

Guidelines for Long-Term Care Facilities in Nova Scotia

Effective August 9, 2021

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Section 1: Purpose

The Department of Health and Wellness acknowledges the importance of Long-Term Care Facilities and the need to support residents' quality of life, mental health, and overall well-being. Residents of long-term care are more susceptible to acquiring COVID-19 and suffering related complications due to increased frailty and high prevalence of chronic health conditions. Therefore, it is important to make sure planning for long-term care is developed in a way that keeps residents safe and reduces their risk of COVID-19 exposure.

The Guidelines for Long-Term Care Facilities in Nova Scotia is a comprehensive document to facilities in safely implementing public health Orders, Directives and other protocols.

These Guidelines align with the [Health Protection Act Order](#) by the Chief Medical Officer of Health, the [COVID-19 Management in Long Term Care Facilities Directive](#) (on [DHW's password-protected website](#)) and the [Coronavirus Disease 2019 \(COVID-19\): Infection Prevention & Control Guidelines for Long-Term Care Settings](#), and do not supersede them.

These Guidelines are based on the latest available scientific evidence and expert opinion about COVID-19. As new information becomes available, or if there is an outbreak in the community, changes to these Guidelines may be made at the local or provincial level, in consultation with Public Health.

From time to time, the Nova Scotia Department of Health and Wellness may issue a memo or Continuing Care Information Release outlining temporary direction that will supersede the direction in these Guidelines.

This version of the Guidelines will continue to be applicable until further notice. If a content change is made, notice of the change will be provided through a CCIR and a new version of the Guidelines.

Section 2: What's new?

Effective August 9, 2021 at 8 a.m.:

Travel outside the long-term care facility

Regardless of immunization status, all residents may now:

- Visit a family home or Designated Caregiver's home, for up to 7 days, anywhere within Atlantic Canada.
 - Overnight stays are permitted.
 - Others may visit the home while the resident is present.
 - Families or Designated Caregivers must observe applicable gathering limits, and it is recommended that all eligible members of the family home are immunized with at least one dose of a COVID-19 vaccine.
 - A family home includes the home of a family member or Designated Caregiver, and their cottage, RV, campsite, etc.
 - Travel outside Atlantic Canada is not permitted.
- Visit the home of someone other than a family member or Designated Caregiver, within Atlantic Canada.
 - Overnight stays are not permitted.
 - Others may visit the home while the resident is present.
 - The homeowner must observe applicable gathering limits, and it is recommended that all eligible members of a family home are immunized with at least one dose of a COVID-19 vaccine.
 - A home includes the home of an individual, and their cottage, RV, campsite, etc.
- Visit a resident in another long-term care facility. Overnight stays are not permitted.

See also [Section 7: Off-site Visits](#).

Visitors

All types of visitors are now permitted to come into a facility.

Election candidates are permitted to visit a single resident or hold a group session in a common area. Door to door canvassing of residents is not permitted.

Visitors may now attend social activities with a resident if physical distance is maintained from other residents/visitors. Visitors are not permitted to attend mealtimes in the dining room with a resident.

Clarification is provided that residents may not have social visitors if the resident is in isolation because they are a) symptomatic and being tested, or b) they are a new admission and the

Admissions Protocol requires them to isolate. Note, Designated Caregivers are permitted to attend.

In this version of the Guidelines, the sections for Indoor and Outdoor Visits have been merged into one. See also [Section 6: Indoor and Outdoor Visits](#).

Visitor masking

Visitors may now remove their mask in order to eat or drink during an indoor or outdoor visit in a designated visitation area or a resident's room. See also [Masking - Visitors](#).

Gathering limits

Gathering limits permitted under the [Health Protection Act Order](#) apply to facilities during social or recreational activities that involve visitors. However, gathering limits set out in the Order do not apply in routine operations of the facility (such as dining, etc.).

Finally, in [Section 3: Definitions](#), the definitions for immunization have been removed, as now there is no difference in restrictions based on a resident's immunization status.

The following previously announced changes continue to be in effect:

For all residents, regardless of immunization status:

- Full community access is permitted for residents in DHW-licensed facilities (both nursing homes and residential care facilities). Access is permitted with a support person, Designated Caregiver, or independently, if agreed upon by the resident and facility. This includes retail stores, restaurants, banks, adult day programs, work and school.
- Indoor visits in designated visitation areas and in resident rooms are permitted. Facilities may implement scheduling of visits, as needed. Residents are encouraged, but are not required, to wear a mask. Residents may sit close, hug, touch, or exchange a kiss or handshake during an indoor visit.
- Residents may travel on public transit such as Metro Transit, Transit Cape Breton, Kings County Public Transit, Bridgewater Transit, Strait Area Transit, etc., including where residents could be on the same bus as the general public.
- Residents are permitted full community access during off-site bus trips or drives with Designated Caregivers, family members or friends. This means stops at a park, boardwalk, retail store, restaurant, or anywhere else are permitted. Applicable public health guidelines (physical distancing, gathering limits, etc.) must be followed.
- Outside contractors are permitted to enter facilities for non-essential work. This includes workers for any non-essential construction or repair projects.

Section 3: Definitions

Designated Caregiver is a specific type of visitor who is a partner in care, and who provides essential support for a resident’s physical, mental, and/or emotional well-being. “Designated Caregiver” is included in the definition of an “essential visitor” in the [COVID-19 Management in Long Term Care Facilities Directive](#). A Designated Caregiver is a family member and/or support individual who has a clearly established pattern of involvement in providing the resident’s care or supporting the resident’s emotional well-being, health, or quality of life prior to the COVID-19 pandemic, whether the support was provided in the facility, or in the community, either in person or at a distance (for example, providing emotional support via telephone). Designated Caregivers may perform tasks that:

- Assist with mobility, feeding, and personal care;
- Assist with communication for persons with hearing, visual, speech, cognitive, intellectual, or memory impairments;
- Support a resident’s mental health and emotional well-being, for example providing support to maintain cognitive function or reduce anxiety, agitation or distress in residents, or
- Support a resident’s participation in indoor/outdoor visits or social activities at the facility, as well accompanying them to off-site medical/dental appointments, or to work or school.

Facility means a long-term care facility.

Family home refers to the residence of a family member or Designated Caregiver. This may also include a family cottage, RV, etc.

On-site visit means indoor visits and outdoor visits.

- **Indoor visit** means indoors at the facility.
- **Outdoor visit** means outside the facility, but on the facility grounds.

Off-site visit means:

- Attendance at medical/dental appointments, work or school
- Going for a drive with Designated Caregivers, family members or friends, or for [Off-Site Bus Trips](#)
- Retail stores, restaurants, banks, adult day programs, etc.
- Outdoor public areas such as boardwalks, parks, etc.
- Visits to the home of a family member, Designated Caregiver, or friend
- See also [Section 7: Off-site Visits](#).

Outside Contractor refers to individuals who are not employed by the facility who provide essential and non-essential services such as painting, repairs, construction, or any other indoor or outdoor improvement work to the facility.

Sightseeing drive means a drive with the resident's Designated Caregiver(s), family members or friends, or a drive on a facility-owned and operated or leased bus.

Visitor includes family members, friends, Designated Caregivers, Volunteers, as well as family/support persons transporting a resident to an offsite visit, as well as media personnel, entertainers, and election candidates.

Volunteer means a member of the community who provides residents with recreation and social visits to enhance residents' well-being and quality of life. Volunteers can include clergy. Volunteers may support tasks including some or all of the following:

- Group recreational activities such as bingo, chair-based exercise, or religious services;
- Engaging residents in conversation, reading, watching tv, providing redirection and reassurance, and socialization;
- Assisting residents for walking programs,
- Delivering nutrition snacks;
- Assisting with meal time;
- Answering call bells;
- Facilitating communication with families via telephone or iPad;
- Assisting with the organization, operation and monitoring of indoor or outdoor visits;
- Other tasks as identified by staff.

Volunteers are not allowed to lift or transfer residents, or provide direct personal care.

Section 4: General Information

Guiding Principles

These Guidelines are based on the principles that:

- Residents need to feel supported to receive visitors, and to leave the facility for an off-site visit.
- Residents and their families, Substitute Decision Makers, support networks, or care providers should be engaged in decisions regarding visits or any concerns.
- We strike a safe, appropriate balance between resident access to family or loved ones, medical/dental appointments, work and school, and the safety of residents, staff, family, and the community.
- Indoor and outdoor visits, off-site visits and community access are done with in a way that ensures the safety of residents, staff and families.

Compassionate or palliative exceptions

As provided in the [COVID-19 Management in Long Term Care Facilities Directive](#), compassionate exception accommodations should be considered for visitors of very ill or palliative residents, even during a confirmed outbreak or when a resident is required to isolate. Under the current Directive, an exception would be necessary for unvaccinated or partially vaccinated visitors from outside of Atlantic Canada.

Visitors seeking a compassionate exception to any current requirement to self-isolate after arriving in Nova Scotia must first apply to the provincial exceptions team for a compassionate exception at [Compassionate exceptions from self-isolation](#).

Once a provincial exception to self-isolation has been granted (if applicable), the long-term care facility can approve a compassionate visit with a resident. The following measures must be in place for these types of compassionate exception visits:

- Visitation is limited to one person at a time for a resident (compassionate exceptions to this can be granted by the facility on a case-by-case basis).
- The visitor is screened on entry for COVID-19 symptoms including temperature checks.
- Visitation is allowed with only the one resident.
- Staff must support the compassionate exemption visitor in identifying and appropriately using personal protective equipment (PPE).

Public Health Measures

Carefully following Public Health Measures will help everyone stay safe, help reduce the spread of COVID-19, and will protect others and the community. For more information about general Public Health Measures, visit <https://novascotia.ca/coronavirus/avoiding-infection/>.

Physical distancing

Physical distancing will help reduce the spread of COVID-19. This means limiting contact with other people and maintaining a physical distance of 2 metres/6 feet or more from others as much as possible.

While it is advised that a resident and a visitor maintain physical distancing when possible, physical contact between a resident and a visitor is permitted (e.g., sitting close, touch, a hug, kiss, handshake). Hand hygiene and masking complement the effectiveness of physical distancing.

It is recognized that following physical distancing requirements may be difficult for some residents. This should not prohibit them participating in visits, including off-site visits. In these cases, best efforts must be made to maintain physical distance, mask wearing, and doing hand hygiene, while acknowledging it is always not possible.

Hand hygiene

See also [Appendix B: Handwashing Poster](#).

Residents and visitors must clean their hands often.

For visitors, this includes before entering the facility, before preparing food or assisting a resident with eating, after touching their mask, after using the bathroom, after handling waste or dirty laundry, whenever hands look dirty, and when exiting the facility.

Visitors should use an alcohol-based hand rub unless hands are visibly dirty. Use an alcohol-based hand rub with at least 60% alcohol. Use enough to cover the fronts and backs of both hands and between all fingers. Rub hands together until they feel dry.

Visitors are discouraged from using sinks in resident washrooms; instead use alcohol-based hand rub or sinks in washrooms designated for visitors.

For residents, hand hygiene must be performed before and after an indoor or outdoor visit, when leaving and when leaving for and returning from an off-site visit, before and after preparing or eating food, after using the bathroom, after handling waste or dirty laundry, and whenever hands look dirty.

Residents who cannot perform hand hygiene independently will need to be assisted, especially after toileting and before eating.

Respiratory etiquette

Residents and visitors are encouraged to cover coughs and sneezes with a tissue. A used tissue should be thrown in the garbage and hands should be cleaned with soap and water or with an alcohol-based hand rub, immediately after discarding the tissue. If a tissue is not available, everyone is encouraged to cough and sneeze into their elbow, not their hands, and avoid

touching their eyes, nose, and mouth. If someone needs to touch their face (including to don, doff or adjust a mask), hands should be cleaned before and after.

Masking

See also [Appendix A: Summary of masking requirements](#).

Residents

Residents are encouraged, but not required, to wear medical masks during indoor and outdoor visits, and during off-site visits. Residents are especially encouraged to wear a medical mask when physical distancing cannot or is not being maintained between the resident and others, for example, during a hug, touch, kiss or handshake.

- It is understood that masks may not be well tolerated by residents, and masks can interfere with communication for the resident.
- Residents are subject to any requirements to wear a mask as determined by their destination, for example at a medical/dental appointment, even when physical distancing is maintained.
- Facilities will provide the resident with a medical mask for situations when a mask is encouraged or required.

Visitors

- All visitors entering a facility must wear a mask at all times, particularly when physical distancing is not being maintained. The exceptions are:
 - Visitors may remove their mask in order to eat or drink during an indoor or outdoor visit in a designated visitation area or in a resident's room.
 - When the facility makes an exception in special cases, for example, if communication is negatively impacted and physical distancing can be maintained.
 - If safety is compromised, the mask should be removed, even in the absence of distancing.
- Medical masks are provided by the facility for indoor visits, and visitors may wear a medical or non-medical mask that they provide themselves for outdoor visits.
- A mask must be worn while walking through the facility to get to the site of an outdoor visit. A non-medical mask or medical mask is permitted during the brief walk through the facility; however, physical distancing from other residents must be maintained.
- Persons transporting a resident for an off-site visit must wear a non-medical mask that they provide themselves, particularly when physical distancing is not being maintained. A medical mask is also acceptable.
 - The person transporting the resident may remove their mask in exceptional circumstances, for example if the mask is negatively impacting communication, in which case physical distancing should be maintained as much as possible. If safety is compromised, the mask should be removed, even in the absence of distancing.

- Family members and friends are encouraged, but not required, to wear a mask when a resident is visiting at a family, friend, or Designated Caregiver's home.

Others

- Drivers of a facility-owned vehicle or a leased vehicle must wear a medical mask at all times.
- In-house hairdressers must wear medical masks.

Training, monitoring understanding, and compliance with Public Health Measures

Long-Term Care Facility operators will support family members, visitors, and residents participating in off-site visits. Facility operators will engage with residents, their families, visitors, and care providers to provide education about the current Infection Prevention and Control (IPAC) practices and [Public Health Measures](#).

To support the training of visitors to facilities in physical distancing, masking, hand hygiene, respiratory etiquette, donning and doffing of personal protective equipment (PPE), etc., facilities are encouraged to use the resources on the [NSHA COVID-19 Hub for Long-Term Care](#), such as the video, [What to Expect for Designated Caregivers in NSH Long Term Care Facilities](#).

Operators will ensure there is ongoing engagement with residents and visitors to ensure they understand that the facility's visitation guidelines are in place to minimize the risk of COVID-19 for residents, visitors, and staff.

To support ongoing efforts to keep both residents and staff safe, facility operators are asked to complete an initial and an ongoing monthly review of their current visitation practices. This is to ensure ongoing compliance by residents, families, and staff with [NSHA Coronavirus Disease 2019 \(COVID-19\): Infection Prevention & Control for Long-Term Care Settings](#).

Scheduling of indoor/outdoor visits and Designated Caregivers, and notification of off-site visits

Facilities may decide to implement scheduling for indoor or outdoor visits to safely accommodate visitors at each site (i.e. ability to physically distance, for shared rooms, availability of screening staff, observance of gathering limits in the [Health Protection Act Order](#), etc.).

Designated Caregivers are not required to schedule their visit. The facility may request that the Designated Caregiver coordinate their visit with the long-term care facility.

Facilities are expected to implement reasonable procedures around visits to help ensure that [Public Health Measures](#) are followed, that sufficient staff or Volunteers are available to support visitor screening and the departure and return of residents attending an off-site visit, including preparation of any medications that would be needed during the off-site visit and to assess the

need to clean any transportation aids on the resident's return (for example, for any shared transportation aids).

Facilities may establish visiting hours, staggering visits by household or room number, etc. Priority should be given to those who have not had a visit before providing a second visit for a resident.

Processes must comply with Section 22(5) of the [Regulations](#) under the *Homes for Special Care Act* that say, "No resident shall be deprived of the right to have visitors during reasonable hours of the day." The Regulations may be superseded by an [Order](#) under the *Health Protection Act* or a [Declaration of Provincial State of Emergency](#).

The total number of visitors within the facility will be determined by the facility and may be limited by the facility's capacity to effectively adhere to physical distancing while supporting meaningful social connection with the resident. There is no prescribed length of time for an indoor or outdoor visit, but it is recommended that facilities allow sufficient time for visitors and residents to ensure a quality visit. The length of visits may vary by facility based on space available for indoor visits, the time required for environmental cleaning between visitors, and other factors.

Section 5: Planning and Operationalizing Visits

Maintaining Up-to-Date Resident, Staff and Visitor Information

Maintaining up to date resident, staff, and visitor information is important for facilities to be able to quickly and effectively communicate with other staff, families, and Public Health in the event that someone becomes ill with COVID-19.

Resident Information

- Create and maintain a current resident list including:
 - name, date of birth, health card number, and contact information

Staff/Designated Caregiver/Volunteer Information

- Create and maintain a current list of staff (including casual staff, Designated Caregivers and Volunteers) including:
 - date of birth, email, phone number
 - other facilities where a staff member is currently working (i.e., long-term care or home care agencies, NSHA, etc.).

Staff, Designated Caregivers, and Volunteers are requested to have their health card number on them at all times while working, in the event that Public Health needs it for contact tracing purposes.

Preparing your Facility

Physical spaces

- Establish designated areas (such as at the door) to receive visitors coming into the LTCF, and for resident pick-up and drop-off. Facilities should consider:
 - Designating these areas to be as close to the entrance as possible and installing physical markings to indicate the flow of visitors and residents, to best facilitate physical distancing during arrival/departure or pick-up/drop-off.
 - Providing alcohol-based hand rub and garbage cans for disposal of soiled items.
- The designated area will be used to:
 - Screen visitors and returning residents, and administer the [Visitor Activity Log](#) and the [Resident Off-site Visit Log](#).
 - Provide a space for hand hygiene. Visitors will clean their hands upon arrival and when exiting, and residents will clean their hands when leaving and re-entering the LTCF.
 - Provide masks for residents/visitors, as indicated in the section on [Masking](#).
- For indoor and outdoor visits, plan to make chairs available for visitors and residents, to be placed far enough apart to maintain physical distancing.

- Establish a process for cleaning and disinfecting any furniture and high-touch surfaces used in a visitation area at the end of an indoor or outdoor visit at the LTCF, as per [NSHA Coronavirus Disease 2019 \(COVID-19\): Infection Prevention & Control for Long-Term Care Settings](#).
- Establish a process to assess the need to clean any transportation aids when the resident returns from an off-site visit (for example, for any shared transportation aids).

Signage

- Post signage at designated pick-up/drop-off spots and visitor check-in spots. Signs are provided in [Appendix B: Handwashing Poster](#), in [Appendix C: How to Wear a Mask](#) and at [NSHA Coronavirus Resources](#). Signage should inform residents and visitors about:
 - Symptoms of COVID-19
 - Expectations for residents and family members, friends or support persons who are transporting residents
 - Physical distancing requirements
 - Proper hand hygiene (See [Appendix B: Handwashing Poster](#))
 - Proper respiratory etiquette
 - How to wear a mask

Supplies

- Ensure appropriate supplies are available: medical masks for residents and visitors (see Masking), alcohol-based hand rub, supplies for cleaning visitation spaces and, if deemed necessary (for example, if the equipment has been shared with other residents), resident equipment upon return from an off-site visit.
- Facilities may decide to have additional medical masks available for visitors who arrive for an outdoor visit or to accompany the resident off-site, but did not bring a mask with them. Visitors arriving for an indoor visit will be given a medical mask by the facility.
- If possible, facilities and families are encouraged to provide travel-sized, alcohol-based hand rub for residents, to promote frequent hand hygiene after contact with high-touch surfaces during travel to off-site visits.
- Establish a process for capturing a resident's supply needs, such as medications or transportation aids (wheelchairs, walkers), during any off-site visit.

Communicating with residents, families, and visitors

- Make information about visits easily accessible on the facility's website, internal message boards, and in writing for residents, their families, and friends. Include information such as the process for indoor and outdoor visits, and the need for advance notification of when a resident will be leaving to attend a medical/dental appointment.
- Prepare and provide information to families or other visitors prior to the indoor, outdoor or off-site visit, to promote compliance with the [Public Health Measures](#).

- ❑ Communicate the expectations for screening all indoor and outdoor visitors, for masking, and that family members, friends or support persons transporting residents off-site are encouraged to provide alcohol-based hand rub for hand hygiene.
- ❑ Communicate the expectation that family members, friends or support persons picking up a resident for an off-site medical/dental appointment should not enter the facility unless necessary, and are encouraged to drop off/pick-up their loved one at the designated outdoor location.
- ❑ Communicate with residents and families/support persons transporting a resident about the [Resident Off-site Visit Log](#) and the process to collect information about the resident's intended destination and return to the facility. The Log will help staff in performing a risk assessment to determine the resident's potential exposure to risks during transport and while away from the facility. This will include where the resident has been, any potential exposures to COVID-19, challenges to adhering to the requirements, etc.

See [Appendix D: Communication Messaging and Letter Templates](#) for suggested messaging.

Communicating with staff

- ❑ Ensure all staff are informed and understand procedures for indoor and outdoor visits, and off-site visits. This information should include:
 - The provisions and importance of observing [Public Health Measures](#)
 - Where to meet visitors and residents for arrival, departure, and re-entry into the facility
 - How to conduct visitor screening
 - How to populate the [Visitor Activity Log](#) and the [Resident Off-site Visit Log](#)
- ❑ Regularly provide education and training for staff on [Public Health Measures](#) and COVID-19 prevention, response, and management, including:
 - COVID-19 transmission
 - Point-of-care risk assessment
 - Hand hygiene protocols and procedures
 - Cleaning and disinfection procedures
 - Information on how to properly don/doff masks and other PPE. Note, training resources are available at [NSHA Coronavirus \(COVID-19\) Resources](#).

Visitor Activity Log

- ❑ Create and maintain a Visitor Activity Log to record information about all visitors entering the facility. The log will include:
 - Resident's name (who is being visited)
 - Location of visit (indoor, resident room, outdoor, etc.).
 - Visitor information:
 - Name, date of birth, and contact information
 - Date/time of visit
 - Results of the Screening Tool for Long-Term Care Facilities (see [Appendix E: Screening Tool for Visitors to Long-Term Care Facilities](#))

Resident Off-site Visit Log

- Create and maintain a Resident Off-site Visit Log to record information about residents going for an off-site visit, and, unless leaving independently, information about the family member, friend or support person (or bus driver for leased buses) who accompanies or transports the resident. The Log will include:
 - Resident's name
 - Reason for off-site visit (medical/dental appointment, sightseeing drive, home visit, etc.).
 - Address of destination(s)
 - Date/time of departure and anticipated return to the facility
 - Mode of transportation
 - Visitor's name – who is accompanying or transporting the resident for an off-site visit, or bus driver in the case of a leased bus, including:
 - Name, date of birth, and contact information
 - Results of the Screening Tool for Long Term Care Facilities (see [Appendix E: Screening Tool for Visitors to Long-Term Care Facilities](#))
- The log will capture the following information when the resident returns:
 - Whether or not the requirements for physical distancing, applicable community-based gathering limits, and hand hygiene were followed. Also capture information on whether a mask was worn by the resident and others in close contact (when applicable).
 - If, during the visit, there has been any contact with someone who is suspected or confirmed positive for COVID-19, someone who is waiting for test results, or someone who is currently self-isolating or is required to self-isolate.
 - Confirm the destination(s) visited and document the time of return to the facility.
- This information must be retained for 4 weeks from the date of the visit.
- See also [Section 7: Off-site Visits](#).

Developing a process for escalation of concerns

- Facilities should have a process for staff, residents, Designated Caregivers, Volunteers or families to communicate concerns while engaging in indoor and outdoor visits and off-site visits.

Day of visit activities

Screening of residents

- Residents are actively screened as per the [COVID-19 Management in Long Term Care Facilities Directive](#) (on [DHW's password-protected website](#)). Therefore, residents do not need additional screening before or after on-site or off-site visits.
 - The need for an off-site visit for a medical/dental appointment or testing for a resident who is a suspect or confirmed case of COVID-19 will be assessed on a case-by-case basis by the resident, Substitute Decision Maker, and facility staff in conjunction with the Medical Director and Public Health. The destination should be consulted to confirm the

appointment can proceed and should advise on any precautions that should be followed.

- A resident is permitted full community access, if they have a chronic stable (unchanged) cough, sneeze, runny nose, or nasal congestion, that is clearly linked to a known medical condition such as asthma or allergies. Please discuss with your management team and inform the resident and Substitute Decision Maker and/or family of the final decision.

Greeting visitors

- Facilities must receive visitors in the designated waiting area upon arrival.
- Visitors must clean their hands on arrival and departure.
- Facilities may decide to provide a medical mask for visitors who arrive for an outdoor visit or to accompany the resident off-site, but did not bring a mask with them. Visitors arriving for an indoor visit will be given a medical mask.
- Families may bring food and other gifts to the facility when they visit. Items brought into the facility do not need to be isolated. Proper hand hygiene should be conducted after handling these items.

Screening and eligibility of visitors

- All visitors must be screened by a designated screener on arrival at the facility for signs and symptoms of COVID-19, according to the screening of visitors as indicated in Section 2.0 of the [COVID-19 Management in Long Term Care Facilities Directive](#) (on [DHW's password-protected website](#)). In addition, visitors will be asked questions about travel, close contact with someone who has COVID, and if someone is awaiting test results.
- A screening tool is provided in [Appendix E: Screening Tool for Visitors to Long-Term Care Facilities](#). Be sure to check the [COVID-19 Management in Long Term Care Facilities Directive](#) (on [DHW's password-protected website](#)) for updates to the screening criteria.
- Screening must occur prior to coming into contact with the resident. Screening can occur at the door, in a reception area, or outside.
- Staff should communicate to visitors that if they become ill in the two weeks following their interaction with the resident, they should complete the [COVID self-assessment tool](#), and notify the facility as a precaution.
- Record the screening results in the [Visitor Activity Log](#) or the [Resident Off-site Visit Log](#).
- Children may visit with residents if accompanied by an adult, subject to facility policy. If facilities feel they are operationally unable to accommodate children, the facility should communicate this to families.
- See [Compassionate or palliative exceptions](#) for information about visits to residents who are very ill or palliative.

Provide education for residents and visitors

- At the first visit, and then as needed, staff will provide residents and visitors with education on the importance and correct use of physical distancing, hand hygiene, respiratory etiquette, and masking.
- At the first visit, and then as needed, staff will provide information to the resident and family/support person on [Public Health Measures](#) to support safe off-site visits.
- Visitors, and residents, to the best of their ability, should indicate that they understand the possible impacts of COVID-19 and the need to follow precautions to prevent unknowingly transmitting COVID-19 to their loved one or others.
- Facility staff will direct visitors to the designated visitation space. Staff should check in periodically to ensure that [Public Health Measures](#) are followed.

Facilitating the end of an indoor or outdoor visit, and exit of visitors

- Staff will ensure the [Visitor Activity Log](#) is updated with the time of departure.
- Residents and visitors must clean their hands at the end of the visit or before leaving the facility.
- Staff are not required to accompany a visitor when leaving the location of an indoor or outdoor visit.
- Any furniture and surfaces used in visitation areas will be cleaned and disinfected at the end of each visit, as per [NSHA Coronavirus Disease 2019 \(COVID-19\): Infection Prevention & Control for Long-Term Care Settings](#).

Procedure for return of resident following an off-site visit

The following applies to off-site visits, including [Off-Site Bus Trips](#):

- Residents must clean their hands before re-entering the facility.
- Verify and update information in the [Resident Off-site Visit Log](#).
- Residents are not required to isolate after returning from an off-site visit, unless required by Public Health.
- While only essential equipment should be used by residents when leaving the facility, any transportation aids that are shared with other residents must be cleaned when a resident returns from an off-site visit. A list of appropriate disinfectants can be found at Health Canada's [Hard Surface Disinfectants and Hand Sanitizers \(COVID-19\)](#).
- To find the current guidance on handling resident's personal equipment, please refer to [NSHA Coronavirus Disease 2019 \(COVID-19\): Infection Prevention & Control Guidelines for Home & Community Care](#).

Section 6: Indoor and Outdoor Visits

Effective August 9, 2021, all types of visitors are now permitted to come into a facility. Election candidates are permitted to visit a single resident or hold a group session in a common area. Door to door canvassing of residents is not permitted.

Visitors may now attend social activities with a resident if physical distance is maintained from other residents/visitors. Visitors are not permitted to attend mealtimes in the dining room with a resident.

Gathering limits permitted under the [Health Protection Act Order](#) now apply to facilities during social or recreational activities involving visitors. Note, gathering limits set out in the Order do not apply in routine operations of the facility (such as dining, etc.).

Clarification is provided that residents may not have social visitors if the resident is in isolation because they are a) symptomatic and being tested, or b) they are a new admission and the Admissions Protocol requires them to isolate. Note, Designated Caregivers are permitted to attend.

Indoor visits must be made available to all residents and their families as not every resident can go outdoors, and weather conditions are not always conducive to outdoor visits.

Musicians may come into the facility and perform and sing for residents. Sing-a-longs are permitted.

Facilities may implement scheduling of visitors, if necessary. See also [Scheduling of indoor/outdoor visits and Designated Caregivers, and notification of off-site visits](#).

Public Health Measures

In general, visits must follow [Public Health Measures](#). For masking of residents and visitors, see [Appendix A: Summary of masking requirements](#).

Residents are not required to maintain physical distancing from their visitors. This means that residents may sit close, hug, touch, or exchange a kiss or handshake during an indoor or outdoor visit.

Location

Indoor visits with residents may occur in designated areas of the facility or in resident rooms. However, Designated Caregivers and Volunteers are not restricted to visiting in designated areas of the facility or resident rooms. See also [Section 8: Designated Caregivers and Volunteers](#).

The location of outdoor visits should be chosen with a view to minimizing or eliminating the need for a visitor to travel inside the building to get to the location of an outdoor visit. If travel inside the facility is required to get to the outdoor visit location, efforts must be made to maintain physical distancing from other residents while this travel occurs.

DHW has provided support to facilities for outdoor shelters for use in poor weather.

Numbers and gathering limits

These Guidelines do not set a maximum number of visitors for each resident during a visit. These numbers will be determined by the facility, and will take into consideration facility spaces and operations, the requirement to distance one family visit from another in a single space, and the number of staff or Volunteers available to manage and periodically monitor the visitations for adherence to [Public Health Measures](#) such as masking.

The facility is also responsible for observing gathering limits permitted under the [Health Protection Act Order](#) which now apply to facilities during social or recreational activities involving visitors.

Facility staff must minimize any potential crowding while visitors are arriving, departing, and travelling to the outdoor visit location.

Section 7: Off-site Visits

Note, effective August 9, 2021, all residents, regardless of immunization status, may:

- Visit a family home or Designated Caregiver's home, for up to 7 days, anywhere within Atlantic Canada.
 - Overnight stays are permitted.
 - Others may visit the home while the resident is present.
 - Families or Designated Caregivers must observe applicable gathering limits, and it is recommended that all eligible members of the family home are immunized with at least one dose of a COVID-19 vaccine.
 - A family home includes the home of a family member or Designated Caregiver, and their cottage, RV, campsite, etc.
 - Travel outside Atlantic Canada is not permitted.
- Visit the home of someone other than a family member or Designated Caregiver, within Atlantic Canada.
 - Overnight stays are not permitted.
 - Others may visit the home while the resident is present.
 - The homeowner must observe applicable gathering limits, and it is recommended that all eligible members of a family home are immunized with at least one dose of a COVID-19 vaccine.
 - A home includes the home of an individual, and their cottage, RV, campsite, etc.
- Visit a resident in another long-term care facility. Overnight stays are not permitted.

See also: definition of a family home in [Section 3: Definitions](#).

All residents, regardless of immunization status, may have full community access. This includes retail stores, restaurants, banks, adult day programs, outdoor public areas such as boardwalks, parks, etc. They may also attend medical/dental appointments, and go for walks outside the facility grounds, locally in the facility's neighbourhood and beyond.

Residents may go for an off-site visit accompanied by a Designated Caregiver, a friend or family member, a Volunteer, or a staff member, or independently, if the resident/Substitute Decision Maker and facility care team consider it safe to do so.

The person accompanying the resident must be screened and must understand that all [Public Health Measures](#) must be adhered to including masking, physical distancing and gathering limits.

Residents are expected to follow any additional guidelines, such as wearing a mask if required by their destination.

There is no limit on the how often a resident is able leave the facility for off-site visits.

Information about the outing must be logged in the [Resident Off-site Visit Log](#), including date and time, individual supporting the resident, and expected return.

Safe resident transportation

Residents may travel in private vehicles with one or more persons accompanying them, as well as a driver. The private vehicle may include a licensed taxi or other private accessible transit service.

Residents may travel on public transit such as Metro Transit, Transit Cape Breton, Kings County Public Transit, Bridgewater Transit, Strait Area Transit, etc., where residents could be on the same bus as the general public.

Publicly-funded shared transportation services such as Access-a-Bus can be used to transport a resident and their support person(s). Residents may travel with residents from other facilities, or with members of the public.

High-touch surfaces in facility-operated vehicles or vehicles contracted by facilities to provide transportation for residents should be cleaned and disinfected between outings.

Families should clean the inside of their vehicle before and after transporting a resident. Facilities may provide families with the list of disinfectants at Health Canada's [Hard Surface Disinfectants and Hand Sanitizers \(COVID-19\)](#).

See also [Off-Site Bus Trips](#).

Section 8: Designated Caregivers and Volunteers

Designated Caregivers and Volunteers have broad access to residents. See also definition of Designated Caregivers and Volunteers in [Section 3: Definitions](#).

Designated Caregivers and Volunteers, like any visitor, must be educated on [Public Health Measures](#) as well as PPE and infection prevention and control practices at a level normally provided to staff. Designated Caregivers and Volunteers also need orientation to any applicable facility policies and procedures, including the mechanism to appeal decisions made by the facility that affect the Designated Caregiver, the Volunteer, or the resident.

Designated Caregivers and Volunteers are encouraged, but not required, to maintain physical distancing. Medical masks must be worn at all times.

Designated Caregivers and Volunteers are encouraged, but not required, to be immunized against COVID-19.

A facility may determine the total number of Designated Caregivers and Volunteers who are in the facility at any one time.

During a suspect or laboratory confirmed COVID-19 outbreak within a facility, the use of Designated Caregivers and Volunteers will be in accordance with the Health Protection Act Order.

It is suggested that facilities develop a form of identification for Designated Caregivers and Volunteers, such as ID badges, to facilitate easy identification within the facility by staff.

Designated Caregivers

See also definition of Designated Caregiver in [Section 3: Definitions](#).

A Designated Caregiver is a specific type of visitor who is a partner in care, and who provides essential support for a resident's physical, mental, and/or emotional well-being. Facility staff must work with residents and/or Substitute Decision Makers to identify persons to serve as Designated Caregivers.

Residents and/or Substitute Decision Makers may identify up to two Designated Caregivers for a resident.

A Designated Caregiver is permitted to have daily access to the resident. Two Designated Caregivers can visit with a resident at the same time.

Designated Caregivers are not required to schedule their visit. The facility may request that the Designated Caregiver coordinate their visit with the long-term care facility.

A Designated Caregiver or two Designated Caregivers may take more than one resident for a sightseeing drive.

A Designated Caregiver will generally support only one resident, although a Designated Caregiver may support more than one resident in a facility, if approved by the facility. This will be determined on a case-by-case basis and should consider situations where residents are related, married, or have a close relationship.

If a Designated Caregiver cannot perform their role for a period of time for any reason (e.g., due to self-isolation requirements, other competing caregiving duties, or is otherwise unable), the resident and/or Substitute Decision Maker may identify a temporary replacement. Local Public Health offices can support this process. The name and contact information for the replacement must be communicated to facility staff prior to attendance as a Designated Caregiver, to allow for training on [Public Health Measures](#), as well as PPE and IPAC training normally provided to staff. Temporary Designated Caregivers will replace the designated caregiver during the period they are unavailable.

A Designated Caregiver may go to a resident room and common areas. It is recommended, but not mandatory, that Designated Caregivers minimize unnecessary movement in the facility, to the extent that this is reasonable for supporting the resident. Designated Caregivers are not required to be escorted by staff to a resident's room or visitation site when they arrive and when they leave.

Volunteers

See also definition of Volunteers in [Section 3: Definitions](#).

Volunteers may visit residents to enhance recreation, socialization and well-being. Volunteers may include clergy members (who may also qualify as an “essential visitor” as defined in [COVID-19 Management in Long Term Care Facilities - Directive](#) on [DHW's password-protected website](#))

Individuals who participated as a Volunteer prior to the pandemic may resume their volunteer activities, and new Volunteers are permitted as well.

Volunteers must receive orientation and training to facility policies and procedures. This may include an overview of tasks, a review of [Public Health Measures](#), infection prevention and control protocols in the facility, donning and doffing PPE, and how to porter a wheelchair. Volunteers should work collaboratively with and be prepared to take direction from staff.

Volunteers should be informed of the risks involved in volunteering (e.g., risk of infection to themselves or others, including their loved one) and indicate their agreement to follow established protocols and requirements.

Volunteers are not required to schedule their visit. Some facilities may ask Volunteers to schedule or notify them of their intended visits, to ensure residents are aware of upcoming opportunities for interaction with the Volunteer, and for facilities to plan group activities.

Unless restricted by facility policy, Volunteers may access resident rooms, as well as common areas. It is recommended, but not mandatory, that Volunteers minimize their movement in the facility, including between floors or neighbourhoods in a facility. However, this should not limit the use of Volunteers in the facility. For example, a specific Volunteer may be assigned the same residents from one visit to another.

Section 9: Hair Salons

Licensed hairdressers can offer services to all residents, regardless of immunization status. COVID-19 immunization for the hairdresser is recommended but not required.

Visits from licenced hair stylists are permitted.

All licensed hairdressing service providers must follow the industry guidelines and protocols set out by the Cosmetology Association of Nova Scotia. These guidelines can be accessed at the [Cosmetology Association of Nova Scotia](#) website. These guidelines require both service providers and clients to wear a medical mask and observe proper hand and respiratory hygiene.

Licensed hairdressers who provide hairdressing services in Long-Term Care Facilities must have submitted safety plans for review by the facility operator for feasibility. All safety plans must follow the guidelines outlined in the [NSHA Coronavirus Disease 2019 \(COVID-19\): Infection Prevention & Control for Long-Term Care Settings](#). Safety plans must be made available electronically on the facility's website, distributed in writing to residents and their families, and posted in the service area of the facility prior to services being offered.

Hairdressing services must be cancelled if either the service provider or the client is experiencing symptoms of a respiratory illness. Salon operators and facilities must retain a list of every person who has received services and the time and date when these services were provided.

Facility staff may also receive hairdressing services. Services are not available to others, such as family members or the general public.

Section 10: Social Activities

On-Site Resident Activities

Effective August 9, 2021, visitors may now attend social activities with a resident if they can maintain physical distancing from other residents and their visitors.

Also effective August 9, 2021, gathering limits permitted under the [Health Protection Act Order](#) apply to facilities during social or recreational activities involving visitors. Note, gathering limits set out in the Order do not apply in routine operations of the facility (such as dining, etc.).

Cleaning and hand hygiene will be implemented before and after residents come together for an activity.

During on-site resident social activities or when a resident is visiting another resident at the facility, residents do not have to maintain physical distancing from each other. This means residents may sit close, touch, hug, kiss and exchange a handshake. Residents may also share a meal together, socialize together, or attend a recreational event together. Cohorting residents, for example by neighbourhood, is not necessary.

Musicians may come into the facility and perform and sing for residents. Sing-a-longs are permitted.

Off-Site Bus Trips

Residents are permitted full community access on off-site bus trips. This means the bus may stop at a park, boardwalk, retail store, or anywhere else, as long as it is considered safe to do so and follows public health guidelines (i.e., gathering limits). The facility will use the [Resident Off-site Visit Log](#) to record information about the bus driver and residents who participate in a bus trip.

Facilities are permitted to use their own buses or leased buses to take residents for sightseeing drives off the grounds of the facility. Staff-owned vehicles should not be used for this purpose, for insurance and other reasons.

If facility-owned buses are used, the facility must ensure that that buses are cleaned before and after use, and that all [Public Health Measures](#) are followed, such as hand hygiene prior to boarding and after disembarking from the vehicle.

If leased buses are used, the facility must ensure that drivers are screened according to the screening criteria for visitors, that buses are cleaned before and after use, and that all [Public Health Measures](#) are followed, including masking and hand hygiene prior to boarding and after disembarking from the vehicle.

Section 11: What to do if a resident or staff member reports symptoms of COVID-19

Please consult the [COVID-19 Management in Long Term Care Facilities Directive](#) and the [Outbreak Response Toolkit](#), both of which are available on [DHW's password-protected website](#). Please also see the resources on the [NSHA Hub for Continuing Care](#). See [Appendix G: List of websites in this document](#) for URL and password.

Note, during contact tracing of a positive COVID-19 case (staff or resident), the facility will be asked to provide information about all visitors, resident transfers, and off-site visits.

When a resident has a symptom of COVID-19, the symptomatic resident is not permitted to participate in visitation. Visitation may continue for other residents, unless prohibited by Public Health.

During a confirmed outbreak, no indoor or outdoor social visitation is permitted, as per the [COVID-19 Management in Long Term Care Facilities Directive](#).

The need for an off-site visit for a medical/dental appointment or testing for a resident who is a suspect or confirmed case of COVID-19 will be assessed on a case-by-case basis by the resident, Substitute Decision Maker, and facility staff in conjunction with the Medical Officer of Health and Public Health. The destination should be consulted to confirm the appointment can proceed, and on any precautions that should be followed.

If a staff, volunteer, or visitor becomes symptomatic while in the facility, they should immediately perform hand hygiene, ensure that they do not remove their mask, inform their supervisor (if applicable), avoid further resident and staff contact, go home to isolate (if applicable), and arrange COVID-19 testing.

Appendix A: Summary of masking requirements

See also [Masking](#)

	Type of mask to be worn	Provided by	Advice if individual does not wear a mask
Indoor and outdoor visits			
Resident	Medical mask	Facility	Medical mask is encouraged but not required, particularly when physical distancing is not being maintained, for example, during a hug, touch, kiss or handshake.
Visitors	Medical mask for indoor visit	Facility	Facility must remind visitor that they are expected to wear a mask at all times, especially when physical distancing is not maintained. However, visitors may remove their mask to eat or drink during an indoor or outdoor visit in a designated visitation area or a resident's room. A facility may make an exception in special circumstances, for example, if communication is negatively impacted and physical distancing can be maintained. If safety is compromised, the mask should be removed, even in absence of distancing.
	Non-medical or medical mask for outdoor visit	Visitor	
Off-site visits			
Resident	Medical mask	Facility	Medical mask is encouraged but not required, particularly when physical distancing can not or is not being maintained, for example, during a hug, touch, kiss or handshake. A mask must be worn if required by the destination.
Family member, friend, support person or Designated Caregiver transporting resident anywhere or during a visit to a family home	Non-medical or medical mask	Provided themselves	Facility must remind them that they are expected to wear a mask at all times, especially when physical distancing is not maintained. However, visitors may remove their mask in order to eat or drink, during an indoor or outdoor visit in a designated visitation area or a resident's room. A facility may make an exception in special circumstances, for example, if communication is negatively

	Type of mask to be worn	Provided by	Advice if individual does not wear a mask
			<p>impacted and physical distancing can be maintained. If safety is compromised, the mask should be removed, even in absence of distancing.</p> <p>Family members and friends are encouraged, but not required, to wear a mask when a resident is visiting a family, friend or Designated Caregiver's home, particularly when physical distancing is not maintained.</p>
Driver, facility-owned or leased bus	Medical mask	Facility	Facility must remind driver that they are expected to wear a mask at all times. If safety is compromised, the mask should be removed, even in absence of distancing.
In-house hairdresser	Medical mask	Hairdresser	Hairdressers must follow the guidelines for hairdressing services, established by the Cosmetology Association of Nova Scotia.

Appendix B: Handwashing Poster

Good Hygiene Stops the Spread of Germs

How to Wash Your Hands



1

Wet your hands with warm running water.



2

Add soap and scrub for 15-20 seconds.



3

Remember to get every part of both hands.



4

Rinse the soap off under running warm water.



5

Dry your hands with a clean towel.



6

Use the towel to turn off the tap.



When soap and water are not available, please use alcohol-based hand sanitizer and rub all parts of your hands for at least 15 seconds.

Updated May 28, 2020



For information visit: novascotia.ca/coronavirus

PROPER HAND WASHING

Washing your hands frequently with soap and water is the best way to reduce the spread of germs.



1 Wet your hands with warm running water



2 Add soap and scrub for 15–20 seconds



3 Wash backs, thumbs, between fingers, and under nails



4 Rinse off soap under running water



5 Dry your hands with a clean towel



6 Turn off tap with a towel

When soap and water are not available, alcohol-based hand sanitizers can be used if hands are not visibly soiled.



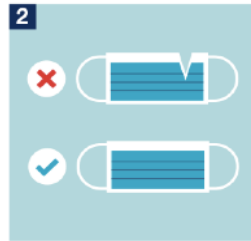
Appendix C: How to Wear a Mask

Medical Masks

HOW TO WEAR A PROCEDURE MASK



1 Wash your hands with soap and water for 20-30 seconds or perform hand hygiene with alcohol-based hand rub before touching the face mask.



2 Check the new mask to make sure it's not damaged.



3 Ensure colour side of the mask faces outward.



4 Locate the metallic strip. Place it over and mold it to the nose bridge.



5 Place an ear loop around each ear or tie the top and bottom straps.



6 Cover mouth and nose fully, making sure there are no gaps. Pull the bottom of the mask to fully open and fit under your chin.



7 Press the metallic strip again to fit the shape of the nose. Perform hand hygiene.



8 Do not touch the mask while using it. If you do, perform hand hygiene.



9 Replace the mask if it gets wet or dirty and wash your hands again after putting it on. Do not reuse the mask.

Removing the Mask

1 Perform hand hygiene.

2 Do not touch the front of your mask. Lean forward, gently remove the mask from behind by holding both ear loops or ties.

3 Discard the mask in a waste container.

4 Perform hand hygiene.

These materials were adapted with permission from the BCCDC and the British Columbia Ministry of Health.



NON-MEDICAL MASKS

Keeping each other safe is more important than ever. Wearing a non-medical mask is now mandatory in most indoor public places. Here's how to safely wear and care for your non-medical, reusable mask.



Ensure the mask is made of at least two layers of tightly woven fabric.



Inspect the mask for tears or holes. Ensure mask is clean and dry.



Wash or sanitize your hands before and after touching the mask.



Use the ties or ear loops to put the mask over your mouth and nose.



The mask should fit snugly to the cheeks and cover your nose and mouth. There should be no gaps.



Avoid touching your face while wearing the mask.



Wash or sanitize your hands if you touch the mask and before and after removing the mask.



Remove the mask by the ties or ear loops. Avoid touching the front of the mask.



Store the mask in a clean place if wearing it again.



Wash the mask with hot, soapy water and let dry completely. Masks can be included with laundry.

Mask Don'ts

- ✗ Don't reuse masks that are moist, dirty or damaged
- ✗ Don't touch your mask while wearing it
- ✗ Don't hang the mask from your neck or ears
- ✗ Don't leave your used mask within reach of others
- ✗ Don't wear a loose mask
- ✗ Don't remove your mask to talk to someone
- ✗ Don't share your mask
- ✗ Don't wear a face shield instead of a mask

A mask alone cannot prevent the spread of COVID-19.

Be sure to:

- Stay home if you feel unwell
- Maintain physical distance as much as possible
- Wash or sanitize your hands often
- Use proper cough or sneeze etiquette
- Avoid touching your face, mouth, nose and eyes

Appendix D: Communication Messaging and Letter Templates

Off-Site Visits

Initial Letter to Families

We are very pleased that the Province of Nova Scotia is allowing residents of Long-Term Care Facilities to have full community access, as per the restrictions in the Public Health Order, to attend medical/dental appointments, for walks off the facility grounds including parks and boardwalks, restaurants, retail stores, banks, and adult day programs, while accompanied by a family member or friend. Residents may also leave the facility to go to a family, friend or Designated Caregiver's home, cottage, or RV. Residents may also go on a sightseeing drive with one or two Designated Caregivers, family members and friends, and drive-throughs and stops in the community are permitted.

Residents may choose to leave the facility on their own if they are comfortable doing so, and if the resident/Substitute Decision Maker and facility care team consider it safe to do so.

Families can do a lot to help ensure everyone's safety. Residents and their family members/visitors are required to abide by physical distancing requirements, applicable community-based gathering limits, and observe hand hygiene and respiratory etiquette when attending an off-site visit. Family members and friends must wear a non-medical or medical mask, and should remove it only in exceptional circumstances, for example, if communication is negatively impacted. Family members and friends must wear a mask during a hug, touch, kiss, handshake, or any time physical distancing can not be maintained. Residents are encouraged, but not required, to wear a medical mask. We will provide a medical mask for your loved one, and encourage them to wear it.

Families are expected to provide reasonable notice of an off-site visit, to arrange a pick-up and drop-off time, and to give staff time to prepare any necessary medications or transportation aids. Should your loved one's off-site visit be cancelled for any reason, please notify the facility in a timely manner.

Additional information about visits can be found at:

<https://novascotia.ca/coronavirus/docs/Guidelines-for-Long-Term-Care-Visits.pdf>

This document is posted at <https://novascotia.ca/coronavirus/resources/> where you can scan down to "Long-term care visiting guidelines."

If you have any questions, please get in touch by [emailing/calling us at xxx}. Please help keep your loved ones, and our staff, safe.

We look forward to seeing you soon.

Confirmation Letter: Picking-Up a Resident for an Off-site Visit

Dear [insert individual name(s)]:

This is to confirm that you will be picking up [insert resident name] on [insert date] at [insert time] for [insert type of off-site visit]. Pick-up will occur at [insert location].

Families can do a lot to help ensure everyone's safety.

Before you pick up your resident, you must:

- Bring alcohol-based hand rub, if available, for you and your loved one to use after using the washroom, touching your mask, or contact with high-touch surfaces;
- Arrive at your pick-up time and wait in the marked area;
- Undergo screening by a staff member for signs and symptoms of COVID-19, according to the screening process for visitors to long-term care facilities, and clean your hands;
- Confirm that you understand that COVID-19 is a serious illness, and that you understand physical distancing, hand hygiene, respiratory etiquette, community-based gathering limits, and the wearing of masks to prevent unknowingly transmitting the virus to your loved one and others;
- Provide information on your intended destination(s) and be prepared to confirm or update that information when your loved one returns to our facility.

Residents and their family members, friends or support persons are required to abide by physical distancing requirements, hand hygiene, respiratory etiquette, community-based gathering limits, and the wearing of masks, when travelling and at a destination.

Residents are encouraged, but not required to wear a mask, especially when physical distancing is not maintained. We will provide a medical mask for your loved one, and encourage them to wear it. They may be required to wear a mask at their destination (such as a medical office) or when travelling via a transportation service.

Family members, friends or support persons should wear a non-medical or medical mask that they provide themselves, during transportation and at the destination. They may remove the mask in exceptional circumstances, for example to eat or drink, or if the mask is negatively impacting communication. It is expected that physical distancing be maintained as much as possible. You must wear a mask when giving your loved one a hug, kiss, handshake or touch.

Should you become ill in the two weeks following time spent with the resident, you are directed to access the [COVID self-assessment tool](https://covid-self-assessment.novascotia.ca/en) at <https://covid-self-assessment.novascotia.ca/en> and notify the facility as a precaution. Should you test positive for COVID-19, you must inform Public Health during their investigation that you have spent time with a resident of our Long-Term Care Facility.

Additional information about visits can be found at:

<https://novascotia.ca/coronavirus/docs/Guidelines-for-Long-Term-Care-Visits.pdf>

This document is posted at <https://novascotia.ca/coronavirus/resources/> where you can scan down to “Long-term care visiting guidelines.”

If you have any questions, please get in touch by [emailing/calling us at xxx}. Please help keep your loved ones, and our staff, safe.

We look forward to seeing you soon.

Resident Visitation

Initial Letter to Families: Indoor and Outdoor Visits at the Facility

We are very pleased that the Province of Nova Scotia is allowing both indoor and outdoor visits with residents at Long-Term Care Facilities, as well as off-site visits to the homes of family, friends or Designated Caregivers.

All residents may have indoors or outdoors in a designated visitation area or in resident rooms. During your visit, you may take your loved one for a walk or to a boardwalk or park, or to restaurants, retail stores, banks, or adult day programs, or for a drive, although residents should avoid coming into contact with other people.

Families can do a lot to help ensure a safe visit. Residents and their visitors are required to and observe hand hygiene and respiratory etiquette. Visitors must wear a medical mask for indoor visits that we will provide, and a non-medical mask for outdoor visits that they provide themselves. Residents are encouraged, but not required, to wear a medical mask during the visit. We will provide a medical mask for your loved one, and encourage them to wear it. Residents are encouraged but not required to maintain physical distancing from their visitors. This means that residents may sit close, hug, touch, or exchange a kiss or handshake during an indoor visit

Your visit will take place [indoors, outdoors, in a designated area or in a resident's room - customize as needed]. Visitors will be required to follow our procedures for visits, which is based on public health direction from the Department of Health and Wellness and the Chief Medical Officer of Health.

Families are requested to provide reasonable notice to schedule a visit [if facility decides to implement scheduling]. Should you have to cancel your visit for any reason, please notify the facility in a timely manner.

Residents and visitors who are not required to self-isolate and who are not demonstrating signs or symptoms of COVID-19 will be permitted to participate in visits.

Additional information about visits can be found at:

<https://novascotia.ca/coronavirus/docs/Guidelines-for-Long-Term-Care-Visits.pdf>

This document is posted at <https://novascotia.ca/coronavirus/resources/> where you can scan down to "Long-term care visiting guidelines."

If you have any questions, please get in touch by [emailing/calling us at xxx}. Please help keep your loved ones, and our staff, safe.

We look forward to seeing you soon.

Confirmation Letter: Appointment to Visit a Resident

Dear [insert visitor name(s)]:

This is to confirm that you have an appointment to visit [insert resident name] on [insert date] at [insert time]. If for any reason you need to cancel your visit, please call [insert number], providing as much notice as possible.

Your visit will take place in the [insert location]. Each visitor will be required to bring their own non-medical mask for outdoor visits, and we will provide each visitor with a medical mask for indoor visits.

When you arrive for your visit, you must:

- Arrive at your scheduled time and wait in the marked area
- Undergo screening by a staff member for signs and symptoms of COVID-19, according to the screening process for visitors to long-term care facilities, and clean your hands;
- Confirm that you understand that COVID-19 is a serious illness, and that you understand the importance of physical distancing, hand hygiene, respiratory etiquette, and the wearing of masks

During the visit, you must:

- Wear a mask as described above. Residents are encouraged, but not required, to wear a mask, particularly if they are sitting close, holding a hand, or exchanging a hug, kiss or handshake with a visitor. You may briefly remove the mask if it is negatively impacting communication with your loved one;
- Practice strict respiratory etiquette and hand hygiene;
- Clean your hands before and after the visit.

Should you become ill in the two weeks following time spent with the resident, you are directed to access the [COVID self-assessment tool](https://covid-self-assessment.novascotia.ca/en) at <https://covid-self-assessment.novascotia.ca/en> and notify the facility as a precaution. Should you test positive for COVID-19, you must inform Public Health during their investigation that you have spent time with a resident of our Long-Term Care Facility.

Additional information about visits can be found at:

<https://novascotia.ca/coronavirus/docs/Guidelines-for-Long-Term-Care-Visits.pdf>

This document is posted at <https://novascotia.ca/coronavirus/resources/> where you can scan down to “Long-term care visiting guidelines.”

If you have any questions, please get in touch by [emailing/calling us at xxx}. Please help keep your loved ones, and our staff, safe. We look forward to seeing you soon.

Designated Caregivers

Initial Letter to Designated Caregivers regarding resumption of Designated Caregiver services

We are very pleased that Designated Caregivers may visit at Long-Term Care Facilities.

One or two Designated Caregivers may now take a resident out of the facility for a sightseeing drive, as long as there are no passengers other than the resident and Designated Caregiver(s). When a Designated Caregiver supports a couple, both residents may be taken out at the same time. Going to a drive-through and stops at parks, retail stores, restaurants is permitted, although residents should avoid coming into contact with other people, and gathering limits must be observed. Visits to homes of family, friends or a Designated Caregiver is also permitted.

Designated Caregivers can do a lot to help ensure a safe visit. Residents and Designated Caregivers are encouraged to maintain physical distancing, understanding this is not possible when providing care. They must observe hand hygiene and respiratory etiquette. Designated Caregivers, like any visitor, are expected to wear non-medical masks for outdoor visits or sightseeing drives, and medical masks when indoors at the facility. Medical masks will be provided to Designated Caregivers by the facility when they arrive, and they are expected to bring their own non-medical mask, if needed.

When you arrive to at our facility, you must:

- Wait in the marked arrival/departure area;
- Undergo screening by a staff member for signs and symptoms of COVID, travel, and potential exposure to COVID-19 in the past 14 days, and clean your hands;
- Confirm that you understand that COVID-19 is a serious illness, and that you understand the importance of physical distancing, hand hygiene, respiratory etiquette, and the wearing of masks.

Should you become ill in the two weeks following time spent with the resident, you are directed to access the [COVID self-assessment tool](https://covid-self-assessment.novascotia.ca/en) at <https://covid-self-assessment.novascotia.ca/en> and notify the facility as a precaution. Should you test positive for COVID-19, you must inform Public Health during their investigation that you have spent time with a resident of our Long-Term Care Facility.

Additional information about visits can be found at:

<https://novascotia.ca/coronavirus/docs/Guidelines-for-Long-Term-Care-Visits.pdf>

This document is posted at <https://novascotia.ca/coronavirus/resources/> where you can scan down to “Long-term care visiting guidelines.”

If you have any questions, please get in touch by [emailing/calling us at xxx}. Please help keep our residents and staff safe. We look forward to seeing you soon.

Volunteers

Initial Letter to Volunteers regarding resumption of Volunteer services

We are very pleased that volunteers are permitted again in Long-Term Care Facilities. I know our residents and families are eager to see the volunteers who have organized or participated in group activities and individual socialization. Residents and staff are looking forward to welcoming volunteers back to our facility.

Volunteers can do a lot to help ensure a safe visit at our long-term care facility. Residents and Volunteers are required to abide by physical distancing, and observe hand hygiene and respiratory etiquette. Volunteers, like any visitor, are expected to wear non-medical masks for outdoor visits and medical masks for indoor visits. Medical masks will be provided to Volunteers by the facility when they arrive, and they are expected to bring their own non-medical mask, if needed.

Volunteer activities will be available only to residents who are not required to self-isolate and who are not demonstrating signs or symptoms of COVID-19 or other influenza-like illness.

While not required, it would be helpful if you could let us know when you intend to come to volunteer, so our residents and staff know when to expect you. Should you have to cancel your volunteer time for any reason, please notify the facility in a timely manner.

Residents who are not required to self-isolate and who are not demonstrating signs or symptoms of COVID-19 will be permitted to participate in visits.

Additional information about visits can be found at:

<https://novascotia.ca/coronavirus/docs/Guidelines-for-Long-Term-Care-Visits.pdf>

This document is posted at <https://novascotia.ca/coronavirus/resources/> where you can scan down to “Long-term care visiting guidelines.”

If you have any questions, please get in touch by [emailing/calling us at xxx]. Please help keep our residents and staff safe.

We look forward to seeing you soon.

Confirmation Letter: Appointment to Volunteer

Dear [insert visitor name(s)]:

This is to confirm that you are coming to volunteer on [insert date] from [insert beginning and end time]. If for any reason you need to cancel your visit, please contact the facility at [insert email/telephone number].

Volunteers are asked to bring their own non-medical mask for outdoor activities, and will be provided with a medical mask for indoor activities.

When you arrive to volunteer, you must:

- Arrive at your scheduled time (if applicable) and wait in the marked area;
- Undergo screening by a staff member for signs and symptoms of COVID, travel, and potential exposure to COVID-19 in the past 14 days, and clean your hands;
- Confirm that you understand that COVID-19 is a serious illness, and that you understand the importance of physical distancing, hand hygiene, respiratory etiquette, and the wearing of masks to prevent unknowingly transmitting the virus to our residents and staff.

During the visit, you must:

- Allow physical distancing of at least 2 metres/6 feet between you and the resident (a hug, handshake, kiss or touch is allowed);
- Wear a mask as described above. You may briefly remove the mask if it is negatively impacting communication with a resident;
- Practice strict respiratory etiquette and hand hygiene;
- Clean your hands before and after the visit.

Should you become ill in the two weeks following time spent with the resident, you are directed to access the [COVID self-assessment tool](https://covid-self-assessment.novascotia.ca/en) at <https://covid-self-assessment.novascotia.ca/en> and notify the facility as a precaution. Should you test positive for COVID-19, you must inform Public Health during their investigation that you have spent time with a resident of our Long-Term Care Facility.

Additional information about visits can be found at:

<https://novascotia.ca/coronavirus/docs/Guidelines-for-Long-Term-Care-Visits.pdf>

This document is posted at <https://novascotia.ca/coronavirus/resources/> where you can scan down to “Long-term care visiting guidelines.”

If you have any questions, please get in touch by [emailing/calling us at xxx}. Please help keep our residents and staff safe. We look forward to seeing you soon.

Appendix E: Screening Tool for Visitors to Long-Term Care Facilities

A designated screener is required to take the visitor’s temperature and ask the following questions when a visitor arrives at the facility for their visit or to transport a resident off-site. Record the results in the [Visitor Activity Log](#).

1. Do you have any of the following symptoms?	Yes	No
Fever (temperature of 37.8C or greater, or chills or sweats)	Yes	No
New or worsening of a previous cough	Yes	No
Sore throat	Yes	No
Runny nose or nasal congestion	Yes	No
Headache	Yes	No
Shortness of breath	Yes	No
2. Have you visited a COVID-19 exposure site?	Yes	No
3. Are you or anyone in your household required to self-isolate due to travel?	Yes	No
4. In the last 14 days, have you had close contact (within 2 metres/6 feet) with someone confirmed to have COVID-19?	Yes	No
5. Have you tested positive for COVID-19?	Yes	No

If the visitor has answered YES to any question, the visitor is not able to attend for visitation at this time. If the visitor answered YES to Question 1, they must be directed to the [COVID-19 self-assessment](#).

A visitor with chronic stable cough, sneeze, running nose, or nasal congestion that is unchanged and clearly linked to a known medical condition such as asthma or allergies may still be able to visit. Please discuss with your management team and inform the visitor with the final decision.

Note, this Screening Tool is subject to change, and changes will be communicated via email. The latest Screening Tool is indicated in the most current version of the [COVID-19 Management in Long Term Care Facilities Directive](#) (on [DHW’s password-protected website](#)).

Appendix F: Frequently Asked Questions

How many reopening phases are there and how long does each phase last?

Currently, there are four phases in Nova Scotia, all of which apply to licensed long-term care facilities. Each phase will last 2-4 weeks, and are directly influenced by factors such as the number of new cases, the degree of community spread, and the population vaccination rate. Finally, during phase 5 of Nova Scotia's reopening plan, we start to move into living with COVID-19. This includes easing public health measures and supporting ongoing expanded travel into Nova Scotia.

Where do I find information on reopening?

Reopening information for long-term care can be found by visiting:

<https://novascotia.ca/reopening-plan/> and navigating down the page to the Continuing Care section

<https://novascotia.ca/coronavirus/resources/> and navigating down the page to the Long-term care visiting guidelines

Who is responsible for determining what can happen in each re-opening phase?

The Chief Medical Officer of Health determines what can or cannot happen in each phase. A collection of leaders from the Department of Health and Wellness, Public Health, Infection Prevention and Control, and Continuing Care meets regularly to discuss and recommend parameters and steps for safe reopening. The foundation of decision making is rooted in clinical and public health evidence, and considers factors such as vaccination rates, sector practice standards, and an understanding of the unique needs of our long-term care residents.

Why are residents only able to receive hairdressing from a licensed hairdresser?

We understand that some residents benefit from having a friend or family member tend to their hairstyling needs, and before the end of summer this will likely once again be possible. With that said, and in accordance with the [Health Protection Act Order](#), only hairdressers licensed by the Cosmetology Association of Nova Scotia (CANS) are permitted to provide hairdressing services in licensed long-term care facilities, at this time. Licensed hairdressers must follow the reopening guidelines set by CANS as well as all applicable facility policies and procedures (screening, logging of interactions, limiting their movement within facility as much as possible, etc.).

Appendix G: List of websites in this document

Nova Scotia Department of Health and Wellness websites

COVID-19: Resources for Continuing Care providers (DHW's password-protected website)

<https://novascotia.ca/dhw/ccs/COVID-19-resources-for-Continuing-Care-providers/>

password: CCSCOV1D-19

- Includes most recent version of:
 - [COVID-19 Management in Long Term Care Facilities - Directive Under the Authority of the Chief Medical Officer of Health](#)
 - Guidance documents, FAQs, CCIRs, forms and financial documents, and this outbreak toolkit, etc.

Coronavirus (COVID-19) - Government's response to COVID-19

<https://novascotia.ca/coronavirus/>

- Most recent version of the [Health Protection Act Order](#) and [Declaration of State of Emergency](#) at <https://novascotia.ca/coronavirus/alerts-notice/>
- Information about compassionate exceptions from self-isolation in palliative situations, <https://novascotia.ca/coronavirus/restrictions-and-guidance/#compassionate-exceptions>
- The [COVID-19 Daily Checklist](#) at [Daily-COVID-checklist-en.pdf \(novascotia.ca\)](#)

Nova Scotia Public Health offices

<http://www.nshealth.ca/public-health-offices>

Regulations under the *Homes for Special Care Act*

<https://www.novascotia.ca/just/regulations/regs/hsc7393.htm>

Nova Scotia Health Authority websites

COVID-19 Hub for Long-Term Care

<https://covid19hub.nshealth.ca/friendly.php?s=covid-19/care/longtermcare>

- Includes many resources such as:
 - [Patient & Family Guide - Designated Caregivers in Long-term Care](#)
 - [Designated Caregivers in Long-term Care \(video\)](#)
 - [IPAC Guidelines for Long-Term Care](#)

COVID-19

<http://www.nshealth.ca/coronavirus>