

Practice Update

A Closer Look at WHO's Hotel and Accommodation Provider Guidance

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As a result of the coronavirus (COVID-19) pandemic, many jurisdictions have enacted orders imposing additional safety requirements upon hotel operations, shutting down portions of hotels, and shutting down hotels except for certain guests including medical workers and emergency first responders. On March 31, 2020, the World Health Organization (WHO) chimed in by issuing interim guidance on the “Operational considerations for COVID-19 management in the accommodation sector,” addressed to tourism accommodation establishments such as hotels, holiday and other short-term stay accommodations, and campsites. Below is a closer look at this WHO guidance, including steps accommodation providers should consider in order to better protect guests, employees, and the public from coronavirus. It is also recommended that hotel and other accommodation providers ensure that all WHO guidance complies with applicable federal, state, and local orders pertaining to your establishment.

Management Team

WHO reminds us that basic prevention measures include regular and thorough hand hygiene, social distancing, avoiding touching eyes, nose, and mouth, and good respiratory hygiene. Cleaning and disinfecting frequently touched objects and surfaces can help reduce the risk of infection, and

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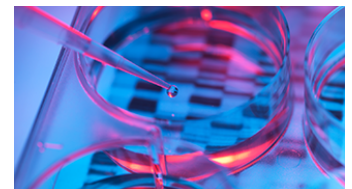
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accommodation establishments should ensure that every staff member is aware of the basic prevention measures listed above. Specific attention must be given to accommodation establishments due to the fact that they house guests in close proximity with other services including food and beverage, cleaning, wellness, and shopping, and involve frequent guest-to-guest, guest-to-staff, and staff-to-staff interaction and touching.

WHO suggests that the accommodation establishment's management team form an action plan in consultation with local health authorities and any applicable industry associations. The action plan should specifically aim to prevent cases, effectively manage cases, and mitigate impacts among guests and staff. The plan should be updated when necessary because of new guidance, procedures, or regulations issued by the relevant authorities. The management team must make sufficient resources (both human and economic) available to ensure that the plan can be implemented rapidly and effectively.

The management team must monitor the action plan for compliance, and then identify and correct gaps, and adapt the plan to practical experience. WHO recommends that you keep a detailed logbook of the actions and measures carried out pursuant to the action plan. The plan should include pre-defined communications to provide to guests and workers, potentially including short documents or informative posters amplifying the key messages.

Reception and Concierge

WHO suggest that accommodation providers ensure that reception and concierge employees are informed about the action plan developed and implemented by the management team, so that they are able to inform guests who inquire about the establishment's policy in terms of the preventive measures established or other services that guests may require. Reception and concierge staff should not be part of an at-risk group such as the elderly or

those with underlying health conditions, if possible, and these employees must take all necessary precautions, including physical distancing.

Ensure that the front desk and concierge possess official, up-to-date information about travel to and from countries or areas where COVID-19 is spreading. These employees should also have the telephone numbers of health authorities and hospitals in the event that a guest may be ill. Also have a medical kit readily available that includes, among other items, disinfectant, wipes for surface cleaning, face/eye masks, and gloves. Front desk staff should frequently remind guests of social distancing, hand hygiene procedures, and respiratory etiquette. WHO also recommends that your front desk and concierge employees use reasonable means to monitor guests or other employees for visible symptoms.

Technical and Maintenance Services

WHO recommends that maintenance workers maintain the concentration of disinfectant in water for consumption and in pools or spas, preferably at the upper limits of the range. These employees should also ensure the proper temperature and functioning of dishwasher and laundry equipment and supplies, and the proper functioning of ventilation, air exchange, and dehumidification equipment. Maintenance staff must also ensure the constant supply and functioning of soap and hand sanitizer dispensers and other similar devices. Part of the management team's action plan should also include installing additional sanitizing stations.

Restaurants, Breakfast and Dining Rooms, and Bars

WHO recommends that food and beverage employees perform personal hand hygiene as strictly and frequently as possible. To the extent any restaurants, dining rooms, or bars remain able to serve customers in-house, these establishments should remind guests, and install signage reminding

guests and employees, to follow these steps as well. All buffets and soda machines should be cleaned more frequently, and establishments should consider not permitting guests to touch these areas at all. WHO recommends a maximum of four people for a 10 square meter table, and suggests that tables be arranged such that the distance from the back of one chair to the back of another chair shall be more than 1 meter apart. Ensure that these guidelines also comply with any state or local social distancing guidelines. Another consideration is suspending in-restaurant service altogether, and transitioning to grab-and-go eateries and room service. Review all applicable federal, state, and local orders, as some of these orders have already prohibited in-restaurant dining, even at hotels.

Recreational Areas for Children

WHO recommends that accommodation providers consider closing recreational areas for children based on the local context, including the number of children and instruction from federal, state, and local health authorities. If these areas remain open, the operator should perform special cleaning and disinfection after every use.

Cleaning and Housekeeping

WHO recommends that housekeeping and hygiene service be enhanced, even absent a specific case of coronavirus. Special attention should be provided to cleaning and disinfection in common areas such as restrooms, halls, corridors, desks, and elevators, as well as objects that are frequently touched such as handles, elevator buttons, handrails, switches, and doorknobs. The management team's action plan should include a specific cleaning and disinfecting procedure when there are sick guests or employees at the establishment, or guests are diagnosed with COVID-19 within a few days after leaving the establishment. WHO provides a detailed recommendation for cleaning and personal protective equipment for rooms and areas specifically exposed to coronavirus. Housekeeping

should also be specifically trained on the use of personal protective equipment.

Similar to front desk staff, WHO recommends that housekeeping employees use reasonable means to monitor guests or other employees for visible symptoms of COVID-19. WHO also suggests that accommodation providers suspend any programs where guests can request to forego housekeeping to maximize the health and safety of hotel staff and guests.

Handling COVID-19 Cases in Hotels and Tourism Accommodation Establishments

If a guest or employee develops symptoms or is diagnosed with coronavirus, efforts should immediately be made to minimize contact of the ill person with all guests and staff of the establishment. Specifically follow the action plan if any diagnosis occurs or the symptoms match those of COVID-19. Request that the ill person wear a mask and practice respiratory and hand hygiene, and designate a bathroom for use solely by that guest or employee. In some states or cities, all individuals are required to wear masks when in public. Be sure to review all applicable federal, state, and local orders, and consult with counsel if necessary.

If a staff member develops respiratory symptoms, immediately isolate the individual and advise that worker to stay home. If a guest develops respiratory symptoms, continued stay is not advised. Work with local health officials to develop a plan to relocate the guest. The guests should be isolated in a room until the intervention of local health authorities, and no visitors should be permitted to enter the room occupied by the affected guest. Symptomatic guests should leave the hotel according to instructions from the management of the establishment and local health authorities. WHO notes that management of the accommodation establishment likely has no authority to force sick guests to temporarily remain

in their room or to prevent them from receiving visits from other guests.

Immediately after a guest or worker is suspected of being infected with coronavirus, the accommodation establishment should begin identifying those who may have been in contact with the guest or worker. WHO defines a contact as a person who experienced any one of the following exposures during the two days before and the 14 days after the onset of symptoms of a probable or confirmed case: (1) Face-to-face contact with a probable or confirmed case within one meter and for more than 15 minutes; (2) Direct physical contact with a probable or confirmed case; (3) Direct care for a patient with probable or confirmed COVID-19 disease without using proper personal protective equipment; or (4) Other situations as indicated by local risk assessments.

Specifically in the context of an accommodation establishment, a contact could be considered as guest companions or individuals providing care who had close contact with the suspected case, and the staff members designated to look after the ill person, and other staff members who may have been in close contact with the ill person or the facilities used. WHO recommends that all contacts of COVID-19 patients be quarantined for 14 days from the last time they were exposed to the patient. Non-affected guests (i.e., no contact suspected) should nonetheless be provided with information and asked to self-monitor for COVID-19 symptoms for 14 days from the date of departure of the confirmed case from the establishment.

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