 Safety Measures: What Residents Can Expect in a LTCH** ^{ci}

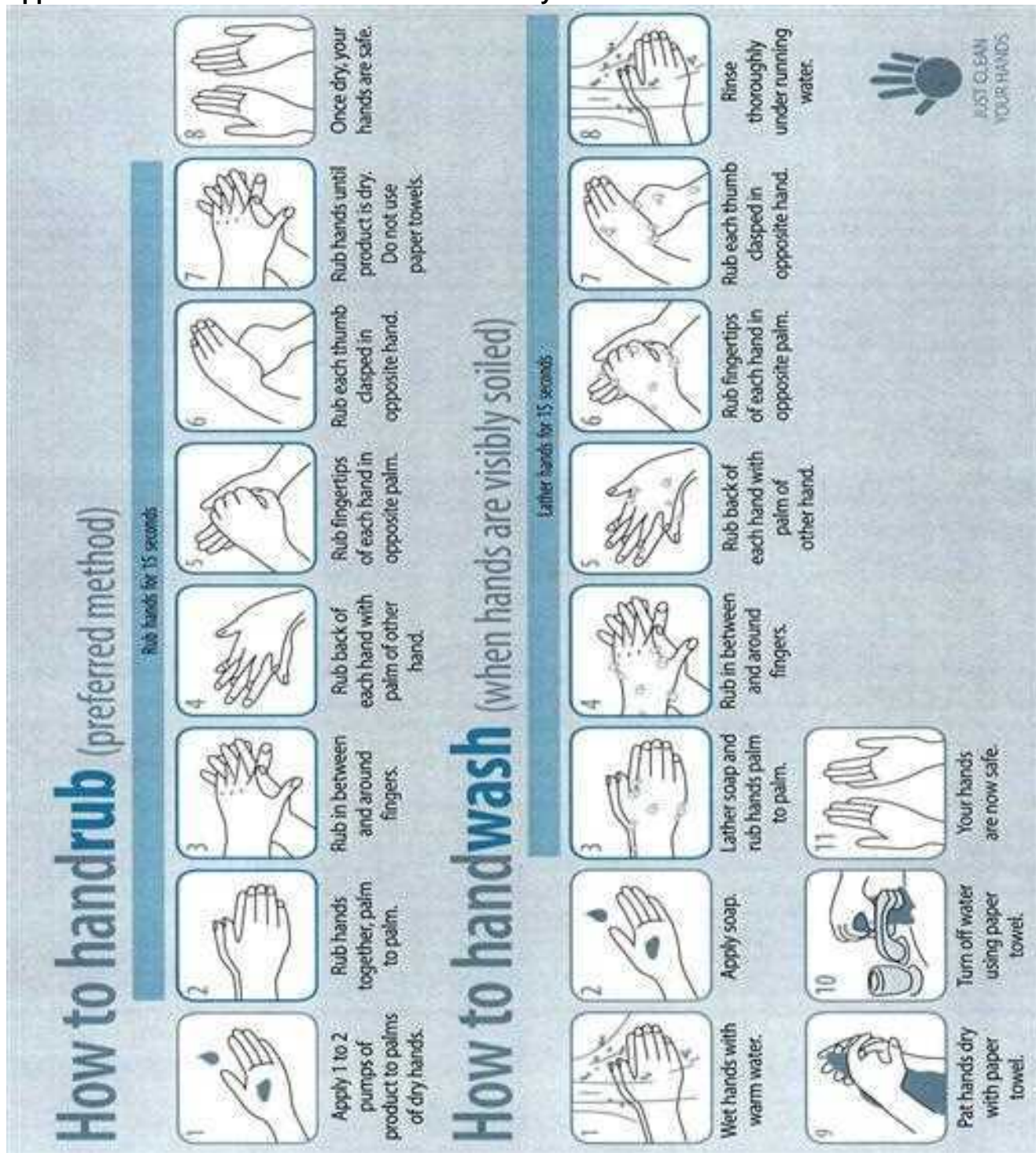
Appendix G: **Visitors Code of Conduct** (ADM-II-23)

Appendix H: **Designated Caregiver Registration Form** ^{cii}

Appendix I: **Resident Admissions and Transfers** ^{ciii}

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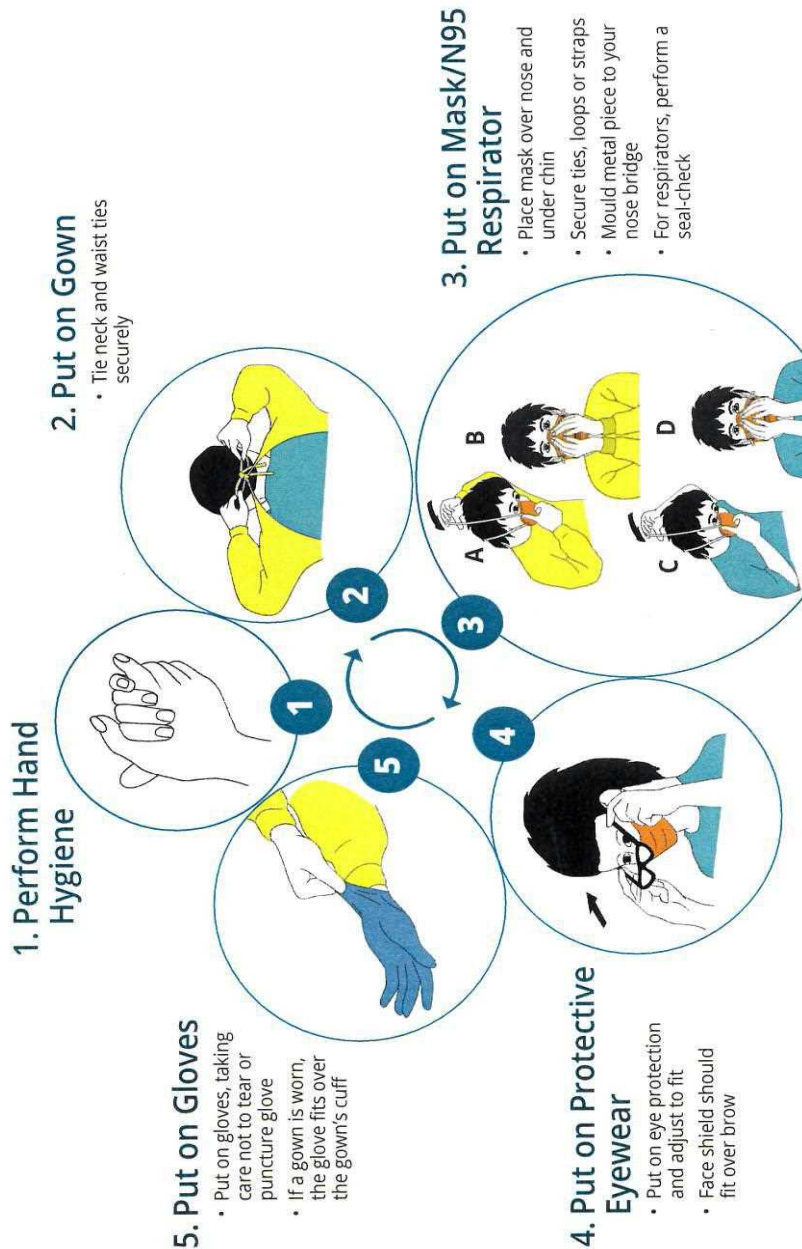
Appendix B: How to Handrub and How to Wash your Hands - Poster ^{civ} - PHO



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Appendix C: Putting on PPE ^{cv} – Public Health Ontario

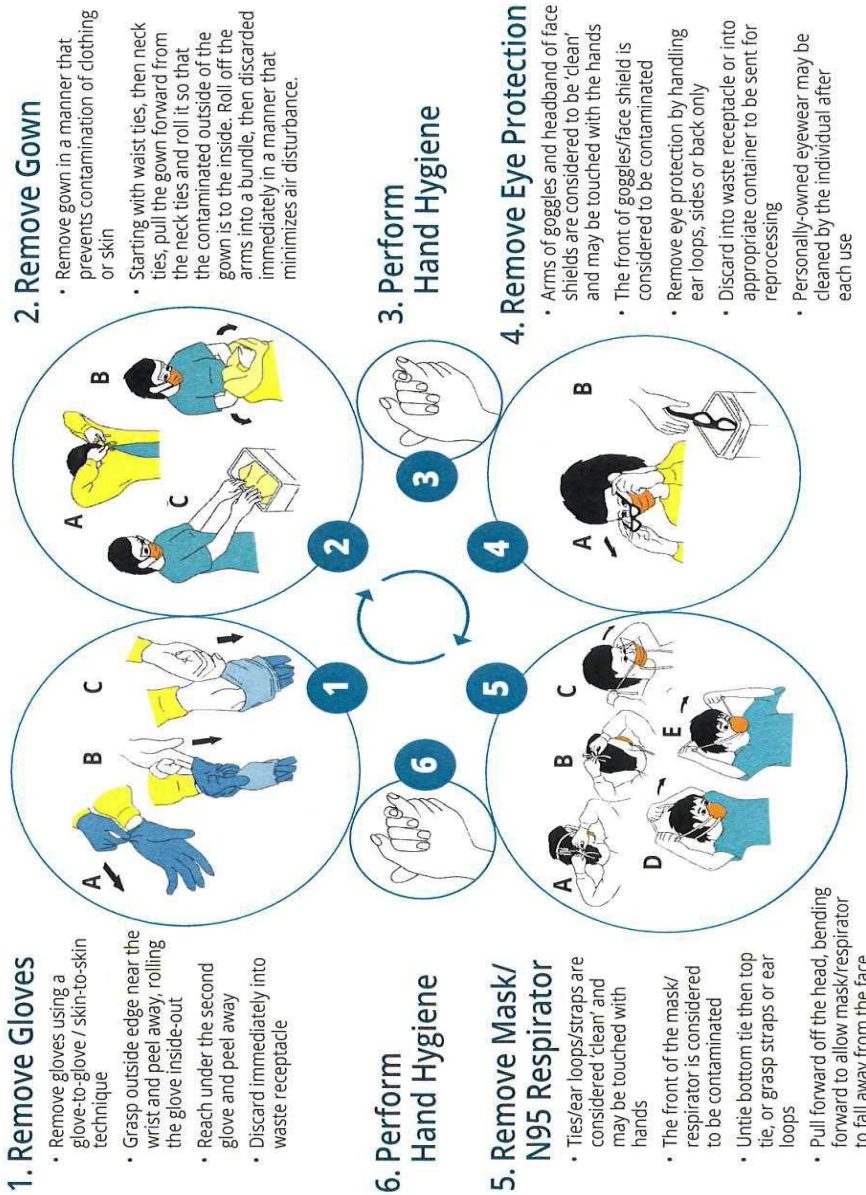
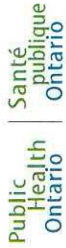
**Recommended Steps:
Putting On Personal Protective Equipment (PPE)**



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Appendix D: Taking Off PPE ^{cvi} – Public Health Ontario

Recommended Steps:
Taking Off Personal Protective Equipment (PPE)



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Appendix E: COVID-19 Screening Tool ^{cvi} (3 pages)

- Anyone who **does not pass screening** should be informed of this result and **should not be permitted to enter the home**. They should be advised to self-isolate, ideally at home, and call their health provider or Telehealth Ontario (1-866-797-0000) to get advice or an assessment, including if they need a COVID-19 test (if eligible). Refer to YES response to specific questions below.
- **Exceptions:** Emergency services / first responders in emergency situations; BRHD residents returning home; and Compassionate/End-of-Life visitors, except those who failed screening due to federal quarantine requirements. EOL visitors who failed screening would be confined to the resident's room with full PPE (incl. surgical mask, shield/eye protection, gown) & IPAC measure restrictions (incl. hand hygiene, physical distance from staff & other residents).

1. In the last **10 days** have you experienced any of these symptoms (new, or worsening, not chronic or related to other known causes of conditions):

Fever and/or chills (temp of 37.8 or higher); cough or barking cough (croup); shortness of breath; Decrease or loss of smell or taste; muscle aches/joint pain; fatigue; sore throat; runny or stuffy/congested nose; headache; nausea, vomiting and/or diarrhea?

Yes ___ / No ___

. Select "No if all of these apply:

- Since your symptoms began, you tested negative for COVID-19 on one PCR or rapid molecular test, or two RATs taken 24-48 hrs. apart; and
- You do not have a fever; and
- Your symptoms were improving for 24 hrs (48 hrs if nausea, vomiting, +/- diarrhea)

2. Have you been told that you should currently be quarantining, isolating, staying at home, or not attending a high-risk setting (e.g., BRHD)? (Could be told by doctor, HCP, PHU, border agent, government authority) Yes ___ / No ___

Note: There are federal requirements for individuals who travelled outside Canada, even if exempt from quarantine. (<https://travel.gc.ca/travel-covid>)

3. In the **last 10 days**, (regardless of whether you are currently self-isolating or not) have you tested positive for COVID_19, including on a RAT or a home-based self-testing kit? If you have since tested negative on a LAB-BASED PCR test, select "No". Yes ___ / No ___

4. In the **last 10 days**, (regardless of whether you are currently self-isolating or not) have you been identified as a "**close contact**" or 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 ___

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Results of Screening Questions:

If the individual answered “**No**” to all applicable questions (1-4), the individual has passed the screening and can **enter the home**.

. All Individuals must wear the **appropriate PPE**, as required; and **self-monitor** for symptoms and report any symptoms immediately should they develop during the visit.

If the individual answered “**YES**” to ANY question from 1 through 4, see detailed instructions below.

- If you answered YES to question 1 or 2: you **must not enter the home**. You should **stay home (self-isolate) until you do not have a fever and your symptoms have been improving for at least 24 hours** (48 hours for nausea, vomiting, and/or diarrhea). If COVID-19 testing is available, **you should get tested, and seek treatment**, if eligible. If you **test positive for COVID-19, you should not enter BRHD for at least 10 days after developing symptoms** (or date of specimen collection, whichever is earlier/applicable) **AND** provided you 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 LTCH 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 highest risk settings.

- **Exceptions**, where an individual should be permitted entry:
 - a **resident**, in which case they should be permitted entry but **isolated on additional precautions and tested for COVID-19**; or
 - a **Compassionate/End-of-Life visitor**, in which case they **must wear a well-fitted medical mask, N95 respirator or KN95 mask for the duration of their visit and maintain physical distance** from other residents and staff.
 - **staff on early return-to-work protocols** to address a critical staffing shortage.
- If you answered **YES to question 3**: you **must not enter the home**. You should **stay home and do not leave** except to get tested, visit a clinical assessment centre, or for a medical emergency. Follow any other guidance or directions that have been provided to you.
- If you answered **YES to question 4**:
 - Visitors should **postpone non-essential visits for 10 days after last exposure** to the individual with symptoms of COVID-19.
 - **Staff and essential caregivers (ECs)**:
 - May enter BRHD, while following the guidance below:
 - **Self-monitor** for symptoms for **10 days** from last exposure to the individual with COVID-19. **Self-isolate immediately if any symptoms develop**.
 - Wear a well-fitted medical mask or fit or non-fit tested **N95 respirator** or KN95 mask for the **duration of their time in the setting, and not remove their mask when in the presence of others, including staff** (i.e., not eating meals/drinking in shared spaces when in the presence of others).

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- Staff/ECs **close contacts with a household** (ongoing) exposure are recommended to **obtain an immediate PCR (or rapid molecular test) and re-test at Day 5 from initial exposure if initial test was negative**. Testing of staff/ECs close contacts with **RAT daily for 10 days** may be recommended as an **alternative**.
 - Staff should speak with **IPAC Practitioner** and follow their workplace guidance for return to work.
-
- If any of the answers to these screening questions change during the day, the individual should inform the nurse in charge of BRHD, go home to self-isolate immediately, and contact their health care provider or Telehealth Ontario (1-866-797-0000) to get medical advice or an assessment, including if they need a COVID-19 test.
 - BRHD will maintain visitor logs of all visits to the home. (Visitor log includes, name and contact information of the visitor, time and date of the visit, and the purpose of the visit (e.g., name of resident visited). These records must be maintained for a period of at least 30 days.
 - Any record created as part of worker screening may only be disclosed as required by law.

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Appendix F: ^{cviii}



COVID-19 Safety Measures: What You Can Expect in BRHD

All residents are invited to: *

- Spend time with visitors and caregivers, who are encouraged to wear a mask when visiting a resident indoors, but it is not required.
- Enjoy the company of visitors, indoors or outdoors, consistent with the BRHD's visitor and/or vaccination policies.
- Participate in group social activities, dining and social gatherings.
- Have meals in the dining room, including meals together with their caregiver(s) and visitors.
- Leave the home for all types of absences, and not have to be actively screened, tested or isolated upon their return to the Home, unless the resident is symptomatic.
- Have care provided inside the Home by staff, students, volunteers and support workers, who are not required to wear a mask, unless otherwise directed.

Note: *Unless otherwise directed by the SMDHU, during outbreaks in the Home or when resident is isolating.

What measures are in place to make BRHD safe?

- Everyone must screen for symptoms of or exposure to COVID-19 and other respiratory infections.
- Residents will be monitored daily for infection.
- Staff, students, support workers and volunteers are required conduct a PCRA prior to each resident interaction and task to determine whether there is a risk to the HCW or others of being exposed to an infectious agent, and determine the appropriate IPAC measures to take. ^{cx}
- Caregivers and general visitors are recommended, but not required, to wear a mask in all areas of the Home. ^{cx}
- Infection prevention and control (IPAC) practices should continue to be followed in communal spaces to promote safety and well-being. ^{cx}

What if BRHD is in Outbreak? *

- Group activities, dining and social gatherings can continue in **non-outbreak areas** of the Home, if residents follow Simcoe Muskoka District Health Unit (SMDHU) measures.
- For **outbreak areas** of BRHD, residents will be cohorted in small groups for all essential activities. Group activities for specific cohorts may continue/resume if operationally feasible.
- Communal dining, non-essential activities and personal care services may be suspended or modified.
- Caregivers and essential visitors can still visit with the appropriate PPE.

Note: *Unless otherwise directed by the SMDHU.

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<p>What happens if I test positive for COVID-19? *</p>	<p>What if I come into contact with someone with COVID-19? *</p>	
<p>Residents with COVID-19 remain under isolation and under Additional Precautions for 10 days.</p> <ul style="list-style-type: none"> • If you are able to mask, you may leave isolation after a minimum of 5 days from the onset of symptoms or positive test AND 24 hours of improving symptoms (48 hours if you have diarrhea or vomiting) and have no fever, provided you wear a mask at all times for 10 days. You cannot join in communal dining during this time. • If you are unable to mask, you must remain in isolation for at least 10 days following symptom onset or positive test, you may be allowed outdoors or in the hallway with supervision to support overall physical and mental well-being. 	<ul style="list-style-type: none"> • You will be monitored for symptoms, but do not need to test or isolate unless you develop symptoms or your roommate has COVID-19. • If your roommate has COVID-19, you will need to isolate for 5 days from when your roommate became symptomatic or tested positive. <ul style="list-style-type: none"> ○ Roommate close contacts should wear a mask (if tolerated) when receiving care and outside their room until day 7 from last exposure. • You are still permitted to see your caregiver and essential visitors, while in isolation. 	

Note: *Unless otherwise directed by the SMDHU.

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Appendix G: Visitors Code of Conduct (ADM-II-23) ~ 2 pages

The **Visitors' Code of Conduct** applies to all visitors to the Bob Rumball Home for the Deaf (BRHD), so that all residents, staff and visitors are treated with **respect** and are not subject to bullying, harassment, intimidation, or abuse.^{cxii} "Abuse includes threats, yelling, hitting, or making sexual or humiliating remarks."^{cxiii}

BRHD recognizes that being a resident, or visiting a loved one in the Home, may be personally difficult. "We acknowledge that loved ones may become emotional and angry when they are visiting and advocating for the resident.

Staff safety is uncompromising and **we have a zero tolerance for abuse, harassment and intimidation of our staff**. Comments and complaints are a positive means of affecting continuous improvement for review of our systems and practices.^{cxiv} We encourage you to direct your comments or concerns to management or the nurse in charge, so it can be resolved peacefully. If you wish to make a complaint, we encourage you to view the "Process for Initiating Complaints" as posted on the bulletin board in the front vestibule area.

Visitor Requirements include, but are not limited to, the following.

- Visitors must **respect** the rights and needs of other residents, their loved ones, staff and volunteers. Show courtesy, politeness and honesty towards others. Show consideration and respect for the dignity and privacy of others.^{cxv cxvi}
- "Visitors must follow the **health and safety rules** required by the Home.
- Visitors must **comply with the Visitor Policy** as posted on the BRHD Website,^{cxvii} and as posted in the Front Lobby. This policy includes significant information on infection prevention and control (IPAC) practices and precautions, as well as other general information, including the signing in and out in the visitor log.
- **Do not** threaten, resist, intimidate, abuse, or intentionally interfere with BRHD staff in their official duties."^{cxviii}
- "**Refrain from** shouting, running, and other disruptive behaviour. Individuals exhibiting any offensive, abusive or threatening language or behaviour, or individuals suspected of being intoxicated or under the influence of drugs, will be asked to leave the Home."^{cxix}
- "Keep noise to a minimum so as not to disturb others."^{cxx}
- Visitors are **not allowed to** photograph or video-tape residents other than their loved one, staff or visitors, without their consent.
- General visitors younger than 14 years of age must be **accompanied by an adult**.
- "Visitors should **wear proper attire**. Shirt and shoes must be worn at all times."^{cxxi}
- "The use of all smoke-related products are prohibited by visitors: including, but not limited to, cigars, e-cigarettes, vaporizers, tobacco and its derivatives and cannabis and its derivatives"^{cxxii} inside BRHD and within nine metres (30 feet) of the entrance or exit of the Home.^{cxxiii}
- "The following items are not permitted by visitors in the Home at any time:
 - Bicycle, tricycles, skateboards, roller/in-line skates
 - Weapons of any kind, and any other item deemed dangerous;
 - Any other item prohibited under Canada's Criminal Code."^{cxxiv}
- "Do not promote, support or glorify hatred towards people based upon race, ethnicity, national origin, religion, gender, gender identity, disability, or sexual orientation (collectively considered

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“protected groups”) nor does it permit items or content that promote organizations or people with such views. Items or displays that contain racial slurs or derogatory language about protected groups are strictly prohibited.” ^{cxxv}

Preventative Measures:

- Staff will:
 - Advise residents and their visitor where expectations may not be met.
 - Ensure that care and services provided to the resident are consistent with their assessed needs and plan of care.

“When Unacceptable Behaviour is Exhibited by a Visitor:

- Staff shall remain calm and advise the visitor that the conduct is unacceptable and request they stop the behaviour.
- If the behaviour persists, staff shall ask the visitor to leave.
- If the visitor refuses to leave, the staff will call the Police to assist the visitor to leave.
- Attendance at the Home by the visitor will not resume until there has been follow-up of the incident.” ^{cxxvi}

Follow Up:

The appropriate BRHD manager will:

- Organize a meeting and speak to the visitor concerned;
- Issue a letter to the visitor regarding the visitors conduct requiring the conduct to cease;
- If the conduct persists, advice will be given in writing that access to BRHD may result in temporary suspension of visiting privileges. ^{cxxvii}

Non-adherence to the Visitor Code of Conduct

- In exercising temporary suspension of visiting privileges, BRHD will take into consideration whether the non-adherence:
 - Can be resolved successfully by explaining and demonstrating how the visitor can adhere to the requirements.
 - Negatively impacts the health and safety of residents, staff and other visitors in the home.
 - Is demonstrated continuously by the visitor over multiple visits.
 - Is by a visitor whose previous visits have been ended by the Home.
- 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 the length of the prohibition;
 - Clearly identify what requirements the visitor must meet prior to resuming visits (e.g., reviewing the home’s visitor policy, and/or the Visitors Code of Conduct, and
 - Be documented by BRHD staff, including any action taken to end the visit or temporarily prohibiting the visitor from returning.

Note: If BRHD has temporarily prohibited a caregiver, the resident/SDM may wish to designate an alternate individual as caregiver to help meet the resident’s care needs.

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Appendix H: Designated Caregiver Registration Form ^{cxxviii} (Page 1 of 2)

Name of Resident: _____

Name of Caregiver: _____

Caregiver's Contact # _____

Caregiver's Email: _____

Name of SDM if different than Caregiver _____

Definition of a Caregiver: "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.** ^{cxxix}

- Caregivers are "essential visitors" and are allowed to visit their loved one in the Home when there is an outbreak in the Home, or area of a home, or when the resident has failed screening, is symptomatic or in isolation. ^{cxxx} Caregivers must follow the infection prevention and control (IPAC) practices when in the Home.
- Caregivers, when entering the Home must agree to sign in (*their name and contact info, the time and date of the visit, and the resident's name they are visiting*). ^{cxxxi} As required, caregivers should screen for communicable infections prior to entry. If infectious symptoms, please do not visit.
- Caregivers agree to testing for a communicable infection, if required by SMDHU or the MLTC.
- BRHD retains the right to set their own vaccination policy, which may change based on the advice of SMDHU or government orders. At this time, BRHD does not mandate visitors, including caregivers to be vaccinated against COVID-19 or Influenza. However, **caregivers are strongly encouraged to stay up to date with recommended doses of all vaccines**, including COVID-19 booster doses when eligible, ^{cxxxii} and annual influenza vaccination, as recommended ^{cxxxiii} by the National Advisory Committee on Immunization (NACI).
Vaccinations and therapeutics (e.g., antiviral medication) substantially reduce the risk of severe outcomes, e.g., from COVID-19 and influenza, for yourself and particularly for the BRHD residents, who live in a high-risk congregate setting.
- BRHD does not require scheduling and will not restrict the **length or frequency of visits** by caregivers. Caregiver(s) may visit a resident who resides in an area of the Home in **outbreak, and/or is symptomatic or isolating**, under additional precautions. In these circumstances the caregiver(s) should confine their indoor visit to the resident's room, and not co-mingle with other residents or staff. Please note SMDHU may impose some visitor restrictions which must be followed. ^{cxxxiv}

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- **A caregiver should not visit any other home for 10 days after visiting:**
 - an individual with a confirmed case of COVID-19, or
 - an individual experiencing COVID-19 symptoms. ^{cxxxv}
- A resident/SDM may change a designation in response to a change in the:
 - Resident’s care needs that are reflected in the resident’s plan of care.
 - Availability of a caregiver, either temporary (e.g., illness) or permanent.

Note: Resident/SDM may not continuously change the caregiver to increase the number of people able to enter the home.

Please check the activities that you as a Caregiver will be performing:

___ supporting feeding, ___ mobility, ___ personal hygiene, ___ cognitive stimulation, ___ communication, ___ meaningful connection (*spiritual, emotional*), ___ relational continuity, ___ assistance in decision-making, ___ other (*If other describe: _____*).

Orientation /Training

By signing this form, the caregiver acknowledges that they:

- Have received the required **caregiver orientation** (*to be attached to this form*)
- Have read and will comply with the current version of **BRHD’s Visitor Policy** (INF-II-115) and will read any future revised versions of the BRHD Visitor Policy, including the recommended steps: putting on personal protective equipment (PPE);^{cxxxvi} and
- Will undergo **additional training and/or re-training** related to their caregiver role at BRHD, including any infection prevention and control (IPAC) requirements while at BRHD (*indoors and outdoors*), that may be required, including but not limited to: physical distancing, respiratory etiquette, hand hygiene, IPAC practices, and proper use of PPE.^{cxxxvii}
- Will ask for clarification and or retraining if unclear on the caregiver requirements.

Public Health Ontario (PHO) Infection Prevention and Control (IPAC) information: ^{cxxxviii}

1. Video available titled “Putting on Full Personal Protective Equipment” found at:
[Putting on Full Personal Protective Equipment | Public Health Ontario](#)
2. Video entitled “Taking off Full Personal Protective Equipment found at:
[Taking off Full Personal Protective Equipment | Public Health Ontario](#)
3. Video entitled “How to hand wash” found at:
[How to Hand Wash | Public Health Ontario](#)
4. Video entitled “How to hand rub” found at:
[How to Hand Rub | Public Health Ontario](#)

Complaint Process Policy ADM-V1-19 (*In the “Bob Rumball Home for the Deaf: Posting of Information in the Home” binder located in the front foyer or a hard copy of policy is available at the screening desk.*)

Date Completed: _____ Signature of Caregiver: _____

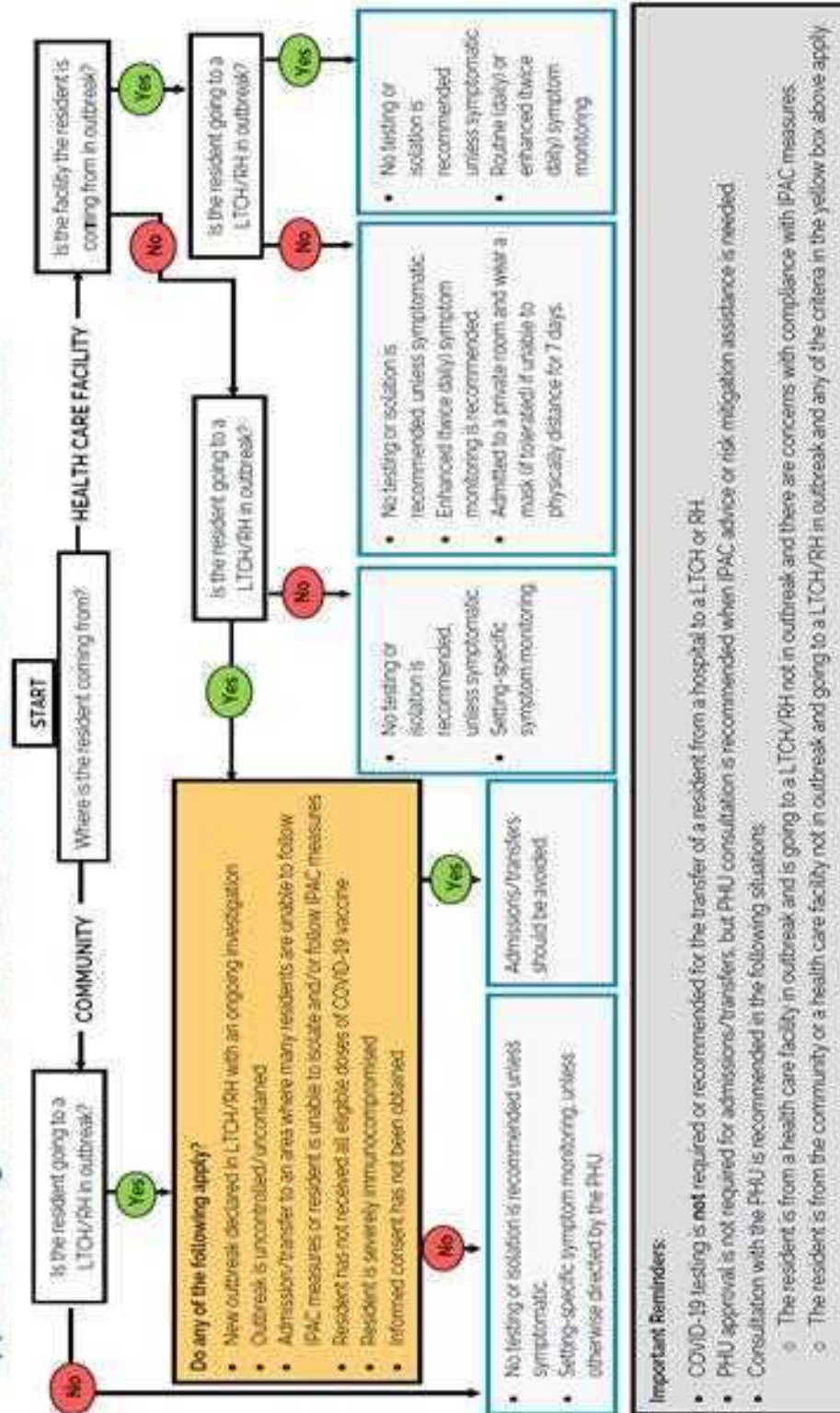
Parent or Legal Guardian of person under 16 years of age to become a caregiver, as applicable:
(Signature): _____ (Print Name) _____

Note: BRHD must retain the completed form as per the retention of records requirements (*i.e., 7 years after the person is no longer a caregiver.*)

Appendix I: Resident Admissions and Transfers ^{cxxxix}

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Appendix E: Algorithm for New Admissions and Transfers for LTCHs and RHs



Important Reminders:

- COVID-19 testing is **not** required or recommended for the transfer of a resident from a hospital to a LTCH or RH.
- PHU approval is not required for admissions/transfers, but PHU consultation is recommended when IPAC advice or risk mitigation assistance is needed.
- Consultation with the PHU is recommended in the following situations:
 - The resident is from a health care facility in outbreak and is going to a LTCH/RH not in outbreak and there are concerns with compliance with IPAC measures.
 - The resident is from the community or a health care facility not in outbreak and going to a LTCH/RH in outbreak and any of the criteria in the yellow box above apply.

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Endnotes

- ⁱ FLTCA. s. 3(1)6.
- ⁱⁱ FLTCA. s. 3(1)11.
- ⁱⁱⁱ FLTCA. s. 3(1)26.
- ^{iv} MLTC. COVID-19 Guidance Document for LTCHs in Ontario. As of Mar. 31/23. pp.17-18.
- ^v MLTC. COVID-19 Guidance Document for LTCHs in Ontario. As of Mar. 31/23. p.18.
- ^{vi} PHO. PIDAC. Routine Practices and Additional Precautions in All Health Care Settings, 3rd edition. Nov. 2012. pp. vii.
- ^{vii} Oxford Dictionary.
- ^{viii} https://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/novel_coronavirus.pdf Sept. 2023.
- ^{ix} https://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/novel_coronavirus.pdf Sept. 2023.
- ^x COVID-19 guidance document for LTCHs in Ontario. As of Mar. 31/23. p.23.
- ^{xi} COVID-19 guidance document for LTCHs in Ontario. As of Mar. 31/23. p.24.
- ^{xii} COVID-19 guidance document for LTCHs in Ontario. As of Mar. 31/23. p.23.
- ^{xiii} Management of Cases and Contacts of COVID-19 in ON Nov. 30/22. v.15.1. s.6. Guidelines for Close Contacts.
- ^{xiv} [class-order-to-service-providers-of-vulnerable-settings-s-22-smdhu-final.pdf \(simcoemuskokahealth.org\)](#) p.1.
- ^{xv} PHO. COVID-19 Laboratory Testing at Public Health Ontario | Public Health Ontario
- ^{xvi} Rapid testing for at-home use | Ontario.ca
- ^{xvii} PHO. PIDAC. Routine Practices & Additional Precautions in All Health Care Settings, 3rd edition. Nov.2012. pp. xi and 5.
- ^{xviii} MOH COVID-19 Vaccine Guidance. V.9. Oct.6/23. pp. 3-7.
https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/vaccine/COVID-19_vaccine_administration.pdf
- ^{xix} Minister's Directive: COVID-19 response measures for LTCHs. Dec. 23/22. Visitors.
- ^{xx} MLTC. COVID-19 Guidance Document for LTCHs in Ontario. Mar. 4/24. p.8.
- ^{xxi} MLTC. COVID-19 Guidance Document for LTCHs in Ontario. As of Mar. 31/23. p.21.
- ^{xxii} Ltchomes.net June 26, 2023. Revised Nov. 7/23 based on COVID-19 Guidance Document for LTCHs.
- ^{xxiii} Ltchomes.net June 26, 2023.
- ^{xxiv} O. Reg. 246/22. s.267.(4).
- ^{xxv} Minister's Directive: COVID-19 response measures for LTCHs. Aug 30/22. Definitions.
- ^{xxvi} COVID-19 guidance document for LTCHs in Ontario. As of Mar. 31/23. p.19.
- ^{xxvii} O. Reg. 246/22. s.267. (1)(a)(d).
- ^{xxviii} O. Reg. 246/22. s.4.
- ^{xxix} O. Reg. 246/22. s.267(1)(b).
- ^{xxx} O. Reg. 246/22. s.267(1)(b).
- ^{xxxi} MLTC. COVID-19 Guidance Document for LTCHs in Ontario. As of Mar. 31/23. p.19.
- ^{xxxii} MLTC. COVID-19 Guidance Document for LTCHs in Ontario. As of Mar. 31/23. pp.19-20.
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- ^{xxxviii} MOH. https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/LTCH_RH_guidance_PHU.pdf. P.24.
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- ^{xl} MLTC. COVID-19 Guidance Document for LTCHs in Ontario. As of Jun. 28/23. p.3.
- ^{xli} MLTC. COVID-19 Guidance Document for LTCHs in Ontario. As of June 26/23. P14.
- ^{xlii} Can COVID-19 vaccines protect against the Omicron variant? (medicalnewstoday.com)
- ^{xliiii} Recommended immunization schedules: Canadian Immunization Guide - Canada.ca
- ^{xliv} MOH COVID-19 Vaccine Guidance. V.9. Oct.6/23.
- ^{xlv} How to book a COVID-19 vaccine appointment (ontario.ca)
- ^{xlvi} Handwashing - Clean Hands Save Lives | CDC
- ^{xlvii} MLTC. COVID-19 Guidance Document for LTCHs in Ontario. As of June 26/23. p.9.

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- l MLTC. COVID-19 Guidance Document for LTCHs in Ontario. Mar. 4/24. p.7.
- li MLTC. COVID-19 Guidance Document for LTCHs in Ontario. Mar. 4/24. p.8.
- lii MLTC. COVID-19 Guidance Document for LTCHs in Ontario. Mar. 4/24. p.8.
- liii MLTC. COVID-19 Guidance Document for LTCHs in Ontario. Mar. 4/24. p.10.
- liiv COVID-19 guidance document for long-term care homes in Ontario. Nov.2, 2023. Masking. p.8.
- lv <https://www.ontario.ca/laws/statute/05a11>.
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- lviii [O. Reg. 246/22: GENERAL \(ontario.ca\)](#)
- lix IPAC Standard for Long-Term Care Homes. Revised. September 2023.
https://ltchomes.net/LTCHPORTAL/Content/Snippets/2023-10-06-01-EN-IPAC_Standard_Fall_2023_Revisions.pdf.
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- lxi MLTC. COVID-19 Guidance Document for LTCHs in Ontario. Jun. 26, 2023. p.11.
- lxii MLTC. COVID-19 Guidance Document for LTCHs in Ontario. Jun. 26, 2023. p.11.
- lxiii MLTC. COVID-19 Guidance Document for LTCHs in Ontario. Jun. 26, 2023. p.12.
- lxiv MLTC. COVID-19 Guidance Document for LTCHs in Ontario. Jun. 26, 2023. p.11.
- lxv O. Reg. 267(2).
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- lxxii COVID-19 guidance document for long-term care homes in Ontario. Nov.2, 2023. Communal Dining. p.9.
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- ci Ltchomes.net. COVID-19 Safety Measures: What You Can Expect in Your Long-Term Care Home. June 28, 2023. Revised Nov. 7/23 based on COVID-19 Guidance Document for LTCHs.
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- cix COVID-19 guidance document for long-term care homes in Ontario. Mar. 4/24. p. 7.
- cx COVID-19 guidance document for long-term care homes in Ontario. Mar. 4/24. p. 8.
- cxi COVID-19 guidance document for long-term care homes in Ontario. Mar. 4/24. Group Activities. p.10.
- cxii ACSAG Visitors Code of Conduct-Fact Sheet. <https://agedcare.royalcommission.gov.au/system/files/2020-06/JAH.0001.0005.4639.pdf>.
- cxiii Public Services Health and Safety Association. <https://workplace-violence.ca/wp-content/uploads/2021/07/Code-of-Conduct-for-Care-Recipients-Families-and-Visitors.pdf>
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cxxxiv [Recommended immunization schedules: Canadian Immunization Guide - Canada.ca](https://www2.gov.bc.ca/gov2/health/immunization/immunization_schedules/canadian_immunization_guide/canadian_immunization_guide.html)

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cxxxvi MLTC. COVID-19 Guidance Document for LTCHs in Ontario. As of Mar. 31/23. pp. 19-20.

cxxxvii [Recommended Steps: Putting On And Taking Off Personal Protective Equipment \(PPE\) \(publichealthontario.ca\)](https://www.healthontario.ca/document/recommended-steps-putting-on-and-taking-off-personal-protective-equipment-ppe)

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Appendix E- Algorithm for Admissions and transfers for Long-Term Care Homes and Retirement Homes.