

LONG-TERM CARE DIVISION

TAB: INFECTION PREVENTION AND CONTROL

SECTION: OUTBREAK PREPAREDNESS AND MANAGEMENT

SUBJECT: VISITOR POLICY

A. PURPOSE:

To ensure a safe environment to protect Residents and staff and to follow Provincial Directives and Ministry guidance/policy documents for visitors in Long-Term Care (LTC) by following principles of:

- **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/infrastructure characteristics of the Centre, its workforce/human resources availability, whether the Centre is in an outbreak and the current status of the Centre with respect to personal protective equipment (PPE) are all variables to take into account when setting Centre-specific policies.
- **Equality:** Residents have the right to choose their visitors. In addition, Residents and/or their Substitute Decision-Makers (SDM) have the right to designate caregivers.

B. SCOPE:

This policy applies to all Peel Long-Term Care Residents, staff, essential visitors, caregivers, support workers, volunteers and general visitors.

Note: The Centre will consult with their local public health unit, Residents' and Family Councils prior to implementation of any infection prevention and control (IPAC) measures that exceed MOH and MLTC directives, orders or applicable legislation. The current version of this policy will be provided to Residents' and Family Councils and will also be posted in the Centre, communicated to Residents, included in the Resident's Admission/Welcome Packages and posted on the Centre's website.

C. MANDATE:

This policy is in accordance with the Fixing Long-Term Care Act, 2021 (s. 5) and Ontario Regulation 246/22 (s. 4, 267), MLTC [COVID-19 Guidance Document for Long-Term Care-Homes, November 2, 2023](#), [MOH Minister's Directives - COVID-19 Response Measures for LTC Homes, August 30, 2022.pdf](#), , the [Accessibility for Ontarians with Disabilities Act, 2005](#), [Health Care Consent Act, 1996](#), and the Centre's operational practices.

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Definitions:

PCR Test means a validated real-time polymerase chain reaction (PCR) assay laboratory test for the novel coronavirus known as COVID-19.

Rapid Antigen Test (RAT) means a point-of-care rapid antigen test for the novel coronavirus known as COVID-19.

Primary series: is the initial number of doses of a COVID-19 vaccine that a person needs to develop a strong response. Most people need two doses of the vaccine to complete their primary series. However, a person who is immunocompromised may need three or four doses of the vaccine for their primary series.

Immunocompromised: A person with weakened immune system.

Booster doses: are doses of a COVID-19 vaccine received after the primary series.

Up-to-Date: Means a person has completed their primary series of COVID-19 vaccines and has received a booster dose of the COVID-19 vaccine within the last 6 months.

Passive Screening: means that those entering the Centre will review screening questions themselves. There is no verification of screening however there will be signage at entrances as a visual reminder not to enter the Centre if symptomatic.

Active Screening: Means that that there is some form of attestation/confirmation of screening. This may be achieved through pre-arrival submission of online screening or in-person.

D. POLICY:

COVID-19 Immunization:

- The goal of the provincial COVID-19 immunization program is to protect Ontarians from COVID-19. Vaccines help reduce the number of new cases and are very effective against severe illness and outcomes including hospitalizations and death due to COVID-19.
- There continues to be an increased risk for severe outcomes as a result of COVID-19 in the elderly population due to age and underlying medical conditions, particularly in shared living spaces like long-term care Centre.
- Getting vaccinated and staying up to date with your COVID-19 vaccines is the best way to remain protected from the most serious effects of COVID-19.
- Vaccination has been shown to be very effective against severe illness and outcomes. Staying up-to-date with recommended doses restores protection that wanes over time. More specifically, booster doses help increase protection against symptomatic infection and severe outcomes, such as hospitalization and ICU admission.

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- Individuals can book an appointment for vaccination and download/print their vaccination receipts through the [provincial portal](#). Select pharmacies and primary care settings also provide COVID-19 vaccinations.
- For additional information on COVID-19 vaccines including benefits, risks, and eligibility refer to: [COVID-19 vaccines for Ontario | COVID-19 \(coronavirus\) in Ontario](#).

COVID-19 Testing:

- Routine COVID-19 testing of individuals entering the Centre is no longer required. However, Peel Public Health and/or the Centre Outbreak Management Team may require COVID-19 testing during a COVID-19 suspected or confirmed outbreak. Any requirements for testing will be communicated at that time.
- The Ministry will continue to make available free COVID-19 rapid antigen test kits until June 2023 for those individuals wishing to self-test for COVID-19. For further information on how to self-swab, refer to: [How to use a COVID-19 antigen test at home - YouTube](#) and [Ontario Health - How to Swab your nose](#).
- If rapid antigen/PCR testing is required, it must be completed before gaining entry to the Centre. Visitors who refuse to take the test or who have a positive test result will not be allowed entry into the Centre.
- A person who is visiting an ill/palliative/end of life care Resident for compassionate reasons or a support worker visiting the Centre for an emergency service is not required to undergo a rapid antigen test or provide proof of or attest to receiving a negative COVID-19 PCR or antigen test result.
- PCR testing may be used where individuals are symptomatic, have a positive antigen test result, individuals have been in contact with a confirmed COVID-19 case, or as otherwise directed by local public health.
 - Testing can be done at any [Getting tested for COVID-19 - Region of Peel \(peelregion.ca\)](#) and [COVID-19 test and testing location information | COVID-19 \(coronavirus\) in Ontario](#).
- **Consent:** Is required for COVID-19 testing before rapid antigen testing can be administered (Refer to [IDF-103](#) – Essential Caregivers and General Visitors Consent for COVID-19 Testing and Authorization for Disclosure of Personal Health Information). The consent form will be reviewed the first time the individual undergoes testing, be signed and witnessed. A signed consent form will be kept on file for subsequent testing and a verbal or implied consent provided each and every time a test is completed as per the Health Care Consent Act, 1996. Parental consent is required for minors (children under the age of 18 years) that undergo testing.

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SCREENING AND INFECTION PREVENTION AND CONTROL REQUIREMENTS:

- All visitors must self-monitor for symptoms of acute respiratory infection and exposure history for COVID-19 or other respiratory illnesses prior to entering the Centre. Signage in the Centre will outline to visitors how to self-screen.
 - Visitors who are showing symptoms of COVID-19 or had a potential exposure to COVID-19 and have screened positive **must not** enter the Centre and are advised to stay at home and follow public health guidance.
 - If a visitor has respiratory symptoms but tests negative for COVID-19, they can return to the Centre after 5 days from the onset of respiratory symptoms or until symptoms have resolved, whichever is shorter.
 - If a visitor tests positive for COVID-19, they are not permitted into the Centre for 10 days after symptom onset or date of positive test (whichever is earlier) AND provided they have no fever and other symptoms have been improving for 24 hours (or 48 hours if vomiting/diarrhea). Non-essential visitors to the Centre should be avoided.
 - Where visits cannot be avoided (e.g., essential caregiver visits), the essential caregiver may visit within the 10-day timeframe providing that they are asymptomatic, or symptoms have resolved. They must follow measures to reduce the risk of transmission for 10 days from their symptom onset or positive test including wearing a surgical/procedural I mask, maintaining physical distancing and notify Centre staff of their recent illness/positive test. It is also recommended that the Resident being visited wear a mask, if tolerated.
 - **Close Contacts***, visitors may enter the Centre while following the guidance below:
 - A total of 10 days after the date of specimen collection or symptom onset, whichever is earlier/applicable, visitors should avoid non-essential visits to anyone who is immunocompromised or at higher risk of illness (e.g., seniors) and avoid non-essential visits.
 - Where visits cannot be avoided, visitors should wear a medical mask, maintain physical distancing, and notify the setting of their recent illness/positive test. If the individual being visited can also wear a mask, it is recommended they do so.
- *A “close contact” is defined as: An individual who has a high-risk exposure to a case, an individual with COVID-19 symptoms, or an individual with a positive rapid antigen test, during their infectious period (i.e., within the 48 hours prior to the case’s symptom onset if symptomatic or specimen collection date (whichever is earlier/applicable) and until the case has completed their self-isolation period
- A high-risk exposure is generally those who were in close proximity (less than 2 metres) for at least 15 minutes or for multiple short periods of time without measures such as

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masking, distancing, and/or use of personal protective equipment (PPE) depending on the nature of contact. This includes, but is not limited to:

- Household, roommates, or similar living situation contacts
- Individuals who had direct contact with infectious body fluids of the case (e.g., coughed on or sneezed on)
- Health care workers and/or staff who provided direct care for the case, or who had other similar close physical contact (i.e., less than 2 metres from the patient for more than a transient duration of time) **without** consistent use of PPE for the setting and interaction.
- Workers should follow organizational policies on the use of PPE for patients with suspected and confirmed COVID-19. However, for public health follow-up purposes, if the exposed worker had consistent medical masking, this would generally not be considered a high-risk exposure
- **Indoor Visits:**
 - **Masks: Effective November 7, 2023**, it is strongly recommended for all visitors and caregivers to wear a mask in Resident areas indoors except when with the Resident in the Resident's room or when eating or drinking with a Resident in communal spaces. If the Resident in a shared room is uncomfortable with visitors/caregivers removing their mask in the room, the Centre may designate a space to enable the Resident's roommate to have visitors/caregivers without masking. Other exceptions to the masking requirements are:
 - Children who are younger than two years of age.
 - Any individual who is being accommodated with the Accessibility for Ontarians with Disabilities Act, 2005 or the Ontario Human Rights Code.
 - During an outbreak or when providing care to Residents with suspected or confirmed COVID-19, essential caregivers must wear appropriate PPE as directed by Public Health and the Centre. This may include a fit-tested or non-fit tested N95 mask, eye protection, gown, and gloves.
 - **Visit Limits:** There are no limits on the number of visitors that may visit a Resident however the number of indoor visitors will depend on the Centre's operational capacity and space and will be determined by the Centre Leadership Team (CLT).
- **Outdoor visits:**
 - Masking is not a requirement for outdoor visits.
 - There is no limit on the number of people visiting outdoors, space permitting. Visitors are to contact the Centre in advance of their visits to check if outdoor space is available.

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- Where the Centre does not have sufficient outdoor space to accommodate visits, outdoor visits can also take place in the general vicinity.
- **General Visitors:**
 - General visitors are not permitted:
 - When a Centre or area of a Centre is in outbreak
 - To visit an isolating Resident
 - When the local public health unit so directs.
 - General visitors may be permitted to visit if only a section of the Centre is in outbreak, and the Resident they are visiting is unaffected and located in part of the Centre that is not in outbreak.
 - In the event of a Centre wide outbreak, Public Health will be consulted for direction on the operation of the Adult Day Services programs.
- **Caregivers:**
 - Caregivers are allowed to enter the Centre/Unit during an outbreak. There is no limit to the number of caregivers that can visit with a Resident during an outbreak or when a Resident is symptomatic or isolating under additional precautions.
 - Must follow measures implemented in the Centre to reduce the risk of transmission as directed by the OMT and local public health unit.
- **All visitors:**
 - Caregivers and general visitors may join a Resident in sharing a meal or eating and drinking in a communal space without a mask.
 - Caregivers and visitors may join Residents for group activities however are strongly recommended to wear a mask unless eating and drinking with the Resident.
 - Must perform hand hygiene when entering and exiting the Centre and frequent hand hygiene as appropriate throughout their visit.
 - **A visitor log** of all visitors to the Centre must be maintained with the name and contact information of the visitor, time and date of visit, name of the Resident and other details regarding the purpose of the visit. These records will be kept for a minimum of 30 days and be readily available to the local public health unit for contact tracing purposes upon request.
 - During a suspect or confirmed outbreak Public Health may provide further direction on the types and numbers of visitors to the Centre depending on the specific situation.
 - Visitors planning to visit the LTC Centre are advised to contact the Centre in advance to make sure the Centre is not in an outbreak, and to get information on the Centre's Visitor policy and any other restrictions.
 - All visitors are required to comply with this policy and IPAC measures, including all PPE requirements. The Centre is responsible for providing PPE such as

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surgical/procedural mask, gloves, gowns, and eye protection (e.g., face shield or goggles), as appropriate.

TYPES OF VISITORS:

Not Considered Visitors: LTC Staff, volunteers and students are not considered visitors as their access to the Centre is determined by the Centre. Infants under the age of 1 are also not considered visitors and are excluded from testing requirement.

Essential Visitors:

Essential Visitors are individuals who perform essential support services (e.g., food delivery, inspector, maintenance workers health care services (e.g., phlebotomy)) or a person visiting a very ill or palliative/end of life care Resident. Essential visitors also include “essential caregivers” as defined by MLTC. There is no limit on the number of essential visitors allowed to come into the Centre at any given time.

Essential visitors are the only type of visitors allowed when there is an outbreak in the Centre or area of the Centre.

There are four types of essential visitors:

1. **Persons visiting very ill or palliative/end of life care Residents** for compassionate reasons including but not limited to, hospice services, end of life care, etc.
2. **Government inspectors** (e.g., MLTC, MLITSD, etc.) with a statutory right to enter a long-term care Centre to carry out their duties.
3. **Support Worker:**

A support worker is defined as a type of essential visitor who is visiting to provide support to the critical operations of the Centre to provide essential services for the Centre or for a Resident at the Centre. Essential services provided by support workers include, but are not limited to:

- Assessment, diagnostic, intervention/rehabilitation, and counselling services for Residents by regulated health professionals such as physicians and nurse practitioners
- Assistive devices Program vendors e.g., the Centre’s oxygen therapy vendors
- Moving a Resident in or out of a Centre
- Social work services
- Legal services
- Post-mortem services
- Emergency services (e.g., such as those provided by first responders)
- Maintenance services such as those required to ensure the structural integrity of the Centre and the functionality of the Centre’s HVAC mechanical,

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electrical, plumbing systems, and services related to exterior grounds and winter property maintenance

- Food/nutrition and water/drink delivery
- Canada Post mail services and other courier services
- Election officials/workers.

Support Person who helps people with a disability perform daily tasks (e.g., help with communication, mobility, or personal care):

- A visitor may require a support person to help them visit the Centre. The support person for any visitor must adhere to the Centre's Visitor policy, follow the same screening and PPE requirements as visitors to the Centre.
- A support person for any visitor does not count towards the maximum number of visitors.
- A support person for a designated caregiver does not need to be designated.
- Visitors who need a support person should inform the Centre in advance so that the Centre can prepare accordingly.

4. Caregivers:

A caregiver is 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 SDM with authority to give that designation, if any. **Note:** the designation of a caregiver should be made in writing to the Centre, and this written record will be kept by the Centre.
- 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. (**Note:** parental or legal guardian consent for designated caregivers under 16 years of age will be documented in the Resident's EHR).

Criteria:

- The decision to designate an individual as a caregiver is entirely the decision of the Resident and/or their SDM and not the Centre. The Centre will document caregiver designations on the Resident's Electronic Health Record (EHR). A Resident and/or

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their substitute decision-maker may not continuously change a designation in order to increase the number of people able to enter the Centre.

- A Resident and/or their SDM may change the designation in response to a change in the:
 - Resident's care needs that are reflected in the plan of care.
 - Availability of a designated caregiver, either temporary (e.g., illness) or permanent.
- 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 Residents who are COVID-19 positive, provided the Centre obtains consent from all involved Residents/SDMs. Caregivers may also support more than one Resident in non-outbreak situations, with the same expectation regarding Resident consent.
- Resident and/or SDM must complete a [Caregiver Support Form](#) to communicate the designation of the caregiver and submit to the Administrator/DOC/designate.
- Additional forms, education and procedures, as outlined in Policy [LTC1-05.40](#) - External Service and/or Care Provider and Visiting Companions must be followed for Privately Hired Caregivers (hired and paid for by the Resident/SDM). Please see policy or speak to the Centre Administrator/DOC/designate for assistance.
- Prior to visiting any Resident for the first time, caregivers must attest that they have read the Centre's Visitor policy/Visitors information package. The policy and information package must also be reviewed when changes are made and annually thereafter.
- Physician distancing guidelines may be implemented if the Centre is in outbreak as directed by OMT or local public health unit.
- Review Public Health Ontario resources to support IPAC and PPE education and training as made available by the Centre:
 - Guidance documents: Recommended Steps: [Putting On Full PPE](#)
 - Video: [Putting On Full PPE](#)
 - Video: [Taking off Full PPE](#)
 - Video: [How to Handwash](#) and [How to Hand Rub](#).

General Visitors:

A general visitor is a person who is not an essential visitor and is visiting to provide non-essential services (including sales representative) related to the operations of the Centre or a particular Resident or group of Residents.

- There are two broad categories of general visitors:

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1. Visitors providing non-essential services which include but not limited to:
 - Personal care service providers (e.g., hairdressers, barbers, manicurists, etc.)
 - Entertainers (e.g., singers, musicians, etc.)
 - Recreational service providers
 - Animal handlers (for example, as part of therapy animal program)
 - Individuals who are touring the Centre to inform decisions regarding application for admission.

2. Persons visiting for social reasons (e.g., family members or friends) that the Resident or their substitute decision-maker assess as different from direct care, including care related to cognitive stimulation, meaningful connection, and relational continuity.
 - General visitors will have access to the Centre's Visitor policy and must understand the IPAC measures at the outset of their visits.
 - The Centre has the discretion to require general visitors to:
 - Schedule their visits in advance. **Note:** The Centre will prioritize the mental and emotional well-being of Residents and strive to be as accommodating as possible when scheduling visits for general visitors with consideration to maximizing physical space and human resources to assist Residents (where needed).
 - Visit during specific hours.

E. PROCEDURE:

MANAGING SAFE VISITS:

- Supervising Visits:
 - The Centre is not required to supervise visitors.
 - The Centre has the discretion to supervise visits in order to manage health and safety during visits (e.g., monitoring the flow of visitors to ensure sufficient physical distancing can be maintained, supporting Residents during the visit, etc.).
 - Where supervised visits are needed, the supervision should be implemented in a manner that respects the Resident's right to communicate in confidence, receive visitors of their choice and consult in private with any person without interference under paragraph 14 of subsection 3(1) of the FLTCA.

- Access to Home Areas:
 - The Centre will create safe opportunities for caregivers to spend time with Residents in areas outside the Resident's room including lounges, walks in hallways (without going outdoors) and outdoor gardens and patios (if available).

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- Use of Centre's Washroom:
 - Visitors are allowed to use the Centre's washroom. They must follow the Centre's direction on which washroom to use.

Non-compliance with the Centre's Visitor Policy:

Non-compliance with this policy could result in discontinuation of visits for the non-compliant visitor. The Centre will collaborate with the visitor to support them to ensure compliance with the requirements.

Essential caregivers are particularly crucial to the care and wellbeing of our Residents and collaborate discussions will occur to create a plan to support the essential family caregiver in meeting the requirements.

The Centre works with visitors in a variety of ways to meet the requirements, including, but not limited to:

- Consult with the Residents' and Family Councils on procedures for addressing non-compliance by visitors.
- Provide strategies for supporting visitors in understanding and adhering to the Centre's Visitor policy.
- Recognize visits are critical to supporting Resident's care needs and emotional well-being.
- Consider the impact of discontinuing visits on the Resident's clinical and emotional well-being.
- Implement training/education to support visitors in understanding and adhering to the Centre's Visitor policy.
- Ensure the response to discontinue visits is reasonable in comparison to the severity of the non-adherence to the policy and IPAC measures.

Note: Centres will consult with Residents' and Family Councils on the procedures for addressing non-compliance by visitors.

Ending a Visit – the Centre has the discretion to end a visit by any visitor who repeatedly fails to adhere to the Centre's Visitor policy, provided that:

- The Centre has explained the applicable requirement(s) to the visitor.
- The visitor has the resources to adhere to the requirement(s) (e.g., there is sufficient space to physically distance, the Centre has supplied the PPE and demonstrated how to correctly put on PPE, etc.); and
- The visitor has been given sufficient time to adhere to the requirement(s).
- The steps taken are documented in the Resident's electronic health record (EHR).

Temporarily Prohibiting a Visitor – the Centre has the discretion to temporarily prohibit a visitor in response to repeated and flagrant non-adherence with the Centre's Visitor policy. In exercising this discretion, the Centre should consider whether the non-adherence:

- Can be resolved successfully by explaining and demonstrating how

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- the visitor can adhere to the requirements.
- Is with requirements that align with instruction in Minster's Directive and guidance in this policy.
- Negatively impacts the health and safety of Residents, staff and other visitors in the Centre.
- Is demonstrated continuously by the visitor over multiple visits.
- Is by a visitor whose previous visits have been ended by the Centre.

Any decision to temporarily prohibit a visitor should:

- Be made only after all other reasonable efforts to maintain safety during visits have been exhausted and the following steps have been followed:
 - The Centre Administrator/designate have had multiple conversations (i.e., three times) with visitors regarding non-compliance.
 - Visitor was provided with and is aware of the Visitor policy, training materials, and General Visitor Information Package.
 - Visitor has been reminded of the risk of transmission of the virus to Centre Residents and staff.
 - Visitor was provided with sufficient time and information to comply with the policy.
 - Visitor was informed of potential impact of their non-compliance on the health and safety of Residents, staff, and other visitors.
 - Visitor continues to be in non-compliance after reminders were provided from the Centre Leadership Team (minimum 3 times) and [IDF-108](#) – Non-Compliance Letter is provided to the visitor.
 - Stipulate a reasonable length of the prohibition.
 - Clearly identify what requirements the visitor should meet before visits may be resumed (e.g., reviewing the Centre's Visitor policy, reviewing specific Public Health Ontario resources, etc.); and,
 - Be documented and retained by the Centre.

Note: Where the Centre has temporarily prohibited a caregiver, the Resident and/or their SDM may need to designate an alternate individual as caregiver to help meet the Resident's care needs.

References:

- [Ontario Regulation, 246/22](#): General.
- [MOH Minister's Directives - COVID-19 Response Measures for LTC Homes, August 30, 2022.pdf](#).
- [COVID-19 Guidance Document for Long-Term Care-Homes, November 2, 2023](#).
- [ADM Memo - Enhanced Masking in Long-Term Care Homes - November 2, 2023](#).
- [MOH COVID-19 Guidance for Public Health Units, Long-Term Care Homes, Retirement Homes, June 26, 2023v.11.pdf](#).

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- [MLTC COVID-19 Response Measures FAQs, June 23, 2023.pdf](#)[Safety Measures Poster - What Residents Can Expect, June 23, 2023.pdf.](#)
- [MOH - Ontario Public Health Standards - Case Definitions and Disease Specific Information, May 2023.pdf.](#)
- [MLTC Memo, COVID-19 Response Measures Updates, June 26, 2023.pdf.](#)
- [MOH, Management of Cases and Control of COVID-19 in Ontario, March 27, 2023v.15.2.pdf - All Documents \(sharepoint.com\)](#)

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