



ARGENTUM
EXPANDING SENIOR LIVING

Resident Engagement and Socialization During COVID-19

ABOUT ARGENTUM

[Argentum](#) is the leading national association exclusively dedicated to supporting companies operating professionally managed, resident-centered senior living communities and the older adults and families they serve. Since 1990, Argentum has advocated for choice, independence, dignity, and quality of life for all older adults.

Argentum member companies operate senior living communities offering assisted living, independent living, continuing care, and memory care services. Along with its state partners, Argentum's membership represents approximately 75 percent of the senior living industry—an industry with a national [economic impact](#) of nearly a quarter of a trillion dollars and responsible for providing over 1.6 million jobs. These numbers will continue to grow as the U.S. population ages.

Argentum's programs and initiatives are driven by its membership. For more information about joining Argentum, please visit [argentum.org/membership](https://www.argentum.org/membership). Learn more at [argentum.org](https://www.argentum.org).

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INTRODUCTION

The sense of loneliness experienced by residents has detrimental effects leading to a decline of cognitive and/or physical capabilities and an increase of depression and anxiety. Increased focus on this aspect of well-being for residents may be needed now and can be assisted through activities and individual interventions that can foster a greater sense of wellness.

Recent research published by iN2L, [Bridging the Loneliness Gap \(December 2020\)](#), confirms that loneliness is not a new challenge for senior living residents, but one that has been exacerbated during the pandemic situation.

- Before the pandemic, 33% of residents said they were often or always lonely.
- During the pandemic, the number of residents who reported always feeling lonely increased by 230%.

A person-centered approach provides the best possible engagement opportunities for residents by homing in on individual resident interests and developing individual programs. This form of approach can be defined as connecting with others, building and maintaining relationships, embracing uniqueness and the expression of this, and providing a safe, supportive environment with high levels of dignity and respect for those within the environment.

According to research by iN2L, almost three quarters of residents and 78% of families say activities specifically tailored to the resident are absolutely essential or very important to the resident's well-being.

Building person centered programming for engagement—through spiritual, social, physical, and cognitive opportunities—requires great flexibility, creativity, and an adherence to safety precautions during COVID-19. These safety precautions include use of appropriate personal protective equipment (PPE) (e.g., mask/face coverings), handwashing/hand sanitizer, disinfection protocols, physical distancing, maintaining separation in activity areas—and other measures established by state and/or local health departments, or other jurisdictional authorities.

COVID-19 has evolved resident programming to maximize opportunities with resources available in the community or available through technology. For the purposes of this document, please find activity program suggestions for:

- **In-Room:** the community may have suspected or confirmed cases of COVID-19 among residents and/or staff
- **Small Group:** the community has no COVID-19 positive residents or is cleared for small group activities by local health or state regulatory authorities.

The challenge then for communities is to continue to meet resident expectations with an ongoing and changing reality of person-centered programming and quickly pivot when needed.

When quarantining, residents stay in their rooms following restrictions on their activities and it is important to individualize and modify programming. When these restrictions ease, staff try to break down the barriers and minimize fear gained during in-room periods of time and encourage residents to participate in small-group, physically distanced, community programs beyond their rooms.

If residents are cohorting, engagement continues but incorporates the use of PPE and physical distancing.

The following information has been compiled to assist with evaluating individual and community-wide resident needs for engagement, activity development, and programming. COVID-19 has changed the way programming provides engagement. Staff are laser-focused on each resident's individualized needs to a more heightened level. This information is intended to support efforts to provide the best programming possible to help senior living residents maintain or improve their current overall health during COVID-19.

ACCORDING TO RESEARCH BY IN2L, ALMOST THREE QUARTERS OF RESIDENTS AND 78% OF FAMILIES SAY ACTIVITIES SPECIFICALLY TAILORED TO THE RESIDENT ARE ABSOLUTELY ESSENTIAL OR VERY IMPORTANT TO THE RESIDENT'S WELL-BEING.

I. RESOURCES AVAILABLE FOR SCREENING FOR LONELINESS

Monitor resident participation and engagement. Ask: “Which residents are most at risk of feeling lonely and may have detriment because of it?”

There are resources that can help monitor loneliness, including standard forms and questionnaires. These forms and questionnaires can be modified/expanded as needed to help staff understand what residents are feeling, so individual activities can be readjusted and encouraged.

Tools to help screen for loneliness include:

- [UCLA Loneliness Scale \(Version 3\)](#)
- [Social Network Index](#)
- [Whooley Screening UCSF](#)
- [Cornell Scale for Depression in Dementia](#)

Providing emotional support and fostering connections with other residents, even from a distance (e.g., across the hallway), can be what is most needed.

Also consider any declining vision and/or hearing impairments, as well as dental issues. These can be isolating factors if residents cannot participate due to not being able to see, hear, and/or eat.

Use an interdisciplinary approach to identifying changes in resident behavior. Having care staff who are consistently scheduled can be helpful in the identification of any changing behaviors, because staff are frequently in resident rooms and interact directly with residents. Housekeepers and maintenance staff also engage frequently with residents and can identify subtle changes.

II. NEW RESIDENTS AND COMPASSIONATE CARE

Moving into a community can be scary. The addition of COVID-19 restrictions—beginning in quarantine, wearing face coverings, not being familiar with staff, and being restricted from seeing the faces of others—can be extra scary for new arrivals.

Plan a welcome for new move-ins to dedicate time to connecting residents to their new home. For communities in quarantine, introduce residents to staff to ensure residents get a welcome from all departments in the community. It is an all-hands-on deck effort to help alleviate the fears new residents may be experiencing. If restrictions are being eased, introduce and schedule time with other residents in a physically distanced venue with face coverings.

III. SMALL GROUP PROGRAMS

Room set-ups:

- Place tape on the floor to mark six feet apart and place chairs appropriately

Parallel programming:

- Use spaces within spaces

TIP: Plan the activity, utilize a sign-up form, and stagger small groups.

IV. COMMUNICATION AND CONNECTION VIA TECHNOLOGY

Mobile phone:

- Using a mobile phone is the easiest way for residents to stay connected to friends and family. Residents can stay in touch with family and friends by dialing a number and hearing their voice.
- Encourage/help residents to set dates and times for frequent and regular calls. This will help with feeling a stronger sense of connection.

Video chats:

- Video chatting is a good option for helping residents to stay connected and see the faces of sons, daughters, grandchildren, cousins, and other people who are important to residents—including other residents.
- Apple's iPhone and iPad use FaceTime, a video chatting feature that allows users to see and hear other users. Android phones have comparable apps.
- Regularly scheduled communication can give residents something to look forward to and an opportunity to stay connected.
- Introduce new and continued stay residents using tablet-to-tablet connections from across the hall and throughout the community.

Other Technology:

- Residents may already be familiar with and enjoy using technology such as laptops or tablets (e.g., iPads) to connect with the entire family at the same time and/or play games. Applications such as WhatsApp, Skype, and Zoom can be used to keep residents connected to one another and entertained.
- For residents who have auditory issues, increase the volume, or use other amplifier devices.
- If residents are unaccustomed to technology, discuss with family, and assist with familiarization of the equipment and process.

Notes: One adjustment for residents with dementia is to use an old-school type of telephone to plug into the tablet so the resident can hold the phone while looking at the tablet. It can be confusing addressing tablets and understanding how a loved one can hear them.

Staff may need to support and assist residents with connecting and ending the connection if they are unfamiliar with these functions.

If a resident does not have a laptop or tablet, the resident or family member can help purchase one online and get the resident connected. A laptop or tablet can be a family communication device but can also be a doorway to many hours of exploration and cognitive engagement.

TIPS:

There are many books, puzzles, games, etc., available through apps, including many free options, as well as entertainment.

Examples include:

- [Virtual Pet Therapy - Live Cam](#)
- [National Geographic](#)
- [PBS Programming](#)
- [Best Garden Tours](#)
- [Best Virtual Field Trips](#)
- [Classical Concerts](#)

SMALL GROUP

Encourage residents to research historical figures using their laptop each day and discuss in a physically distanced group, such as during a happy hour

Start a safe group/small group and physically distanced book club

Offer sign-ups for scenic drives

IN ROOM

Play cards/bingo virtually via laptops. Games can be scheduled, with supplies delivered ahead of time and gifts won delivered afterward

Speak with other residents, friends, and family via laptop/smart phone

Play online games

Print out sudoku, crossword, word-finds etc., and deliver with each meal

V. EXERCISE

Encourage all residents to exercise. Having a routine exercise regimen is an important element for residents. Health benefits can include weight control, strengthening, mobility, a good night's sleep, mental health, the feel-good benefits of exercising, longevity, etc.

Exercise spaces:

On-site physical therapy can support residents with a work-out routine. When restrictions are easing, multiple groups can exercise simultaneously. Remember, any room can be an exercise room.

Safety components:

An exercise program would include safety components of:

- Scheduling, so disinfection can be performed after each program
- Spacing chairs used for exercise (at least six feet apart)
- Maintaining small class sizes to accommodate the spacing needed

Services in-room:

When residents are in quarantine, it is important to think about what services can come to them. Again, onsite physical therapy can support residents with an in-room exercise routine. If exercise equipment such as hand weights are shared, disinfection time should be allotted between residents.

Important components of a resident exercise regimen include:

- Strengthening exercises: 2-3 times each week
- Aerobic capacity: 2-3 times each week; 150 minutes of moderate intensity exercise
- Flexibility: All major muscle groups, twice a week, with 20- to-60 second holds
- Balance: At least 2 hours per week
- Cognitive functioning: Engage in cognitively stimulating activities and combine activity types

Exercise regimen components provided by [FOX Rehabilitation](#)

TIPS:

- Maximize the use of open-air spaces through social distancing. If outdoor space is limited, then set scheduled times so everyone can get some fresh air.
- Search [YouTube](#) for exercises such as yoga, tai-chi, etc. Also, consider GoNoodle – [Good Energy for Grown-ups](#) for additional ideas.

SMALL GROUP

Schedule small exercise classes in the community, with residents physically distanced

Hold walks outdoors in agreeable weather

Offer physical therapy-supported classes

IN ROOM

Schedule classes in which residents are provided with hand weights and strengthening bands

In-room exercise moves include:

- Repetitions of leg lifts, seated on the side of the bed
- Repetitions of sitting to standing from a chair
- Repetitions of arm muscle flexing in a seated position

Residents can access online classes to participate in a class or individual work-out routine online

VI. DINING AND NUTRITION

The dining experience offers the opportunity to have input into menu choices, a time to socialize with others and enjoy a delicious/nutritious meal. Creative food programming is necessary to prevent the unfortunate consequences of weight loss, decreased strength, loneliness, dehydration, etc.

Adjusting community dining:

When restrictions are eased, schedule dining times with seating six feet apart. Having a set time is reinforcing to residents and allows staff to disinfect tables, chairs, etc., between resident groups.

In-room dining:

In-room dining is just as important. Socialization opportunities include making menu selections, using a smart phone or laptop for video calls while dining, or through sitting by an open door to the hallway.

TIPS:

- It is important to be aware of nutritional intake during in room dining periods. Staff may have noticed in the dining room how much or little a resident is drinking or eating and may not be as aware due to the use of disposable plates, cups, and utensils.
- Offer assisted living and memory care residents hydration throughout the day at scheduled times to support hydration efforts. This can be a fun activity when interacting with residents, as it can be set to a theme or holiday. The following link offers a quick check for dehydration: [Dehydration Quick Check](#).
- There may be a “fear factor” among residents when restrictions are being eased. Extra time with residents is needed going through precautions and benefits.

SMALL GROUP

Hold theme nights with creative menus, such as “Italian Night,” with Italian food and table settings or décor. Residents should be seated six feet apart.

Happy hours should be physically distanced

IN ROOM

Hold theme nights with creative menus, such as “Italian Night,” with Italian food and table settings or décor. Doors may be left open to converse from a distance, door opening to door opening.

Schedule video conferencing or Zoom meetings with family or friends to share mealtime

Hold happy hours over Zoom, and include family and friends

At snack delivery between meals, use creative themes such as holidays and seasons, with themed snacks and delivery in costume

VII. SPIRITUAL

Religious services:

- There are many resources for spiritual activities online, including religious services available on the internet. YouTube can be a resource for these connections.
- Services may be available with one-on-one prayer and/or bible readings.
- Entire services with multiple attendees and voices are also available. This may be beneficial, as hearing multiple voices may ease the sense of being alone and promote the feeling of being in a group service.

Other support:

- If laptop or tablet services or use are not available, consider having families/staff print off passages, prayers, or meditations that support the resident's religious beliefs.

TIPS:

Spiritual resources can be obtained via many network sites as well as online classes by denominations. Examples include:

- [Our Daily Bread](#)
- [Come Pray the Rosary](#)
- [Thought for Today](#)

SMALL GROUP

Hold services with physically distanced seating

Share bible readings

IN ROOM

Residents can listen to spiritual music or do guided meditation

Yoga or tai chi can be practiced individually or via online classes

VIII. RESIDENT VISITATION WITH RESTRICTIONS

Please see [Argentum Guidance for Managing COVID-19 Restrictions](#), from the Argentum COVID-10 Toolkit for more information.

Keeping visits safer:

Work with your local health department and regulatory authorities for restricted visitation with residents as allowed.

Schedule visits:

Assist in the scheduling of visits and encourage resident families to visit in the times allotted. There are several online services that can assist with keeping families/visitors coming in to see their loved ones in coordination with the community. Some are free and some charge for services. Examples include:

- [SignUpGenious.com](#)
- [GettingOut.com](#)
- [Doodle.com](#)
- [Needtomeet.com](#)

RESOURCES

Argentum

[Argentum COVID-19 Publications](#)

[Argentum Coronavirus Toolkit](#)

[Guidance for Managing COVID-19 Restrictions](#)

Today – Story by A. Pawlowski regarding a YouTube video by Dr. Sarfaraz Munshi, Queens Hospital, London

[Breathing Techniques to help COVID-19 patients breathe better](#)

Kindly Care – Activities of Daily Living

[ADLs and IADLs: Complete Guide to Activities of Daily Living](#)

U.S. Centers for Disease Control and Prevention

[Alzheimer’s Disease and Healthy Aging: Loneliness and Social Isolation Linked to Serious Health Conditions](#)

The Conversation

[Video Chats Can Ease Social Isolation During the Coronavirus Pandemic \(April 14, 2020\)](#)

International Council on Active Aging

[COVID19 Resources](#)

LeadingAge

[Coronavirus Resources](#)

WebMD

[How to Handle Coronavirus Isolation and Anxiety](#)

Mental Health American

[Depression Test](#)

U.S. National Library of Medicine – National Institutes of Health

[Social Disconnection Among Older Adults Receiving Care in the Emergency Department \(West Journal of Emergency Medicine, November 19, 2018\)](#)

MindDiagnostics.org

[Mind Diagnostics Depression Scale](#)

[Find Out if You Have a Mental Health Issue](#)

Activity Connection Resource

[Activity Connection Programming Resource](#)

NCCAP

[COVID19 Activity Director Resources](#)



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