

Guidelines for Support Person/Visitors Acute Care, Long-Term Care Homes, Personal Care Homes, Community Care Homes, Private Residence

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1. Introduction

Temporary restrictions to visitation/attendance are in place at all provincially operated acute care facilities, health centres and long-term care homes; as well as privately operated long-term care homes, personal care homes, and community care homes to reduce the risk of possible transmission of COVID-19 to patients, residents and staff of these facilities/homes. These guidelines have been updated to reflect current epidemiology and population vaccination status and will continue to be monitored and updated accordingly. While visitation restrictions are in place, please give consideration to using alternate communication methods such as virtual visits and phone calls to maintain contact with your loved ones, when possible, rather than in-person visiting.

Exceptions to this guidance document may occur in the following situations:

- Public Health Orders/Special Measure Orders addressing visitation/visiting restrictions in acute care, long-term care homes, personal care homes, community care homes, assisted living facilities, and private residences will take precedence over the guidance provided in this document. To view all Public Health Orders/Special Measure Orders in effect, please visit <u>current Public Health Orders</u>.
- Regional health authorities have the discretion to implement additional restrictions to
 provincial guidance should the need arise due to the identification of COVID-19 outbreak
 sites and/or changes in COVID-19 prevalence within their service areas. These restrictions
 may include such things as limiting the number of visitors permitted by patient/resident;
 enhanced use of personal protective equipment; or restricting visitation in specific units in
 the health facility/home.

- To view the latest public service announcements for the regional health authority you wish to visit, please click on the appropriate link below.
 - Eastern Health: Eastern Health News Centre
 - Central Health: news, updates, advisories (centralhealth.nl.ca)
 - Western Health: <u>Western Health : Current Visitor Restrictions</u>
 - Labrador-Grenfell Health: <u>News 2021 Labrador-Grenfell Health (Ighealth.ca)</u>

Thank you for your cooperation in adhering to these guidelines and following public health measures designed to provide a safe environment to patients/residents and staff in health care facilities.

2. Overall Guidance for All Settings

2.1 General Visiting

- General visiting to acute care, long-term care homes, personal care homes, and community care homes will remain restricted as outlined in this document.
 - Individuals who are required to self-isolate are permitted to provide support/visit only in the specific situations outlined in Section 3.1 Obstetrics and Section 5 End-of Life Visiting

 All Facilities, and only in consultation with the clinical care team of the patient/resident.
- If any patient/resident is suspected to have COVID-19, personal protective equipment must be worn for the visit as per protocol. If a patient/resident is confirmed COVID-19 positive, limited visitation can occur in consultation with the care team.
- Visitor(s) must coordinate visits with the clinical care team of the patient/resident. When the individual leaves the facility/home, this is considered the end of the visit for the day, unless otherwise advised by the clinical care team.
- Patients/residents will be limited to two visitors per day, unless otherwise advised by the clinical care team.
- All support persons/visitor(s) must register upon arrival and be screened prior to the visit beginning. Visits will only proceed for individuals who meet the screening criteria.
- All support persons/visitor(s) are required to wear a face mask in indoor public spaces. The clinical care team will advise the support person/visitor(s) when additional personal protective equipment is required to be worn while with the patient/resident.
- Individuals who are feeling unwell or sick should not present for scheduled visits.
- Visitation may be suspended if visitors are not abiding by procedures/facility policies.

2.2 Support Person

- In-patients in acute care, and residents of long-term care, personal care homes, and community care homes, may identify a support person.
 - o A support person is an individual considered by the patient/resident's care team to be paramount to the resident's physical care and mental well-being, and can be a loved one, friend, or paid caregiver. They may provide assistance with feeding, mobility, personal care, communication assistance or assistance with significant behaviourial

symptoms. Not every patient/resident may require a support person and the need should be discussed with the clinical care team.

- o When possible, the support person should remain constant for the duration of the visiting restrictions at health care/residential care homes. Should the support person be unable to continue to provide the level of support required by the patient/resident, the identified support person can be changed in consultation with the clinical care team. In the event the patient/resident has a stay exceeding two weeks, the support person can be changed every fourteen days.
- The support person may visit when needed or requested by the patient/resident as coordinated with the clinical care team of the patient/resident, and is not limited to one daily visit.

Please note: Some areas may not be able to accommodate multiple support people/ visitor(s) due to the need to maintain physical distancing requirements. In these cases, clinical care teams will work with families to identify visitation options.

3. ACUTE CARE

3.1 Obstetrics

- The patient can have one support person and one doula attend the delivery.
 - o The support person can be an individual who is required to isolate, providing the individual is asymptomatic and abides by all infection prevention and control measures of the facility.
- The support person can continue to support the mother until discharge and they can stay for the duration of the patient's stay or come and go daily as required.
- Visitors are permitted after delivery to the time of discharge, as coordinated with the clinical care team.

3.2 Pediatrics

- Children who are in-patients can have both parents/guardians visit at the same time and there are no restrictions on the number of visits per day.
- Visitors must contact the hospital unit before visiting to confirm the visiting time and to become familiar with the visiting requirements of the care facility.

3.3 In-Patient Acute Care (Except for End-of-Life)

- One support person can attend/visit with an in-patient as coordinated with the facility staff.
- All other visitors must contact the hospital unit before visiting to confirm the visiting time and to become familiar with the visiting requirements of the care facility.
- Two visitors are permitted to visit one ICU/CCU patient at the same time.

3.4 Out-Patient Care

- All patients can be accompanied by one person, for emergency, outpatient and ambulatory care clinics, appointments or procedures, however in keeping with public health guidance to reduce the number of contacts wherever possible, patients are asked to carefully consider the necessity of an attendee when visiting the emergency room. To support that guidance, patients who can safely manage their interaction for out-patient care without assistance/support should attend unaccompanied.
 - All individuals presenting from the general public are considered patients, including individuals who are residents of long-term care homes, personal care homes, and community care homes.
 - When the patient is 18 years of age and under, both parents may be present.
- Patients who are accompanied by an attendee should be aware that during peak times, attendees who have remained in the waiting area may be asked to wait outside the facility, if possible, to ensure adequate space is available in the waiting area for patients. The care team will accommodate the attendee in the treatment area when requested by the patient.

4. LONG-TERM CARE/PERSONAL CARE HOMES/COMMUNITY CARE HOMES

4.1 General Information

- Refer to Section 2.0 for overall general guidance.
- Each resident can identify a support person who should remain constant for the duration of the visiting restrictions; however, the support person can be changed every fourteen days if necessary.
- Support person/visitor(s) must contact the home to coordinate the time of the visit and to ensure they are aware of all visiting requirements.
- A maximum of two people can visit per day, and two visitors can attend at the same time.

4.2 Visitation Options

- Homes may accommodate in-home and outdoor visiting, and must abide by public health guidance in establishing visiting options.
- Residents in need of assistance should be supported to attend a visit.
- Homes with sufficient indoor space, may work with residents and their families to organize gatherings for residents and their families for special occasions such as, but not limited to, milestone birthdays and anniversaries. Such gatherings are to be organized with administrative staff within the home and must be approved in advance on a case by case basis by home administration.

5. END-OF-LIFE VISITING – All Care Facilities

• Refer to Section 2.0 for overall general guidance.

5.1 Patients/Residents at End-of-Life

- Each patient/resident can identify a support person who should remain constant for the duration of the visiting restrictions; however, the support person can be changed every fourteen days if necessary.
- The clinical care team will discuss visiting protocols with the support person/visitor(s), and advise the number of visitors permitted at any time. In determining the visitation, consideration must be given to the prevalence of COVID-19 in the community, screening of visitors, and the physical space in the unit/room.
- All support persons/visitor(s) must register upon arrival and be screened prior to the visit beginning. Visits will only proceed for individuals who pass the screening criteria.
- One individual can be designated as the primary support person, and they will not be limited to one daily visit.
- Travelers who are not required to self-isolate and remain asymptomatic are permitted to visit patients/residents at end-of-life, as coordinated with the clinical care team.
- Two individuals can be present during a visit.
- As the patient/resident nears end-of-life, the clinical care team will discuss the coordination of visitors with the primary support person or substitute decision maker and decide the number of visitors permitted in the patient/resident room at any given time.

5.1.2 Visiting by Individuals who are required to Self-Isolate

- End-of life visiting by individuals required to self-isolate and are asymptomatic may be permitted only when the clinical care team has determined the patient/resident is nearing end-of-life (actively dying).
- Visitation by individuals during their isolation will only occur as discussed and coordinated with the clinical care team and the primary support person or substitute decision maker.

6 End-of-Life Visiting: Private Residence

6.1. Visiting by Individuals who are required to Self-Isolate

An individual traveling to see a family member at end-of-life who is living in their own home, must take the following actions:

- Contact the primary care provider for your family member 24 hours before entering the province to:
 - $\circ\,$ Advise that you will be coming to the province and will be in the home with your family member; and,
 - Determine the level of care and support you may or may not be able to provide to the person.
- If you are residing with the family member, please isolate in another area of the residence when other individuals, such as health care providers, are present.
- You may leave self-isolation only for the purpose of completing the visit.