## LTCH-Specific Requirements in the COVID-19 Response Framework Zones

	Green Zone	Yellow Zone	Orange Zone	Red Zone	Grey Zone/Shutdown			
	Prevent	Protect	Restrict	Control				
NON-RESIDENT TESTING (AS OF MARCH 15, 2021) – LTCH is not in outbreak and individual is not symptomatic	<ul> <li>Staff, students and volunteers:</li> <li>An Antigen Test at a frequency according to the zones, set out in the Ministry of Health COVID-19 Guidance: Considerations for Antigen Point-of-Care Testing (1-2 times / week in Green zones and 2-3 times / week in Yellow/Orange/Red/Grey (or Shutdown) zones). OR</li> </ul>							
	• One PCR Test and one Antigen Test on separate days within a 7 day period.							
	o If only entering the home 2 times in a week on consecutive days, or only 1 time in a week, an Antigen Test is required on the first day of entry only.							
	• Tests must be performed as soon as practically possible after entering the home.							
	Caregivers:							
	<ul> <li>Same as above however contact with residents is allowed while awaiting test results, provided the caregiver dons proper PPE according to IPAC guidelines.</li> <li>Support Workers and General visitors (where permitted – see Visiting Policy below):</li> <li>An Antigen Test on the "day of", unless tested the previous day (i.e. Antigen Test result is valid for 2 days).</li> </ul>							
	<ul> <li>An Antigen Test on the day of , unless tested the previous day (i.e. Antigen Test result is valid for 2 days).</li> <li>Must demonstrate proof of negative Antigen Test results (within last 2 days), in particular if attending multiple homes.</li> </ul>							
	<ul> <li>Proof of negative Antigen Tests must be provided prior to gaining entry to the home.</li> </ul>							
PPE (CMOH Directive #3 and other CMOH	Staff:							
Directives as applicable)	• Must wear surgical/procedure masks for the entire duration of their shift.							
	• When not in contact with residents or in resident areas during their breaks, staff may remove surgical/procedure mask but must remain two metres away from other staff.							
	Essential visitors:							
	• Must wear a surgical/procedure mask while in the LTCH.							
	<ul> <li>General visitors (where permitted – see Visiting Policy below):</li> <li>Must wear cloth masks or face coverings for outdoor visits and surgical/procedure masks when indoors.</li> </ul>							
OUTBREAK PROTOCOL (Directive #3)	Findst wear clour masks of race coverings for outdoor visits and surgical/procedure masks when modors.     Effective April 7, 2021:							
OUIDREAR FROIDCOL (DIFECTIVE #3)	An <b>outbreak</b> is defined as:							
	<ul> <li>two or more lab-confirmed COVID-19 cases in residents and/or staff (or other visitors) in a home, with an epidemiological link, within a 14-day period, where at least</li> </ul>							
	one case could have reasonably acquired their infection in the home.							
	A suspect outbreak is defined as:							
	• single lab-confirmed COVID-19 case in a resident.							
	Public health units will continue to be responsible for declaring an outbreak.							
VISITING POLICY – LTCH is not in outbreak and	1	it, including a maximum of $2$			<b>1 caregiver</b> per resident at a time,			
resident is not self-isolating or symptomatic	caregivers per resident at a time.		and must be screened prior to ent	ry.				
Essential Visitors: A person performing essential	A maximum of 2 general visitors are	permitted to visit a resident at a	General visitors are not permitte	d to visit				
support services [e.g., food delivery, inspector,	time. Homes are encouraged to schedu		General visitors are not permitte					
maintenance, or health care services (e.g.,	per resident per week, for a minimum							
phlebotomy)] or a person visiting a very ill or palliative								
resident. Support workers and caregivers are types of	surgical/procedure mask for indoor vi							
essential visitors.								
General Visitors: A person who is not an essential	All visitors must be screened prior to	entry.						
visitor and is visiting to provide non-essential services,								
or for social reasons. VISITING POLICY – LTCH is in outbreak and/or	Essential visitors are normitted to vis	it including a maximum of 1 ages	diver per resident at a time and m	ist he correspond prior to entry				
resident is self-isolating or symptomatic	<b>Essential visitors</b> are permitted to vis <b>General visitors</b> are not permitted to		giver per resident at a time, and mu	ist de screened prior to entry.				
DISCI AIMER: This document is intended to provi								

DISCLAIMER: This document is intended to provide a reminder of existing requirements found in applicable laws, Directives and policies. Licensees should refer to the applicable documents and laws for all requirements.

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	Prevent	Protect	Restrict	Control			
ABSENCE REQUIREMENTS (CMOH Directive #3) Note: Absence does not include a walk in the immediate vicinity as of April 7, 2021	<ul> <li>All non-medical absences need to be approved by the LTCH. The resident or substitute decision-maker must make an absence request to the LTCH, to be reviewed and approved on a case by case risk assessment.</li> <li>Short Term – Leaving the LTCH's property for social or other reasons that does not include an overnight stay. Residents must be actively screened upon return but are not required to be tested or self-isolate.</li> <li>Temporary – Leaving the LTCH's property for social or other reasons that includes one or more nights. Residents must be actively screened and self-isolate for 14 days upon return.</li> <li>Medical – (see Orange/Red/ Grey Zone box)</li> <li>In the event of an outbreak in the LTCH, all non-essential absences should be discontinued.</li> </ul>				or compassionate reasons. 7 for medical reasons (i.e. 8 be denied. Residents must be 10 olate upon return. Emergency 10 d equivalent to an outpatient 11 occupant 12 occupant 13 occupant 14 occupant 15 occupant 16 occ		
COHORTING	<ul> <li>Cohorting practices are recommended including:</li> <li>Providing alternative accommodation to maintain physical distancing of 2 metres</li> <li>Resident cohorting by COVID-19 status</li> <li>Utilizing respite and palliative care beds and rooms, and</li> <li>Utilizing other rooms as appropriate.</li> </ul>						
ISOLATION POLICY	<ul> <li>During self-isolation or if a resident is suspected to be ill:</li> <li>When in self-isolation, residents must stay in a separate room away from others under Droplet and Contact Precautions.</li> <li>Where this is not possible, the resident may be placed in a room with no more than 1 other resident who should also be placed in isolation under Droplet and Contact Precautions.</li> </ul>						
STAFF MOVEMENT BETWEEN HOMES	<ul> <li>Any employee of a LTCH who performs work in the LTCH cannot also perform work:</li> <li>a) in another LTCH operated or maintained by the licensee;</li> <li>b) as an employee of any other health service provider (e.g. hospital); or</li> <li>c) as an employee of a retirement home.</li> <li>This may include registered nurses, registered practical nurses, personal support workers, kitchen and cleaning staff, etc.</li> <li>Employees that must temporarily leave another job in a care setting as a result of this order are entitled to unpaid leave of absence.</li> </ul>						