

TO: EVERYONE
FROM: PANDEMIC TEAM
RE: CLOC VISITOR GUIDELINES – Updated March 4, 2022

SUMMARY OF UPDATES: March 4, 2022
Please read the document thoroughly for details

THESE PROTOCOLS REPLACE THE JANUARY 2022 CLOC VISITOR GUIDELINES & COMMENCE AS OF FEBRUARY 21, 2022, UNTIL FURTHER NOTICE.

- ❖ Rapid Antigen Testing as a screening tool for employees, visitors and people in service [page 2](#)
- ❖ Use of N-95 Respirators [page 11](#)
- ❖ NEW! Appendix A.2 – Residential Visit Plan [page 17](#)
- ❖ UPDATED: Appendix D – Summary of Guidance by Key Area [page 27](#)

CHANGES TO THIS PROTOCOL

This protocol may change at any time, based on direction from Public Health and/or the Ministry of Children Community and Social Services (MCCSS). Changes to this protocol are reflected in the yellow 'status' box above, **and details are highlighted for easy reference below.**

DEFINITION OF 'FULLY VACCINATED'

Vaccination status refers to the province's current definition under [Ontario Regulation 364/20: Rules for Areas at Step 3 and at the Roadmap Exit Step](#).

(e.g., both doses of a two-dose vaccine series); and

At least 10 days have passed since they have received their second dose of the COVID-19 vaccine.

GUIDANCE

CLOC is following the direction provided by MCCSS for funded and licensed congregate living settings. This guidance is intended to be followed *in addition to other applicable legislation and health guidance* including, but not limited to:

- [The Reopening Ontario \(A Flexible Response to COVID-19\) Act and relevant regulations/orders](#).
- [Local Public Health Unit direction to address local circumstances](#) (e.g. community spread).
- [Ministry of Health \(MOH\) COVID-19 Guidance: Congregate Living for Vulnerable Populations](#).
- [Public Health Ontario COVID-19 Preparedness and Prevention in Congregate Living Settings](#).
- [Public Health Ontario Managing COVID-19 Outbreaks in Congregate Living Settings](#).
- [Resources to prevent COVID-19 in the Workplace](#).

As an employer, CLOC is obligated to adhere to applicable legislative or regulatory requirements related to health and safety such as those in the Occupational Health and Safety Act (OHSA) and its regulations.

Reference: The Roadmap to reopen Ontario (Appendix D)

RAPID ANTIGEN TESTING AS A SCREENING TOOL

CLOC is utilizing rapid antigen testing as a tool to screen people for COVID-19. Information about the testing has been added our Infectious Diseases policy and procedures. The rapid antigen testing has been made available as part of CLOC's overall IPAC (Infection Prevention and Control) strategy to help prevent spread and keep people safe.

- Rapid testing is mandatory for employees who do not meet the MCCSS definition of being fully vaccinated.

As directed by MCCSS, effective immediately, **dependent on test kit availability**, and until further notice, CLOC will be using RAT (rapid antigen tests) to:

- Screen all **staff** who enter a CLOC location (regardless of vaccination status), at a frequency of 2 times per week (7 day period).

- o A staff member with a positive result on a rapid antigen test will be presumed positive for COVID-19 and must not be permitted entry to any CLOC location. Existing guidance for positive cases will be followed.
- o When PCR testing is unavailable, any positive results from a rapid antigen test will no longer require a confirmed laboratory-based PCR or molecular point of care test.
- Screen all **visitors** entering a CLOC location (regardless of the visitor's vaccination status). Exception only if the visitor presented a negative rapid antigen test result at the same CLOC location the day before.
 - o A visitor with a positive result on a rapid antigen test must not be permitted entry and should be encouraged to follow public health direction for persons presumed positive for COVID-19.
- CLOC is making rapid antigen screening available for **people in service** who return to a CLOC location (regardless of vaccination status) from an overnight absence.
 - o For overnight absences of **2 nights or less**: Rapid antigen screening should occur on day three and day seven from the day the person left the location.
 - o For overnight absences of **3 nights or more**: Rapid antigen screening should occur on the day of return (as part of active screening upon entry) and day four following their return.
 - o If the person leaves for a subsequent overnight absence within those 7 days, a new 7-day period should be started when they return to the location.
 - o A person in service who receives a positive result on a rapid antigen test should be given a surgical/procedure mask to wear (if they can) and directed to self-isolate while waiting for arrangements to be made for a PCR test.

In the event that PCR testing is not available, positive results from a rapid antigen test no longer require a confirmed, laboratory-based PCR or molecular point of care test.

- Staff, people in service, and visitors receiving a positive rapid antigen test result are presumed to have COVID-19.
- In the case of a positive RAT, CLOC continues to follow existing guidance for positive case management for staff and people in service, including Ministry of Health isolation requirements

In an outbreak, where Public Health directs CLOC to test a large number of individuals at a location, Public Health is responsible for arranging PCR testing.

CLOC utilizes rapid antigen tests (RAT) for new admissions and transfers (regardless of vaccination status) and where PCR testing is not available in a timely manner. Rapid Antigen screening is used on the day of admission/transfer, as part of active screening upon entry, and day four following admission/transfer.

TYPES OF VISITORS – DEFINITIONS

CLOC recognizes two types of visitors:

1) *Essential Visitors*

- Visitors performing essential support services, e.g. food delivery, phlebotomy, maintenance, family or volunteers providing care services, social service workers and other health care services required to maintain good health, inspectors from the Ministry or Public Health, or a person visiting a very ill or palliative resident.
- Visitors necessary to maintain the health, wellness and safety of a person receiving support and services through CLOC.
- Parent/guardian, and other family members can be designated as ‘essential visitors’
- Per MCCSS, essential visitors are to be actively screened, including rapid antigen testing before being allowed entry into the setting, and must wear appropriate PPE for the duration of their visit.

2) *Non-Essential Visitor*

- Anyone who is not an “essential visitor” per the definition above.

VISITS

PRE-VISIT PLANS

The Residential Visit Plan document (Appendix A.2) is used to screen visitors coming into CLOC locations. Overnight Visit Plans (Appendix B) are used when submitting a request prior to scheduling any overnight visits. Contact information is recorded in case the Public Health Unit needs it for contact tracing activity (both essential and non-essential visitors).

Short Term Absence Visit Plans (Appendix A) no longer need to be completed.

Every visit must be discussed with supervisor to ensure that protocols are followed.

SCHEDULING VISITS

All visits, both indoor and outdoor, must be approved by Supervisor, and scheduled in advance. Location staff initiate the planning process. Any questions or concerns will be directed to the Pandemic Team.

There are no set visiting hours; the time of visit is reasonably flexible and is based on the needs of the person receiving supports and services through CLOC, their staff and visitor.

Essential Visits — indoors and outdoors

All Essential visitors will be screened as per the **RAPID ANTIGEN TESTING AS A SCREENING TOOL** Section above.

- The Residential Visit Plan (Appendix A.2) is required for people entering CLOC locations, in order to capture RAT results. Pre- screening and on-site screening are completed.
- ‘Essential Visitors’ must be preapproved by Supervisor and Operations Manager.

Before visits:

1. Staff provides the visitor with CLOC’s Screening link - Health Q, electronically. Paper copies are used if there are connectivity or other issues.
2. Staff provides information, as well as the status of any outbreak in the location, to potential visitors.
3. Staff provide all visitors with information on Infectious Diseases/Infection Prevention and Control procedures including PPE, hand hygiene and social distancing (Appendix C). Visitors read and agree to comply with the parameters of the visitor requirements.
4. MCCSS guidelines allow for essential visitors to not be scheduled in advance, however, CLOC continues to require that all visits be planned and scheduled to ensure safe and successful visits.
5. The visit must have a defined and agreed upon timeframe.

The day the visit takes place:

‘Essential Visitors’ must produce a negative RAT test result as per guidelines in the **RAPID ANTIGEN TESTING AS A SCREENING TOOL** Section above.

1. All essential visitors must complete and pass the CLOC pre-screening assessment on the Health Q site either on their personal device or on the tablet kiosk at the location.
2. The visitor presents the Health Q green pass screen to the staff. If they are unable to present the pass screen, they are to complete the screening on the tablet Kiosk at the location. The staff takes visitors’ temperature and ensures it is in range, and records it on the Fire Safety/Location Sign in sheet. Contact information is recorded in case the Public Health Unit needs it for contact tracing activity (both essential and non-essential visitors).
3. If the initiating staff member is not meeting the visitor on site, alternate staff member(s) are notified.
4. The pre-screening document is kept on the Health Q site and dashboard. This dashboard is distributed electronically to the location Supervisor and the Rapid Response Team.

5. Appropriate PPE, as required for the location, is worn by the visitor as determined by the nature of the visit. All visitors must wear a minimum of procedure/surgical mask and eye protection, and if providing direct care where 6 feet/2 meters is not maintained, they must also wear gloves and any other required PPE i.e., gowns. Prescription glasses do not provide adequate eye protection.
6. Essential visitors may choose not to mask outdoors, while maintaining physical distance, regardless of immunization status.
7. Staff ensure visitors use hand sanitizer upon entry and exit.
8. Staff identify the visitation area.
9. Any non-adherence to CLOC's Infectious Diseases/IPAC policies, may be grounds for discontinuation of visits.
10. Staff members sanitize the following prior to and upon completion of visit:
 - The tablet if used to complete screening
 - The pen used for sign in
 - The visiting area
 - Required eye protection (if provided by CLOC)

Non-Essential Visits (Anyone who is not an “essential visitor” per the definition above.)

Outdoor visits are still preferred in the interest of everyone's health and safety. An indoor visit is considered on a case-by-case basis where environmental and social conditions can accommodate. Indoor and outdoor visits take into consideration health and safety needs of all residents, staff and visitors. These considerations also support mitigating of risks identified and within the context of Ontario's Roadmap to Reopen.

- The Residential Visit Plan (Appendix A.2) is required for people entering CLOC locations, in order to capture RAT results. Pre- screening and on-site screening are completed.
 - There must be ample space available to allow for physical distancing for the visit.
 - The needs of all the people residing in the home must be taken into consideration.
 - There must be adequate staffing available to support the visit.
 - Visits are planned and scheduled in advance to ensure safe and successful visits.

Before visits:

1. Employees must complete the Residential Visit Plan (Appendix A.2) when assisting in planning for the visit.
2. Staff provides the visitors with CLOC's Screening link - Health Q, electronically. Paper copies are used if there are connectivity or other issues.
3. Staff provides information, as well as the status of any outbreak in the location, to potential visitors.
3. Staff provide all visitors with information on Infectious Diseases/Infection Prevention and Control procedures including PPE, hand hygiene and social distancing (Appendix C). Visitors read and agree to comply with the parameters of the visitor requirements.
4. The visit must have a defined and agreed upon timeframe.
5. Visits are cancelled if there is an outbreak declared at the home, change in health or another

emergency, or inadequate staffing support is available for the visit.

The day the visit takes place:

'Visitors' must produce a negative RAT test result as per guidelines in the RAPID ANTIGEN TESTING AS A SCREENING TOOL Section above.

- All visitors must complete and pass the CLOC pre-screening assessment on the Health Q site either on their personal device or on the tablet kiosk at the location.
- The visitor presents the Health Q green pass screen to the staff. If they are unable to present the pass screen, they are to complete the screening on the tablet Kiosk at the location. The staff takes visitors' temperature and ensures it is in range, and records it on the Fire Safety/Location Sign in sheet. Contact information is recorded in case the Public Health Unit needs it for contact tracing activity (both essential and non-essential visitors).
- If the initiating staff member is not meeting the visitor on site, alternate staff member(s) are notified.
- The pre-screening document is kept on the Health Q site and dashboard. This dashboard is distributed electronically to the location Supervisor and the Rapid Response Team.
- Appropriate PPE, as required for the location, is worn by the visitor as determined by the nature of the visit. All visitors must wear a minimum of procedure/surgical mask and eye protection, and if providing direct care where 6 feet/2 meters is not maintained, they must also wear gloves and any other required PPE i.e., gowns. Prescription glasses do not provide adequate eye protection.
- Visitors may choose not to mask or physical distance outdoors, if all parties are fully immunized OR choose not to mask while maintaining physical distance regardless of immunization status.
- Staff ensure visitors use hand sanitizer upon entry and exit.
- Staff identify the visitation area.
- Staff must be available to transfer people supported out of and into the visitation area, and remain within visual contact for the duration of the visit.
- Any non-adherence to CLOC's Infectious Diseases/IPAC policies, may be grounds for discontinuation of visits.
- For indoor visits, people residing in the home wear masks/face coverings (if they are able to wear one).
- Brief physical contact is permitted (e.g. a hug) during indoor and outdoor visits, regardless of immunization status.
- Recommended to limit visitors access to washrooms. (Area must be sanitized before and after use).
- Access to all other areas of the building is prohibited.
- Staff members sanitize the following prior to and upon completion of visit:
 - The tablet if used to complete screening
 - The pen used for sign in
 - The visiting area
 - Required eye protection (if provided by CLOC)

SHORT STAY (SAME DAY) ABSENCES AND OUTINGS (RECREATION)

- Same day absences in the community are allowed in alignment with the provincial parameters ie: activities and social gatherings as outlined in the Roadmap to Reopen. Example: haircut, shopping, outing with friends/family, errands, appointments, work, school and physical exercise.
- Short stay absences and outings may be changed or cancelled, without notice, based on Public Health and/or MCCSS direction.
- People supported are encouraged/reminded to follow proper hand hygiene and respiratory etiquette at all times in the community, and to physically distance and mask in alignment with provincial guidance.

Criteria:

1. The person supported passes active screening for signs and symptoms of, and potential exposure to COVID-19 every time they re-enter the congregate living site, in addition to being required to be screened twice daily.
2. The person supported performs proper hand hygiene upon exit and entry of the residential location and is assisted by staff when support is required.
3. Hand hygiene must be performed (using hand sanitizer regularly including upon entry/exit of building / spaces and after touching objects) while in the community. The person receiving support must be capable of completing this or supports are put in place to ensure this is completed.
4. The person supported can wear a face covering/mask (cloth mask is acceptable) when entering indoor spaces or when they are within 6 feet/2 meters of others in outdoor spaces. Staff assist the person supported to obtain a face covering/mask and facilitate how to use the mask during the short-stay absence. Note: if one of the exceptions for masking outlined in regulations under Reopening Ontario (A Flexible Approach to COVID-19) Act, 2020, applies to the person supported, they are not required to wear a mask.
5. The person supported is encouraged to adhere to physical distancing practice as much as possible as well as adhere to any current local Public Health Unit advice related to local conditions and requirements.
6. It is encouraged, but not mandatory, that people receiving support use outdoor patios or use take out and have picnic outdoors. Masks should only be removed indoors to eat or drink, and then immediately put back on.
7. While it is recommended that CLOC staff accompany the individual, staff may not be required to attend if their direct support is not required for safety and wellbeing. Each outing without staff, must be approved by Supervisor.
8. The family/friend must read, and agree to follow CLOC's Visitors Guidelines and the Infectious Diseases/IPAC procedures outlined.

OVERNIGHT ABSENCES

- People supported residentially are permitted to leave congregate living settings for an essential overnight absence at all times (considered necessary to maintain the health, wellness and safety, or any applicable legal rights of a resident).

- People supported residentially are permitted to leave the congregate living setting for general (non-essential) overnight absences in alignment with relevant provincial parameters as outlined in the Roadmap to Reopen.
- In order to organize for a successful and safe overnight absence, CLOC requests that all visits be planned 48 hours in advance. These plans are documented on the COVID-19 Overnight Absence Plan (Appendix B).
- These plans are reviewed by Supervisor and Operations Manager to ensure appropriate safeguards are in place. Any questions or concerns will be directed to the Pandemic Team.

Criteria

1. The family/friend must read and agree to follow CLOC's Visitors Guidelines and the Infectious Diseases/IPAC procedures outlined.
2. When people receiving supports and services through CLOC are away, they are encouraged to follow these protocols:
 - a. Practice good hand hygiene and respiratory etiquette
 - b. Wear a face covering when not able to maintain physical distancing of 6 feet/2 meters, or as required by law. (CLOC will supply/make available, disposable masks.)
 - c. Follow provincial social gathering regulations, while away from home
 - d. Continue following physical distancing measures
3. People receiving supports and services through CLOC must 'screen out' before leaving for the overnight absence.
4. Overnight absences may be changed or cancelled, without notice, based on Public Health and/or MCCSS direction.

SCREENING UPON RETURN:

This includes same day and overnight absences.

Persons receiving service who are returning to a CLOC location are screened as per the **RAPID ANTIGEN TESTING AS A SCREENING TOOL** section above.

1. A person receiving residential supports within a congregate living setting, returning from a same day or overnight absence, goes through active screening for COVID-19.
 - a. If the person supported isn't fully immunized, they must follow additional precautions upon return until they receive a negative result on a COVID-19 PCR test or 14 days has passed or CLOC receives guidance from the local Public Health Unit:
 - i. Monitor for symptoms.
 - ii. Avoid using common areas however, if a common area cannot be avoided, the person supported must use a surgical/procedure mask if tolerated.
 - iii. Limit contact with other people supported within the home.
 - iv. Only participate in group activities if physical distancing is maintained and a

- surgical/procedural mask is used for the duration of the activity.
 - v. Practice proper hand hygiene by washing their hands often using soap and water or alcohol-based hand sanitizer.
 - vi. Adhere to respiratory etiquette.
- 2. If the person supported is fully immunized, and they pass the active screening upon return, they do not need to follow the additional precautions.
 - a. Leaving the location for a short stay absence/outing will not reset the 14-day time period. However, another overnight stay during the same 14-day time period will reset the 14-day period.
 - b. When a person receiving residential supports within a congregate living setting, who is returning from an absence, doesn't pass screening, the site will follow section below (**Managing a COVID-19 suspected/positive case**).
- 3. If the person is returning from an overnight absence, CLOC is making rapid antigen screening available as per the **RAPID ANTIGEN TESTING AS A SCREENING TOOL** section above.

SUPERVISING VISITS

The requirement to have staff supervise visits will be managed on a case-by-case basis. All staff on shift do not need to be counted toward the social gathering limits, only the staff supervising the visit.

FAILURE TO COMPLY

These protocols have been created for the health, safety and wellbeing of the people receiving supports and services through CLOC, their families, visitors, and the staff who support them.

Visitors who fail to comply with CLOC's visiting protocols risk discontinuation of visits.

OUTBREAK STATUS

Visits will only be permitted if there is no outbreak of COVID-19 at the CLOC location where the visit is requested to take place or where the person receiving supports and services through CLOC resides. If there is an outbreak of COVID-19, all requested/pending visits will be cancelled.

MANAGING A COVID-19 SUSPECTED/POSITIVE CASE

This includes visits, same day and overnight absences. Where there is a suspected, presumed or confirmed case of COVID-19 of a person supported, or staff, in addition to Public Health guidance for isolation and/or

visitor restrictions, the following precautions are implemented:

- Reporting to Ministry, including status updates for confirmed positive cases
- Serious Occurrence Reporting for confirmed positive cases
- Usage of full PPE when providing direct physical care (N95 masks)
- Enhanced cleaning and disinfection
- Restriction on new admissions or involvement, and contact Public Health Unit to consult if admission is possible
- Seek out support of Public Health Unit to assess need for testing of all people supported in the location and staff who may have been exposed
- Limit staffing mobility to this site only

For person supported:

1. Avoid group activities in the setting and encourage physical distancing for non-infected people within the residence as much as possible.
2. Other people supported in the location should avoid leaving the location as much as possible and respect specific guidance from local Public Health to not attend work or school, or to isolate in the setting.
3. All people supported in the location should only exit for essential reasons and must wear a mask.
4. Wherever possible, infection or close contact status should be disclosed prior to the appointment or absence in order to provide additional discretion.
5. All non-essential visits, including outdoor visits, are prohibited.
6. Essential overnight visits will be reviewed on a case-by-case basis.
7. General overnight visits are prohibited at this time.
8. Strict adherence to essential visitors and use of virtual methods for visits as much as possible. Essential visitors who meet the requirements for visitation must wear full PPE for suspected and/or presumptive, outbreak conditions.
9. These precautions are to remain in place until Public Health deems the precautions/outbreak protocols are no longer needed.
10. Practice proper hand hygiene, respiratory etiquette, and follow appropriate physical distancing guidelines and any local Public Health guidelines or directions.

USE OF N95 RESPIRATORS:

Fit tested N95 respirators are used as required for medical needs such as aerosol-generating medical procedures and known or suspected cases of COVID-19. Fit tested N95 respirators are recommended for use in congregate care settings when providing direct care to someone who is suspected or confirmed positive with COVID-19. CLOC provides access to, and requires use of, N95 respirators as part of CLOC's IPAC

processes. N95 masks are to be used even if they have not yet been fit tested. Necessary training and fit testing is in process at this time for employees in all locations.

VENTILATION AND AIR FILTRATION

In general, ventilation with fresh air and filtration can improve indoor air quality and are layers of protection in a comprehensive COVID-19 strategy. **CLOC has provided Hepa filtration systems for all locations.**

- To reduce the risk of COVID-19 transmission, outdoor activities are encouraged over indoor activities, when possible.
- Indoor spaces should be as well ventilated as possible, through a combination of strategies: natural ventilation (e.g., by opening windows), local exhaust fans, or centrally by a heating, ventilation, and air conditioning (HVAC) system.
- Where ventilation is inadequate or mechanical ventilation does not exist, the use of portable air cleaners can help filter out aerosols. Expert consultation may be needed to assess and identify priority areas for improvement and improve ventilation and filtration to the extent possible given HVAC system characteristics.
 - o Ensure that HVAC systems are functioning properly through regular inspection and maintenance (e.g., filter changes).
- Ventilation and filtration are important for overall indoor air quality as they help to dilute or reduce respiratory droplets and aerosols in a given space. However, they do not prevent transmission in close contact situations and need to be implemented as part of a comprehensive and layered strategy against COVID-19.

TRANSPORTATION

Person supported will be required to sanitize hands before and after riding in a vehicle and wear a surgical/procedural mask (if they are able). CLOC vehicles are fogged and disinfected by staff after each use.

If using public transportation, user must follow the recommended public transit protocols, including wearing a mask at all times.

STAFF RESPONSIBILITIES

- All upcoming visits are documented in the Communication Book to be accompanied with the COVID-19 Short Term Absence Visit Plan or Overnight Absence Plan form. All visits must follow the visitor guidelines and be in line with the Roadmap to Reopening maximum gathering numbers.

- Staff complete the COVID-19 Overnight Absence Plan (Appendix B) form and identify responsibilities for planning, and overseeing the visit. Short Term Absence Visit Plans (Appendix A.1) are no longer required, as long as visit has been discussed with supervisor. Residential Visit Plans (Appendix A.2) are required for visitors to CLOC locations, in order to track RAT results.
- Staff is required to monitor the person supported, after visits, short stay absences or Overnight Absences, for any development of symptoms. If symptoms develop, staff will follow the reporting protocol.
- Follow all IPAC measures including universal masking, and eye protection during direct care within 6 feet/2 metres.
- Report all COVID-19 cases to management. Management reports cases through MCCSS Serious Occurrence Reporting System.

APPENDIX A.1 – NOT REQUIRED AS OF MARCH 2022- SHORT TERM ABSENCE & VISIT PLAN



COVID-19 SHORT TERM ABSENCE and VISIT PLAN Ongoing visit/outing ☐ Does event or venue require participants to be fully vaccinated ☐ yes or ☐ no

PERSON SUPPORTED/LOCATION: _____

VISITOR NAME/CONTACT INFO: _____

RELATIONSHIP to PERSON: _____

Start and End Date/time: _____

Submitted by: _____

Request and Rationale:	
Short Term Absence or Visit Plan:	
Location Team Recommendation:	
APPROVAL/DECLINE	Approve Decline
Supervisor: Signature: _____ Date: _____ Comments: _____	<input type="checkbox"/> <input type="checkbox"/>
Operations Manager: Signature: _____ Date: _____ Comments: _____	<input type="checkbox"/> <input type="checkbox"/>
(when required) Pandemic Team Consultation Recommendation:	<input type="checkbox"/> <input type="checkbox"/>

COVID-19 SHORT TERM ABSENCE and VISIT PLAN CHECKLIST		
Pre-Visit Checklist		
	DATE:	SIGNATURE:
Send CLOC Screening – Health Q link to visitors to complete		
Ensure visitor receives and agrees to CLOC’s Visitor Guidelines		
Ensure staff who are on shift at time of visit are made aware of the details		
What type of visit is this: Essential indoor Outdoor Overnight (separate form COVID-19 OVERNIGHT VISIT PLAN)		
Identified risks: Can the person wear a mask? Social distance? Physical distance? Perform required hand hygiene? Describe supports required and environmental supports needed to ensure health and safety related to COVID-19.	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are the needs of the people residing in the home taken into consideration? What are the impacts?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
What environmental (including space) and support needs are required for this visit/outing?		
Are there risks that can’t be reduced? Please identify areas of concern.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Recommendations for risk reduction: <i>Share all the information with the visitor</i> <ul style="list-style-type: none"> - Location of visit (if not taking place at group home) - CLOC staff may transport the person supported to and from visits away from their group-living location if & when necessary- - Visitor need to wear a surgical mask provided by CLOC and appropriate eye protection. Please verify that they have their own eye protection, otherwise one will be provided for them. <i>For visits on CLOC site;</i> <ul style="list-style-type: none"> - outdoor visits will have to be rescheduled if the weather does not permit and all visits will be cancelled if there is an outbreak or presumptive case of COVID-19. - Physical distance (of 6 feet/2 meters) must be maintained as per visitor guideline. - The visitor will need to complete the CLOC-screening Health Q prior to arriving for their visit or utilized the tablet kiosk on site. 		
Day of Visit Checklist		
Ensure no visit occurs if there is an outbreak or presumptive case of COVID-19 unless absolutely essential and approved by the Pandemic Team. Disinfection of sign-in area (pen, tablet has occurred prior to use and after use? Disinfection of visiting area has occurred if onsite visit? Has the visitor passed the screening process outlined above? If the answer is “No”, do not proceed with the visit. Was visitor temperature taken - as outlined above & documented? Did you ensure visitor used hand sanitizer? Did you provide the visitor(s) with surgical mask (and appropriate eye protection as required) – to be worn during the visit Staff will schedule their day so that break is not happening during this family visit.	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	

<i>Did staff escort visitor to the designated visiting area as appropriate?.....</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<i>Did staff provide visit supervision and ensure social distancing and IPAC policies followed?</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<i>If no to above was Supervisor contacted and an - Incident Report completed?.....</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<i>Was hand hygiene completed by person supported at beginning of the visit?.....</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>	

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APPENDIX A.2 – CREATED MARCH 2022 - RESIDENTIAL VISIT PLAN



COVID-19 RESIDENTIAL VISIT PLAN

Ongoing visit ☐

PERSON SUPPORTED/LOCATION:

VISITOR NAME/CONTACT INFO:

RELATIONSHIP to PERSON:

Start and End Date/time:

Submitted by:

Request and Rationale:		
Residential Visit Plan:		
Location Team Recommendation:		
APPROVAL/DECLINE (not required unless requested by supervisor)	Approve	Decline
Supervisor:		
Signature: _____ Date: _____	<input type="checkbox"/>	<input type="checkbox"/>
Comments:		
Operations Manager:		
Signature: _____ Date: _____	<input type="checkbox"/>	<input type="checkbox"/>
Comments:		
(when required) Pandemic Team Consultation Recommendation:	<input type="checkbox"/>	<input type="checkbox"/>

COVID-19 RESIDENTIAL VISIT PLAN CHECKLIST		
Pre-Visit Checklist		
	DATE:	SIGNATURE:
Send CLOC Screening – Health Q link to visitors to complete		
Ensure visitor receives and agrees to CLOC's Visitor Guidelines		
Ensure staff who are on shift at time of visit are made aware of the details		
What type of visit is this: Indoor Outdoor Essential		
Identified risks: Can the person wear a mask? Social distance? Physical distance? Perform required hand hygiene? Describe supports required and environmental supports needed to ensure health and safety related to COVID-19.	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are the needs of the people residing in the home taken into consideration? What are the impacts?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
What environmental (including space) and support needs are required for this visit/outing?		
Are there risks that can't be reduced? Please identify areas of concern.....	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Recommendations for risk reduction: <i>Share all the information with the visitor</i> <ul style="list-style-type: none"> • Visitor need to wear a surgical mask provided by CLOC and appropriate eye protection. Please verify that they have their own eye protection, otherwise one will be provided for them. • Outdoor visits will have to be rescheduled if the weather does not permit, and all visits will be cancelled if there is an outbreak or presumptive case of COVID-19. • Physical distance (of 6 feet/2 meters) must be maintained as per visitor guideline. • Visitors must produce a NEGATIVE Rapid Antigen Test (RAT) prior to entering the residential location. Test kit will be provided by CLOC and must be completed outside of the location, prior to entry. • The visitor will need to complete the CLOC-screening Health Q prior to arriving for their visit or utilized the tablet kiosk on site. 		
Day of Visit Checklist		
Have all visitors completed a Rapid Antigen Test (RAT) with negative results? (if results are positive, do not allow visitor to enter the location)	Yes <input type="checkbox"/> No <input type="checkbox"/>	

<p>Ensure no visit occurs if there is an outbreak or presumptive case of COVID-19 unless absolutely essential and approved by the Pandemic Team.</p> <p><i>Disinfection of sign-in area (pen, tablet) has occurred prior to use and after use?.....</i></p> <p><i>Disinfection of visiting area has occurred if onsite visit?</i></p> <p><i>Has the visitor passed the screening process outlined above?</i></p> <p>If the answer is “No”, do not proceed with the visit.</p> <p><i>Was visitor temperature taken - as outlined above & documented?</i></p> <p><i>Did you ensure visitor used hand sanitizer?</i></p> <p><i>Did you provide the visitor(s) with surgical mask (and appropriate eye protection as required) – to be worn during the visit.....</i></p> <p><i>Staff will schedule their day so that break is not happening during this family visit.</i></p> <p>.....</p> <p><i>Did staff escort visitor to the designated visiting area as appropriate?</i></p> <p>.....</p> <p><i>Did staff provide visit supervision and ensure social distancing and IPAC policies followed? ..</i></p> <p>.....</p> <p><i>If no to above was Supervisor contacted and an Incident Report completed?</i></p> <p>.....</p> <p><i>Was hand hygiene completed by person supported at beginning of the visit?</i></p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	
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APPENDIX B – Updated January 2022 – OVERNIGHT ABSENCE PLAN



COVID-19 OVERNIGHT ABSENCE PLAN Ongoing visit/outing ☐ (if applicable-Does event or venue require participants to be fully vaccinated ☐ yes or ☐ no)

And person and supporters identified in this plan meet admission criteria ☐ yes or ☐ no)

PERSON SUPPORTED/LOCATION: _____

VISITOR NAME/CONTACT INFO: _____

RELATIONSHIP to PERSON: _____

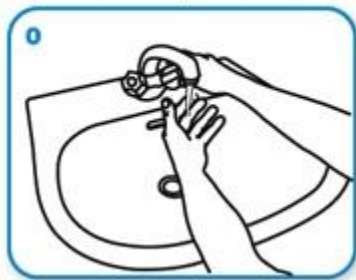
Start and End Date/time: _____

Submitted by: _____

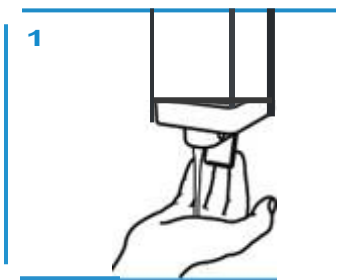
Request and Rationale:		
Overnight Absence Plan:		
Location Team Recommendation:		
APPROVAL/DECLINE	Approve	Decline
Supervisor: Signature: _____ Date: _____ Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>
Operations Manager: Signature: _____ Date: _____ Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>
(when required) Pandemic Team: Signature: _____ Date: _____ Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>

COVID-19 OVERNIGHT ABSENCE PLAN CHECKLIST		
Pre-Visit Checklist		
	DATE:	SIGNATURE:
Send CLOC Screening – Health Q link to visitors to complete		
Ensure visitor receives and agrees to CLOC's Visitor Guidelines		
Ensure staff who are on shift at times of departure and return are made aware of details		
What type of visit is this: Essential overnight Non-Essential overnight		
Identified risks: Can the person wear a mask? Social distance? Physical distance? Perform required hand hygiene? Describe supports required and environmental supports needed to ensure health, reduce risk and ensure safety related to COVID-19 (I.E. PPE, limited interactions):	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
Recommendations for risk reduction: <ul style="list-style-type: none"> - Location of visit: - CLOC staff may transport the person supported to and from visits away from their group-living location if & when necessary- - Family members need to wear a surgical mask provided by CLOC and appropriate eye protection. Please verify that they have their own eye protection, otherwise one will be provided for them. 		
Day of Absence Checklist		
Ensure no visit occurs if there is an outbreak or presumptive case of COVID-19 unless absolutely essential and approved by the Pandemic Team. Disinfection of area as appropriate, (pen, tablet has occurred prior to use and after use?) Has the visitor and person supported passed the screening process outlined above?..... If the answer is "No", do not proceed with the visit. Was visitor temperature taken - as outlined above & documented? Did you ensure visitor used hand sanitizer if attending site? Did you provide the visitor(s) with surgical mask (and appropriate eye protection as required) – if they attended on site..... If no to above was Supervisor contacted and an - Incident Report completed?..... Was hand hygiene-completed by person supported prior to absence?	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
Was the individual gone for 2 nights or less? Rapid antigen test on day 3 DATE: _____ RESULTS: _____ Rapid Antigen Test on day 7 DATE: _____ RESULTS: _____	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Was the individual gone for 3 nights or more? Date of return to location: _____ RESULTS: _____ Rapid antigen test on day 3 DATE: _____ RESULTS: _____ Rapid Antigen Test on day 7 DATE: _____ RESULTS: _____		Yes <input type="checkbox"/> No <input type="checkbox"/>

PROPER HANDWASHING TECHNIQUE



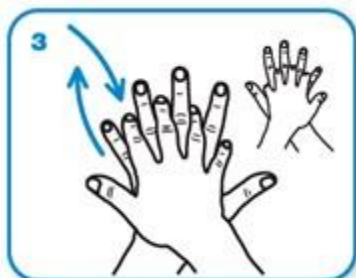
Wet hands with water



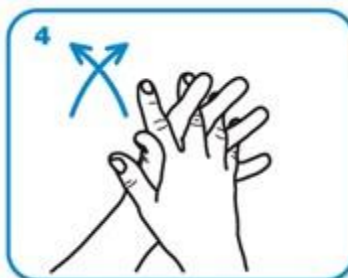
apply enough soap to cover all hand surfaces.



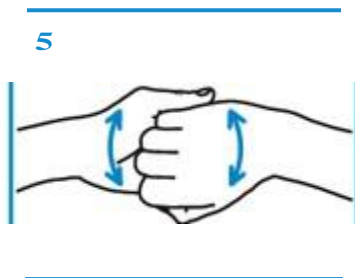
Rub hands palm to palm



right palm over left dorsum with interlaced fingers and vice versa



palm to palm with fingers interlaced



backs of fingers to opposing palms with fingers interlocked



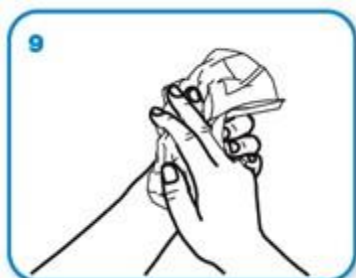
rotational rubbing of left thumb clasped in right palm and vice versa



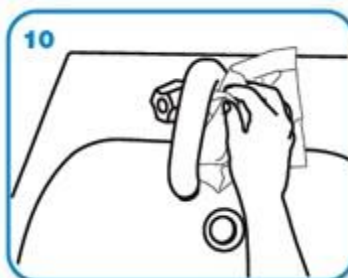
rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.



Rinse hands with water



dry thoroughly with a single use towel



use towel to turn off faucet

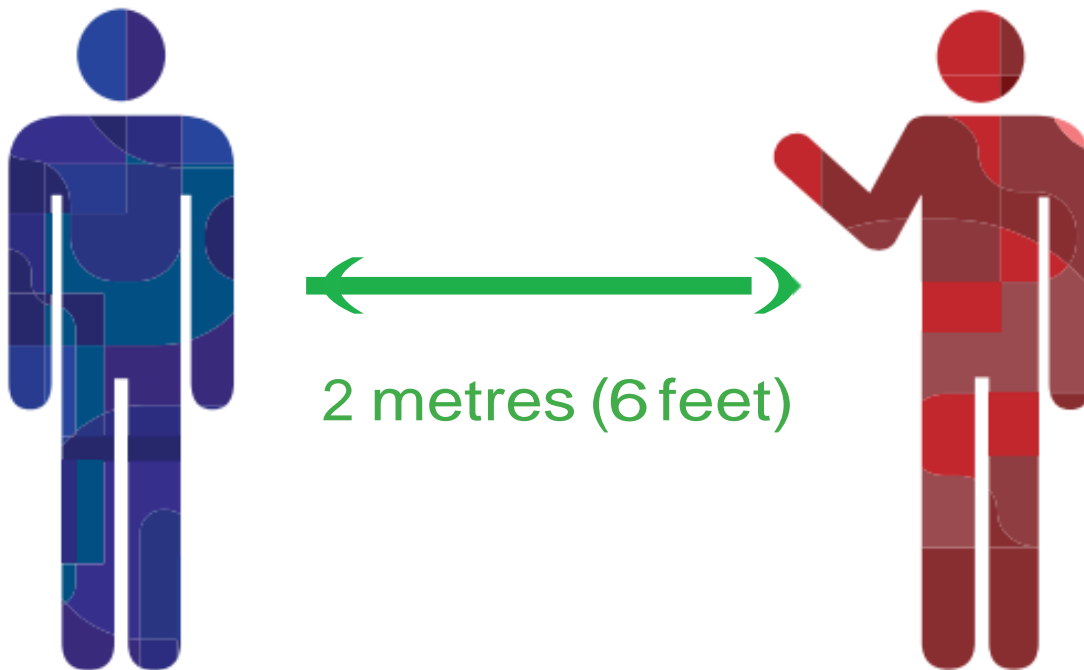


...and your hands are safe.



Help prevent the spread of COVID-19

Practice Physical Distancing



When possible, maintain at least a 2 metre (6 feet) distance from others.

DurhamHealthConnection Line 1905-668-2020 or 1-800-841-2729 or durham.ca/novelcoronavirus

If you require this information in accessible format call 1-800-841-2729.



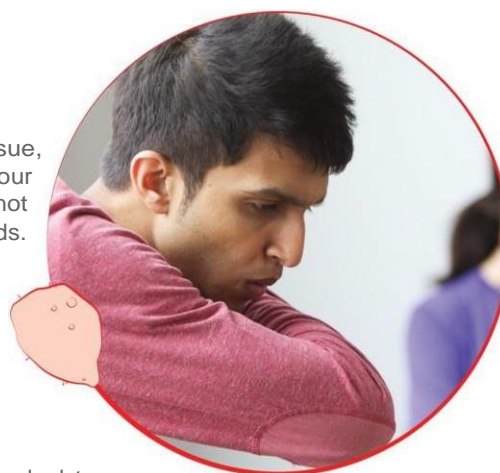
COVER YOUR cough

Stop the spread of **germs** that can make you and others sick!



Cover your mouth and nose with a tissue when you cough or sneeze. Put your used tissue in the waste basket.

If you don't have a tissue, cough or sneeze into your upper sleeve or elbow, not your hands.



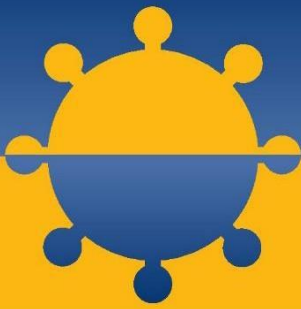
You may be asked to put on a facemask to protect others.



Wash hands often with soap and warm water for 15 seconds. If soap and water are not available, use an alcohol-based hand rub.



For more information please contact Public Health Ontario's Infection Prevention and Control Department at ipac@ohpp.ca or visit www.publichealthontario.ca



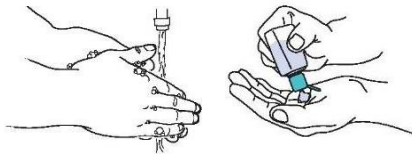
Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



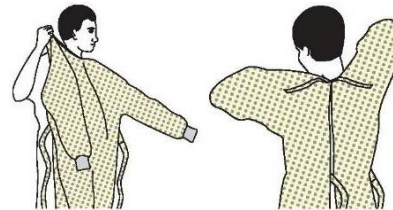
The 5 steps to Don (put on) Personal protective equipment (PPE)

1 Hand hygiene



Clean all surfaces of hands and wrists

2 Gown



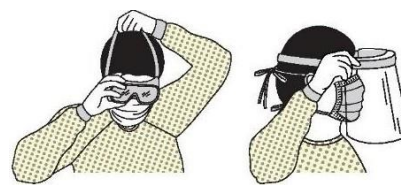
Cover torso and wrap around back,
fasten in back of neck and waist

3 Surgical/procedure mask



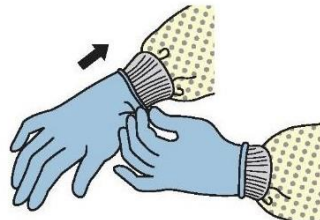
Secure ties at middle of head and neck,
fit nose band to your nose and pull bottom
down to completely cover chin

4 Eye protection



Place goggles or face shield over
face and eyes and adjust to fit

5 Gloves



Extend to cover wrist of gown



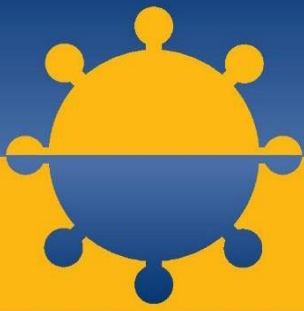
Ministry of
Health



BC Centre for Disease Control

If you have fever, a new cough, or are
having difficulty breathing, call 8-1-1.





Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



The 9 steps to Doff (take off) Personal Protective Equipment (PPE)

Remember to perform hand hygiene between each and every step when doffing

1 Gloves

Remember, the outside of gloves are contaminated. Grasp palm area of one gloved hand and peel off first glove. Slide fingers of hand under other glove at wrist and peel off. Discard in regular waste.

2 Perform Hand hygiene



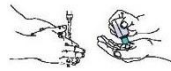
Clean all surfaces of hands and wrists.

3 Gown



Unfasten ties, pull gown away from neck and shoulders, touching ONLY the inside of the gown. Turn gown inside out and roll into a bundle. Discard in regular waste or soiled linen cart.

4 Perform Hand hygiene



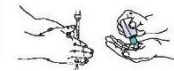
Clean all surfaces of hands and wrists.

5 Goggles or face shield



Do NOT touch the front of them. Discard in regular waste or put in receptacle for reprocessing.

6 Perform Hand hygiene



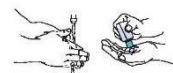
Clean all surfaces of hands and wrists.

7 Mask or N95 Respirator



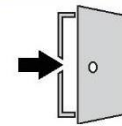
Grasp ties or elastics at back and remove WITHOUT touching the front. Discard in regular waste or in receptacle for reprocessing.

8 Perform Hand hygiene



Clean all surfaces of hands and wrists.

9 Exit Room



AFTER performing hand hygiene (cleaning all surfaces of hands), exit room.



If at any time during this process you become concerned that you may have contaminated your hands, STOP and do hand hygiene an additional time.



Ministry of Health



BC Centre for Disease Control

If you have fever, a new cough, or are having difficulty breathing, call 1-877-315-1111.



SUMMARY OF GUIDANCE BY KEY AREA

Key Area		Requirements
Masking	Staff	Medical (surgical/procedure) mask at all times indoors and outdoors. N95 required for personal care, suspected COVID or confirmed COVID
	Residents	Where possible and appropriate, non-immunized residents are encouraged to wear surgical/procedure masks when they are not alone in their residential space.
Visits	Essential Visitors	Permitted. <ul style="list-style-type: none"> • Unscheduled. (CLOC requires scheduling of all visitors). • Unsupervised. • Actively screened. • Medical (surgical/procedure mask). • Brief physical contact permitted (i.e. a hug). • Choice not to mask & physical distance outdoors if all parties are fully immunized. ❖ Must complete RAT with negative result
	Non-essential Visitors	PERMITTED <ul style="list-style-type: none"> • Scheduled. • Supervised. • Actively screened. • Medical (surgical/procedure) mask. • Physical distancing. • Brief physical contact permitted (i.e. a hug). • Choice not to mask & physical distance outdoors if all parties are fully immunized. • Max # visitors in line with social gathering limits in Roadmap to Reopen (dependent on the Step). ❖ Must complete RAT with negative result
Short stay absence (same day & recreational)		Permitted <ul style="list-style-type: none"> • Permitted in line with activities and social gathering parameters (#s, IPAC in Roadmap to Reopen). • Active screening and RAT upon return to the setting. • Assessed on a case-by-case basis.
Overnight absence	Essential	Permitted. <ul style="list-style-type: none"> • If fully immunized, active screening only upon return. • If partially or non-immunized, monitoring for symptoms as per most recent Public Health Guidelines. ❖ Encouraged to complete RAT as per guidelines
	General	PERMITTED <ul style="list-style-type: none"> • In line with social gathering parameters in Roadmap to Reopen. • If partially or non-immunized, monitoring for symptoms as per most recent Public Health Guidelines. • Encouraged to complete RAT as per guidelines

ROADMAP TO REOPEN ONTARIO



The Ontario government, in consultation with the Chief Medical Officer of Health, has released its Roadmap to Reopen, a three-step plan to safely and cautiously reopen amenities, with restrictions in place, effective May 22, 2021 at 12:01 a.m.

The Roadmap to Reopen is guided by the following principles:

Step One An initial focus on resuming outdoor activities with smaller crowds where the risk of transmission is lower

Step Two Further expanding outdoor activities and resuming limited indoor services with small numbers of people where face coverings are worn.

Step Three Expanding access to indoor settings, with restrictions, including where there are larger numbers of people and where face coverings can't always be worn.

The province will remain in each step for at least 21 days. At the end of the 21 days, the following vaccination thresholds will have to be met for the province to advance to the next step.

Step 1: 60 per cent of adults vaccinated with one dose.

Step 2: 70 per cent of adults vaccinated with one dose and 20 per cent vaccinated with two doses.

Step 3: 70 to 80 per cent of adults vaccinated with one dose and 25 per cent vaccinated with two doses.