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| Section: INFECTION PREVENTION AND CONTROL | Page No.: 1 of 12 |
| Subject: Visitors | Approved By: Manager, IPAC |
| Supersede date: April 1, 2023 | Approved Date: July 24, 2025 |

STANDARD:

Visitors are welcome in the Home. The visitor policy respects the Residents' Bill of Rights and ensures that essential visitors, including caregivers, have access to the Home even during an outbreak or a pandemic. However, during an outbreak or pandemic, the Home must follow all imposed applicable directives, orders, guidance, advice or recommendations set out by the Chief Medical Officer or Health or the medical officer of health appointed under the Health Protection and Promotion Act and applicable laws and direction from our local Public health Unit

There are processes to ensure safety, emotional well-being, equitable access, and flexibility during Indoor Visits throughout an outbreak and pandemic. The Home is responsible for supporting residents in receiving visitors while mitigating the risk of exposure to COVID-19 or any other contagious illness.

The Home realizes the role that families, friends and visitors play in providing caregiving and emotional support that adds to the quality of life of our residents. The indoor visits are guided by the outlined principles from the Ministry of Long-Term Care, which are as follows:

Safety: Any approach to visiting an LTC home must consider, balance, and meet the health and safety needs of residents, staff, and visitors to mitigate risks.

Emotional Well-being: Welcoming visitors is intended to support residents' mental and emotional well-being by reducing any potential negative impacts of social isolation.

Equitable Access: All residents must be given equitable access to receive visitors, consistent with the resident preferences and within reasonable restrictions that safeguard residents.

Flexibility: The physical/infrastructure characteristics of the home, its workforce/human resources availability, whether the home is in an outbreak, and the status of the home with respect to personal protective equipment (PPE) are all variables to consider when setting home-specific policies.

Equality: All residents have the right to choose their visitors. In addition, residents and/or their substitute decision-makers have the right to designate caregivers.



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Shepherd Village encourages visitors to consider their health and susceptibility to the virus in determining whether visiting the Home is appropriate.

DEFINITIONS:

Types of Visitors:

1. Essential Visitors

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

There are four types of essential visitors:

- **People visiting very ill or palliative residents** who are receiving end-of-life care for compassionate reasons, hospice services, etc.
- **Government inspectors with a statutory right of entry.** Government inspectors who have a statutory right to enter long-term care homes to carry out their duties must be granted access to a home. Examples of government inspectors include inspectors under the Fixing of Long-Term Care Act, 2021 (FLTC), the Health Protection and Promotion Act, the Electricity Act, 1998, the Technical Standards and Safety Act, 2000, and the Occupational Health and Safety Act.
- **Support workers:** Support workers are persons who visit the home to provide support to the critical operations of the home or to provide essential services to residents. Essential services provided by support workers include, but are not limited to:
 - o assessment, diagnostic, intervention/rehabilitation, and counselling services for residents by regulated health professionals such as physicians and nurse practitioners
 - o Assistive Devices Program vendors- for example, home oxygen therapy vendors
 - o moving a resident in or out of a home
 - o social work services
 - o legal services
 - o post-mortem services o emergency services (for example, such as those provided by first responders)
 - o maintenance services such as those required to ensure the structural integrity of



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the home and the functionality of the home's HVAC mechanical, electrical, and plumbing systems, and services related to exterior grounds and winter property maintenance.

- o food/nutrition and water/drink delivery
- o Canada Post mail services and other courier services
- o election officials/workers

Caregivers: A caregiver is a type of essential visitor designated by the resident or the resident's substitute decision-maker with authority to give that designation, which provides one or more forms of support or assistance, including direct physical support or offers social, spiritual, or emotional support, whether paid or unpaid. This can include family members, friends, or a person of importance to the resident.

Examples of direct care provided by caregivers include but are not limited to the following:

- o supporting activities of daily living such as bathing, dressing, and eating assistance
- o providing cognitive stimulation
- o fostering successful communication
- o providing meaningful connection and emotional support ▪ Offering relational continuity assistance in decision-making

Examples of caregivers include:

- o friends and family members who provide a meaningful connection.
- o a privately hired caregiver.
- o paid or unpaid companions
- o translator

Note: The Home is responsible for documenting and keeping a written record of

- o the designation of a caregiver; and
- o the approval from a parent or legal guardian to permit persons under 16 to be designated as a caregiver.

General Visitor to provide nonessential services related to the home's operations or a particular resident or group of residents. General visitors include those persons visiting for social reasons and visitors providing non-essential services such as personal care services, entertainment, or



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individuals touring the home.

All the above will be referred to as visitors.

Note: The Home's staff, volunteers, and placement students are not considered visitors as their access to the Home is determined by the Director of Client Services and/ or Director of Care.

PROCEDURE:

1. Access to Homes and Outbreak Areas:

All visitors (except for children under the age of 2) to the Home are required to follow public health measures (i.e., passive/active screening and electronic sign-in, hand hygiene, masking for source control) for the duration of their visit in the Home. During an outbreak, and/or suspected or confirmed case of COVID-19, the local Public Health Unit will provide direction on visitors to the Home, depending on the specific situation

- **Shepherd Lodge Strongly recommends that ALL visitors have up-to-date COVID-19 vaccination and follow public health measures (i.e. screening and hand hygiene)** for the duration of their visit to the Home.
- Due to room capacity number of visitors may be restricted.
- Visitors are welcome at the Homes **at any time**, provided their presence does not interfere with residents' rest or safety.
- To support active screening, visiting hours in the Outbreak area are 10:00 AM to 6:00 PM
- During an outbreak or suspected or confirmed case of COVID-19, the local Public Health Unit will direct visitors to the Home, depending on the specific situation.

1.1. Essential Visitors:

Visits for essential visitors are permitted as follows, subject to direction from the local Public Health Unit:

- Any number of support workers may visit the Home
- The Home will allow essential caregivers as follows:
 - a) If the resident is self-isolating or symptomatic, a maximum of four (4) caregivers may be designated to visit, but a maximum of two (2) caregivers per resident may visit at a time



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A Caregiver **may not** visit any other resident or Home for 14 days after visiting another

- Resident who is self-isolating or symptomatic; and/or
- The Home is an outbreak

1.2 General Visitors:

There is no maximum of general visitors in place however, the number of visitors can not interfere with the space of another resident.

No general visitors are permitted to visit in any of the following situations:

- The Home is located in a public health unit region that is in a Lockdown level; and
- Public Health and/or the Ministry of Health restricts general visitors.

2. Screening

All staff, students, volunteers, support workers, caregivers, and visitors must undergo passive screening for COVID-19 before entry.

Passive screening means that those entering the home must review screening questions posted on the home's website and entrance (for example, signage at entrances as a visual reminder not to enter if symptomatic) and there will not be screening verification except on outbreak home areas. Please refer to the Screening Policy.

Visitors:

Before visiting any resident for the first time, the visitor must read the Home's visitor policy on Shepherd Village website and handbook at the front sign -in desk.

The website also provides training on safe direct care, including donning and doffing required PPE, as well as hand hygiene. Public Health Ontario resources that can be used to facilitate training.

- Guidance document entitled Recommended Steps: Putting on Personal Protective Equipment (PPE);
- Video entitled Putting on Full PPE
- Video entitled Taking off Full PPE; and
- Video entitled How to Hand Wash.

The visitors by signing the **visiting Logbook** attest that they have read/re-read the Home's visitor policy and attest to entering the home symptom free.



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The caregiver must verbally attest to the Home that they have read/re-read the Home's visitor policy monthly.

2. Personal Protective Equipment (PPE)

The Home will provide essential visitors with surgical/procedure masks, gloves, gowns, and eye protection (i.e., face shields or goggles) as needed.

Gowns, gloves and eye protection must be worn when the resident is isolating and based on Point of Care Risk Assessment (PCRA)

General Visitors:

The Home will provide general visitors with surgical/procedure masks. The surgical mask may be removed when the visitor is with the resident on a one-on-one basis, but must be worn in all other areas and circumstances during an outbreak area. The Home will use its discretion in requiring visitors to always remain masked when in the Home, based on risk and a high level of spread of respiratory viruses in the community.

Note: Individuals who are unable to wear a mask due to a medical condition must:

- Provide a medical exemption note to the Home
- If able, wear a mask to go from the entrance of the Home to the resident's room or approved visiting area. Once in the resident room or approved visiting area, the individual may remove and discard the mask, but will apply a new mask before exiting the area
- Both resident and visitor will always wear a face shield during the visit
- The individual will undergo a rapid antigen test on each visit if applicable and available
- If tolerated, the resident being visited should always wear a mask
- Physical distancing of 2 meters must always be maintained
- The Home may also consult with their local Public Health unit for further guidance and directions

Furthermore, individuals who are unable to put on or remove their masks without assistance from another person, will receive the required assistance from a staff member who is trained in proper donning and doffing procedures.



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Other exemptions to the masking requirements are as follows:

- Any individual who is being accommodated in accordance with the Accessibility for Ontarians with Disabilities Act and/or
- Any individual who is being reasonably accommodated in accordance with the Human Rights Code.

3. Physical Contact

Physical Touch (for example hugging, holding hands) between residents, caregivers and general visitors, provided appropriate IPAC control measures like universal masking, and hand hygiene are in place, is permitted.

The Home will provide opportunities for caregivers to be with their loved ones outside of the resident's room including but not limited to outdoors and walks inside the Home.

During an active outbreak, these opportunities for physical contact and walking outside of the resident's room will depend on Public Health guidelines.

4. Responding to all Types of Visitor Non-adherence

The Home fully recognizes how critical visits are to the resident's care needs and emotional well-being, and therefore, the Home will ensure to support all visitors in understanding the importance of adhering to the home's visitor policy. Every non-adherence to the requirements will be reviewed and dealt with based on the severity of the non-adherence.

4.1 Ending a Visit

Each time a non-adherence occurs, reminders and training of the requirements will be provided to the visitor. The Home will end a visit if the visitor repeatedly fails to adhere to the Home's policy, provided:

- That the visitor received explanations of all applicable requirements
- The visitor was equipped with all the resources to adhere to the requirements (i.e., there is sufficient space to distance physically, PPE supplied and demonstrated how to don and doff correctly; and
- That the visitor has been given sufficient time to adhere to the requirements.



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- **Visitors visiting a Resident Home Area (RHA) during an Outbreak will be given on the spot IPAC training (Masking, Donning and Doffing of PPE, Hand Hygiene) and will be actively screened for symptoms, including temperature checks.**
The screening and training will be held in front of the RHA elevator or nursing stations.

The Director of Care or delegate will document any termination of visits due to non-adherence to the resident's electronic health record.

4.2 Temporarily Prohibiting a Visitor

The Home will temporarily prohibit a visitor in response to repeated and serious non-adherence with the Home's visitor policy.

Before prohibiting a visitor, the Home will consider the non-adherence.

- Can be resolved successfully by explaining and demonstrating how the visitor can adhere to the requirements.
- Whether the visitor has been given sufficient time and information to comply with the Home's visitor policy
- The nature, severity, and frequency of non-compliance (continuously non-adhering over multiple visits)
- The potential impact of discontinuing visits on the resident's clinical and emotional well-being
- Is within the legislative requirements.
- Negatively impacts the health and safety of residents, staff, and other visitors in the Home.
- Is by a visitor whose previous visits have ended at the Home.

Any decision to temporarily prohibit a visitor should:

- Be made only after all other reasonable efforts to maintain safety during visits have been exhausted.
- Stipulate a reasonable length of the prohibition depending on the severity.
- Be clearly communicate to the visitor what requirements will need to be met before visits may be resumed (i.e. reviewing the visitor policy, Public Health



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- Guidelines, etc.); and
- Be documented by the Director of Care or delegate.
- Residents' and Family Council should be consulted on procedures for addressing non-adherence by visitors.

Where the Home has temporarily prohibited a caregiver, the resident and/or their substitute decision-maker may designate an alternate individual as a caregiver to help meet the resident's care needs.

5. Home Requirements for Visits

The following baseline requirements must be in place before visits can be accepted for visits:

- a) The Home must be in a public health unit region that is not in a lockdown order and the Public Health Unit has **NOT** closed the Home to visitors during an outbreak.
- b) The procedures for the resumption of safe indoor visits for **General Visitors** will be communicated well with residents, families, visitors, and staff, including the Infection Prevention and Control Manager and the Health and Safety Committee. The educational information that needs to be shared are as follows:
 - Respiratory etiquette
 - Donning and doffing and proper use of masks and any other Personal Protective Equipment (PPE)
 - Proper hand hygiene and any other applicable IPAC practices
 - Approach to dealing with in-adherence to home policies and procedures, including the discontinuation of visits.
 - Videos are available on the Shepherd Village Website
- c) The Home always follows the highest Infection Prevention and Control (IPAC) standards prior to, during and after visits.
- d) All visitors must sign the logbook prior to proceeding to the home areas.
- e) The Home is providing meaningful and equitable access to visits for all residents; and



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considers the staffing and space capacity available to the Home to maintain the safety of residents, staff, and visitors.

- f) The Home will have the discretion in scheduling and is considering the directives in place at the time.
- g) The Home has created and will maintain a list of visitors. The list will be available for relevant staff members to access as needed.

6. Visitor Requirements

Prior to each visitor, the visitor must:

- a) On each visit, undergo passive screening using appropriate signage and sign in at the front reception.
- b) Comply with the Home's IPAC protocols, including proper use of surgical/procedural masks and hand sanitizer at the beginning and end of the visit.
- c) The Home will provide surgical/procedural masks to visitors and residents (as needed).
- d) The Home strongly recommends Only visiting the resident the visitor (s) intending to visit.
- e) Visitors must see the Unit Nurse before arrival to ensure the loved one is not on Isolation Precautions. You may be required to wear Personal Protective Equipment (PPE). Respect that visits may be canceled in the event when a home or area of a home is in an outbreak, visiting an isolating resident, and when the local public health unit so directs.
- f) Unreasonable non-adherence to these requirements and rules may be the basis for discontinuation of visits.
- g) There is no time limit to a visit by a family or friend.
- h) Families/friends will undergo passive/active screening through an electronic sign in system prior to proceeding to the resident home areas.



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- i) If not visiting in the resident's room, the indoor visiting area will be cleaned and disinfected between each visit. Visitors will be provided with high-level disinfectant wipes (contact time 1 minute)/or equivalent to clean surfaces and objects such as chair arms, seats, tabletops/legs upon conclusion of the visit; both resident and visitor areas.
- j) As long as Public Health did not close the Home to general visitors during an outbreak, residents who are in isolation and/or are symptomatic can receive visitors. Residents at end of life are always permitted to have visitors.
- k) The Home shall maintain a visitor log for a minimum of 30 days, which includes at a minimum:
 - The name and contact information of the visitor
 - The time and date of the visit; and
 - The name of the resident visited.

OUTCOME:

1. Indoor visits will occur in a safe and equitable manner.
2. Visitors will remain to have access to the Home unless advised by PHU.
3. The visitation approach considers balance and meets the Health and Safety, and emotional needs of residents, staff, and visitors.
4. The visitor policy is well communicated and is provided to the Resident's Council and Family Council and is posted in the Home and on the Home's website and included in the resident information package upon admission.

ADDITIONAL REFERENCES:

1. Forms Manual: COVID - Essential Caregiver Request Form
2. Forms Manual: COVID - Family Information Package



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3. Public Health Ontario (2021). Putting on full PPE . Video available from:
<https://www.publichealthontario.ca/en/Videos/I/2021/IPAC-FullPPE-On>
4. Public Health Ontario (2018) How to Hand Was. Video available from:
<https://www.publichealthontario.ca/en/Videos/I/2021/IPAC-Handwash>
5. Public Health Ontario (2021). How to Hand Rub. Video available from:
<https://www.publichealthontario.ca/en/Videos/I/2020/IPAC-Handrub>
6. Fixing Long-Term Care Act, 2021, Ontario Regulations 246/22
7. Ontario. Ministry of Health. Recommendations for outbreak prevention and control in institutions and congregate settings. Toronto, ON: King's Printer for Ontario; 2024.
<https://www.ontario.ca/files/2024-11/moh-recommendations-for-outbreak-prevention-and-control-in-institutions-and-cls-en-2024-11-01.pdf>

