

**Consent form for informal caregivers assisting relatives in facilities during the
COVID-19 pandemic**

To help you make an informed decision, you must fully understand the inherent risks you will take when you assist a resident during the COVID-19 pandemic:

- When you visit a resident, there is an increased risk that he or she, the other residents and the personnel will contract COVID-19.
- When you visit a resident, there is an increased risk that you, as an informal caregiver, will contract COVID-19.
- In addition, the people most at risk of developing complications after contracting COVID-18 are those aged 70 and over, and/or those who are more vulnerable due among other things to cardiovascular disease, lung disease, high blood pressure, diabetes and chronic renal diseases, and/or those with compromised immune systems.

Based on the above, I, the undersigned, _____ :

- certify that I have understood the inherent risks arising from the decision, as listed above;
- certify that I have read the information on monitoring for symptoms, hand hygiene, respiratory etiquette and the use of personal protective equipment;
- will comply with the conditions and instructions imposed by the institution (CHSLD, IR-FTR, PSR) or by the public health authorities regarding infection prevention and control;
- agree to wear appropriate personal protective equipment as required by the resident's condition;
- understand that if I fail to comply with the conditions and instructions imposed by the institution or by the public health authorities, the institution may terminate my right to visit.

Signature

Date (yyyy/mm/dd)