



TITLE: Visitor Policy	POLICY #: ADM 02-019
	PAGE: 1 of 3
MANUAL: General Administration	APPROV. AUTH: Administrator
ORIGINAL ISSUE: November 2020	SCOPE: Entire home
PAST REVISIONS: April 2022, Nov 2022, Jan & April 2023	
CURRENT REVISION: March 2024	

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)

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. The home continues to believe that masks should always worn to protect all residents & staff. For exceptions to the masking requirements see Ministry of Long-term Care guidance.

Outdoor visits continue to no longer require the use of a mask by visitors/caregivers; however, masks will be readily available by the home should you wish to wear one. When in close proximity to your resident, mask use is still recommended by the home.

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 5 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.

If you've had a potential exposure to COVID -19 and have screened positive should not enter the home for a total of 10 days after date of specimen collection or from symptom onset (whichever is earlier) and contact Public Health for guidance.

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 maintain visitor logs for a minimum of 30 days.

The current version of the homes' visitor policy will be provided to the Residents' Council and Family Council, if any, included in resident information packages, posted in the home, and communicated to residents, and also posted on the homes' website

REFERENCES

1. Ministry of Health COVID- 19 Guidance: Long Term Care Homes, in Ontario
2. Fixing Long Term Care Act 2021, *Law document english view*. Ontario.ca. November 30, 2022, from <https://www.ontario.ca/laws/regulation/r22246>
3. Infection Control Standard for Long-term Care Homes.

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/o9hjmques72I> <https://youtu.be/sDUJ4CAYhpA>

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



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



Clean Hands Save Lives! Are Yours Clean?

5 Moments for Hand Hygiene

1. Before Patient Contact
WHEN? Clean your hands before touching a patient.
EXAMPLES: Examinations, helping a patient to move, checking name bands.

2. Before an Aseptic Task
WHEN? Clean hands before and after an aseptic task.
EXAMPLES: Oral care, secretion aspiration, wound care, catheter placement, patient feeding, medication administration.

3. After Body Fluid Exposure Risk
WHEN? Clean your hands immediately after an exposure to a bodily fluid and after removing gloves.
EXAMPLES: After contact with any bodily fluids to include urine, saliva, sputum, feces, blood, etc...

4. After Patient Contact
WHEN? Clean your hands after any patient contact.
EXAMPLES: After activities of daily living, handling of a patient's personal effects, after positioning a patient for an exam or procedure.

5. After Contact with Patient Surroundings
WHEN? Clean your hands after you have had contact with a surface that a patient may have touched.
EXAMPLES: After cleaning up the patient's bedside and over bed table, making up the bed, moving wheelchairs or walkers.

Content developed by the National Center for Infection Control, Progression of the National Commission on Nursing (2012). World Health Organization. "Hand Hygiene for Patient Safety." All registered trademarks have been used to credit the information contained in this graphic. Where necessary, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the proper citation and use of the material lies with the reader. To request additional information, please contact the program office at 1-800-458-5231.

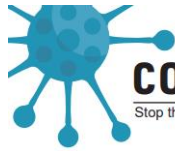
Respiratory Etiquette

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



HOW TO WEAR A MEDICAL MASK SAFELY



who.int/epi-win

Do's →



Wash your hands before touching the mask



Inspect the mask for tears or holes



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



Ensure the colored-side faces outwards



Place the metal piece or stiff edge over your nose



Cover your mouth, nose, and chin



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



Avoid touching the mask



Remove the mask from behind the ears or head



Keep the mask away from you and surfaces while removing it



Discard the mask immediately after use preferably into a closed bin



Wash your hands after discarding the mask

Outbreak Management and Additional Precautions

In the event that a resident requires additional precautions or in the event of an outbreak, follow the instructions found on the signs that are posted at the residents room, and entrance.

REMOVING PERSONAL PROTECTIVE EQUIPMENT		
1	REMOVE GLOVES	
2	REMOVE GOWN	
3	PERFORM HAND HYGIENE	
4	REMOVE EYE PROTECTION	
5	REMOVE MASK OR N95 RESPIRATOR	
6	PERFORM HAND HYGIENE	

PUTTING ON PERSONAL PROTECTIVE EQUIPMENT		
1	PERFORM HAND HYGIENE	
2	PUT ON GOWN	
3	PUT ON MASK OR N95 RESPIRATOR	
4	PUT ON EYE PROTECTION	
5	PUT ON GLOVES	

Public Health Ontario | Santé publique Ontario

Ontario  www.publichealthontario.ca

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.