

Guidance on Physical Distancing in Long-term Care and Assisted Living Facilities

Overview

Physical distancing (previously referred to as social distancing) is an important strategy in combatting the COVID-19 Pandemic. This strategy has been promoted widely in society and it has great relevance for long-term care (LTC) and assisted living (AL) facilities also. This reference document will provide an overview of physical distancing in LTC and AL settings, with a matrix of options provided.

Transmission of COVID-19

COVID-19 is transmitted through droplets (**DROPLET TRANSMISSION**) expelled through the nose and mouth when people talk, sneeze and cough. In people infected with COVID-19 these droplets contain large numbers of viral particles that can infect others when they are inhaled or come into contact with the eyes. These droplets typically travel about a meter from the source, but can sometimes travel a bit further. (**CONTACT TRANSMISSION**) The virus can also be transmitted through touching surfaces or people contaminated by droplets containing the virus and then touching mucous membranes found in the mouth, nose and eyes. Where surfaces or people are contaminated, the virus can remain viable and capable of transmission for varying amounts of time, from hours to days.

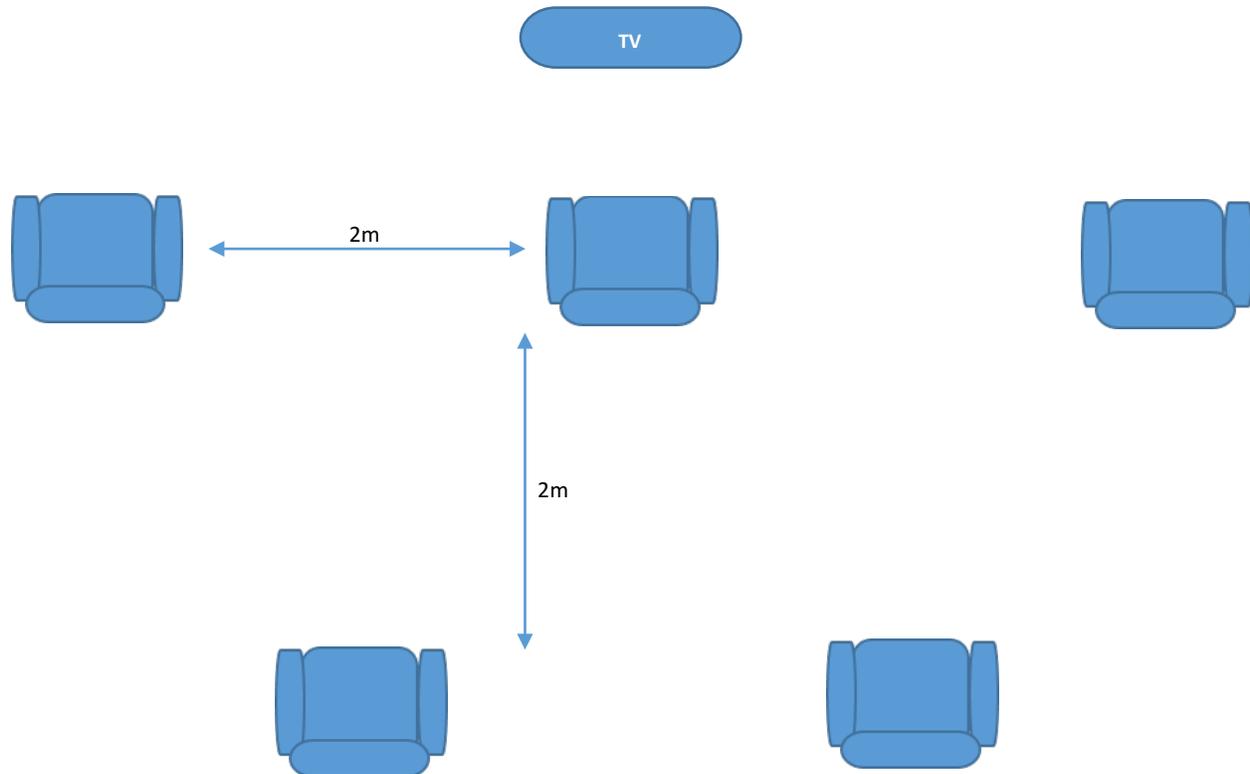
Principles of Physical Distancing

Given that most people expel droplets, on average, about a meter from their mouth or nose, it is recommended that people should remain separated by 2 or more meters, in order to avoid droplet transmission. In order to accomplish this in LTC / AL facilities, considerations should be given to the following:

- **Common areas:** Where possible sofas should be avoided, as they encourage residents to be seated in close proximity. Seating should ideally be individual chairs, and they should be separated by a minimum of 1 meter apart (least ideal) to 2 meters apart (most ideal). Furniture should be arranged so that residents are not facing each other, if not separated by at least 2 meters.
- **Shared activity areas:** Attention should be given to spacing in these areas, in addition to objects that might be shared (e.g. board games and instruments). Shared activities in the same space, with shared objects should be avoided, if not suspended (most ideal). If this is not possible, residents and staff should be encouraged to perform hand hygiene before, during and after activities, with adequate spacing between residents at all time (least ideal).
- **TV / media lounge:** Where possible, sofas should be removed from media areas. Seats should be arranged in theatre style (see diagram A), with attention to maximum spacing between the chairs (ideally 2 meters on the sides and front and back).
- **Outdoor smoking areas:** Consider areas outside the facility where residents might congregate unsupervised. Look for communal seating areas (e.g. benches) and consider removing or replacing (e.g. with chairs) these. Also ensure that these congregate settings receive enhanced hygiene to reduce any viral contamination throughout the day.
- **Meal time / dining rooms:** For many care facilities meal service can pose some of the most significant challenges. Ideally residents should be seated 2 or more meters apart and not across from each other. In many LTC/AL settings this can result in one resident per table, which can pose logistical challenges, particularly in the face of staffing shortages. If appropriate spacing is not possible, consider tray service for those residents who can tolerate this option. Also consider providing meals in shifts, with appropriate environmental sanitizing between residents.

There is no perfect strategy for all facilities across our region. LTC/AL facilities are encouraged to look at the principles contained in this document and consider how they might be adapted to facility and staffing realities. If additional support is required you can contact the Response Coordination Group for COVID-19 Infection Prevention & Control by emailing: ltceoc@vch.ca.

Diagram A: Theatre-style seating for TV/media areas



Note: These are recommended spacing guidelines for the separation of chairs, which might not be achievable in all care environments. Try to maximize the distance between chairs, where possible. Consider removing chairs and reducing seating capacity to achieve this. The staggered seating design (above) will also help to maximize the distance between residents.