



ST. JOSEPH'S CARE GROUP

COVID-19 IMS Operating Policies & Procedures

Title: IMS-03-023 - Absences from Long-Term Care

Effective Date: September 2, 2020

Approved By: COVID-19 IMS Steering Committee

Revised Date: October 19, 2022

1. PURPOSE

All Long-Term Care Homes must have policies and procedures in place to permit resident absences in accordance with Directive #3, balancing the various social, health and safety needs of residents.

2. SCOPE

Hogarth Riverview Manor (HRM) and Bethammi Nursing Home (BNH).

3. DEFINITIONS

Medical Absence: Any absence to seek medical and/or health care.

Compassionate/Palliative Absence: Includes, but is not limited to, an absence for the purpose of visiting a dying loved one.

Short-term (day) Absence: Any absences that are less than or equal to 24 hours in duration.

- Essential absences include absences for reasons of groceries, pharmacies and outdoor activity
- Social absences include absences for all reasons not listed under medical, compassionate/palliative, and/or essential absences that do not include an overnight stay.

Temporary Absence: An absence involving two or more days **and** one or more nights for non-medical reasons.

Up to date with their COVID-19 vaccine doses: A person has received all recommended COVID-19 vaccine doses, including any booster dose(s) when eligible.

4. PROCEDURE

For all absences, staff will provide a medical mask; encourage use of supplied PPE and adherence to public health measures; and actively screen the resident upon return to the home for symptoms and exposure history for COVID-19.

Medical Absences

	Specific Procedures
1	Outpatient medical visits, single visit (less than or equal to 24 hours in duration) to the Emergency Department and all other medical visits (e.g. admissions/transfers to other health care facilities, multi-night stays in the Emergency Department) do not require isolation or PCR testing on return. Isolation and PRC Testing is only required if the resident is symptomatic.

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2	For all return/admissions/transfers from another healthcare facility that is not in an outbreak: <ul style="list-style-type: none"> • If asymptomatic only screening is required. • If symptomatic a PCR test and isolation is required.
3	The home cannot restrict or deny a medical absence at any time. This includes when the resident is in isolation on Droplet and Contact Precautions and/or when the home is in outbreak; in these instances, the home must consult with the Thunder Bay District Health Unit for further advice.

Compassionate/palliative Absences

	Specific Procedures
1	Single day absences require: <ul style="list-style-type: none"> • Actively screen residents upon return; • PCR testing or isolation is only required if the resident is symptomatic.
2	Overnight absences require testing upon return: <ul style="list-style-type: none"> • Actively screen residents upon return; • PCR testing or isolation is only required if the resident is symptomatic.
3	The home cannot restrict or deny a compassionate/palliative absence. This includes when the resident is in isolation on Droplet and Contact Precautions and/or when the home is in outbreak; in these instances, the home must consult with the Thunder Bay District Health Unit for further advice.

Short-term (Day) Absences

	Specific Procedures
1	All individuals, regardless of their immunization status, can participate in day absences, unless the resident is in isolation and on Droplet and Contact Precautions or as directed by the Thunder Bay District Health Unit.
2	Upon return from Short-term absences: <ul style="list-style-type: none"> • Actively screen residents upon return; • PCR testing or isolation is only required if the resident is symptomatic.

Temporary Absences

	Specific Procedures
1	Residents who leave the home for overnight absences require the following: <ul style="list-style-type: none"> • Actively screen residents upon return; • PCR testing or isolation is only required if the resident is symptomatic.

5. RELATED PRACTICES AND/OR LEGISLATIONS

Directive #3 for Long-Term Care Homes under the Long-Term Care Homes Act, 2007.
COVID-19 Guidance Document for Long-Term Care Homes in Ontario (October 2022)

6. REFERENCES

IMS-03-001 - Identification and Management

7. APPENDICES

N/A

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