Interim Guidance about Coronavirus Disease (COVID-19) for Hotels Workers in the Caribbean

March 17, 2020

This document provides information on the COVID-19 for hotels workers in the Caribbean. This information is based on currently available scientific evidence and expert opinion and is subject to change as new information becomes available. It should be read in conjunction with relevant national legislation, regulations and policies. This document has been adapted for the Caribbean situation, and therefore may differ from guidance developed by other agencies.

Key Points

- There is an outbreak of pneumonia caused by a new coronavirus, which is a family of viruses that includes the common cold, named COVID-19. The outbreak started in Wuhan, China and has spread to over 100 countries.
- Person-to-person spread is occurring in multiple countries, increasing the risk of international spread by travellers.
- The immediate health risk from COVID-19 to the general public in the Caribbean is very high as sustained community transmission has been reported in countries with direct flights to Member States.
- Travel warnings have been issued by the US Center for Diseases Control (CDC)
- Many Caribbean countries have issued travel restrictions for countries with sustained community transmission
- Travellers to Caribbean countries may be asked questions about their health and travel history upon arrival and may be quarantined by port authorities when they arrive.
- This notice will be updated as more information becomes available on the outbreak.

Background

On 11 March 2020, the Director-General of the World Health Organization (WHO) declared the outbreak of a novel coronavirus, COVID-19 as Pandemic. Whilst most cases are from China, in just two months the virus has rapidly spread to over 100 countries. The International Health Regulations ’ Emergency Committee is not recommending trade or travel restrictions at this time. The US CDC has issued travel advisories in countries where there is demonstrated sustained transmission.

To date, even though a few imported cases have been reported from some Caribbean countries, the rapidly evolving situation now requires a shift in mindset in all countries from preparedness to readiness and rapid response. CARPHA has upgraded the risk of disease transmission to the Caribbean Region to Very High. The revised risk level is based on international risk assessment guidelines, particularly in keeping with MERS-COV and pandemic influenza and since multiple countries outside the epicentre of the outbreak have reported secondary cases from imported
cases, including an increasing number of countries reporting sustained community transmission and sustained transmission of disease in countries with direct flights into the Caribbean Region, and reports of confirmed cases in at least two countries in the Caribbean sub-region.

**What is the COVID-19?**

The virus belongs in the same family of coronaviruses as Severe Acute Respiratory Syndrome (SARS), 2002/03 outbreak (Reuters, CDC) and Middle East Respiratory Syndrome (MERS-CoV), 2012 outbreak. This 2019 virus is a new strain of coronavirus that has not been previously identified in humans. The cases in the Wuhan pneumonia outbreak have tested negative for both SARS and MERS-CoV. 1, 2

**What are common signs and symptoms of infection?**

A person infected may have the following symptoms:

- Fever
- Shortness of breath
- Cough
- breathing difficulties
- Other flu like symptoms
- more severe cases: pneumonia, severe acute respiratory syndrome, kidney failure and even death

**How is it transmitted?**

The source of the outbreak is yet to be identified. Person-to-person transmission has been demonstrated in many countries. Precautions must therefore be taken to prevent human-to-human transmission of the disease. Currently, COVID-19 has been shown to spread by:

- Large respiratory droplets often produced by coughing or sneezing which land on a person or surface and transferred to the mouth or nose
- Direct or indirect contact with infected secretions
- Body fluids (e.g., blood, sweat, saliva, sputum, nasal mucus, vomit, urine, or diarrhea)
- There have been some instances when airborne transmission of other coronaviruses was thought to have taken place through exposure to aerosols of respiratory secretions and sometimes faecal material 3
- **The COVID-19 may be spread by individuals that exhibit no symptoms**
- **There is no evidence that COVID-19 is spread by water, mosquitoes or food.**

**What can hotel workers do to be prepared for COVID-19?**

- Stay informed about the COVID-19 situation in your country. Updates will regularly be released by CARPHA and can be accessed at: www.CARPHA.org. Additionally, information can be found through the WHO or US CDC websites.

---

• Be cautious of rumours and false statements that are made to spread fear. There are many rumours and lies going around on social media like Facebook, YouTube, WhatsApp, and others. Always check with a reliable source to see what the latest true news updates are. Knowing the truth will help you feel calmer and more confident in your ability to keep yourself and loved ones safe.

• Reduce exposure to COVID-19 and a range of illnesses by doing the following:
  o Frequently clean hands with soap and water or using alcohol-based hand sanitizer
  o When coughing and sneezing cover your mouth and nose with flexed elbow or tissue – throw tissue away immediately and wash hands
  o Avoid close contact with anyone who has fever and cough
  o If you have fever, cough and difficulty breathing seek medical care early and share travel history or possible exposures with your health care provider
  o Stay home when you are sick to avoid the chance of infecting other people

• Know how to report guests or other staff with symptoms and exposure history compatible with COVID-19 to your supervisor and healthcare staff working at the hotel.
  o Guests or staff who have symptoms AND exposure history consistent with the disease, should call an appropriate healthcare provider. Be sure to inform them that you suspect you were exposed to COVID-19 and ask if they can handle such patients or recommend a specific provider.
  o Guests that report illness should be instructed to stay in their room and any needed items should be brought to them. Ill guests should be instructed to not greet staff at the door. Items should be placed directly inside the door so the ill person does not have to leave their room or come into contact with staff.
  o Seek guidance from your country’s Ministry of Health for which facilities in your area are prepared to handle possibly infected persons.

• Know who to contact in public health in your country, as well as first responders and healthcare providers, in case you have any questions or concerns.

• Procedures should be in place in the hotel/guesthouse for separating ill guests/staff from the rest of the hotel/guesthouse population and for minimizing the exposure of guests/staff to potentially contaminated environments while Public Health authorities are called.

• Use the Tourism and Health Information System to report visitor-based illness. [http://this.carpha.org/](http://this.carpha.org/) Using this platform allows for real time monitoring and response to possible disease outbreaks.
What if a person with COVID-19 is staying at your hotel or becomes ill at your hotel?

Not every person that sneezes, coughs, or is ill has COVID-19. There are many reasons a person may be ill, and a person can sneeze or cough without being ill. So first, remain calm. There are several actions and precautions you can take to protect yourself. Whether the ill guest reports to you or is noticed by staff the same actions should be taken.

**General Precautions**

- Maintain 1-2 metres from the sick person. Generally, this is sufficient protection to avoid being coughed on or sneezed on by a sick person.
- Ill guests should be isolated in their room. If necessary, they may be isolated in the onsite healthcare facilities. However, transporting the ill guest there could expose other guests and staff. It is better to have the guest stay in their room.
- Don’t go into the room of an ill guest or staff member unless necessary. If you do go into the room, use Personal Protective Equipment (PPE) as needed. See Appendix C for instructions on how to put on and take off PPE. A mask should be worn if you will come within 2 metres of the sick person. If you will handle items in the room, wear gloves, a mask, and a gown when available.
- Avoid contact with any bodily fluid (e.g. blood, vomitus, urine…) without proper protection from PPE.
- Use protection properly. Wearing the same mask for your whole workday is not effective and is a waste of resources. Nor will it help to wear the same pair of gloves everywhere you go.
- Clean high touch surfaces often. Doorknobs, handrails, and countertops are just a few of the surfaces that should be cleaned regularly. The coronavirus can easily be killed with normal cleaning solutions and cleaning them safely can help you feel safer.

**Cleaning Staff**

- Should a suspect case be identified in the hotel/guesthouse staff should feel safe to clean the environment as basic cleaning agents will sufficiently kill the virus. Staff should wear gloves, eye protection, a face mask, and protective gown **only during the cleaning process or when in the same room with the sick person**.
- It is important to ensure that environmental cleaning and disinfection procedures are followed consistently and correctly. Thoroughly cleaning high-touch surfaces with water and detergent and applying commonly used disinfectants (such as bleach) are effective and sufficient procedures. Medical devices and equipment, laundry, food service utensils and medical waste should be managed in accordance with safe routine procedures.
- Used linen, cloths, eating utensils, laundry and any other item in contact with a patient’s body fluids should be collected separately and disinfected in such a way as to avoid any contact with persons or contamination of the environment. Surfaces or objects contaminated with blood, other body fluids, secretions or excretions should be cleaned and disinfected as soon as possible using standard detergents/disinfectants. Manage
laundry, food service utensils, and medical waste in accordance with safe routine procedures³, ⁴.

- Bag or otherwise contain contaminated textiles and fabrics at the point of use
- Handle contaminated textiles and fabrics with minimum agitation to avoid contamination of air, surfaces, and persons
- Use leak-resistant containment for textiles and fabrics contaminated with blood or body substances
- Identify bags or containers for contaminated textiles with labels, colour coding, or other alternative means of communication as appropriate
- Don’t use laundry chutes
- If hot-water laundry cycles are used, wash with detergent in water ≥160°F (≥71°C) for ≥25 minutes

- Wear a disposable facemask, gown, and gloves when you touch or have contact with an infected person’s blood, body fluids and/or secretions, such as sweat, saliva, sputum, nasal mucus, vomit, urine, or diarrhoea.
  - Throw out disposable facemasks, gowns, and gloves after using them. Do not reuse.
  - Wash your hands immediately after removing your facemask, gown, and gloves.

**What if staff members become ill?**

Staff members may become ill from exposures at the hotel or outside of the hotel. Any staff member who exhibits symptoms while at home, should stay home. Working while sick could expose other staff members, guests, and other visitors. Staff that start to experience symptoms while at work should seek medical care on the onsite health facility if available. Staff should feel safe seeking care at the onsite health facility as they use anonymous health information systems to report illnesses. The medical staff there will give instructions on how to proceed. If there is no health facility onsite seek medical attention at an appropriate health facility. Call the facility to find out if they can receive potential COVID-19 patients or if they are referring these patients to another facility.

---
⁴ CDC 2003. Guidelines for Environmental Infection Control in Health-Care Facilities https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm
Appendix A
For Further Information visit the following websites:


Appendix B
The following infographics from CARPHA and the WHO illustrate, some important messages for travelers and anybody using and Port of Entry.
Appendix C

How to properly put on and take off Personal Protective Equipment.

**SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)**

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. **GOWN**
   - Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
   - Fasten in back of neck and waist

2. **MASK OR RESPIRATOR**
   - Secure ties or elastic bands at middle of head and neck
   - Fit flexible band to nose bridge
   - Fit snug to face and below chin
   - Fit-check respirator

3. **GOGGLES OR FACE SHIELD**
   - Place over face and eyes and adjust to fit

4. **GLOVES**
   - Extend to cover wrist of isolation gown

**USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION**

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene
HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Remove all PPE before exiting the patient room except a respirator, if worn. Remove the respirator after leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GOWN AND GLOVES
   - Gown front and sleeves and the outside of gloves are contaminated!
   - If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer.
   - Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands.
   - While removing the gown, fold or roll the gown inside-out into a bundle.
   - As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into a waste container.

2. GOGGLES OR FACE SHIELD
   - Outside of goggles or face shield are contaminated!
   - If your hands get contaminated during goggles or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer.
   - Remove goggles or face shield from the back by lifting head band and without touching the front of the goggles or face shield.
   - If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container.

3. MASK OR RESPIRATOR
   - Front of mask/respirator is contaminated — DO NOT TOUCH!
   - If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer.
   - Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front.
   - Discard in a waste container.

4. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE

PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE.
Glove Use: Putting On and Taking Off

**Putting on gloves**
If wearing gown, extend to cover wrists of gown.

**Removing gloves**
*Remember: outside of gloves are contaminated*
1. Grasp outside of glove with opposite gloved hand; peel off.
2. Hold removed glove in gloved hand.
3. Slide fingers of ungloved hand under remaining glove at wrist.

---

Three Key Factors Required for a Respirator to be Effective

**Correct**

1. The respirator must be put on correctly and worn during the exposure.
2. The respirator must fit snugly against the user’s face to ensure that there are no gaps between the user’s skin and respirator seal.

**Incorrect**

3. The respirator filter must capture more than 95% of the particles from the air that passes through it.

*If your respirator has a metal bar or molded nose cushion, it should rest over the nose and not the chin area.*