

Social Visiting: Long-Term Care Facility (LTCF)

<p>Site:</p> <ul style="list-style-type: none"> • Environment <ul style="list-style-type: none"> ○ Long-term Care Island-Wide ○ Respite ○ Affiliates & Owned & Operated 	<p>Scope:</p> <ul style="list-style-type: none"> • Audience: Managers and Directors of Care (DOC), Charge Nurses, RN/RPN, LPN, Allied Health, LTC Leadership • Indications: Social Visiting • Exceptions: For Essential Visiting, Health Visiting or Palliative & End-Of Life Visiting—please refer to these guidelines specifically.
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Need to know:

- COVID-19 presents a significant threat to the health and safety of all residents in Long-term Care (LTC). Significant measures, including visitation restrictions, have been taken to limit the transmission of SARS-CoV-2, the virus responsible for COVID-19 in LTC homes, given the concerns regarding morbidity and mortality in the nursing care home population. The Ministry of Health (MOH) and BC Center for Disease Control (BC CDC) introduced social visiting on June 30, 2020 in order to support visits between family members and residents of LTC homes.
- This document supplements the [BC CDC & BC MOH Infection Prevention and Control interim Guidance for Long-term Care and Assisted Living](#) guideline and outlines additional specific direction for sites in Island Health.
- This document serves to provide guidance to all LTC operators regarding **social visiting** and will be subject to changes based on any future and/or additional MOH directives. Any visitation relating to end-of life or essential visiting are subject to guidelines relating to those specific matters.

1.0 General Principles

- Designated visits will be maximized at all sites while ensuring compliance with appropriate safety procedures.
- Sites will follow all existing infection control procedures required by the MHO and as outlined in [BC CDC & BC MOH Infection Prevention and Control interim Guidance for Long-term Care and Assisted Living](#)
- Resident and staff safety at the site remain the priority for each site and should not be compromised for unsafe designated visits.
- Each site will be responsible for developing, implementing and evaluating its own plan.

2.0 Decision-Making: Who is a Social Visitor?

- The decision of who the designated visitor must be done in a collaborative manner (care team must include resident/family +/- health care rep or Temporary Substitute Decision Maker {TSDM})

- Plan reflects resident as primary decision maker for determining designated visitor unless they have been deemed incapable of making the decision of who their visitor should be and/or if they want to include their family, health care rep or TSDM
- Designated Visitor will be one single person (no changes to occur)
 - Designated visitors are not limited by the single site order (i.e. the designated visitor could have visits in multiple LTC sites provided a site is not in outbreak).
 - Designated visitors can be health care staff at other facilities and are not limited in social visiting by the single site order
 - Designated visitor cannot be a child under the age of 18
- Communication re: expectations will be provided to resident and family (verbal & written), outlining the following:
 - Importance of facilitating designated visits
 - Collective Risk (i.e. health and safety for COVID-19 transmission for residents and visitors)
 - Collective Accountability and commitment to adhering to agreed guidelines to reduce risk for other visitors/residents/care providers
 - That the site is committed to maximizing designated visits within the stated safety guidelines.
- Site leadership should ensure there is clear documentation relating to the decision-making and process for social visiting.

3.0 Social Visiting: Operational Considerations

- Visiting Plan:
 - Every site must have a social visiting plan approved by Island Health LTC Leadership.
 - Site Leadership must ensure social visitation plan is reviewed monthly with updates made in accordance with direction provided by BC CDC, BC MOH and Island Health.
 - The visiting plan must outline safety measures including processes regarding how sites will ensure adherence for safety protocols (i.e. PPE use, hand hygiene and physical distancing).
 - The plan should be accessible for review or audit purposes by Licensing and/or Island Health LTC Leadership.
 - Site leadership should ensure a clear process for scheduling and co-ordinating social visiting, ensuring care team members are aware of process.
 - There is currently no parameters or mandates for sites to provide a specific number of social visits, however, expect sites to consider operations and aim to allow at least one social visit per week per resident
- Managing Complaints
 - Complaints can be directed to the Patient Care Quality Office (PCQO). However, the PCQO is not an appeal board and cannot overturn site decisions. PCQO serves as a forum for residents, families and designated visitors to bring forward their concerns. It remains the sites' responsibility to address and manage complaints.
 - Each site must ensure timely responsiveness to complaints regarding social visitation, collaborating with residents, families and Island Health to resolve any issues.
- Monitoring of Visits
 - Formal supervision of a visit is considered intrusive and there is no expectation or mandate for this practice

- Staff should be available to porter the visitor at the beginning of the visit to ensure visitor is apprised of expectations and practice regarding PPE, strict hand hygiene, physical distancing and respiratory etiquette.
- Staff should be available to the resident for a brief check in during the visit to ensure there are no resident unmet needs or questions from family.
- Gifts, Flowers & Food
 - There is no restriction regarding family who want to bring gifts, flowers and food provided:
 - Food is brought in a container with a wipeable surface
 - Outdoor food is permitted
 - Flowers remain subject to scent free policies
 - There is no indication to hold any items brought in by the designated visitor.
- Pets
 - Subject to the LTC Home Pet Policy, pets can be brought in by a designated visitor during the visit provided:
 - The pet visit is restricted to the resident they are visiting only.
 - The pet is not actively ill.
 - Established facilities pets are permitted to interact with residents, provided strict hand hygiene and physical distancing is reinforced.
- Visiting Location
 - The location for a visit can be: 1) resident's room provided it is a single room; 2) Designated visiting room in facility; or 3) Outdoor designated area.
 - The visit should occur on site in designated area.
 - The resident should not be taken off site.
 - Residents can go on a walk around the site (with the designated visitor), ONLY IF the site does not have a courtyard or area on site where the resident and visitor can walk. In this case, a health and safety plan would need to be developed by clinical leadership with designated visitor.

4.0 Social Visiting: Pre-Visit, Visit & Post-Visit Considerations

Pre-Visit

- Visitor must self-screen with the BC Self-Assessment Tool (<https://bc.thrive.health/covid19/en>) prior to attending visit and cancel visit if screen is positive
- Visiting Location must be cleaned prior to visit and identified as such by housekeeping
- Communication process must be reviewed with resident and visitor prior to visit
- Site staff must instruct visitor re: hand hygiene, personal protective equipment, respiratory etiquette and safe physical distancing (i.e. 2m)
- Site Staff must maintain a visitor List with Contact Information (Phone number or email for Public Health Contact Tracing) and Visitor must provide up to date contact information

Visit

- Visitor must be screened at Greeter Station upon arrival (must comply with facility policy)
- Visitor must go directly to location for visit
- Visits are limited to 90 minutes
- # of daily, weekly visits based on operations and ability to accommodate safely

- Visitor must wear appropriate PPE as directed by staff (medical grade mask provided by site staff)
 - Home made or other masks brought by the visitor are not permitted. Medical grade masks must be provided by the site.
 - Masks must be worn inside the building at all times. Masks can be removed if the visit is outdoor and physical distance of 2m is maintained.
- Visitor and resident are encouraged to minimize physical touching with the following considerations:
 - Visitors must keep their mask on during the visit at all times (unless outside and >2m apart)
 - Sitting within 2 m is permitted provided a mask is worn
 - Embracing, kissing and holding the hand of a resident is allowed provided strict hand hygiene, appropriate respiratory etiquette and mask is worn.

Post Visit Requirements

- Visitor must perform hand hygiene with alcohol-based rub (70%) when leaving the visit location and after doffing mask
- Visitor must doff mask at the exit from facility
- Visitor must leave site immediately following visit

5.0 Social Visiting: Persons under Admission Isolation & Respite

In addition to above considerations, for residents who are under admission isolation and for those who are in a facility for respite, visitation is allowed for provided adherence to the following:

- A. The resident is not considered a person under investigation (i.e. does not present with any symptoms or signs consistent with COVID-19) and is not on isolation for any other pathogen
- B. The visitor complies with the LTC Social Visitor Policy:
 - i. Only one designated visitor for each resident (cannot change designate)
 - ii. The visitor has not had any exposure to COVID-19 in the community setting
 - iii. The visitor has not travelled internationally in the last 14 days (or has completed mandatory 14-day self-isolation)
 - iv. The visitor complies pre-visit, visit and post-visit requirements (see section 2.0)
 - v. The visit can ONLY occur in the resident's room which must be a private room in which the resident is the only occupant.
 - vi. The visit can be up to 90 minutes
 - vii. There are no facility operational constraints limiting the ability for the visit to occur

Persons/Groups Consulted:

Medical Health Officer, Communicable Disease Nurse, Infection Control and Prevention Practitioners, Long-term Care Executive Leadership, Long-term Care Clinical Experts, LTC COVID-19 Practice Council

Resources

- BC CDC & BC Ministry of Health (2020): [Social Visiting Poster](#)
- BC CDC & BC Ministry of Health (2020). [Updated Visitor Guidelines](#)
- BC CDC & BC Ministry of Health (2020). [Infection Prevention and Control Requirements for COVID-19 in Long-term Care and Seniors' Assisted Living](#)

- Ministry of Health (2020). [Policy Communique: Infection Prevention and Control for Novel Coronavirus \(COVID-19\)](#)