

FREQUENTLY ASKED QUESTIONS
Resident Absences from Long-Term Care Homes
Updated: November 16, 2020

Changes from the Frequently Asked Questions version released October 13, 2020 are highlighted in blue.

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LEAVING ON AN ABSENCE

Q1. Can a resident, if they are able, leave on a short term or temporary absence independently?

Yes, residents who are capable may leave on a short term or temporary absence independently, provided the home has approved the request.

The home should not require a resident to be picked up by another person in order to go on an absence where the resident is capable of doing so on their own

Q2. Can a family member take multiple residents from the home out on absences, including residents who reside in different cohorts?

A family member may request to take multiple residents out of the home if they are part of the same family unit, but in this case the residents should be of the same cohort.

Residents must submit a request to the home for a short term or temporary absence for social or other non-medical reasons. For outings involving residents from different cohorts, the long-term care home should assess the proposed absence on a case-by-case basis. This should include, at minimum, carefully discussing and documenting with the residents' family the reason for the absence and for taking multiple residents out, the situation in the long-term care home, as well as the health and safety measures that will be put in place during the outing. Wherever possible, to minimize the risk of introduction and transmission of COVID-19 in the home, such proposals should only be considered under special circumstances (e.g. funerals).

Q3. Does the family member who is taking the resident on the absence need to be screened?

If the family member is entering the home, they need to be actively screened on entry for symptoms and exposures for COVID-19, including temperature checks and

not be admitted if they do not pass the screening, as per Directive #3. Further, the family member must be screened as a general visitor entering the home under the COVID-19 Visiting Policy; this includes verbally attesting to having received a negative COVID-19 test result. Homes are encouraged to arrange for the family member to receive the resident outdoors.

Q4. If a home denies an absence request, does the resident and/or their substitute decision-maker have the option to appeal the denial?

If the home denies a short term or temporary absence request, the home must communicate this to the resident/substitute decision maker in writing, including the rationale for this decision.

Residents whose request for an absence is denied but wish to go outside must be told to remain on the home's property and maintain a physical distance of at least two metres from any other resident or staff on the property.

If the resident/substitute decision-maker have concerns, they are encouraged to speak with the home on any options to support the resident's request. This may include additional public health measures that the resident could implement while on the absence.

Q5. Does a resident returning from a temporary absence need to complete their 14 days of isolation before leaving on another absence?

Upon return to the home from a temporary absence, residents must be actively screened and self-isolate for 14 days. This should occur before the resident may leave on another short term or temporary absence.

However, if the resident requires urgent or routine medical care, they should be permitted to leave their isolation period. Homes should ensure that the resident is wearing a medical grade mask and inform all health care providers involved (e.g. EMT, physicians, nurses) that the resident is currently completing a 14-day isolation period at the home so they can also take appropriate precautions, as required.

The 14-day isolation period should not be restarted for a resident that leaves their isolation period for health care reasons and returns to the home the same day or following one single overnight hospital admission. The 14-day isolation period should only be restarted upon the resident's return to the home only if the resident had been admitted to the hospital for more than one overnight stay or as part of an institutional transfer process.

Q6. What changes are being made to resident absences?

Directive #3 states that for homes located in public health unit jurisdictions where there is evidence of widespread community transmission as per provincial direction, absences are not permitted except for medical or compassionate reasons.

The government has released the *COVID-19 Response Framework: Keeping Ontario Safe and Open* which identifies levels that a public health unit region may fall under.

As of November 16, 2020, resident absences from long-term care homes are not permitted in local public health units in the Orange-Restrict, Red-Control or Lockdown levels. There is an exception for medical or compassionate reasons.

DURING THE ABSENCE

Q7. Is the resident required to keep a log of where they go and who they come in contact with while on a short term or temporary absence?

Residents and/or their substitute-decision makers are not required to maintain a log of the residents' whereabouts during an absence. However, licensees should record all resident absences.

Residents that leave on a short term or temporary absence must be provided with a medical mask to be worn at all times when outside of the home, if tolerated, and reminded about the importance of public health measures, including maintaining a safe physical distance of at least two metres from others and hand hygiene. Homes should also advise residents leaving on a short term or temporary absence to avoid going to large gatherings/parties.

Q8. Can a resident return to the home from a short term or temporary absence if, during the absence, a person they have been around tests positive for COVID-19?

As part of case and contact management, the local public health unit will follow up and contact any close contacts of a COVID-19 confirmed case. In the event that the resident has been identified as a close contact of a known case, the local public health unit will provide further direction to the home and the resident (or their substitute decision-maker).

RETURNING FROM AN ASBENCE

Q9. If a resident is away from the home's property on an absence and the home enters an outbreak during that time, can the resident return to the home?

During an outbreak in a long-term care home, short term and temporary absences should end immediately.

In the event that an outbreak is declared in the long-term care home, and the resident is currently on a temporary absence from the home, they should not be readmitted until the outbreak is over.

Q10. If a resident becomes symptomatic after returning to the home from an absence, how should the home respond?

Any resident with symptoms must be isolated and tested for COVID-19 as per Directive #3. If the resident receives a positive COVID-19 test result, the home should follow the appropriate measures in Directive #3.

The home must contact the local public health unit to inform them of the positive test result and the resident's recent absence. The local public health unit will provide further direction. The home does not need to undertake contact tracing unless advised by the local public health unit.

Q11. How can homes protect the roommates of residents who go out for short term absences and are not required to self-isolate upon their return?

While a resident is on a short term absence, they must be provided with a medical mask to be worn at all times (if tolerated) and reminded about the importance of

public health measures including physical distancing and avoiding large gatherings/parties. This is intended to reduce the risk of COVID-19.

Upon return to the home, the resident must be actively screened and assessed, which includes temperature checks, at least twice daily (at the beginning and end of the day) to identify if the resident has fever, cough or other symptoms of COVID-19.

As much as possible, homes should allow for physical distancing and masking indoors as routine precaution to minimize the potential risk of transmission among residents.

Q12. If a resident has returned from a temporary absence, does their roommate also need to self-isolate for 14 days?

No, there is no requirement in Directive #3 for the roommate of a resident returning from a temporary absence to self-isolate. The home should use a separate area to self-isolate the resident who is returning from the temporary absence. The home must review and approve temporary absences based on a case-by-case risk assessment that includes consideration of the home's ability to support self-isolation for 14 days upon the resident's return.

Q13. Do homes have the discretion to require residents returning from an absence to self-isolate or be tested if it is not explicitly required in Directive #3?

Homes should not require residents returning from a medical absence to be tested or to self-isolate.

As per Directive #3, if the resident is admitted to the hospital at any point, or the emergency room visit takes place over two or more nights (patient is discharged from a hospital), homes should follow the steps outlined under Re-Admissions in the Directive.

If homes wish to impose additional requirements above and beyond those provided in Directive #3 for residents returning from a short term or temporary absence, they should seek their own legal advice.

Homes should emphasize universal public health measures including masking, physical distancing, hand hygiene, and symptom screening as much as possible during absences.

Homes should consider the psychosocial impacts of placing residents in self-isolation. Further, homes are reminded that they must obtain the resident's consent to be tested. Residents who have previously been infected with and recovered from COVID-19 should **not** be tested, except under the direction of the local public health unit.

Q14. If a resident cannot tolerate a mask, can the home isolate the resident upon return from a short term absence?

Directive #3 does not require residents who return from a short term absence to be isolated upon their return to the home.

The resident (and any family members involved in the outing) should be counselled on the purpose of the mask, benefits of masking, and risks of not masking. If the resident is unable to tolerate wearing a mask, they should be counselled on the importance of other public health measures (e.g. physical distancing, hand hygiene, and symptom screening etc.) to ensure their health and safety. If homes wish to impose additional requirements above and beyond those provided in Directive #3 for residents returning from a short term absence, they should seek their own legal advice. Homes should consider the psychosocial impacts of placing residents in self-isolation.

OTHER

Q15. Which public health unit should the home contact?

Your local public health unit can be found at:

<http://www.health.gov.on.ca/en/common/system/services/phu/locations.aspx>.

Q16. Can residents go on planned recreational outings as part of the home's programming and are there limits to how many residents may participate at a time?

Residents may leave the home's property on a short term absence for social or other non-medical reasons, including recreational outings organized and approved by the home. Residents must be provided with a medical mask that must be worn at all times when outside of the home (if tolerated) and reminded about the importance of public health measures including physical distancing, hand hygiene, and symptom screening. Government restrictions related to social gatherings may apply depending on the nature of the outing (e.g. unsupervised social gatherings).