



Key Messages

Effective Monday, February 28 at 8 a.m., family presence in long-term care homes began to move to open family presence, with the exception of a small number of homes where enhanced precautions are deemed necessary by the local medical health officer.

This return to pre-pandemic family presence protocols provides the opportunity for all residents to welcome more family and visitors. Family members/support people are essential to the well-being and care of residents, and the SHA has remained committed to allowing as much family presence as safely possible throughout the pandemic. In light of the removal of Public Health Orders effective February 28, policies and guidelines, including outbreak management and infection prevention and control, will reflect the transition to Living with COVID while also ensuring the ongoing safety of our long-term care residents.

Q and A

Q1: Do I have to wear a mask in SHA facilities?

A1: Yes. Medical masks are required on entry and in all areas of SHA facilities. We need to ensure that all of our patients, residents and staff remain safe. Exception, in LTC, masks are no longer required but strongly encouraged in residents' rooms. However, a mask is still required when the resident is on Droplet/Contact or Droplet/Contact Plus precautions. Refusal to wear a mask may result in being denied access to the facility.

Q2: Will I still have to answer screening questions when I enter a facility?

A2: Yes. All family members, visitors and staff must still go through COVID-19 screening when entering SHA facilities.

Beginning February 28, 2022, the SHA began to transition to self-screening at facility entryways with self-screening being fully implemented by the end of March. When you visit and SHA facility on or after February 28, you will be asked to review these questions:

- Are you currently under federal orders to isolate/quarantine due to recent travel?
- Have you or someone in your household tested positive for COVID-19 in the last 10 days?
- In the last 24 hours, have you had any COVID-19 symptoms?

If you answer YES to any of these, do not enter the facility. There will be a process in place for exemptions in situations such as the end of life.

Q3: Are there any exemptions from screening?

A3: There may be exceptional times where a family/support person is unable to pass the self-screening questions but are still required to provide essential in person family presence. Please contact the unit if you require an exemption.



For exemptions related to federal quarantine, consult: [COVID-19 Travel: Checklists for requirements and exemptions - Travel restrictions in Canada – Travel.gc.ca](https://travel.gc.ca/travel-trust/alerts/health/covid-19)

Q4: How do I determine what level of family presence precautions the facility/home is at?

A4: A complete list of homes and their family presence status is available in the documents below.

- [Acute Care Family Presence Restrictions](#)
- [Long Term Care Family Presence Restrictions](#)

Please refer the [Safe Family Presence at a Glance \(Acute and Long Term Care\)](#) for definition of family presence restrictions for Open Family Presence, Yellow and Red Precautions.

Q5: What does Open Family Presence mean?

A5: Patients/residents choose the family/support person(s) they want to be part of their care team. Family/support person(s) help with decision-making, care, quality of life and well-being. They decide, with the patient/resident, what support(s) they are comfortable providing. That is why the role of family/support person(s) can look different from one individual to the next. The two key messages below explain the boundaries of open family presence.

- **Visitors are different from family/support person(s)** - Visitors play an important role of socialization and enhancing quality of life, but are not part of the patient/resident's care team and are not considered essential. They are welcome to stop by, but will not have the same open access as a family/support person.
- **Open Family presence still has limits** - At all times, our homes/facilities must remain safe. Patients/residents are the experts on their own lives, needs and preferences, so it makes sense they will let us know who they want to provide in-person support and when. However, if someone's presence disrupts well-being, rest and/or recovery, they can be asked to leave.

Q6: Who is considered part of the care team?

A6: The patient/resident, their family/support person(s) and their health care providers work together as a care team.

Q7: What will happen if our home goes on suspect or confirmed outbreak? What if there is an increase in transmission in our area?

A7: Local Medical Health Officers will have discretion to re-introduce or maintain precautions, depending on local circumstances (eg. community transmission, cases within a home, etc.). Once the MHO determines the outbreak is stable and the safety indicators in place to allow to return to Open Family presence

Q8: Are children able to visit in SHA facilities/homes?

A8: Yes children are able to visit when accompanied by an adult. Children must follow all public health measures and PPE requirements.

Q9: Are family pets allowed to accompany family when visiting in SHA facilities?

A9: Contact the facility to see if arrangements could be made following their previous region's pet policy.



Q10: Do family members/visitors have to physically distance in the cafeteria or any common areas? (

A10: In LTC families may sit together however they are required to physically distance from staff, residents (other than their loved one) and other visitors/families. In acute care there is no change (i.e. everyone must still maintain 2 metres distance in common areas and wear a mask (unless actively eating/drinking)).

Q11: Can family members and visitors eat or drink while visiting their loved one in hospital/long term care home?

A11: Families and visitors are discouraged from eating and/or drinking at the patient bedside in hospitals. However, in special circumstances and when staying for an extended period of time (such as supporting someone in an end-of-life situation), families and visitors may purchase or bring food to eat or drink to the sites. In these situations, families and visitors are asked to maintain at least 2 metres distance from others, perform hand hygiene with hand sanitizer or soap and water, remove their mask to eat or drink, put their mask back on immediately afterwards and perform hand hygiene.

Q12: Can family members and visitors bring in external food (commercially prepared or homemade) to patients/residents?

A12: Yes, however it cannot be shared with any other patient/resident or staff member at this time. Please refer to [IPAC Recommendations – Food, Events and Decoration ion all Health care facilities](#).

Q13: How many family members/visitors can each person in a LTC home have at one time?

A13: **If the home is at the Open Family Presence**, there is no limit to the number of family members/visitors that can be present at one time. Long term care homes may have scheduling limitations; families/visitors are encouraged to call ahead. Larger group visits in common areas may have to be scheduled in advance, so please contact the home ahead of time to ensure that there is adequate and appropriate space available. This is the same practice as before the COVID-19 pandemic.

Q14: How do we know if we have the correct space and layout to have more visitors?

A14: The number of people welcomed at the bedside at any one time will be determined in collaboration with the patient, family and care team. In situations where there are shared rooms, this discussion includes the other patient and family. To ensure safety, consideration will also be given to the physical limitations of the space.

There may be interruptions to family presence to protect the privacy rights of other patients or to maintain safety and security. Patients and families are asked to help with the privacy rights of others.

We encourage teams to consider the ways they can safely welcome families. Some aspects to consider include:

- Are the individuals from the same household?
- If they are not, can distancing requirements met?
- Is the room private or are there other patients/families to be mindful of?



Q15: Can people arrange large family gatherings?

A15: Depending on the current family presence level, there may be restrictions in place. Larger group visits in common areas may have to be scheduled in advance, so please contact the facility ahead of time to ensure that there is adequate and appropriate space available. This is the same practice as before the COVID-19 pandemic.

Q16: Can a LTC or PCH resident be taken outside the facility to restaurants, family homes or other gatherings?

A16: Yes. Residents can be taken for outings. Families should consider the risks to their loved one if they are in crowds.

Q17: Can residents go on overnight outings?

A17: Overnight outings may also occur unless restrictions have been placed on the facility at the direction of the Medical Health Officer.

Q18: Won't this put vulnerable residents of long-term care and personal care homes at risk?

A18: Precautions will continue to be taken to protect residents in care homes. Masking, physical distancing, hand hygiene, temperature screening, immunization and point of care testing continue to provide extra protection for residents and family members/supports.

Q19: Do I still have to coordinate the timing of my visit?

A19: Please reach out to your home to discuss arranging visits.

Q20: Do residents still need to physically distance in dining rooms? Or can dining go back to normal now that the public health order has been removed?

A20: Facilities that have not already done so will be able to return to regular routines around meals and services provided.

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