Interim Guidance for Cleaning and Disinfection at Hotels, Guest Houses and Other Tourist Accommodation during the COVID-19 Pandemic in the Caribbean

May 8, 2020

This guidance document provides information on the COVID-19 for cleaning in hotels, guest houses, and other accommodation services 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.

Background
On 11 March 2020, the Director-General of the World Health Organization (WHO) declared the outbreak of a novel coronavirus, COVID-19 as a pandemic. The majority of Caribbean countries have reported at least one confirmed case of COVID-19. CARPHA has assessed the risk of continued transmission in and to the Caribbean Region as Very High. The aim for all countries now, is to stop transmission and prevent the spread of the virus. Most countries in the region have implemented significant and effective measures in this regard. Border closures, implementation of social distancing norms, and the restriction of movement to essential personnel have helped to slow the spread of the virus. Notwithstanding, CARPHA urges continued efforts which will keep the region safe. Accommodation services like hotels and guesthouses will play an important, ongoing role in preventing further spread of the virus.

What is 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. 

How is it transmitted?
The virus can be spread by individuals from 2 days before and until 14 days after the onset of symptoms.\(^3\) 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 virus \textbf{may} be spread by individuals that exhibit no symptoms
- \textbf{There is no evidence that COVID-19 is spread by water, mosquitoes, or food.}

Addressing COVID-19 through CARPHA’s Regional Tourism and Health Program (THP)\(^4\)
CARPHA’s novel multisectoral regional THP is addressing COVID-19 through the provision of a package of COVID-19 Proactive measures for the hospitality sector to build travellers assurance to travel to the Caribbean. This includes:

- Proactive, real time monitoring of symptoms/illnesses through the implementation of the early warning and response confidential web-based system, Tourism Health Information System (THiS), in hospitality facilities \url{this.carpha.org}
- Hospitality Health, Hygiene, food safety and environmental sanitation standards:
  - Energy Management and Efficiency
  - Food Safety and Sanitation for the Tourism Industry
  - Environmental Management Systems for the Tourism Industry – Guidelines
  - Integrated Pest Management for the Tourism Industry
  - Sewage Treatment and Management for the Tourism Industry
  - Solid Waste Management for the Tourism Industry
  - Water Treatment, Management and Efficiency for the Tourism Industry
- Regional guidelines for response to illness in the hospitality sector
- Advanced food safety Training and certification
- Multisectoral tourism and health partnership for joint and coordinated implementation, capacity building, training, advocacy, public health messages, response
- Voluntary self-reporting of cases via THiS or other CARPHA COVID-19 app as indicated.
- Enhanced and relevant community engagement and Public health messaging
- Protocols in accommodations setting for response to COVID-19

How long can COVID-19 last on different surfaces?
Current research shows in laboratory conditions the COVID-19 virus could last for 24 hours on cardboard, 2 days on wood and cloth, 4 days on banknotes and glass, and up to 7 days on

\(^4\) \url{https://carpha.org/What-We-Do/THP/About-The-Program}
stainless steel and plastic.\(^5\) While the virus may be stable for some time on different surfaces, it is easily killed and removed by routine cleaning and disinfection practices.

**Definition of Cleaning Terms**

There are three levels of cleaning, each is important to ensuring the health and safety of guests and staff. The level needed for each surface depends on the material and use or function. See Appendix A for infographic on Cleaning Terms.

- **Cleaning**: Cleaning is an important first step. Cleaning removes the soil, dirt and debris from a surface or area. Cleaning involves the use of cleaning agents such as soaps or detergents, in water and applied to surfaces with cloths or paper. During the cleaning process, the soap and water acts to loosen and removes soil and some of the microorganisms like bacteria or viruses that may be in it. The cleaning process but does not necessarily kill microorganisms.

- **Sanitisation**: Sanitisation is the process of reducing the number and growth of microorganisms to an acceptable level. Sanitising is best for surfaces that are less likely to be contaminated by seriously dangerous bacteria, or those that are not suited for contact with powerful chemicals. Sanitisation is routinely used on food handling and preparation surfaces, toys that children come into close contact with (or even put into their mouths). It can be accomplished by heat (steam, hot water, or hot air) or non-toxic chemicals.

- **Disinfection**: Disinfection is the process of destroying microorganisms on a surface. Disinfection can be done through the application of high temperatures or a chemical and requires a certain amount of contact time. Disinfection kills or reduces the presence and growth of microorganisms to almost non-detectable levels. The label or material safety data sheet of a disinfectant should indicate the types of organisms that can be killed, to what level, and how the product is to be applied.

**The Cleaning Process**

The COVID-19 virus is removed by routine cleaning and easily killed by standard sanitising and disinfecting agents. Routine cleaning and disinfection techniques should be followed. Always follow the instructions on the for how to dilute and apply cleaning agents to different surfaces and maintain the appropriate disinfection concentration and contact time. See Appendix B for infographic on the Cleaning Process.

- Start by cleaning the surface of any dirt or visible soiling.
- Use a clean cloth or sponge, warm or hot water, and an appropriate soap or detergent for cleaning the surface. The water should be changed frequently to keep the temperature steady and to ensure microorganisms are discarded down a drain rather than spread from room to room. Additionally, the cloth or sponge should be changed frequently and disinfected before reuse.
- After cleaning the surface and removing and visible soil, the surface can be sanitised or disinfected. If bleach (sodium hypochlorite) is used should be diluted to 0.1% and in contact with surfaces for at least 10 minutes. Alcohol should be at least 70% and should be allowed to dry on the surface to be effective.

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\(^5\) Chin, Alex, Chan, Michael et al. Stability of SARS-CoV-2 in different environmental conditions. The Lancet Microbe. April 2020. DOI: [https://doi.org/10.1016/S2666-5247(20)30003-3](https://doi.org/10.1016/S2666-5247(20)30003-3)
What needs to be sanitised or disinfected?

All routine cleaning and sanitisation and disinfection protocols must continue to be followed. In addition, high-touch surfaces should be cleaned and disinfected regularly and as soon as they are soiled. In common use areas, a cleaning schedule should be developed that includes considerations for cleaning between every use or on a frequent schedule. See Appendix C for infographic on Cleaning High Touch Surfaces.

Some high-touch surfaces are:

- Food preparation surfaces
- Telephones
- Counter tops and tabletops
- Sinks
- Elevator buttons
- Light switches
- Handles and knobs: doors, desks, closets, drawers, refrigerators
- Windows and window coverings
- Heating or AC control panels
- Remote controls
- Faucets: bathrooms, showers, kitchens, handwashing stations
- Staff and guest Computers: keyboard, mouse, monitor, touch screen

There should be a regular cleaning schedule for floors, carpets, elevators (including buttons inside and out), trash cans, and furniture. Additionally, some cleaning supplies like disinfectant wipes and hand sanitiser can be kept where they can be accessed by staff and guests when needed.

Cleaning Fabrics and Soft Surfaces

Dirty linen, curtains, towels, laundry, and any other porous items should be collected and disinfected in such a way as to avoid any contact with persons or contamination of the environment. These items should be bagged at point of use. 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 fabrics and laundry in accordance with safe routine procedures\(^6\), \(^7\), including:

- Bag or otherwise contain 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
- 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 $\geq 160^\circ F$ ($\geq 71^\circ C$) for $\geq 25$ minutes

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\(^7\) CDC 2003. Guidelines for Environmental Infection Control in Health-Care Facilities [https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm](https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm)
Mattresses, chairs, and other porous surfaces should be cleaned and disinfected with chemicals designed for those surfaces. Always follow the manufacturer’s instructions for safe and effective use of those chemical.

**Restaurants, Dining Rooms and Bars**
Safe food handling is vital to any guest accommodation business which provides food service. COVID-19 is not a food or water borne disease; however, food is a surface which can transport the virus. As such, precautions need to be taken to ensure the safety of staff and guests. All staff and guests should practice good hand hygiene when they enter the restaurant and kitchen area. (See Appendix D for infographics on hand hygiene and cough and sneeze etiquette.) Food preparation stations should be disinfected or sanitised at the beginning of each session and frequently throughout the process. Refer to CARPHA’s guidelines for Food Safety for detailed recommendations in this area.⁸

All buffet surfaces and coffee and beverage machines must be sanitised at least after every service and more frequently if the need arises. Guests should not be allowed to serve or handle food. Any serving utensils should be changed frequently and not left resting in the food containers. Sneeze guards should be cleaned every 20 minutes, more frequently during busy times. Dishes, utensils, silverware, and glassware can be washed and disinfected in washing machines. Items not used should also be washed as they may have been handled by staff or guests. Items that cannot be put in the dishwashing machine should be cleaned with soap and water, disinfected, and then rinsed. All items should be allowed to air dry. If necessary, use a disposable paper towel.

Tables and chairs should be arranged in a way that allows at least 2 metres (6 feet) between all guests. This may require a reduction in the number of tables and guests that can be accommodated in the dining area at one time. Table clothes and napkins can be washed using the routine procedures unless they have been soiled by bodily fluids. Any items that have come in contact with bodily fluids should be double bagged by a person wearing PPE and then identified as infectious material and disposed or cleaned as appropriate.⁹

**Personal Protective Equipment**
Cleaning staff should wear appropriate Personal Protective Equipment (PPE) for the task. The label for the cleaning product will state what equipment should be used and any necessary precautions to take. As a minimum, cleaning staff should use gloves, a mask, a gown, and eye protection, when cleaning the room of a guest known or suspected to have COVID-19. (See Appendix E for instructions on how to put on and take off PPE.)

Disposable facemasks, gowns, and gloves must be bagged and safely disposed after using them. These types of PPE are for single use and should be changed when soiled and between shifts. Wash your hands immediately after removing your facemask, gown, and gloves.

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Procedures when a person with or suspected of having COVID-19 is staying at your hotel

Remain calm and assess the situation. 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. However, since you have no means of verifying what a person may or may not have, caution must be taken. There are several actions and precautions you can take to protect yourself.

- Maintain at least 2 metres distance from the sick person. Generally, this is sufficient distance to avoid being coughed on or sneezed on by a sick person.
- Use personal protective equipment.
- Ill guests should be isolated in their room. It is NOT recommended to isolate ill guests in the onsite healthcare facilities, because transporting the ill guest there could expose other guests and staff.
- Assign a designated properly trained/instructed person to care for the ill guest until medical attention can be arranged.
- Avoid unnecessary entry into the room of an ill guest or staff member. Staff who need to enter the room, must use appropriate Personal Protective Equipment (PPE) and maintain distance where possible. See Appendix D 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.
- Soiled items must be double bagged and identified as infectious material and disposed or cleaned as appropriate.
- Use personal protection properly. Wearing the same mask for the entire workday is not effective and is a waste of resources. Nor will it help to wear the same pair of gloves everywhere you go. Gloves must be changed between tasks and hands washed with soap and water before putting on a new pair of gloves.
- 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.
Appendix A

Cleaning, Sanitising, and Disinfecting
This infographic explains the differences between cleaning, sanitising, and disinfecting.

There are three levels of cleaning. Each is important to ensure the health and safety of guests and staff.

CLEANING
- Removes the dirt and debris from a surface
- Involves soaps and detergents
- Removes germs like bacteria or viruses but does not necessarily kill them

SANITISING
- Kills a high percentage (99%) of germs that are on a surface
- Can be done by heat or chemicals
- May not eliminate all the presence of bacteria, viruses and mould and does not prevent growth

DISINFECTING
- Kills a higher percentage (99.99%) of germs on a surface
- Done with a chemical and requires a certain amount of contact time
- Items that will contact food or be used in the mouth must be rinsed after disinfecting

Appendix B

The Cleaning Process
This infographic can be posted to help employees remember the cleaning process.

THE CLEANING PROCESS

1. Start by cleaning the surface of any dirt or visible soiling.
   - Use a clean cloth or sponge
   - Use warm or hot water
   - Use an appropriate soap or detergent for the surface

2. Make sure to change the water and cloth or sponge frequently.
   - Remember to disinfect the sponge or cloth before reuse

3. After cleaning the surface, or if not visibly soiled, it can be sanitised or disinfected.
   - Bleach (sodium hypochlorite) should be diluted to 0.1% and in contact with surfaces for 10 minutes
   - Alcohol used should be at least 70% and should be allowed to dry on the surface to be effective

Always follow the instructions on the cleaning agents for how to dilute and apply to different surfaces.
Appendix C

**High Touch Surfaces**

This infographic can be posted to remind employees and guests which surfaces are high touch surfaces for frequent cleaning.

**High-touch surfaces** should be cleaned as soon as they are soiled and disinfected regularly.

- Telephones and fax machines
- Light switches
- Elevator buttons
- Staff and guest computers
- Toilets, faucets, bathrooms, showers
- Remote controls

There should be a frequent cleaning schedule to clean floors, carpets, elevators, trash, and furniture. Keep cleaning supplies like wipes and hand sanitiser where they can be easily accessed by staff and guests.

www.carpha.org
The following infographics from CARPHA illustrate messages for cleaning and handwashing.
Appendix E

How to properly use Personal Protective Equipment. CARPHA recommends that gloves, gowns, and masks be removed promptly if they become soiled or potentially contaminated.
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 goggle 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 wrist 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.