

COVID-19 Design of Long-Term Care (LTC) Homes: Learning for the Future

**Staff Member Photo Diary** Guide







## about this booklet

Before taking photos of your work environment, we thought it might be useful for you to have a guide. The first thing to keep in mind when taking photos is to try your best to avoid having staff, residents and/or family members in the photos. But if they do appear in your photo, we will deidentify them by blurring their faces, so rest assured our team will take care of making sure people remain anonymous.

To help you track your photos, take a photo of the room number/room name first, followed by photos of that space. For hallways, take a picture of the nearest room number. We will be locating these photos on architectural floor plans to visualize your current state under pandemic conditions.

We've developed prompts and questions below to help you think about the general and more detailed features of your environment, conditions that may have changed due to the pandemic, that may work well or not so well to support you, your colleagues and/or residents under COVID-19 measures. Sometimes we may take such conditions at face value and assume they can't change. By analyzing the environment in detail, opportunities for improvement or innovation, small or large, may emerge.

You are welcome to take notes in this guide prior to taking photos of your Long Term Care home for the Photo Diary if this is helpful. After reviewing your photos, we may ask you to explain or elaborate on the photos and your short descriptions about the photos in the follow-up Interview about the Photo Diary. We may have additional questions that emerge as our understanding of your home condition and the potential for design interventions improves.

You may not be able to answer some or many of these questions with your photos and notes, and that's fine. These questions may not apply to your home. They were developed to just get you thinking about the impact *your home's design may have on working and living with infection prevention and control measures in place*.



Our research assistants will assist you to upload your files to our secure server. We will give you a spread sheet to add a short description of each photo. For example, if you are taking pictures with your phone, the photo will likely be a .jpeg file, so your table may look something like this:

Photo Number* *number from your camera	Short Description* Examples: description of room, process, work arounds, IPAC concern, etc.
1234.jpeg	Room 2890 dining room - overall room layout
1235.jpeg	Room 2890 dining room - physical separation of tables
1236.jpeg	Room 3267 2 bedroom - overall room layout
1237.jpeg	Room 3267 2 bedroom – hand sanitizer next to bedside
1238.jpeg	Room 3267 2 bedroom – shared washroom, counter design, manual faucet, concern with cleaning in between resident use
1239.jpeg	Hallway beside Room 3267 – PPE carts in hallway
1240.jpeg	Main Entrance – screening area
1241.jpeg	Dining Room (room number if available or 'ground level', or 'unit number', etc.) - spacing of tables, acrylic barriers on tables

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# 1.0 General characteristics about your home

What are some general design features of your home and how are they used under different pandemic conditions?

Some areas and questions to think about...

- 1.1 What is the style of resident rooms?
- number of beds per room?
- shared washrooms?
- general layout of room types?
- 1.2 What types of shared resident areas (dining, activity, spiritual) are used...
- during COVID-19, but no outbreak?
- during COVID-19, during an outbreak?
- 1.3 What types of shared worker spaces are used...
- during COVID-19, but no outbreak?
- during COVID-19, during an outbreak?
- 1.4 Are there aspects of the general design that work well during COVID-19?

1.5 Have you experienced or do your see work-arounds, temporary fixes or potential issues that were not/are still not easy to address?

## 2.0 Coming and going - entrance and exit experience in the home

What is the design of your entrance like and how does it work?

#### Some areas and questions to think about...

2.1 How is your entrance or are your entrances used...

- during COVID-19, but with no outbreak?
- during COVID-19, with an outbreak declared?
- 2.2 Are there aspects of the entrance design that work well during COVID-19?

2.3 Have you experienced or do your see work-arounds/temporary fixes or potential issues that can't be easily addressed?

2.4 When you and your colleagues are done your shift, where and how do you prepare to go home? What do you do with your shift clothes? Your personal items (lunch box)? Is there potential for showering and changing before going home?

## 3.0 Hand hygiene products and placement

What types of hand hygiene products are used, where and how?

#### Some areas and questions to think about...

3.1 Are there dedicated hand hygiene sinks (not utility or resident sinks) and if so where are some typical locations? How are they used?

3.2 Where are typical and atypical areas for hand sanitizer pumps?

3.3 Where are hand hygiene products relative to resident spaces/point-of-care? Does this make sense to you with regards to resident interactions?

3.4 Where are hand hygiene products relative to working areas (outside resident-specific areas)? Does this make sense to you with regards to workflow?

3.5 Where are hand hygiene products relative to staff rest areas? Does this make sense to you with regards to break time behaviours and activities?

3.6 Are there aspects of hand hygiene design that work well during COVID-19?

3.7 Have you experienced or do your see work-arounds/temporary fixes or potential issues that can't be easily addressed?

# **4.0 Personal Protective Equipment** (PPE)

How is PPE used/not used during COVID-19?

#### Some areas, processes and questions to think about...

4.1 Where is PPE stored and how is it distributed to staff?

4.2 At what points is PPE changed during a shift?

4.3 Where does the change of PPE happen and what is the environmental set up for donning (putting it on) and doffing (taking it off)?

4.4 Are there activities and areas where PPE is perhaps not worn when it should be or challenging to wear (assisting residents, tasks outside resident assistance, work outside, staff eating/taking a break, etc.)?

## 5.0 Equipment and devices

## Is there equipment that you have had to 'reconsider' how you use, clean, etc. during COVID-19?

#### Some items and questions to think about...

5.1 What permanent work-related equipment or devices were considered to better support IPAC during COVID-19 and where are they located (e.g., lifts, nurse call, therapeutic tubs)?

5.2 What mobile/movable staff or residential equipment or devices were considered (e.g., personal medical equipment, walkers, wheelchairs, handheld devices)?

## 6.0 Custom-built items and furniture

Have you had to reconsider custom-built items and furniture under COVID-19 and if so how (use, cleaning, etc.)?

#### Some features and questions to think about...

6.1 What types of custom-built things or areas have you had to consider during COVID-19 (washrooms, tub/shower/spa rooms, workspaces, kitchens/nutrition areas, soiled/clean areas, laundry areas, etc.)?

6.2 What aspects of furniture have you had to consider (design of beds, chairs, tables, desks/work areas, etc.)?

## 7.0 Supplies and medication

#### Have you had to reconsider supply use during COVID-19 and if so how?

#### Some areas and questions to think about...

- 7.1 Impact on the use cycle/workflow of medical supplies (e.g., sterile supplies)?
- 7.2 Impact on the use cycle/workflow of non-medical supplies (e.g., linens)?
- 7.3 Impact on the use cycle/workflow of medication?
- 7.4 How has the workflow and treatment of resident mail/packages been impacted?
- 7.5 Has there been an impact on staff use of shared general work supplies?

## 8.0 Food preparation and service

#### How has food service/meal or break times changed during COVID-19?

#### Some areas and questions to think about...

- 8.1 Impact in dining spaces?
- 8.2 Impact in resident rooms?

8.3 How have staff breaks and eating areas been affected (e.g., zoning, mask use in these areas?)

## 9.0 Cleaning and disinfection

#### How have cleaning and disinfection processes changed during COVID-19?

#### Some questions to think about...

- 9.1 What spaces are high priority and how are they cleaned?
- 9.2 What are low priority and why?
- 9.3 What are the challenges with cleaning the environment or objects/elements/ features within the environment?

### **10.0 Layout and the larger physical environment**

Are there aspects of the home layout and environmental conditions that are important to note and discuss within the context of COVID-19?

#### Some areas and questions to think about...

- 1. Aspects of the resident's personal space?
- 2. Aspects of the resident's shared spaces?
- 3. Interactions that occur within personal/residential spaces?
- 4. Interactions that occur within shared spaces?
- 5. How do people (staff, contract workers, residents, family members) cohort and move through the home and maintain physical distancing across cohorts?
- 6. General environmental conditions you may want to discuss (e.g., air quality, lighting, thermal, crowding, traffic, conditions)?

## **11.0 Staff workflow and experience**

#### Your daily life...

You may wish to document through photos and notes your daily work routine during COVID-19 to share what a day-in-the-life yours and your colleagues work routines in a specific job role. Feel free to do this through steps in your workflow or through striking or challenging tasks in your routine. This may include physical/functional, social, cognitive (e.g., memory, learning, comprehension), emotional considerations you feel may be related to the design, etc.

## 12.0 Resident daily living and experience

The daily life of residents...

Although you are not a resident, you have been spending your days with residents and naturally, may have insight into their daily experiences. Feel free to document aspects of the environment that may impact their daily experience during COVID-19. This may include physical/functional, social, cognitive (e.g., memory, learning, comprehension), emotional considerations related to the design.

## **13.0 Anything we've missed?**

#### Is there anything else you want share?

Are there other things outside what we have mentioned here that you think are worth documenting in your photo diary, things that may impact how we rethink the design of Long-Term Care homes?

Thank you for taking your valuable time to help us with this study. If you have questions, please don't hesitate to contact us.

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