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Interim Family Presence Reintegration Policy & Procedure - COVID-19

Signing Authority: | Chief Executive Officer

Approval Date: 16-DEC-2020 Effective Date: 21-DEC-2020

POLICY STATEMENT:

As the novel coronavirus (COVID-19) situation continues to evolve, Royal Victoria Regional Health Centre (RVH) is taking additional precautions to keep patients, families, staff, physicians and volunteers safe in accordance with Ontario Health (OH) directives and guidance, including temporary changes to the Family Presence visiting policies. RVH is committed to patient and family-centered care and will make every effort to ensure that the needs of patients and families are met while the temporary guidelines issued by Ministry of Health (MOH) and/or Public Health are in effect.

DEFINITIONS:

Definition of a Vulnerable Patient:

Someone who is or may be for any reason unable to protect and take care of themselves against significant harm or exploitation (e.g. patient under 18 years of age, has a cognitive impairment, significant developmental and/or intellectual disability, frail elderly, has mobility concerns, or is unable to effectively communicate).

Vulnerable patients may have an essential visitor who is designated by the patient or Substitute Decision Maker (SDM). The essential visitor is there to provide direct care to the patient (i.e. supporting feeding, mobility, personal hygiene, cognitive stimulation, and assistance with decision-making).

Definition of a Visitor:

For the purposes of this document, a visitor is defined broadly as any person who is entering the hospital or an offsite location to be physically present with a patient. This is inclusive of the definition of essential visitors articulated in the *Ministry of Health (MOH) COVID-19 Operational Requirements: Health Sector Restart.*

Visitors may include, but are not limited to, family members, care partners, caregivers, support persons, and friends. The patient, if capable, or the SDM of a patient who is incapable, will identify who the designated visitor(s) will be.

Designated visitors must be over the age of 16 years of age. The ability of the visitor to follow RVH issued infection control practices should be assessed and/or ensure appropriate supervision is available to adhere to any requirements.



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Visitors who meet the following criteria will not be allowed entry:

- Current symptoms of fever, sore throat, runny nose, nasal congestion, upper respiratory tract infections (URTI) including new or worsening cough, shortness of breath, diarrhea, vomiting, or abdominal pain. For a list of up to date symptoms please visit the MOH website.
- COVID-19 positive and have not been cleared by Public Health.
- Anyone who has tested positive for COVID-19 and/or has been exposed to or had direct contact with someone who has tested positive for COVID-19 and have not been cleared by Public Health.
- Visitors who may have traveled (including within Canada (outside the Province of Ontario) and international) within the 14 days preceding onset of symptoms.
 - o Please review the Government of Canada's Official Global Travel Advisories (https://travel.gc.ca/travelling/advisories).
- A representative from Infection Prevention and Control (IPAC) will be called to review individual cases where additional assessment is required. Contact IPAC at x44555 during daytime hours and IPAC on-call support off hours can be reached through Locating.
- COVID-19 positive patients who meet the exceptions criteria should have access
 to essential visitors through proactive consultation of hospital Infection Prevention
 and Control (IPAC) specialists, clinical teams, and in collaboration with the local
 Public Health team.
- In general, COVID-19 positive individuals who are considered infectious or those who are considered exposed close contacts should not be visiting, as they should be self-isolating. In exceptional circumstances, and on a case-by-case basis, this can be discussed in consultation with local Public Health, IPAC and the clinical team to ensure that a plan can be safely made in advance. Examples of strategies in the plan may include, but are not limited to the following: visitor escorted with mask, hand-hygiene education, instructions to stay at the bedside, brief visit duration, escorts wear personal protection equipment (PPE). See Appendix VIII: Visitor Process for COVID-19 Patients

PROCEDURE:

Guiding Principles

- Promote safety for Team RVH, patient and their families.
- Promote patient and family centred care practices.
- RVH will follow the current Ontario Ministry of Health (MOH) guidance regarding patient visitor recommendations.



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- Minimize risk of COVID-19 exposure to staff, volunteers and physicians.
- Minimize risk to patient safety and preventing community spread of infection into RVH as per MOH guidelines by reducing the number of family members and visitors entering the hospital premises.
- RVH will support virtual partnerships in care using technology, where physical family presence is not possible, to support the holistic wellbeing of patients.
- RVH will manage the use of PPE and other resources vital to controlling the exposure and spread of COVID-19.
- RVH will follow the guiding principles outlined in the RVH Ethical Framework Policy.

Visitation

- Visiting is restricted and only allowed as defined by the exceptions noted below.
 Visitor groupings do not distinguish between family, caregivers, friends or privately paid supports (See RVH Policy and Procedure: Regulated and Non-Regulated Privately Employed External Healthcare Providers).
- Visitation for patients must be determined based on circumstances surrounding the individual patient and the contextual considerations of the hospital within the pandemic.
- One (1) Visitor or delegated alternate is allowed based on the hospital's screening process. Duration and frequency will be based on the patient population (See Appendix I: *Phased Approach to Lifting Visitor Restrictions Based on Patient Type*).
- The visitor will need to be assigned by the patient or SDM. The designated individual along with their contact information will be listed on the Visitor List.
- In some instances, the clinical team may consider more than one visitor. This
 information must be communicated to the Manager or designate or escalated to
 Hospital Service Leader (HSL) if any issues or concerns arise after hours.
- In the event that there is an unplanned exception that needs to be made, the Manager or designate or HSL along with IPAC will help make the decision.
- All teams must base their decisions as per Appendix I: Phased Approach to Lifting Visitor Restrictions Based on Patient Type.

Visiting Hours and Restriction

- The hospital will permit on-site visitation during predetermined scheduled times which may be subject to change based on the safety framework outlined by the MOH.
- For visiting hours during each phase of the Family Presence Reintegration Policy
 Procedure, please see Appendix II: Phased Visitation Hours.



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- In an effort to restrict the number of visitors, each unit may schedule up to a maximum of 10 visitors per hour:
 - Only 1 visitor per patient
 - Only 1 visitor at a time in each semi/ward room
 - Visits to be no more than 1 hour in length (refer to Appendix I)
- All visits will be scheduled on each unit using the Visitor Schedule
 - Visitor Schedule Link: Visitor Log
- Family members are to contact the unit to schedule a visit.
- Unit Managers and/or Resource Nurses will complete the Visitor Schedule for the following day for access by the screening team by 0600 hours on a daily basis.

Screening and Visitor Identification at All Designated Hospital Entrances

- Approved visitors will be screened at the designated entrance(s).
- Visitors must meet the screening criteria approved by the RVH before being permitted to enter the building. Visitors who fail the screening will be denied access.
- All visitors entering the hospital must wear a face mask (limited exclusion considerations will be assessed where required). Depending upon local transmission rates within the community and the public health measures in place visitors may wear their own mask, or they may be directed to exchange for a procedural mask. If the visitor does not have a mask or their mask is deemed unacceptable by the Screeners, they will be provided with one procedure mask at the entrance.
- The mask must cover the nose and mouth and be worn at all times.
- A representative from Infection Prevention and Control (IPAC) will be called to review individual cases where additional assessment is required.
- In order to ensure there are no more than the maximum allocated number of visitors on any unit at one time, individuals must be scheduled on the visitor schedule. Those who are not on the approved Visitor Schedule may be asked to wait while the Screener team confirms with the unit whether or not the individual should be included on the approved Visitor Schedule. Visitors may be asked to return when a visit is scheduled.
- Visitors will be provided with an ID sticker to support visual management and indication of passed screening. A new sticker must be worn each visit and need to be left on for the duration of the visit.
- Written materials related to visiting and PPE protocols are available and should be provided as required.

Visitor Education and Support



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<u>Visitors must adhere to the following:</u>

All visitors will be provided written material by the Screeners, (see Appendix VI), prior to entering the building, which includes the following:

- All visitors are instructed to wear a mask covering their nose and mouth when entering the hospital. The mask must be worn properly at all times during the visit.
- If visit is to an inpatient unit, the visitor shall be instructed to check-in and out at the nursing station on their patient's unit and sign the Visitor Log (see Appendix III).
 - The visitor sticker shall be worn and is required to be visible and must remain on at all times.
- The visitor will not proceed to the patient room without checking in at the nurse's station first.
- Visitors shall complete all appropriate education related to hand hygiene, PPE stewardship and use, elevator etiquette, and PPE donning and doffing if required.
- Visitors shall wash their hands and if necessary wear any additional PPE if required at all times.
- Visitor shall go directly to and from the unit (no stopping at any of the hospital food vendors) and shall restrict their presence to the patient's bedside as much as possible.
- Visitors are not permitted to use any common areas in the building with the exception of designated public washrooms.
- Visitors are not permitted to leave the premises and return within the hour, i.e. leave to smoke a cigarette.

Support for Family Members/Caregivers

- Staff will help connect patients with their family members to support meaningful connections to minimize feelings of isolation.
- Staff can assist patients to connect with their families (if permitted) using patients'
 personal devices, hospital approved devices or the Patient Service Entertainment
 Systems (PSES).
- For patients with limited English proficiency, language lines and translation services will be made available.
- For patients with disabilities, accommodations will be made by the healthcare team.
- Education is available by the screening/IPAC and healthcare teams to support compliance with infection control practices (e.g. PPE and hand hygiene) and social distancing.
- Patient and family members should be encouraged to visit the RVH website for updates.

All Clinical Areas

Accountability and Responsibility



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- All healthcare team members are responsible to provide visitors with education and provide ongoing support re: RVH masking policy, social distancing, hand hygiene, and PPE donning and doffing instructions provided by the care team. If required, support for education is available. Patient letter and FAQ document shall be provided to patient/SDM upon admission to the unit (See Appendix V and VI).
- All visitors are responsible to follow RVH policies and protocols such as masking policy, social distancing, hand hygiene, and PPE donning and doffing instructions provided by the care team.

<u>Documentation</u>

All Visitor Logs shall be kept in a binder on each of the units. The documents will be maintained for a minimum of 30 days. **These documents are required for contact tracing through Public Health and must be completed** (See Appendix III: *RVH Visitor Log*).

IPAC Considerations

 All patients will be cared for using Infection Prevention and Control Routine Practices and Additional Precautions as outlined in Provincial Infectious Diseases Advisory Committee (PIDAC): Routine Practices and Additional Precautions, Ministry of Health as per RVH policy. All staff will perform hand hygiene as per RVH policies. Visitors experiencing any symptoms as per screening criteria will not be permitted to visit, extenuating circumstances subject to review by the Manager, designate or HSL along with IPAC and Public Health if necessary.

RVH In-patient Areas

Unit Specific Processes

- The healthcare team will identify the Patient Type in accordance with Appendix I.
- Resource Nurse/ Manager to review the Visitor Schedule to approve all identified
 patients and the scheduled visitor times that align with the restrictions in Appendix I.
- Primary nurse to confirm the time of the scheduled visit when providing daily update to family.
- Unit Clerks to monitor daily Visitor Log and inform Resource/Primary nurse if visitor has not checked out/left at the designated time.
- The approved Visitor Schedule must be updated daily in the shared folder for access by the screening team by 0600 hours for the day of visit.

Accountability and Responsibility



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- The Resource/Primary nurse is responsible for documenting in the patient's chart on admission the designated visitor and alternate visitor.
- The Manager/designate is responsible for reviewing and approving the Visitor Schedule to ensure it is updated daily in the sharepoint link for access by the screening team by 0600 hours for the day of visit.
- The Unit Clerk/designate is responsible for completion of the Visitor Log (see Appendix III) on their respective unit by any visitors arriving at or leaving the unit.

Ambulatory Areas

Unit Specific Processes

 The healthcare team will identify the Patient Type in accordance with Appendix I and will advise, where possible, if accompanying visitors are permitted.

RVH Emergency Department (ED)

Unit Specific Processes

For patients who meet criteria based on Appendix I:

- ED Team member documents in the patient's chart the visitor's name and contact information
- If patient is admitted, please refer to the In-patient Areas Unit Specific Processes.

CROSS REFERENCES:

- Royal Victoria Regional Health Centre (2018). Corporate Administrative Policy and Procedure: *Ethics Framework*
- Royal Victoria Regional Health Centre (2019). Corporate Clinical Policy and Procedure: Regulated and Non Regulated Privately Employed External Healthcare Providers.
- Royal Victoria Regional Health Centre (2019). Corporate Clinical Policy and Procedure: Routine Practices in Infection Prevention and Control.
- Royal Victoria Regional Health Centre (2018). Corporate Clinical Policy and Procedure: *Additional Precautions in Infection Prevention and Control.*

REFERENCES:

Ontario Ministry of Health (2020). COVID-19 (coronavirus) in Ontario. Retrieved from https://covid-19.ontario.ca



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- Ontario Ministry of Health (2020). COVID-19 Regional Public Health measures and restrictions. Retrieved from https://covid-19.ontario.ca/zones-and-restrictions
- Ontario Ministry of Health (2020). COVID-19 Reference Document for Symptoms. Retrieved from

http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019 reference_doc_symptoms.pdf

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APPENDIX I: PHASED APPROACH TO LIFTING VISITOR RESTRICTIONS BASED ON PATIENT TYPE

Maximum number of visitors dependent on ability to have adequate physical distancing, PPE and screening.

Patient Type	Description	Grey Zone (Most Restrictive)	Red Zone (Restrictive)	Orange Zone (Moderately Restrictive)	Yellow Zone (Least Restrictive)	Green Zone (Return to Family Presence Policy)
Health I	nes of Public Measures	Lockdown	Control	Restrict	Protect	Prevent Phase
		IFE ALTERING EVE	NT* 5 visitors per unit where p	ossible		
End of Life (including MAID and withdrawal of life-sustaining treatment)	Patient with high risk of dying within the next 24 to 48 hours	Visitation permitted at the discretion of the care team	Maximum of 2 visitors at a time Maximum of 2 designated visitors in total Duration of visit at the discretion of the team Cultural /spiritual practices to be enabled	Maximum number of designated visitors and duration of visit at the discretion of the team Cultural /spiritual practices to be enabled	Maximum number of designated visitors and duration of visit at the discretion of the team Duration of visit at the discretion of the team Cultural/spiritual practices to be enabled	Pre COVID- 19 Family Presence Policy.
	Patient with high risk of dying within the next two weeks	No visitation permitted (exceptions made at the discretion of the care team)	1 time goodbye visit with no time limit in 24 hour period Maximum of 2 designated visitors in total Duration of visit at the discretion of the team Cultural /spiritual practices to be enabled	1 visitor per day Maximum number of designated visitors and duration of visit at the discretion of the team Cultural /spiritual practices to be enabled	2 visitors per day Maximum number of designated visitors and duration of visit at the discretion of the team Cultural /spiritual practices to be enabled	Pre COVID- 19 Family Presence Policy.
Child Birth	Patient in labour and delivery	1 visitor for labour and delivery support and to stay as long as mother requires assistance with care for infant	1 visitor for labour and delivery support and to stay as long as mother requires assistance with care for infant	1 visitor for labour and delivery support and to stay as long as mother requires assistance with care for infant.	2 visitors for labour and delivery and to stay as long as mother requires assistance with the infant	Pre COVID- 19 Family Presence Policy.



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Patient Type	Description	Grey Zone (Most Restrictive)	Red Zone (Restrictive)	Orange Zone (Moderately Restrictive)	Yellow Zone (Least Restrictive)	Green Zone (Return to Family Presence Policy)
	The Five Zones of Public Health Measures		Control	Restrict	Protect	Prevent Phase
	Postpartum patient	1 visitor (same visitor as above) during postpartum until discharge or when mother no longer requires assistance	1 visitor (same visitor as above) during postpartum until discharge or when mother no longer requires assistance	1 visitor (same visitor as above) during postpartum until discharge or when mother no longer requires assistance	2 visitors (same visitors as present for labour and delivery) during postpartum until discharge or when mother no longer requires assistance	Pre COVID- 19 Family Presence Policy.
Same Day Surgery and Endoscopy procedures	Patient having invasive operative procedure in the Operating Room (OR), Interventional Radiology (IR) or Cardiac Intervention Unit (CIU)	No visitation permitted (exceptions made at the discretion of the care team)	No visitation permitted (exceptions made at the discretion of the multidisciplinary care team)	1 visitor permitted to accompany patient to outpatient appointment only if support is required as per patient description and at request of MRP	1 visitor to accompany paitnet to outpatient appointment only if support is required as per patient discription	Pre COVID- 19 Family Presence Policy.
Critical Illness (ADULT ONLY)	Patient is acutely critically ill (excludes those who are long-term stable vented patients)	No visitation permitted (exceptions made at the discretion of the care team)	 During period of acute critical illness 1 visitor per day Duration of visit at the discretion of the team 	 During period of acute critical illness, 1 visitor at a time Maximum of 2 designated visitors in total Duration of visit at the discretion of the team 	During period of acute critical illness, 2 visitors at the time Maximum of 2 designated visitors in total Duration of visit at the discretion of the team	Pre COVID- 19 Family Presence Policy.
Mental Health Crisis (adult & child and youth patients)	A situation in which a patient's actions, feelings, and behaviors may lead to them harming themselves or others	No visitation permitted (exceptions made at the discretion of the care team)	 During period of crisis, 1 visitor at a time Team to assess for more visits after 24 hours Exception: a patient presenting in Extra Care Area (ECA) or Mental Health Suites (MHS) or on a Form 1, may be prohibited a visitor for up to 72 hours for assessment and stabilization. 	 During period of crisis, 1 visitor daily Maximum of 2 designated visitors in total Exception: a patient presenting in ECA or MHS or on a Form 1, may be prohibited a visitor for up to 72 hours for assessment and stabilization. 	During period of crisis, maximum of 2 visitors at a time Maximum of two designated visitors in total Exception: a patient presenting in ECA or MHS or on a Form 1, may be prohibited a visitor for up to 72 hours for assessment and stabilization.	Pre COVID-19 Family Presence Policy. Exception: a patient presenting in ECA or MHS or on a Form 1, may be prohibited a visitor for up to 72 hours for assessment and stabilization.



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Patient Type	Description	Grey Zone (Most Restrictive)	Red Zone (Restrictive)	Orange Zone (Moderately Restrictive)	Yellow Zone (Least Restrictive)	Green Zone (Return to Family Presence Policy)
	nes of Public Measures	Lockdown	Control	Restrict	Protect	Prevent Phase
CATEGORY 2:	VULNERABLE, EN	MERGENCY CARE 8	NCY CARE & AMBULATORY PATIENTS			
Paediatric (under 18 years and Neonates)	Children aged under 18 years	1 support person with child during child's hospitalization	1 visitor daily Maximum of 2 designated visitors during child's hospitalization Time limit based upon child's needs	1 visitor daily 1 additional visitor 2 times a week Maximum of 2 designated visitors during child's hospitalization No in an out privileges Time limit based upon child's needs	2 visitors daily Maximum of 2 visitors during child's hospitalization In and out privileges at the discretion of the care team Time limit based upon child's needs	Pre COVID- 19 Family Presence Policy. •
Vulnerable Patients	Someone who is or may be for any reason unable to protect and take care of themselves against significant harm or exploitation (e.g. patient under 18 years of age, has a cognitive impairment, significant developmental and/or intellectual disability, frail elderly, has mobility concerns, or is unable to effectively communicate).	No visitation permitted (exceptions made at the discretion of the care team)	All admitted patients are allowed 1 essential visitor for 1 hour/visit or at the discretion of the team. Maximum of 2 designated visitors to be in rotation during a patient's stay.	All admitted patients are allowed 1 essential visitor per day. Duration of visit at the discretion of the team. Maximum of 2 designated visitors to be in rotation during a patient's stay.	All admitted patients are allowed 1 designated visitor per day. Duration of visit at the discretion of the team. Maximum of 2 designated visitors to be in rotation during a patient's stay.	Pre COVID- 19 Family Presence Policy.



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Patient Type	Description	Grey Zone (Most Restrictive)	Red Zone (Restrictive)	Orange Zone (Moderately Restrictive)	Yellow Zone (Least Restrictive)	Green Zone (Return to Family Presence Policy)
	The Five Zones of Public Health Measures		Control	Restrict	Protect	Prevent Phase
Emergency Care Patients	Vulnerable Patients (as defined above) who present to the ED. Pregnant patients with complications Mental Health patients who would benefit from a support person present (e.g. significant anxiety, delusions, threats of harming themselves) Patient who are acutely critically ill Patient with a high risk of dying in the next 24hrs	No visitation permitted (exceptions made at the discretion of the care team)	1 visitor to stay with patient in ED only if support is required as per patient description. Visitor to stay with patient only when in a defined room excluding waiting room areas	1 visitor to stay with patient in ED only if support is required as per patient description. Visitor to stay with patient only when in a defined room excluding waiting room areas	1 visitor to stay with patient in ED only if support is required as per patient description. Visitor to stay with patient only when in a defined room excluding waiting room areas	Pre COVID- 19 Family Presence Policy.
Ambulatory Care Patients	Patients who require a visitor for support (e.g., vulnerable patient, communication or significant mobility disability)	No visitation permitted (exceptions made at the discretion of the care team)	1 visitor to accompany patient to outpatient appointment only if support is required as per patient description.	1 visitor to accompany patient to outpatient appointment only if support is required as per patient description.	1 visitor to accompany patient to outpatient appointment only if support is required as per patient description.	Pre COVID- 19 Family Presence Policy.



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Patient Type	Description	Grey Zone (Most Restrictive)	Red Zone (Restrictive)	Orange Zone (Moderately Restrictive)	Yellow Zone (Least Restrictive)	Green Zone (Return to Family Presence Policy)
	nes of Public Measures	Lockdown	Control	Restrict	Protect	Prevent Phase
CATEGORY 3:	OTHER PATIENTS	3				
Inpatient Medical/ Surgical Patients	Patients who are admitted to hospital	No visitation permitted (exceptions made at the discretion of the care team)	1 visitor, 1 visit per week Maximum of 2 designated visitors in total	 All admitted patients are allowed 1 designated visitor 2 visits per week during visitation hours Maximum of 2 designated visitors to be in rotation during a patient's stay. Visits to be no more than 1 hour in length. 	 All admitted patients are allowed 1 visitor per day during visitation hours 1 designated visitor per day with a maximum of 2 designated visitors to be in rotation during a patient's stay. Visits to be no more than 1 hour in length. 	Pre COVID- 19 Family Presence Policy.
Rehabilitation Patients	Patients who are admitted to hospital and receiving rehabilitation	No visitation permitted (exceptions made at the discretion of the care team)	1 visitor, 1 visit per week Maximum of 2 designated visitors in total May require 1 visitor daily at the discretion of the care team during the last two weeks of rehabilitation to involve family and patients working together on specific goals in aid of transitioning home if warranted.	All admitted patients are allowed 1 visitor 2 visits per week during visitation hours. Duration of visit to be aligned with rehabilitation care plan at the discretion of the team. 1 designated visitor per day with a maximum of 2 designated visitors to be in rotation during a patient's stay. May require 1 visitor daily at the discretion of the care team during the last two weeks of rehabilitation to involve family and patients working together on specific goals in aid of transitioning home if warranted.	 All admitted patients are allowed 1 visitor per day during visitation hours. Duration of visit to be aligned with rehabilitation care plan at the discretion of the team. 1 designated visitor per day with a maximum of 2 designated visitors to be in rotation during a patient's stay. May require 1 visitor daily at the discretion of the care team during the last two weeks of rehabilitation to involve family and patients working together on specific goals in aid of transitioning home if warranted. 	Pre COVID- 19 Family Presence Policy.



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APPENDIX II: PHASED VISITATION HOURS

Grey Zone- Lockdown (Most Restrictive)

No visitation permitted at RVH

(exceptions apply for patients with life altering events)

Red Zone- Control (Restrictive)

Visitation Hours:

Inpatient Units: 7 days a week between the hours of 10:00am – 1:00pm and 5:00pm – 8:00pm.

Mental Health: 7 days a week between the hours of 4:00pm – 8:00pm.



Orange Zone- Restrict (Moderately Restrictive)

Visitation Hours:

Inpatient Units: 7 days a week between the hours of 10:00am – 1:00pm and 5:00pm – 8:00pm.

Mental Health: 7 days a week between the hours of 4:00pm – 8:00pm.



Yellow Zone- Protect (Least Restrictive)

Visitation Hours:

7 days per week between the hours of 9:00am – 8:00pm

Mental Health (Child and Youth): 7 days a week between the hours of 4:00pm – 8:00pm.

Mental Health (Adult): 7 days a week between the hours of 9:00am - 8:00pm.

Green Zone- Prevent (Return to Family Presence Policy)

Visitation Hours:

7 days per week, 24 hours per day.

Mental Health (Child and Youth): 7 days a week between the hours of 4:00pm – 8:00pm. Mental Health (Adult): 7 days a week between the hours of 8:00am - 8:00pm.



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APPENDIX III: RVH VISITOR LOG

RVH Royal Victoria Regional Health Centre	Date Unit
Daily Visitor Log	

	Patient	Bed	Time In	Visitor Name (Printed clearly)	Telephone	Time Out
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
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Appendix IV: Staff Tip Sheet



Staff talking points / tip sheet for clinical staff Resumption of visitors - Phase 1 July 2020

What you need to know:

- Effective July 27, RVH will ease visitor restrictions while maintaining strict safety precautions.
- This is part of a gradual plan to safely reintroduce visitors.
- Patients or their Substitute Decision Maker (SDM) may identify one visitor and one alternate.
- One visitor per week per patient only between 10 a.m. to 1 p.m. OR 5 to 8 p.m.
- Visitors must schedule their visit before 4 p.m. the day before they do this by calling the unit directly.
- Visits cannot exceed one hour.
- No more than 15 visitors on the unit at any given time.
- Only one visitor in a shared patient room at a time.
- All visitors must maintain 2m (6ft) distance between patients and visitors, as well as RVH team members.

Screening:

- Most visitors will used the Main entrance, unless directed otherwise.
- Upon arrival, they will be screened for COVID-19 symptoms, asked to wash their hands, and provided with educational infection prevention and control material.
- All visitors will wear a clean mask (provided for them if they do not arrive with one). It must be worn throughout
- Their name will be checked on the master list and then they will proceed directly to the unit.

Visitors who meet the following criteria will not be allowed entry:

- Anyone exhibiting the following signs or symptoms:
 - Fever, cough, difficulty breathing, difficulty swallowing, sore throat, runny nose, loss of taste or smell. nausea, vomiting, diarrhea
- Anyone who is known or suspected COVID-19 positive and has not been cleared by Public Health.
- Anyone who is a contact of a known COVID-19 positive individual.
- Have travelled in past 14 days outside of Canada.

Your role:

Identifying and monitoring visitors:

- The patient's primary nurse will record the names of the two designated visitors in the patient's chart.
- The unit clerk will take the phone calls to book appointments.
- The unit clerk will ensure the visitor, after buzzing in, signs the visitor log book.
- The unit clerk will monitor the time and let the visitor know they have to leave if they have exceeded the hour.
- If the visitor refuses to leave, dial 55 for security assistance.
- The visitor is not permitted anywhere else on the unit or the health centre except in the patient's room; exception being use of public washroom.
- . Visitors are not permitted to leave and return within their hour time slot (i.e. go outside, go to the car); once a visitor leaves the unit, the visit is complete.
- Visitors without appointments will not be allowed in.
- Exceptions may be made on compassionate grounds.

Ways to support visitors:

- Educate visitors on the appropriate donning and doffing of PPE if that is required to enter the room.
- Remind the visitor to wash their hands before entering and after exiting the patient room.
- Remind them to call before 4 p.m. the day prior if they want to book another visit.



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Speaking points to potential patient questions

Why can't I have more than two people on my list?

It's important we minimize the number of people coming into the building to keep you, your visitor and our staff
safe. This is just the first step of re-opening RVH to visitors. Remember: COVID is still circulating in our
community and we must be cautious. We hope in the near future we can get back to more visitors at any time in
the day, but for now, we need to start small – and stay safe.

Why can only one person visit me per week?

We want to make sure that every patient has a chance to visit with a family member or loved one and we need to
limit the number of people in the building. Limiting to just one visit per patient each week means that everyone will
have the opportunity to have a visitor in.

Why can they only visit me for an hour?

We want to make sure that anyone who wants to have a visitor can have one and we need to keep the number of
people inside the building manageable. By keeping visits at one hour each, more patients will have the chance to
visit with a family member or loved one.

Why can't my children visit me?

It's important that we minimize the number of people coming in to the building, and ensure that everyone who
enters is strictly following public health guidelines – wearing an appropriate mask, maintaining a distance of two
metres and washing their hands. Our focus, at this time, is to minimize the risk to you.

Can my visitors bring me food/gifts?

Yes, your visitor can bring you food and gifts. We don't recommend keeping valuables in the hospital with you
though. Send anything valuable home with your family member. Food should not be shared and should be
individually packaged. Food should not be warmed in hospital microwaves or stored at the bedside or in hospital
fridges.

Visitor questions:

I am booked for xx o' clock tomorrow. How do I change my time?

I can check for you to see if there are any available time slots, but if not, sorry, we can't adjust time. This ensures
everyone who wants to visit gets the chance to do so. However, care teams will work with visitors to find
alternative times.

Why are you making me leave?

To be fair to all patients and their visitors, we have to limit the time to no more than an hour to ensure everyone
gets a chance to see their family member or a loved one. If you've booked a time for next week, we'll see you
then. If you haven't, you need to book before 4 p.m. the day before coming. Thank you so much for
understanding – we are trying to be fair to everyone.

Why do I have to wear a mask?

Public health has mandated that everyone has to wear a mask in enclosed public places – this is not just for your
protection, but also for the patient and their caregivers. Masks keep everyone, including you, safe. You must
keep the mask on throughout your entire visit.



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Appendix V: Visitor FAQ



Visitors resumption Frequently Asked Questions (FAQs) July 2020

As the number of new COVID-19 cases continues to decline in North Simooe Muskoka, Royal Victoria Regional Health Centre (RVH) is pleased to welcome visitors back as part of its safe, phased plan to resume visitation as of Monday, July 27.

Why was visiting suspended?

All visitors, with some exceptions, were suspended in mid-March due to the COVID-19 pandemic and at
the direction of the provincial government. It was important to limit the number of people in the health
centre to stop the spread of the virus and as an extra safety measure for patients and our team. It was
also an important measure to preserve Personal Protective Equipment, such as masks, which were in
short supply in the early days of the pandemic. The visitor suspension was consistent across all hospitals
in the province.

Why are we allowing visitors now?

- Family and loved ones play an important role in a patient's recovery and given the reduced rates of community transmission, we can begin to safely welcome visitors back in to the building, but with strict guidelines in place.
- This will be monitored closely and if more restrictions need to be put in place, they will be.
- The Ministry of Health has established guidelines for visitors and most hospitals in the province are beginning to permit visitors.

Who can visit?

- Admitted patients will be asked to identify two people as their designated visitors. If the patient is not
 capable, their Substitute Decision Maker or Power of Attorney can designate on their behalf. The patient's
 primary nurse will document the designated visitors in the patient's chart. Visitors must meet the following
 criteria:
 - No one under the age of 16 will be permitted.
 - If a visitor is unwell, they will not be permitted to visit.
 - Most visitors will use the Main entrance, unless directed otherwise.
 - Visitors will be screened upon entry to the building and if they do not pass the screening, they will not be allowed to enter.
 - Visitors must wear a mask at all times while in the building.
 - Appointments must be booked by 4 p.m. the day prior.
 - Ambulatory patients coming to RVH for an outpatient procedure or clinic visit will be allowed one support person only in circumstances where assistance is needed. That support person should be identified at the time the appointment/treatment is booked.
 - Exceptions do apply based on compassionate grounds and accompanying minors.

Can anyone visit, at any time?

- · At this point, we are not ready to resume our usual "open" 24/7 visitation.
- Visiting times must be scheduled in advance.
- Designated visitors will book their visit with the patient's care team by calling the inpatient unit directly.
 Visitors must be on an approved list to be permitted entry.
- In Phase 1 patients will be allowed one visitor (over 16 years of age) per week; some exceptions may apply on compassionate grounds.
- Those visits will occur during two visitation time blocks:



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- 10 a.m. to 1 p.m. and 5 to 8 p.m. daily
- Visits are limited to no more than one hour at a time
- No more than one visitor in a patient room at any time. To ensure safe physical distancing, visitation will be staggered for patients sharing a room.
 - Total number of visitors on a unit will be limited to 15 at a time.
 - For RVH's Mental Health program visiting hours are 4 p.m. to 8 p.m.

Visitors in Emergency and Ambulatory Care

Ambulatory and Emergency patients are permitted one essential support person to accompany them if
assistance is required. Examples of situations where an ambulatory patient needs support could include
cognitive, communication or mental health challenges, frail elderly, etc. This is at the discretion of the care
team.

What precautions are in place?

- All visitors must use RVH's main entrance where they will be screened for COVID-19 symptoms. Visitors
 who fail screening will be denied entry to the health centre.
- Visitors must bring and wear a freshly washed mask for the duration of their visit, while also following safety precautions such as hand-washing, wearing of Personal Protective Equipment, if required, and physical distancing. If a visitor doesn't have an appropriate mask, one procedure mask will be provided.
- Visitors will be provided with educational material outlining infection prevention and control practices.
- Visitors will wear a sticker identifying them as a visitor
- Visitors will go directly to and from the unit and will not be permitted in any common area of the hospital
 with the exception of designated public washrooms.
- Once a visitor arrives at the unit, buzzes for entry, they will be required to sign the Visitor Log Book at the interprofessional station.
- Visitors are not permitted to go directly to the patient room without signing in.
- Visitors must maintain 2m (6ft) distance between patient and visitor at all times
- Visitors must maintain 2m (6ft) distance between visitor and staff at all times.
- Visitors are not permitted to leave the building and return with their allocated hour (i.e. go outside for a cigarette, retrieve something from their car). Once a visitor leaves the floor, their visit is considered complete.
 - If a staff member requires a visitor to exit the room, the visitor will stand just outside the patient's doorway until being asked to re-enter
 - Visitors must follow all instructions from staff including appropriate hand hygiene, protective equipment and when it is time to leave
 - Failure to follow any of the instructions, or staying beyond an hour may result in the removal
 of visiting privileges

Who can't visit?

- Anyone with COVID-19 symptoms:
 - Fever, cough, difficulty breathing, difficulty swallowing, sore throat, runny nose, loss of taste or smell, nausea, vomiting, diarrhea
- Anyone who is known or suspected COVID-19 positive and has not been cleared by Public Health
- Anyone who is a contact of a known COVID-19 positive individual
- Anyone who has travelled outside of Canada in the past 14 days



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Who is responsible for enforcing the one hour rule?

- The unit clerk, or designate, will monitor and moderate visitors.
- As visitors will need to sign in, there will be a record of arrival time which the staff member can monitor.
- If there is an issue or concern, security will provide assistance and that visitor may be no longer permitted to return

What if someone wants to visit but is not on the list or doesn't have an appointment?

- Only those visitors designated by the patient will be permitted and they must have an appointment.
- If the visitor feels their name was left off the appointment list, the screener at the Main entrance will follow up with the unit by phone.

Could visiting be stopped again?

- If the number of COVID-19 cases in the community or in the health centre surges, restrictions on all
 visiting may be reinstated.
- Given the complexity and uncertainty of the COVID-19 pandemic, the visiting schedule may be adjusted
 as information emerges and recovery activities change.

When will RVH resume its 24/7 Family Presence policy?

- The safety of RVH's patients, staff and physicians remains our highest priority and at this time, we are not resuming our "open" 24/7 visitation.
- · We will begin with this gradual reintroduction of visitors and re-assess and re-adjust as required.
- Resumption of visitors is, minimally, a four-phase plan and the gradual reintroduction of designated visitors is to ensure staff and patient safety.



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Appendix VI: Patient Letter



July 25, 2020

Dear RVH patient,

Royal Victoria Regional Health Centre (RVH) is pleased to welcome limited visitors back to our facility, as part of a safe, phased plan to resume visitation. This is effective on Monday, July 27.

We know how important visitors are to your well-being but safety must be our highest priority. To keep you and our care team safe, strict infection control measures will remain in place and we are not able to resume open, 24/7 family presence at this time.

Process for admitted patients:

- You will designate a primary visitor and one alternate visitor
 — this could be a family member, friend, support person. No more than two names. Exceptions may be made on compassionate grounds.
- Visitors will be permitted only between 10 a.m. to 1 p.m. and 5 to 8 p.m. unless the
 patient's condition requires alternate visiting arrangements. Please note: visiting hours for
 mental health patients will be scheduled between 4 to 8 p.m.
- You will be allowed <u>one visitor</u> over 16 years old per week during one of the time blocks noted above. Visits will be limited to no more than one hour at a time.
- To ensure safe physical distancing, visitation will be staggered if you are sharing a room and there is a limit on the number of visitors on a unit at the same time.

Process for visitors:

- Visiting times must be scheduled in advance. Designated visitors must book their visit by 4
 p.m. the day prior by calling the inpatient unit directly. Only visitors on the list will be able to
 book.
- Most visitors will use RVH's Main entrance, unless directed otherwise, where they will be screened for COVID-19 symptoms. Visitors who fail screening will be denied entry to the health centre. Please note that visitors will be asked to present identification upon entry to the health centre.
- Visitors must bring and wear a clean mask for the duration of the visit, while also following safety precautions such as hand-washing, wearing of Personal Protective Equipment, if required, and physical distancing. If a visitor doesn't have an appropriate mask, one procedure mask will be provided.
- Visitors must maintain two metres distance from the patient and are not permitted anywhere in the health centre except the room of the person they are visiting, unless a staff member asks them to step into the hallway.
- Visitors will be provided with educational material outlining infection prevention and control
 practices.



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- Visitors will go directly to and from the unit and will not be permitted in any common area of the hospital with the exception of designated public washrooms.
- Visitors are not permitted to leave the building and return within their allocated hour (i.e. go
 outside for a cigarette, retrieve something from their car). Once a visitor leaves the floor,
 their visit is considered complete.
- To gain entry to the unit, visitors must buzz at the door for entry. Visitors will sign in at the
 interprofessional station and sign out when they leave.
- If a staff member requires a visitor to exit the room, the visitor will stand just outside the
 patient's doorway until being asked to re-enter.
- Visitors must follow all instructions from staff including appropriate hand hygiene, protective equipment and when it is time to leave.
- Failure to follow any of these safety precautions, including staying beyond the allotted hour, may result in a removal of visiting privileges.

Due to the uncertainty of the COVID-19 pandemic, we may need to change visitation schedules. If we see a surge of COVID cases in the community or in the health centre, we may need to reinstate visitor restrictions.

Thank you for your understanding and patience during this challenging time. I hope you are on the road to recovery soon.

Respectfully,

Janice M. Skot, MHSc, CHE

Jani M. Stot

President and Chief Executive Officer

Royal Victoria Regional Health Centre



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Appendix VII: Visitors Process for Covid-19 Postive Patients



COVID-19 VISITOR PROCESS

For COVID-19 positive patients, whose clinical status has deteriorated, the following process shall be utilized to determine if visitors are permitted onsite.

- 1. Unit Initial Responsibilities
 - Identify number and names of visitors of note a maximum of 2 visitors will be permitted at
 one time; however can be assessed on a case by case basis.
 - · Identify date and time of visit
 - FRI screening to be completed over the phone, prior to visit and shall include (see algorithm):
 - i. Have you been advised by Public Health to self-isolate?
 - ii. Have you traveled outside of Canada in the past 14 days?
 - iii. Has any visitor(s) had contact with COVID-19 positive person(s)?
 - iv. Has visitor(s) tested positive for COVID-19?
 - v. Do you have any of the following symptoms?
 - Fever;
 - 2. New or worsening cough;
 - 3. New or worsening shortness of breath;
 - Symptoms of an Upper Respiratory Tract Infection (cough, sore throat, headache, muscles aches, fatigue, runny nose, joint aches and/or nausea, diarrhea and stomach pains.

If visitor COVID positive/person under investigation (PUI) and asymptomatic visit must be approved by Public Health – see 2.c. Unit to Contact

If visitor is COVID positive/PUI and symptomatic - no entrance permitted

- Identify the visitor(s) mode of transportation to facility (own vehicle, public transit, taxi)
- · Identify Spiritual Care needs and contact Spiritual Care to arrange presence if needed
- 2. Unit to Contact and Update
 - · Manager or HSL after hours
 - · Unit Specific IPAC Practitioner; if after hours contact IPAC on call
 - Public Health to be contacted by Manager/HSL/IPAC (if needed)
 - i. Day time: 705-721-7520 x8809
 - ii. After hours: 1-888-225-7851
 - Security (escort to unit will be required for COVID positive/PUI visitors)
- For COVID positive/PUI visitor determine appropriate entrance and notify security and screeners at location
- 4. For COVID positive/PUI visitor IPAC team/designate to ensure separate donning and doffing station is set up at designated entrance (ABHR, Gloves, gowns, masks, goggles, soiled linen, garbage)
- 5. On arrival, PPE requirements for visitor(s):
 - COVID-19 positive/PUI visitor(s) after performing hand hygiene have them don mask, goggles, gown and gloves
 - · Visitors are negative for COVID-19 have visitor(s) perform hand hygiene and don mask
- If COVID-19 positive/PUI must be escorted to unit by security and/or unit staff using the shortest path possible
 - IPAC to be included as needed (case by case basis)



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COVID-19 VISITOR PROCESS

- 7. Visitor(s) to don droplet/contact PPE prior to entering room
- 8. When leaving patient room visitors to doff gown and gloves and perform hand hygiene
- If visitor COVID-19 positive/PUI re don new gown and gloves, while maintaining original procedure mask and goggles.
- 10. If COVID-19 positive/PUI to be escorted to exit by security and/or unit staff using shortest path
 - IPAC presence if required (case by case basis)
- 11. Doff PPE at specified entrance and perform hand hygiene visitor(s) may leave with mask on
- 12. Notify EVS supervisor of soiled station, to ensure appropriate handling and disposal of PPE

Of note: visitors are not to linger inside facility. If multiple visitors are deemed appropriate visitors to be instructed to promptly exit facility after visit has concluded to allow for the rotation of other visitors.