

OPERATIONAL GUIDE: Technology for Social Connection in Congregate Living Sites during COVID-19

The COVID-19 pandemic has led to necessary restrictions on visitors as well as physical distancing and isolation measures in congregate living sites. During this time, it is critical that residents are supported to maintain important social connections with family and friends. Alberta's congregate living sites are working closely with residents, families, and community volunteers to find creative solutions for staying connected. This guide describes how sites and care teams can implement technology-based communications tools to support resident social connections.

The Role of Care Teams

Supporting Residents and Families

- Sites may choose to develop schedules to help residents plan calls with family and friends, and to coordinate staff availability to support use of technology as needed.
- This [resource](#) can be shared with families for information on how to communicate with their loved ones using apps such as Skype, Facetime, or Zoom, as well as phone, text or email.
- Residents with a cognitive or physical impairment may need more support to connect with family and friends using technology. Staff should assist as needed with starting and ending calls, and facilitating conversations (e.g., with residents who are nonverbal) as required.
- Residents may find comfort in being able to review recordings of personal calls or messages, or to read personal e-mail messages from family and friends. Staff should assist as needed (e.g., as they read the e-mail, show the resident the picture of the family member who sent the message). This [resource](#) describes how to work with families to create iPad video messages for residents.

Staff Roles

- Sites and care teams should determine which staff are best able to support residents with use of technology (i.e., scheduling and making calls) based on staff mix and availability. While some sites may have recreation teams including recreation therapists and aides available to provide dedicated support, those with fewer staff may choose to share responsibility for supporting resident calls among the whole care team based on availability.

Community Volunteers

- Sites may choose to collaborate with their community volunteers to arrange virtual visits for residents who do not have family or friends to connect with.

Technology Requirements

Internet Access

- Where possible, sites should ensure that residents have access to Wi-Fi so they can connect personal technology devices such as smart phones, tablets and laptops to the internet.
- Where possible, a network port is recommended for laptops.

Devices

- Residents who have their own devices (e.g., smart phone, tablet, or laptop) should be supported to continue to use them.
- Families should be encouraged to provide a device for use by their loved one if they are able to do so.
- For residents who do not have their own devices and their families are unable to provide one, facilities should provide access to an internet connected device for use by residents for communication with family and friends (e.g., tablet, laptop or desktop computer).
 - When using a site-owned device to support resident social connection, sites must take steps to avoid potential information and privacy risks, such as:
 - Creation of a “dummy” IT account or use of a dedicated device configured only for resident social connection purposes (i.e., that is unable to access any resident or other sensitive information).
 - Staff IT accounts and assigned devices should not be used for resident social connection unless the staff member whose account or device is being used is present for the entire call.

Infection Prevention and Control (IPC)

- Sites should follow the Alberta Health Services (AHS) [IPC guidelines](#) for cleaning and disinfection of electronic devices. For resident-owned devices, sites should follow the guidance for devices used in a patient’s room.
- The current AHS COVID-19 [guidelines](#) for hand hygiene, use of personal protective equipment (PPE), physical distancing and isolation in congregate living sites should be maintained when residents are using devices.
- Residents who must isolate in their room or limited area due to being symptomatic or positive for COVID-19 should still be supported to use technology to communicate with family and friends if they wish. Staff should continue to follow the current AHS COVID-19 [guidelines](#) for COVID-19 in congregated living sites when supporting these residents with making calls.

Privacy and Consent

- Capturing sounds or images of other residents during video and/or audio calls should be avoided.
- Residents and families may choose to share streaming or recorded video and/or audio of their personal visits on social media.
- Sites should ensure that any other individuals (e.g., other residents, staff) captured in a live-stream or recording provides written consent prior to any sharing on social media or other websites.
 - AHS form 18273 [Consent to Collect, Use and Disclose Stories, Photos and/or Video and Sound Recordings](#) or equivalent should be used.
- Recorded video and/or audio messages stored on site-owned devices for resident personal use must be confidentially and securely stored (e.g., protected with a strong password and computer security system). The recording should be deleted when no longer needed for this purpose.
 - When staff are assisting a resident with a personal call, they may help with recording and storing the message if requested by the resident or family.
 - If a site-owned device is used to record or store a message for a resident, the site should ensure that individual in the recording provides written consent using AHS form 18273 [Consent to Collect, Use and Disclose Stories, Photos and/or Video and Sound Recordings](#) or equivalent. (This may be collected via email, fax, or mail).
 - The written consent should be retained as long as the recording is stored by the site.
 - If a resident-owned device is used, no consent is required.