

# Minister's Directive: COVID-19 response measures for long-term care homes

Effective April 27, 2022

## Minister's Directive: COVID-19 response measures for long-term care homes

This Minister's Directive is issued pursuant to s. 184(1) of the *Fixing Long-Term Care Act, 2021* (Act), which authorizes the Minister of Long-Term Care to issue operational or policy directives respecting long-term care homes where the Minister considers it in the public interest to do so. Every licensee shall carry out every operational or policy directive that applies to the long-term care home. In case of a conflict between this directive and any applicable law, the latter prevails.

This Directive is effective as of April 27, 2022.

This Directive relates to the safe operation of long-term care homes and specifically to reducing the risk of COVID-19 while providing the greatest possible opportunities for maximizing resident quality of life. Additional measures apply in a COVID-19 outbreak situation, including measures as per local public health direction and measures contained in the [Ministry of Health COVID-19 Guidance: Long-Term Care Homes and Retirement Homes for Public Health Units](#), or as amended.

### Definitions

All terms in this Directive have the same meaning as under the Act and Ontario Regulation (O. Reg.) 246/22 under the Act (the Regulation), unless otherwise defined.

The following definitions apply for the purpose of this Directive.

- **Caregiver** has the same meaning as under the Act.
- **Double room** A room with two beds that may be occupied (regardless of whether it is connected to another separate room by a door, hallway or a shared washroom).
- **Essential visitor** has the same meaning as under O. Reg. 246/20.
- **General visitor** means a person who is not an essential visitor and is visiting the home to provide non-essential services related to either the operations of the home or a particular resident or group of residents. This excludes children under the age of one year.

- **Isolation room** is a room that may be occupied by one person only, and ideally has a contained bathroom for resident use. In some instances where single beds are not available for isolation, up to two residents requiring isolation may isolate in the same room with adequate spacing (2 metres or 6 feet apart)
- **Licensee** has the same meaning as under the Act.
- **PCR test** means a validated real-time polymerase chain reaction (PCR) assay laboratory test for the novel coronavirus known as COVID-19.
- **Personal Protective Equipment (PPE)** equipment worn by staff, students, volunteers and caregivers to minimize exposure to hazards that may cause serious injuries and illnesses.
- **Resident** has the same meaning as under the Act.
- **Single Room** A room with only one bed that may be occupied (regardless of whether it is connected to another separate room by a door, hallway, or a shared washroom).
- **Staff** has the same meaning as under the Act.
- **Student** means a person who is participating in a program, the successful completion of which meets the educational and/or professional requirements for a personal support worker or a nurse.
- **Volunteer** has the same meaning as under the Act.
- **Ward room** means a room that has been structurally designed for three or more beds and would normally contain three or more licenced and operational beds available for admissions. Rooms structurally designed for one or two beds that are connected to each other by a door, hallway or shared washroom are not considered ward rooms.

**I hereby issue the following Directive with respect to every long-term care home:**

## **1. Infection prevention and control (IPAC) practices**

Licensees shall ensure that all staff, visitors, students, volunteers and residents practice the health and safety requirements contained in this Directive while in the home. Licensees must ensure that the requirements in this Directive are implemented and met at all times.

### **1.1 COVID-19 outbreak preparedness plan**

Licensees, in consultation with their joint health and safety committees or health and safety representatives if any, shall ensure measures are taken to prepare for and respond to a COVID-19 outbreak, including ensuring the development and implementation of a COVID-19 Outbreak Preparedness Plan. This plan must include at a minimum:

- a. Identifying members of the Outbreak Management Team;
- b. Identifying their local IPAC Hub and their contact information (where applicable);

- c. Conducting regular IPAC audits in accordance with the [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#), or as amended;
- d. Ensuring COVID-19 PCR testing kits are available and plans are in place for taking specimens;
- e. Ensuring sufficient PPE is available;
- f. Ensuring that all staff, students and volunteers are trained on IPAC policies and procedures including the proper use of PPE;
- g. Developing policies to manage staff, students and volunteers who may have been exposed to COVID-19;
- h. Permitting an IPAC Hub associated organization completing an IPAC assessment to do so and to share any IPAC report or findings produced by the organization, in accordance with any applicable laws, with any or all of the following: the Ministry of Long-Term Care, public health units, local public hospitals, Ontario Health and Home and Community Care Support Services, as may be required to respond to COVID-19 at the home; and
- i. Keeping staff, students, volunteers, residents, and families informed about the status of COVID-19 in the homes, including frequent and ongoing communication during outbreaks.

## 1.2 Masking

Licensees are required to ensure that the masking requirements as set out in the [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#), or as amended, are followed.

## 1.3 Physical distancing

Licensees are required to ensure that the physical distancing requirements as set out in the [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#), or as amended, are followed.

## 1.4 Environmental cleaning

Licensees shall ensure:

- a. that regular environmental cleaning of their facilities is maintained; and
- b. enhanced environmental cleaning and disinfection for frequently touched surfaces is performed.

See the Provincial Infectious Diseases Advisory Committee on Infection Prevention and Control's (PIDAC-IPC) [Best Practices for Environmental Cleaning](#)

[for Prevention and Control of Infections in All Health Care Settings, 3rd Edition](#) for more details.

Licensees are required to ensure that the environmental cleaning and disinfection requirements as set out in the [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#), or as amended, are followed.

## **2. Personal protective equipment**

Licensees are required to ensure that the personal protective equipment requirements as set out in the [COVID-19 Guidance: Long-Term Care Homes and Retirement Homes for Public Health Units](#), or as amended, are followed.

## **3. Cohorting for staff, students, volunteers and residents**

Licensees are required to ensure that the cohorting requirements for staff, students, volunteers and residents as set out in the [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#), or as amended, are followed.

## **4. Case and outbreak management**

Licensees are required to ensure that the requirements for case and outbreak management as set out in the [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#), or as amended, are followed.

## **5. Accommodations**

### **5.1. Admissions and Transfers**

Licensees shall ensure that the detailed requirements and information related to admission and transfer into the home, including requirements for testing and isolation, are followed as set out in the [COVID-19 Guidance: Long-Term Care Homes and Retirement Homes for Public Health Units](#), or as amended.

### **5.2. Isolation rooms**

All licensees are required to have rooms identified and set aside for isolation purposes. Individuals requiring isolation must be placed in a single room on [Additional Precautions](#). Where this is not possible, individuals may be placed in a room with no more than one (1) other resident who must also be placed in isolation under [Additional Precautions](#), every effort must be made to allow for adequate space (minimum two metres) between beds. For the purposes of

isolation, there should not be more than two (2) residents placed per room, regardless of the number of licensed beds in the room.

### **5.3. General accommodations**

After completing all testing and isolation requirements as applicable, all new residents and other transfers into the home, must be placed in a single room or double room provided that there is adequate space (minimum two metres) between beds in the double room. New residents include persons who were previously a resident at the home but were discharged (e.g., persons who were discharged because they exceeded the permitted length of an absence).

### **5.4. Ward rooms**

Where placement into a single or double room is not possible, a new admission may be placed in a ward room with no more than one other resident (with the third bed, and any additional bed in the room, being left unoccupied and not available for occupancy). That is, there cannot be more than two residents placed in a ward room. Where ward rooms are used, every effort must be made to allow for adequate space (minimum two metres) between beds.

A bed in a ward room must be left vacant, and not available for occupancy, if a resident who occupied a bed in the ward room is discharged from the long-term care home and there are two or more residents who continue to occupy beds in the ward room.

Despite the requirements set out in this section 5.3.1, residents who are currently occupying beds in a ward room with two or more residents must be permitted to return to their bed following an authorized absence, including medical absences requiring an admission or a transfer to another health care facility, subject to applicable conditions, after completing their required testing and isolation requirements under the Ministry of Health [COVID-19 Guidance: Long-Term Care Homes and Retirement Homes for Public Health Units](#), or as amended, and [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#), or as amended, are followed.

## **6. Absences**

Licensees are required to ensure that the resident absence requirements as set out in the [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#), or as amended, are followed.

## **7. Visitors**

Licensees are required to ensure that the visitor requirements as set out in the [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#), or as amended, are followed.

## **8. Asymptomatic Screen Testing**

Licensees are required to ensure that the COVID-19 asymptomatic screen testing requirements as set out in the [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#), or as amended, are followed.

## **9. COVID-19 Screening**

Licensees are required to ensure that the COVID-19 screening requirements as set out in the [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#), or as amended, are followed.

## **10. Reporting**

Licensees are required to ensure that statistical information regarding COVID-19 testing and COVID-19 vaccination is collected, maintained, and disclosed in accordance with the [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#), or as amended, are followed.