

Clients in continuing care represent some of the most vulnerable populations if exposed to COVID-19. This high level of risk does need to be balanced with the need to ensure a level of quality of life. The Chief Medical Officer of Health of Alberta announced updated safe visitor access guidelines for continuing care ([CMOH Order 29-2020](#)) that will impact visitation for Carewest clients and families. We ask that all visitors familiarize themselves with the processes and the Safe Visiting Practices before visiting.

Designated Family/Support Persons and Visitors:

All visits (indoor and outdoor designated spaces) must be pre-arranged with staff at the care centre by phoning front reception. We will be launching an online scheduling form in the next few days and will let you know when it is ready.

1. Health screening will be required for indoor visitors, upon entry to the building including temperature check for temperatures over 38°C and screening questionnaire;
2. Continuous masking and eye protection for the duration of the visit with a medical-grade mask provided by the site while inside and, if physical distancing cannot be maintained, outside the care facility;
3. Wear an Approved Visitor nametag;
4. Observing appropriate physical distancing of 2 m between all other persons;
5. Adhere to all Infection Prevention & Control practices that are required and implemented, which include:
 - a. Sanitize hands upon entering the unit;
 - b. Sanitize hands before entering the room;
 - c. Sanitize hands after exiting the room;
 - d. Sanitize hands before leaving the care centre.
6. Follow all respiratory etiquette (cough/sneeze into your sleeve) and hand-hygiene procedures.
7. Time limits and visiting frequency to outdoor spaces or shared indoor visiting areas may apply, as the demand for these spaces fluctuates. We ask that visits in outdoor spaces, shared indoor visiting areas or semi-private resident rooms be no longer than an hour. If these spaces are too full to allow for appropriate physical distancing, you may go for a walk with your loved one. We encourage you to stay on Carewest property, however please notify staff if it is your intention to leave Carewest property.

When you arrive:

- Please come 15 minutes early to allow for health screening and portering of your loved one to the space.
- When you arrive at the site, the designated family/support person(s) and visitor(s) should come in for health screening and masking. If you are bringing an additional visitor(s) for outdoor visits, that person(s) must proceed directly to the outdoor visiting area and is not permitted to access the building. They must be wearing a mask.
- When you arrive to the screening station, please tell them your name, who you are there to visit and what area you will be visiting.
- Once you are in the space, please ensure you stay 2 metres apart from one another. If in a shared area (or a semi-private room), please be respectful of keeping your visit to one hour, as we'll need the space for the next visitors. Remain in the space for the duration of your visit.
- Anyone entering the building will be required to wear a mask and eye protection at all times. Masking outdoors is necessary if physical distancing cannot be maintained. Outdoor visitors may bring their own masks.

Safe Visiting Practices

Risk of Unknown Exposure to COVID-19

It is important for all persons to understand their risk of unknown exposure to COVID-19, based on their behaviour in the last 14 days, prior to entering the site and modify their behaviour accordingly (Refer to Table 3, below).

- It is particularly critical that active *Health Assessment Screening* is completed at entry, is answered completely and accurately, and anyone with symptoms or recent known exposure to COVID-19 not enter the site at all.
- While individuals do not need to disclose their assessed risk of unknown exposure to the operator, they must ensure the resident or alternate decision maker is aware of it and behave accordingly.
- Individuals should limit the number of different sites they enter and provide in-person visits to only one site per day to the greatest extent possible.

Table 3. Risk of Unknown Exposure Assessment Guidance

Low Risk	Medium Risk	High Risk
<p>To be considered at low risk of unknown exposure, all the following conditions must be met:</p> <ul style="list-style-type: none"> • Does not work or live in an area of high COVID-19 exposure (refer to Risk designation of region) • Works from home • Part of a small cohort (15 or less) who consistently practices physical distancing and masks when cannot maintain distance • Not have had guests at home in the past 14 days • Visits resident(s) in one site in a day • Makes essential outings only • Uses own vehicle • Consistently maintains 2 metres of distance from those outside household in all activities • Mask worn when cannot maintain physical distancing • Consistent hand hygiene • No interprovincial travel within the last 14 days 	<p><i>There will be many variations that arise between the extremes of high and low risk of unknown exposure</i></p> <p><i>Individuals must use their best judgement to determine risk of unknown exposure where neither low nor high is appropriate.</i></p>	<p>To be considered at high risk of unknown exposure, any one or more of the following may be met:</p> <ul style="list-style-type: none"> • Works or lives in an area of high COVID-19 exposure (refer to Risk designation of region) • Works outside home in settings where distancing is not consistently maintained and masking is not consistently used • Worked at or visited a location with a declared COVID-19 outbreak in last 14 days • Part of a large cohort (more than 15) • Cohort inconsistently practices physical distancing and use of masks when cannot maintain distance • Have had guests in home in last 14 days • Visits resident(s) in multiple sites in one day • Outings where contact with others outside household is likely

		<ul style="list-style-type: none"> • Use of public transit or carpooling where distancing is not consistently maintained and masking is not consistently used • Does not maintain physical distancing and does not wear a mask • Infrequent or inconsistent hand hygiene • Interprovincial travel within the past 14 days
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Hand Hygiene

- All persons visiting, including residents, must wash their hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer (greater than 60% alcohol content) before, during as appropriate, and after all visits.

Use of PPE – General Practices

- All designated family/support persons and visitors are required to wear a mask and eye protection continuously throughout their time indoors and be instructed how to put on and take off that mask and any other PPE that may be required. A mask and eye protection may be provided by the operator, or designated family/support persons and visitors may bring their own.
 - Single-use masks and eye protection may be removed (and immediately disposed of) for indoor visits in a resident room if physical distancing can be maintained. A new mask and eye protection must be worn in transit through the site.
 - Public Health Guidelines for use of masks and eye protection must be followed.
- Continuous use of a mask and eye protection is not required for outdoor visits unless physical distancing cannot be maintained.
- When visiting a newly admitted resident or a resident on isolation precautions, operators must ensure that the designated family/support persons and/or visitors have or are provided with the required PPE (based on precaution required), have been trained to use, and have practiced the appropriate use of the PPE.

Use of PPE to Enable Safe Physical Touch

- The risk of transmission of COVID-19 increases with close proximity. If a resident and their designated family/support person(s) or visitor(s) understand this and they wish to include physical touch in their visits, this may be done by following the additional guidance:
 - Stop close contact with the resident and inform staff immediately for further direction if they are or become symptomatic during the visit.
 - Continuously wear a mask that covers the nose and mouth and eye protection while within 2 metres of the resident.
 - Though a resident does 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.
 - Perform hand hygiene (hand washing and/or use of alcohol based hand sanitizer) both before and after direct physical contact with the resident.
 - If resident is isolated due to symptoms of COVID-19:

- Operators must ensure that the designated family/support persons and/or visitors have or are provided with the required PPE (based on precaution required), are trained, and have practiced the appropriate use of the PPE.
- Individuals at low risk of unknown exposure may engage in safe physical touch.
- Individuals at medium risk of unknown exposure may engage in safe physical touch, where resident risk tolerance is high.
- **Individuals at high risk of unknown exposure are not recommended to physically touch the resident** unless providing direct resident care wearing all appropriate PPE.
- Refer to Table 3 for guidance on risk of unknown exposure to COVID-19.

Use of PPE for those with Cognitive/Sensory Impairments or Traumatic Experiences

- Residents who have sensory deficiencies or cognitive impairment must be supported to have safe and meaningful visits that support their health and wellbeing. This includes creative strategies to overcome barriers in situations where the use of PPE by the visiting person is inappropriate or disrupts communication, where physical distancing cannot be maintained.
 - For greater clarity, where use of PPE is disruptive, it is acceptable to remove the PPE if physical distancing can be maintained.
- Where the use of facial PPE (such as a face mask and eye protection) by a designated family/support person or a visitor is distressing due to a cognitive or sensory impairment or traumatic experience, and physical distancing cannot be maintained, adaptation of facial PPE may be considered as described below:
 - Facial PPE must provide respiratory droplet source control (e.g. if face shields are being considered, they must provide protection that wraps under the chin).
 - Adaptations must be discussed/approved by the operator and facility medical director, if applicable, or zone Medical Officers of Health on a case-by-case basis.

Visiting Animals

- Subject to precautions and ability of the operator to accommodate animals, one animal is permitted to accompany a staff member, designated family/support person or other visitor for both indoor and outdoor visits.
- The animal must meet the individual operator policy regarding animal visits, where established, and operators must require visiting animals to be well (i.e. not displaying signs of illness, such as diarrhea or vomiting) and not come from a household with individuals at high risk of unknown exposure to COVID-19.

Gifts

- Designated family/support persons and visitors should be permitted to bring gifts, including homemade or purchased food or flowers/plants.
- Depending on the risk level of the individual, and at the discretion of the operator, some items may be required to be cleaned and disinfected by the individual or quarantined for a period of time (when disinfection is not possible).

Health Assessment Screening

Active Health Assessment Screening for Designated Family/Support Persons and Visitors

Any designated family/support person or visitor who intends to enter a facility, and/or who cannot maintain physical distancing during an outdoor visit must be screened. This screening must be completed every time the individual enters the site. Persons who do not enter (i.e. outdoor visits) and follow all physical distancing during the outdoor visit are not required to be screened. Screening shall involve the following:

1. Temperature screening
2. COVID-19 Questionnaire (see **below**)
3. Confirmation of self-assessment of risk of unknown exposure to COVID-19 and understanding of *Safe Visiting Practices*
4. Confirmation of identity and designated status (only if entering the building)
5. Documentation of arrival and exit times (only if entering the building)

You will be asked the following questions upon arrival:

1. Do you have any of the below symptoms:
 - Fever (**38.0°C** or higher)
 - Any **new** or **worsening** symptoms:
 - Cough
 - Shortness of Breath / Difficulty Breathing
 - Sore throat
 - Chills
 - Painful swallowing
 - Runny Nose / Nasal Congestion
 - Feeling unwell / Fatigued
 - Nausea / Vomiting / Diarrhea
 - Unexplained loss of appetite
 - Loss of sense of taste or smell
 - Muscle / Joint aches
 - Headache
 - Conjunctivitis (commonly known as pink eye)
2. Have you, travelled outside of Canada **in the last 14 days**?
3. Have you had close unprotected* contact (face-to-face contact within 2 meters/6 feet) with someone who has travelled outside of Canada in the last 14 days and who is ill**?
4. Have you had close unprotected* contact (face-to-face contact within 2 meters/6 feet) in the last 14 days with someone who is ill**?
5. Have you been in close unprotected* contact in the last 14 days with someone who is being investigated or confirmed to be a case of COVID-19?
6. Have you assessed your risk of unknown exposure based on your last two weeks of activity (refer to Risk of Unknown Exposure Assessment CMOH Order 29-2020 Appendix A)?
7. Do you understand *Safe Visiting Practices* and related site policies (refer to CMOH Order 29-2020 Appendix A)?
 - If any individual answers **YES** to screening questions 1-5, they will not be permitted to enter the site.
 - Individuals must be directed to self-isolate and complete the [AHS online assessment tool](#) to arrange for testing.
 - If any individual answers **NO** to screening questions 6-7, they will work with the operator to understand their responsibilities before being permitted to enter the site.

* **'Unprotected'** means close contact without appropriate personal protective equipment

** **'ill'** means someone with COVID-19 symptoms on the list above