



PEI Chief Public Health Office

Directive on Visitation to Long-Term Care Facilities and Nursing Homes

Pursuant to the *Public Health Act*, RSPEI 1988, c P-30.1 (the “Act”)

Further to the Chief Public Health Officer’s COVID-19 Prevention and Self-Isolation Order effective April 1, 2021, as updated from time to time, visitation to long-term care facilities and nursing homes is permitted under this direction established by the Chief Public Health Officer (“CPHO”) below.

1. Visitation to long-term care facilities and nursing homes (“facility” or “facilities”) is permitted at a facility provided the facility complies with the measures outlined in this Directive, which measures have been updated April 1, 2021 based on the completion of the initial COVID-19 vaccine roll-out to facilities in Prince Edward Island.
2. Facilities should monitor the rates of COVID-19 vaccination among their residents. For facilities with a rate of COVID-19 vaccinated residents of lower than 85%, those facilities should use extra caution with infection control, including cleaning of the facility, and see the advisory for them at section 13. In this Directive, “COVID-19 vaccinated” means having received a completed series of a vaccine authorized by Health Canada for use in relation to the COVID-19 pandemic.
3. Each Resident of a facility may have visitors in accordance with the following measures:
 - a) Residents may have up to three Partners in Care who are individuals designated by the Resident or Resident’s guardian to:
 - i) support feeding, mobility, personal hygiene, cognitive stimulation, communication, meaningful connections, relational continuity and assistance in decision-making for the Resident;
 - ii) While following all infection control measures to protect Resident, public and staff safety, visit the Resident, individually or together with other Partners in Care or Designated Visitors, at any time of the day, with no restriction on frequency or length of visits, on the condition that the Partner in Care’s presence in the facility cannot have a negative impact on the care of any Resident in the facility.
 - b) Residents may have up to six Designated Visitors who are individuals designated by the Resident or the Resident’s Guardian to visit the Resident primarily for social or other supportive reasons. Designated Visitors may include family and friends. and are permitted, indoors or outdoors at the facility, as more particularly set out in this Directive, in order to support Residents and families. Designated Visitors must follow all infection control measures to protect Resident, public and staff safety.
 - c) Partners in Care and Designated Visitors must comply with the following requirements to visit a facility:

- i) They will receive an orientation by facility staff prior to beginning visitation at the facility;
- ii) They must provide their full name and contact information to the facility and be screened for COVID-19 upon entry to the facility;
- iii) They must be asymptomatic of COVID-19;
- iv) They must perform hand hygiene, where indicated, upon entry to the facility and upon exit from the facility;
- v) They must follow a facility's infection control guidelines, and visits will occur during the visiting hours of a facility, unless there are exceptional circumstances as agreed to with facility staff;
- vi) They must maintain physical distancing of two metres from persons at the facility, other than the Resident, and from each other (unless they are from the same household) at all times. During visits with the Resident, they must wear a medical mask in a long-term care facility or wear a non-medical mask in facilities other than a long-term care facility;
- vii) They shall only visit one resident at a facility;
- viii) They may be accompanied by dependents during visits if the Partners in Care or Designated Visitors exercise responsibility for the minor dependents during the visit. For greater certainty, visiting dependents who must be cared for by a parent or guardian are considered Designated Visitors for purposes of this Directive but will not be counted in the six-person Designated Visitor limit of the Resident;
- ix) Partners in Care and Designated Visitors who have travelled outside of Prince Edward Island in the 14 days prior to a visit are not allowed to visit a Resident, unless:
 - (i) the Resident is a palliative individual or a person being actively treated for a life threatening illness which may end their life;
 - (ii) the Partner in Care or Designated Visitor has received an Authorized Designated Visitor form signed by the facility administrator and the Resident's attending physician in advance of the visit, which form details the name of the Designated Visitor, the name of the Resident and facility being visited, and the date(s) of the visit(s); and
 - (iii) the Partner in Care or Designated Visitor wears full personal protective equipment such as gown, gloves and mask ("PPE") during the visit(s).

- d) Except in accordance with clause 3(c)(ix) of this Directive, no person is permitted to attend at the facility for any purpose until they have been in Prince Edward Island for a continuous period of 14 days except as outlined in this Directive.
 - e) Partners in Care and Designated Visitors must comply with the following requirements in a COVID-19 care area of the facility:
 - i) Designated Visitors cannot attend any COVID-19 care area of the facility when COVID-19 cases are present;
 - ii) Designated Visitors cannot visit with a Resident with a confirmed or suspected case of COVID-19, regardless of the medical condition of the Resident;
 - iii) Partners in Care may visit with a Resident with a confirmed or suspected case of COVID-19 provided the Partners in Care wear full PPE during visits.
4. Facilities shall maintain a contact-tracing record each day for each Resident to include all contacts with other persons by a Resident including Partners in Care, Designated Visitors, or any contacts in an exceptional life circumstance approved by a facility in section 12 of this Directive. These contact-tracing records, including full names, phone numbers and date and time of visits, must be kept by a facility for one month after the day of creation to facilitate contact tracing by the Chief Public Health Officer in the event of a COVID-19 infection situation. Facilities must have an internal process in place to quickly retrieve these records, should the records be needed, including on weekends. These records must be stored in a safe, secure location for one month after creation of the records and then disposed of using a secure destruction method to maintain the confidentiality of personal information collected under this section. For paper records, secure destruction means, at minimum, cross-cut shredding.
5. Facilities may offer church services at the facility if the facility:
- (i) Complies with the Chief Public Health Officer Worship Service Guidance, as may be amended from time to time;
 - (ii) Complies with the Chief Public Health Officer Entertainment Guidance for Long-term Care and Community Care, as may be amended from time to time;
 - (iii) Ensures that any clergy or musicians at the church service (if applicable) maintain physical distancing of two metres from Residents;
 - (iv) Ensures, with the exception of the Residents, that medical masks are worn during the service by all persons present at the service, in a long-term care facility or that non-medical masks are worn during the service in facilities other than a long-term care facility; and
 - (v) Ensures all persons present at the service are recorded in a contact-tracing record, in accordance with section 4.

6. A Resident may, as a Designated Visitor or a Partner in Care, visit a family member who is a Resident of a different facility provided that all infection control measures of both facilities are maintained by the Resident.
7. In accordance with details provided to facility staff, ; a Resident may leave their facility independently, if able, or with one or more Partners in Care or Designated Visitors to drive in a vehicle, provided the Residents, Partners in Care and Designated Visitors follow all facility-provided infection control measures. The Resident may disembark provided the Resident does not have any contact with persons other than their Partners in Care or Designated Visitors and avoids crowded public settings such as restaurants or crowded public areas where a distance of two metres from other persons cannot be maintained.
8. In accordance with details provided to facility staff, a Resident may leave their facility to attend at their own property, such as a cottage, for a pre-determined amount of time, independently or with one or more Partners in Care or Designated Visitors. Residents, if Partners in Care and Designated Visitors follow all facility-provided infection control measures. The Resident must not have any contact with persons other than their Partners in Care or Designated Visitors during this leave unless the Resident maintains a distance of two metres from these persons, all persons are wearing non-medical masks, and the personal gathering limits in the COVID-19 Prevention and Self-Isolation Order are followed .
9. In accordance with details provided to facility staff, a Resident may leave their facility to visit or stay overnight with any or all of their Partners in Care or Designated Visitors at the primary residence of a Partner in Care or of a Designated Visitor, if the Resident, Partners in Care and Designated Visitors follow all facility-provided infection control measures. ..The Resident must not have any contact with persons other than their Partners in Care or Designated Visitors during this leave unless the Resident maintains a distance of two metres from these persons, all persons are wearing non-medical masks, and the personal gathering limits in the COVID-19 Prevention and Self-Isolation Order are followed.
10. Residents may have visits from their clergy at the facility provided that the rules contained in this Directive applicable to Designated Visitor visitation with a Resident within the facility also apply to these visitors. For greater certainty, clergy visitors are considered Designated Visitors for purposes of this Directive but will not be counted in the six-person Designated Visitor limit of the Resident.
11. If a Resident is a palliative individual or a person being treated for a life threatening illness which may end their life, including COVID-19 (with full PPE), there is no limit to the number of Partners in Care or Designated Visitors allowed to visit the Resident provided facility infection control measures are followed. However, only a combined total of three Partners in Care and Designated Visitors may visit the Resident at any one time. If a Partner in Care or a Designated Visitor has travelled outside Prince Edward Island within the 14-day period prior to the visit, that Partner in Care or Designated Visitor shall be the only visitor in the room with the Resident for their visit.
12. In exceptional life circumstances, exemptions may be made to the restrictions in this Directive by Medical Staff. Any exemption based on exceptional life circumstances made by

Medical Staff must be made in consultation with the facility administrator, and the facility administrator shall keep a record of all exemptions or approvals made under this Directive.

13. Facilities in Prince Edward Island with rates of COVID-19 vaccinated residents of lower than 85% are strongly advised to consider the use of these alternative restrictions in their facilities:

- (i) Designated Visitors should meet with Residents in Designated Areas only.
- (ii) Residents should not leave the facility with Designated Visitors.
- (iii) Residents should only leave the facility with a Partner in Care and should only disembark with a Partner in Care.
- (iv) Residents should not attend public places, unless the attendance at the public place is for an essential purpose such as a medical appointment or banking.

14. For greater certainty, nothing in this Directive limits the operation of the Act or its regulations or restricts the ability of the Chief Public Health Officer to issue public health orders or other orders or directives, as necessary.

15. This Directive:

- a. amends my Directive of April 1, 2021 and is effective on April 8, 2021 at 8:01 a.m., except where stated in this Directive to have retroactive effect; and
- b. shall remain in effect for the duration of the public health emergency in the Province, unless earlier amended or revoked.

Date: April 7, 2021



Dr. Heather Morrison,
Chief Public Health Officer

