

October 22, 2020

**RE: RHA Important Update**

Dear RHA membership, families/guardians and staff,

Updates to CMOH Order 32-2020 and 29-2020 has included a number of changes in the attempt to support visits for individuals who reside in group living and off-site outing requirements with family/friends. Please see the following information outlining how we can support:

- RHA Residential Indoor/outdoor Visitor Guidelines;
- Resident Returning from Off-site activities and/or Off-site Overnight Stays of 24 hours or more with family/friends.

The following guidelines/tools are provided for reference from the Public Health Orders:

- Individual/Resident Outing Requirements and;
- Site specific – Risk Tolerance Assessment

“Resident” refers to person in Residential Services, living in an RHA home.

“Individual” refers to person in other services provided by RHA, such as Day Programs, Respite, Support Homes and Supported Independent Living.

We appreciate your support to follow the guidelines provided below. It is important that everyone together abide by these parameters, to support residents/individuals served by RHA to have access to their family and friends and be able to return to their RHA homes safely for others they share living space with. RHA must strictly evaluate each outing following the guidelines/assessments below, to limit further risk of exposure of Covid-19 entering RHA homes and facilities. If you have any questions regarding this content, please send message to [info@robinhoodassoc.com](mailto:info@robinhoodassoc.com).

Sincerely,

**Ann Marie LePan**

Chief Executive Officer

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## Site specific – Risk Tolerance Assessment

The first step to support safe visits and outings for residents with family/friends will be for RHA Program Coordinator, with the Residential Supervisor will ensure that a Risk Tolerance Assessment is completed and reviewed for feedback with individuals, family/guardians and staff for each RHA residential home, as per order 32-2020:

- Risk tolerance is the ability of each separate RHA residential home, as an entity (physical accommodation and the collective of individuals, family/guardians and staff), to accept increased potential of exposure to COVID-19 to inform site based decision-making.
- Risk tolerance is fluid (i.e. is not constant; will continuously change) and will depend on many factors as outlined in [Table 15](#) (see below)
  - It is important to recognize that risk factors are not mutually exclusive. It is the consideration of the combination of factors that will ultimately inform a site's (RHA Residential Home) risk tolerance.
  - For example, a site could be small with minimal space, where the individuals are active and healthy and assess their own risk tolerance as high.
- Per CMOH Order 29-2020, an operator must identify the risk tolerance for the site based on conversations with their individuals, families and staff.
  - Risk tolerance will vary between sites and possibly within sites for many reasons including site designation (e.g., a group home may have a greater risk tolerance than a long-term care facility) and perception of risk tolerance by each individual or alternate decision maker.

**Table 15: Risk Tolerance Assessment Table (Per CMOH Order 29-2020)**

<b>Risk Factors, Description and Site Assessment:</b>
<b>Number of People on site and Layout of Site</b>
To ensure safe movement of people, operators may assess the site in terms of layout and number of people on site at any one time. For example:
<ul style="list-style-type: none"> <li>• Spacious hallways, common areas and rooms may indicate a higher risk tolerance</li> <li>• Prevalence of private rooms may indicate a lower risk tolerance</li> <li>• The number of floors may mean increased use of access points (e.g. elevators) which may indicate a lower risk tolerance</li> </ul>
<b>Site Notes:</b>
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<b>Collective Health Status of Individuals, where known</b>
This may be actual or perceived health status. If the majority of individuals have complex health conditions, this may indicate a lower risk tolerance.
<b>Site Notes:</b>
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<b>Number of individuals actively leaving home for outings</b>
Consider essential and non-essential outings.
The number of individuals actively leaving the site for outings may indicate a lower risk tolerance (as there is already increased potential of exposure)
<b>Site Notes:</b>
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<b>Any disclosed resident, family/guardian directed assessment of risk tolerance</b>
Though it is recognized not everyone will assess themselves the same way, individuals will have a sense of their health and the risks they would be willing to take for more visitors on site. Though this is a subjective measure, the risk tolerance of the site should be directed by the risk tolerance of the individuals, family/guardians, where disclosed.
<b>Site Notes:</b>
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<b>Any disclosed staff directed assessment of risk tolerance</b>
Though this is a subjective measure, the risk tolerance of the site should be informed by the risk tolerance of the staff, where disclosed.
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<b>Site Notes:</b>
<b>Mechanism for ongoing assessment of risk designation of region</b>
Up to date understanding of the incidence of COVID-19 in the community is important
<i>Note: Where a facility is located with respect to risk designation of region <b>does not itself</b> constitute the need to adjust risk tolerance of site.(area RHA classified under is Strathcona County and Sturgeon County)</i>
<ul style="list-style-type: none"> <li>• Open: Low level of risk, no additional restrictions in place</li> <li>• Watch: The province is monitoring the risk and discussing with local government(s) and other community leaders the possible need for additional health measures</li> <li>• Enhanced: Risk levels require enhanced public health measures to control the spread</li> </ul>
<b>Site Notes:</b>
<b>Other:</b>

## RHA Residential Indoor/outdoor Visitor Guidelines

- The health assessment must be completed by all participants of the visit (Visitor, staff, and individual/individual in care). If anyone fails to pass the health assessment the visit must be postponed.
- Continuous masking must happen for all visitors and staff supports of the visit. The resident/individual in support does not need to wear a mask for the visit but it should be **strongly encouraged**.
- Visitors are natural supports to a resident (ex. family or friend of individual), contractor, or professionals. Staff are not allowed to have personal visitors in RHA facilities and/or home.
- Up to two visitors are permitted in the home, at one time for all indoor visits.
- Up to four visitors are permitted, at one time for all outdoor visits at a home.
- RHA requests visits with individuals are scheduled with the Residential Team Supervisor for each visit. Scheduling will ensure that we control the number of visits occurring in the home at one time and ensures that program staff can support individuals to be prepared for the visits without conflict.
- Staff should request social distancing of 6ft during visitation with individuals.
- Individual/resident, visitors, and staff must wash their hands or use hand sanitizer immediately upon the beginning and end of the visit.
- If there is a resident in isolation, no visitors will be allowed into the home unless a variance is granted from the RHA Leadership team.

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- Visits are recommended to be conducted in the resident's bedroom or a designated visitation space. Contact with other residents in the home must be limited to social distancing at all times.
- Staff and/or visitors must sanitize the high touch areas within the visitation area upon the completion of the visit.

## Individual/Resident Outing Requirements

It is recommended by AHS that residents not participate in unnecessary outings however, they may choose to do so as activities open up in the community. RHA staff are not permitted to support individuals/residents participating in indoor activities at other community sites, ie. Library, bowling, etc. to be reevaluated by January 2021. Should an individual/resident choose to leave for reasons other than necessity, the operator (RHA) must advise the individual/resident of their responsibility to:

- \*Maintain physical distancing;
- \*Wear a mask at all times consideration of any municipal masking bylaws;
- \*Ensure safe transportation;
- \*Maintain good hand hygiene
- Discuss and explain the Risk of Unknown Exposure (see [Table 9](#))
- \*Inform the individual that they are subject to Health Assessment Screening upon re-entry
- For greater clarity, individuals who follow all Individual Outing Requirements are considered low risk and should not be required to wear a mask or quarantine upon their return.
- On a case-by-case basis, individuals who do not follow Individual Outing Requirements may be asked to follow additional safety precautions, depending on the type of activity they engaged in.

**Resident Returning from Off-site activities and/or Off-site Overnight Stays of 24 hours or more with family/friends.**

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Residents are permitted to leave the site for extended stays (over 24 hours) off-site (e.g. visits to family cabin, weekends at family house, etc.), should they choose to do so.

- Where a resident is immunocompromised or medically fragile, they should involve their care team, physician, at-home supports and any alternate decision maker to make a decision about and prepare for overnight stays off-site.

Operators (RHA) must ensure individuals/residents are aware of their responsibilities regarding Individual Outing Requirements.

- For greater clarity, continuous use of a mask while on off-site overnight stays is only required if physical distancing cannot be maintained, or as per any municipal bylaws that may apply to their area.

To balance the mental health impact of extended isolation/quarantine upon return to site, the following parameters are in place to guide assessment of risk and safety precautions, on a case-by case basis, for the returning individual (See [Table 11](#) below).

Where applicable, additional safety precautions may be required if the individual returns to where the other individual is immunocompromised or medically fragile. Consultation with the facility individual care team made be required.

**Table 9: Risk of Unknown Exposure****Low Risk**

To be considered at low risk of unknown exposure, all the following conditions must be met:

- Lives in an area of low COVID-19 exposure
- Transferred from a hospital or setting with no outbreak or cases under investigation
- Part of a small cohort (15 or less) who consistently practice physical distancing and use masks when cannot maintain distance
- Not had guests at home in the past 14 days
- Takes essential outings only
- Uses own vehicle (not public transit)
- Consistently maintains 2 metres of distance from those outside household in all activities
- Mask worn when cannot maintain physical distancing
- Consistent hand hygiene
- No interprovincial travel within the last 14 days

**Medium Risk**

*There will be many variations that arise between the extremes of high and low risk of unknown exposure.*

*Individuals must use their best judgement to determine risk of unknown exposure where neither low nor high is appropriate.*

**High Risk**

To be considered at high risk of unknown exposure, any one or more of the following may be met:

- Lives in an area of high COVID-19 exposure
- Transferred from a hospital or other setting with an outbreak or cases under investigation anywhere in the setting
- Visited a location with a declared COVID-19 outbreak in last 14 days
- Part of a large cohort (more than 15)
- Cohort inconsistently practices physical distancing and use of masks when cannot maintain distance
- Had guests in home in last 14 days
- Outings where contact with others outside household is likely
- Use of public transit or carpooling where distancing is not consistently maintained and masking is not consistently used
- Does not maintain physical distancing and does not wear a mask
- Infrequent or inconsistent hand hygiene
- Interprovincial travel within the past 14 days

## **Table 11: Individual Returning From Off-Site Overnight Stay – Safety Precautions**

### **Low Risk**

- Household with persons who have low risk of unknown exposure (refer to [Table 9](#))
- Followed Individual Outing requirements

To be considered at **low risk** of unknown exposure, All conditions must be met.

### **Safety Precautions**

- Twice daily health check of symptoms for 14 days after returning

### **Medium Risk**

- Household with persons who have medium risk of unknown exposure (refer to [Table 9](#)), and
- Followed Individual Outing Requirements\*

### **Safety Precautions**

- Continuous use of a mask for 14 days while out of individual own room

### **High Risk**

- Household with persons who have high risk of unknown exposure (refer to [Table 9](#)), or
- Stay included participation in public spaces or private events with 15 or more people, known or not known to individual; or
- Did not follow Individual Outing Requirements\*

To be considered at **high risk** of unknown exposure is any one or more of the above identified

### **Safety Precautions**

- 14 day quarantine after returning in own room(s) away from other residents.