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VISITORS POLICY

POLICY

The Extended care unit and Interim long-term care home will provide an organized process to ensure a safe environment that follows any applicable directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or medical officer of health appointed under the *Health Protection and Promotion Act*.

PURPOSE

To provide meaningful, equitable and safe access to visits for all residents during non-outbreak situations and during an outbreak of a communicable disease or an outbreak of a disease of public health significance, an epidemic or a pandemic

Definitions

Essential Visitor:

- (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 (ex. Physician, nurse practitioner, maintenance, PT/OT, dietician)
- (c) A person visiting a very ill or palliative resident for compassionate reasons including, but not limited to, hospice services or end-of-life care; or
- (d) A government inspector with a statutory right to enter a long-term care home to carry out their duties (ex. MLTC inspector, Ministry of Labour Inspector, Public Health Inspector)

CAREGIVER:

For the purposes of the FLTCA, 2021, a "caregiver" means an individual who,

- (a) Is the individual a family member or friend of a resident, or a person of importance to that 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

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

DESIGNATING A CAREGIVER

- 1. The decision to designate an individual as a caregiver is entirely within the domain of the resident and/or their substitute decision-maker (SDM), and not the home.
- 2. If a caregiver is under the age of 16, approval from a parent or legal guardian is required to permit them to be designated as a caregiver, if applicable

PROCEDURE

Non-Outbreak:

- 1. On admission, the LTCH will provide the Resident and their family / SDM information about home visiting hours through the Resident Handbook
- 2. There are no restrictions to visiting hours
- 3. There are no age restrictions for general visitors
- 4. Visitors are required to come into the home through the main entrance
- 5. If visiting in the evening, visitors are encouraged to be mindful of other residents in the area that may be sleeping
- 6. Visitors must sign in when arriving to the LTCH and upon leaving the home, visitors must sign out

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Outbreak:

- 1. The LTCH will notify Resident(s), family and other visitors of the current status of the outbreak and whether visiting will be limited to only essential visitors
 - a. Homes may limit visitors to only essential visitors as:
 - i. Directed by the local public health unit; or
 - ii. Directed by the Ministry of Long-Term Care or Ministry of Health

Visitor Logs

Every LTCH will maintain visitor logs for a minimum of 30 days which include, at minimum:

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

COMMUNICATION OF VISITOR POLICY

The visitor policy will be shared with Resident's Council and Family Council any time the policy is revised

A copy of the visitor policy will be included in:

- Resident information packages
- Posted in the LTCH on the Family information board
- Communicated to Residents Council each time the policy is revised
- Posted on the LTCH's website

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Infection Prevention and Control (IPAC) Guidelines for Families, Visitors and caregivers

Families, visitors, and caregivers are required to adhere to all guidance and educational directives issued by the facility, prioritizing a safe environment for residents, staff, families, and visitors. Compliance involves active participation, staying informed, and adhering to the following infection control guidelines:

Respiratory Etiquette:

- Covering the mouth and nose when coughing or sneezing.
- Prompt disposal of used tissues.
- Practicing immediate hand hygiene.

Resident Hand Hygiene Program:

- Family members or visitors are responsible for assisting residents in the hand hygiene program
- This includes providing the resident with appropriate alcohol-based hand rub (ABHR) or assisting in handwashing with wipes or at a sink equipped with necessary supplies

Four Moments of Hand Hygiene:

- a. Before entering and after leaving resident areas.
- b. Before and after any contact with a resident.
- c. After contact with the resident's immediate environment.
- d. After removing personal protective equipment (PPE).

Personal Protective Equipment (PPE):

- Families and visitors must adhere to posted PPE signage and facility directions.
- This includes wearing masks, gloves, gowns, or any other protective gear as indicated by IPAC guidelines.

Cooperation with IPAC Practices:

- Families and visitors are required to fully cooperate with IPAC practices.
- Compliance involves respecting and following guidance from IPAC-trained staff.
- Non-compliance may result in visitation restrictions to ensure the health and safety of residents, staff, and visitors.
- Visitors feeling ill and showing signs and symptoms of illness, are recommended to stay home until symptoms have been improving for at least 24 hours if respiratory symptoms or 48 hours if Gastroenteritis symptoms, prior to re-entering the home.

Education from the Extended Care Unit:

- Educational materials, signage, and resources from the extended care unit will be provided.
- This aims to ensure understanding and compliance with IPAC guidelines, which families and visitors are expected to follow.

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REFERENCES:

ECU/ILTC IPAC Program policy Local Public Health Unit FLTCA 2021 and regulation 246/22 section 102 Ontario hospital Association (Protocols for staff surveillance, exclusion and testing) Reportable disease list

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