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**Rapid
Response**

COVID-19 and Distance Socializing between People Living in a Residential Facility and Caregivers in the Context of a Visitors Ban

Produced by the Institut national d'excellence en santé et en services sociaux (INESSS)

Québec

This rapid response was prepared by the scientific professionals at the Social Services Directorate of the Institut national d'excellence en santé et en services sociaux (INESSS).

RESPONSIBILITY

INESSS assumes full responsibility for the form and final content of this document at the time of publication. The findings herein are subject to change as the situation evolves.

COVID-19 and Distance Socializing between People Living in a Residential Facility and Caregivers in the Context of a Visitors Ban

This document and the findings it sets out were prepared in response to an inquiry from the Ministry of Health and Social Services (MSSS) in the context of the coronavirus (COVID-19) health emergency in Quebec. The aim was to conduct a summary review of the published data and to mobilize key knowledge in order to provide information to policy makers and to health and social service professionals. Since this response had to be provided rapidly, the resultant findings are not based on a comprehensive search of the published data and a systematic assessment of the response quality, or on a highly developed consultation process. During this public health emergency, INESSS is keeping a watchful eye for new data that might warrant an update of this response.

INESSS's SYNTHESIS

The findings below are based on the scientific documentation and grey literature available at the time of writing and are offered in spite of the uncertainty that exists in this documentation and in the approach used.

- The importance of maintaining communication with people living in residential facilities, despite the ban on visits, must be recognized in order to promote their health and avoid stigmatization.

- "Distance socializing" in the context of "social distancing" must be promoted. "Distance socializing" means maintaining or even increasing socialization in a context of physical distancing.

- Frequent and regular communication needs to be planned, not only with caregivers but also with friends, volunteers and community organizations.

- Social and collective creativity should be used to develop ideas for innovative actions that can be quickly mobilized.

- Access to technology (video calls, social networks, etc.) should be promoted to allow residents to communicate with their loved ones; decisions should be made on which means of communication are appropriate for each resident and his/her loved ones and assistance in using technology should be offered as needed.

- It is important for the institutions (facilities) to establish various means of communication (e.g., email, voice recordings, social networks) in order to keep loved ones regularly informed of developments in their institution (facility).

- Support services for people living in a residential facility and their loved ones are needed to promote their psychological well-being.

SUMMARY OF THE REQUEST

The objective of this rapid response is to spotlight various ways that are being used or that could potentially be used to foster social interactions between caregivers and vulnerable people at a time when no visits are allowed at hospitals, residential and long-term care centres, seniors' residences and at intermediary resources and family-type resources.

METHODOLOGY

Review methods: The data came from a variety of sources: PubMed, Google Scholar, Google (websites). Various combinations of key words, in English and French, were used. For example:

- *Proches aidants* (*proches*, caregivers);

- *Hébergement* (long-term care, nursing homes, youth protection services, Ehpad);

- *Isolement*, *isolement social*, *distanciation sociale*, confinement, distance;

- *Personnes âgées*, *incapacités*, *hospitalisation* (*elderly*, *older*, *disabled*, *hospitalized*);

- Communication, *vidéoconférence*;

- Coronavirus, covid-19.

Sixteen documents were selected.

Analysis: The articles and documents were not assessed for quality. The main relevant findings in each document have been summarized in tables found at the end of the document:

- Table 1: Relevant Documents Reviewed that Directly Concern Covid-19

    o 10 documents from government organizations or health organizations;

    o 3 documents taken from the scientific literature (expert opinions).

- Table 2: Relevant Documents Reviewed concerning Distance Caregiving

    o 3 reviews of the scientific literature.

An overall summary of the results, grouped by themes, is presented below (under "INESSS's Findings").

Observations on the available literature:

- The literature reviewed focuses mainly on older people; no documents were found concerning youth, people with physical disabilities or mental health disorders.

- A period of lockdown such as the one we are currently experiencing is a new event – one to which the various jurisdictions must adjust in near real time; little literature is available on this issue.

- The authors of the documents consulted generally do not provide details on how to operationalize the measures they propose.

INESSS's FINDINGs

- **Importance of maintaining social contact during isolation**

  o Isolation has significant impacts on physical and mental health.

  o Data from previous infectious disease pandemics indicates that people or groups of people who are quarantined or put in lockdown may be stigmatized or marginalized even if they are not infected.

    ▪ The authorities need to proactively address the issue of stigmatization in order to promote solidarity.

- **Tips for promoting ongoing contact with isolated individuals**

  o As suggested by de Witte (2020), the term "distance socializing" should be used to underscore the importance of maintaining connections with isolated individuals. "Distance socializing" means maintaining or even increasing socialization within a context of physical distancing.

  o Stress the fact that there are other possible ways to reconfigure social relationships and interactions with people who are living in a residential facility.

  o Consider what we can learn from the literature on geographically distant caregivers in a non-pandemic context:

    ▪ Although distance communication is more complex than face-to-face interaction, it is still possible to stay involved when supporting people who need help and to maintain strong relationships with them.

    ▪ Possible roles for long-distance caregivers include: emotional support, coordination and follow-up of care and services, decision-making assistance, etc.

  o "Social imagination" can be used by drawing on social scientists, epidemiologists and artists to find ways to reach out to isolated people.

- **Suggestions for communicating with residents during a visitors ban**

  o Various means of communication are mentioned:

    ▪ Telephone calls

      – Ensure that isolated people have access to a telephone line – ideally a private line.

      – Use a telephone relay system for people who have hearing impairment or a speech disorder.

    ▪ Mail (e.g., letters, post cards, photos, drawings), delivery or courier service can be used to send gifts (e.g., personalized calendars, digital photo

frames with pictures of loved ones, etc.). However, such means of communication should be used sparingly during a time of social distancing.

- Email

  - Enlarge the font size if necessary.

- Other technological means, e.g., text messages, video calls, social networks (see Technology section below).

o One suggestion is to increase the frequency of communications, not only with caregivers but also with friends, volunteers and community organizations. For example:

- In Ireland, a national volunteer organization is helping to ensure that all vulnerable people are being cared for during this time of crisis. This organization is responsible for keeping local agencies informed, providing advice on how to volunteer safely and promoting the role of volunteers during the coronavirus pandemic.

- In New Zealand, one of the jobs assigned to a network of 700+ volunteers is to make phone calls to vulnerable isolated people.

- In Quebec, the Drummond Volunteer Centre is inviting older people to call community workers for telephone support during the Covid-19 crisis.

o It may be desirable to schedule regular communication with facility residents so as to create a reassuring routine.

o If a resident needs help in interacting with his/her loved ones, the facility's entertainment and recreational services can help by scheduling sessions several times a week that are specifically designed to facilitate interaction with loved ones through a variety of means.

- A "photobooth" activity is being set up by a Quebec residential facility (involving sending playful photos of a resident to his/her loved ones).

- **Technology**

  o A study published in 2017 shows that digital communication technologies such as the Internet could promote social connectivity, thereby reducing the rate of social isolation and loneliness.

  - In Quebec, 92% of households had a residential Internet connection in 2018; however, among people aged 65 and over, this percentage was only 81%. In addition, Internet access in hospitals, residential and long-term care centres, seniors' residences and at intermediary resources and family-type resources may be limited.

  o Considering that digital literacy levels and access to tools vary widely, there is a part of the population for whom technological means are not available.

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- It is appropriate to coach some people in order to facilitate their use of technology (as suggested above).

- It is important to provide access to a computer, tablet or smartphone to people who do not have these devices so that they can get in touch with their loved ones.

o Learn about a resident's preferences as to how he/she would like to stay in touch with loved ones. Technology offers several options:

- Does the person prefer to engage in interactions that are synchronous (occurring at the same time) or asynchronous (delayed)?

- Does he/she prefer oral or written interactions?

o Facebook Messenger, WhatsApp and Skype are examples of technological tools for synchronous/asynchronous and oral/written interactions. Each technology has its advantages and disadvantages (e.g., some require the creation of an account while others do not; some allow only a limited number of connections; some are easier to use than others). Below are two examples of how these technologies can be used:

- Caregivers can send video or audio recordings to a facility resident. In the case of cognitively impaired individuals, the same recordings can be played on a regular basis to provide a simulated presence of their loved ones, if this helps to reassure them and make them less agitated.

- As a result of the suspension of in-person visits, a regional retirement home in Italy uses WhatsApp for video calls between residents and their families.

o Below are some examples of web applications for caregivers that can be used to create a coordinated communication and support network around people needing help:

- Tous Aidants: https://apps.apple.com/fr/app/tous-aidants/id1372191372

- Lotsa Helping Hands: https://lotsahelpinghands.com/

- Caring Bridge: https://www.caringbridge.org/

- Caring Village: https://www.caringvillage.com/

o Some loved ones may be able to use the website of the institution (or facility) to send written messages; these messages are then forwarded by a staff member to the resident.

o In addition, social networks can reduce feelings of isolation, as illustrated in the examples below:

- Photos can be taken of an isolated person holding a written message for their family or loved ones; then, after the person's consent has been

obtained, these photos can be posted on social media with the help of a staff member.

- A group on a social network can be created to share ideas and tips among loved ones (e.g., online resources for medical consultations, information about the limited opening hours of some stores).

- **Communication between institutions (facilities) and caregivers**
  - Institutions (facilities) may glean some ideas from the following suggestions:
    - Keep loved ones up to date on the situation by using listserv emails.
    - Set up a telephone line to provide a recorded report on the current operation of the facility and update it frequently (e.g., every day).
    - Assign someone to act as a primary contact who can be easily reached by a resident's loved ones. This contact person needs to communicate frequently with a designated loved one to provide updates on the resident's status, particularly if the resident is unable to communicate on his/her own.
    - Share general information or news releases via the Facebook page of the institution or facility.

- **Support services for isolated people and their loved ones**
  - Consideration should be given to some of the support services as a way of helping isolated people counter the harmful effects of their isolation; these include:
    - Telephone helplines
    - Online cognitive-behavioural therapy to reduce loneliness and promote psychological well-being in people living in a residential facility
  - Telephone support services that are normally available to caregivers continue to remain accessible during the current crisis. Examples include:
    - National Dementia Helpline (Australia)
    - *Centre de soutien entr'Aidants* (Quebec)
    - *Ligne info-aidants par l'appui.org* (Quebec)
  - There are also online support services for caregivers. For example:
    - Canadian Caregiver Network, for the loved ones of people suffering from dementia

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Table 1. Relevant Documents Reviewed THAT DIRECTLY CONCERN COVID-19

Authors (date)	Web Link	Country	Document Type	Population	Relevant Results
Government documents and recognized organizations					
Public Health England March 23, 2020	https://www.gov.uk/government/publications/covid-19-guidance-on-social-distancing-and-for-vulnerable-people/guidance-on-social-distancing-for-everyone-in-the-uk-and-protecting-older-people-and-vulnerable-adults	United Kingdom	Government announcement	Older people and vulnerable adults Covid-19	• In the case of older people and vulnerable adults: o Maintain contact with loved ones and friends by phone, mail or the internet. Involve residents in the decision on how best to stay in touch and have them integrate the method chosen into their everyday routine.
Australian Government, Department of Health March 19, 2020	https://www.health.gov.au/sites/default/files/documents/2020/03/coronavirus-covid-19-information-for-families-and-residents-on-restricted-visits-to-residential-aged-care-facilities_0.pdf	Australia	Government announcement	Families and residential care facility residents Covid-19	• Stay in contact via phone and video calls. • In the case of residents' families and loved ones: o Have them send postcards, photos, drawings or have them film short videos to share. o In the case of people who regularly visit residents with a cognitive impairment, consider other ways of maintaining contact. The goal here is to reassure residents who may be feeling anxious about the changes in their day-to-day life. o The existing National Dementia Helpline can be used by the loved ones of people living with dementia as a source of information, support and advice.
Center for Clinical Standards and Quality/Quality, Safety & Oversight Group March 13, 2020	https://www.cms.gov/files/document/3-13-2020-nursing-home-guidance-covid-19.pdf	United States	Diplomatic note	Residential care facility Covid-19	• Institutions need to consider: o Providing alternative means of communication, such as phone calls or videos. o Sending listserv emails to families to keep them updated. o Assigning someone as the primary contact for families and frequently keeping them up to date through phone calls. o Offering a phone line with a voice recording that is frequently updated (e.g., daily) and

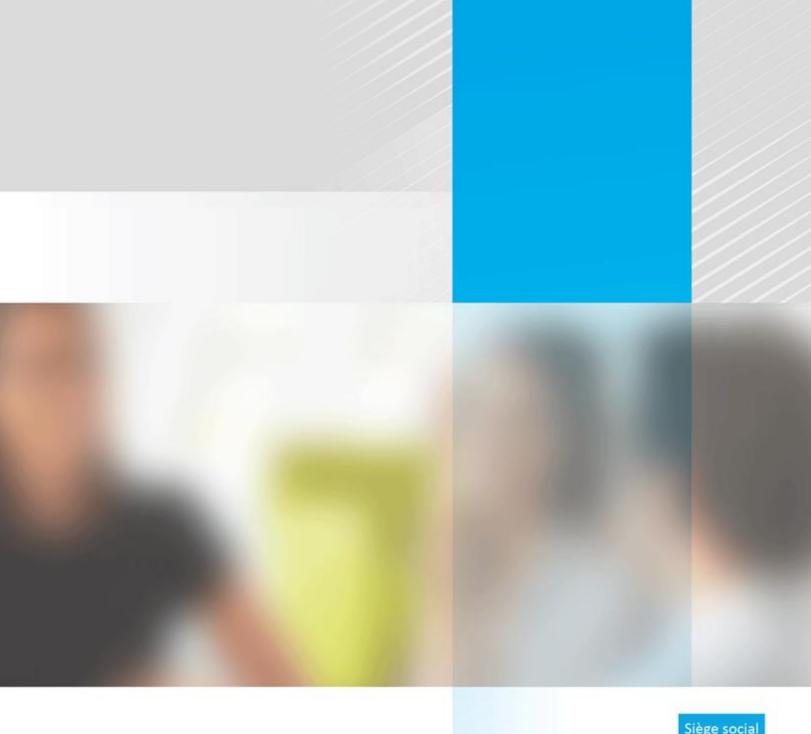|					
					indicating the facility's general operating status.

AMDA – The Society for Post-Acute and Long-Term Care Medicine
 	
March 15, 2020
	https://paltc.org/sites/default/files/Strategies%20for%20Mitigating%20the%20Emotional%20Impact%20of%20COVID-19.pdf	United States	Other	Post-acute and long-term care communities
				
				Covid-19
					• Institutions need to consider ways to:
					  o Set up a computer in a private area in order to make it easier for residents to use FaceTime or Skype.
					  o Draw on Social Services and Therapeutic Recreation to provide family reassurance.

Alzheimer's Association March 2020	https://www.alz.org/help-support/caregiving/coronavirus-(covid-19)-tips-for-dementia-care	United States	Website	People with Alzheimer-type dementia living in a residential facility Covid-19	• Find alternative ways to stay in contact with people in a residential facility (phone calls, email, etc.). • Keep in touch with a facility staff member in order to receive updates on a resident's condition if he/she is unable to take calls.
European Centre for Disease Prevention and Control March 23, 2020	https://www.ecdc.europa.eu/sites/default/files/documents/covid-19-social-distancing-measuresg-guide-second-update.pdf	Europe	Technical Note	Public health Covid-19	• Encourage contacts with friends, family members and other networks through Internet-based communications, social networks or phone calls.
American Association of Retired Persons (AARP) March 19, 2020	https://www.aarp.org/caregiving/health/info-2020/preventing-coronavirus-in-nursing-homes.html	United States	Website	People living in a residential facility Covid-19	• Maintain frequent contact with residential facility staff in order to stay informed about a resident and his/her situation and about the steps taken by the facility to prevent the spread of infection.
Rochester Regional Health March 18, 2020	https://www.rochesterregional.org/news/2020/03/coronavirus-and-elderly-seniors	United States	Website	Older people living in a residential facility Covid-19	• Encourage the use of a variety of ways to stay in contact, e.g., by sending letters or gifts, by video chat.
Complete Care Coordination 2020	https://www.completecare.ca/blog/5-tips-seniors-stay-connected-family/	Quebec	Website	Older people living away from their loved ones Covid-19	• Encourage the use of a variety of ways to stay in contact: phone calls, video calls, email (enlarging the font if necessary), social media. • Establish a stable communication routine; this can be reassuring to older people.

Source	Link	Country	Type	Population	Recommendations
STAT March 12, 2020	https://www.statnews.com/2020/03/12/qa-how-to-care-for-the-elderly-without-putting-them-at-risk-of-coronavirus/	United States	Website	Isolated older people Covid-19	• Encourage the use of a variety of ways to stay in contact: phone calls, video calls, delivery services, social networks. • Make contact more frequently. • Use a telephone relay system if necessary (for people who have hearing impairment).
Documents from Scientific Journals					
Dosa *et al.* 2020 (in press)	https://www.jamda.com/article/S1525-8610(20)30249-8/pdf	United States	Editorial in a scientific journal	People of all ages living in various types of residential facilities Covid-19	• Maintaining communication between the facility and worried residents and family members is one of the five recommendations for pandemic preparedness in long-term care.

Armitage & Nellums
March 19, 2020
	https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(20)30061-X/fulltext	United Kingdom	Expert opinion (Letter to the Editor of a scientific journal)	Older people
				
				Covid-19
					• The significant consequences of isolation on the physical and mental health of older people must not be forgotten.
					• Tips on how to overcome isolation in older people during the Covid-19 pandemic:
					  o Use digital technology (but keep in mind that people have variable levels of digital literacy and access to technology).
					  o Increase the frequency of telephone contact with loved ones, professionals and community organizations.
					  o Use online cognitive-behavioural therapy to reduce loneliness and promote psychological well-being.
					  o Target marginalized or vulnerable people (who are not defined in the article) as a priority.

Long March 2020	http://eprints.lse.ac.uk/103801/1/From_Social_Distancing_to_Social_Containment_v_2.2_3.pdf	United Kingdom	Expert opinion (article submitted to a scientific journal)	General population Covid-19	• Focus on the measures to be taken rather than those to be avoided when reconfiguring social relationships and interactions during a time of isolation and social distancing.

					• Develop "social imagination" to enhance social relationships by drawing on social scientists, epidemiologists and artists.

Table 2. Relevant Documents Reviewed concerning Distance Caregiving

Authors (date)	Web Link	Document Type	Population	Relevant Results
Cagle & Munn 2012	https://www.tandfonline.com/doi/abs/10.1080/01634372.2012.703763	Scientific article: literature review	Caregivers who are geographically distant from the person needing help; the exact population is not specified.	• Although distance complicates communication with a person needing help and limits the type of assistance that can be provided, it is possible for geographically separated loved ones to maintain strong emotional ties with people living in a residential facility. This can be achieved through frequent contact (e.g. phone calls, mail). • Possible roles for long-distance caregivers: emotional support, coordination and follow-up care/services, help with decision-making, financial assistance, help with medications or meal preparation through local agencies. • The review describes a study (Watari *et al.*, 2006) on the establishment of a support program for caregivers who are geographically separated from residents with dementia. This program notably includes a telephone line staffed with a liaison worker, the creation of a website to foster links between caregivers and the resident's community resources, and a list of community resources that may be useful in the resident's environment.
Bevan & Sparks 2011	https://www.sciencedirect.com/science/article/abs/pii/S0738399911000524 0	Scientific article: literature review	Caregivers who are geographically distant from the person needing help; the exact population is not specified.	• While distance complicates communication with a resident, it is not an insurmountable obstacle to maintaining a relationship. • Long-distance caregivers are often involved in decisions that concern residents and provide practical, emotional and financial support by means of phone calls, mail, email and text messages. • Long-distance caregivers may feel that they do not have a clear picture of how the resident is doing because they are not sure whether they are being given complete information. • The authors recommend that long-distance caregivers actively participate in managing care and services in spite of the distance, and that they maintain regular, scheduled contact with residents.
Abraha I, *et al.* 2017	https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD011882.pub2/epdf/full	Scientific article: Cochrane Database of Systematic Reviews	Older people with dementia	• Simulated presence entails playing audio or video recordings prepared by family members for a person with dementia who is living in a residential facility. The aim is to reduce the behavioural and psychological symptoms of dementia (BPSD) and separation anxiety. • The content of the recordings varies: e.g., "one-way" telephone conversations, stories, memories. Loved ones are sometimes provided guidance on how to produce the content, and sometimes are left to their own devices. The

Authors (date)	Web Link	Document Type	Population	Relevant Results
				recordings were played to the resident several times over a period of a few weeks. • The efficacy of this intervention has not been demonstrated since only three studies have been conducted. Anecdotally, some care workers observed an increase in interest and a reduction in withdrawn behaviours and verbal aggression among residents who received this intervention, but objective measures did not demonstrate significant effects.

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