

As facility leadership, you are in the best position to know the attributes of your site.

Any restrictions must be implemented in accordance with Section 4 of the Directive.

This assessment is a component of the ***AHS Designated Family/Support Access and Visitation in Acute Care, Ambulatory and Emergency Sites*** [directive](#) and [guidance document](#), for use when additional Designated Support Person (DSP) restrictions are required above those outlined in the guidance document.

This assessment shall consider:

- That the **proposed restrictions are the least restrictive necessary to mitigate the risk;**
- That the priority is to preserve access for DSPs or to re-instate it as soon as possible;
- The need for patients to have no less than one DSP (even during outbreak);
- The requirement to follow the guidance for patients who are at end of life or facing potential loss of life;
- The need for continuous masking by all DSPs, and any other PPE as indicated by the situation;
- Any AHS directives and/or CMOH orders in effect;
- Any advice and direction from a MOH; and
- Restrictions cannot extend beyond 14 days without re-approval inclusive of full justification for the extension

Site/Program Area	
Completed by	Date (<i>dd-mon-yyyy</i>)
What is the risk that needs mitigation?	
What restrictions beyond those listed in the guidance are proposed for your site? Please also indicate whether the restrictions are for the whole site or for a specific unit/program area.	
How will these restrictions support the safety of workers, patients, DSPs, and visitors?	
What alternatives were considered?	

How long will the restrictions be in place for? (_____ Days)	
How will the restrictions be communicated to patients, DSPs, and visitors before they arrive on site?	
In the case of an Outbreak, has ECC Communications been notified to update the Outbreak Webpage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
MOH Name <i>(Print Last, First Name)</i>	Review Date <i>(dd-mon-yyyy)</i>
ZEOC/ZEL Approval Name <i>(Print Last, First Name)</i>	Date <i>(dd-mon-yyyy)</i>