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Policy Section: Organization, Roles, & Committees	Effective Date: April 2022
Prepared By: R. Barlow	Revision Date: November 2023
Subject:	Visitor Policy

Purpose/Regulatory Standards:

FLTCH Reg. 267 (1): Every licensee of a long-term care home shall establish and implement a written visitor policy which at a minimum,

- (a) includes the process for visitor access 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;
- (b) includes the process for documenting and keeping a written record of,
 - (i) the designation of a caregiver; and
 - (ii) the approval from a parent or legal guardian to permit persons under 16 years of age to be designated as a caregiver, if applicable;
- (c) complies 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; and
- (d) ensures that essential visitors continue to have access to the long-term care home during an outbreak of a communicable disease, an outbreak of a disease of public health significance, an epidemic or a pandemic, subject to any applicable laws.

FLTCH Reg. 267 (2): Every licensee of a long-term care home shall maintain visitor logs for a minimum of 30 days which include, at a minimum,

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


FLTCH Reg. 267 (3): Every licensee of a long-term care home shall ensure that the current version of the visitor policy is provided to the Residents’ Council and Family Council, if any.

FLTCH Reg. 267 (4): In this section, “essential visitor” means,

- (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,
- (c) a person visiting a very ill 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.

Policy

The Home shall have a Visitor Policy in compliance with the above regulations, as outlined below.

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Note: LTC homes are currently following the advice for “enhanced masking” or universal protocols as per the Chief Medical Officer of Health for visitors and caregivers effective November 7, 2023.

Procedure

Visitors may access the building on their own at any time during normal business hours (8:00am to 8:00pm) when staff are on duty at the front entrance. For security reasons the doors will be locked at other times and access will be gained by visitors by using the front door intercom and awaiting a response from the assigned charge nurse.

Note that it is advisable to inform the Administrator in advance of after-hours visits in non-emergency situations. Also, the assigned charge nurse may not respond immediately to after-hours calls from the front door intercom if she/he is engaged in resident care activities. Patience may be required. See HR-D-70 (Door Security).

- *Note: Many long-term care homes lock the front doors at all times and require visitors to enter via a security pad or telephone to a nursing station. AON prefers to have open doors during business hours, with a staff member nearby to greet visitors to the Home. It is better customer service and promotes a more homelike environment*


Visitors are expected to sign in at the front desk, regardless of the time of day of their arrival. A sign-in book, with hand sanitizer, and any communication notices will be made available at the front entrance for this purpose. Visitors will enter the following information into the visitor log, as required by provincial regulation. Presumably there are security, contact-tracing, and/or other reasons underlying this provincial sign-in regulation.

- the name and contact information of the visitor;
- the time and date of the visit;
- the name of the resident visited; and
- sign out at the end of the visit

Note: Where “screening” procedures have been implemented with all visitors (i.e. during an outbreak or as a pandemic response measure), and the above information is obtained via screening tools or other means, the sign-in book will not be used. Currently passive screening is in place meaning that visitors follow the list of symptoms posted and do not enter the home if they feel ill or are experiencing any other symptoms posted at the entrance of the home.

The home is following “enhanced masking” or universal masking protocols which means:

- Staff, students, support workers, and volunteers are required to wear a mask when in resident areas indoors.

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- Strongly recommending 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 a resident in a shared room is uncomfortable with others removing their mask, homes are encouraged to designate a space to enable the roommate to have visitors without masking.

In the event of an “outbreak” of an infectious disease, visitor access may be restricted as directed by the local Medical Officer of Health or provincial authorities. Presumably such restrictions will ensure that essential visitors (see definition above, regulation 267 (4)) continue to have access to the Home. Such matters are beyond the scope of the Home itself.

The Resident/SDM will identify designated caregivers and the home will keep record in resident’s plan of care.

The Administrator will ensure that a copy of this policy is provided to the Residents’ Council and Family Council, if any.

<u>Cross References:</u> HR-D-70 (Door Security)	<u>Attachments:</u> GA-B-60A (Visitor Log)
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