Alberta Health Services (AHS) had made the difficult decision to limit access for family and visitors at our acute care, ambulatory care and urgent care/emergency sites. We are now in the process of progressively restoring access.

Patients are able to have designated support persons and should be asked who they would identify for their support. The following applies to designated support persons’ access:

- **All inpatients** – two (2) designated support persons at the same time if space permits.
- **Emergency and Urgent Care** - one (1) designated support person if space permits.
- **Ambulatory** – one (1) designated support person where space permits; two (2) designated support persons may be allowed in situations involving:
  - End-of-life care or goals of care designation (GCD) discussions;
  - Significant diagnosis/change in medical status leading to poor prognosis;
  - Behaviour challenges requiring two caregivers, medical or equipment needs requiring two caregivers;
  - Involvement of Social Services; or
  - When requested by the care team.

Patients should maintain the same designated support person for any reoccurring ambulatory appointments.

**Due to the increase in COVID-19 Variants of Concern, a confirmed outbreak at a site may require additional access restrictions for designated support persons and visitors. Please contact the site before coming for the most current access requirements and restrictions.**

**A designated support person:**
- Is an individual identified by the patient as a needed support;
- Is someone the patient wants involved in their care and health matters;
- Is 14 years of age or older;
- Can be a family member, close friend, or an informal/hired caregiver;
- Should be included as much as the patient/alternate decision-maker requests;
- Cannot be on isolation or quarantine for suspected, or confirmed, COVID-19 unless meeting the criteria of an exemption (see below section Chief Medical Officer of Health Exemptions);
- Can support a patient with suspected/confirmed COVID-19 with approval and direction from Infection Prevention & Control (IP&C); and
- A patient may identify a replacement designated support person if the original individual cannot perform their role due to quarantine, isolation, caregiver fatigue, etc.

**A visitor** is anyone not identified as a designated support person, and access is currently limited to:
- Individuals that have received government-approved compassionate exemptions; and/or
- Community spiritual/religious care providers, Indigenous elders and traditional knowledge keepers requested by the patient/alternate decision maker at the end-of-life; and/or
- Legal supports requested by the patient/alternate decision-maker at the end-of-life; and/or
- Any individual with a scheduled visit to see a patient at the end-of-life.
COVID-19 PROVINCIAL GUIDANCE FOR DESIGNATED SUPPORT AND VISITOR ACCESS IN ACUTE, AMBULATORY AND EMERGENCY/URGENT CARE

Responsibilities of designated support persons and visitors when at a site:
- Must complete COVID-19 screening before entering a site;
- Must wear the provided AHS Designated Family/Support or Visitor identification;
- Must continuously mask at all times or, if unable to mask, or having an official masking exception, must follow the requirements of the AHS Directive: Use of Masks During COVID-19;
- Must perform hand hygiene when entering/leaving the facility and when entering/leaving the patient’s room;
- Must practice physically distancing from others; and
- Shall remain in the patient’s room and minimize movement throughout the facility.

Patients and families are still encouraged to maintain contact with each other virtually to reduce the risk of contracting and spreading the COVID-19 virus.

Immunized individuals are still required to follow all public health measures, including physical distancing, masking, isolation/quarantine requirements, and COVID-19 screening before entering a site.

Responsibilities of clinical program areas to support safe visitation:
- Confirm with patients who their designated support persons are;
- Contact and discuss with designated support persons when will be the best time for them to be on-site and with the patient (e.g. during rounds);
- Maintain a list of designated support person names and phone numbers and contact them in a timely way should access restrictions change (e.g. outbreak);
- Have a process for screeners to verify and welcome designated support persons and visitors at site entry for inpatients; a process for verifying and welcoming designated support persons for ambulatory patients is also advised;
- Provide AHS Designated Support or Visitor identification;
- Provide Personal Protective Equipment to designated support persons and visitors at site entry;
- Provide coaching and education on proper donning and doffing of Personal Protective Equipment;
- Provide coaching and education on safety requirements while at the site;
- Provide designated support persons with the Know Your Risk and Know Your Role pamphlets; and
- Offer and facilitate virtual options for inpatients to connect with loved ones.

Supporting patients at end-of-life:
- Patients are considered to be at end-of-life during the last four (4) to six (6) weeks of life;
- End-of-life is the only circumstance when designated support persons and visitors are to be accommodated by all clinical areas;
- All persons considered to be at end-of-life can have two (2) designated support persons who can be on site as much as the patient requests;
- Visitors need to pre-book seeing the patient with the site/unit;
- Schedule time between visitors to avoid queueing;
- Advise visitors before they come of site access requirements;
- Visitors should leave the site as soon as their visit is complete;
- Community spiritual/religious care providers, Indigenous elders and traditional knowledge keepers can schedule time to visit, or to perform end of life ceremonies, rituals and rites as requested by the patient;
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- The maximum number of designated support persons and visitors with the patient at one time is three (3), space permitting;
- Physical distancing is required unless designated support persons and visitors are from the same household;
- Children under the age of 14 may visit if accompanied by an adult; and
- There are Federal and Provincial Compassionate Exemptions from quarantine for the purposes of visiting a patient at the end-of-life and/or during critical illness.

Considerations, Variation and Chief Medical Officer of Health Exemptions:

- **Pediatric Ambulatory:** On a case-by-case basis, exceptions for having two (2) designated support persons may be considered by the clinic (in consultation with site leadership). Examples could be but are not limited to:
  - End-of-life or goals of care discussions;
  - Significant diagnosis/change in medical status leading to poor prognosis and patient implications;
  - Behavioral challenges requiring two (2) caregivers;
  - Medical or equipment needs requiring two (2) caregivers;
  - Involvement of Children’s Services; or
  - Other situations where requested by the care team.

- **Pediatric Inpatient:** On a case-by-case basis, and in consultation by the service area with site leadership:
  - An additional support person (e.g., disability support worker) may be permitted in addition to the two (2) designated support persons; and
  - Sibling visitation can be considered for long-stay pediatric patients with approval from site leadership and in consultation with IP&C. An adult must accompany children under the age of 14.

- **CMOH Exemption – quarantined or isolated persons who have minor children requiring medical care:** A quarantined or isolated person required to arrange or provide for the healthcare needs of a minor child needing medical care that can only be provided in a doctor’s office, hospital, or other medical facility and it is not possible that another parent or legal guardian not subject to isolation/quarantine can accompany the minor for medical care if complying with the requirements outlined in the Exemption: quarantined and isolated persons who have minor children that require medical care (alberta.ca).

- **CMOH Exemption - designated support person for obstetrical patients who are under quarantine/isolation:** A quarantined or isolated designated support person of an obstetrical patient with a confirmed case of COVID-19 may accompany the patient to a medical facility for the purposes of the obstetrical patient receiving needed medical care and provided that they comply with the requirements outlined in the Exemption - Designated family and support person for obstetrical patients - June 10, 2020 (alberta.ca).

- **CMOH Exemption - quarantined and isolated persons who have adult dependents that require medical care:** A quarantined or isolated person required to arrange or provide for the healthcare needs of another person 18 years or older (dependent adult), and the dependent adult requires medical care that can only be provided in a doctor’s office, hospital, or other medical facility and it is not possible that another person can accompany the dependent adult; that person is exempt from the provision of the CMOH quarantine/isolation order to take dependent adults for scheduled medical care or for admission to...
hospital or other medical facility to the extent necessary to allow the dependent adult to receive scheduled medical care if complying with the requirements outlined in the Exemption: quarantined and isolated persons who have adult dependents that require medical care - Open Government (alberta.ca).

- **Patient Passes**: Patients with an Alternate Level of Care designation, those in dedicated rehabilitation programs and Addiction and Mental Health patients may require an off-site pass. The following are requirements for an offsite pass and would be in addition to any site, or program specific off-site pass expectations.
  - The pass is deemed an essential part of the patient’s treatment plan by the care team and must be ordered by a physician or designate;
  - The patient’s plans while out of the facility do not include travel to a location where any individual is on either isolation or quarantine;
  - Prior to the pass being granted, the individuals in the household where the patient will be staying must complete the Online COVID-19 Self-Assessment and confirm that no one in the household:
    - Has COVID-19;
    - Is suspected of having COVID-19;
    - Is experiencing COVID-19 symptoms; or
  - To help decrease any risks, the patient receiving a pass should follow all public health recommendations provided by the Alberta Government including:
    - Practicing physical distancing when possible;
    - Practicing frequent hand hygiene;
    - Limiting community exposure; and
    - Wearing a mask that covers nose and mouth when physical distancing is not possible.
  - Prior to leaving the facility, unit staff will review the most up to date public safety guidelines with the patient and their designated support persons; and
  - On return from pass, the patient must identify that they are returning from a pass and be screened before entering the facility. They also must follow any admission criteria for the service care area, such as symptom monitoring at least twice per day. If the patient presents with new onset of symptoms of COVID-19, they may be required to quarantine.

- **Indigenous Wellness**: AHS acknowledges the significance and importance of traditional Indigenous practices and protocols and promotes the involvement of AHS cultural helpers, traditional wellness counsellors, Indigenous Health and Hospital Liaisons or designated Community Health representatives where possible and per this guidance.

- **Outdoor Visitation**: Outdoor visitation is not encouraged at this time but will remain under review.

- **Patient Belongings**: Patients can have necessary belongings brought to them (e.g. electronic devices, charging cables, toiletries, supportive footwear, and clean clothing in a cleanable container). Items must be cleaned or disinfected as appropriate, prior to being brought in by the patient’s designated support person and again at the service area before being given to the patient. Please refer to the IP&C Tip Sheet for Acute Care Patients Belongings and Gifts during COVID-19 for guidance.
This guidance will be adapted as the circumstances of COVID-19 change, and it allows for professional judgement to be used based on site-specific considerations and in accordance with the AHS Directives:

- **Designated Family/Support Access and Visitation in Acute Care, Ambulatory and Emergency Care Sites during COVID-19**

- **Designated Family/Support Access and Visitation in Designated Living Option and Hospice Settings during COVID-19**

  Patients or family questions/concerns should be directed to the patient's care team or Patient Relations at 1-855-550-2555