

November 2, 2023

**MEMO TO:** Retirement Home Operators and Licensees  
**FROM:** Marsha Pinto, Interim Assistant Deputy Minister  
Policy, Programs and Strategic Partnerships Division  
Ministry for Seniors and Accessibility  
**SUBJECT:** Enhanced Masking Recommendations for Retirement Homes

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I am writing to provide you with an update on the masking recommendations in retirement homes (RHs) to optimize health and safety while balancing impact on resident and staff well-being.

MSAA continues to work in collaboration with the Office of the Chief Medical Officer of Health (OCMOH) to monitor and assess the risk of respiratory illnesses in RHs, as the 2023/24 respiratory season evolves. Recently, Public Health Ontario (PHO) reported that COVID-19 infections are increasing across the province. Influenza and Respiratory Syncytial Virus (RSV) infections are expected to increase soon as well. Given this rise in viral activity, OCMOH is recommending that long-term care homes (LTCHs) and RHs enhance masking requirements for healthcare workers in congregate living settings.

As such, in addition to the current requirements outlined in the *MSAA COVID-19 Guidance for Retirement Homes in Ontario (MSAA Guidance)*, MSAA is proposing the following recommendations for RHs not in outbreak:

- **Strongly recommend** that staff, students, volunteers, and Essential Visitors who are health care workers mask when in resident areas indoors in addition to point-of-care risk assessment (i.e., masking while in communal areas of the home including when not providing direct care).
- **Recommend** that RHRA Inspectors mask in all resident areas indoors.

These recommendations are in addition to the current masking requirements, found in the MSAA guidance, which will continue in the sector. As a reminder, the current masking requirements are as follows:

- Masks are required for staff, students, volunteers, and Essential Visitors who are health care workers, including Home and Community Care Support Services (HCCSS) workers, based on a point-of-care risk assessment (i.e., for determining if masking is needed before every resident interaction based on risk to the worker).
- Staff may consider wearing a mask while providing 1:1 care within 2 meters of an individual for 15 minutes or longer.

- Masks are recommended but not required for visitors who are not health care workers (e.g., families, friends, and caregivers who are not health care workers).

The recommendations above have been carefully considered in collaboration with OCMOH and with feedback from RH stakeholders based on the following rationale:

- Proactive masking for staff/health care workers and visitors/caregivers would help to prevent and reduce size and duration of outbreaks, as well as reduce risk of staffing issues due to staff calling in sick.
- Public Health Units (PHUs) feedback that outbreaks often begin with workers introducing and then spreading viruses among residents.
- Most Ontario hospitals have implemented staff masking in all clinical areas.

Given that the current respiratory virus activity is posing a risk to all vulnerable congregate living settings, masking for source control reduces transmission of infection from the wearer to those around them. It will be beneficial for health care workers to wear a mask while in resident areas of the RH given that they typically interact with multiple residents.

In addition, I take this opportunity to once again remind operators and licensees that remaining up to date with COVID-19 and Influenza vaccines continues to be the best defense against severe outcomes from these infectious illnesses. If your home is experiencing any barriers to accessing vaccination, I encourage you to reach out to our team at [RHInquiries@ontario.ca](mailto:RHInquiries@ontario.ca) for support.

In conjunction with vaccinations, continued adherence to infection prevention and control (IPAC) measures is crucial to mitigate the risk of outbreaks and spread of respiratory diseases. Operators and licensees must be mindful of IPAC obligations under the [Retirement Homes Act, 2010](#), which include ensuring the presence of an IPAC program that meets the requirements set out in Ontario Regulation 166/11 and IPAC training for all staff and volunteers.

Lastly, together with enhanced masking, and as part of MSAA's fall/winter plan, MSAA has hosted two webinars, in collaboration with the Ontario Retirement Communities Association (ORCA), related to [fall preparedness planning](#) and [IPAC best practices](#). I strongly encourage those who were not able to attend to access the recordings.

As always, I thank you for your dedication in ensuring RH operations run smoothly, while prioritizing the safety and well-being of both residents and staff.

If you have any additional questions, please contact our team at [RHinquiries@ontario.ca](mailto:RHinquiries@ontario.ca).

Sincerely,

*Original signed by*

Marsha Pinto

- c: Melissa Thomson, Deputy Minister, MSAA and MLTC
- Dr. Barbara Yaffe, Associate Chief Medical Officer of Health, OCMOH
- Jay O'Neill, Chief Executive Officer and Registrar, Retirement Homes Regulatory Authority
- Cathy Hecimovich, Chief Executive Officer, ORCA
- Lisa Levin, Chief Executive Officer, AdvantAge Ontario