



## **Promoting Physical Distancing in Residential Settings During the COVID-19 Pandemic**

Promoting and maintaining physical distancing and self-isolation policies in congregate and supportive living settings can be a challenge. Residents may feel scared, lost, limited in their freedom and dignity, and struggle to adhere to new safety rules and policies. Staff may feel like they cannot control situations such as staff shortages, and may find it challenging to maintain isolation within open housing plans. This document provides guidance to help staff implement coronavirus disease 2019 (COVID-19) related safety recommendations more effectively in congregate and supportive living settings for youth and adults while observing residents' dignity and needs.

For general information on COVID-19, including how to guard against stigma, visit [nyc.gov/health/coronavirus](https://nyc.gov/health/coronavirus) or [cdc.gov/covid19](https://cdc.gov/covid19). For real-time updates, text "COVID" to 692-692. Message and data rates may apply.

### **Addressing Social Isolation**

The COVID-19 outbreak has impacted all New Yorkers' daily lives and routines, making it more challenging to stay connected to friends, family, hobbies and other support. This time may be particularly difficult for residents who have limited support, less access to or comfort with technology and those whose regular routines have been significantly impacted. Youth in congregate settings typically have significant behavioral support and structured activities. Loss of this support and structure might be keenly felt by many individuals in the group. Residents experiencing social isolation may feel lonely, scared and may be unsure of how to cope with feelings of distress. This can impact their behavior, including willingness to adhere to proper safety measures that help reduce the spread of COVID-19.

For all activities mentioned below, please ensure that staff and residents continue to practice physical distancing whenever possible.

### **Check for distress — questions to ask residents:**

- Who have you spoken to in the past week? How did you speak to them (phone, text, email, video)?
- The last time you spoke to someone, did that person reach out to you or did you reach out to them?

## **Ways to promote social connections and coping:**

- Establish regular outreach calls to residents, especially for residents who struggle with technology.
- Send a weekly newsletter keeping residents and their loved ones informed about policy changes and self-care tips.
- Encourage residents to identify and reach out to people in their social network who can provide them support as well as people who they can support.
- Normalize and validate residents' feelings. It is okay to share if you are also feeling stressed. We are all in this together.
- For more information on stress, anxiety, grief and ideas for staying connected during the COVID-19 outbreak, visit [nyc.gov/health/coronavirus](https://nyc.gov/health/coronavirus) and look for "Coping and Emotional Well-being."

## **Person-Centered Care**

Consider using a person-centered approach to help residents make lifestyle changes that help prevent the spread of COVID-19. The core concepts of person-centered care are dignity and respect, information sharing, participation and collaboration.

## **Implementing person-centered care during COVID-19**

**Active listening:** Active listening allows staff to respond to and validate residents' needs. In your own words, restate their concerns. This will allow staff to confirm their understanding of the residents' needs.

**Empathetic engagement:** Staff should offer regular check-ins with residents. This will show residents that staff are aware of how this experience is impacting them.

- Share information about why policies, routines and rules have changed and the benefit of these changes to the group and community.
- Acknowledge that residents may miss activities and staff interactions.
- Reiterate that these changes would be difficult for anyone and remind residents of times when they successfully dealt with changes in routine, schedule and/or staff.

**Clear and consistent communication:** Share information about the situation and changes to rules or policies with residents in ways that are easily understood and address their concerns or questions. Residents should receive timely, complete and accurate information regarding their roles in preventing the spreading of COVID-19 in the facility.

**Involve residents in decision-making:** Encourage residents to participate in decision-making about implementing and observing safety measures within the facility. Encourage questions. Create a dialogue focused on problem-solving. This involves a two-step process:

1) Clarify reasons for nonadherence: If residents are having difficulty complying or dealing with the current situation, staff should consider why that may be (for example, need for social

interaction, difficulties managing frustration, anxiety about changes in routine and staff contact). Note that some residents, particularly youth, may have difficulty defining the problem, their feelings or connecting them to behavior.

2) Ask questions and offer prompts to establish a problem-solving frame for the conversation. Define the problem, discuss a range of solutions and choose a solution. Consider using the following questions:

- General:
  - Help me understand, what has been difficult for you?
  - How can we make this easier for you?
  - What are some things that would encourage you to practice physical distancing?
- Low frustration tolerance:
  - Tell me some things that are frustrating you.
  - What would help you feel better? (Options may be special privilege/reward (see below) or self-soothing strategies).
- Need more interaction:
  - Who do you like to hang out with during the day (or week)? (e.g. staff, other residents)
  - Which activities do you miss the most?
  - How can we have some safe interactions? (Possible solutions: record brief video message for a specific individual or a brief conversation with staff of their choice).
- Anxiety:
  - What changes in routine have you found the most upsetting?
  - This is hard and concerning for all of us, tell me what is most concerning for you.
  - In the past, what helped you to feel more comfortable, relaxed and less anxious?

**Expect disagreements:** Staff should be prepared to resolve disagreements respectfully and not take residents' reactions personally. For more information on reactions to stress and coping with stress during social isolation, visit [nyc.gov/health/coronavirus](https://nyc.gov/health/coronavirus) and search for "Coping With Stress During Infectious Disease Outbreaks."

### **Use of Behavioral Incentives When Appropriate**

In this context, a behavioral incentive is the use of a reward after a desired behavior. If used consistently, incentives and rewards can change behaviors without the need for punitive measures.

Efforts should be made to help shape and reward behavior:

## **Congregate settings**

- Positive rewards and regular monitoring of behavior: residents receive an incentive for following safety rules and policies. Behaviors can be tracked using check sheets in small increments (five to 15 minutes at first, followed by increases to 30 minutes and longer).
  - Rewards should be something of value to the resident. Talk to the resident and mutually decide on a reward. Examples: can of soda, two or three mini-candies, small bag of chips, TV time, choice of music or a short walk with staff.
    - Rewards should be given immediately after the desired behavior. Staff should also verbally acknowledge the adherent behavior: “I appreciate how you were able to follow the rules and stay in your room.” If the resident has the capacity to wait, they may save up rewards for a larger reward at the end of the day (for example, a pizza dinner or extra TV time).
  - Rewards can also be given to a group of residents for a solid period of compliance (for example, one full day of isolation equals pizza for all).

**The NYC Health Department may change recommendations as the situation evolves.**

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