

SOCIAL DISTANCING TO LIMIT FURTHER SPREAD OF COVID-19 DISEASE

Limiting the number of people who congregate and interact with one another within a facility and allowing more physical space between people can help curb spread of this infection.

Depending on specific facility needs and severity of exposure to persons with COVID-19, social distancing can range from decreasing the number of people who can congregate at a time for different activities to suspending all nonessential activities.

Explain to members and staff why people are isolated from others to avoid stigmatizing those who are affected.

The following are examples of social distancing that can be considered in congregate residential settings to limit the spread of an infectious respiratory illness:

Sleeping Arrangements	<ul style="list-style-type: none"> • If space allows, put fewer residents within a unit. • Move members with symptoms into separate rooms with closed doors, and provide a separate bathroom, if possible. • If only shared rooms are available, consider housing the person who is ill in a room with the fewest possible number of other members.
Mealtimes	<ul style="list-style-type: none"> • Stagger mealtimes to reduce crowding in shared eating facilities. • Stagger the schedule for use of common/shared kitchens.
Bathrooms and Bathing	<ul style="list-style-type: none"> • Create a staggered bathing schedule to reduce the amount of members using the facilities at the same time.
Recreation/ Common Areas	<ul style="list-style-type: none"> • Create a schedule for using common spaces. • Reduce activities that congregate many members use at once such as “house meetings” and opt for smaller group activities.
Transport	<ul style="list-style-type: none"> • Opt for transporting less people per trip and ensure that passengers have more space between one another.
Communication	<ul style="list-style-type: none"> • Reduce the amount of face-to-face interactions with members for simple informational purposes. • Consider using bulletin boards, signs, posters, brochures, emails, phone, mailbox or sliding information under a member’s door.
Staff Activities	<ul style="list-style-type: none"> • Reduce unnecessary assembly of staff (e.g., large meetings where information can be communicated by written guidance). • When appropriate, opt for conference calls instead of in-person meetings

Source: NYS Department of Health Guidance Document entitled “Coronavirus Disease (COVID-19) Guidance for Congregate Settings.” <https://www1.nyc.gov/assets/doh/downloads/pdf/imm/guidance-for-congregate-settings-covid19.pdf>



ROOM ISOLATION

If a member has these symptoms or has been diagnosed with COVID-19, the steps below can help you not get others sick.

The member should stay in his or her room or designated area except to get medical care.

While the member is sick, restrict activities outside the member's room or designated area, except for getting medical care. The member should not go to work, school or public areas, and should not use public transportation (e.g., bus or subway). Ideally, the member should only travel in a private car and wear a face mask while outside of the home. If the member does not have anyone to drive a private car, then the member should use a taxi or car service, wear a face mask, sit in the back seat and open the window.

Separate the member from other people in the facility.

As much as possible, the member should stay in a different room from other people. The member should also use a separate bathroom, if possible. If given a face mask, the member should wear it when around other people.

If given a face mask, the member should wear it when in the same room with other people and when visiting a health care provider. If the member cannot wear a face mask, the people who live with him/her can wear one while in the same room, or the member can stay in his/her room with the door closed.

Cover coughs and sneezes.

The mouth and nose of a member should be covered with a tissue when he/she coughs or sneezes. The member can also cough or sneeze into his/her sleeve. Used tissues should be thrown away in a lined trash can, and the member should immediately wash his/her hands with soap and water for at least 20 seconds. Encourage the member to not use his/her hands to cover coughs and sneezes.

Wash hands.

Encourage the member to wash his/her hands often and thoroughly with soap and water for at least 20 seconds. Alcohol-based hand sanitizer can be used if soap and water are not available. Remind the member to avoid touching his/her eyes, nose and mouth with unwashed hands.

Avoid sharing common items.

Do not share dishes, drinking glasses, cups, eating utensils, towels, bedding or other items with other people. After using these items, wash them thoroughly with soap and water.

Monitor symptoms.

Notify someone in the facility or call the member's doctor if the illness is worsening (e.g., high fevers, difficulty breathing).

Call ahead before visiting your doctor.

Before a medical appointment, call the health care provider and tell them of the member's symptoms. This will help the health care provider's office take steps to keep other people from getting infected. Do not use public transportation, instead use a privately-owned car if available, or if not a taxi or car service and have the member wear a face mask while outside of the facility.

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CAREGIVER GUIDANCE

Help with basic needs.

Make sure you can help the member adhere to instructions for medication and care, and provide support for getting groceries, prescriptions and other personal needs.

Limit the person to one room.

Only people who are providing care for the member should enter the room or designated area.

Assign a separate bathroom, if available. If the bathroom is shared, **clean and disinfect** after each use: **focusing on frequently touched surfaces (such as door handles, sinks, paper towel dispenser/ hand dryer).**

Restrict visitors who do not have an essential need to be in the room. Keep older adults, those who have compromised immune systems or chronic health conditions, and people with disabilities away from the member. This includes people with heart, lung or kidney conditions, diabetes or cancer.

Maintain distance when interacting with an isolated member.

Maintain social distancing as much as possible. If you need to be within 6 feet, wear a face mask and disposable gloves as available when you enter the room where the ill member is isolated. When you have physical contact with the ill member (e.g., helping to bathroom, bathing, changing clothes), cover your clothing with a disposable gown. Whenever leaving the bedroom, carefully remove the gloves, the mask, and the disposable gown, and carefully put them in a plastic-lined trash can in the room.

Wash your hands.

Wash your hands often and thoroughly with soap and water for at least 20 seconds. Use an alcohol-based hand sanitizer if soap and water are not available and if your hands are not visibly dirty. Avoid touching your eyes, nose or mouth with unwashed hands. Always wash your hands before and after going into the bedroom.

Avoid sharing common items.

You should not share dishes, drinking glasses, cups, eating utensils, towels, bedding or other personal items with the member. After the member uses these items, you should wash them thoroughly.

Clean all high-touch surfaces.

Clean frequently touched surfaces such as counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables, every day.

Wash laundry thoroughly.

Monitor the symptoms of the member who is ill.

Notify someone at the facility or make arrangements to have the member seen, if he/she is getting sicker. Make sure the provider is aware the member has or may have COVID- 19 so that they can put appropriate infection-control measures in place.

Monitor your health.

Caregivers and others in close contact with the member should monitor their own health for signs or symptoms of fever, a new cough, new shortness of breath, or new sore throat. If that occurs, the caregiver will need to be isolated.

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