

# AVENUE II COVID-19 PANDEMIC PLANNING MANUAL

<b>TOPIC:</b> Pandemic Planning Protocols	<b>SUBJECT:</b> Visitor Screening Protocol and Sample of Tool	<b>Code:</b> PPP004
		<b>Date of Issue:</b> September 1, 2020
		<b>Revised:</b> September 22, 2021
		<b>Page:</b> Page 1 of 6

## **PROTOCOL FOR COMPLETION OF VISITOR SCREENING FOR COVID-19 and VISITS WHEN THERE IS NOT AN OUTBREAK**

**Please note – All visitors must be approved by Management 48 hours in advance, unless an emergency. On-call does not have authority to approve visitors. Emergency services are not required to screen prior to entry.** Outdoor visiting is still encouraged where possible however indoor visits can occur if deemed appropriate by the Manager.

### **Definitions :**

**Staff** – An employee of Avenue II entering a work site.

**Visitor** – Anyone who is not employed by Avenue II including family, friend or neighbour.

- **Essential Visitor** – People performing essential support services, health care services, maintenance/repair person, a person visiting a very ill or palliative client. In the event of an outbreak the Manager will permit Essential Visitors on a case by case basis.

**Visitor log** – a record of all visitors to the home.

### **Outbreak:**

Visitors are allowed if the home is not experiencing an outbreak.

- The Government of Ontario has defined an outbreak in a congregate living setting as “1 laboratory confirmed case of COVID-19 in a resident or staff.” The outbreak is declared by the Medical Officer of Health, and will not be declared over until there are no new cases of the virus in residents or staff after 14 days.
- Also the MCCSS document Resuming Visits in Congregate Living Settings prohibits visits in any settings where symptomatic staff or residents are awaiting results.
- In the event of an outbreak at the location all visits will be prohibited.

### **Outdoor Space:**

- A dedicated outdoor area has been identified at the residential support location where visitors can meet with the person receiving services that allows for a minimum of 2 meters (6 feet) physical distance between the person, visitor(s) and employee at all times.
- The outdoor space must be accessible to the visitor without entering the person’s home.
- The space must have seating available (arranged 2 meters or 6 feet apart) and provide shade to support a comfortable and safe visit.
- Furniture must be wipeable, fully cleaned and disinfected **before** and **after** each use.

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		<b>Revised:</b> September 22, 2021
		<b>Page:</b> Page 2 of 6

## **Indoor Space:**

- A dedicated indoor space has been identified at the residence where the client is able to visit with people important to them with privacy where possible, while not interfering with the other roommate of the home.
- The area must be able to be cleaned **before** and **after** the visit using cleaning and disinfectants according to protocols.

## **Restrictions:**

- ***All Visitors are prohibited from using the washroom other than to perform hand hygiene as per ministry directives.*** Should use of the washroom be unavoidable, staff will clean and disinfect **after** use.
- Only gifts with hard surfaces and in original packaging that can be disinfected are permissible (families will discuss with the manager prior to the visit the permissibility of gifts/packages that they intend to bring)

## **Residential Locations:**

### **Screening:**

- At each main entrance to a home, a clip board with pen and blank copies of Visitor Screening for COVID-19 and Essential Visitor Screening for COVID-19 will be available.
- Completed questionnaires are to be kept at the location.
- Staff must screen the visitor using the appropriate screening tool, print name, sign and date. It is preferred that the form be completed outside of the home if possible. Employees will wear mask, gloves and face shields to conduct the screening. As per directives a mask is to be worn by staff at all times.

### **Essential Visitors**

- Screening:
  - If the Essential Visitor has answered YES to any questions in part A or have a temperature above 37.8, they are not to have contact or visit the client. They can contact a Manager or Director at the Avenue II office during regular business hours (345-9933) or On-Call after hours (626-4825). Further direction will be provided.
  - If the Essential Visitors has answered YES to questions in Part B, call a Manager/Director or On-Call for further direction. Answering yes may not preclude entry provided adequate controls are in place regarding exposure.

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		<b>Revised:</b> September 22, 2021
		<b>Page:</b> Page 3 of 6

- If the Essential Visitors has answered No to questions in Part C or Part D, call a Manager/Director or On-Call for further direction. Answering No may not preclude entry provided adequate controls are in place regarding exposure.
- Essential Visitors who pass the screening must:
  - perform hand hygiene before the visit and when needed.
  - wear gloves and **a surgical** mask (if the visitor does not have the correct mask use one from the bag marked Essential Visitor Masks)
    - staff are to ensure that they are aware of on how to put on and take off gloves and mask.
  - maintain social distancing where possible.
  - complete the exit screening upon leaving the premises.

## Visitors

- Shall perform hand hygiene prior to screening and be wearing a mask.
- Pass active screening, performed by staff. Active screening of all potential visitors shall include a temperature check.
  - If the Visitor has answered YES to any questions in part A and B or have a temperature above 37.8, they are not to have contact or visit the client.
  - If the Visitor does not agree to any part of Part C the visit is prohibited.
  - If the Visitor answers NO to Part D the visit must occur outdoors.
- Shall wear a face covering and must bring their own face covering for outdoor visits.
  - Will be provided with and wear a surgical mask for indoor visits.
- Maintain social distancing during the visit.
- Brief physical contact.
  - Clients and visitors (essential and non essential) are permitted to engage in brief physical contact (e.g. a hug) during indoor or outdoor visits. Then maintain physical distancing.
- Be responsible for any visitor that attends under the age of 18.
- Complete the exit portion of the screening tool upon leaving.

## Manager Responsibility:

- Determine the date, time and duration of the visit considering the operational needs of the home.
- Confirm number of Visitors attending is not more than 2. Pets may accompany with permission of the manager for outside visits only and are not permitted inside the home.
- Determine the location of visit.
  - indoors or outdoors.
  - Shade is available if needed.
  - The ability to access the outdoor space without entering the home.
  - Indoor space allows for adequate spacing and privacy.

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		<b>Date of Issue:</b> September 1, 2020
		<b>Revised:</b> September 22, 2021
		<b>Page:</b> Page 4 of 6

- Consider seating capacity (2 meters/6 feet apart),
- Ensure proper furniture is available for the visit.
- Assess and determine the level of supervision needed by staff.
  - If it is likely that the client and/or visitor may not follow the requirements of the visit staff must remain in the area of the visit in order to ensure there is no breach of the requirements.
  - Is additional staffing needed in order for the visit to occur.
  - If the client and/or visitor are able to follow the requirements the staff may observe from a distance and regularly check on the group during the visit. This could include the staff leaving the visit area and checking from a window or door from time to time.

## Staff Responsibility for Visitors at Client Locations:

- Set up the space with social distancing of 2 meters in place.
- Disinfect the space **before** and **after** the visit.
- Prior to any interaction with the client and visitor staff must complete the active screening with the visitor and document answers using the appropriate Visitor COVID-19 screening tool.
  - Employees will wear mask, gloves and face shields to conduct the screening.
- Complete the Visitor Log in the home.
- Contact the Manager/On-call, if needed, for direction.
- Assist the client receiving the visit to:
  - Be prepared for the visit as per their needs.
  - Understand as best as possible the restrictions (no touching, hugging, maintain social distance). With the exemption of brief physical contact.
  - Wear a mask if tolerated.
  - Proceed to and return from the designated area for the visit.
- Maintain contact with the visitors and client as directed by the Manager.
  - When supervising or checking in on the client and visitor, at minimum verbal contact must be made to ensure the visit is going as per plans.
  - During the visit staff need to use judgement on the level of supervision required if the situation warrants it to ensure the visit requirements are followed by all parties.
  - Monitor the visit to ensure the requirements and safety measures are being followed and record any concerns with respect to failure to follow the visitation guidelines which will result in the termination of the visit. Record observations on the space provided on the COVID-19 Screening tool.
  - If safety measures are not being followed, the employee will contact the Manager or On-call for direction on terminating the visit.

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		<b>Revised:</b> September 22, 2021
		<b>Page:</b> Page 5 of 6

- Staff will wear mask and if needed other PPE during the visit.
- Staff are not responsible for visitors under 18.
- Visitors may not exceed 2 including visitors under 18.

## **Main Office Location (122 S. Cumberland Street):**

- Upon entrance into the main office, visitors are to complete the Office Visitor Screening for COVID-19 questionnaire, print name, sign and date.
- If you have checked off any symptoms in Part A or answered Yes to any of the questions in Part B or answered No to any of the questions in Part C, do not enter. Please contact a Manager or Director during office hours at 345-9933.
- Completed forms are to be deposited into the box located at the front entrance.

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		<b>Revised:</b> September 22, 2021
		<b>Page:</b> Page 6 of 6



## RESIDENTIAL VISITOR/ ESSENTIAL VISITOR SCREENING

Staff are to wear gloves, face shield and mask to screen the visitor. Call Manager or On-Call for direction if needed.

Name of Visitor: \_\_\_\_\_

Location of visit: \_\_\_\_\_

Client visited: \_\_\_\_\_

Arrival time: \_\_\_\_\_

Departure time: \_\_\_\_\_

Part A - A temperature of 37.8 Celsius or higher or any symptom prohibits a visit	Start of Visit	End of Visit
Visitors temperature? If 37.8 degrees Celsius or above immediately call a manager or oncall. <i>The visit must not occur.</i>		
<b>Please check all that apply.</b> Do you have any of the following <b>NEW or WORSENING</b> symptoms or signs? Symptoms should not be chronic or related to other known causes or conditions.		
<b>RESPOND TO THESE SYMPTOM QUESTIONS ONLY IF YOU ARE A VISITOR 18 YEARS OLD, OR OLDER</b>		
<b>Chills</b>		<input type="radio"/>
<b>Cough or barking cough (croup)</b> <small>Continuous, more than usual, making a whistling noise when breathing (not related to asthma, post-infectious reactive airways, COPD, or other known causes or conditions you already have).</small>		<input type="radio"/>
<b>Shortness of breath</b> <small>Out of breath, unable to breathe deeply (not related to asthma or other known causes or conditions you already have).</small>		<input type="radio"/>
<b>Decrease or loss of smell or taste</b> <small>Not related to seasonal allergies, neurological disorders, or other known causes or conditions you already have.</small>		<input type="radio"/>
<b>Muscle aches/joint pain</b> <small>Unusual, long-lasting (not related to getting a COVID-19 vaccine in the last 48 hours, a sudden injury, fibromyalgia, or other known causes or conditions you already have)</small>		<input type="radio"/>
<b>Extreme tiredness</b> <small>Unusual, fatigue, lack of energy (not related to getting a COVID-19 vaccine in the last 48 hours, depression, insomnia, thyroid dysfunction, or other known causes or conditions you already have).</small>		<input type="radio"/>
<b>RESPOND TO THESE SYMPTOM QUESTIONS ONLY IF YOU ARE A VISITOR 17 YEARS OLD OR YOUNGER</b>		
<b>Chills</b>		<input type="radio"/>
<b>Cough or barking cough (croup)</b> <small>Continuous, more than usual, making a whistling noise when breathing (not related to asthma, post-infectious reactive airways, COPD, or other known causes or conditions you already have).</small>		<input type="radio"/>
<b>Shortness of breath</b> <small>Out of breath, unable to breathe deeply (not related to asthma or other known causes or conditions you already have).</small>		<input type="radio"/>
<b>Decrease or loss of taste or smell</b> <small>Not related to seasonal allergies, neurological disorders, or other known causes or conditions you already have.</small>		<input type="radio"/>
<b>Nausea, vomiting, and/or diarrhea</b> <small>Not related to irritable bowel syndrome, anxiety, menstrual cramps, or other known causes or conditions you already have.</small>		<input type="radio"/>
<b>Part B- Any yes prohibits a visit</b>		
In the last 14 days, have you travelled outside of Canada and been told to quarantine (per the federal quarantine requirements)?	<input type="radio"/> Yes	<input type="radio"/> No
Has a doctor, health care provider, or public health unit told you that you should currently be isolating (staying at home)? This can be because of an outbreak or contact tracing.	<input type="radio"/> Yes	<input type="radio"/> No
In the last 10 days, have you been identified as a "close contact" of someone who currently has COVID-19? If public health has advised you that you do not need to self-isolate (e.g., you are fully immunized" or have tested positive for COVID-19 in the last 90 days and since been cleared), select "No."	<input type="radio"/> Yes	<input type="radio"/> No
In the last 10 days, have you received a COVID Alert exposure notification on your cell phone? <small>If you have already gone for a test and got a negative result, select "No." If you are fully immunized or have tested positive for COVID-19 in the last 90 days and since been cleared, select "No."</small>	<input type="radio"/> Yes	<input type="radio"/> No
In the last 10 days, have you tested positive on a rapid antigen test or home-based self-testing kit? <small>If you have since tested negative on a lab-based PCR test, select "No."</small>	<input type="radio"/> Yes	<input type="radio"/> No
Is anyone you live with currently experiencing any new COVID-19 symptoms and/or waiting for test results after experiencing symptoms? <small>If the individual experiencing symptoms received a COVID-19 vaccination in the last 48 hours and is experiencing mild fatigue, muscle aches, and/or joint pain that only began after vaccination, select "No." If you are fully immunized or have tested positive for COVID-19 in the last 90 days and since been cleared, select "No."</small>	<input type="radio"/> Yes	<input type="radio"/> No
<b>Part C - staff are to confirm with the visitor - Any no answer prohibits the visit.</b>		
Understand that failure to follow the protocols will end the visit and prohibit future visits.	<input type="radio"/> Yes	<input type="radio"/> No
Agree to maintain a social distance of 2 meters at all times.	<input type="radio"/> Yes	<input type="radio"/> No
Essential Visitors may breach social distancing to perform a required task	<input type="radio"/> Yes	<input type="radio"/> No
Agree to perform hand hygiene before donning PPE and prior to leaving.	<input type="radio"/> Yes	<input type="radio"/> No
Have read How to Safely Wear and Take Off a Cloth Face Covering . (Applies to all masks)	<input type="radio"/> Yes	<input type="radio"/> No
Visitors agree to wear a medical mask at all times during the visit?	<input type="radio"/> Yes	<input type="radio"/> No
Are you aware of the recommendations and restrictions in this community regarding gathering size, hand and respiratory hygiene, and the use of face coverings and masks?	<input type="radio"/> Yes	<input type="radio"/> No
a. Are you following these recommendations and restrictions regularly outside this setting you are seeking to enter?	<input type="radio"/> Yes	<input type="radio"/> No
<b>Part D- Are you fully vaccinated against COVID-19?</b> <small>Fully vaccinated means it has been 14 days or more since your final dose of either a two-dose or a one-dose vaccine series</small>	<input type="radio"/> Yes	<input type="radio"/> No

Note any concerns or issues during the visit : \_\_\_\_\_

Staff Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_