

Communication Tools | June 22, 2020

Access to Hospital for Essential Visitor Policy: Guidance for Toronto Region Hospitals (Acute, Rehab, CCC)

Key Messages

- Under direction from the Ministry of Health, Toronto Region hospitals are updating their guidelines for essential visitors during the COVID-19 pandemic. The safety of patients, visitors, physicians and staff remains paramount.
- The initial limit on visitor access to minimize the spread of COVID-19 was difficult and challenging on patients and visitors as evidence shows that family presence improves outcomes and quality of life.
- A change in visitor access requires a thoughtful and gradual reintegration of visitors into the hospitals in partnership with patients and family caregivers.
- Increasing visitor access depends on the risk of outbreak in the hospital and community, access to personal protective equipment (PPE) and critical supplies, ability to maintain physical distancing and the volume of people entering the hospital. These factors will be continually evaluated on a weekly basis and as circumstances change.
- Visitor access will be determined by a phased approach as there may be a need to change or decrease visitor access in response to current COVID-19 conditions. These changes could impact who qualifies as a visitor, length or frequency of visit and number of visitors allowed.
- Phase 1 allows visitor access for patients who require support through circumstances such as child birth, end of life care, major surgery, critical illness, mental health crisis, are vulnerable or who are unable to attend a critical outpatient service without an escort.
- Phase 2 allows visitors in the above groups to have increased access as well as the additional inclusion of long stay patients and those that require transition support. Phase 3 allows visits for low acuity or short stay patients.
- It is possible that the hospital may need to move between phases or return to an earlier phase in the case of a pandemic wave or internal outbreak.
- For the safety of everyone, visitors who enter the hospital will need to follow these protocols:
 - Be screened for COVID-19 symptoms
 - Wear a mask and be trained in appropriate use of PPE
 - Maintain physical distancing
 - Stay at patient's bedside

- Visitors may be asked to come at scheduled times, wear ID badges, receive training for PPE and hand hygiene techniques or follow other requirements.
- We recognize the impact this has on patients and visitors and will balance the need for family presence with the factors that ensure a safe environment for everyone.

FAQs for Patients and Visitors

Is it safe for me to visit a patient in the hospital?

Our hospital is safe for our patients and visitors. We have taken measures to ensure the safety and well-being of our patients and those providing care to them during the COVID-19 pandemic, including:

- Limiting visitor access and the number of people in the hospital
- Screening for symptoms at entrances
- Using masks and appropriate personal protective equipment
- Putting physical distancing measures in place

What steps do I need to take when visiting a patient?

All visitors will be screened for COVID-19 symptoms prior to entering. You will be asked to wear a mask, clean your hands frequently and maintain physical distance of 2 metres when possible. When you are visiting, we ask that you stay at the bedside and do not visit other clinical or common areas of the building.

Can I bring my own mask?

You may wear your own mask or the hospital will provide you with one. Please clean your hands before putting it on and wear it properly at all times. If you have questions about how to put on or take off the mask, please [review this tip sheet](#) or ask someone on the care team.

Why is the hospital taking a phased approach to visitor access?

Increasing visitor access is “not as simple as flicking a switch”. It requires a thoughtful and gradual reintegration of visitors into the hospital. This phased approach allows us to change or decrease visitor access in response to current COVID-19 conditions.

How long will visitor restrictions be in place?

As the circumstances around the COVID-19 pandemic continue to change and evolve, the safety of our patients, visitors, staff and physicians remains paramount. We need to balance the need of family presence and the risk of outbreak. We cannot predict how long the restrictions will be in place. The phased approach to visitor access will allow us to be flexible in increasing or decreasing access as the situation changes.

How do I know if I am qualify as an essential visitor?

A list of visitor phases and who qualifies as a visitor is posted on our website. We will communicate any changes to visitor access with as much notice as possible.

I don't currently qualify as an essential visitor, but would like to be considered with special circumstances. What should I do?

If you feel you meet the essential visitor criteria and we should provide you with an appeal, please contact Patient Relations.

Are visitors who have symptoms or who test positive for COVID-19 allowed to visit a patient?

Anyone with symptoms or who is COVID-19 positive should be self-isolating and not visit.

Essential Visitor Policy Glossary

Alternate Visitor: The alternate care partner is also familiar with the patient's diagnoses and health status and can perform health care, treatment and personal tasks for a patient with complex needs and attuned to subtle changes in their behaviour or status.

Care Partners: Distinct from casual 'visitors' as they know their loved one best, they are uniquely attuned to subtle changes in their behavior or status (Planetree International).

Critical Illness: Critical illness refers to patients who are in grave physical and morbid conditions [e.g. cancer, heart attacks and strokes].

Designated Visitor: The designated care partner is the most familiar with the patient's diagnosis and health status and have been performing health care, treatment and personal tasks for a patient with complex needs and attuned to subtle changes in their behavior or status.

Developmental Disability: Developmental disabilities are a group of conditions due to an impairment in physical, learning, language, or behaviour areas. These conditions begin during the developmental period, may impact day-to-day functioning, and usually last throughout a person's lifetime.

Essential Visitors (Care Partner): Essential visitors (care partner) are those allowed access to the hospital in situations based on compassionate care; visits that are paramount to the patient's/client's fundamental care needs, mental health and emotional support; enable processes of care and patient flow; and discharge from the hospital. Essential visitors are designated and alternate care partners that are any support person defined by the patient or resident as family, including friends, neighbours, substitute decision makers, privately paid worker and/or relatives that advocate for a loved one's needs and support them in managing their health, health care, long-term care and overall well-being. In the case of those patients who are not able to participate in decision making the substitute decision maker and/or power of attorney will serve as the designated caregiver and/or determine who is the designated and alternative care partner. Examples include individuals who, for a variety of reasons, are unable to provide their own medical history and/or make decisions for themselves, those who react to a medical environment with heightened emotionality and are unable to be calmed without medication or restraint, and once-in-a-lifetime events like childbirth or end-of-life.

Family Caregiver: Family caregiver refers to any support person defined by the patient as family and is close with the patient and may be taking care of or providing emotional and social support to the patient when they are transitioned home. Family is defined in the broadest sense and refers to people, family, friends, neighbours, colleagues, community members who provide critical and often ongoing personal, social, psychological and physical support, assistance and care, without pay for people in need of support due to frailty, illness, degenerative disease, physical/cognitive/mental disability, or end of life circumstances (The Change Foundation).

Intellectual Disability: Intellectual disability involves problems with general mental abilities that affect functioning in two areas: intellectual functioning (such as learning, problem solving, and judgement) adaptive functioning (activities of daily life such as communication and independent living).

Life-altering Event: Life-altering events have an effect that is strong enough to change someone's life [e.g. end of life, child birth, major surgery, critical illness, mental health crisis].

Mental Health Crisis: A mental health crisis is any situation in which a person's actions, feelings, and behaviors can lead to them hurting themselves or others, and/or put them at risk of being unable to care for themselves or function effectively in the community.

No In and Out Privileges: No in and out privileges includes instruction that when the essential visitor leaves the hospital they cannot return to the hospital. This term can also apply to situations where visitors are only allowed to enter the patient room once per visit. Exceptions are on a case-by-case basis deemed by the clinical team and management review.

Screening: Screening refers to the process by which those entering the hospital are screened for symptoms of the virus; awaiting test results or a household member awaiting test results; and in recent contact with anyone diagnosed with COVID-19.

Sheltering in Place: Care partners sheltering in place with a patient would remain in their loved one's room as much as possible and avoid other areas of the building for the duration of their visit [e.g. parent sheltering in place with a pediatric patient].

Visitors: Any person/people coming in to visit a patient or accompanying a patient to a scheduled appointment, surgery, procedure, emergency room visit, or being discharged home.

Vulnerable Patient: A vulnerable patient is someone who is or may be for any reason unable to protect and take care of themselves against significant harm or exploitation [e.g. patient is under 18 years of age, has a cognitive impairment significant developmental and/or intellectual disability or is unable to effectively communicate].