People age 65 and older are at a higher risk of severe illness from COVID-19. Plans for social distancing and isolation are in place to protect the health and safety of all Minnesotans, including those living in congregate care. This is important as community transmission of the virus continues. COVID-19 and the response to it is straining the mental health and well-being of people living in all congregate living situations, their families and friends, and staff who care for them.

This is a brief list of suggested action steps and resources for seniors, their families and friends, and facility staff to consider helping manage the mental stress from long-term isolation and quarantine. While these do not replace the opportunity to be with loved ones in person, there are steps that can help support them.

Communicating with your loved one

- Be positive and calm. You may be feeling anxious, but it is important not to make them feel anxious. What they need most is for you to support them right now.
- Don’t share frightening statistics or predictions.
- Avoid arguing about the situation. Simply acknowledge the person’s concern and emotion sincerely.
- Keep your tone as light as possible.
- Remind them how resilient they are! What has your loved one gone through in their lifetime? Remind them that this situation will pass and that they are strong. Help them think about how they overcame other difficult life experiences.
- Share positive stories. Talk about inspiring and hopeful things in your life or the world.
Reassure your loved one and tell them what they mean to you. Offer specifics about how you feel.

Distract from worry with an activity. Ask for help they can provide, such as making suggestions for a gift for someone or remembering a past family experience, or do something that would be pleasant.

Try not to make promises you can’t keep, especially about when you will visit next.

**Tips for family and friends**

**Tips that include use of technology**

- Call or video conference with your loved one as frequently as you can. Also, consider your loved one’s stamina and comfort level with the communication method you use.

- Virtual time together can be passive, too. Knowing that you are there can be helpful. Spend time virtually with activities you would do together such as watching TV, reading the newspaper, or listening to their favorite music.

- Enjoy a virtual meal together. Community meals have ceased in most facilities. Connecting during mealtime may be a great opportunity to help your loved one feel less lonely.

- Consider topics to discuss or do in advance if conversation wanes. Discuss a favorite book or TV show, or updates about family members.

- Engage everyone in your loved one’s network, including children and people who may not have made contact lately. Create a schedule to keep up visits. Our brains want novelty, so connecting with new people can help keep people interested and engaged. Set up a phone or video conference with a small friend community.

- Connect your loved one to their faith community’s virtual offerings. Reach out to the faith community to see if someone is calling members. If so, make sure they have correct contact information for your loved one.

- Set up virtual telehealth appointments if necessary.

- Talk with staff at the facility to clarify what you can expect regarding communication about and with your loved one. The staff may be able to help your loved one set up a video communication.

**Tips that do not include use of technology**

- Encourage your loved one to avoid focusing too much on COVID-19 news, especially if they are experiencing a lot of anxiety. When watching the news, focus on the helpers and positive stories that highlight our community resilience and generous spirits.

- Provide a care package and resources for activities that your loved ones enjoy. For example, books, yarn, puzzles, crosswords, games, grownup coloring books, paints, stress
balls, music, favorite foods, movies, cards, plants, craft kits. Check facility rules about packages.

- Promote gratitude. Start a “gratitude practice” with your loved one. Identifying what you are grateful for each day can reduce symptoms of depression. Commit to sharing a few things with each other every day, especially little things like the softness of your blanket, a good cup of coffee, or a phone call.

- Send mail. Include children’s art or other pictures. Engage your network and community members to send letters and cards.

- Helping others helps us cope and thrive. Share ideas and information with staff about skills and interests your loved one may be able to use to help others. If you, family, or friends have needs that your loved one can fill, help support that connection.

- Stress can add up. Help to address other worries that your loved one may be thinking about (e.g. financial, health, family).

- Support the well-being of the staff who support your loved one. Send them encouragement and gratitude for the work they are doing.

- Contact the Senior LinkAge Line to find out about caregiver consultant resources that might be available to you, such as respite care providers or caregiver support groups, at 1-800-333-2433.

**Guidance for staff in congregate living settings for seniors**

- Implement virtual office hours when families can call in and staff can share the status of activities or happenings in the facility. This could include conference calls or webinars at set times when families can call in.
  - Allow the same staff to work with residents as much as possible. This helps residents and families build relationships, trust, and sense of safety, which is critical for mental health and well-being normally, but especially during a traumatic experience like a pandemic.

- Assign staff as a main contact to families for inbound calls, and conducting regular outbound calls to keep families up to date (e.g., a “virtual visitation coordinator”).

- Facilitate alternatives for in-person visits, with an emphasis on virtual communications.

- Help residents communicate with their friends and family. Staff can read emails from the family to the resident, help residents send letters, emails or text messages with photos to their family, and help residents talk on the phone or video chat with family.

- Encourage families and residents to suggest ideas that can help keep residents connected to friends and loved ones.
Communicate regularly with families about COVID-19 related issues, including cases in the facility, and information about what is happening in their loved one’s environment, such as food menus and activities residents can do while still social distancing. Update the facility’s website and create or increase email listserv communications to inform families. Offer a phone line with a voice recording updated at set times (e.g., daily) with the facility’s general operating status, such as times when it is safe to resume visits.

Nature is a natural stress buffer. For those whom it is allowed, facilitate and support visits to an outside space daily or as frequently as possible. CDC guidance advises limited time out of rooms, but it does not prohibit all movement and outside time for residents who are asymptomatic.

Even pictures of nature can be calming. Bring in plants and pictures of nature into residents living quarters if the resident is willing.

Post a list of resources that residents need to support their mental well-being for the larger community to help, such as technology, care package supplies, plants and cards. This may be especially important for those who do not have family or friends.

Work with faith communities or other organizations to share words of encouragement for residents. Include this on the list of needs. Ask residents if they want to participate and if they want to share first names.

Helping others is fulfilling and can provide a sense of purpose and meaning. Connect residents to programs where they can contribute, such as in the fight against COVID-19. Ask residents and their families about what their skills or interests might be to help. Can they lead a virtual book club or faith group? Other examples may include sewing masks, mentoring or reading to a child, playing an instrument for the other residents to hear, talking with children while their parents are working from home, or sharing stories of recovery or overcoming with those in recovery from serious illness or substance abuse. Connect residents to mentoring programs or support groups so that they can provide those supports. Invite their family to consider opportunities within their family.

Set up a buddy system among residents. If residents can call each other or connect while social distancing, pair residents up to check on each other and offer support regularly.

Connect residents to their faith community’s virtual offerings that may be available.


Residents experiencing significant distress or history of mental illness

If the person is experiencing increasing mental health concerns, including anxiety or depression, or if the person has a mental illness or a history of mental illness, refer to the Support for People with Mental Illness Who Are Sick with COVID-19 (https://www.health.state.mn.us/docs/communities/mentalhealth/covidsupportmi.pdf) tip sheet, which includes more resources and contacts for those with mental illness.
Other Resources

- Senior Linkage Line: 1-800-333-2433, Monday-Friday 8:00 a.m.-4:30 p.m.
- Minnesota Board on Aging (https://mn.gov/board-on-aging/connect-to-services/family-caregiving/)
- Office of Ombudsman for Long-Term Care (https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4732-ENG)
- Social Isolation and well-being for Caregivers During COVID-19 Webinar - 60 minutes (https://www.youtube.com/watch?v=vSd_dhmnZzA)
- Best Meditation Techniques for Seniors (https://mindworks.org/blog/best-meditation-techniques-seniors/)
- Long Term Care: COVID-19 Guidance and Resources (https://www.health.state.mn.us/diseases/coronavirus/hcp/ltc.html)