

FATHER LACOMBE CARE SOCIETY – COVID-19 SAFE VISITING PROGRAM

Policy Release Date: July 23, 2020

Effective Date: July 23, 2020

As we are all aware, there has been a recent, significant change to the essential visitors order from Dr. Deena Hinshaw. This change is being put in place to recognize that families and friends are essential for resident's mental and physical health and overall wellbeing.

As we at Father Lacombe Care Society have done throughout this pandemic, our focus has always been on resident and staff safety. This new safe visiting program is being created in collaboration with residents, families and staff. On July 17th and July 20th, we surveyed residents, families and staff to allow an opportunity to provide input on this new safe visiting program.

It is important that visitors understand that the feedback from residents who are their own decision makers was diverse. Many have a fear of too many visitors being in the building at any given time. We must all remember that this is their home, and we must find a balance in the coming weeks to ensure their fears are not ignored.

Now, more than ever, we must ensure that we are doing our best to continue to keep all residents, families and staff as safe as possible during this new safe visiting program. After surveying residents and families, it was clear that the decision is that we will begin a phased in process for the safe visiting program. Visiting a loved one does not come without risk those risks include the possibility of a COVID-19 exposure. In the event of unexpected exposure, you will be required to comply with the public health orders in force at the time, including mandatory isolation and COVID-19 testing.

Collectively we have a shared responsibility for the health and safety for residents, visitor's and staff. What we do in the community affects everyone in this facility. Let's all do our part to minimize the risks associated with safe visits.

This plan requires significant staffing requirements to ensure appropriate screening is completed while maintaining a safe staffing ratio on the nursing neighborhoods. So please be patient with us as we implement these ongoing changes.

Guidelines for Phased in Approach:

Phase 1: Indoor visits will take place in the resident room **only**. There will be no restrictions on length of visitations. Tray service will be provided for meals in the resident room for the residents. Visitors are not to visit with other residents and are to enjoy their visit only in the resident room. This would include no access to reception, hair salon, sunrooms and the Bistro/Cafe. Visitors can take the resident out of the building for a walk, we recommend continuous masking and proper hand sanitizing. Both resident and visitor's will be rescreened when they reenter the building. While outdoor visits are taking place, you will be unable to use the benches at the front of the building. Visitors are not able to use facility bathrooms at any time per AHS recommendations. Visitors are not able to share meals with residents at this point as per AHS recommendations.

Phase 2: Indoor visits will include common areas as space permits, to ensure all residents with visitors have access to these areas. This phase will also include access to common gardens within the building. If visits are in common areas, this will be limited to one Designated family/support person per resident. We will provide more details on this Phase in the coming weeks.

Phase 3: No restrictions during indoor visits. This phase could change depending on how Phase 1 and 2 roll out.

Visits will be permitted under the following Phase 1 guidelines:

SCREENING HOURS: 10:00 am to 6:00 pm Monday to Friday, 10:00am to 4:00pm Saturday, Sunday and Holidays (Phase 1).

All visitors must be screened during these times in order to gain access to the building. Once you have been screened you are welcome to stay in the resident room for the duration of your visit. We will revisit these hours as we move through Phase 1. Please be patient as we begin rolling out this new plan, we need time to put staffing in place to extend these screening hours.

Please remember these are not visiting hours, these are only the current times for screening.

1. Each Resident (or Agent of Resident) can designate **2 family/support persons** as their **Designated Family/Support Person** for indoor visits.
 - a. Resident's who are their own decision maker have the right to decline indoor visits, and decline the naming of a Designated Family/Support Person. They may also impose their own limitations on visits ie: length of visits, frequency, contact to name a few. Ultimately the resident decision will be respected and supported.
 - b. Paid Companions are allowed to be named as Designated Support Person. Please note, paid companions will be considered 1 of the 2 Designated Family/Support Persons.
 - c. The two designates must be over the age of 18 **and are fixed, not changing day to day**
 - d. The Designated Family/Support person(s) are required to be registered before visits will begin.
 - e. Please update your Designated Family/Support names with Audrey at info@fatherlacombe.ca

2. Designated Family/Support Persons and Visitor Responsibilities

All Designated Family/Support Persons and visitors must be instructed to:

- a. Undergo Active Health Assessment Screening at entry and self check for symptoms throughout visit.
- b. Coordinate all visits with operator.
- c. Be educated on and adhere to Safe Visiting Practices and related site policies.
- d. Only visit with the resident(s) they are supporting.
- e. Wear a mask continuously indoors; and, if physical distancing cannot be maintained, outdoors.
- f. Notify the operator of any symptoms that arise within 14 days of visiting with a resident.
- g. Appropriately bring forward any concerns
- h. Treat all residents and staff with respect and kindness

Entry may be refused if there is reason to believe an individual is not abiding by these responsibilities.

3. Indoor Visits:

- a. Visiting is welcomed 7 days a week.

- b. Current Screening practices continue, and continuous masking is mandatory. Visitors are to provide their own mask if a site is not on outbreak. If a visitor arrives onsite without a mask, there will be masks available for purchase. If a site is on outbreak, PPE will be provided, and visitors will have to follow enhanced Infection Prevention and Control guidelines.
- c. All visits **must** take place within the Resident's room (Phase 1). The nurse call bell must be used when assistance is required at any time during visit, visitors are not to go looking for staff. Call bell response times may vary.
- d. Visitors in semi-private rooms are asked to be considerate of the other occupant.
- e. Resident care and routine cleanings will have to be accommodated during visits
- f. The risk of transmission of COVID-19 increases with close proximity. If the resident and their Designated Family/Support Person(s) understand this and they wish to include physical touch in their visits, this may be done by following proper hand hygiene and wearing continuous masks.
- g. A confirmed site outbreak of COVID-19 will impact a designated family/support person visit. This will mean that only 1 Designated Family/Support person will be allowed to visit at a time during this outbreak.
- h. Visitors who work at or have visited a confirmed outbreak location without using proper PPE should not visit.

WE ASK VISITORS TO AVOID ARRIVAL BETWEEN 2:30 PM AND 3:00 PM TO ALLOW US TO COMPLETE STAFF SCREENING DURING SHIFT CHANGE.

- 4. **Outdoor Visits** can now be up to **four persons**, plus the Resident for a total of **5 in the group**.
 - a. Continue to book your Outdoor Visits through Reception at your site, please call to schedule Monday to Friday 8:00 am to 4:00pm.
 - b. Outdoor visits will continue to be provided Monday-Friday, with the same appointment schedule as originally implemented.
 - c. No drop in's allowed at this time.
 - d. Outdoor visits will not proceed on weekends or holiday's.
 - e. There is no age restriction for Outdoor Visits
 - f. All visitors will be screened to ensure appropriate contact tracing if required
 - g. We currently have seating for 2 visitors. If you choose to bring up to 4 visitors, we recommend you provide your own seating.
 - h. Visitors are able to take residents for walks, we recommend face masks and proper hand sanitizing.
 - i. As long as visitors can maintain 6 feet distance from the resident, masks are not mandatory. However, they are always recommended.
 - j. The risk of transmission of COVID-19 increases with close proximity. If the resident and their Designated Family/Support Person(s) or visitor(s) understand this and they wish to include physical touch in their visits, this may be done by following proper hand hygiene and wearing continuous masks.
- 5. Currently we do not have a safe space indoors to accommodate socially distanced indoor visits should outdoor visits be cancelled due to inclement weather. Please stay tuned as we navigate through this.
- 6. **Visiting Animals:** One animal is permitted to accompany a designated family/support person or other visitor for both indoor and outdoor visits.
 - a. the animal must meet the individual operator policy regarding animal visits, and

- b. visiting animals must be well (i.e. not displaying signs of illness, such as diarrhea or vomiting) and not come from a household with individuals at high risk of unknown exposure to COVID-19.
7. **Hand Hygiene:** All persons visiting, including residents, must wash their hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer (greater than 60% alcohol content) before, during as appropriate, and after all visits.
8. **Failure to comply with safety protocols may result in visiting restrictions.**
9. Please access the link from AHS Supportive Living Family information. <https://www.alberta.ca/assets/documents/covid-19-fact-sheet-family-support-visiting.pdf>
10. Following Phase 1, we will continue to review our plan every 3 weeks as the pandemic continues.
11. Father Lacombe Care Society has a process for concern resolution related to the implementation and interpretation of this Order. Concerns may be forwarded to info@fatherlacombe.ca
12. As per our respectful workplace policy FLCS is committed to supporting a respectful environment for residents, staff and visitors.

The following assessment tools are taken from CMOH Order 29-2020

Health Assessment Screening

Active Health Assessment Screening for Designated Family/Support Persons and Visitors

Any designated family/support person or visitor who intends to enter a facility, and/or who cannot maintain physical distancing during an outdoor visit must be screened. This screening must be completed every time the individual enters the site. Persons who do not enter (i.e. outdoor visits) and follow all physical distancing during the outdoor visit are not required to be screened. Screening shall involve the following:

1. Temperature screening
2. COVID-19 Questionnaire (see **below**)
3. Confirmation of self assessment of risk of unknown exposure to COVID-19 and understanding of [Safe Visiting Practices](#)
4. Confirmation of identity and designated status (only if entering the building)
5. Documentation of arrival and exit times (only if entering the building)

COVID-19 Designated Family/Support Person and Visitor Screening¹⁵

1.	Do you have any of the below symptoms:		
	• Fever (38.0°C or higher)	YES	NO
	• Any new or worsening symptoms:		
	○ Cough	YES	NO
	○ Shortness of Breath / Difficulty Breathing	YES	NO
	○ Sore throat	YES	NO
	○ Chills	YES	NO
	○ Painful swallowing	YES	NO
	○ Runny Nose / Nasal Congestion	YES	NO
	○ Feeling unwell / Fatigued	YES	NO
	○ Nausea / Vomiting / Diarrhea	YES	NO
	○ Unexplained loss of appetite	YES	NO
	○ Loss of sense of taste or smell	YES	NO
	○ Muscle / Joint aches	YES	NO
	○ Headache	YES	NO
	○ Conjunctivitis (commonly known as pink eye)	YES	NO
2.	Have you, travelled outside of Canada in the last 14 days?	YES	NO
3.	Have you had close unprotected* contact (face-to-face contact within 2 meters/6 feet) with someone who has travelled outside of Canada in the last 14 days and who is ill**?	YES	NO
4.	Have you had close unprotected* contact (face-to-face contact within 2 meters/6 feet) in the last 14 days with someone who is ill**?	YES	NO
5.	Have you been in close unprotected* contact in the last 14 days with someone who is being investigated or confirmed to be a case of COVID-19?	YES	NO
6.	Have you assessed your risk of unknown exposure based on your last two weeks of activity (refer to Risk of Unknown Exposure Assessment CMOH Order 29-2020 Appendix A)?	YES	NO
7.	Do you understand <i>Safe Visiting Practices</i> and related site policies (refer to CMOH Order 29-2020 Appendix A)?	YES	NO

- If any individual answers YES to screening questions 1-5, they will not be permitted to enter the site.
 - Individuals must be directed to self-isolate and complete the [AHS online assessment tool](#) to arrange for testing.
- If any individual answers NO to screening questions 6-7, they will work with the operator to understand their responsibilities before being permitted to enter the site.

¹⁵ Operators must be aware of, and follow, any applicable privacy legislation (e.g., Freedom of Information and Protection of Privacy Act, Health Information Act, Personal Information Protection Act, etc.), should they document/retain the Health Assessment Screening completed with residents and staff (or others).

* 'Unprotected' means close contact without appropriate personal protective equipment

** 'ill' means someone with COVID-19 symptoms on the list above

Operators are encouraged to visit Alberta Health's website to www.alberta.ca/COVID19 for updated information. If there are any questions, please contact Alberta Health Accommodation Standards and Licensing at asal@gov.ab.ca.

Table 2. Risk Tolerance Assessment Table

Risk Factors	Description and Site Assessment
Number of People on site and Layout of Site	<p>To ensure safe movement of people, operators may assess the site in terms of layout and number of people on site at any one time. For example:</p> <ul style="list-style-type: none"> ▪ Spacious hallways, common areas and rooms may indicate a higher risk tolerance ▪ Prevalence of semi-private rooms may indicate a lower risk tolerance ▪ The number of floors may mean increased use of access points (e.g. elevators) which may indicate a lower risk tolerance <p>Site Notes:</p>
Collective Health Status of Residents, where known	<p>This may be actual or perceived health status. If the majority of residents have complex health conditions, this may indicate a lower risk tolerance</p> <p>Site Notes:</p>
Number of residents actively leaving site for outings	<p>Consider essential and non-essential outings. The number of residents actively leaving the site for outings may indicate a lower risk tolerance (as there is already increased potential of exposure)</p> <p>Site Notes:</p>
Any disclosed resident directed assessment of risk tolerance	<p>Though it is recognized not everyone will assess themselves the same way, residents will have a sense of their health and the risks they would be willing to take for more visitors on site. Though this is a subjective measure, the risk tolerance of the site should be directed by the risk tolerance of the residents, where disclosed.</p> <p>Site Notes:</p>
Any disclosed staff directed assessment of risk tolerance	<p>Though this is a subjective measure, the risk tolerance of the site should be informed by the risk tolerance of the staff, where disclosed.</p> <p>Site Notes:</p>
Mechanism for ongoing assessment of risk designation of region	<p>Up to date understanding of the incidence of COVID-19 in the community is important <i>Note: Where a facility is located with respect to risk designation of region does not itself constitute the need to adjust risk tolerance of site.</i></p> <ul style="list-style-type: none"> • Open: Low level of risk, no additional restrictions in place • Watch: The province is monitoring the risk and discussing with local government(s) and other community leaders the possible need for additional health measures • Enhanced: Risk levels require enhanced public health measures to control the spread <p>Site Notes:</p>
Other:	
Other:	

Risk of Unknown Exposure to COVID-19

- It is important for all persons to understand their risk of unknown exposure to COVID-19, based on their behaviour in the last 14 days, prior to entering the site and modify their behaviour accordingly (Refer to [Table 3](#)).
 - It is particularly critical that active *Health Assessment Screening* is completed at entry, is answered completely and accurately, and anyone with symptoms or recent known exposure to COVID-19 not enter the site at all.
 - While individuals do not need to disclose their assessed risk of unknown exposure to the operator, they must ensure the resident or alternate decision maker is aware of it and behave accordingly.
 - Individuals should limit the number of different sites they enter and provide in-person visits to only one site per day to the greatest extent possible.

Table 3. Risk of Unknown Exposure Assessment Guidance

Low Risk	Medium Risk	High Risk
<p>To be considered at low risk of unknown exposure, all the following conditions must be met:</p> <ul style="list-style-type: none"> • Does not work or live in an area of high COVID-19 exposure (refer to Risk designation of region) • Works from home • Part of a small cohort (15 or less) who consistently practices physical distancing and masks when cannot maintain distance • Not have had guests at home in the past 14 days • Visits resident(s) in one site in a day • Makes essential outings only • Uses own vehicle • Consistently maintains 2 metres of distance from those outside household in all activities • Mask worn when cannot maintain physical distancing • Consistent hand hygiene • No interprovincial travel within the last 14 days 	<p><i>There will be many variations that arise between the extremes of high and low risk of unknown exposure</i></p> <p><i>Individuals must use their best judgement to determine risk of unknown exposure where neither low nor high is appropriate.</i></p>	<p>To be considered at high risk of unknown exposure, any one or more of the following may be met:</p> <ul style="list-style-type: none"> • Works or lives in an area of high COVID-19 exposure (refer to Risk designation of region) • Works outside home in settings where distancing is not consistently maintained and masking is not consistently used • Worked at or visited a location with a declared COVID-19 outbreak in last 14 days • Part of a large cohort (more than 15) • Cohort inconsistently practices physical distancing and use of masks when cannot maintain distance • Have had guests in home in last 14 days • Visits resident(s) in multiple sites in one day • Outings where contact with others outside household is likely • Use of public transit or carpooling where distancing is not consistently maintained and masking is not consistently used • Does not maintain physical distancing and does not wear a mask • Infrequent or inconsistent hand hygiene • Interprovincial travel within the past 14 days