CSS SAFE VISITING PRACTICES FOR NON - LICENSED HOMES

(Updates according to CMOH Order 32-2020 – September 2020)

1.0 Indoor Visits

- 1.1 All visits to the home need to be pre-arranged with the Service Coordinator / Team Leader. A standing schedule is recommended for the visits so that staff can accommodate the number of people served, staff and visitors on site at any given time.
- 1.2 Visitors must continuously mask indoors. It is recommended that visitors provide their own mask, as we have not been provided masks for visitors. Visitor masks do not have to be medical grade.

2.0 Outdoor Visits

- 2.1 Outdoor visits are now permitted with up to five people (including the person served) if physical distancing can be maintained in designated spaces. Masks are not required if physical distancing can be maintained outdoors.
- Outdoor visitors will be asked to remain outdoors at all times (entry to the site will not be allowed).

3.0 Safe Visit Summary

- **3.1** Upon arrival to the site all visitors must complete and comply with the following:
 - 3.1.1 Complete the "Screening Tool Designated Family/Support Person and Visitor" form. Should the visitor answer "Yes" to any of the questions the visit cannot proceed.

Appendix A

- 3.1.2 All visitors must follow strict hand hygiene practices before and after the visit.
- 3.1.3 If possible, visitors should supply their own mask and they must wear a mask at all times during the visit if the visit is indoors.
- 3.1.4 If physical distancing can be maintained for outdoor visits masks are not required.
- **3.2** Safe physical touch practices must be followed by: Safe physical touch practices must be followed by:
 - 3.2.1 Perform hand hygiene (hand washing and/or use of alcohol based hand sanitizer) both before and after direct physical contact with the person served.
 - 3.2.2 Continuously wearing a mask that covers the nose and mouth while within 2 meters of the resident.
 - 3.2.3 If you become symptomatic during the visit, you must stop close physical contact with the person served.
 - 3.2.4 Though a person served may not need to also wear a mask, they may choose to do so based on their own risk of unknown exposure from off-site activity.
- 3.3 Visitors are permitted to bring gifts (food, plants, etc.) and depending on the assessed risk staff may want to disinfect or isolate the item for a period of time.
- **3.4** Any animal/pets visits must be preapproved and prearranged with the site staff.

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(Updates according to CMOH Order 32-2020 – September 2020)

COVID-19 SCREENING TOOL – DESIGNATED FAMILY/SUPPORT PERSON & VISITOR As per CMOH October 13/20

If an individual answers YES to any of the questions, they must not be allowed to enter.

*Individuals with fever, cough, shortness of breath, runny nose, or sore throat, are required to isolate for 10 days as per CMOH Order 05-2020 unless they receive a negative COVID-19 test and are feeling better.

Use the AHS Online Assessment Tool to determine if testing is recommended, information on isolation requirements can be found on the AHS COVID-19 website.

As the COVID-19 pandemic continues to evolve, this screening tool will be updated as required.

| | | DATE: | | TIME: | | |
|-----|---|---|-------------------|----------|------------|--|
| DES | GNATED FAMILY/SUPPORT | | L | | | |
| PER | SON AND VISITOR NAME: | | | | | |
| 1. | Do you have any new onset (or worsening) of any of the following | have any new onset (or worsening) of any of the following symptoms: | | | CIRCLE ONE | |
| | o Fever* (38.0°C or higher) Record Temperature Here: | | | YES | NO | |
| | o Cough* | | | YES | NO | |
| | Shortness of Breath/Difficulty Breathing* | hortness of Breath/Difficulty Breathing* | | YES | NO | |
| | o Runny Nose* | | | YES | NO | |
| | o Sore throat* | | | YES | NO | |
| | o Chills | | | YES | NO | |
| | o Painful swallowing | | | YES | NO | |
| | o Nasal Congestion | | | YES | NO | |
| | Feeling Unwell / Fatigued | | | YES | NO | |
| | Nausea / Vomiting / Diarrhea | | | YES | NO | |
| | Unexplained loss of appetite | | | YES | NO | |
| | o Loss of sense of taste or smell | | | YES | NO | |
| | Muscle / Joint aches | | | YES | NO | |
| | Headache Conjunctivitis (commonly known as pink eye) | | | YES | NO | |
| | | | | YES | NO | |
| 2. | Have you travelled outside of Canada in the last 14 days? | | | YES | NO | |
| 3. | Have you had close contact* with a confirmed case of COVID-19 in | the last 14 da | ys? | YES | NO | |
| 4. | Have you had close contact with an individual who has any one of list (*) fever, cough, shortness of breath, runny nose or sore throat of a confirmed case of COVID-19 in the last 14 days? | • | • | YES | NO | |
| • | Ensure you understand Safe Visiting Practices and related site polic | ies (refer to CN | 10H Order 29-2020 | Appendix | A). | |
| • | Assess your personal risk of unknown exposure based on your last two weeks of activity (refer to Risk of Unknown | | | | | |
| | Exposure). | | | | | |
| • | Operators are not required to store the completed COVID-19 screening documents from any person who enters. Operators are required to record and store name, contact information and date/time of entry/exit for a minimum of 4 weeks but not longer than 8 weeks. | | | | | |
| • | Face-to-face contact within 2 meters . A health care worker in an occupational setting wearing recommended personal protective equipment is not considered to be a close contact. | | | | | |
| | protective equipment is not considered to be a close contact. | | | | | |