

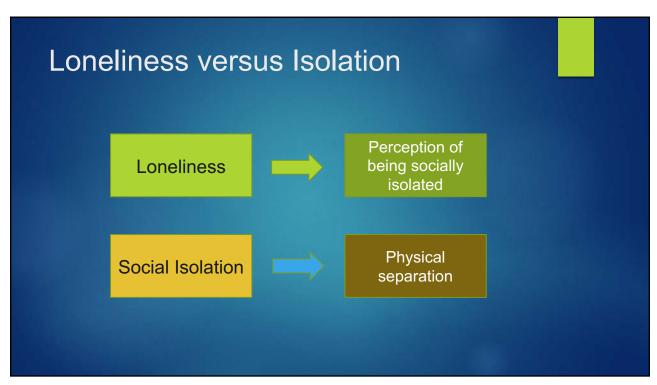


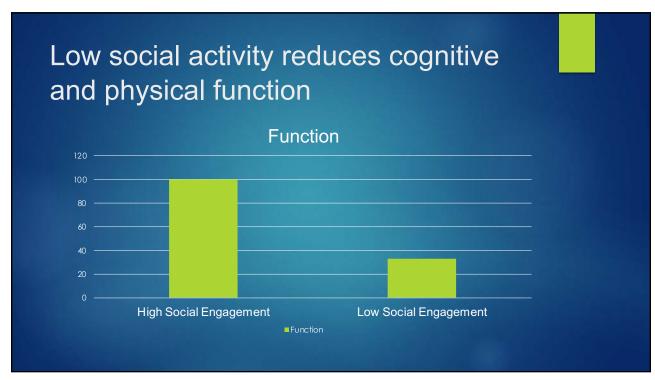




What do we know about social isolation and loneliness in older adults?

• Older adults are highly vulnerable to social isolation





Loneliness associated with physiological and health changes

- Depression
- ▶ Cognitive impairment
- ▶ Premature death
- Cardiovascular disease
- ► Altered immune system
- ▶ Cancer

	NEVER 1	RARELY 2	SOMETIMES 3	ALWAYS 4
*1. How often do you feel that you are "in tune" with the people around you?				
2. How often do you feel that you lack companionship?				
3. How often do you feel that there is no one you can turn to?				
4. How often do you feel alone?				
*5. How often do you feel part of a group of friends?				
*6. How often do you feel that you have a lot in common with the people around you?				
7. How often do you feel that you are no longer close to anyone?				
How often do you feel that your interests and ideas are not shared by those around you?				
"9. How often do you feel outgoing and friendly?				
*10. How often do you feel close to people?				
11. How often do you feel left out?				
12. How often do you feel that your relationships with others are not meaningful?				
13. How often do you feel that no one really knows you well?				
14. How often do you feel isolated from others?				
*15. How often do you feel you can find companionship when you want it?				
*16. How often do you feel that there are people who really understand you?				
17. How often do you feel shy?				
How often do you feel that people are around you but not with you?				
*19. How often do you feel that there are people you can talk to?				
170 May alter de unu feel that there are posses unu one time				

Scoring: Items that are asterished should be reversed (i.e., 1 4, 2 3, 3 2, 4 1), and the scores for each item then summed together. Higher scores indicate greater degrees of loneliness. From Russell DW; UCLA Loneliness Scale (Version 3) refainling, validing, and factor structure. Press Asses (60-44), 1996.

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UCLA Loneliness Scale

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By contrast.....high socialization enhances exceptional longevity



Families continue to be the mainstay of long term care and social support.

Four support categories:

- ▶ Emotional support
- ▶ Instrumental support
- ▶ Informational support
- ▶ Financial support



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Emotional Support

- Empathy
- Caring
- ▶ Love
- ▶ Concern



Instrumental Support

- Helping with rehab (for example, bedside range of motion)
- ► Arranging for hair salon
- Supplying personal items, pictures
- ► Reminiscence therapy



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Information Support



- Manage wealth and property
- Decision making support
- Arbitrate WHAT MATTERS

Financial Support

- ▶ Wealth transfer between generations
- ▶ Insurance claims (VA, Medicare, Private Pay)





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Some risk with instrumental support (e.g., feeding or transfer assistance)

- ► Feelings of helplessness
- ▶ Perception of low autonomy
- ► Reduced self efficacy
- ▶ Loss of control



Adult children of older adults

- ▶ Sons: focus on mobility / environment
- Daughters: focus on social well being and provide advice
- ► Adult children are less likely to engage divorced parents, especially the father
- Older adults with multiple children receive more attention.

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Example of a Boston SNF promoting social interactions of residents with family



Window Visits !!!

In CHAT BOX

- List your facility's innovative solution for promoting family encounters during quarantine.
- ► For example, using walkie talkie app for window visits.

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In CHAT BOX

► List any interesting moments, barriers or successes with Virtual Visits



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Outdoor visits

- ► Staggered, scheduled visits for 15 30 minutes
- ▶ Pre screening
- ► Disinfect area and air circulation



Indoor visits

- ▶ Visit room
- Symptom / temp screen
- Separate log for visitation room for contact tracing
- Spaced, scheduled visits
- Disinfect



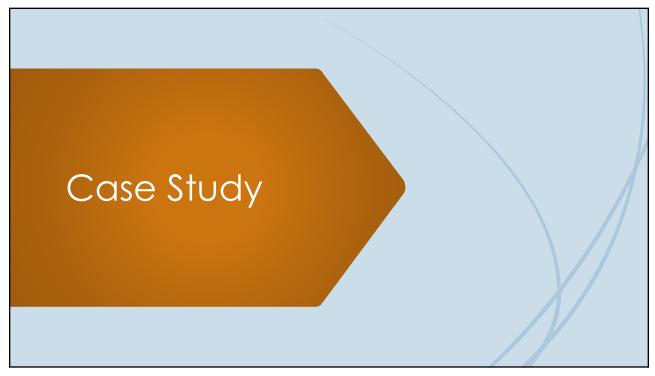
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Indoor visits

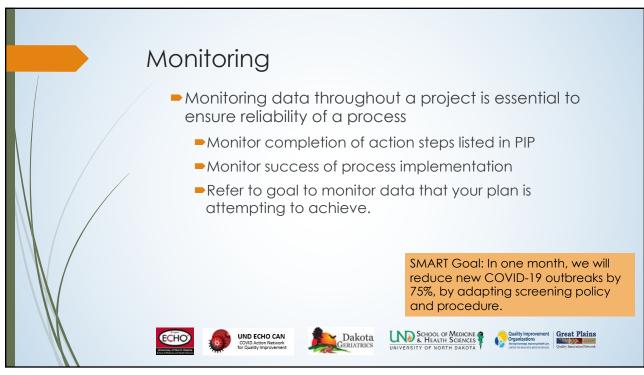
 Staff supervision, especially with cognitively impaired residents

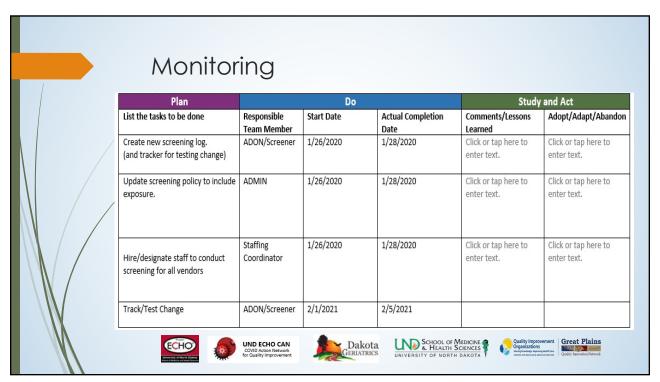


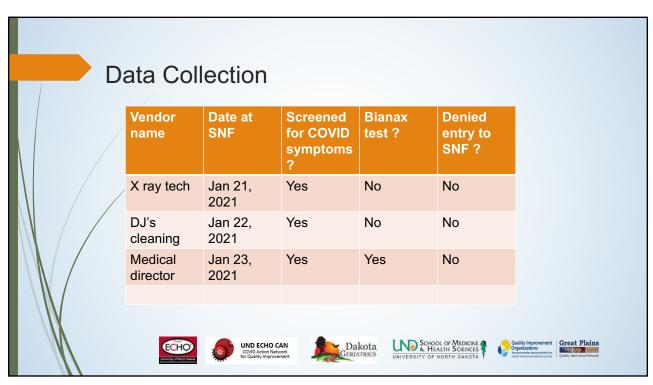
CMS QSO-20-39-NH — September 17, 2020 Supersedes and replaces previously issued guidance and recommendations regarding visitation • CMS is committed to continuing to take critical steps to ensure America's healthcare facilities are prepared to respond to the Coronavirus Disease of 2019 (COVID-19) Public Health Emergency (PHE) • Visitation Guidance: CMS issued new guidance for visitation in nursing homes during the COVID-19 PHE. The guidance provides reasonable ways a nursing home can safely facilitate in-person visitation to address the psychosocial needs of residents • Use of Civil Money Penalty (CMP) Funds: CMS approves of the use of CMP Funds to purchase tents for outdoor visitation and/or clear dividers (e.g. Plexiglass or similar products) to create physical barriers to reduce the risk of transmission during in-person visits.

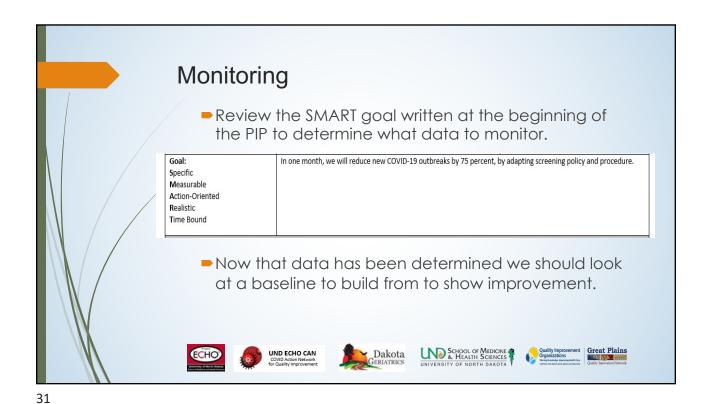












Monitoring <u>Third</u> Baseline Benchmarks/metrics Final First Second Comments 1/29/2021 (total [how will we measure Measurement 2/26/2021 Measurement Measurement Measurement progress?] number from Jan) 2/5/2021 2/12/2021 2/19/2021 (week/month) (week) (week) (week) Actual number of Click or tap here to enter text. Click or tap Click or tap here Click or tap here vendors denied access here to enter to enter text. to facility per week text. Click or tap Click or tap here Click or tap here Actual number of new here to enter to enter text. to enter text. cases per week. text. SMART Goal: In one month, we will reduce new COVID-19 outbreaks by 75%, by adapting screening policy and procedure. SCHOOL OF MEDICINE & HEALTH SCIENCES UNIVERSITY OF NORTH DAKOTA UND ECHO CAN ECHO









