



TITLE: Visitor Policy		POLICY #:	ADM 02-019
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MANUAL	General Administration	APPROV. AUTH:	Administrator
ORIGINAL ISSUE:	November 2020	SCOPE:	Entire home
PAST REVISIONS:	April 2022, Nov 2022, Jan & April 2023, 2024,2026		
CURRENT REVISION:	Sept 2026		

BACKGROUND

As per the Fixing Long Term Care Act (FLTCA) 2021 and the Resident Bill of Rights,

- ✓ Every resident has the right to communicate in confidence, receive visitors of their choice and consult in private with any person without interference.
- ✓ Every resident has the right to have any friend, family member, caregiver, or other person of importance to the resident attend any meeting with the licensee or the staff of the home.

Dundas Manor recognizes the importance of visitors/caregivers in supporting a resident's physical, mental, social and emotional well-being and quality of life; Every resident has a right to ongoing and safe support from their visitors/caregivers to support their physical, mental, social, and emotional wellbeing and their quality of life and to assistance in contacting a caregiver or other person to support their needs.

VISITOR/CAREGIVER

Any person visiting a resident or the home, for social purposes.

RULES FOR ALL VISITORS/CAREGIVERS

Rules for all visitors and caregivers will vary based on local public health unit region in which the home is located. Additionally, the local public health unit may provide direction and/or restrictions on visitors to the home, depending on the specific situation. (For example; pandemic, community transmission of a known infectious disease, outbreak)

VISITOR ACCESS, CAREGIVER DESIGNATION AND RECORDS

Non-outbreak situations: Visitors may access the Home in accordance with the resident's choices, the Residents' Bill of Rights and this policy. Visitors will enter through the designated entrance, provide the information required for the visitor log, complete passive self-screening, and follow hand hygiene, respiratory etiquette, masking and any other infection prevention and control measures communicated by the Home. Anyone

who is ill or has symptoms of an infectious illness should postpone the visit until the applicable return-to-visit requirements are met. The Home will provide reasonable assistance to enable residents to receive visitors and to contact a caregiver or other person who supports their needs.

Outbreaks, epidemics, pandemics and other emergencies: During an outbreak of a communicable disease or a disease of public health significance, an epidemic, a pandemic or another emergency, the Home will communicate the applicable visiting process, affected areas, precautions and any temporary restrictions. Essential visitors will continue to have access to the Home, subject to applicable laws and any applicable directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or the local medical officer of health. General visitor access may be modified or temporarily limited only as permitted by applicable law and based on the circumstances and risk assessment. Visitors must follow posted instructions, stay within designated areas when directed, perform hand hygiene, and use required personal protective equipment and source-control measures. Where feasible, visits will be arranged to reduce exposure to other residents and unaffected areas.

Visitor logs: The Home will maintain visitor logs for a minimum of 30 days. At a minimum, each log entry will include the visitor's name and some contact information, the date and time of the visit, and the name of the resident visited. Visitor records will be handled in accordance with applicable privacy and records-management requirements.

All visitors/caregivers to the home are required to follow public health measures- which includes **PASSIVE SELF-SCREENING, HAND HYGIENE, RESPIRATORY ETIQUETTE, DONNING AND DOFFING when required. MASKING will be available FOR SOURCE CONTROL this is highly recommended, but not required** for the duration of their visit in the home. Visitors/caregivers may be asked to apply a mask if a resident in a shared room is uncomfortable with others removing their mask. If the home directs mandatory masking, this will be posted at front door and communicated to families.

All visitors/caregivers are to follow the homes bullying and harassment policies related to the treatment of residents, staff, volunteers, students, and other contracted service providers in the home.

All visitors/caregivers will be provided education either verbally or in the form of written materials if requested or view attached Appendix. Some of this education can be viewed on the Dundas Manor website in the infection control educational resources. Proper use of Personal Protective Equipment (Masking application and removal, Donning and Doffing), Hand hygiene with the 4 moments of hand hygiene, respiratory etiquette, monitoring of sign and symptoms are included as an **APPENDIX FOR EDUCATION**.

IMPORTANT: We ask that visitors/caregivers do NOT visit Dundas Manor if they are ill in any way or would otherwise fail screening or have been recently exposed to an illness. Please defer your visit until a time when you are free of infection to prevent infection in our vulnerable residents and to prevent a possible outbreak. All persons should isolate for at least 5 days after date of specimen collection or symptom onset (whichever is earlier) and until improving for 24hrs (or 48hrs for gastrointestinal symptoms) and no fever present.

ENDING A VISIT To ensure a safe and secure home under the act and its regulations the Home has the discretion to end a visit by any visitor/caregiver who repeatedly fails to adhere to the home's policies to protect our residents. This includes visitors/caregivers who refuse to wear a mask indoors when required.

TEMPORARILY PROHIBITING A VISITOR

The Home has the discretion to temporarily prohibit a visitor in response to repeated and flagrant non-adherence with the home's policies. In exercising this discretion, the home will consider whether the non-adherence:

- ✓ Can be resolved successfully by explaining and demonstrating how the visitor can adhere to the requirements.
- ✓ Is with requirements that align with instruction from public health.
- ✓ 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/caregiver should:

- ✓ Be made only after all other reasonable efforts to maintain safety during visits have been exhausted.
- ✓ Stipulate a reasonable length of the prohibition.
- ✓ Clearly identify what requirements the visitor should meet before visits may be resumed (e.g., reviewing the home's visitor policy, reviewing specific Public Health Ontario resources, etc.)

The Home will ensure that the current version of this visitor policy is provided to the Residents' Council and the Family Council, if any. It will also be included in resident information packages, posted in the Home and posted on the Home's website.

REFERENCES

1. Ministry of Health COVID- 19 Guidance: Long Term Care Homes, in Ontario
2. *Fixing Long-Term Care Act, 2021* and Ontario Regulation 246/22, section 267, as amended by Ontario Regulation 178/24.
3. Infection Control Standard for Long-term Care Homes.
4. Ontario Ministry of Health. *Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings*, effective February 2025.



Appendix A

IPAC EDUCATION FOR VISITORS

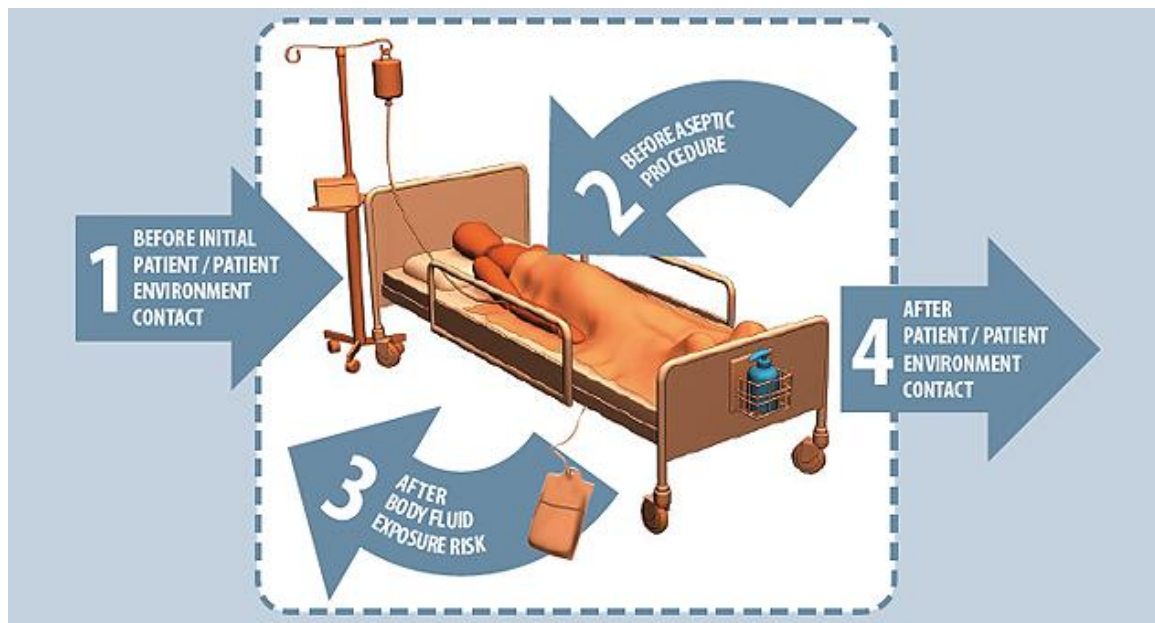
Hand Hygiene

Hand hygiene is the responsibility of everyone. This is the single most effective measure that can be undertaken to decrease the transmission of infections when adhered to. There are two effective ways an individual can clean their hands.

1. Use of soap and water when hands are visibly soiled.
 2. Use of alcohol base hand rub (ABHR) if not visible dirt is present on your hands.
- ABHR is easily accessible throughout the home and is the preferred method of hand wash if your hands are not visibly soiled. Visitors are encouraged to use it.

Hand hygiene video links from Public Health Ontario:

<https://youtu.be/o9hjmges72I> <https://youtu.be/sDUJ4CAYhpA>



Respiratory Etiquette

Respiratory etiquette refers to personal practices that everyone should follow to help

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 or visit publichealthontario.ca/JCYH

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How to handwash

Lather hands for 15 seconds

- 1 Wet hands with warm water.
- 2 Apply soap.
- 3 Lather soap and rub hands palm to palm.
- 4 Rub in between and around fingers.

Lather hands for 15 seconds

- 5 Rub back of each hand with palm of other hand.
- 6 Rub fingertips of each hand in opposite palm.
- 7 Rub each thumb clasped in opposite hand.
- 8 Rinse thoroughly under running water.

- 9 Pat hands dry with paper towel.
- 10 Turn off water using paper towel.
- 11 Your hands are now safe.

JUST CLEAN YOUR HANDS

For more information, please contact handhygiene@oahpp.ca or visit publichealthontario.ca/JCYH

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prevent the spread of infections that cause respiratory illnesses.

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

2. If you do not have a tissue, cough or sneeze into your upper sleeve or elbow, not your hands. Turning your head away from others.
3. Wash your hands after coughing or sneezing.
4. Not visiting when ill with an acute respiratory infection.

Wear a mask to protect others.

1. When used properly this will help reduce the spread of infections from respiratory droplets.



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 or visit 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



Outbreak Management and Additional Precautions

If a resident requires additional precautions or in the event of an outbreak, follow the instructions found on the signs that are posted at the resident's room, and entrance. More information can be found at Public Health Ontario, Routine Practice and Additional Precautions in all Health care settings (PIDAC), World Health Organization, Dundas Manor website.

Thank you for doing your part.