

Essential Visitor Determination Guideline: Seniors Assisted Living

Site:

- Environment
 - Seniors' Assisted Living sites registered with the <u>Assisted Living</u> <u>Registry</u>-Island wide

Scope:

- Audience: registered Assisted Living Site Operators, registered Assisted Living residents, essential visitors/ potential visitors, Island Health clinical visitor decision makers (CHS Clinicians) and Leadership
- Indications: to support decision making process to determine who is an essential visitor; to define roles and responsibilities
- Exceptions: not intended for use in determining social visitors

Background:

As per the Ministry of Health, visitation restrictions continue to apply to all registered Assisted Living settings in B.C. The determination of an essential visitor involves identifying an essential need of the resident that cannot be met in the absence of the essential visit. The essential need may be identified by the registered Assisted Living Operator (Operator), registered Assisted Living resident (or substitute decision maker if applicable), family, or a member of the health care team. Based on definitions and criteria included from the Ministry of Health, it is the responsibility of the Operator to evaluate the essential visit in partnership with the resident (or substitute decision maker if applicable) and health care team. Weighing into this decision are current circumstances including:

- Resident's clinical assessment
- Risk of transmission and ability of the proposed visitor's understanding and willingness to abide by details outlined in the Essential Visitor Plan, including:
 - o Complete screening upon entering site and provide name and contact information
 - Adhere to agreed-upon visit schedule details
 - Adhere to instructions on wearing a medical-grade mask, practice hand hygiene and respiratory etiquette, go directly to and from designated visit location and follow donning and doffing instructions for PPE

The negative impacts of visitor restrictions on residents' quality of life needs to be balanced with the protection and safety of all residents.

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Essential Visit Definition

Essential visits as defined by the Ministry of Health (MOH) are linked with an essential need that could not be met in the absence of the essential visit. Essential visits include, but are not limited to:

- Visits for compassionate care including:
 - o Critical illness, palliative care, hospice care, end of life, and Medical Assistance in Dying.
 - o Follow the Palliative End of Life Care Guidelines for ALL Care Settings
- Visits paramount to the resident's physical care and mental well-being, including:
 - o Assistance with medication administration
 - Assistance with feeding
 - Assistance with mobility
 - Assistance with personal care
 - Communication assistance for residents with hearing, visual, speech, cognitive, intellectual or memory impairments
 - Assistance by designated representatives for residents with disabilities, including providing emotional support
 - o Provision of cultural or spiritual care as defined by resident or family
- Visits for supported decision making
- Existing registered volunteer providing the services described above
- Visitors required to move belongings in or out of a resident's room
- Police, correctional officers and peace officers accompanying a resident for security reasons

Principles

- Assisted Living Operators will implement and comply with <u>provincial direction</u> with regards to the current visitor policy
- Assisted Living Operators will follow all existing infection control procedures required by the MHO and as outlined in <u>BC CDC & BC MOH Infection Prevention and Control interim Guidance</u> for Long-term Care and Assisted Living
- Assisted Living Operators will determine if a visit is essential in partnership with the resident (or substitute decision maker if applicable) and health care team
- Island Health recognizes that cultural practices and spiritual needs are essential to a person's well-being and should not be limited to end-of-life circumstances only

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- Residents may have more than one essential visitor if required
- Where there is an active COVID-19 outbreak, essential visits will continue per direction from the local medical health officer
- Ministry of Health "Visitation Interpretation Guidance: Guideline for Essential Visits" must be used to make the determination (see Appendix A)
- Assisted Living Operators must create and retain the Essential Visitor Plan for each resident
 visited (Appendix B), which will include information on who the essential visitor is, what essential
 need is being met and how, and the expected length and frequency of essential visits. Essential
 Visitor Plans will be documented and reviewed regularly by the Assisted Living Operator

Roles and Responsibilities

Assisted Living Operator responsibility:

- Have a current visitation safety plan that identifies how many visitors per day, visit location and visiting hours based on operational considerations
- Provide designated visiting areas such as:
 - Resident's suite
 - Outdoor location dedicated to visiting (seasonally when weather permits)
 - o Indoor designated location(s) (summer and especially fall/winter)
- Work in partnership with resident and health care team to identify essential needs and develop a mutually agreed upon Essential Visitor Plan
- Provide medical-grade masks for all visitors

Essential visitor responsibility:

- Complete screening questions and provide contact information for contact tracing purposes
- Perform hand hygiene, respiratory etiquette as needed, follow physical distancing practices and don, doff and dispose of medical-grade mask as directed

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- Go directly to the resident being visited and exit facility directly after visit
- Follow the mutually agreed upon Essential Visitor Plan
- Essential visits will be limited to one visitor per resident within the facility at a time

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No children under the 14 (unless exception granted on an individual basis by site leadership)

Non-Visit Decisions:

Anyone with questions or concerns about an essential visit decision, is encouraged to speak to the Assisted Living Operator at the time of the concern.

Visitors can request an immediate review of any decisions made related to visitor status from site operators.

See Visitor Appeal and Review Process for Essential and Social Visits

Residents, visitors or potential visitors may contact the Island Health <u>Patient Care Quality Office</u> to provide feedback regarding any decision regarding visitors if concerns cannot be resolved at the local level.

Residents and their families may also contact the <u>Assisted Living Registrar</u> to register a complaint about a decision regarding visitors.

Resources:

- 1. Office of the Provincial Health Officer Orders and Notices
- 2. Ministry of Health-Overview of Visitors in Assisted Living and Seniors' Assisted Living
- 3. Island Health Framework for Essential Visits
- 4. Assisted Living Registry
- 5. Palliative End of Life Care Essential Visits
- 6. <u>Island Health Patient Care Quality Office</u>

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Appendix A: Visitation Interpretation Guidance

This guidance supports a consistent approach to the visitors in LTC-that enables person-centered care and outlines expectation regarding the provision of essential visits

Guidelines for Essential Visits

Statement	Application	
The Assisted Living Operator, in collaboration with the resident (or	Essential visits will be evaluated in partnership with the resident (or their substitute decision maker if applicable), based on current circumstances:	
substitute decision maker if applicable)	-Clinical assessment	
and health care team will determine essential visitor status	-Risk of transmission	
	-The environment	
	-The a bility to maintain physical distancing	
	-The availability of personal protective equipment (PPE) if required	
	Residents can refuse to provide consent for a visit and this will be respected	
	In circumstances where an essential visit is denied, communication with the visitor will be a priority, including rationale for non-visit decision. The person should be informed of how they can appeal the decision.	
	In circumstances where an esssential visit is not indicated, consider other options that might meet the needs of the resident. Options for non-physical/virtual visits should be explored.	
	If immediate decisions are required, es calation mechanisms shall be	
	activated without delay (See Visitor Appeal and Review Process)	
Essential visits include: Visits for compassionate care, including critical illness, palliative care, hospice care, end-of-life and Medical Assistance	significant complications in the next 12-24 hours (e.g. sepsis, stroke or	
in Dying;	For the purposes of this document, palliative care, hospice care, and end-of-life care pertains to caring for individual whose condition is considered end-of-life, and death is anticipated as imminent (e.g. Palliative Performance Scale 30% or lower, totally bed bound).	
	A physician or nurse practitioner determines if the resident's condition is considered end-of-life	
	When death is anticipated as imminent, family members/support people may have extended visits or a vigil in consultation with the health care team	
	See Palliative End of Life Care Essential Visits for ALL Care Settings	

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Statement	Application		
Visits paramount to the resident's physical care and mental well-being including: • Assistance with medication administration, feeding, mobility and/or personal care • Communication assistance for persons with hearing, visual, speech, cognitive, intellectual or memory impairments • Assistance by designated representatives for persons with disabilities, including the provision of emotional support	 Personal care refers to activities of daily living such as bedding, feeding, and bathing Visits paramount to mental well-being can include situations where a resident's mental health is a cutely deteriorating, and the Operator, health care team and/or resident (or substitute decision maker if applicable) believe that a supportive visit may improve resident well-being (e.g. demetia with behavioural issues, delirium, depression, anxiety, psychosis) 		
Visits for supported decision making	If the resident requires support to speak on their behalf, share and articulate their wishes and/or inform significant decision making as a substitute decision maker (PGT, Representative, Power of Attorney) such as updating Advance Care Planning documentation (e.g. Medical Order for Scope of Treatment, end of life directives, etc)		
Exisiting registered volunteers providing the services described above;	Facility-specific guidelines regarding volunteers should be consulted		
Visits required to moved belongings in or out of a resident's room; and	One essential visitor for this purpose		
Police, correctional officers and peace officers accompanying a resident for security reasons	 One or two essential visitors for this purpose (based on agency-specific policy) 		
Essential visits shall be limited to one visitor per resident at a time (except when death is anticipated as imminent)	 Visits limited to one visitor per resident at at time Special considerations for additional essential visitors can be made on a case by case basis Special considerations for switching an essential visitor (e.g. in the case an essential visitor is ill or moves) can be made on a case by case basis Cultural practices and spiritual needs essential to a resident's well-being should be considered Visitor a bility to a dhere to physical distancing in any care environment should be considered. 		
Health Care Team composition	Includes Assisted Living Site Operator and staff, Island Health CHS, Primary Care Providers and others		

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Appendix B: Essential Visitor Forms

ASSISTED LIVING ESSENTIAL VISITOR PLAN - Page 1 of 2

(Site Operator or delegate completes and retains this form)

ASSISTED LIVING RESIDENT							
Resident Name and							
Room Number							
APPROVED ESSENTIAL VISITOR							
Essential Visitor							
Name							
Contact							
Information							
ESSENTIAL NEED(S) IDENTIFIED (essential visitor may meet more than on	e need)						
VISITSCHEDULE							
Visitation Plan Start Date:							
Visitation lanstart batc.							
Review/End Date:							
Visit Schedule, if applicable:							
Plan created in consultation with:							
(Health care team member name and							
contact information)							
MUTUAL AGREEMENT							
	o In person						
Plan reviewed with visitor on/	o Telephone						
(DD/MIMIM/YTTT)	o Other						
	 Site Operator 						
Plan reviewed with resident on / by	Essential Visitor						
(DD/MIMIM/YYYY)	 Health Care Team member 						
Signature of Site Operator	(DD/MMM/YYY)						
Signature of site operator	(DD) WHATEN THE						
	/ /						
Signature of Essential Visitor	(DD/MMM/YYYY)						

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ASSISTED LIVING ESSENTIAL VISITOR PLAN - Page 2 of 2

(Site Operator or delegate completes and retains this form)

ASSISTED LIVING RESIDENT				
Resident Name and Room Number				
REVIEW RECORD				
Date:	Site	Operator or delegate has consulted and communicated changes with resident, essential for and health care team member: Signature of Site Operator or Delegate		
		Signature of Site Operator of Delegate		
Date:	Site	ate(s): Operator or delegate has consulted and communicated changes with resident, essential cor and health care team member:		
		Signature of Site Operator or Delegate		
Date:	Site	ate(s): Operator or delegate has consulted and communicated changes with resident, essential corand health care team member:		
		Signature of Site Operator or Delegate		
Date:	Site	ate(s): Operator or delegate has consulted and communicated changes with resident, essential cor and health care team member:		
		Signature of Site Operator or Delegate		

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ASSISTED LIVING ESSENTIAL VISITOR FORM - Page 1 of 1

(Site Operator completes and retains this form – copy to stay with Greeter)

ASSISTED LIVING RESIDENT						
Resident Name and Room						
Number						
APPROVED ESSENTIAL VISITOR						
Essential Visitor						
Name						
Contact						
Information						
ESSENTIAL VISIT SCHEDULE						
ESSENTIAL NEEDS MET BY VISITOR (checkall that apply						
Essential care needs due to compassionate care	Essential care needs for physical and mental well-being					
Critical illness	 Assistance with medication administration 					
 Palliative care, hospice care, end of life or 	 Assistance with feeding 					
medical assistance in dying	 Assistance with personal care 					
	 Assistance with showering/bathing 					
	o Other					
Essential care needs for decision making, a dvocacy	Essential care needs for mental well-being					
and communication	 Emotional support required 					
 Supported decision making 	 Provision of cultural or spiritual care 					
 Communication assistance 	 Existing registered volunteer for services above 					
 Advocacy 						
Faccastial care woods associate and accomits.	For antial care monds, houseless ming/maintenance					
Essential care needs — moving and security O Visits required to move belongings in/out of a	Essential care needs – housekeeping/maintenance O Dishes					
resident's room	Personal laundry					
 Police, correctional officers and peace officers 	O Other					
accompanying a resident for security reasons						
COMMENTS/ADDITIONAL INFORMATION FOR GREETER						
COMMENTS/ADDITIONALINI ONMATIONI ON GREETEN						

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Appendix C: Non-Visit Decision

REQUEST DENIED FOR ESSENTIAL VISITOR STATUS - Page 1 of 1

(Operator or delegate completes and retains this form and provides a written response to applicant within 24 hrs)

• • •		• •			
ASSISTED LIVING RESIDENT					
Resident Name and Room Number					
NON-APPROVED ESSENTIAL VISITOR					
Name					
Contact Information					
Connection to Assisted Living residen	t				
REASONS FOR NON-VISIT DECISION (c	complete all sections that apply)				
Essential need is already met by an					
essential visitor (provide name):					
Health Care Team does not support					
need for essential visit:					
Resident does not wish to receive					
visits from this applicant (indicate					
how this was communicated to					
operator):					
Potential essential visitor does not					
wish to visit:					
Potential essential visitor declines	 Comply with screening process 				
to adhere to safe visiting	 Leave name and contact inform 	lation with greeter			
requirements:	Wear medical grade mask	ara ara ara ara ara da da ara ara ar			
	 Adhere to hand hygiene, respire 	atory eti quette and donning			
	and doffing PPE requirementsGo directly to and from approve	ad visit location			
COMMUNICATION OF NON-VISIT DEC		die and/or duration			
COMMONICATION OF NOW VISIT BEC		o In person			
Decision reviewed with potential visit	toron / /	o Telephone			
Beerston reviewed with potential visit	(DD/MMM/YYYY)	o Other			
		5 55 .			
		 Site Operator 			
Decision reviewed with resident on _	/ by	 Essential Visitor 			
	(DD/MMM/YYYY)				
		,			
Signature of Site Operator		(DD/MMM/YYYY)			
Signature of Site Operator		(טט/ואוואוואו/ניני)			

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