

Coronavirus Disease 2019 (COVID-19)

MENU >



Living in Shared Housing

Updated July 30, 2020

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Shared or congregate housing includes apartments, condominiums, student or faculty housing, national and state park staff housing, transitional housing, and domestic violence and abuse shelters.

Shared housing residents often gather together closely for social, leisure, and recreational activities, shared dining, laundry facilities, stairwells, and elevators and may have challenges with [social distancing](#) to prevent the spread of COVID-19.



Protect yourself

- [Social distance](#) by staying at least 6 feet apart from others that you do not live with.
- CDC recommends that people wear masks in public settings when around people who don't live in your household, especially when other [social distancing](#) measures are difficult to maintain.
- Seek out a “buddy” in the facility who will check on you and make sure you are getting basic necessities, including food and household essentials.
- **Everyday preventative actions everyone should take.**



People at-risk

- Keep up-to-date lists of medical conditions and medications, and periodically check to ensure you have a sufficient supply of your prescription and over-the-counter medications.
- Contact your healthcare provider to ask about getting extra necessary medications to have on hand for a longer period of time, or to consider using a mail-order option for medications.
- Be aware of serious symptoms of if you have underlying conditions, of [COVID-19](#) symptoms, and know who to ask for help or when to call 911.
- **Extra steps to take if you are at-risk.**



Know where to get information

- Make sure you know how your facility is going to communicate COVID-19 information to you; email, websites, hotlines, automated text messaging, newsletters, and flyers to help communicate information on.



The facility

- COVID-19 prevention supplies should be provided in common areas, such as soap, alcohol-based hand sanitizers that contain at least 60% alcohol, tissues, trash baskets, and, if possible, [masks](#) that are washed or discarded after each use.
- Non-essential volunteers and visitors in shared areas should be limited or avoided.
- Staff should avoid entering residents' rooms or living quarters unless it is necessary. Staff should use virtual communications and check ins (phone or video chat), as appropriate.

Common spaces

Be flexible, rules may change in common areas. Maintain 6 feet of [social \(physical\) distance](#) between yourself and everyone that you do not live with. This may mean there will be alternatives to activities, cancelled activities, or closed areas. If you see people in areas that are small, like stairwells and elevators, consider going one at a time. Here are some examples of how the rules in common spaces may change:



Shared kitchens, dining rooms, laundry rooms, bathrooms

- Access should be available, but the number of people should be restricted so that everyone can stay at least 6 feet apart from one another.
- People who are sick, their roommates, and those who have higher risk of severe illness from COVID-19 should eat or be fed in their room, if possible.
- Do not share dishes, drinking glasses, cups, or eating utensils. Non-disposable food service items used should be handled with gloves and washed with dish soap and hot water or in a dishwasher.
- [Guidelines for doing laundry](#) such as washing instructions and handling of dirty laundry should be posted.
- Sinks could be an infection source and should avoid placing toothbrushes directly on counter surfaces. Totes can be used for personal items so they do not touch the bathroom countertop.



Recreational areas such as activity rooms, exercise rooms, pools, and hot tubs

- Consider closing or restricting the number of people allowed in at one time to ensure everyone can stay at least 6 feet apart, except for essential activities only, such as water therapy.

If a resident has or thinks they have COVID-19



Administrators

Residents are not required to notify administrators if they think they may or have a confirmed case of COVID-19. If administrators do receive information that someone in your facility has COVID-19, they should work with the [local health department](#) to notify anyone in the building who may have been exposed (had close contact with the sick person) while maintaining the confidentiality of the sick person as required by the Americans with Disabilities Act (ADA) and, if applicable, the Health Insurance Portability and Accountability Act (HIPAA).

- If possible, designate a separate bathroom for residents with COVID-19 symptoms.
 - Consider reducing cleaning frequency in bedrooms and bathrooms dedicated to persons with COVID-19 symptoms to as-needed cleaning (e.g., soiled items and surfaces) to avoid unnecessary contact with the ill persons.
- [Full guidance for administrator guidance](#)



Sick person and close contacts

The sick person, their roommates, and close contacts need to self-isolate – limit their use of shared spaces as much as possible. They should:

- Wear a [mask](#) when it is necessary to be in shared spaces.
- Avoid using public transportation, ride-sharing, or taxis.
- [What to do if you are sick](#)

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Content source: [National Center for Immunization and Respiratory Diseases \(NCIRD\), Division of Viral Diseases](#)